A.FLEMING

DIAGNOSTIC CENTRE

Via Edificio Scolastico, snc - 04022
Fondi LT

Tel 0771 513574 Fax 0771 511740

ISO 9001:2015 certified

quality system

Accredited with the Regional Health Service - DCA U00459/12

SERVICE CHARTER

Rev.12 dated 23 January 2026

Foreword

The corporate policy of Fleming Diagnostic Centre has as its primary objective the full satisfaction of its users' expectations. This document, hereinafter referred to as the Service Charter, constitutes a written agreement with users regarding the quality of the services offered by the Centre, with the aim of enabling a clear and proper relationship with the customer. The Service Charter is drawn up in accordance with the provisions of Prime Ministerial Decree (DPCM) of 19.05.1995 and Decree of the Acting Commissioner of 6 October 2014, no. U00311, "Guidelines for the Preparation of the Healthcare Service Charter of Healthcare Companies and Facilities of the Lazio Region".

Mission

We are able to carry out targeted work, tailored to the specific needs of each person or company, so as to put into writing what is worth remembering.
The final product is a record that enriches the history handed down through generations.

Our purpose, while respecting the identity of our institution, is to ensure good-quality, safe, effective, patient-centred, timely, efficient and equitable care; we aim to educate staff to be responsive and, better still, able to anticipate patients' needs.

In this laboratory, healthcare and administrative staff are fully available to assist you with any problem; they will provide the necessary information, listen to your questions and comments, and seek to simplify procedures as much as possible.

The cooperation and willingness we ask of you are essential for the services to operate as effectively as possible and, therefore, to resolve your problems in the shortest possible time and in the most appropriate manner.

Fundamental principles

A. Fleming Diagnostic Centre S.r.l. undertakes to provide a service that complies in all respects with the principles set out below and, on their basis, intends to implement its improvement projects so as to increasingly meet citizens' expectations and needs.

In carrying out its duties, the facility is guided by respect for the fundamental principles contained in the Directive of the President of the Council of Ministers of 27.01.1994 (concerning "Principles for the provision of Public Services"):

Equality and impartiality

The Laboratory undertakes to provide equal services to all citizens, regardless of age, sex, race, language, nationality, religion, political opinions, customs, physical condition, psychological condition or financial condition.

Respect

The Laboratory assists users with care, courtesy and attention, respecting the person and their dignity.

Continuity

The Laboratory ensures citizens the quantitative and qualitative continuity and regularity of services.

Right to choose

Any citizen holding a request from a National Health Service physician on the national prescription form may exercise the right of "free choice" by applying directly to the accredited Facility of their choice.

Participation

The Laboratory guarantees citizens the right to contribute, through comments and suggestions, to the proper provision of the service and to the improvement of the service provided by the Facility.

Efficiency and effectiveness

The Laboratory pursues continuous quality improvement in order to ensure the efficiency and effectiveness of the service provided; the Facility also adopts appropriate measures to achieve these objectives.

Corporate quality policy

Achieving the highest quality of the service provided to users is at the heart of corporate policy. To this end, the Centre has undertaken to adapt its organizational system to the actual needs expressed by users. In pursuing this objective, the Centre has chosen to adopt a quality control system compliant with the requirements of UNI EN ISO 9001:2015, certified
by CSQ.



The main features of this quality system include, among others:

- Involvement of all staff in quality improvement.
- Guarantee of identification of biological samples at every stage of the process through computerized procedures.
- Validation of results by highly trained personnel with extensive experience in the field.
- Continuous internal quality controls on all diagnostic processes.
- Periodic updating of staff professional skills through accredited Continuing Medical Education (ECM) training courses.
- Periodic external quality controls by a third party (Randox RIQAS).
- Periodic audits of the corporate quality system by a third party (CSQ).

