“Merry House” Nursing Home
Accredited with the National Health Service (NHS)
Via G. Beduschi, Nos. 28–30, 00126 Acilia – Rome
Telephone: +39 06 52360378 – +39 06 52355376

Roman Geriatric Centre

Merry House

SERVICE CHARTER

Revision No.: 20 (04/06/2026)

Details of Authorisation Measures

20/01/1978 – Provincial Medical Officer's Decree No. 8-Rome-C-5902

10/04/1979 – Regional Government President's Decree (P.G.R.) No. 505

24/03/1998 – Lazio Regional Government Resolution (DGR) No. 1045

21/05/2007 – Determination No. D1782

28/06/2007 – Determination No. D2356

14/06/2011 – Commissioner's Decree No. 41

15/06/2011 – Agreement with Local Health Authority (ASL) Rome D

Details of Accreditation Measures

25/03/1997 – Resolution of Local Health Authority (ASL Rome D) No. 241

14/06/1999 – Circular, Prot. No. 1520/53/I

14/06/2011 – Commissioner's Decree No. 41

15/02/2000 – Lazio Regional Government Resolution (DGR) No. 355

15/06/2011 – Agreement with Local Health Authority (ASL) Rome D

15/02/2013 – Commissioner's Decree (DCA) No. U00045

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SERVICE CHARTER

DATE OF APPLICATION

PROPOSTO		APPROVATO		CONDIVISO	
FUNZIONE	TIMBRO E FIRMA	FUNZIONE	TIMBRO E FIRMA	RAPPRESENTANTE OSPITI RSA	RAPPRESENTANTE CARE GIVER RSA
AQ		DS	Dott. Francesco Ottini Zannini Direttore Sanitario Casa di Cura Merry House		

1. REVISION STATUS OF THIS DOCUMENT

DATE	REVISION	REASON FOR CHANGE
10.03.08	1	FIRST ISSUE
12.07.07	2	REVISION FOR UPDATE
10.03.09	3	REVISION FOR UPDATE OF REGIONAL ACCREDITATION REGULATIONS
15.06.10	4	UPDATE OF THE HEALTHCARE DIRECTOR AND PAR. 3.5 "SERVICES PROVIDED"
30.06.11	5	UPDATE OF TYPES OF ADMISSIONS
15.09.11	6	UPDATE FOR REGIONAL ACCREDITATION REGULATIONS
21.07.14	7	UPDATE DUE TO REVISION
02.09.15	8	UPDATE DUE TO REVISION
16.01.16	9	UPDATE DUE TO REVISION
16.02.17	10	UPDATE DUE TO REVISION
16.01.18	11	UPDATE DUE TO REVISION
25.07.19	12	UPDATE DUE TO REVISION
24.01.20	13	UPDATE DUE TO REVISION
25.02.21	14	UPDATE
11.07.22	15	UPDATE
05.07.23	16	UPDATE
11.10.24	17	REVISION
11.09.25	18	REVISION
15.04.26	19	UPDATE
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1. INFORMATION, ADMISSION, SAFEGUARDING AND PARTICIPATION

1.1 Distribution and Updating: This document is distributed at the facility's "Information Desk" and published on the company intranet system. Its content is updated annually.

1.2 Information System

Information Desk

The information system, in line with the principle of participation, concerns the provision of information on healthcare services and the related access procedures.

To facilitate access to services and ensure the implementation of the principles of equality and impartiality, the nursing home has established an "Information Desk."

The main function of the "Information Desk" is to provide first-level information (e.g., where to go for…, opening hours, required documentation, etc.).

The "Information Desk" is located near the entrance of the facility, in an easily accessible area, free of architectural barriers, and clearly signposted.

In order to ensure the quality and efficiency of the service provided, the "Information Desk" is staffed by personnel with thorough knowledge of the organisation of the healthcare facility.

Users may also obtain information by telephone. The Information Desk is open every day from 7:00 a.m. to 7:00 p.m.

The nursing home has also issued and made available to users a Patients' Rights Charter.

1.3 Patient Admission

This section addresses aspects related to orientation and reception upon entry into healthcare facilities, including signage, reception services, and the necessary general information on available services.

The reception of patients and their relatives is organised on two operational levels:
a) Initial reception
b) Reception within the wards and at the Outpatient Department (Polyclinic)

a) **Location of the Facility**
The Merry House Nursing Home is located in the Acilia Nord area, approximately 10 kilometres from the south-west districts of Rome and just a few kilometres from the towns of Ostia, Vitinia, Infernetto and Casal Palocco.

