How to contact us

Central switchboard
Tel. 031 843.111
Fax 031 841.368
From 8 am to 7 pm

Email
info@cof.it

Website
www.cof.it

Make an appointment
hospitalisation
Tel. 031 843.563
Fax 031 843.550
Monday to Friday from 12 pm
to 3 pm

Make an appointment
ambulatory services
Tel. 800 506.048
Monday to Friday from 1 pm to 4 pm
## Mission and principles

2 Presentation
4 Welcome letter
5 Our History
7 Where we are
9 The structure
10 Partnerships and recognition
11 Our mission
13 Core principles
15/20 Patient rights and obligations

## General information

33 How to access our services
33 Hospitalisation
33 Urgent and emergency hospitalisation
34 First aid point
34 Ambulatory treatments
34 Treatments and Services
35 Admission and discharge
35 Coming into the hospital
35 Being discharged
35 Requesting medical records
35 Outpatient services
37 Visiting times

38 Office for Relations with the Public (ORP)

## Facilities

31 Telephone
31 Bar, newsagent, phone cards
31 Post
32 Social assistance
32 Religious assistance, Hairdresser/Barber
32 External services

## Services

22 The wards
23 Orthopaedics and traumatology
24 General Surgery
24 Rehabilitation
25 Motor and neurologic rehabilitation
25 Cardiac rehabilitation
25 Pneumological rehabilitation
26 The Specialist Centers
   Spinal Column Centre, Hip Arthroscopy Centre (CARA)
28 The ambulatories
29 Subsidised services
30 Non-subsidised services by the National Service (SSN)
Dear Madame, dear Sir,

Our Health Service Charter protects the rights of citizens under the National Health System.

Our Nursing Home strives to create a strong relationship based on dialogue and collaboration with patients, with the objective of improving the quality of the services offered, making them more efficient and timely, and above all, closer to the needs of those who use them.

In supplying its services the Home is inspired by the following principles:

- equality of rights of each patient;
- fairness and continuity in the supply of assistance;
- participative approach, which favours collaboration and is receptive to suggestions leading to service improvement and keeps the patient fully informed;
- efficiency in order to guarantee the promotion of health to optimization of economic resources.

We believe that our mission has at its centre - and its objective, - the welfare of the patient. In our philosophy, nurturing a research attitude in all fields of welfare that fall within the institutional aims of the Nursing Home, and investing in the training of our staff to raise care standards, are the keys to sustained and purposeful growth in our quality of service.

We believe in a mission and in a duty to assist patients promptly, enthusiastically, and expertly.

We believe in performing this service in a spirit of human solidarity, always respecting the dignity of the person, and the rights of the patient.

These principles are shared by our doctors, nurses, technicians, and by the general staff of all wards and of all services.

The management, for its part, is committed to the professional development of all staff, and to the human rights and mutual obligations which are in accordance with its core principles.

We hope that this Health Service Charter, put into practice with the collaboration of our patients and employees, will become an effective instrument for the continuous improvement of the services our Nursing Home offers.

I thank you in advance for your interest in us, and remain at your complete disposal in order to accommodate your further queries or suggestions.

The President
Prof. Lucio Ercolessi
Dear Madame, dear Sir,

In welcoming you to our Nursing Home, we take the opportunity to wish you a pleasant stay.

Our job is to make your stay as comfortable as possible by guaranteeing careful medical and nursing care and by trying to satisfy, as adequately as possible, any requests you may have.

We encourage you to participate actively in the diagnostic and therapeutic process by asking the doctors and nurses for information, and by discussing with them the objectives and choices in your therapeutic plan.

Our guests’ suggestions are extremely useful and help us improve the service we can offer you. This is why at the end of your stay with us we shall ask you to complete the questionnaire and to return it either by dropping it into the Suggestions Box in the box, or directly to the Health Directorate.

We hope that your health will enjoy the benefit of your stay with us.

The Medical Director
Dr. Gino Tassini
**Our History**

**1951**
The Elio Orthopaedic Institute of Lombardy

COF, as it is known today, was founded in 1951 and at the time was known as ‘The Elio Orthopaedic Institute of Lombardy’. The twelve founder members, all of whom were from Trieste, were mostly doctors. For over twenty years the Institute’s core business was mainly surgical recovery and rehabilitation, from diseases such as poliomyelitis and extrapulmonary tuberculosis. It was particularly concerned with osteoarticular pathologies. Located in a mountainous region, ideal for sanatorium treatments, the clinic welcomed patients from all over Italy.

