WELCOME & INTRODUCTION

DANIE MEINTJES
CEO MEDICLINIC INTERNATIONAL
TIME LINE AND FINANCIAL OVERVIEW

CRAIG TINGLE
CFO MEDICLINIC INTERNATIONAL
1990
Merger of 5 clinics to form HIRSLANDEN

1997 – 2002
Takeover of 7 clinics

2002
Takeover by BC Partners

2005
Takeover of Klinik St. Anna
Introduction of Tarmed

2010
Acquisition of Klinik Stephanshorn

2007
New management team at Hirslanden

2007
Opening of Garden Wing at Klinik Hirslanden

2007
Mediclinic International acquires Hirslanden's 13 hospitals

2012
KVG revision and introduction of DRGs

2012
Successful listing of 13 hospitals on cantonal hospital lists

2012
Major debt refinancing of CHF2.9 billion successfully completed

2013
Enzenbühltrakt project completed at Klinik Hirslanden
Opening of outpatient clinic at Bern Station

2014
ABO funding

2014
Acquisition of Clinique La Colline and Swissana Clinic

2014
Commissioning of Männedorf radiotherapy unit

2015
First bond issues totalling CHF200 million

2014
Opening of outpatient clinic in Belair “Urbahn”
HIRSLANDEN
KEY FINANCIAL INDICATORS

• Steady revenue and EBITDA growth

• Normalised EBITDA shown

• Major structural changes since early 2012 with listing, increase in generally insured patients and major long-term projects such as Lighthouse
HIRSLANDEN GEARING

- Declining net debt to EBITDA ratio
- Positive effect of debt refinancing in October 2012 clearly seen from FY2013 onward
- After refinancing, average interest rate decreased from 5.62% to 2.3%
- CHF 180 m amortised on senior loan as at 30 September 2014
HIRSLANDEN INAUGURAL DUAL TRANCHE BOND ISSUE

- On 29 January 2015 Hirslanden accessed the CHF bond market
- CHF 120 million at 1.625 % over 6 years, in combination with a CHF 80 million at 2.00 % with 10 year maturity
- Final closing next week and further volume is possible
- Aim of offering to refinance existing debt and diversify funding sources
- Currently further refinancing options being evaluated
- Rating of Baa- stable by Fedafin and Mid BB stable by Credit Suisse
- Total transaction size the largest CHF new issue volume by a domestic health care sector issuer
OPERATIONAL OVERVIEW

OLE WIESINGER
CEO HIRSLANDEN
KEY FACTS
SWITZERLAND
KEY FACTS
SWITZERLAND

Official languages:
- German
- French
- Italian
- Romansh

Capital:
None (Berne)

Area:
41,285 km²
133rd

Government:
Federal Multi-party directorial republic

Population:
8 million

GDP (PPP): $385.333 Billion
37th

Human development index (HDI):
0.917
3rd

GDP (per capita):
$47,863
8th
KEY FACTS
LIFE EXPECTANCY AT BIRTH
1970 AND 2011 (OR NEAREST YEAR)

KEY FACTS
HEALTH EXPENDITURE PER CAPITA IN USD, 2011 (OR NEAREST YEAR)

ENVIRONMENTAL CHALLENGES
ENVIRONMENTAL CHALLENGES

- Outmigration of care
- Decreasing turnover per case
- Aging society
- From acute to chronical
- Regulatory environment
- Human resources
- Power of networks
- Increased transparency
- Limited market access
REGULATORY ENVIRONMENT
SWISS POLITICAL SYSTEM

- Multi-party federal directorial democratic republic
- Federal Council of Switzerland as head of government and executive power
- Legislative power exercised by government and two chambers: Council of State and National Council
- Direct representation
- Healthcare: Steered by cantonal governments
REGULATORY ENVIRONMENT
THE CANTONS’ MULTIPLES ROLES

- HSM planning
- Moratorium
- Finance payer
- Healthcare regulator
- Hospital operator
- Tariff determination
«Conference of Highly Specialized Medicine» (assigned by the 26 Health Ministers), organised by cantons

**Purpose:** Centralisation of Highly Specialized Medicine in Switzerland

**Motivation criteria:**
- Small case load
- Innovation potential
- Need for specialized teams
- Need for specialized infrastructures
- Complexity of treatments
- High costs
• Definition of HSM: What and who?
  • Distinction between specialised and highly-specialised medicine
  • Composition of decision making-body: Only representatives of public hospitals with multiple roles
REGULATORY ENVIRONMENT
THE CANTONS’ MULTIPLES ROLES