The facility can be reached by private transport via Via del Mare or Via Ostiense (see map on the last page).

The area is served by the Rome–Lido railway line, Acilia station, from which the nursing home can be easily reached by taking bus line No. 08, which runs along Via Monti di S. Paolo.

The nursing home has an internal car park.

b) **Architectural Features**
The nursing home is a modern four-storey building, preceded by a pleasant garden. The ground floor includes the reception hall, a café, administrative offices, as well as two areas organised as Residential Healthcare Facilities (R.S.A.).

The three upper floors house inpatient wards dedicated to patients requiring post-acute long-term medical care, hospice care, geriatrics, general medicine and R.S.A. R1.

The semi-basement floor houses the outpatient department, which includes various specialist medical clinics, the radiology service, the laboratory for analyses, and fully equipped physiotherapy and rehabilitation gyms.

c) **Reception and Orientation Service**
The reception service handles the initial admission of patients who arrive independently at the healthcare facility, as well as relatives visiting patients.

Reception staff provide visitors with directions to access the wards and the outpatient department.

Dedicated signage, placed at strategic points throughout the facility, further assists patient orientation by indicating the routes to follow in order to access services, as well as those to follow in case of emergency.

The reception office is located near the entrance of the facility, in an easily accessible area, free of architectural barriers, and clearly identifiable.

Reception is staffed by one person from 7:00 a.m. to 7:00 p.m., including both weekdays and public holidays.

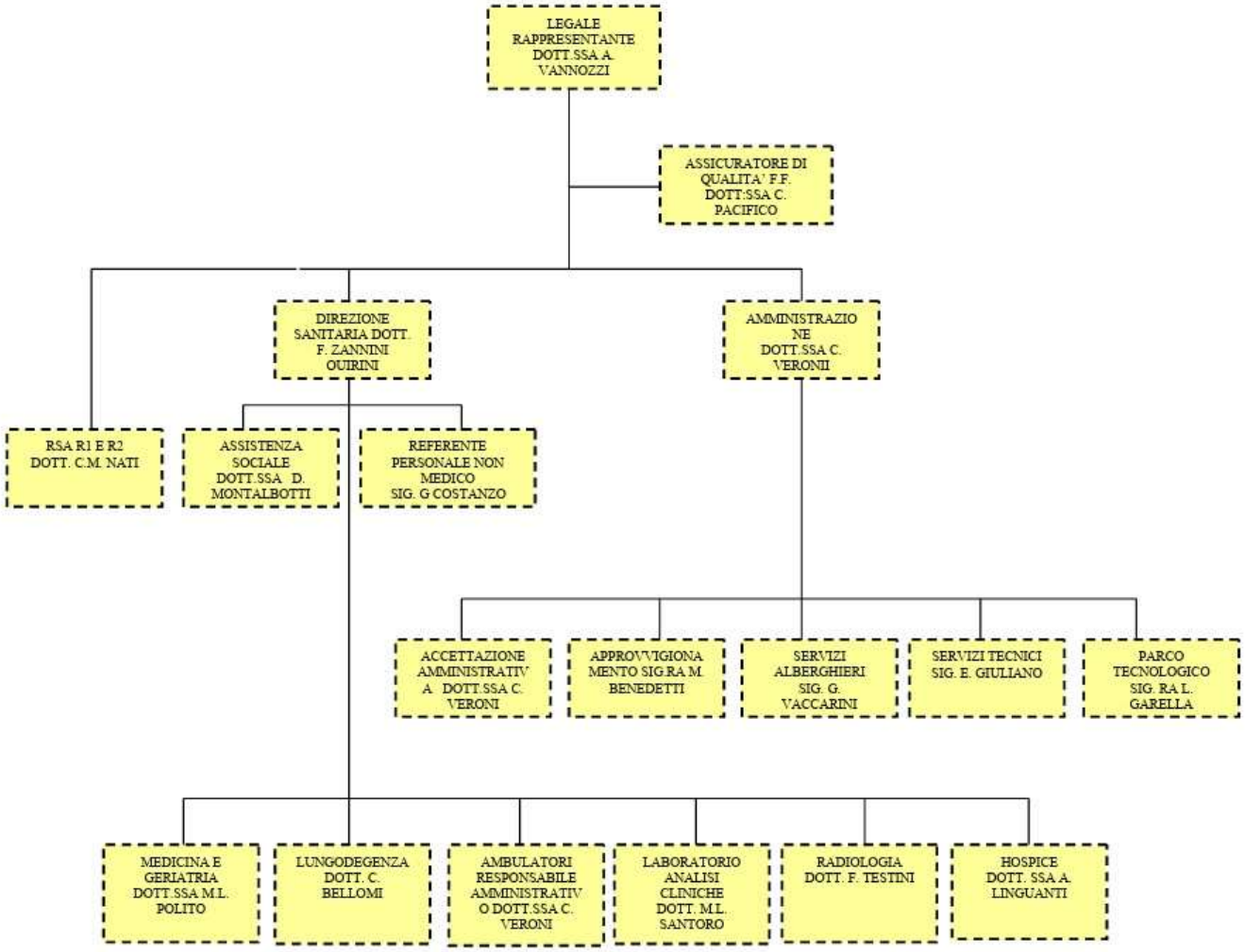
d) **Reception within the Wards and the Outpatient Department**