Service quality standards relate to two main areas:

- Formal service quality: reception, assistance, transparency and courtesy are the main determinants of the relationship between this Centre's staff and customers. The Service Charter, together with other tools made available to customers and staff, enables the pursuit of a transparent corporate policy aimed at the continuous improvement of formal service quality.
- Substantive service quality: reliability, quality, precision, confidentiality, timeliness and flexibility are distinctive aspects of the activities of Fleming Diagnostic Centre. Accordingly, the corporate policy includes among its main objectives the continuous improvement of substantive service quality, with the aim of achieving complete user satisfaction.

Users may submit a complaint in order to address any service failures that breach the principles and standards set out in the Service Charter. The Centre, aware that improving service quality means bringing it into line with users' expectations, intends to conduct periodic surveys to learn how users evaluate it. Questionnaires are available on the premises, allowing users to express their assessments anonymously and provide suggestions for making services more responsive to their needs.

The reception office is available to users for any clarification from Monday to Friday, from 7:30 a.m. to 12:30 p.m. and from 4:00 p.m. to 7:00 p.m., and on Saturday from 7:30 a.m. to 12:30 p.m.

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Responsible Director Dr
Attilio Parisella

Presentation of the Centre



Fleming Diagnostic Centre S.r.l. serves a catchment area of approximately 100,000 inhabitants, within a radius of about 30 km, covering the lower part of the Province of Latina.

The Centre performs clinical chemistry, bacteriological and hormonal analyses and has over 30 years of experience.

On 27.12.2017 the facility joined the "Rete Diagnostica Ulisse" laboratory aggregation.

The facilities belonging to "Rete Diagnostica Ulisse" collaborate on the basis of a common programme concerning the performance of accredited laboratory tests, with high quality standards and innovation criteria. The common objectives are to promote and improve organizational and technological standards in order to achieve analytical standardization, comparability of results arising from the services performed, and harmonization of reference values and interpretative criteria which, in line with the relevant sector legislation, make it possible to reach the performance threshold indicated as one of the efficiency requirements for the services offered within relations with the Regional Health Service.

For particularly rare tests that are not performed directly by the Network, our laboratory makes use of external Accredited laboratories.

The proper operation of the facility is ensured by various professional roles, including:

- Company Director: Dr Attilio Parisella
- Medical Director: Dr Stefano Molfetta
- Laboratory Director: Dr Attilio Parisella
- Legal Contact Person: Dr Attilio Parisella Overall, the Centre relies on the expertise of:
- 2 Biologists

- 2 Chemists
- 2 Physicians
- 2 Registered Nurses
- 4 Laboratory Technicians
- 5 Administrative Staff

All staff can be identified by their identification badge as required by Prime Ministerial Decree (DPCM) of 19.05.1995.

Structural features

Overall, the Centre occupies an area of approximately 308 sq m, divided into:

- Reception area.
- Air-conditioned waiting room with 18 seats.
- Blood collection room.
- Public toilets.
- Administration.
- Haematology section.
- Clinical chemistry and toxicology section.
- Microbiology and parasitology section.
- Radioimmunology and allergology section.
- Staff toilets.

Where we are

A. Fleming Diagnostic Centre is located in Fondi (LT), Via Edificio Scolastico snc, in the central area of the town, easily accessible not only to users from Fondi but also to those living in the province. Thanks to good transport links, it can also be reached by public transport and is approximately 3 km from Fondi-Sperlonga railway station.



Access to services

Users have free access to the laboratory, with no numerical limit and/or booking requirement. The Centre is open Monday to Friday from 7:15 a.m. to 1:00 p.m. and from 4:00 p.m. to 7:00 p.m., and Saturday from 7:15 a.m. to 1:30 p.m. Patient registration for tests is available Monday to Saturday, from 7:30 a.m. to 10:00 a.m. Except for certain special services that may require sample collection on specified days, as indicated below, no advance booking is required.



In order to ensure the orderly performance of operations, users are required to follow a predetermined registration process. Under normal conditions and depending on patient flow, the process takes between 5 and 30 minutes. Users are reminded that certain categories of patients are entitled to priority access to the blood collection room.

