HEALTH SERVICES CHARTER
CERBA HEALTHCARE ABRUZZO S.R.L.

Site: Col Giuseppe Tirone Street n. 8 – SULMONA

Requirement 1
n.1.1 Patient's right
This document has been written in accordance with DPCM 19-5-1995
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Technical Director

Cerba HealthCare

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1. SECTION 1 – INTRODUCTION

The SERVICES CHARTER of Cerba Healthcare Abruzzo S.r.l. was written to describe the engagements that our laboratories have made to users, ensuring the quality standards of the service provided by the laboratories and to ensure the protection of the right to healthcare, in relation to:

- Access to diagnostic services;
- Involvement of the user;
- Transparency and clarity in the procedures implemented by the laboratory to achieve its objectives.

The Services Charter is a dynamic tool that requires periodic updates to reflect changing conditions for the provision of laboratory services.

Any significant change in available resources, organizational methods, and user's expectations must be followed by a new organizational balance, which is expressed in new performance standards.

Cerba Healthcare Abruzzo S.r.l. is committed to continually improving these standards.

The Service Charter, as a dynamic tool, is updated at least annually of the following information:

- Information regarding access to services (opening times, contact information, etc.);
- List of services;
- Organizational chart.

The Services Charter is publicly available at all Cerba Healthcare Abruzzo S.r.l. laboratory locations.

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2. SECTION 2 - PRESENTATION OF THE CHARTER

2.1 Regulatory References

- Directive of the President of the Council of Ministers of January 27, 1994 - Principles of Public Service Provision;
- Legislative Decree No. 163 of May 2, 1995, coordinated with the Conversion Law No. 273 of July 11, 1995 - Urgent measures to simplify administrative procedures and improve the efficiency of public administrations;
- Presidential Decree No. 1 of May 9, 1995 - General reference framework for the "Charter of Public Health Services";
- GUIDELINES No. 2/95 - Implementation of the Service Charter in the National Health Service;
  Commissioner's Decree No. 11/2011 of March 29, 2011, Abruzzo Region
  Subject: Reorganization and rationalization of the network of private analysis laboratories
  Annex 1, Abruzzo Region, Operational Program 2010
  Intervention 9: Rationalization of the network of public and private laboratories
  Action 3: Reorganization of the network of private laboratories
- Commissioner's Decree No. 62 of December 2, 2011, Abruzzo Region
  Subject: Reorganization and implementation of the network of private analysis laboratories pursuant to Commissioner's Decree No. 11/2011 of March 29, 2011, approval of applications accepted for reorganization, and further measures.

2.2 Fundamental principles – Humanization and Welcoming

Equality, impartiality, and transparency: Services are offered to all citizens without discrimination based on gender or nationality. Laboratory staff will act with objectivity, fairness, and impartiality. Users' privacy, dignity, religious beliefs, and vulnerable conditions will be respected.

Right of free choice: Citizens can contact their preferred analysis laboratory directly for services.

Participation: Users have the right to provide suggestions, observations, and complaints for service improvement. Management will evaluate and act on user feedback to address issues and implement improvements.

Efficiency and Effectiveness: Services are to be provided using resources optimally and without waste. The goal is to fully meet individual user needs while maintaining effective resource management.

Assistance: Staff are committed to providing users with all necessary information and assistance to access services easily. Patients have a right to information about their health status, care programs, and access to their medical records.

Continuity: Cerba Healthcare Abruzzo is committed to ensuring the continuous and regular provision of its services within regulatory and internal organizational limits.

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3. SECTION 3 - PRESENTATION OF CERBA HEALTHCARE ABRUZZO SRL

3.1 Information about the company

Cerba Healthcare Abruzzo S.r.l
REGISTERED OFFICE AND ADMINISTRATIVE HEADQUARTERS:
Circonvallazione Occidentale Street n°91B, 67039 Sulmona (AQ)
P.IVA 14996171006

Laboratories:

- Cerba Healthcare Abruzzo S.r.l. - L'Aquila Street n°5, 67039 Sulmona (Ex Laboratorio Igea)
- Cerba Healthcare Abruzzo S.r.l - Circonvallazione Occidentale Street 91B, 67039 Sulmona
- Cerba Healthcare Abruzzo S.r.l. - Luigi Tripoti Street n°31/C 64100 Teramo (Ex Laboratorio Igea)
- Cerba Healthcare Abruzzo S.r.l. - Vincenzo Bellini Street n°32, 66100 Chieti (Ex Laboratorio Mendel)
- Cerba Healthcare Abruzzo S.r.l. - Largo Gian Battista Vico 15, 66100 Chieti (Ex Laboratorio Di Perna)
- Cerba Healthcare Abruzzo S.r.l. - Ciancetta Street n°19, 66020 San Giovanni Teatino (Ex Laboratorio Fleming)
- Cerba Healthcare Abruzzo S.r.l. - Pescara Street n°2, 67100 L'Aquila (Ex Laboratorio Fleming)
- Cerba Healthcare Abruzzo S.r.l. - Col Giuseppe Tirone Street n°8, 67039 Sulmona (Ex Laboratorio Carrese)
- Cerba Healthcare Abruzzo S.r.l. - Costantinopoli Street n°144, 66026 Ortona (Ex Laboratorio Galeno)
- Cerba Healthcare Abruzzo S.r.l. – Nettuno Street n°45, 66023 Francavilla al Mare (Ex Laboratorio Petragnani)
- Cerba Healthcare Abruzzo S.r.l. - Rovereto Street C/O Distretto Sanitario di Base SNC, 67032 Pescasseroli (Ex Laboratorio Biocontrol)
- Cerba Healthcare Abruzzo S.r.l. – Viale della Vittoria n°10, 66047 Villa Santa Maria (Ex Laboratorio Villa Santa Maria)
- Cerba Healthcare Abruzzo S.r.l. –Piazzano Street n°4/9 66041 Atessa (CH) (Ex Laboratorio analisi CMAV)
- Cerba Healthcare Abruzzo S.r.l. – Roma Street n°108, 64028 Silvi (TE) (Ex Laboratorio analisi Biolab).

3.2 Organization and services provided

Cerba Healthcare Abruzzo S.r.l. provides microbiological and parasitological clinical testing, both privately and under an agreement with the National Health Service.

All access points to Cerba Healthcare Abruzzo S.r.l. are barrier-free and consist of:

- Patient reception and payment processing;
- Waiting room;
- Office and archive;
- Bathrooms equipped with disability aids, separated for patients and staff;
- Blood collection room, where specialist work is performed;
- Laboratory equipped in accordance with current regulations.

The activities of Cerba Healthcare Abruzzo S.r.l. are structured:

- Pre-analytical phase: welcoming the patient, providing information on service delivery methods and the management of personal and sensitive data, admission, blood sampling/biological sample collection, completing administrative and financial formalities, preparing biological samples for transport, and delivery to the service laboratory for analysis;
- Analytical phase:
  - Receipt of samples and verification of suitability;
  - Performance of analyses and validation of results;
  - Post-analytical phase;
  - Signature of the report;
  - Delivery of reports to the patient;
  - Post-report consultation (if requested by the patient);
  - Notify critical value/infectious disease to patient or to doctor.

  Cerba Healthcare Abruzzo S.r.l. offers a home blood sampling service by appointment, performed by qualified personnel (professional nurses/midwives).

LABORATORY TEST:

Clinical Chemistry;
Hematology;
Coagulation;
Immunology;
Endocrinology/Hormonal;
Prolactin;
Hepatitis markers;
Tumor markers;
Pregnancy monitoring (BHCG);
Specific tests for pregnant women: Coombs, TORCH, viral avidity tests, bi-test;
Allergy testing (RAST for inhalants and foods);
Quantiferon (Tuberculosis test);
Urea Breath Test for the presence of Helicobacter pylori;
Malabsorption Breath Tests for Lactose, Glucose, Lactulose, and Xylose
Semen analysis: fertility, sperm DNA fragmentation;
Throat, ear, and eye swabs;
Urethral swab;
Complete vaginal swab;
Pap test;
HPV test;
Sperm culture;
Parasitology and occult blood;
Dermatophytes;
Antigen and Molecular swab for COVID-19;
Alcohol test;
Drug test.