Reception within the wards and the outpatient department is managed by qualified staff assigned to these services and is described in detail in the relevant sections of this document.

1.4 Governance Structure – Organisational Chart

As shown in the relevant organisational chart, the organisation is structured according to a branched hierarchical (pyramidal) model.

Each service operates autonomously while remaining interconnected with the others; a manager/contact person has been designated for each service.



1.5 Patient Safeguarding

Protection of Privacy and Informed Consent

Patients admitted to the facility, as well as those visiting or receiving outpatient treatment, have the right to confidentiality regarding their personal identification data and health status.

Accordingly, upon admission, patients are required to authorise the Nursing Home to use their personal data exclusively for institutional purposes (relations with the Local Health Authority – ASL, the Region, the Public Health Agency, and the Ministry of Health). Such data may not be disclosed or used for any other purposes (Personal Data Protection Code / GDPR compliance).

Patients are also required to indicate in writing the persons who may be authorised to receive information regarding their health status.

For this purpose, the physicians in charge of the wards meet with such designated persons during the hours specified in each ward.

For certain types of invasive treatments or procedures involving potential risks, patients have the right to be directly informed by the physician about the associated risks and any possible alternatives. Based on this information, patients are asked to sign an informed consent form.

1.6 User Participation

Complaints and Suggestions Procedures

In order to achieve the established care objectives, the Nursing Home guarantees the provision of healthcare services in compliance with the fundamental principles set out in the Directive of the President of the Council of Ministers of 27/01/1994 and in the Charter of Patients’ Rights and Duties (Official Gazette – G.U. 31/05/1995).

Furthermore, the Nursing Home continuously monitors and safeguards the quality of the services provided, both healthcare and hospitality-related.

The Nursing Home guarantees its users the possibility to submit suggestions or to lodge complaints or grievances in the event of any malfunction, act or behaviour that has denied or limited the fundamental principles of healthcare assistance or access to services.

Particular attention is given to complaints, grievances, and suggestions, which may be submitted using a specific form available at the Information Desk. The form may be deposited in the “COMPLAINTS” box located in the ground floor lobby, delivered directly to the Healthcare Director, or sent by post.

For written and non-anonymous complaints, the facility guarantees a written response within thirty working days. In addition, the Healthcare Director is available to receive reports and complaints submitted orally.

In all cases, after reviewing the complaint forms and conducting a thorough analysis of the causes of any service failure, the Nursing Home shall inform the concerned user of the results of the analysis and of any measures adopted to prevent the recurrence of such failure.

Issuance of Copies of Medical Records and Other Healthcare Documentation
The Medical Record is the property of the Nursing Home and constitutes a non-disposable institutional asset.

It is a healthcare document subject to official confidentiality and professional secrecy and is governed by legislation on the protection of personal data (Legislative Decree No. 196/2003 – Personal Data Protection Code).

The Healthcare Directorate, within seven days of receiving a formal request from entitled parties, in compliance with the regulations governing access to administrative documents and the provisions set out in the Personal Data Protection Code (Legislative Decree of 30 June 2003, No. 196), shall provide the available healthcare documentation relating to the patient.

Satisfaction Questionnaires
The Nursing Home ensures that users are given the opportunity to express their opinion on the quality of the services, facilities and care received by completing specific questionnaires aimed at assessing user satisfaction and identifying actions and solutions to improve the efficiency and quality of the services provided.