A ticket dispenser with sequential numbers is available at the entrance to the Centre. In order to use the services offered, users must take one number per patient. The sequential number ensures orderly access to services in full compliance with privacy. The information necessary to guarantee the patient's right to information is displayed in the waiting room.

Administrative registration

Near the entrance, users have two stations available for administrative registration. The order of access is regulated by queue numbers. Upon presentation of a medical prescription or simply at the user's request, staff record the user's data and testing requirements, request payment for the service and/or any applicable co-payment, and provide administrative information to users. Pursuant to current privacy legislation on the processing of sensitive data, users are required, in order to access the service, to sign the consent form for processing.

At the end of registration, the patient is entitled to receive an invoice for the amount paid, a slip indicating the date for collection of the report and, upon request, a certificate justifying absence from work. Possession of the collection slip entitles the patient to collect the report on the stated date; the slip may be used to authorize another person to collect the report.

To ensure respect for privacy, the reception areas are marked out on the floor. Administrative staff may under no circumstances accept biological samples from patients.

Administrative registration procedures are generally quick and simple. In order to meet customer needs, patients are asked to further simplify the process by bringing their tax code card or national health card and, in the case of patients exempt from payment of the co-payment, the relevant
exemption card. The exemption card, issued

by the competent Local Health Authority (ASL), entitles the user to obtain National Health Service services without paying any contribution (services not covered by the Regional Health Service remain subject to payment). Further information on the exemption card may be requested from administrative staff.

Agreements

A. Fleming Diagnostic Centre is accredited with:

- the Regional Health Service

Regional Health Service

The Clinical Chemistry Laboratory services are provided both under accreditation with the Regional Health Service and on a private basis. In order to receive services under the agreement, the Patient must attend with:

- a referral completed in all applicable fields by the General Practitioner
- their health card and tax code.

where applicable, the General Practitioner must enter the exemption code in the appropriate field.

Attention

- No more than 8 tests per specialist branch may be requested on each referral.
- The General Practitioner is required to enter on the prescription/referral:
  - patient's first name – surname – age – tax code
  - any exemption code
  - requested services (indicating "suggested" in the case of a specialist prescription)
  - date - stamp and signature of the Physician.
- The fee schedule applied to non-exempt Patients is published by the Lazio Region.
- Payment of the co-payment and specialist services must be made before

  the services are provided.
- Non-exempt citizens are required to pay for specialist laboratory services according to the applicable rates, up to the amount provided for by the legislation in force.

Payment for services

Payment for laboratory medicine services must, except in special cases, be made before the service is provided. Non-exempt citizens are required to pay for services according to the applicable rates, which are the same as those of

public facilities.

For private-pay services, the relevant fee schedule is available to users at the facility's reception desk.

Administrative staff are available to provide any clarification and are authorized to collect payments and issue the corresponding invoice. Payments may be made by:

- cash;
- debit card;
- credit card;
- cheque;
- bank transfer.

Healthcare Cost-Sharing Table

User Classification	Cost of services	Physician prescription required General Practitioner	Co-payment
Non-exempt	Referral costing less than € 36.15 (NHS fee schedule)	Yes	Application of the NHS fee schedule up to € 36.15 + the fixed charge for the prescription
Non-exempt	Referral costing more than € 36.15 (NHS fee schedule)	Yes	The amount exceeding € 36.15 is charged to the NHS
Partial exemption	Any amount relating to the exemption code	Yes	The Customer does not pay for the requested services, excluding analyses not provided by the NHS
Full exemption	Any amount relating to the exemption code	Yes	As above
Pregnancy exemption	Any amount relating to the exemption code	Yes	As above

Exemption criteria

The following are exempt:

1. Citizens under 6 years of age or over 65 years of age belonging to a household with total income below € 36,157.00, with reference to the previous year.
2. Citizens who are currently unemployed and belong to households with income below € 8,263.00, increased up to € 11,362.00 where there is a dependent spouse, plus a further € 516.00 for each dependent child.
3. Recipients of social pensions (category ps), over 60 and under 65 years of age and belonging to a household whose income for the previous year is below € 8,263.00, increased up to € 11,362.00 where there is a dependent spouse, plus a further € 516.00 for each dependent child.
4. Italian or foreign citizens considered "indigent" pursuant to paragraph 6 - Article 3 of Law no. 335/95, with total monthly income not exceeding € 292.00.
5. Dependent family members of the Citizen User referred to in points 2 – 4
6. DCA (Decree of the Acting Commissioner of the Lazio Region) no. U00158/2014 introduced new exemption codes concerning:
   - minors under 18 years of age placed outside their families of origin following an order of the Judicial Authority;
   - Citizens of countries outside the European Union who are applicants for international protection and hold a residence permit, receipt or nominative EC form issued by the Police Headquarters;
   - EU citizens who are neither registered nor eligible for registration with the Regional Health Service, without healthcare coverage, holding an ENI card, and under 6 or over 65 years of age;

Foreign citizens from countries outside the European Union who are not in compliance with rules on entry and residence, holding an STP card, and under 6 or over 65 years of age.

Collection of biological samples

After completing the administrative procedures, the user takes a seat in the waiting room and waits for their patient number to be called by the automated voice system. Frail patients such as, for example:

- Children
- Persons with disabilities
- High-risk pregnant women
- Patients undergoing chemotherapy

may request priority access at registration; this will be granted, compatibly with the needs of other patients, at the discretion of the person responsible for the blood collection room.



To comply with requests for priority access, reception staff inform the phlebotomist of the need for the patient to be admitted early to the blood collection room.

When called by the automated voice system, the patient may enter the blood collection room. Within the limits imposed by the necessary medical procedures, the Centre undertakes to make sample collection quick and comfortable. As part of the corporate quality policy, blood collection room staff ensure that the patient is put at ease, is properly informed about the medical procedures to be carried out and that their confidentiality is respected at all times. Certain special services may require the administration of medication to the patient: in such cases, the facility's physician obtains all information necessary to ensure the correct and safe performance of the test. At this stage the patient is informed about the purpose, method and any risks of administration. The Centre therefore requires the patient to provide written consent to administration.

The patient has the right, upon simple request, to receive medical and analytical information about the tests requested. If necessary, after sample collection the patient is observed by the Physician for a few minutes to verify that pressure has been correctly applied and to rule out the onset of any clinical complications (dizziness, fainting or other conditions).

Patients who only need to deliver urine and/or stool biological samples may, with due respect for privacy and the needs of other patients, wait near the blood collection room for an invitation from the phlebotomist to hand over the samples before the turn indicated by the sequential numbering.

Service characteristics

The Centre offers an extremely wide and continuously updated range of specialist diagnostic services. The list of all services provided by the facility (available services), as well as the complete list of analyses sent to external service laboratories, are displayed at the reception desk for easy consultation by users. The quality of the services provided is constantly monitored through control of every stage of the processes.

Delivery of reports

Within the limits imposed by analytical techniques and the need to verify results, the Centre undertakes to produce reports promptly. The list of available services
provides an updated indication of the total average



reporting time. Delivery of reports, depending on the type of tests requested, follows an internal work schedule and takes on average:

- 1 - 2 days for routine tests.
- 2 - 5 days for bacteriological, hormonal tests, etc.
- 5 - 10 days for specialist tests.

At the end of the registration procedures, patients are given a report collection slip showing the collection date. Reports may be collected Monday to Friday from 4:00 p.m. to 7:00 p.m. and on Saturday from 10:00 a.m. to 12:30 p.m. By prior agreement with reception staff, reports may also be collected in the morning on other days upon presentation of the report collection slip; in these cases, the ordinary registration queue must be observed. At the time of collection, staff request an identity document. The report may be collected only by the person concerned or by their authorized representative, with the exception of HIV and medical genetics reports, which must be delivered exclusively to the person concerned. A trusted person may be authorized provided that they have a personal identity document and the specific form supplied by reception staff at registration, duly completed. The report will be delivered in accordance with EU Regulation 679/2016 for the protection of privacy.
Reports for tests such as HIV and medical genetics may be collected only by the person concerned.