- HSM planning
- Moratorium
- Finance payer
- Healthcare regulator
- Hospital operator
- Tariff determination
Cantonal hospital lists

Goal of list: Cover all medical services required by the inhabitants of canton

Billing of treatment costs to patient’s canton of residence and basic insurance (50:50) by listed hospitals

Listing made by cantonal government

Mandate dictates offered medical services, obligations and requirements to be met (most important: Quality and economic efficiency, patients access to treatment, within a reasonable time)
• Public service mandates for 15 out of 16 Hirslanden hospitals: Klinik Im Park’s objection (Canton of Zurich) rejected; reapplication for 2016
• Extensive service mandates
• Ongoing court cases (BE, SG)
• Provisional DRG base rates
• Outpatient tariff adjustment (shift of 200m Swiss francs from specialists to basic service providers)
• Canton Vaud: Cantonal influence in acquisition of large medical equipment
ENVIRONMENTAL CHALLENGES

- Outmigration of care
- Decreasing turnover per case
- Aging society
- From acute to chronical
- Regulatory environment
- Human resources
- Power of networks
- Increased transparency
- Limited market access
OUTMIGRATION OF CARE
AMBULATORY SURGERY VISITS
UNITED STATES 1996 AND 2006

Data: CDC/NCHS, National Survey of Ambulatory Surgery, 2006 and National Hospital Discharge Survey.
Proportion of in- and outpatient cases in Swiss Hospitals 1996, 2004 and 2012

Data: The Swiss Hospital Association H+, May 2014
BUSINESS OVERVIEW AND KEY STATISTICS
THE SWISS HOSPITAL MARKET

General Hospitals
175 Hospitals

- 16% of privately held
- 8% of total

Patient Care Days
8.3m days

- 31% of privately held
- 5% of total

Employees (FTE)
123,269 FTE

- 32% of privately held
- 4% of total

Cases
1.1m treated patients

- 38% of privately held
- 7% of total

Beds
23,852 Acute beds

- 35% of privately held
- 6% of total

Explanation
-Hirslanden’s market share in % of private hospitals
-Hirslanden’s overall m/s

HIRSLANDEN
OUR HOSPITALS
HIRSLANDEN
OUR REFERRING DOCTORS
OPERATIONAL OVERVIEW

HOSPITALS 16

BEDS 1,650

EMPLOYED SPECIALISTS 235

VISITING SPECIALISTS 1,493

EMPLOYEES 6,246
GROWTH AT HIRSLANDEN

Patients (inpatient cases)

FTE

Average length of stay

Patient days

CAGR: 4.4%

CAGR: 5.4%

CAGR: -0.7%

CAGR: 3.8%

CAGR: 6.5%

CAGR: 13.8%

CAGR: 6.5%

CAGR: -0.7%

CAGR: 3.8%

CAGR: 7.0%

CAGR: -0.7%

CAGR: 0.5%

CAGR: 7.0%
BUSINESS PERFORMANCE

- CHF 56 million Revenue growth
  - 6.6% increase in inpatients
  - 2.7% increase in average revenue per case
- Stable average length of stay at 4.9 days
- 134% of normalised EBITDA converted into cash generated from operations
BED OCCUPANCY
AND DEVELOPMENT

- Beds increased from 1,567 to 1,650 during the reporting period
- Bed occupancy is in line with HY2014 (72.2%) and still constantly above 70%

* Defined as midnight census divided by number of beds times days in reporting period

Note: Average bed occupancy rates for full years generally higher than first-half year occupancy rates, mainly due to higher occupancies over the winter period from November to March
BUSINESS PERFORMANCE

• Continued growth supported by two acquisitions: Clinique La Colline in Geneva and Swissana Clinic in Meggen

• Solid performance and stable financials

• Normalised EBITDA margin declined as expected due to:
  - increase in generally insured patients
  - investment for the future (Lighthouse and Zenlop)
ACQUISITION: CLINIQUE LA COLLINE
ACQUISITION: HIRSLANDEN KLINIK MEGGEN
OUTPATIENT CENTER: PRAXISZENTRUM AM BAHNHOF
OUTPATIENT CENTER: PRAXISZENTRUM AM BAHNHOF SCHAFFHAUSEN
RADIOTHERAPY MÄNNEDORF
# BUILDING AND MEDTECH PROJECTS

