PRICE LIST FOR PAID MEDICAL SERVICES

PROVIDED BY HEALTH CARE INSTITUTION "CITY CLINICAL MATERNITY HOSPITAL №2"

FOR FOREIGN CITIZENS

**Obstetrics**

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| **No.** | **Service name** | **Unit of measure** | **Tariff, rub.** |
| 6.1 | Vaginal delivery (first) | delivery | 2210.19 |
| 6.2. | Vaginal delivery (repeated) | delivery | 1650.56 |
| 6.3. | Uterus lower segment caesarean section | surgery | 2546.41 |

Note: The cost of used medicine, medical purpose products is not included in the price. They are to be paid by a patient additionally.