**1975**
Orthopaedic and Physiotherapeutic Centre

Once poliomyelitis had been eradicated and most forms of tuberculosis drastically reduced, the clinic began concentrating more on rehabilitation from specific pathologies (i.e. neurological, orthopaedic, rheumatological, inflammatory and degenerative, muscular and vascular) and, on orthopaedics and traumatology. Eventually the structure changed its name and became the ‘Orthopaedic and Physiotherapeutic Centre’.

**1994**
Expansion and refurbishment of orthopaedic and traumatology wards.

**1999**
COF receives the UNI EN ISO 9002 certification, making it one of the first private structures to receive recognition for the quality of services and organisation.

**2000**
Accreditation from the Lombardy Regional Government.

**2001**
Completion of the new conference centre ‘Araldo Franco Romano’. Completion of the new church.

**2003**

**2004**
COF Lanzo Hospital Ltd.
The name of the structure becomes, COF Lanzo Hospital – Orthopaedic and Physiatric Clinic. Treatment and services for respiratory pathologies are incorporated.

**Gennaio 2007**
Radiology undergoes transformation and acquires cutting-edge technology.

**Maggio 2007**
New wing equipped with 41 additional beds (twin rooms complete with ensuite bathrooms with disabled facilities).

**Febbraio 2008**
Acquires new generation CT scanner.

**2009**
Launch of the Recovery Room. Merger of Orthopaedics and Rehabilitation to form a single, more efficient, department.

**Giugno 2011**
Introduction of computerised system of medicine management.

**2012**
Reorganisation of pre-recovery ward.

**March 2013**
Launch of the Organizational Model Law 231.

**August 2013**
Launch of two beds in General Surgery.
Where we are

Nursing home address:
COF LANZO HOSPITAL Ltd,
Orthopaedic and Physiatric Clinic
Private Nursing Home
Locality (località) Caslè, 5
Postcode: 22024 Lanzo d’Intelvi (Co)

The structure is in the Municipality
of Ramponio Verna (1020 meters a.s.l);

By car
The COF is located approximately
30 km’s from Como and 70 km’s from
Milan. It is easily reachable
from both Italy and Switzerland.

By public transport
There is a public bus service that leaves
from the ‘Ferrovie Nord’ and ‘Ferrovie
dello Stato’ train stations of Como
and which stops directly in front
of the entrance of the COF.
The Nursing Home is a large building comprising of six floors, set in extensive grounds. The number of beds per ward is divided as follows:

- Orthopaedics: 49 beds
- General Surgery: 2 beds
- Motor Neurology Specialization Rehabilitation: 106 beds
- Low Operational Complexity Surgery: 1 bed
- General Rehabilitation and Geriatrics: 10 beds
- Cardiology Specialization Rehabilitation: 11 beds
- Cardiology Specialization Rehabilitation: 16 beds
- Day Hospital: 2 beds

All patients' rooms are equipped with a bathroom; most rooms have two beds. The wards have been especially designed for patients with restricted mobility. Each floor has a waiting room with a television, which is also used for social activities.

The structure also houses: Image Diagnostic services, Analysis Laboratory, gyms for rehabilitation, two Operating Theaters, an Emergency Point, and a health care facility.

The structure employs an average of 300 staff, including doctors, nurses, physiotherapists and non-medical staff.

Every year the Nursing Home treats around 4500-5000 patients. Orthopaedic surgery makes up approximately 50% of this number, including 400-500 cases of joint replacement surgery.

Our structure is also used as a training centre for doctors following specialisation courses in universities around the country and Europe.

The Nursing Home is a member of the Italian Association for Private hospitals.

Regione Lombardia
The mission is the ultimate aim of any business venture. It is the justification and the distinguishing factor of its existence. Our mission statement defines who we are, what we do and why we want to do it.

COF operates as an integral part of the National Health System: our main activity is orthopaedic surgery and specialised rehabilitation.

The following distinguishing features make us special:

**The holistic care of the orthopaedic patient:**
we guarantee to our patients suffering from musculoskeletal pathologies a continuous care process, flowing smoothly through successive phases (day-care, surgery, post-operative recovery), and thus facilitating rehabilitation and a return to normal living.