The questionnaire is issued at the time of admission, and users are encouraged to complete it and place it in the designated collection box located at the Information Desk.

Participation Committee within the Residential Healthcare Facility (RSA)
Within the Residential Healthcare Facilities (RSA), a Participation Committee is established, composed of representatives of residents, their families, volunteer associations, and the most representative pensioners' trade union at provincial level. Its role includes contributing to the planning, management, and monitoring of activities within the facility. The Committee meets twice a year.

Access to User Protection Organisations
The Nursing Home guarantees its users the possibility to access user representative associations, which it consults for the definition of its objectives in terms of management, monitoring, and improvement of care services.

Below are the contact details of two associations most active in the local area:
• **Healthcare Observatory (Osservatorio Sanità)**
Via Orazio, 3 – 00193 Rome
Tel. +39 06 3244684 – Fax +39 06 3203259
Email: info@osservatoriosanita.com
Website: www.osservatoriosanita.com

• **Cittadinanzattiva** (Active Citizenship Association) – Via Flaminia, 53 – 00196 Rome – Tel. +39 06 3671 81 – Fax +39 06 3671 8333

2. HOSPITAL ADMISSION
POST-ACUTE LONG-TERM CARE

2.1 Admission Procedures

Admissions are arranged through the Admissions Office (Tel. +39 06 52355376 / +39 06 52360378), which operates from 8:30 a.m. to 7:00 p.m., Monday to Friday, and from 8:30 a.m. to 3:30 p.m. on Saturdays.

For the management of waiting lists, please refer to the relevant procedure.

Medical Long-Term Care

This service is intended for the admission of patients with conditions or impairments requiring prolonged medical and nursing care, with particular reference to age-related pathologies.

The Head of the Unit is Dr Carlo Bellomi.

Patients and their relatives may request meetings directly with physicians and the nursing coordinator for any need, in addition to the established procedures for suggestions and complaints.

- **Admission to Post-Acute Long-Term Care**

The following documentation is required:

- referral for admission from another public or accredited private acute care facility;
- Regional Health Card with the regional health identification code issued by the competent Local Health Authority (ASL);
- identity document;
- tax identification number card (Codice Fiscale);
- clinical documentation relating to the period prior to admission (medical records, diagnostic reports, laboratory test results, etc.).

RSA R2 (Residential Healthcare Facility – Level 2)

RSA R2 is a residential healthcare facility classified as a **high-level care facility (third level)**, consisting of safe and comfortable environments and equipped with structural and technological requirements compliant with current legislation.

It provides accommodation, healthcare services, assistance, functional rehabilitation, and social integration, as well as the prevention of functional deterioration in patients with chronic conditions who cannot be adequately cared for at home.

Within the facility, a dignified quality of life is ensured, in full respect of the right to privacy, while promoting individuality, independence, and the preservation of residual self-care abilities.

The Head of the Unit is Dr Claudio Maria Nati.

Active participation of patients and their families in the care pathway is ensured during the preparation and periodic updating of the Individual Care Plan, according to a predefined schedule.

Patients and their relatives may request meetings directly with physicians and the nursing coordinator for any need, in addition to the established procedures for suggestions and complaints.

- **Admission to RSA:**

The following documentation is required:

- certification issued by the ASL Assessment Unit (Unità Valutativa della ASL);
- declaration of financial commitment (cost coverage);
- Regional Health Card with the regional health identification code issued by the competent Local Health Authority (ASL);
- identity document;
- tax identification number card (Codice Fiscale);
- clinical documentation relating to the period prior to admission (medical records, diagnostic reports, laboratory test results, etc.).

Admission is arranged based on registration on the waiting list held by the C.A.D. (Home Care District Service) of ASL Rome D, District 2 (Tel. +39 06 56483950–951).

RSA R1 (Residential Healthcare Facility – Level 1)

RSA R1 is a facility that provides:

- Extra-hospital residential care with a high level of healthcare intensity;
- Intensive residential treatments for care, rehabilitation and functional maintenance, requiring a high level of healthcare and assistance, aimed at patients with non-acute conditions.

Admission procedures are essentially the same as those for RSA R2.

The Head of the Unit is Dr Claudio Maria Nati.

Active participation of patients and their families in the care pathway is ensured during the preparation and periodic updating of the Individual Care Plan, according to a predefined schedule.

Patients and their relatives may request meetings directly with physicians and the nursing coordinator for any need, in addition to the established procedures for suggestions and complaints.

