

**REPUBLIC OF TURKEY
ANKARA GOVERNORSHIP
PROVINCIAL HEALTH DIRECTORATE**

CERTIFICATE OF ACTIVITY PERMIT FOR PRIVATE HOSPITAL

Hospital's:

Name: OZEL KORU ANKARA HASTANESI
Address: Kızılırmak Mahallesi-1450.Sokak No: 13
Cukurambar/ANKARA
Name of the owner: Erer Saglik ve Egitim Kurumları İşlt. A.S.
License no: 484
No. of active out-patient clinics: 81+2+2

No. of total active patient beds: In figures: 205 In writing: two hundred five
No. of total active intensive care beds: In figures: 47 In writing: Forty seven

*Internal Diseases Intensive Care Unit (8 beds)
*Surgical Intensive Care Unit (3 beds)
*CVC intensive care unit (5 beds)
*Coronary Intensive care unit (6 beds)
*Neonatal Intensive Care Unit (25 beds)

No. of observation beds: In figures: 31 In writing: Thirty one

1)Specialties where patients will be accepted and treated by staff specialist doctors:

Pediatric Health and Diseases, Gastroenterology, Eye Diseases, Gynaecology and Obstetrics, Anesthesiology and Reanimation, Orthopedics and Traumatology, Dermatology, Cardiology, Brain and Nerve Surgery, Ear-Nose-Throat Diseases, Physical Medicine and Rehabilitation, Urology, Neurology, Internal Diseases, General Surgery, Chest Diseases, Plastic, Reconstructive and Aesthetics Surgery, Microbiology and Clinical Microbiology, Radiology, Chest Diseases, Psychiatry, Cardiovascular Surgery, Nuclear Medicine, Radiation Oncology, Biochemistry and Clinical Boichemistry+Dentistry Services.

Devices at the Radiology-Imaging Department and other Diagnosis/Treatment Devices (Devices within the scope of planning)

*ANGIOGRAPHY *PET/CT *SPECT *GAMMA KNIFE *LINAC

This certificate is granted on 29.09.2014 for the private hospital with the above-mentioned title in order to show activity for accepting and treating patients within the scope of the provisions of Law and Regulations regarding Private Hospitals.

Date/No of Document Revision Approval: 25.08.2021/4158

Dr. Ayhan OZKAN
On behalf of the governor
Deputy Governor

**REPUBLIC OF TURKEY
GOVERNORSHIP OF ANKARA
PROVINCIAL HEALTH DIRECTORATE**

PRIVATE HOSPITAL CERTIFICATE OF ACTIVITY PERMIT

Hospital's:
Name: OZEL KORU ANKARA HASTANESI
Address: Kızıllırmak Mahallesi-1450.Sokak No: 13
Cukurambar/ANKARA
Name of the owner: Erer Saglik ve Egitim Kurumları İletmeciligi A.S.
License no: 484

Specialties where patients will be accepted and treated by temporary specialist doctors:

*General Surgery (Annex5-e/1) *Pediatric Surgery (Annex5-e/1) (Annex5-k)
*Cardiology (Annex5-e/3)(Annex5-e/5) *Neurology (Annex5-e/5) *ENT (Annex5-e-3) (Annex5-e/5)
* Psychiatry (Annex5-k) *Brain and Nerve Surgery (Annex5-e/5) (Annex5-k)
*Radiology (Annex5-e/1) (Annex5-e/3) *Chest Diseases (Annex5-e/3)
*Pediatric Nephrology (Annex5-f) *Hematology (Annex5-e/1) (Annex5-e/3)(Out-patient clinic)
*Medical Oncology (Annex5-e/5) (Out-patient clinic) *Orthopedics and Traumatology (Annex5-e/1) (Annex5-e/3)
(Annex5-e/5)
*Gynaecology and Obstetrics (Annex5-e/1) (Temporary article 9) (Annex5-e-3) (Annex5-e-5) (Annex5-5)
*Pediatric Neurology (Annex5-f) *CVC (Annex5-e/3)
*Eye Diseases (Annex5-e/1) (Annex5-e/3) *Rheumatology (Annex5-e/3)
Pediatric Endocrinology (Annex5-e/3) *Neonatology (Annex5-e/1)
*Endocrinology and Metabolism Diseases (Annex5-f) (Annex5-e/3) *Biochemistry (Annex5-e/3)
*Nephrology (Annex5-f)
*Pediatric Health and Diseases (Annex5-e/3) (Annex5-k) *PTR (Annex5-e/3)
*Anesthesia and Reanimation (Annex5-e/5) (Annex5-k) *Gastroenterology (Annex5-e/3) (Annex5-e/5)
*Internal Diseases (Annex5-e/2) (Annex5-k) (Annex5-e/3) *Urology (Annex5-e/3) (Annex5-e/5) (Annex5-k)
*Family Practice (Annex5-k) *Thoracic Surgery (Annex5-e/5)
*Infectious Diseases and Clinical Microbiology (Annex5-e-5) (Out-patient clinic)