**An exhaustive range of rehabilitation programmes:**
the treatments offered cover the principal branches of rehabilitation (motor, neurological, pneumological and cardiac).

**A personalised rehabilitation pathway:**
we recognise the specific needs of each patient. In order to provide individual rehabilitation course with defined objectives and closely monitored progresses.

**Integrated skills:**
our approach to rehabilitation planning ensures all the necessary skills are made available to each patient through the effective integration of our care team.

**Excellence in facilities:**
We provide the prefect structure for patients undergoing rehabilitation. The carefully thought-out spaces and Hotel-standard hospitality are aimed at the particular needs of patients with limited motor-skills and of those who remain with us for longer periods.

COF strives single-mindedly for recognised excellence within the healthcare sector. We believe that our commitment to this objective is not only the best deal for our clients, but also the strongest foundation for the long-term financial success of the company, the fulfilment and loyalty of its staff, and thus for a reliable provision of service. An essential component of this strategy is, of course, the quality of our services and their fit with the needs of our clients.

Our Board of Directors has established a list of company objectives:

- to develop and improve company services and processes aimed at client satisfaction, staff safety, respect of the natural environment and efficiency;
- to provide a safe working environment for medical practice, and to guarantee patient care;
- to ensure that each patient receives the most appropriate therapeutic package;
- to ensure that our doctors have access to all appropriate means of care;
- to provide the best possible hospitality and service to each patient;
- to guarantee equality, fairness, continuity, right of choice, efficiency and effectiveness and confidentiality of information.

In order to monitor and measure the above mentioned objectives, an official Quality Control System is in place in accordance with the legislation UNI EN ISO 9001:2008 and the relative certificate.

The heads of each ward or business unit must ensure that the Quality Control System is understood and implemented by all staff.
COF provides services according to principles that follow. These principles refer to: National and regional accreditation norms for hospitals, to the COF Quality Management Manual, and to the Joint Commission International (JCI) standards. The JCI is an international organisation dealing with healthcare institutions’ accreditation, and definition of standards of excellence and norms for practical clinical procedures.

### Core principles

**Appropriateness of Treatment**

Treatments are provided in a patient-centred way, according to individual’s needs, respecting clinical indications whose effectiveness has been proved, to the best time to give treatment, and to the most appropriate methods for each patient’s health and social conditions.

**Equality and Impartiality**

Every patient has the right to be assisted and treated without any discrimination based on age, sex, race, culture, religion, and political opinion. Our staff’s dealings with clients must be inspired by objectivity, justice and impartiality.

**Humanization**

COF ensures that its services and treatments are provided at the highest level of humanization.

**Transparency**

COF is committed to carrying out all its procedures in the most transparent way possible, with particular reference to:

- managing waiting lists for ambulatory treatments;
- methods of service provision;
- giving public access to results regarding service performance, efficiency and effectiveness.

**Continuity**

The hospital guarantees continued and regular care. When changes or interruptions to services occur, this will be managed to reduce inconvenience as much as possible.

**Confidentiality**

COF adheres to the most current data protection standards for its patients. Information is only transmitted to the patient or correctly delegated person. In all their work, both health care and administrative staff act according to the highest standards of professional secrecy and confidentiality.

**The Right to Choose**

The hospital is accredited by the National Health System, and so it guarantees freedom of choice for all service users.

**Effectiveness, Efficacy and Quality of Services**

Each member of staff works towards their primary goal, which is the well-being of each patient. Each staff member contributes with their most updated technical-scientific skills to this goal. We achieve this target without underestimating the importance of efficiency, avoiding waste of economic resources and unnecessary costs.

**Participation**

The hospital must guarantee patients’ participation via correct, clear and complete information, and also by receiving customer feedback, suggestions and comments.
Doctors and healthcare workers must guarantee comprehensible, complete, essential, and clear information.

Patients’ Rights

**Health Information and Informed Consent**
Patients have the right to receive comprehensible and complete indications and information from medical staff regarding:
- their state of health
- the cause, duration and evolution of their condition - where possible
- the nature, and possible effects of diagnostic and therapeutic means
- alternative therapies, (if any)
- taking part in diagnostic and therapeutic planning
- the possible effects of the condition and therapies over quality of life
- all possible pain management strategies.

