

Name: Jane Doe Date: December 14, 2004

Address: 1234 American Way

Vernon Hills, IL 60061 Quote #: MR20050921DOE

USA

Phone: (847)555-1000 **Travel Period:** 01/18/2005 - 02/02/2005

Email: medmail@medretreat.com **Destination:** Penang, Malaysia

Procedure 1: Knee Replacement \$ 6,435.00

Doctor: Lou Kean Keong

Hospital: Penang Adventist

Procedure 2: Neck Lift \$ 1,202.00

Doctor: Danny Oh Siew Leng

Hospital: Penang Adventist

Procedure 3: Upper & Lower Eyelids \$ 1,305.00

Doctor: Danny Oh Siew Leng

Hospital: Penang Adventist

Procedure 4: Liposuction Inner Thighs \$858.00

Doctor: Danny Oh Siew Leng

Hospital: Penang Adventist

Procedure 5: Liposuction Upper Abdomen \$ 858.00

Doctor: Danny Oh Siew Leng

Hospital: Penang Adventist

Procedure Totals:

Total Procedure Price

Due to the diverse nature of your procedures, prices are based on an average of the last ten comparable treatments. Final costs will be confirmed after the doctor has consulted with you in person. Please be aware that the prices quoted could fluctuate up or down by 5%. However, in most situations, the prices quoted have remained firm.

\$ 10,658.00

Quotation valid for 60 days

Hotel/Resort:	Days	Cost/Night	Total Price	Hotel Deposit
Eastern & Oriental Hotel	7	\$ 108.00	\$ 756.00	\$ 70.00
Only a \$10.00 deposit per day is due at the time of booking. The hotel will charge the balance to your credit card at check-out.				

Miscellaneous Services:

Price

Wire Transfer Fees to Destination Partners

\$ 75.00

Management Fees:	Price
U.S. Program Manager - MedRetreat	Included
Destination Program Manager - MedRetreat	\$ 200.00

Grand Total

Thank you for allowing MedRetreat the opportunity to provide a more memorable, pleasurable Medical Retreat experience!

Price

\$ 11,003.00

Procedure Notes:

Procedure 1:

Knee Replacement

The Operation

You will have a general or spinal anesthetic. A cut is made about 8 inches (19.2 cm) long down the front of your knee. The damaged surfaces of the lower end of your thigh bone and the upper end of your shin bone are removed. These are replaced with an artificial joint. The artificial knee is made from metal and plastic. There are many different types of artificial knees. Some are held in with special bone cement, some are not. The surgeon will explain the type he intends to use, and the reasons for his choice. The skin is then closed up with stitches or clips. You will be in hospital for 7 to 10 days following your operation. You may go home when you can walk safely with crutches or sticks. The main aim of the operation is to stop the pain in your knee.

After your operation, you should be able to bend your knee from fully straight to a right angle. As a result you will be able to walk further and climb stairs more easily. If you have become knock-kneed as a result of your arthritis, the surgeon will try to straighten your leg with the knee replacement. You should not undergo knee replacement if you have angina (chest pains) or shortness of breath that limit your walking more than your knee pain. You should not have a knee replacement if you have a urinary infection. This may result in infection of your new knee. Your urine will be tested. If it is infected, you will be given antibiotics before your operation. The same applies for any other infection, it has to be cleared before you have your operation. You should not have a knee replacement if you are a man with prostate problems. If you have poor urinary flow, it is better to have this investigated and treated before your knee is replaced.

Any Alternatives

If you leave things as they are, the knee will slowly get worse. Steroid injections into your knee will not help the pain in the long term. If the pain in your knee interferes with your life and the X-rays show that the joint is severely damaged, then you should have your knee replaced.

Before the operation

Stop smoking and get your weight down if you are overweight. (See Healthy Living). If you know that you have problems with your blood pressure, your heart, or your lungs, ask your family doctor to check that these are under control. Check the hospital's advice about taking the Pill or hormone replacement therapy (HRT). Check you have a relative or friend who can come with you to the hospital, take you home, and look after you for the first week after the operation.