## COMPLETED DURING LAST SIX MONTHS

<table>
<thead>
<tr>
<th>BUILDING</th>
<th>COMPLETED</th>
<th>BEDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinique La Colline (Emergency unit, doctors practice)</td>
<td>Jun 2014</td>
<td>-</td>
</tr>
<tr>
<td>Clinique Bois-Cerf (Daycare)</td>
<td>Aug 2014</td>
<td>7</td>
</tr>
<tr>
<td>Andreas Klinik Cham Zug (Doctors’ practices)</td>
<td>Sep 2014</td>
<td>-</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>7</strong></td>
<td><strong>7</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MEDTECH</th>
<th>COMPLETED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Klinik Im Park, Schanze (CT 64 and mammography)</td>
<td>Aug 2014</td>
</tr>
<tr>
<td>Clinique Cecil (Catheter lab – biplane)</td>
<td>Jun 2014</td>
</tr>
<tr>
<td>Radiotherapy Männedorf (LINAC)</td>
<td>Mar 2014</td>
</tr>
<tr>
<td>Klinik St. Anna (PET CT)</td>
<td>Sep 2014</td>
</tr>
</tbody>
</table>
## BUILDING AND MEDTECH PROJECTS

### COMPLETE DURING THE NEXT SIX MONTHS

<table>
<thead>
<tr>
<th>BUILDING</th>
<th>EXPECTED COMPLETION</th>
<th>BEDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Klinik Belair (Outpatient clinic “Urbahn”)</td>
<td>Oct 2014</td>
<td>-</td>
</tr>
<tr>
<td>Klinik Hirslanden (Entrance and back office area)</td>
<td>Oct 2014</td>
<td>-</td>
</tr>
<tr>
<td>Salem-Spital (Entrance, pharmacy)</td>
<td>Dec 2014</td>
<td>-</td>
</tr>
<tr>
<td>Klinik Im Park (Hybrid operating theatre)</td>
<td>Dec 2014</td>
<td>-</td>
</tr>
<tr>
<td>Klinik St. Anna (Doctors’ practices)</td>
<td>Mar 2015</td>
<td>-</td>
</tr>
<tr>
<td>Klinik Stephanshorn (Bed wing, emergency room)</td>
<td>Mar 2015</td>
<td>24</td>
</tr>
<tr>
<td>Hirslanden Klinik Aarau (New ward for privately insured patients)</td>
<td>April 2015</td>
<td>10</td>
</tr>
<tr>
<td>Klinik Birshof Phase 2: Practices, emergency room</td>
<td>May 2015</td>
<td>-</td>
</tr>
</tbody>
</table>
BUILDING AND MEDTECH PROJECTS

COMPLETE DURING THE NEXT SIX MONTHS

<table>
<thead>
<tr>
<th>MEDTECH</th>
<th>EXPECTED COMPLETION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Klinik Beau-Site (MRI 3T)</td>
<td>Oct 2014</td>
</tr>
<tr>
<td>Klinik Im Park (Hybrid - angiography)</td>
<td>Dec 2014</td>
</tr>
<tr>
<td>Klinik St. Anna (Angiography)</td>
<td>Dec 2014</td>
</tr>
<tr>
<td>Klinik St. Anna (Da Vinci / urology)</td>
<td>Mar 2015</td>
</tr>
</tbody>
</table>

Klinik Im Park Hybrid - Angiography
HIRSLANDEN PRIVÉ

- Free choice of doctor and hospital
- Fast access to desired medical treatment
- Privacy in a single room
- A wide range of hospitality services and an individual care programme
- Hirslanden Privé Membership
CURRENT PROJECTS
HLT – HIRSLANDEN HOSPITAL INFORMATION SYSTEM

• Standardised administrative and medical processes
• Optimisation of treatment quality
• Group-wide introduction until 2018
• Central logistics platform for expendable materials
• Cooperation with Swiss Post
• Since December 2014: Supply of 10 Hirslanden Hospitals
• Economies of scale in buying
• Streamlined range of materials
THANK YOU
AGENDA

• A brief history of Klinik Hirslanden
• Who are our health consumers?
• Which promises do we offer to our patients?
• How do we manage our processes?
• How do we achieve value?
• Our vision
• Take home message
A BRIEF HISTORY OF KLINIK HIRSLANDEN
# Tradition and Innovation
## Since 1932