Reception staff are available to arrange for the report to be sent by fax.

In the event of abnormal test results reaching alert values, the Technical Director or their delegate will notify the patient or the General Practitioner.

Clarifications and explanations may be obtained by making an appointment with the Technical Director; the Technical Director is also available to the General Practitioner to discuss test results where necessary.

Request for urgent tests

Where there are urgent requests from the General Practitioner or requests otherwise adequately substantiated, the Centre undertakes to deliver the report within the shortest technically possible time. For example, from Monday to Friday, by prior agreement with reception staff, specific profiles may be performed including complete blood count, blood glucose, ESR, serum electrolytes or any other tests, whose
reports will be delivered the same morning. Patients

on anticoagulant therapy may generally collect their PT results in the late morning or early afternoon.

For other urgent requests, patients may contact reception staff who, after consulting laboratory staff, will be available to determine the collection date. Most tests performed at the laboratory can be reported within 24 hours, where there is a valid medical need.

Under urgent conditions, many tests forming part of common checks can be reported within a few hours of sample collection.

Home sample collection

Patients who have had samples collected at home may deliver the relevant specimens in the same manner as other patients, including through an authorized representative. It is advisable to contact the laboratory in advance to learn the exact collection methods for the biological samples required. The list of available tests nevertheless enables a registered nurse to determine the type and collection method of the samples required for each test. The report will be annotated accordingly.

Patient protection

A dedicated box is available in the waiting room for submission of a questionnaire made available to users to assess satisfaction with the service.

The patient may also submit a complaint, which will be reviewed by management; if the complaint is not submitted anonymously, management undertakes to provide a response within 15 days.

The laboratory recognizes the existence of patient rights in accordance with the “European Charter of Patients' Rights”. These rights are summarized in the Charter of Rights, available at reception. Laboratory staff are required to safeguard these rights.

A patient who believes that their rights have been infringed may submit a complaint or contact an association for the protection of patients' rights, such as, for example:

Humanization of care

Management has defined and formalized specific requirements concerning improvement of user reception and accessibility. The reception and

waiting areas for patients and accompanying persons have been designed taking into account users' different needs relating to age, gender and particular health conditions and physical and psychological frailty, as well as religious, ethnic and linguistic specificities, while respecting users' dignity.

With regard to user comfort, the blood collection room is equipped with a comfort chair with backrest, footrest and adjustable padded armrests.

Initiatives aimed at improving user reception and accessibility consist of making the following documents available at reception:

- Service Charter;
- Service Guide translated into English;
- Charter of Patients' Rights;
- Frail Patients Notice;
- Quality Policy;
- Organizational Chart.

Our Centre is required to receive customers/patients according to the principles of equality, impartiality, continuity, participation, transparency, efficiency and effectiveness.

Other useful contacts

Cittadinanza Attiva

www.cittadinanzattiva.it

The nearest office is located at:

PiT Latina

c/o S.M. Goretti Hospital - Via Guido Reni 1

Postcode 04100 Latina Tel 0773/655010 Fax 0773/655010

cittadinanzattivalt@libero.it

112 Carabinieri

113 State Police

114 Child Emergency Service

115 Fire Brigade

117 Financial Police

118 Medical Emergency

0771 7791 Formia Hospital

0771 660046 Municipal Police, Minturno

0773 602212 Civil Disability Office (Viale John Fitzgerald Kennedy - 04100 Latina)

800 016 600 Drogatel

Preparation for the test

In the days preceding sample collection, it is recommended to avoid intense physical activity and, as far as possible, stressful situations. Although not strictly necessary for all blood chemistry tests, fasting is prescribed, preferably for at least 8 hours (no more than 12 hours). During fasting, and preferably beforehand as well, smoking and the use of medications (anxiolytics, hypnotics, analgesics, anti-inflammatory drugs, anti-influenza drugs, vitamins) should be avoided where this is possible with the physician's consent. Except for certain specific tests, the meal preceding the fasting period should be of the usual composition, avoiding excesses and/or particular restrictions. The journey to the Blood Collection Centre should not involve physical exertion or sweating.