Bring all your tablets and medicines with you to the hospital. On the ward, you may be checked for past illnesses and may have special tests; to make sure that you are ready and that you can have the operation as safely as possible. You will be asked to fill in an operation consent form. Many hospitals now run special preadmission clinics, where you visit for an hour or two, a week or so before the operation for these checks.

After - In Hospital

Your knee will be wrapped in a bulky bandage. There may be a fine plastic drainage tube running from the wound. This is to drain any residual blood from the operation. You may have a knee support on your leg to keep it still when you are not doing your exercises. The wound may be painful. You will be given injections or tablets to control this. Ask for more if the pain gets worse. A general anesthetic will make you slow, clumsy and forgetful for about 24 hours. The nurses will help you with everything you need until you are able to do things for yourself. Do not make important decisions during this time.

The physiotherapist will teach you important exercises and you will learn to walk using walking aids. The occupational therapist will show you how to do many daily tasks, such as dressing and washing. The physiotherapist may arrange for you to have therapy as an outpatient. The discomfort of the operation can make it difficult to pass urine and empty the bladder. It is important that your bladder does not seize up completely. If you cannot get the urine flowing properly after six hours, contact the nurses or your doctor. The wound will have a simple adhesive dressing over it. The nurses will pull out your wound drain a day or two after your operation. This does not hurt. Your stitches will be taken out 10 to 12 days after the operation. Wash around the dressing for the first 10 days. You can wash the wound area as soon as the dressing has been removed. Soap and warm tap water are entirely adequate. Salted water is not necessary. You can shower or take a bath once the wound has healed. You will be given an appointment to visit the orthopedic outpatient department about six weeks after your operation. The nurses will advise about sick notes, certificates etc.

After - At Home

When you go home, you will be able to move around the house and manage stairs. It is very important that you continue the exercises shown to you. You will not be able to go shopping for the first few weeks

after you go home. Please make arrangements for friends or family to shop for you. Your knee will continue to improve for at least six months. Some people say that it takes this long for your new knee to feel part of you. You must not drive for two months after you leave hospital. You will not be able to perform an emergency stop as quickly as normal before then. How soon you can return to work depends on your job. If you can get to work without driving yourself or by using public transport you may be able to return to work six weeks after your operation. You should not do manual work after a total knee replacement.

Possible Complications

As with any operation under general anesthetic there is a very small risk of complications related to your heart or your lungs. The tests that you will have before the operation will make sure that you can have the operation in the safest possible way and will bring the risk for such complications very close to zero.

Complications occur in about 5 out of 100 operations. Wound infection sometimes happens. You will be given antibiotics to try and prevent this. You can develop a blood clot in the veins of your calf (deep vein thrombosis -DVT). A combination of medicine (injection of blood thinners), special compression stockings and foot pumps will be used to try and prevent this.

Very rarely, more serious complications can occur during the operation such as further damage to the knee joint or damage to the nerves and blood vessels in or around the area of the operation and this may require another operation to deal with the problem.

Artificial joints last for many years. However they can become loose and painful after years of use. A further operation may then be necessary.

General Advice

The operation is a neither very simple nor too difficult but somewhere in between. Overall will be much better off with a new knee joint. We hope these notes will help you through your operation. They are a general guide. They do not cover everything. Also, all hospitals and surgeons vary a little. If you have any queries or problems, please ask the doctors or nurses.

Procedure 2:

Neck Lift

A neck lift is actually a set of procedures used to enhance the appearance of your neck:

- Cervicoplasty is the procedure used to remove excess skin
- **Platysmaplasty** removes or alters neck muscles

Your surgeon also can perform neck liposuction, which removes excess fat. In some cases, Botox injections may be the answer to your problems if you have fullness or "bands."

How a Neck Lift Is Done?

Typically, the procedure will last two to three hours. Of course, if you are having a neck lift in conjunction with liposuction, facelift, brow lift, or other surgeries, the time will vary accordingly. Your exact procedure will depend on your desired results and your own personal circumstances. In order to undergo a neck lift, you must be in good general health, both physically and mentally.

What do you dislike about your neck? Be honest with yourself! You're putting a lot of time and effort into researching the surgery, so make sure you get the results you want. You also should write down your thoughts on what you'd like to correct and have that with you at the time of your pre-operative consultation.