RESIDENTIAL PALLIATIVE CARE CENTRE (HOSPICE)

This is a residential and home-based service providing temporary inpatient care for patients suffering from progressive and advanced diseases with rapid progression and poor prognosis, for whom any therapy aimed at cure or stabilisation of the disease is no longer possible or appropriate. It is particularly intended for patients with terminal neoplastic (oncological) conditions who require palliative care and support.

Admission procedures require a referral request from a hospital physician or a General Practitioner (GP), followed by approval from the ASL Assessment Unit (Local Health Authority).

All requests are entered into a waiting list, which includes patients eligible for admission based on chronological order.

Eligibility criteria are always respected; however, the complexity of the clinical condition is a determining factor.

In cases of equal clinical complexity, priority is given to:

- patients at home rather than hospitalised patients;
- patients without family support or with limited family support;
- patients lacking extra-family social support;
- patients experiencing economic hardship;
- patients with psychological distress.

The Head of the Unit is Dr Adele Linguanti.

Patients and their families may request meetings directly with physicians and the nursing coordinator for any need, in addition to the established procedures for suggestions and complaints.

CONTINUOUS-CARE ADMISSIONS FOR ACUTE CONDITIONS

- General Medicine
- Geriatrics

Admission procedures comply with current regulations and include, among others, the following access methods:

- admission from home with referral from a General Practitioner (MMG – Medico di Medicina Generale) or a physician of the National Health Service (SSN – Servizio Sanitario Nazionale);
- transfer from public or accredited private hospital wards other than General Medicine and Geriatrics;
- transfer from the Emergency Department and OBI (Short-Stay Observation Unit – Osservazione Breve Intensiva).

The Head of the Unit is Dr Maria Luisa Polito.

Patients and their families may request meetings directly with physicians and the nursing coordinator for any need, in addition to the established procedures for suggestions and complaints.

2.2 Accommodation and Hotel Services

Patient rooms, with the exception of those in the Hospice (all single rooms with en-suite bathroom facilities), have a capacity ranging from one to four beds and are furnished with equipment and aids suitable for the needs of patients and residential guests; most rooms are equipped with private bathroom facilities.

All requirements set out by current regulations are complied with, including those relating to architectural barriers, fire prevention systems, waste disposal, cleaning, and environmental sanitation.

2.3 Meal Service

Catering services are outsourced to an external provider.
Breakfast is served from 8:30 a.m. to 9:00 a.m.
Lunch from 12:00 p.m. to 12:30 p.m.
Dinner from 6 p.m. to 6:30 p.m.
For clinical needs, special diets will be provided upon medical prescription.

2.4 Use of Sanitary Facilities

Most inpatient rooms are equipped with private bathroom facilities. In addition, each inpatient floor includes at least one bathroom accessible to persons with disabilities, one designated for staff, and one designated for the public.

2.5 Purchase of Newspapers, Beverages, etc.

The café is located in the main entrance hall of the clinic and is open approximately from 6:45 a.m. to 7:00 p.m. every day, including Sundays.

Newspapers and other small necessities may be requested from the facility staff.

2.6 Use of Telephone

For patients who require it, a tablet is available to make telephone and/or video calls.

2.7 Medical Examinations, Diagnostic Tests and Therapeutic Treatments

Medical examinations, diagnostic tests, and certain therapeutic treatments are carried out daily. Physiotherapy and rehabilitation treatments (fisiokinesitherapy) are performed in specially equipped areas located on the services floor and within the wards.

2.8 Visits by Family Members

Visiting hours for patients admitted to post-acute long-term care, General Medicine and Geriatrics wards are as follows:

- every day from 3:30 p.m. to 5:30 p.m.;
- Sundays and public holidays from 10:30 a.m. to 11:30 a.m.

Any exceptions to these hours must be authorised by the Healthcare Directorate, subject to approval by the ward physicians.
In **RSA (Residential Healthcare Facilities)**, access is permitted throughout daytime hours, and in the **Hospice**, access is permitted 24 hours a day.
The number of visitors must not disturb other patients in the room. In accordance with current regulations, children under 12 years of age are not permitted to visit, except in the Hospice ward.

2.9 Personal Care and Life within the Ward

Psychological, Social and Religious Support

Psychology Service
The psychologist–psychotherapist provides consultancy services (clinical assessment) and takes charge of patients and their caregivers. The service assesses patients' expectations regarding admission and their perceived quality of care.

