



# Hôpital ophtalmique Jules-Gonin

Service universitaire d'ophtalmologie  
Fondation Asile des aveugles

Avenue de France 15 • case postale 133  
CH-1000 Lausanne 7

Au service de  
votre santé visuelle

Pôle ONCO  
Oncologie oculaire pédiatrique  
Responsable  
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## TO WHOM IT MAY CONCERN

N/réf. MU/cta

Lausanne, 4<sup>th</sup> November 2014

**Kuznetsov Artem, d.o.b. 18.12.2011**

## CERTIFICATE

We herewith confirm that parents of the child **Kuznetsov Artem, do.b.18.12.2011**, have requested a medical care for their son in our **specialised centre**.

The child is affected from retinoblastoma, a serious eye disease, which needs close follow-up and treatment in our specialised centre, the Jules-Gonin Eye hospital and at CHUV (Central University Hospital) in Lausanne, Switzerland.

We certify that treatment for retinoblastoma requires specific technical apparatus and expertise of specialized medical staff that is only available at the Jules-Gonin Eye hospital.

In order for the child to be admitted at our hospital, an initial deposit of 20'000 CHF (Swiss francs) is requested on the hospital account. Details are as follows:

### **UBS SA**

Case postale

CH - 1002 Lausanne

**Beneficiary:** Fondation Asile des aveugles

**Account no:** 243-G0206683.0

**Swiftcode:** UBSWCHZH80A

**IBAN:** CH51 0024 3243 G020 6683 0

**Ref:** Pls mention full name + date of birth + country of origin of the child when making the bank transfer.

This deposit is intended to cover the treatments which have been planned based on medical documents sent by the parents, namely:

1. 1<sup>st</sup> examination under general anaesthesia + 1<sup>st</sup> intra-vitreous injection of Melphalan
2. Examination under general anaesthesia + 2<sup>nd</sup> intra-vitreous injection of Melphalan
3. Cataract intervention

**If supplementary examinations such as MRI 3Tesla is requested, a deposit of 4'000 CHF will be requested for the CHUV hospital (Central University hospital) as well, whose bank details are as follows:**

### **BANQUE CANTONALE VAUDOISE**

CH – 1003 Lausanne

**Beneficiary:** Centre Hospitalier Universitaire Vaudois – CHUV

**Account:** 328 707 0

**Clearing:** 767

**Swiftcode:** BCVLCH2LXXX

**IBAN:** CH65 0076 7000 E032 8707 0

**Ref:** Pls mention full name + date of birth + country of origin of the child when making the bank transfer.

**After this last medical assessment, if further treatments have to be made to treat retinoblastoma disease either at our clinic or at CHUV additional deposits will be requested, namely:**

- 20'000 CHF for the Jules-Gonin Eye hospital
- 30'000 CHF for the CHUV

**Please be aware that these deposits will only cover approximately the first three months of treatments** and that conservative therapy can easily reach 50'000.- to 100'000.- CHF within the first year of treatment. Examinations and treatments will be necessary for an undetermined period, but at least once a month. Additional deposits will then be required.

Receipt of bank transfers must be sent to us either by fax 0041/21 626 85 44 or by email [claudia.tavares@fa2.ch](mailto:claudia.tavares@fa2.ch).

Presence of the parents is compulsory.

Dr F. Munier, professeur associé  
Médecin adjoint