Here are some of the most common concerns:

- Turkev wattle neck
- Excess fat
- Too much skin

Turkey Wattle -- Weakened or Loose Neck Muscles

If you have weakened or loose neck muscles, this may cause the "turkey wattle" or appearance of neck "bands."

To correct this, your surgeon may recommend platysmaplasty surgery. The surgeon makes incisions under your chin and/or behind your ears to access the platysma (neck muscle) and manipulate it accordingly. Sometimes, that may even mean removing some muscle. Your surgeon may also use permanent sutures to hold the tissue in place.

There are new less invasive procedures, where your surgeon may be able to make smaller incisions and use an endoscope (small camera attached to a thin tube) to complete your surgery. Make sure you ask your surgeon for all your options during your consultation.

You and your surgeon will discuss what type of anesthesia to use, depending on your level of comfort. If you want to remain asleep during the procedure, you should request general anesthesia. Otherwise, your surgeon can use local anesthesia with sedation. It's up to you, however, to make that determination.

Instead of surgery or in addition to it, Botox injections can relax parts of the platysma that are responsible for the "band" appearance or look of fullness. The injections are completed on an outpatient basis and typically can be completed within 15 minutes.

Excess Fat

During liposuction, your surgeon will make a small incision below the chin and remove the excess fat. If you are undergoing multiple procedures during your neck lift, it is very common for plastic surgeons to begin with liposuction. If this is the only procedure you'll need, you should plan to spend up to an hour undergoing the operation.

You will be able to determine this with your doctor during your pre-operative consultation. Your incisions will be stitched and bandaged. It's very important to follow your doctor's instructions on properly caring for the stitches and bandage in the days following surgery.

Too Much Skin?

Just like the platysmaplasty, your surgeon will make similar incisions for a cervicoplasty, trimming parts of the skin and lifting it into place.

It will be secured with tissue glue or stitches. The cervicoplasty can be completed in about two to four hours, depending on the complexity of your procedure. Again, your anesthesia will depend on your own personal comfort level.

Your surgeon will fit you with a compression bandage that you will have to wear for at least one week, unless instructed otherwise. It's important to follow his or her instructions to ensure proper recovery.

How Should I Prepare for a Neck Lift?

During your consultation, your surgeon will instruct you on what medications to avoid prior to your surgery. Certain medications and vitamins thin your blood and can cause increased bleeding.

If you are a smoker, you will need to quit at least two weeks before the surgery and two weeks after. You cannot just plan to cut down. You must not smoke for this time period to ensure proper healing.

Also, this is no time for a diet: make sure that you eat properly because this will help your body heal.

Make sure you wear loose, comfortable clothing on the day of surgery. You should especially plan to wear a button-down blouse or shirt that does not have to be pulled over your neck or head.

You should plan to take at least one week off from work to recover. However, your doctor can determine this based on your personal situation.

If you are having platysmaplasty, cervicoplasty, or a combination of any of the procedures we've discussed here, you should plan on having a recovery area set up before you undergo surgery.

Your Recovery Area Should Include:

- Ice packs
- Gauze and towels
- Thermometer
- Supply of comfortable, loose clothing (preferably button down shirts or blouses that do not have to be pulled over your neck and head)
- Petroleum jelly and antibacterial ointment for incision sites
- Telephone within reaching distance of where you'll be lying or sitting most of the time
- Supply of pillows which will allow you to keep your head in a comfortable position
- Someone who can stay with you at least the first 24 hours after surgery

Recovery

Recovery takes time and it's important that you're patient with the process. Most people can return to work in 10-14 days.

If you participate in other sports or are physically active, you will have to wait at least three weeks, if not longer, to resume those activities. Don't rush! It's not worth it. You've put a lot of time and energy into making this happen, so make it worthwhile.

What Are the Complications and Side Effects of Neck Lift Surgery?

You will have swelling and bruising that can last for several days. You may feel tightness or tingling, and different sensations including burning or pulling. You also will experience numbness. These are all very normal in the first few weeks following surgery and should not be cause for concern.

