

De Frey en Vennote Ing.

PR. 1451979 Reg 2017/095638/21 VAT # 4940174529

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De Frey en Vennote Ing.

TRAVEL DOCTOR
CORPORATE

Client : **ROYAL CARIBBEAN CRUISES - MEDICAL - NON-FOOD HANDLER**
Please send POP to : info@TravelDocCorp.com
PLEASE USE YOUR SURNAME / INVOICE NUMBER AS REFERENCE WHEN MAKING PAYMENT
Upfront payment is required to schedule and book an appointment

Invoice Number SAMSA-RCC/23
Account Number COD001
Valid until 28 Feb 2024
Page no: 1 of 1

INVOICE

| Our Ref | Description | Qty | Unit Price | VAT | Total Excl. |
|---------|---|-----|------------|-------|-------------|
| | SAMSA (EXTENDED) Medical by Doctor, including | 1 | R 1 095.65 | 15.0% | R 1 095.65 |
| | * Consultation | | | | |
| | * Urine Dip Stick | | | | |
| | Resting ECG | 1 | R 243.48 | 15.0% | R 243.48 |
| | Urine Multi-Drug Screen / Rapid (Cup) | 1 | R 217.39 | 15.0% | R 217.39 |
| | * Drug screen cup - Marijuana, Cocaine, Opiates, Amphetamines, Metamphetamines - excludes Phencyclidine | | | | |
| | Occupational Health Items | | | | |
| | X-Ray Chest: Reported by a Specialist Radiologist | 1 | R 691.30 | 15.0% | R 691.30 |
| | OHS - Audiometry | 1 | R 239.13 | 15.0% | R 239.13 |
| | OHS - Vision | 1 | R 239.13 | 15.0% | R 239.13 |
| | Laboratory Items : TO NOTE : Additional tests may be needed, and payable at time of Consultation. | | | | |
| | * Laboratory administration fee | 1 | R 60.87 | 15.0% | R 60.87 |
| | * ALT | 1 | R 100.00 | 15.0% | R 100.00 |
| | * AST | 1 | R 100.00 | 15.0% | R 100.00 |
| | * Full Blood Count with ESR | 1 | R 291.30 | 15.0% | R 291.30 |
| | * Glucose (FASTING) | 1 | R 66.96 | 15.0% | R 66.96 |
| | * Hepatitis A IgM Levels | 1 | R 266.09 | 15.0% | R 266.09 |
| | * Hepatitis B Surface Antigen (HbsAg) | 1 | R 266.09 | 15.0% | R 266.09 |
| | * Hepatitis C Screen (HCVAb) | 1 | R 266.09 | 15.0% | R 266.09 |
| | * HIV ELISA | 1 | R 156.52 | 15.0% | R 156.52 |
| | * Lipid Screen / Lipogram | 1 | R 497.04 | 15.0% | R 497.04 |
| | * RPR | 1 | R 239.13 | 15.0% | R 239.13 |
| | * U&E Creatinine (includes Blood Urea Nitrogen - BUN) | 1 | R 357.39 | 15.0% | R 357.39 |
| | * Uric Acid | 1 | R 69.91 | 15.0% | R 69.91 |
| | Additional Laboratory Items : WHERE APPLICABLE * HbA1C Hb @ R301.00 incl VAT - IF REQUIRED / DIABETIC | | | | |
| | <u>To note :</u> | | | | |
| | * Excludes any specialists referrals requirements identified during Consultation, resting ECG and / or lung function, other laboratory tests, which may be required depending on clinical presentation. | | | | |
| | * Vaccines / malaria prophylaxis and medical kits are also available - to be discussed on the day of the Consultation | | | | |
| | * Any additional items (lab tests, vaccines, kits etc) will be payable on the day of the Consultation | | | | |
| | Recommended Vaccines : TO DISCUSS ON THE DAY OF THE CONSULTATION * Yellow Fever - Stamaril @ R445.50 incl VAT | | | | |
| | Recommended Vaccines : TO DISCUSS ON THE DAY OF THE CONSULTATION * Varicella - Varilrix / Onvara @ R632.50 incl VAT | | | | |
| | Recommended Vaccines : TO DISCUSS ON THE DAY OF THE CONSULTATION * MMR - Priorix @ R294.00 incl VAT | | | | |

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Payments Can be Made to:
Account name : DE FREY EN VENNOTE ING
ABSA Clearwater Strubens Valley, Branch Code: 632005
Account no: 4067 486 631
Please send POP to : info@TravelDocCorp.com

| | |
|------------------|-------------------|
| Sub Total ex VAT | R 5 463.48 |
| VAT 15% | R 819.52 |
| Total | R 6 283.00 |
| Discounts | |
| Balance | R 6 283.00 |

Notes:
• Terms : 100% to be paid upfront to secure booking
• In the event of not arriving for the scheduled appointment, the full amount will be used as a "no-show fee" and no refund will be applicable.