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3.3 Opening times

CERBA HEALTHCARE ABRUZZO S.R.L – Col Giuseppe Tirone Street n. 8 – SULMONA Technical Director: Giovanna Baccante	
• Sampling	• From Monday to Saturday: 07:30/12:00 • From Monday to Friday: 16:30/17:30
• Collection of report	• From Monday to Friday: 10:00/12:00 - 16:30/17:30 • Saturday 10:00/12:30
• Information	• Address: Col Giuseppe Tirone Street n. 8 CAP 67039 Sulmona • Phone number: +390864660602 • Mail: laboratoriocarrese@cerbahealthcare.it **Users have open access to the laboratory, with the exception of certain tests described in the "User Preparation" section.**

3.4 Information, communication, and citizen protection

3.4.1 Information: Access, reception, and admission

Users that come to the laboratory are required to take a number from the machine located in the waiting room to regulate patient flow and individual access to the admission and sampling procedures.
Users with special needs, such as pregnant women, disabled persons, the elderly, or individuals with health problems, are given priority for admission.
Users must contact the admission staff to report their situation and then wait their turn, maintaining an appropriate distance from the admission desk, to ensure the privacy of other users.
The list of laboratory tests is listed in the "PRICE LIST" document, available at the admission desk.
To access private testing, simply tell the reception staff the type of tests you wish to undergo, without necessarily needing a medical prescription.

3.4.2 Information and communication: Budget management under the SSN (National Health Service) agreement

Cerba Healthcare Abruzzo S.r.l., located in Col Giuseppe Tirone Street n. 8, holds a contract with the Abruzzo Region to provide services under the public health agreement.
In accordance with contractual agreements with the Abruzzo Region, the budget is allocated on a monthly basis; therefore, the total assigned amount is divided into 12 equal parts.
Notices are displayed within the laboratory to inform patients about the start and end of the budget period.
This notice is also published on the website https://www.cerbahealthcare.it/sedi/sulmona-via-col-giuseppe-tirone-8/ in the "WAITING LISTS" section.
It is the responsibility of the administrative staff to ask the patient which tests are required in order to provide appropriate instructions regarding preparation for blood draws or biological sample collection.
Full instructions regarding patient preparation for tests are available in Section 5 of this Service Charter.
Information regarding current regulations on the right to exemption from payment for analyses is available to the user.

Income-based exemption

A physician may certify exemption from the co-payment fee (ticket), subject to verification of ASL (Local Health Authority) certification or Revenue Agency reports.
Exemption codes E01, E02, E03, and E04 are indicated on the medical referral form.
Pursuant to Law 537/93 and subsequent amendments (Laws 724/94 and 549/95), the following categories of patients are entitled to an income-based exemption:

- Children under the age of 6 belonging to a household with an income of less than €36,151.98 (according to the most recent tax return);
- Adults over the age of 65 belonging to a household with a gross income of less than €36,151.98 (based on the most recent tax return);
- Adults aged 60 to 65 receiving a social pension, with an income below €8,236.31 (or €11,362.05 with a dependent spouse, plus an additional €516.46 for each dependent child);
- Recipients of social pensions and their dependent family members;
- Unemployed individuals registered with employment services, with an income below €8,236.31 (or €11,362.05 with a dependent spouse, plus an additional €516.46 for each dependent child);
- Dependent family members of the aforementioned unemployed individuals.

Pregnancy exemption

The pregnancy exemption entitles pregnant women to certain healthcare and diagnostic services free of charge. To obtain it, the physician simply needs to enter the correct code on the prescription: "M + week of pregnancy" (e.g., M01–M41) for a normal pregnancy, or code "M50" for high-risk or pre-conception care; no specific exemption card is required.

Medical condition exemption

Patients suffering from specific medical conditions may be exempt from co-payments for healthcare services related to their specific illness.

When identifying qualifying medical conditions, the Ministry of Health primarily considers the clinical severity and the degree of disability associated with the condition. Services provided free of charge are those deemed appropriate for monitoring the progression of the condition and the effectiveness of measures to prevent further deterioration, as well as services that require particularly frequent use.

Consequently, specific tests—and only those—are provided free of charge for each condition, as outlined in Ministerial Decree no. 329 of May 28, 1999 (published in the ordinary supplement to the *Gazzetta Ufficiale* no. 266 on September 25, 1999).

Patients not eligible for exemption

Patients who are not eligible for exemption but hold a test request on an official National Health Service (SSN) prescription form are required to pay the co-payment fee (*ticket*) in accordance with current rates, which are available for public viewing at the reception desk.

To access testing on a private basis, patients simply need to inform the reception staff of the tests they wish to undergo, without "necessarily" presenting a medical prescription.