As with any surgery, you run the risk of infection. Please keep a watchful eye on your temperature. At the first sign of a fever, contact your doctor. If you have unusual discharge from the incision site, such as pus, contact your doctor immediately.

Although it's very rare, you could have an allergic reaction to the anesthesia. That's why it's very important to disclose any drug allergies to your doctor in a pre-operative consultation.

Procedure 3:

Eyelid Surgery (Blepharoplasty)

This procedure, called blepharoplasty is a surgical procedure that reduces bagginess from lower eyelids and removes excess skin from the upper eyelids.

The procedure involves the removal of excess skin, muscle and underlying fatty tissue. While it is primarily a cosmetic procedure, blepharoplasty is also an effective method for improving sight in older patients whose sagging upper eyelids obstruct their vision.

Blepharoplasty will not eliminate dark circles under the eyes, remove crow's feet or other facial wrinkles. It is often performed in conjunction with other facial surgery procedures such as laser resurfacing or forehead lifts.

Who Is a Good Candidate For Eyelid Surgery?

The best candidates for blepharoplasty are individuals with good physical and mental health who have realistic expectations. Most are 35 years or older, but if baggy eyelids or droopy eyelids are hereditary, you may decide to have the surgery at a younger age.

Eyelid surgery can enhance your appearance and help build your confidence. However, it may not result in your ideal look or cause people to treat you any differently. Blepharoplasty will not alter your facial structure. It is important to know your face well before you decide to have surgery. Think carefully about your expectations and discuss them with your surgeon.

Are the Changes Made By Eyelid Surgery Permanent?

Blepharoplasty will not stop your eyes from aging. However, the procedure is usually very long lasting. Upper eyelid surgery can last anywhere from five to seven years to an entire lifetime, while lower eyelid surgery rarely needs to be done more than once.

If your lids are once again sagging, the proper procedure is oftentimes a forehead lift, not another blepharoplasty.

How Should I Prepare for Eyelid Surgery?

Expect and plan to stay away from work and limit your activities for several days after surgery to give your eyelids a chance to heal. Some patients experience dry eyes after surgery, but the condition rarely lasts more than two weeks. If you have dry eyes lasting more than two weeks, contact your doctor.

After the surgery, you should have the following items readily accessible:

- Ice cubes
- Ice pack or you can use freezer bags filled with ice, frozen corn or peas.
- Small gauze pads
- Bowl (for water)
- Eye drops or artificial tears (ask your doctor to recommend the proper type to meet your particular needs)
- Clean washcloths and towels
- Over-the-counter painkillers (which your doctor can recommend)

How Is the Procedure Performed?

Blepharoplasty usually takes about two hours if both upper and lower eyelids are done together. Your doctor will most likely use local anesthesia (a painkiller injected around the eye) with oral sedation.

If you are having the procedure completed at a hospital or surgical center, you will most likely receive intravenous sedation.

If you're having all four eyelids done, the surgeon will probably work on the upper lids first.

The surgeon will usually make incisions following the natural lines of your eyelids. Through these incisions, he or she will separate the skin from the underlying tissue and remove the excess fat, skin and muscle. The incisions are then closed with very small sutures.

There will be sutures in both upper lids that will remain for three to six days. The lower lids may or may not require sutures depending upon the technique used.

Surgery on the lower eyelids may be done using one of several techniques. The transconjunctival technique is performed by making an incision inside the eyelid. No incision is visible following surgery. Through the incision, fat may be removed to correct baggy lower eyelids. Then, fine lines in the skin can be softened using a CO_2 or erbium laser.

Another method, called the transcutaneous technique requires an incision along the eyelash margin. Through the incision, excess skin, loose muscle and fat can be removed. The incision line fades after a short amount of time.

After either of these procedures, laser resurfacing may be recommended.

What Should I Expect During Recovery?

There will be stitches in both lids that will remain for up to about a week. It is common for swelling, and occasionally, bruising to occur, but within one to two weeks the eyelids will look normal.

What Are the Possible Complications From a Blepharoplasty?

As with any surgical procedure, there is some degree of risk. However rare they may be, it is important to be aware of potential complications before you decide to have the surgery.