**Klinik Hirslanden opening**
- Musculoskeletal
- Gynaecology

**1932**
- Cardiology
- Radiology

**1987**
- Gastroenterology
- Lung & Thoracic
- Spine surgery
- Vascular surgery

**1997**
- Klinik Hirslanden opening
- Emergency medicine

**1998**
- Oncology

**1999**
- Da Vinci Robot

**2005**
- Garden wing opening
- Top chef Albert Hubmann from Parkhotel Weggis

**2007**
- Hirslanden Baby
- Radiotherapy

**2008**
- Introduction of primary nursing
- Neuro Suite

**2009**
- CyberKnife
- Head (and neck)
- Intra-operative CT

**2010**
- Comprehensive Stroke Center
- Reference center bariatrics

**2011**
- Refurbishment entrance area
- Acute Care Unit

**2012**
- Hospital list ZH
- Highly specialized medicine
- PET/CT scan
- Intra-operative MRI

**2013**
- Opening Enzenbühl Wing
- Restaurant Quadro Hybrid-OR
- Extension intensive care

**2014**
- Extension intensive care

© Daniel Liedtke, Klinik Hirslanden
KLINIK HIRSLANDEN
NUMBERS AND FACTS

• 1’600 employees
• 415 affiliated and salaried doctors
• 100 in-house physicians
• 330 beds
• 16’800 admissions/year
• 107’800 patient days/year
• 14 operating rooms
• 24 intensive care beds
WHO ARE OUR HEALTH CONSUMERS?
WHERE DO PATIENTS COME FROM?

- 73% of our patients live within the canton of Zurich
- 22% of our patients come from the rest of Switzerland
- The remaining 5% are international patients
HOW ARE OUR PATIENTS INSURED?
BY MEDICAL CATEGORY

Patient mix overall:  
- Private: 42%
- Semi-private: 35%
- General: 23%

Patient mix by medical category:

10% Highly-specialised medicine:
→ thereof general-insured patients: 40%

90% Specialised medicine:
→ thereof general-insured patients: 15%

© Daniel Liedtke, Klinik Hirslanden
OUR SERVICE PROMISES
MEDICAL ACCESS

General = waiting time

Depending on the capacity, access for elective serious cases

versus

Private = no waiting time

No waiting time to highly-specialised doctors
MEDICAL TEAMS

general

Treatments by medical fellows & residents supported by highly-specialised medical Teams

versus

private

Treatments by highly-specialised and very experienced medical teams

Datum: 16.02.2015
© Daniel Liedtke, Klinik Hirslanden
INFRASTRUCTURE

general

versus

private

Swiss Standard Infrastructure

Excellent 4**** Infrastructure
SERVICE STANDARD

general

versus

private

Swiss Standard Hospitality

Excellent 4**** Hospitality
ACCESS FOR EMERGENCIES & TECHNOLOGY STANDARD

no difference between insurance categories

High-end medical technology

365 x 24h fast access for emergency cases

Datum: 16.02.2015

© Daniel Liedtke, Klinik Hirslanden
HOW DO WE MANAGE OUR PROCESSES?
PERFORMANCE AND PROCESSES

Patient Value & Hospital Performance = Medical Outcome + Trust / Satisfaction

Costs per case

Volume, Specialisation, Indications Board, Team & Guidelines

Promises & Actual Services for Patients and Doctors

Standardisation & Productivity

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HOW DO WE ACHIEVE VALUE?
REVENUE MODEL
QUALITY AND COST LEADERSHIP

The revenue model needs a hybrid strategy: A hospital will generate patient value if - with an increase of case volume - it succeeds in lowering costs and improving outcome and patient satisfaction at the same time.

KEY FIGURES
# Key Figures

## Fiscal Year

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beds (at 31.03.XX)</td>
<td>259</td>
<td>259</td>
<td>330</td>
</tr>
<tr>
<td>Inpatients (adm.)</td>
<td>14'877</td>
<td>15'438</td>
<td>16'822</td>
</tr>
<tr>
<td>Occupancy in % (average)</td>
<td>80.7</td>
<td>86.1</td>
<td>86.0</td>
</tr>
<tr>
<td>CMI Swiss DRG (since 1.1.2012)</td>
<td>-</td>
<td>1.21</td>
<td>1.33</td>
</tr>
</tbody>
</table>