Once the patient has been fully informed, it is his or her right to give or deny written consent to the proposed diagnostic and treatment plan. Without written consent the doctor cannot undertake any diagnostic or curative action (except where provided by law, e.g. in urgent cases and when the patient is unable to express their will and is in immediate danger).

The patient has the right to:
- be able to easily identify the staff caring for him/her
- receive information from the doctor caring for him/her
- receive full explanations and clarifications about all residential services and – to the extent of specific professional responsibilities – health treatment from nurses and health care professionals
- confidentiality about their state of health which can be communicated to relatives only with their consent or in cases provided by law
- receive clear and complete information about clinical trials
- freely take part in medical trials (approved by the Ethical Committee) and to access the relevant protocols only via informed consent.

**Protection of the vulnerable and children**
Patients have the right to:
- enjoy a prolonged presence (when possible) of a family member or friend – for patients still in paediatric age
- to maintain social relations – for children
- to continue school in the case of long hospital stay – for children

Respect to personal dignity

The person hospitalised at COF has the right to:
- have his/her human rights respected by all hospital staff
- be considered as a whole unity of body, psyche and spirit
- be defended and honoured in his/her freedom, responsibility and ethical values
- receive adequate hospitality and accommodation
- be treated with dignity, called by name and not by the name of the condition and to be addressed with respect
- be respected in his/her moral and physical modesty
- receive the same treatment as any other person without distinction by sex, culture, religion or ethic.

Right to correct processing of personal data

Patients have the right to be asked for authorization to divulge his/her hospital information; patients also have the right to receive the consent form for data protection and processing. Respect to administrative simplification and right to access of documents Patients have the right to give auto-certifications and make declarations according to the law.
**Right to legal protection**
Those who believe they have been treated unfairly have the right to present a formal complaint.

**Booking**
When booking, the patient has the right to be informed of the waiting list management criteria and to receive proper information regarding:
- waiting time
- unit where he/she will be assigned
- personal belongings he/she will be allowed to bring

**Welcoming**
On admittance, the inpatient must communicate his/her intention regarding confidentiality rules. Patient’s religious beliefs must be ascertained in order to guarantee the respect of his/her traditions and customs.

Inpatients have the right to receive:
- material providing general information about the unit he/she is entering
- a customer care questionnaire for quality of service assessment
- a specific form for any complaints or communication

Inpatients also have the right to be informed regarding:
- the unit’s rules of conduct
- possible spiritual / religious assistance
- informed consent procedures
- doctors’ timetable (visits and availability)
- how to obtain any kind of information regarding their condition

**Rights during hospitalisation**
Inpatients have the right:
- to have at least two briefings with the referred doctor: at the beginning and at the end of the treatment;
- to know director of unit’s name;
- to be adequately informed about diagnostic and therapeutic procedures;
- to interrupt at any time his/her diagnostic and/or therapeutic procedures, even in contrast with medical staff’s opinion. In this case the patient must be informed of any risks and the responsibility he/she is taking. The interruption must be formally certified in a written version and signed by the patient in his/her medical record, in the presence of the doctor in person.

**Rights at discharge**
During the discharge, the patient has the right to receive:
- a formal letter of discharge
- documentation and information about therapies and examinations following discharge
- any nursing information (if necessary)
- his/her personal medical records and any iconographic documentation (this specific request should be made to the competent office).

**Right to comfort**
Inpatients have the right to have at their disposal:
- access to telephones and televisions (either shared in common or for individual use)
- access to common areas
- access to adequate hygienic services and toilettes
- the possibility to acquire newspapers and magazines
- space for personal belongings
- the possibility to rest quietly during the night and daytime
- a clean and hygienic environment.

**Right to respect death**
The Hospital recognizes the inpatient’s right:
- of a humane and dignified death
- to spend the last hours of his/her life in the company of loved ones
- to be assisted by a religious minister, according to his/her beliefs

**Booking and access to clinical consultations**
Patients have the right to benefit from a booking system for clinical consultations characterised by a transparent waiting list.

