

Primary medical care service

- Primary medical care over the phone
- Primary medical care clinics

This healthcare service is intended to integrate the medical assistance of GPs and pediatricians on the days and in the hours when they are absent, i.e., at night, on public holidays and days before holidays. It provides the same assistance as GPs and Pediatricians.

Phone calls to the primary medical care service are recorded to safeguard both the citizen and the Service. They are answered by the doctor in charge of the area. After collecting the patient's personal data, the doctor assesses the health problem and may:

1. Provide a relevant recommendation over the phone
2. Instruct the patient to arrange an outpatient examination
3. Decide that a home visit is appropriate

Primary medical care doctors can use the specific prescription pad (with the heading "*Servizio Continuità assistenziale*") to suggest an admission to the hospital, write a medical certificate for sick leave (max. 3 days), prescribe drugs for life-saving therapies so as to cover max. 48/72 hours. In most serious cases, the doctor will directly alert 118 so as to activate the ambulance service.

To access the service you need to call **the phone number relevant to your geographical area**.

The primary medical care service (former *Guardia medica*) is available from 8 pm to 8 am on weekdays and from 8 am on Saturdays, or other days before holidays, until 8 am on Mondays, or the following weekday.

District of Forlì

[Tel. 800 533118](tel:800533118)

District of Cesena

[Tel. 800 050909](tel:800050909)

District of Ravenna

[Tel. 800 244244](tel:800244244)

District of Rimini

[Tel. +39 0541 787461](tel:+390541787461)

The Assistance and Urgency Centre (CAU) is a healthcare facility with adequately trained primary care physicians and nurses, aimed at evaluating and assisting patients with urgent health issues that require a low complexity of care, 7 days a week with direct access. CAUs can provide the following FREE services:

- Medical examination
- Certificates
- Pharmacological treatment, if necessary
- Prescriptions for the treatment of new-onset diseases or prescription of essential medicines
- Minor surgical procedures (e.g. sutures, dressings)
- Healthcare services and specialist services for traumas

Citizens accessing a CAU will be first evaluated by a nurse who will interview them to determine their healthcare needs, then they will be examined by a doctor and subsequently they may undergo further diagnostic examinations. The CAU doctor may refer the patient to specialists to complete the diagnostic evaluation, if necessary. The result of the clinical care pathway implemented at the CAU will be available in the citizen's Electronic Health Record. After the diagnostic procedures have been performed, the medical report will have to be evaluated by the patient's General Practitioner or Paediatrician of free choice, as they serve as reference for each citizen registered with the national health service, with no need for the citizen to go back to the CAU..

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Intercultural mediation, useful information for foreign nationals

Intercultural Mediation aims at facilitating foreign nationals in accessing healthcare facilities and services. It consists of a network of interpreters and mediators of different ethnicities, who serve as listening and support partners in the diagnostic and treatment process.

Various facilities of the healthcare system are provided with information desks specific for intercultural mediation. An on-call mediation service is also available throughout the day for both inpatients (upon request of the facility concerned) and outpatients (upon request of healthcare professionals).

Intercultural Mediators are also in charge of translating clinical documentation, when necessary, and of translating and disseminating information material for foreign nationals.

The healthcare facilities located along the coastal area of Romagna are provided with an interpreting service.

To receive information relevant to their healthcare assistance, foreign nationals can contact one of the permanent Intercultural Mediation information desks.

In case of hospitalization, healthcare professionals can activate the Intercultural Mediation service directly. Useful information Italian, Arabic, French, Chinese, and English.

Emergency Department and Urgent treatment centers

Emergency Departments (*Pronto Soccorso – PS*) provide treatment to people who **need urgent care**. For non-urgent cases, patients should contact their **GP** or the primary medical care doctor.

In case of **inappropriate** ED access, the patient will be charged a € 25 co-payment for the first examination of the emergency physician.

Urgent treatment centers (*Punti di Primo Intervento – PPI*) are equipped to examine and treat **non-life-threatening emergencies**. For more serious cases, they will stabilize patients and arrange their transfer to the most appropriate ED.

Here you can find the current number of "patients at the ED" divided per severity and priority code as assigned at triage, with indication of the average wait time in the last 24 hours.

Priority in the Emergency Department

People accessing the ED need treatment for **life-threatening** emergencies.

You can access the ED directly or, in most serious cases, calling 118 for an ambulance. When accessing ED services, you will be assessed and assigned a **color coding** your priority based on severity and urgency criteria:

red:

highly critical condition, requires immediate treatment

orange:

the treatment is urgent and cannot be postponed, critical condition, requires rapid care, wait time is 15 minutes max.

blue:

the treatment can be postponed, wait time is 60 minutes max.

green:

low-severity and low-priority condition, minor injury, 120 minutes

white:

non-life-threatening and non-urgent condition, 240 minutes

In case of non-life-threatening conditions, it is advisable to contact the **GP directly.**

Color coding is assigned during the **triage** phase. This assessment process guarantees that patients are treated consistently with priority and fairness criteria (color or numerical coding).

Patients are triaged by nurses, who assess their priority considering the main health problem, the urgency, the risk for the condition to get worse, and the most appropriate healthcare service. To assign a code, nurses consider other factors as well, i.e., pain intensity, age, patients' fragility and/or impairment, management specifics, and local context. This is a dynamic process, meaning patients are periodically re-assessed to monitor any improvement or worsening of their clinical condition while awaiting the doctor's examination and, if needed, consequently adjust their priority code and/or treatment.

Emergency Department co-payment

ED treatment is free of charge only in specifically defined cases. In case of inappropriate ED access, the patient will be charged a € 25 co-payment (*ticket*) for the first examination of the emergency physician.

Such co-payment is then added to:

- A further € 23 co-payment for any subsequent consultation the emergency physician may prescribe
- A maximum € 36.15 co-payment every eighth treatment of the same category (e.g., laboratory tests, diagnostic imaging) the emergency physician may prescribe, unless otherwise provided for in the relevant regulations (independently of the total value of those treatments' fees).

The ED co-payment **is not due** in case of patients accessing the ED for:

- Trauma occurred in the previous 24 hours
- Trauma occurred before the previous 24 hours which led to a need for therapy
- Acute poisoning
- Accident at work
- Renal colic, asthma attack, chest pain, heart arrhythmia, acute glaucoma, intraocular foreign body,

nosebleed, foreign body in the ear

- Postoperative complications requiring an access to the ED within 3 days after hospital discharge
- Problems or symptoms related to pregnancy.

Furthermore, the co-payment is not due by patients who:

- Stay in short-stay observation (*Osservazione Breve Intensiva – OBI*) to undergo further examinations or take drug therapies usually requiring a monitoring period of 6-24 hours
- Are admitted to any hospital ward
- Access the ED upon consultation with their GP / pediatrician, with the primary medical care doctor, or with a doctor of a different ED
- Are under the age of 14 years
- Are exempted from the co-payment because of illness, income level, or other reasons for exemptions as defined in national and regional regulations
- Are foreign nationals provisionally living in Italy (*Straniero Temporaneamente Presente, STP*) and are proven to be destitute.

Foreign nationals provisionally living in Italy can access healthcare services without showing any document proving their legal stay. Accessing healthcare services as irregular migrants in Emilia-Romagna does not imply being reported to the judicial authority..