© Daniel Liedtke, Klinik Hirslanden
FUTURE CHALLENGES
FUTURE CHALLENGES

Outmigration of care
From acute to chronic
Power of networks
Decreasing turnover per case
Regulatory environment
Increased transparency
Aging society
Human resources
The Changing Education System
Insurance Mix
The Admission Obligation
Limited market access
OUR VISION
OUR VISION

Private University
Klinik Hirslanden

© Daniel Liedtke, Klinik Hirslanden
TAKE HOME MESSAGE
TAKE HOME MESSAGE

- Klinik Hirslanden is a cantonally-listed hospital. Additionally, it provides highly-specialised medicine analogous to a university hospital.
- By actively enforcing medical and service differentiations between general- and private-insured patients, Klinik Hirslanden continues to focus on the semi-private and private insurance segments.
MANY THANKS

DR. DANIEL LIEDTKE
HOSPITAL MANAGER

KLINIK HIRSLANDEN
WITELLIKERSTRASSE 40
CH-8032 ZÜRICH
HOSPITAL OVERVIEW
KLINIK STEPHANSHORN
HISTORY

• 1924: The Menzinger Sisters build a private hospital called Notkerianum (birthplace). Later, the Notkerianum and the hospital Blumenau are merged

• 1975: Establishment of Klinik Stephanshorn AG and construction of a new building

• 1978: Opening of the new building (today’s main hospital building)

• From then on, the Klinik Stephanshorn established as a maternity hospital

• 2000 – 2002: Hospital completely refurbished
• 10/10 Hirslanden acquires Klinik Stephanshorn

• 11/11 Intermediate Care Unit (IMC)

• 4/13 Obesity Centre

• 7/13 New state-of-the-art operation theatre, called ENDO Alpha

• 8/13 Intensive Care Unit with 6 beds (ICU)

• 9/13 Centre of health with an Emergency Unit and 5 practices

• 10/13 Introduction of a new 3T MRI

• 12/13 As the first private hospital in Switzerland, Stephanshorn certified by the Swiss Cancer Organisation for Breast Cancer as a centre of expertise
1/14 For the first time ever, more than 500 inpatients a month

8/14 Start construction of 12 double rooms (24 beds) / new Emergency Unit, opening 6 April 2015

1/15 Introduction of Thorax and Vascular Unit

1/15 More than 400 employees

4/15 Introduction of new Angiography
KLINIK STEPHANSHORN
AT A GLANCE

Figures per 31 March 2014

• Turn-over of CHF 67 Mio. (+16% PY)
• 69 doctors affiliated and employed
• 367 employees
• 100 beds
• 5 Operating theatres
• 4 delivery rooms
• 5,455 inpatients excluding newborns
• 23,844 patient-days
• 844 newborns (1% of all newborns in Switzerland)
• Length of stay approx. 4.4 days
### MEDICAL SPECIALITIES
**PER JANUARY 2015**

<table>
<thead>
<tr>
<th>Anaesthesia</th>
<th>Obesity (HSM)</th>
<th>Breast Surgery</th>
<th>Surgery</th>
<th>Diabetes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endocrinology</td>
<td>Gastro-enterology</td>
<td>Vascular</td>
<td>Gynaecology /Obstetrics</td>
<td>Haematology</td>
</tr>
<tr>
<td>ICU</td>
<td>Internal Medicine</td>
<td>Cardiology</td>
<td>Neurosurgery</td>
<td>Oncology</td>
</tr>
<tr>
<td>Otolaryngology</td>
<td>Orthopaedic / traumatology</td>
<td>Plastic Surgery</td>
<td>Pneumology</td>
<td>Radiology</td>
</tr>
<tr>
<td>Rheumatology</td>
<td>Thorax Surgery</td>
<td>Urology</td>
<td>Visceral Surgery</td>
<td>Spinal Column Surgery</td>
</tr>
</tbody>
</table>

- **7/24-h Emergency T +41 71 282 74 74**
KLINIK STEPHANSHORN
DEVELOPMENT OF EMERGENCY UNIT

- Operational since 09/13
- Outpatient transfer to inpatient and insurance mix are very attractive

- Inpatient: 36%
- Outpatient: 64%
- Supplementary insured: 43%
- General insured: 57%
KLINIK STEPHANSHORN
DEVELOPMENT EMPLOYEES FY 2011-14