Complications and unwanted results from blepharoplasty are rare, but sometimes they do occur. Most patients are very satisfied with the blepharoplasty procedure.

Problems can include:

- Bleeding
- Infection
- Dry eyes
- Abnormal discoloration of the skin of the eyelids
- Evelid skin that folds in or out abnormally
- An inability to fully close the eyes
- A pulled down lower lid lash line or a possible loss of vision

If you experience any of these complications, contact your doctor as soon as possible.

Procedure 4:

Liposuction

Liposuction is an option to remove small bulges that won't budge and to improve your body's shape. The areas most commonly treated include the hips, abdomen, thighs and buttocks and face. Liposuction does not remove cellulite, only fat.

Who Is a Good Candidate For Liposuction?

A good candidate for liposuction should have realistic expectations about the results of this procedure as well as these basic qualities:

- Average or only slightly above-average weight
- Firm, elastic skin
- In good overall health
- Concentrated pockets of fat that do not respond well to diet and exercise

Patients with poor skin quality (cellulite) are not good candidates for liposuction because they may develop skin irregularities due to under- or over-correction of localized fat deposits. Age is generally not a major consideration when discussing liposuction; however, older patients often have less elasticity in their

skin and thus may not achieve the same benefits of liposuction that a younger patient with tighter skin might achieve.

What Do I Need To Know Before Undergoing Liposuction?

The first step before undergoing liposuction will be to arrange a telephone consultation with your surgeon. MedRetreat will facilitate this call. During the consultation, your surgeon will discuss which options are best for you, your skin type, the effectiveness and safety of the procedure, and what your expectations should be. Do not hesitate to ask the surgeon any questions you may have. Now is not the time to be shy.

Once you have decided to undergo liposuction, your surgeon will give you any instructions you will need to prepare for the surgery. This may include dietary guidelines or alcohol restrictions or the taking or avoiding of certain vitamins. Be sure to tell your surgeon of any allergies you have as well as any and all medications you are taking. This includes over-the-counter and prescription medications as well as herbal supplements.

How Is the Liposuction Procedure Done?

Depending on the type of liposuction you are undergoing, the procedure may be performed as an outpatient procedure at the doctor's office or surgery center, or if large amounts of fat are being removed, the procedure will be done in a hospital and may require an overnight stay.

Before the procedure begins you will be given an anesthetic. Again, depending on the degree of fat being removed and the type of liposuction being performed, anesthesia varies. It may only be locally applied or you may require a general application in which case the surgery will be done while you are sleeping.

Once the anesthesia has taken effect, the liposuction procedure is performed using a suction device attached to a small, stainless steel instrument called a cannula. Through small incisions, the cannula is inserted into fatty areas between skin and muscle where it removes excess fat either using a suction pump or a large syringe. This results in a smoother, improved body contour. The length of the procedure will vary with the amount of fat needing removal.

Types of Liposuction

Though the basics of liposuction described above remain the same, there are a couple of different techniques that can be used during liposuction. These include:

- **Tumescent liposuction**. During this technique, the surgeon will inject a solution into your fatty areas before the fat is removed. It is made up of a saline solution, a mild painkiller and epinephrine, a drug that contracts your blood vessels. The solution not only helps the surgeon remove the fat more easily but it helps reduce blood loss and provides pain relief during and after surgery.
- **Ultrasound-assisted liposuction**. During ultrasound-assisted liposuction, ultrasonic energy is used to liquefy the fat, after which it is removed from the body.

How Long Does Recovery After Liposuction Last?

Under most circumstances, when liposuction is an outpatient procedure, recovery is usually quick. Most people can return to work within a few days and to normal activities within about two weeks. You should expect bruising, swelling and soreness for a least a few weeks. However, every person's outcome will vary based on factors such as volume of fat cells removed and area of removal. Your doctor will discuss what results you can expect to achieve and how to best maintain your new body shape.

Are the Results of Liposuction Permanent?

The fat cells are removed permanently, so if you gain weight after the procedure, it usually will not concentrate in the area that was treated. However, it is important to note that liposuction will not prevent you from regaining weight. To keep your new shape and new weight after liposuction, you must follow a proper diet and exercise plan.

What Are the Risks of Liposuction?