Centre staff are available to provide information on sample collection methods and patient preparation for blood or culture tests. All biological samples (urine, stool, sputum, semen, etc.) must be collected in sterile disposable containers, available from all pharmacies. For 24-hour urine tests, complete collection and correct storage are essential.

Rules for culture tests

During the five days preceding culture tests, the patient should avoid taking antibiotics and antifungal drugs, or in any event report any such use.

Dynamic tests

For certain specialist tests, it is advisable to contact reception in advance. These tests include:

- Glucose and/or insulin tolerance curve.
- TRH test for TSH and/or prolactin measurement.
- GnRH test for LH and FSH measurement.
- Tests at scheduled times for: ACTH, Aldosterone, Cortisol.

Urine examination

The patient must deliver, in a sterile disposable container, a small quantity of urine passed during the first urination of the morning.

Urine culture

This must be preceded by thorough cleansing of the external genitalia (wash with soap and water and rinse with plenty of water). The first portion of urine passed must be discarded, while the subsequent portion (midstream urine) must be collected directly into the appropriate sterile container available from pharmacies or obtainable from our Centre. The container must be filled no more than halfway, taking care not to touch its rim or inside, closed immediately and delivered to the laboratory as soon as possible. Before carrying out the test, the patient must not take antibiotics during the five days preceding collection.

24-hour urine

Suitable containers for 24-hour urine collection are generally available from pharmacies. Collection requires strict compliance with the following procedure:

- on the morning of the first day, discard the urine from the first urination, completely emptying the bladder. Note the time collection begins.
- from that point onward, carefully collect all urine passed over 24 hours (including urine passed during the night and the first urination of the second day).
- keep the container in a cool place during collection, preferably in the refrigerator, to avoid excessive bacterial growth.
- deliver the entire quantity of urine to the laboratory passed.

It is important that all urine be collected because the test result depends on the total quantity passed during the 24-hour period.

Stool tests

The sample must be collected in appropriate containers available from pharmacies or obtainable from our Centre. 5-10 grams (one teaspoon from the container) of fresh stool passed spontaneously are sufficient. It is advisable to collect a sample from the first bowel movement in the morning. Since some parasites are shed intermittently, for a correct result it is advisable to perform the parasitological examination on at least 3 stool samples collected on different days.

Scotch Tape Test

The search for pinworm eggs using the Scotch Tape Test requires, in the morning before personal hygiene,

application of a piece of transparent adhesive tape

to the anal folds. The tape must then be attached to a microscope slide supplied by the laboratory.

Occult blood test

A small stool sample must be collected in a dedicated stool container using the scoop attached to the lid. No special diet is required. It is not advisable to undergo the test in the presence of bleeding gums. The sample, stored in the refrigerator, may also be delivered to the laboratory at a later time.

Sputum collection

The patient must not have been on antibiotic therapy for at least five days. The sample must be collected in the morning while fasting and without brushing the teeth. After suitable coughing, sputum must be collected in a dedicated sterile wide-mouth screw-cap container available from pharmacies and brought to the laboratory within 2 hours. The sample must originate from the lower respiratory tract.

Swabs

Swabs can be performed every day. The patient must not have been on antibiotic or antifungal therapy for at least 5 days.

Seminal fluid

Collection must be preceded by thorough cleansing of the external genitalia. Collection must be performed by masturbation, using a sterile container (for urine), taking care not to contaminate the rim or inside of the container with the hands or genitals. The patient must not have been on antibiotic therapy for at least 5 days.