When booking, the following information will be provided:
- date and time of the consultation
- name of the doctor (where applicable)
- indication of the venue
- any possible anticipatory preparation needed for the treatment
- cost of the consultation

**Waiting time for consultations**
Respect for the waiting time for consultations is a patient’s right. Moreover, COF is committed to respecting waiting lists for consultations according to criteria adopted by Regional Government of Lombardy.
The patient is obliged to:

- inform the medical staff as quickly as possible should he or she decide to interrupt scheduled treatments
- inform the medical staff of everything and anything that may be pertinent in order to provide the best or better prevention, diagnosis, therapy or assistance
- inform of his or her intention to not authorise the disclosure of admission
- immediately report his or her intention to cancel scheduled examinations or treatments no later than three days before the appointment
- respect the environment, the equipment and the furnishings belonging to the Hospital
- observe the rules which permit the proper implementation of therapeutic treatments
- respect the smoking and alcoholic beverages ban and the use of mobile telephones wherever indicated
- whenever the patient is in the Hospital or any other health facility, he or she should do his or her best to establish a relationship based on respect and trust with the medical staff in order to facilitate the establishment of a correct diagnostic and/or therapeutic programme.
Organisation of the structure:
Hospitalisation
Day Hospital
Day Surgery
First aid point
Treatments and services

The wards

The structure currently has a total of 200 beds, distributed on three floors and organised as follows:

<table>
<thead>
<tr>
<th>Operating unit</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orthopaedics and Traumatology Section 1</td>
<td>2nd floor</td>
</tr>
<tr>
<td>Orthopaedics and Traumatology Section 2</td>
<td>2nd floor</td>
</tr>
<tr>
<td>Orthopaedics and Traumatology Section 3</td>
<td>2nd floor</td>
</tr>
<tr>
<td>General Surgery</td>
<td></td>
</tr>
<tr>
<td>Neuromotor Rehabilitation 1</td>
<td></td>
</tr>
<tr>
<td>Neuromotor Rehabilitation 2</td>
<td></td>
</tr>
<tr>
<td>Cardiology Rehabilitation Section</td>
<td></td>
</tr>
<tr>
<td>Pneumology Rehabilitation Section</td>
<td></td>
</tr>
</tbody>
</table>

An updated list of doctors collaborating with our structure, and of the pathologies we treat, can be found on our website www.cof.it
General Surgery

Within the hospital there is a Simple Surgery Operative Unit that performs general surgery and reconstructive plastic surgery.

Major surgeries performed:
- Varicose veins of the lower limbs
- Inguinal Hernias
- Skin neoplasm
- Abdominal Hernias
- Resulting burn scars
- Resulting scars from injuries

Rehabilitation

149 beds

The rehabilitation activities of the structure are classified as Specialised Rehabilitation of the Regional Government of Lombardy. Rehabilitation is divided into two Operative Units with Specialised Sections:

Rehabilitation 1
- (Motor and Neurological rehabilitation)
Cardiology
- (Cardiac rehabilitation)
Pneumology
- (Pneumological rehabilitation)
Rehabilitation 2
- (Motor and Neurological rehabilitation)

Origin of patients
Patients hospitalised in rehabilitation may originate:
- from other acute care hospitals
- from a personal residence
- from the orthopaedic surgery ward of the COF.

Intensive care patients
Intensive care patients, those in coma for example, may also be hospitalised.

Treatment

Given the right conditions, rehabilitative surgery may also be performed in a day hospital setting.

According to the WHO (World Health Organisation) and the Regional Government of Lombardy, each patient admitted to rehabilitation is issued with an INDIVIDUAL REHABILITATION PROJECT. Individual, as the project of each patient is tailor-made to meet his or her and the family’s needs.

Rehabilitative, as it is in the context of functional recovery.

Project, as it identifies the objectives to be achieved.

The approach to rehabilitation is multi-disciplinary: different professionals (specialists, nurses, physiotherapists, speech therapists, psychologists, etc.) work together in order to achieve the goals set.

The patient and his or her family members, are directly involved in defining the objectives and evaluating the results.

Rehabilitation is seen as an on-going 24 hour process which occurs during normal daily activities and is not limited to a particular session in the gym or an appointment with a physiotherapist.