All surgical procedures involve some risk. However, liposuction has a good safety record and the risks associated with the procedure are minimized when performed by a specially trained, board-certified plastic surgeon.

Although rare, risks include infection and skin discoloration. As with all surgery, common sense is important. The risk of medical problems can be minimized by avoiding extremely long procedures or excessive removal of fat.

Procedure 5:

Same as procedure 4

Doctor's Bio:

Orthopedic

Dr. Lou Kean Keong

Specialty: Consultant Orthopedic & Trauma Surgeon

Credential: MBBS (Delhi), M.S. ORTHO (Mal), AM (M'sia)

Language: English, Malay, Hokkien and Mandarin

Dr Lou is one of our Consultant Orthopedic & Trauma Surgeons. He completed his primary and secondary schooling in Penang after which he took up medical studies at Delhi University in India. Following three years of experience as a Medical Officer in Orthopedic Surgery, he took up training for a Masters in Orthopedics at University Hospital, Kuala Lumpur.

Dr Lou is proficient in the management of diabetic complications of the extremities, pediatric orthopedics, and backache. He is also experienced in the management of trauma surgery, spine surgery and joint replacement.

He is well read ad has had experience in public talks, presentations and training seminars. Dr Lou is keenly interested in the prevention and management of osteoporosis.

Dr Lou is fluent in English, Malay, Hokkien and Mandarin. This fluency allows for better patient rapport, which is essential to his practice.

Dr Lou is married and has two lovely daughters. In his spare time he surfs the net for new information in his area of expertise. He enjoys exploring the uses of his computer and appreciates classical music.

Cosmetic

Dr. Danny Oh Siew Leng

Presently, he is a Fellow of the American College of Surgeons and a Member of the American Society of Plastic Surgeons and also a recipient of the American Board of Plastic Surgery certification in 1985, and has been in the practice of plastic surgery for the last twenty years.

From 1983 to 1990, he was one of the busiest surgeons in Penang performing all types of surgery including cosmetic and reconstructive surgery. He performed the first microsurgical free flaps in Malaysia in 1985. Dr Danny was born in Penang on April 14, 1946. He lived in the USA a total of 27 years and

worked there as a plastic surgeon from 1991 to May 2003 when he returned to his favorite city of Penang, Malaysia.

Most of the cosmetic surgery can be done in his new Plastic Surgery Clinic located at the back of the fully functional Penang Adventist Hospital so that patients can have maximum privacy. The surgeries there will be done under local anesthesia and IV sedation so that the patients can go to recuperate at their chosen 5 star hotel right away after surgery. For most surgeries, MedRetreat arranges a 1 or 2 night stay at the hospital for optimal observation.

Dr. Danny is fluent in English and Hokkien and is able to communicate in Bahasa Malaysia also.

QUALIFICATIONS

Premedical Education:

Walla Walla College, Walla Walla, Washington August 1968 to June 1971 School of Religion, Degree: BA

Medical Education:

Loma Linda University, Loma Linda, California September 1971 to September 1974 Degree: MD, California School of Medicine.

Post Graduate Training:

Nov 1974-June 1977: Florida Hospital: Orlando, Florida, Family Medicine.

July 1977-June 1981: Wright State University Dept of Surgery Integrated Residency, Dayton, Ohio.

July 1981-June 1983: Kettering Medical Center/Wright State University Affiliated Plastic Surgery

Residency.

Honors:

Second prize in 1978: Ohio Surgical Resident's Annual Contests

Board Certificates:

Family Practice - 1978 Plastic Surgery - 1985

Previous Experience:

1983-1990: As consultant general and plastic surgeon in Penang.

1991-1994: Associate Program Director, Plastic Surgery Residency for Kettering Medical Center, Dayton,

Ohio

1994-2003: Private Plastic Surgery practice in Dayton, Ohio, USA.

Presentations:

Paper on Clinical Experience in the use of Tissue Expanders at the 1987 Malaysian Association of Surgeons.