<table>
<thead>
<tr>
<th>FY2011 Transfer Year</th>
<th>FY2012</th>
<th>FY2013</th>
<th>FY2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employees incl. Hospital-Doctors</td>
<td>249</td>
<td>285</td>
<td>305</td>
</tr>
<tr>
<td>Affiliated doctors</td>
<td>61</td>
<td>60</td>
<td>60</td>
</tr>
</tbody>
</table>

367
<table>
<thead>
<tr>
<th>Project Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intermediate Care IMC</td>
<td>CHF 2.0m</td>
</tr>
<tr>
<td>Emergency Unit</td>
<td>CHF 7.0m</td>
</tr>
<tr>
<td>IUC / Operating Theatre / Medical technology Surgery</td>
<td>CHF 8.0m</td>
</tr>
<tr>
<td>Radiology (MR 3T, Uro-Scan, Mammographie, Ultrasound, etc.)</td>
<td>CHF 5.0m</td>
</tr>
<tr>
<td>Investments &lt; CHF 100,000 since 2010</td>
<td>CHF 3.0m</td>
</tr>
<tr>
<td>Reconstruction of Sterilisation</td>
<td>CHF 2.0m</td>
</tr>
<tr>
<td>Construction Annex (24 beds) and Emergency Unit</td>
<td>CHF 7.5m</td>
</tr>
<tr>
<td>New Angiography</td>
<td>CHF 1.9m</td>
</tr>
<tr>
<td><strong>Total to 2014 / 2015</strong></td>
<td><strong>CHF 36.4m</strong></td>
</tr>
<tr>
<td>Project Study 2020 for new Campus</td>
<td>CHF 0.5m</td>
</tr>
</tbody>
</table>
Klinik Stephanshorn is one of the main employers in St. Gallen

- Currently we educate 38 trainees
- Since 2014 we have the permission to educate doctors in emergency and surgical fields

- Graduate Anaesthesia Nurse
- Graduate Nurse
- Graduate Midwife
- Professional Nurse
- Administration
- Cook
- Technician
How satisfied were you with the service of our nurses

- **very satisfied**: 49% (Basic: 31, Semi-Private: 31, Private: 27)
- **satisfied**: 9% (Basic: 5, Semi-Private: 5, Private: 3)
- **more or less**: 2% (Basic: 2, Semi-Private: 2, Private: 3)
- **no**: 2% (Basic: 2, Semi-Private: 2, Private: 3)

Absolutely not satisfied: See diagram for percentages.
Would you recommend our hospital to your family and friends?

<table>
<thead>
<tr>
<th></th>
<th>Basic</th>
<th>Semi-Private</th>
<th>Private</th>
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<tbody>
<tr>
<td>No</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Maybe</td>
<td>5</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>of course</td>
<td>54</td>
<td>35</td>
<td>27</td>
</tr>
</tbody>
</table>
KLINIK STEPHANSHORN
INPATIENTS PER DISCIPLINE

Orthopedic: 1073 (FY14), 1149 (FY13)
Gynecology: 1467 (FY14), 1531 (FY13)
Surgery: 773 (FY14), 455 (FY13)
Cardiology: 20 (FY14), 0 (FY13)
Internal Medicine: 58 (FY14), 0 (FY13)
Urology: 722 (FY14), 477 (FY13)
Neuro Surgery: 764 (FY14), 679 (FY13)
Oncology: 2715 (FY14), 16449 (FY13)
Oto-Rhino-Laryngology: 3323 (FY14), 299 (FY13)
Hand Surgery: 2719 (FY14), 0 (FY13)
Gastroenterology: 6 (FY14), 6 (FY13)
Plastic Surgery: 262 (FY14), 299 (FY13)
others: 22 (FY14), 6 (FY13)
Radiology: 0 (FY14), 0 (FY13)
• Establishment of Vascular and Thorax Surgery Centre
• Expand new Emergency Unit
• Meet the criteria for highly-specialised medicine (HSM) in Visceral Surgery and Obesity
• Transformation Hirslanden 2020 Strategy
• Introduction of new Hirslanden IT-System (new clinical information system)
• Strategic planning – 2020 'Masterplan'
• Attractive employer within the hospital world
• Introduction of more new disciplines regarding modern state-of-the-art infrastructure such as:
  • Interventional Cardiology
  • Radiotherapy (Radio-Oncology)
  • And others
«What is more satisfying than having just a vision? To achieve it»
THANK YOU