The psychologist coordinates programmes aimed at ensuring the quality of relationships between healthcare professionals, patients and their caregivers. The psychologist–psychotherapist also manages end-of-life support pathways, involving both patients and their families, helping them to gradually develop greater awareness of the diagnosis and prognosis.

The service can be activated by telephone or by email at: serv.psicologia.merryhouse@gmail.com

Social Workers

They assist inpatients in addressing social, family or behavioural issues. They also deal with matters relating to administrative procedures (contacts with public offices, applications for aids and prostheses, civil disability procedures, etc.). They facilitate access to volunteer associations.

Requests for the intervention of a Social Worker may be made through ward staff or at the Information Desk/switchboard.

Religious Assistance

Inpatients may receive spiritual assistance from a Catholic priest or religious minister within the facility. For patients of non-Catholic faiths, and where spiritual support is requested, the Healthcare Directorate may contact representatives of other religions.

Hairdresser, Barber, Podiatrist

Qualified personnel are available, upon request, within the facility to provide hairdressing, barbering and podiatry services, in order to meet aesthetic and care-related needs during the period of hospitalisation.

Furnishings and Linen

Standard furnishings include: a bed complete with mattress and pillows; bedside table, chair, and wardrobe, all selected according to criteria of functionality, hygiene, and familiarity of materials.

The facility provides bed linen and towels, ensuring their regular maintenance and sanitation.

Personal Clothing and Laundry Service

Appropriate clothing for admission includes cotton T-shirts, tracksuit tops and trousers or pyjamas, socks, and comfortable, low shoes that are easy to fasten.

A laundry service managed by a private company collects, washes, irons, and returns garments to patients. Any communication or issue concerning this service must be handled directly between the client and the laundry provider.

For hygiene reasons, soiled laundry may be kept in the ward for a maximum of 24 hours; beyond this period it will be sent to the above-mentioned laundry service.

For this reason, patients' relatives or the patients themselves are requested to enter into a contract with the company for the service or, alternatively, to collect soiled laundry on a daily basis.

Leave Permits

Inpatients may be authorised to leave the facility, subject to approval by the ward physicians, in accordance with the general provisions issued by the Region and the Local Health Authority (ASL).

Transfusion Service

With regard to transfusion services, the Nursing Home relies on the Blood Transfusion Centre of the San Camillo–Forlanini Hospital Trust (Azienda Ospedaliera San Camillo–Forlanini) for the General Medicine, Geriatrics and Long-Term Care Units, and on the service provided by G. B. Grassi Hospital for the Hospice.

Information on Organ Donation

Although the facility is not specifically designated for organ donation, the Nursing Home informs users about the possibility of becoming organ donors.

Further information can be obtained from the following organisations:

- **AIDO Rome (Italian Association for Organ, Tissue and Cell Donation)**
  Via S. Pellico, 9 – 00195 Rome
  Postal Account No. 27387000
  Tel. +39 06 3728139 – Fax +39 06 37354028
  Email: aido-arcobaleno@libero.it
- **Lazio Regional Transplant Agency (Agenzia Regionale del Lazio per i Trapianti e le Patologie Connesse)**
  Technical and Operational Office (for information):
  Via dell'Archiginnasio s.n.c., Casale 11 – 00133 Rome
  Tel. +39 06 454848 – Fax +39 06 45484855

Code of Conduct

In order to ensure the optimal functioning of the facility and harmonious cohabitation among patients, all individuals—both inpatients and visitors—are required to comply with the following rules:

□ Smoking is strictly prohibited in all wards and services, in accordance with current regulations;
□ It is forbidden to bring food, beverages or medications from outside without the consent of the Head Nurse;
□ Television or radio devices must be used at a low volume;
□ Cleanliness and order must be maintained in patient rooms;
□ Valuables or large sums of money should not be kept in patient rooms, as the facility cannot guarantee their safety and shall not be held liable in case of loss or theft;
□ Visitors must avoid interfering with care activities (medical examinations, treatments, etc.), comply with visiting hours, and cooperate with staff.

2.10 Ward Staff

All professional healthcare and non-healthcare staff required under current regulations operate within the Nursing Home. In particular, they carry out their duties in accordance with general and specific care principles and include:

- general practitioners and specialist physicians in the various relevant fields;
- coordinators;
- nurses;
- healthcare support workers (OTA – Operatori Tecnici dell’Assistenza);
- physiotherapists;
- psychologist–psychotherapist;
- dietitian;
- social worker;
- professional educators;
- auxiliary staff.