3.4.3 Protection of the citizen: Privacy and protection of sensitive data

To protect patient privacy, in accordance with EU Regulation 679/2016, patients are called to the reception and the blood collection room using the number assigned in the order of access to the laboratory.

Patients are informed, according to EU Regulation 679/2016, about the use of their sensitive data, which will be used by the laboratory only for diagnosis and treatment purposes.

Patients are asked to provide the necessary authorization to the laboratory. In any case, laboratory staff will maintain maximum discretion to safeguard patient anonymity.

3.4.4 Protection of the citizen, information, and communication: Informed consent

Patient has the right to be informed by staff in language they understand, about the risks associated with particular healthcare practices and, therefore, whether or not to accept them in an informed manner (informed consent).

Consent has to be obtained directly from the patient; only in the case of minors or persons without capacity, consent has to be given by their legal representatives (family). However, wherever possible, patients must be informed.
Consent must be personal, explicit, and informed. Written consent is required only in specific cases provided for by law (e.g., testing for HIV and drugs of abuse).

3.4.5 Information and citizen protection: Delivery of test results

Diagnostic test results can be downloaded online at https://refertiweb.cerbahealthcare.it/portale/ or at Cerba Healthcare Abruzzo S.r.l. laboratories, based on the instructions given to the patient during admission.
According to EU Regulation 679/2016 on privacy, users can collect reports by themselves, upon proof of identity, or by another person authorized in writing by the user. Written authorization cannot be used to collect the HIV report, which can only be collected by the interested person upon presentation of an identity document.

3.4.6 Communication and citizen protection: Complaint management and user satisfaction

The complaint form (M 9.1/16) and the User Satisfaction Questionnaire (form M 9.1/08) are available in the waiting room.
Complaints may be submitted:

- Personally (in the waiting room): administrative staff or the Quality System Manager (RSQ) invite the patient to an office and records the complaint together with them. If the issue can be resolved immediately, the matter is closed by determining whether the complaint is substantiated or unsubstantiated. If further investigation is required, RSQ and Technical Director (DT) open an internal Non-Conformity (NC) report to investigate the causes of the complaint; they provide an official response to the patient and, in consultation with company management, decide whether to take internal measures, which are subsequently discussed during the management review.
- Electronically: same procedures as above apply; complaint is processed and a response is provided to the patient via email or telephone.
- "Customer Care" digital platform or Cerba Healthcare Italia S.r.l. website: RSQ contacts the laboratory to request information regarding the complaint (sender details and an explanation of the incident). Subsequently, RSQ contacts the patient; if the complaint is deemed substantiated, RSQ and DT open an internal NC report to investigate the causes and decide on internal measures, which are then discussed during the management review.
- Anonymously: complaint is processed and managed internally by opening an NC report.

The maximum timeframe for RSQ to respond to a complaint is ten days from the receipt of the report.
The completion of complaint forms and user satisfaction questionnaires, daily informal and formal contacts by staff, and feedback from users—both written and verbal—are the tools CHC Abruzzo S.r.l. uses to monitor and measure user satisfaction.

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4. SECTION 4 - QUALITY INDICATORS AND OBJECTIVES

Quality factor	Measured indicator	Quality standard	Verification	Results 2025	Objective 2026	Final balance 2026
Performance Acceptance	Waiting times for acceptance	Waiting times < 15 minutes for at least 90% of admissions	User satisfaction questionnaire	9,4	90% of ratings between Good and Excellent	
Delivery of report	Reporting deadlines	90% On-time deliveries	User satisfaction questionnaire	0	N. unsuitability for reporting postponements < 20	
Patient satisfaction	Number of questionnaires rated between Good and Excellent / Total number of questionnaires per laboratory	90% of ratings between Good and Excellent	User satisfaction questionnaire	9,4	90% of ratings between Good and Excellent	
Suitable sample	Total number of unsuitable samples per laboratory	N < 50	Non-suitability sample statistics	20	N. < 50	
Analytical data quality	Total number of CQIs OUT per year	N < 250	Annual report	212	N < 250	
Maintenance efficiency	Number of maintenance interventions	Max 10 equipment failures in one year	Maintenance reports	5	Max 10	
VEQ	Number of VEQ OUT per program / Total number of VEQ per program per year	N < 5	Annual report	13,5%	N < 5	