Professional Organizations:

American College of Surgeons American Society of Plastic Surgeons

Hospital Information:

Penang Adventist Hospital

The Penang Adventist Hospital is one of the leading healthcare facilities in Southeast Asia. This modern hospital is a state-of-the-art facility and is at par with the top hospitals in the United States and Europe in terms of technology, standards, procedures, and professional healthcare providers.

They are a private medical institution that is part of an international network of more than 500 hospitals and healthcare facilities operated by the Adventist Health System. This network includes the world famous Loma Linda University and Medical Center in California, U.S.A. They are the first private hospital in Northern Malaysia to perform Micro-vascular, Coronary Bypass, Laser Heart Surgery (TMR) and openheart surgery.

The Hospital at a Glance:

- Fully functioning 300 bed tertiary care facility
- In final stage of receiving Accreditation by JACHO (American accreditation organization)
- Has been treating international patients for decades
- The CEO is American with over 30 years of professional healthcare management
- Is part of the Adventist Hospital Group in the US
- General Electric is a corporate sponsor
- The nurse-to-patient ratio is 1 to 1
- Leading cardiac surgery center in Asia and only GE technology test site in Region
- 100% of the staff is fluent in English no interpretation or translation required
- Majority of the doctors educated, trained, and board certified in US, Europe and Australia.

Special Notes:

A private telephone consultation is encouraged.

Our services:

MedRetreat offers the most unique set of services in medical tourism that are not currently provided by any other company. We have a track record of hundreds of satisfied clients and we maintain this success rate through the services we provide. Never are you alone, from choosing the right procedure, to sitting in the waiting room before your procedure. MedRetreat is constantly with you on your journey as a Medical Tourist.

Below, is an overview of your Program Managers' responsibilities:

The U.S. Program Manager

This Person is here in the U.S. and is responsible for managing your Med Retreat from the moment you inquire until you are back in the U.S. This means, you can call this person at any time and get answers to your questions. Your medical and vacation program will be facilitated by this person and they will advise you on all things you need to take into account to make the right decision.

The Destination Program Manager (DPM)

This person is responsible from the moment you land at your destination until you are safely flying home. During your medical retreat, this person will be many things to you; your driver, your "friend away from home", your contact point and your advisor. All MedRetreat Destination Program Managers have dealt with hundreds of medical tourists over the last 3 years. They all hold a university degree, have been trained and informed on pre and post surgery care by the surgeons and nursing staff. They hold first aid diplomas, lived in their destination for several years, know the destination well and are familiar with the unique needs of medical tourists. In fact, some DPM's are even trained physicians.

DPM Responsibilities:

- Meet and greet arriving customer at the airport
- Private transportation to the hotel
- Pre-arrange hotel check-in
- Private transportation to-and-from doctor consultation
- Private transportation to-and-from medical procedure
- Interpretation assistance at hospital or clinic if needed
- Provide communication assistance, such as cell phone or 24 hour contact number
- Check on recuperating patient daily once procedure is performed
- Provide emotional support if necessary during visit
- Assist with local tour and excursion arrangements
- Provide information about local dining, shopping, and pampering facilities
- Provide information about local culture and customs of destination
- Assure that customer is comfortable and content at all times
- Deliver customer to airport for departure
- Assist customer with baggage check-in upon departure
- Arrange for Airport medical assistance upon departure if necessary

These two people, plus the rest of the MedRetreat team, will ensure that you are having a safe and pleasant experience.

The medical part of our proposal includes:

- Pre consultation with the surgeon at your selected destination via telephone or email, if you so
 desire
- Medical intake consultation and evaluation with your surgeon at your destination before treatment
- The treatment; surgery charges including surgeon's fee, anesthesiologist's fee and hospital charges which include implants if required, nursing care, operating and recovery room and hospital stay in a private room
- Medication such as painkillers and antibiotics for the length of your stay unless mentioned otherwise in the special notes section above
- Any stretch pants or bandages if required for support after surgery
- Post surgery aftercare and follow up consultations with your surgeon. Rehabilitation sessions are included if mentioned in the proposal. When they are optional the price will be indicated on in your proposal

In general our prices are all inclusive for both the vacation and medical treatment. You will only be asked to make any direct payments to the hospital in the event of any unforeseen complications during surgery and pay for any holiday activities or food apart from hotel included breakfasts.