Laboratories licensed within the scope of the hospital:

*Biochemistry Laboratory * Microbiology Laboratory

External laboratory Services via Service Purchase:

*Microchemistry *Biochemistry *Pathology *Radiology *Nuclear Medicine
*Cytogenetic and Molecular Genetics *MR Imaging *Hematology

Devices at the Radiology-Imaging Department and other Diagnosis/Treatment Devices (Devices that are not within the scope of planning)

*Direct X-ray *Tomography *USG *MR *Bone Densitometry
*Mammography *EEG *EMG *C-arm scopy *Panoramic X-ray

Other Medical Units and Centers licensed within the scope of the hospital:

*Endoscopy Unit *Audiology *DaVinci Robot *Angio Dept. *Rdiology
*PTR *Nuclear Medicine *Bone Marrow Transplantation Center *Transfusion Unit
*GETAT Unit (Phytotherapy-Osone Application) *Home-care *Heart Center

This certificate is granted on 29.09.2014 for the private hospital with the above-mentioned title in order to show activity for accepting and treating patients together with the Certificate of Activity Permit within the scope of the provisions of Law and Regulations regarding Private Hospitals.

Date/No of Document Revision Approval: 18.08.2021 / 4002/39

Sp. Dr. Mustafa ALIMOGULLARI
On behalf of the manager
Chairman of Health Services

REPUBLIC OF TURKEY
MINISTRY OF HEALTH
CERTIFICATE OF ACTIVITY PERMIT FOR PRIVATE HOSPITAL

Hospital's:

Name: OZEL KORU ANKARA HASTANESI
Address: Kızılırmak Mahallesi-1450.Sokak No: 13
Cukurambar/ANKARA

Name of the owner: Erer Saglik ve Egitim Kurumları İşletmeciligi A.S.

License no: 484

No. of active out-patient clinics: 81+2+2

No. of total active patient beds: In figures: 205

In writing: two hundred five

No. of total active intensive care beds: In figures: 47

In writing: Forty seven

*Adult Intensive Care Unit (11 beds)

*CVC intensive care unit (5 beds)

*Coronary Intensive care unit (6 beds)

*Neonatal Intensive Care Unit (25 beds)

No. of observation beds: In figures: 31

In writing: Thirty one

1)Specialties where patients will be accepted and treated by staff specialist doctors:

Pediatric Health and Diseases, Gastroenterology, Eye Diseases, Gynaecology and Obstetrics, Anesthesiology and Reanimation, Orthopedics and Traumatology, Dermatology, Cardiology, Brain and Nerve Surgery, Ear-Nose-Throat Diseases, Physical Medicine and Rehabilitation, Urology, Neurology, Internal Diseases, General Surgery, Chest Diseases, Plastic, Reconstructive and Aesthetics Surgery, Microbiology and Clinical Microbiology, Radiology, Chest Diseases, Psychiatry, Cardiovascular Surgery, Nuclear Medicine, Radiation Oncology +Dentistry Services.

Devices at the Radiology-Imaging Department and other Diagnosis/Treatment Devices (Devices within the scope of planning)

*Angiography *PET/CT -SPECT *GAMMA KNIFE *LINAC

This certificate is granted on 17.02.2009 for the private hospital with the above-mentioned title in order to show activity for accepting and treating patients within the scope of the provisions of Law and Regulations regarding Private Hospitals.

Date/No of Document Revision Approval: 08/07/2020 / 1946

Prof. Dr. Muhammet GUVEN
On behalf of the Minister
Deputy Minister