Ward physicians are present on all working days; an internal on-call medical service (guardia medica) is active during the night and on public holidays.

The Head of the Healthcare Directorate is Dr Francesco Quirini Zannini.
The Head of Administration is Dr Chiara Veroni.

2.11 Discharge and Delivery of Medical Records

Upon discharge, a report will be provided indicating the diagnostic procedures performed during hospitalisation, the clinical conclusions, and the ongoing therapy.

A copy of the Medical Record is issued by the Healthcare Directorate to entitled parties in accordance with the timeframes and procedures established by law.

3 SPECIALIST AND DIAGNOSTIC SERVICES

3.1 Access to the Facility

The Outpatient Admissions Office, medical consulting rooms and areas designated for the provision of services are located on the services floor of the Nursing Home. They can be easily accessed from the main entrance of the facility by using the lifts or stairs.

3.2 Booking of Services

Outpatient consultations are provided both to patients already under care at the Clinic and to "new" patients referred by their General Practitioner or requesting a specialist consultation.

Appointments can be scheduled in person at the Outpatient Admissions Office or by telephone through the administrative office. At the time of booking, patients are informed of the date of the diagnostic test and the expected timeframe for the delivery of reports.

Booking hours are as follows:

- Monday to Friday: 9:00 a.m. – 1:00 p.m. and 2:00 p.m. – 8:00 p.m.
- Saturday: 8:00 a.m. – 2:00 p.m.

Telephone numbers for booking: **+39 06 52357014** or **+39 06 52368753**

Regional single booking center: 069939

3.3 Eligibility

All outpatient diagnostic, therapeutic, and/or rehabilitative services and procedures may also be provided to individuals under the age of fourteen, subject to safety and consent requirements, which each professional will assess on a case-by-case basis.

The outpatient clinic guarantees the provision of all listed specialist visits and the performance of basic diagnostic, instrumental, and therapeutic procedures. Advanced procedures (e.g., polypectomy of large polyps, advanced dental surgery) and all procedures deemed, at the physician's discretion, to be considered high-risk are excluded.

3.4 Registration and Payment of the Co-payment (Ticket)

Presentation of the referral issued by the treating physician (General Practitioner), registration, and payment of the co-payment (ticket) are carried out on the day of the consultation or outpatient service.

3.5 Waiting Area and Sanitary Facilities

In the areas immediately adjacent to the Outpatient Admissions Office, a large waiting room has been arranged where patients and accompanying persons may wait for the provision of services.

A few metres from the waiting room, sanitary facilities are available for patients and the general public, with separate toilets for men, women, and persons with disabilities.

3.6 Services Provided

Accredited Specialties

General Surgery
Orthopaedics and Traumatology
Urology
Diagnostic Radiology
Physical Medicine, Rehabilitation and FKT (Fisiokinesitherapy – Physical and Rehabilitation Therapy)
Gastroenterology and Digestive Endoscopy (PURSUANT TO ACCREDITATION EVALUATION)
Dentistry and Odontostomatology (UNDER ACCREDITATION EVALUATION)

Non-Accredited Specialties

Cardiology, Respiratory and Cardiovascular Pathophysiology
Vascular Surgery – Angiology
Outpatient Surgery
Dietetics
Ultrasound
Echo-Doppler
Endocrinology, Diabetology
Respiratory and Cardiovascular Pathophysiology
Gastroenterology – Digestive Surgery and Endoscopy
Geriatrics (including monitoring service for patients undergoing **OAT (Oral Anticoagulant Therapy – TAO)**) and General Medicine
Clinical Analysis Laboratory
Nephrology
Neurology
Ophthalmology
Dentistry and Stomatology
Oncology
Obstetrics and Gynaecology
Otorhinolaryngology (ENT)
Psychology
Rheumatology
Cardiocirculatory Rehabilitation
Neurological Rehabilitation
Respiratory Rehabilitation
Motor and Neuromotor Rehabilitation
Physical Therapy
The complete schedule of fees for services is available at the Outpatient Admissions Office.

3.7 Accompaniment of Relatives

Relatives accompanying outpatient patients may wait in the designated waiting area during the provision of services or, where permitted by operational conditions and subject to the physician’s approval, may accompany the patient during the procedure.

3.8 Requesting and submitting medical records and accessing reports

At the end of specialist visits, specific documentation is issued that outlines the diagnostic approach, treatment recommendations, any follow-up recommendations, continuity of care, and health promotion.