Pathologies of the knee:
- Primary and secondary osteoarthritis
- Axial deviation
- Patellofemoral osteoarthritis
- Lesions of the ligaments, meniscus, cartilage and synovial

Pathologies of the ankle and foot:
- Cartilage and synovial pathologies of the ankle
- Insertional tendinopathies of the Achilles tendon
- Metatarsal overload, hallux valgus, plantar fasciitis
- Canalicular syndromes (Morton’s neuroma, tarsal tunnel syndrome, sinus tarsi syndrome)

Pathologies of the spine:
- Herniated discs
- Vertebral fractures
- Instability of the spine

Traumatology:
- Fractures of the upper or lower limbs
- Muscle and tendon injuries
- Dislocations

Major surgeries performed:
- Hip/knee/shoulder prosthesis
- Knee, shoulder and ankle and hip Conservative Surgery
- Hand surgery
- Foot surgery
- Spine surgery
- Traumatology

Surgery may be performed as either an in- or out-patient or in day surgery, it will depend on the nature of the pathology, the type of patient and the complexity of the surgery,

Pathologies of the elbow:
- Chondromatosis
- Joint loose bodies
- Synovial pathologies
- Ulnar nerve compression

Pathologies of the wrist and hand:
- Synovial pathologies (cysts, etc.)
- Carpal tunnel
- Dupuytren’s disease
- Ulnar nerve compression
- Tendinopathy (trigger finger, cists, De Quervain’s disease)
- Metacarpal trapezium osteoarthritis

Pathologies of the hip:
- Primary and secondary osteoarthritis
- Femoro-acetabular impingement
- Infections
- Muscles instability
- Loose bodies
- Congenital disorders
- Cartilage lesions
- Trauma and post trauma

Orthopaedics and Traumatology

49 beds

Orthopaedics and Traumatology is divided into three sections:
- Orthopaedics and Traumatology Section 1
- Orthopaedics and Traumatology Section 2
- Orthopaedics and Traumatology Section 3

Main pathologies treated:
- Pathologies of the shoulder:
  - Lesions of the rotator cuff
  - Subacromial impingement
  - Shoulder capsular instability
- Pathologies of the elbow:
  - Chondromatosis
  - Joint loose bodies
  - Synovial pathologies
  - Ulnar nerve compression
- Pathologies of the wrist and hand:
  - Synovial pathologies (cysts, etc.)
  - Carpal tunnel
  - Dupuytren’s disease
  - Ulnar nerve compression
  - Tendinopathy (trigger finger, cists, De Quervain’s disease)
  - Metacarpal trapezium osteoarthritis
- Pathologies of the hip:
  - Primary and secondary osteoarthritis
  - Femoro-acetabular impingement
  - Infections
  - Muscles instability
  - Loose bodies
  - Congenital disorders
  - Cartilage lesions
  - Trauma and post trauma

Pathologies of the knee:
- Primary and secondary osteoarthritis
- Axial deviation
- Patellofemoral osteoarthritis
- Lesions of the ligaments, meniscus, cartilage and synovial
Motor neurological rehabilitation

Main pathologies treated:
Pathologies of the central or peripheral nervous system:
- Cerebrovascular diseases
- Hemiplegia and hemiparesis
- Post-traumatic brain and spinal cord diseases
- Polyneuropathy
- Multiple Sclerosis ALS
- Parkinson’s disease and parkinsonian syndromes
- Subacute coma and vegetative states

Osteo-articular pathologies:
- Orthopaedic surgery outcomes
- Degenerative
- Traumatic
- Amputation outcomes
- Rheumatic and inflammatory diseases (rheumatoid arthritis)
- Complications of osteoporosis

Other:
- Secondary entrapment syndromes

Cardiac rehabilitation

Main conditions treated:
Diseases of the cardiovascular system:
- Coronary arterial bypass
- Valve replacement
- Coronary angioplasty
- Chronic ischemic heart disease
- Subacute and chronic heart failure
- Acute myocardial infarction outcomes/acute coronary syndrome
- Arrhythmias
- Installation of devices (pacemakers, defibrillators, etc.)
- Pulmonary embolism outcomes
- Surgical outcomes of thoracic aortic aneurysms
- Surgical outcomes of abdominal aneurysms

Pneumological rehabilitation

Main conditions treated:
Diseases of the respiratory system:
- Chronic obstructive and restrictive pulmonary disease
- Respiratory failure
- Bronchial asthma
- Bronchiectasis and cystic fibrosis
- Sleep-related breathing disorders
- Rehabilitation pre abdominal and thoracic surgery
- Outcomes of general or thoracic surgery with respiratory problems
- Secondary respiratory diseases and neuromuscular diseases of the rib cage
- Oncological respiratory problems in stabilization phase
- Post-intensive management of respiratory insufficiency
- Weaning from mechanical ventilation
- Interstitial lung disease

The Specialist Centres

In our organization we have identified a number of specialist centres for specific pathologies. Within these centers, the doctors and nurses are dedicated to the treatment of these pathologies. Their services are available for both inpatient and outpatient treatment.