For semen analysis and sperm morphology, sexual intercourse must be avoided during the three days preceding collection. The sample must reach the laboratory within one hour of collection. The exact collection time must be noted on the container.

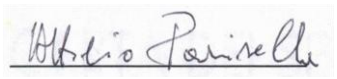
Main quality criteria in relations with users

The laboratory undertakes to adopt and maintain the following quality standards for the service provided, verifying their implementation and subjecting them to periodic review.
Fulfilment of the commitments undertaken is ensured through systematic data monitoring, six-monthly processing of questionnaires and reports (Customer Satisfaction), management of Non-Conformities and conduct of internal Audits, as provided for by the Quality Management System. The annual review of quality standards is posted on the notice board and may be viewed by users.

Quality criteria	Quality indicators	Quality standards	Verification tools	Results for year 2025
Reception, Guidance and Humanization of Care				
Information to users	Availability of the Service Charter and Service Guide.	The Service Charter and Service Guide are available at reception	Customer Satisfaction QMS	Service Guide available at reception
	Availability of notices containing information and directions for users	The notices are present in the area accessible to the public	Customer Satisfaction QMS	Notices available at reception
Guidance to users	Presence of the organizational chart available for users to view	Posted on the reception notice board	Customer Satisfaction QMS	Updated Organizational Chart available at reception
Organizational Chart	All facility staff wear an identification badge	Identification badge	Customer Satisfaction QMS	100% of staff wear an identification badge
Identification of staff				
Protection and listening to users				
Response to complaint	No. of days waiting from submission of the complaint to the response	Within 15 days	Six-monthly processing by the QMR and Management	No complaints received in 2025
Satisfaction surveys	No. of questionnaires collected out of number of users	> 10%	Six-monthly processing by the QMR and Management	Annual 10% target met
Completeness, clarity and transparency of information				
Registration and booking administrative procedures	Waiting times for registration and administrative procedures	Times < 30 min for at least 90% of registrations	Customer Satisfaction QMS	Waiting times below 15 minutes for 99% of registrations
Process control and continuous improvement				
Control of processes and continuous improvement	Positive internal audit outcome	Positive internal audit outcome	Internal Audits and Management Review	Positive audit Positive review

Quality criteria	Quality indicators	Quality standards	Verification tools	Results for year 2025
Waiting times for services and release of clinical documentation				
Sample collection operations	Compliance with average sample collection times	Average time under 20 minutes Average time under 3 days	Customer Satisfaction QMS	Average time approximately 15 minutes
Speed of reporting	Average reporting time	95% On-time deliveries Within 1 day	Customer Satisfaction QMS	Average time under 3 days
Delivery of Reports	Compliance with average response release times set out in the Service Charter		Customer Satisfaction QMS	99% of times met
Delivery of copy of Report	No. of days waiting from request for the report to delivery		Customer Satisfaction QMS	Times met
Provision of services				
Provision of services - effectiveness	No. of recalls due to our errors or incomplete information/service disruptions No. of days of equipment downtime due to extraordinary maintenance for faults	Max 0.1% of services performed max 3 equipment faults in one year	Count of no. of patients recalled Registration forms and maintenance intervention reports	< 100 patients recalled in 2025 No equipment downtime exceeding 24 working hours
Maintenance efficiency	No. of incorrect/incomplete orders	< 2	NC Register	No incomplete or incorrect orders
Purchasing management - accuracy				
Human Resources Management				
Staff training - competence	ECM for medical and healthcare technical staff	ECM credits defined by the Ministry of Health	Reports produced by the QMR on the basis of information obtained from certificates of attendance	Three-year count of ECM credits in progress
Staff training - competence	No. of courses dedicated to training	At least 2 courses in one year	Reports produced by the QMR on the basis of information obtained from certificates of attendance	4 training courses completed in 2025

Sole Director
Dr Attilio Parisella



Laboratory Technical Director
Dr Attilio Parisella