For instrumental tests, reports are often issued within minutes of the examination. Otherwise, they will be available at the admissions office within a few days, and in any case within a week of the examination.

Histology and/or cytology reports only are expected to be delivered within two weeks.

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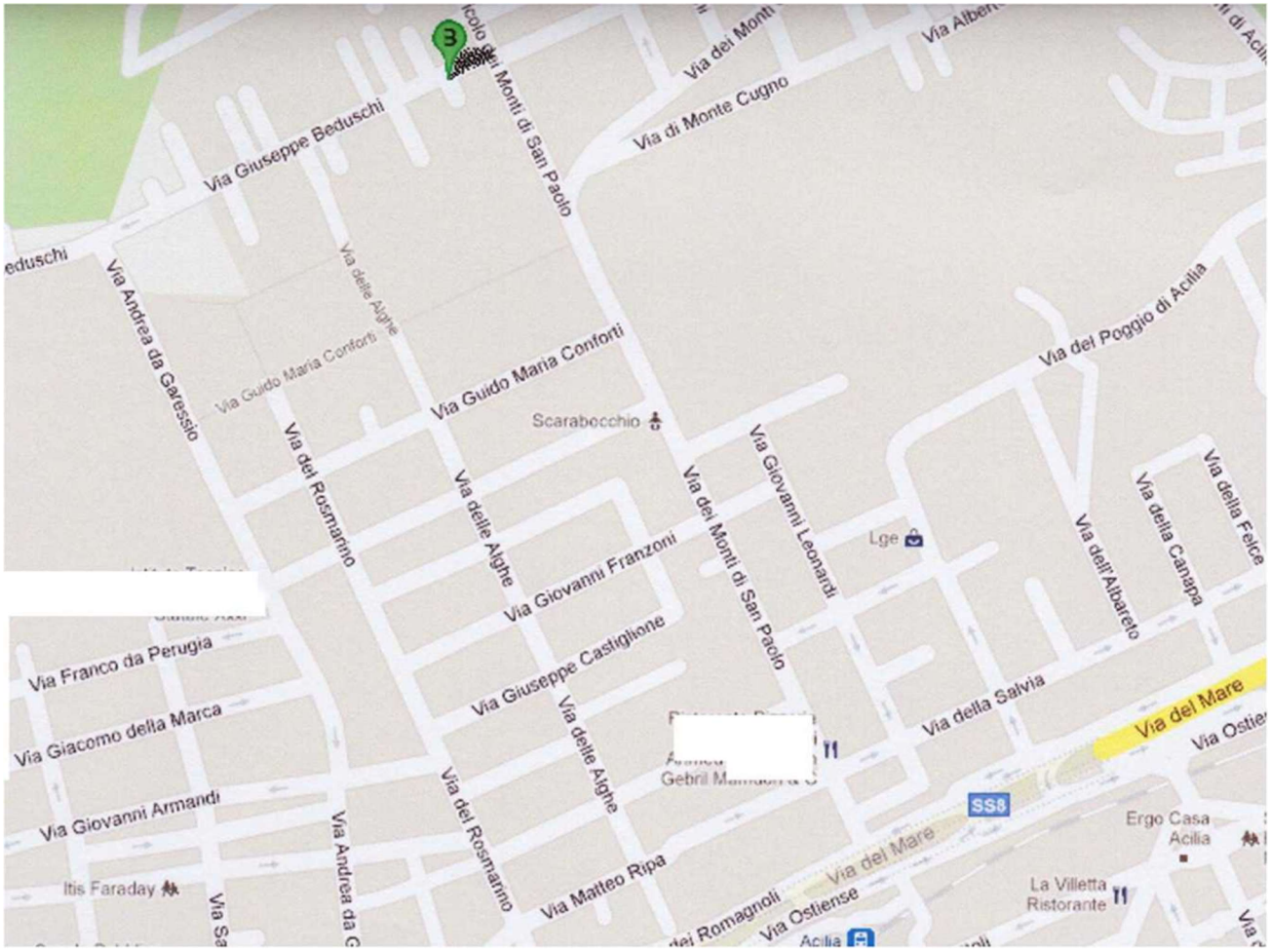
This document has been prepared with the contribution of the Healthcare and Nursing Directorates, as well as the heads of the organisational units, with the involvement of internal staff and associations representing service users (citizens/patients).



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