Spinal Column Centre
The treatment of spine pathologies often requires a multiple disciplinary approach involving various specialists.

At the Spine Centre we offer:
The integration of two differing perspectives, orthopedics and neurosurgery, when approaching diseases that involve the spine.
Combined use of mini-invasive and micro-surgical techniques.
Possibility to complete treatment with a rehabilitative program on an Inpatient, Outpatient or Day Hospital plan.
Possibility of advanced pain therapy with the involvement of anesthesiologists.

Hip Arthroscopy Centre
(CARA – arthroscopic surgery and hip reconstruction)
The main purpose of the Centre is to treat pre-arithmetic hip disease in a minimally invasive manner.

At the Spine Centre we offer:
The integration of two differing perspectives, orthopedics and neurosurgery, when approaching diseases that involve the spine.
Combined use of mini-invasive and micro-surgical techniques.
Possibility to complete treatment with a rehabilitative program on an Inpatient, Outpatient or Day Hospital plan.
Possibility of advanced pain therapy with the involvement of anesthesiologists.
Our Nursing Home provides subsidised outpatients services and treatments (via the National Health Service or other forms of reimbursement).

An updated list of doctors collaborating with our structure, and of the pathologies we treat, can be found on our website www.cof.it.
Orthopaedics and traumatology
Orthopaedic examination
Control of injuries and traumatologic assistance
Application of casts
Prescribing health care subsidies
Surgical evaluation
Pre- and post-operative examinations
Articular infiltrations

General surgery
Surgery consult
Day surgery

Recovery and functional rehabilitation
Physiatric examination
Functional capacity evaluation
Prescription of orthopaedic devices
Neuromotor rehabilitation
Functional rehabilitation
Isokinetics
Physical therapy treatments
Respiratory function examination and evaluation
Breathing exercises
Shockwave therapy

Cardiology
Cardiovascular examination
Resting electrocardiogram
Stress electrocardiogram with cycle ergometer
Color Doppler echocardiography
24-hour dynamic electrocardiogram
(24-hour ECG monitoring ± 24-hour Holter)
Dynamic monitoring of blood pressure over 24 hours (Holter)

Neurology
Neurological examination
Electromyography
Electroencephalography

Pneumology
Pulmonary examination
Simple spirometry test
Bronchodilator drug test
Blood gas analysis

Anaesthesia
Pain therapy

Gastroenterology
Gastroenterology examination

Laboratory analysis
Clinical chemistry
Hematology and immunohematology
Coagulation
Immunometry
Serology
Microbiology

Radiology
Chest X-ray
Abdominal x-ray
Bone and joint x-ray
Opaque enema

Diagnostic imaging
Breast ultrasound
Abdominal ultrasound
Muscle-tendon ultrasound
Musculoskeletal ultrasound
Transrectal ultrasound
Head and neck ultrasound
CT scan without and with contrast
Computerised Bone Mineralometry (CBM)

Vascular diagnostics
Peripheral vascular color Doppler echography
Supra aortic color Doppler echography (TSA)
Great vessel color Doppler echography

TREATMENTS NOT SUBSIDISED BY THE NATIONAL HEALTH SYSTEM
Gastroenterology
Gastroenterology exam
Rheumatology
Rheumatologic examination
Urology
Urological examination
Social assistance
The health facility provides a professional social care services that promote, in collaboration with staff of the various departments:
• reinforcement of the individual autonomy of the person returning home, promoting the family’s role as a primary resource in the support network and care of the individual
• support to patients and/or family members in access to local Social Assistance and social health services, both at home and residential.

Religious assistance
According to article 8 of the Constitution, every patient is guaranteed the freedom of conscience and worship. Catholic patients have access to the Hospital Church located on the ground floor, where the Holy Mass is celebrated daily. A priest is available at all times by arrangement with the head nurse. The sisters of the religious congregation ‘Apostles of the Sacred Heart of Jesus’ help the Nursing Home in the field of pastoral care.

Hairdresser/Barber
Inside the structure an hairdresser and barber service is available for inpatients.

External services
The families of patients may take advantage of a series of agreements with local hotels and restaurants in the area. For further information, please contact the Admissions Office.
Hospitalisation

Ordinary hospitalisation requires a specific request from a GP, followed by a clinical examination performed by one of our specialists, or as a simple transfer from another hospital. Hospitalisation is processed and scheduled through an information system that automatically generates a waiting list based on chronological order, unless otherwise required by the inpatient's clinical conditions. Venue and time of admission will be communicated to the inpatient by our Admissions Office via telephone. We also accept post-acute inpatients coming from other hospitals. In these cases the waiting time varies between 4 and 10 days. Requests should be submitted (via phone or fax) directly by the hospital doctor who is in charge of the inpatient and it will be assessed by our professionals.

Urgent and emergency hospitalisation

This kind of hospitalisation is only possible for orthopaedic pathologies and following the request of the doctor in charge.

First aid point

This structure guarantees a 24h service and also provides cardiophonic consultancy. Where emergency hospitalisation is required, and the pathology cannot be treated in our structure, the doctor in charge will provide first aid and will guarantee that the inpatient's transfer to another hospital is made possible and carried out with adequate means and assistance.

If not required, after the first aid, the patient is dismissed and given a medical report including treatments provided and suggested therapies.

Ambulatory treatments

Ambulatory treatments can be booked as follows:
- in person at our Ambulatory Booking Office
- calling our toll free number 800.506.048 from Monday to Friday, from 1pm to 4pm.
- calling the Regional Call Centre 800.638.638

For treatments subsidised by the National Health System, a prescription of a GP is required.

Treatments and Services

Our hospital also provides accommodation with chargeable services in superior rooms (paid either privately or reimbursed through direct agreements signed with several Insurance Companies). We offer single and double rooms, of which the second bed may be used by the inpatient's family members acting as caregivers. Any other information regarding access and costs is available at our Admissions Office.
On admission
Patients should proceed to the Admissions Office situated on the ground floor of the Nursing Home and present the following:
- certificate of admission
- National Health Card
- valid identity document

Discharge
Once discharge is approved by the Head of Section, the ward doctor draws up a letter of discharge for the inpatient’s personal doctor.

Requesting medical records
To request photocopies of medical records, inpatients are invited to complete the appropriate form, which is available from the Admissions Office, and to send it to the Health Directorate. The documentation will be delivered within 15 days (excluding urgent requests / urgencies).

Outpatient services
For all services, treatments, and payments, patients are required to refer to the Ambulatories Unit.
Meeting with the doctors
Family members of hospitalised patients can arrange to meet with the doctors on the days and times indicated on the notice board of each floor.

Visiting times are as follows:
Visiting times for admitted patients are posted in each department and on our website.

Visiting times may be subject to change or suspension in the event of a ward emergency.

Family members and friends will be asked to leave the ward during mealtimes unless assisting a relative with feeding and specifically authorised by the medical staff.

Mealtimes are as follows:
- Breakfast – 8am
- Lunch – 12 noon
- Dinner – 6pm

The medical staff are authorised to limit the number of visitors per patient in order to protect the wellbeing of the other patients.

Other visiting hours
Visiting outside of the regular times must be compatible with the needs of the ward and authorised by the Head of the Ward.

Limited access
Children under the age of 12 must be accompanied by an adult and remain under direct supervision at all times.

Visitors are invited to respect the areas of limited access (these are clearly signposted), and to obey the directions of the medical staff scrupulously.

Measuring customer satisfaction
On leaving the hospital, patients will be encouraged to complete a customer satisfaction questionnaire (the model of questionnaire has been supplied by the Regional Government of Lombardy). The questionnaire may remain anonymous, or not, and be returned either by dropping it into the Suggestions Box located near the Admissions Office on the ground floor or in the wards. The feedback we receive from the questionnaires is closely analysed and helps us to promptly intervene in order to improve any weaknesses in our system.

Process indicators
The results are monitored using different parameters; clinical (Barthel, Borg, Walking Test, etc.) and organizational. Results of the data are used by Management to make improvements to the system.

Suggestions and complaints
On admission, together with the customer satisfaction module, patients receive a form which they may use for making suggestions, comments or complaints. Written or verbal complaints may be made directly to the Health Directorate via the Office for Relations with the Public.