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Staff training - competence	Acquisition of ECM by healthcare personnel	150 ECM over three years	Annual report	Goal achieved	50 ECM for year	
Staff training - competence	Number of hours dedicated to training	15h	Training reports	Goal achieved	20h	
Environmental cleaning	Presence of microorganisms on surfaces	Microbial load < 1.000 CFU/100 cm^2	Cleaning Report	Goal achieved	Cleaning inspection results NEGATIVE > 80% of activities	
Effective communication – Financial and IT transparency	Proposal for comparative analysis quotes between two laboratories under the same legal entity	90% of ratings between Good and Excellent Number of complaints < 10	User satisfaction questionnaire Complaints		90% of ratings between Good and Excellent Number of complaints < 10	

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5. SECTION 5 - USER PREPARATION

Before going to the laboratory, patients is required to inform himself about the procedures for preparing to laboratory tests and appropriate time for sampling.
If the patient does not have all the necessary information, he can contact the laboratory staff, who will provide adequate information on sampling procedures, instructions and preparation for test.

Blood Sampling

Peripheral venous blood is the standard biological sample for most laboratory tests.
To ensure accurate medical test results, it's generally recommended to fast for 10-12 hours before a test, and to avoid smoking, strenuous exercise, alcohol, and caffeine. Patients must also inform the blood collection personnel of all current medications and therapies, as these can influence test results. If test values are inconsistent with clinical findings, further testing may be necessary after consulting a doctor and potentially discontinuing interfering medications or completing the required preparation.

Glycemic/Insulin Curve

The glucose tolerance test has to be done according to the doctor's instructions.
It has to be done in the morning and requires a minimum of 8 hours of fasting (no more than 12 hours).
The glucose tolerance test requires the ingestion of 75g of glucose equivalent to 150ml of solution.
Before starting, fasting blood sugar is checked; if too high (>116 mg/dL, or >92 mg/dL for pregnant women, with a 10% tolerance), the GTT is not performed.
Venous blood samples are taken at set intervals (three venous blood samples taken one hour apart or six samples taken 30 minutes apart).
Insulin curve, however, requires five samples taken 30 minutes apart.
For the entire duration of the test, the patient must remain seated in the waiting room, without eating or drinking (only water if necessary).
Users can book this test by contacting the laboratory via email or telephone.

Prolactin

The test is performed by appointment.
Sample has to be taken at least two hours after waking up.
To avoid stress from the blood sample, a cannula is inserted and maintained until the end of the test. Serial blood samples are taken within the time indicated by the medical prescription.
The test is performed by appointment only; please contact the laboratory via email or telephone.

Urine Sample Collection

Urine samples has to be collected in special sterile containers sold at pharmacies or provided by the analysis laboratory.
Urine Test: Collect urine first thing in the morning in a sterile tube/container after personal hygiene. Do not perform the test during menstrual flow.
Pregnancy Test: Collect urine in a sterile tube/container after personal hygiene.
Urine Culture: Collect the sample before starting antibiotic therapy.
Urine Culture - ADULT: Collect the first urine of the morning in a sterile tube/container after personal hygiene. The "midstream" method is used (discard the first urine stream, collect subsequent urine in the container, and discard the last urine).
Urine Culture - CHILDREN: Wash and rinse the external genitalia thoroughly with soap and water. Apply the bag, ensuring it adheres to the perineum and suprapubic region. Do not leave it in place for more than 30

minutes. If after this time, no urination has occurred or stool has been passed, remove the bag, repeat the cleaning procedure, and apply a new bag. Do not pour urine from the bag into another container. After collection, place the bag tightly closed in an upright position in a wide-mouth container with a screw cap.
Storage and transport instructions: The sample has to be delivered to the laboratory as soon as possible (within 2 hours). Otherwise, store at 4°-8°C for 12-24 hours.
24-Hour Urine Collection: Purchase a wide-mouth container with a screw cap and a capacity of at least 2.5 liters from a pharmacy for collecting 24-hour urine. After discarding the first morning urine, collect all urine collected during the day and the following night, including urine from the morning of the second day at the same time and minutes as the previous day.
Close the container carefully, making sure it is perfectly sealed and recording your name, surname, and date on the label. Bring the urine sample, closed and clean, to the laboratory.
Some tests require a 24-hour urine collection with added preservatives (10 ml of hydrochloric acid diluted 50%). In this case, contact the laboratory.
Storage Instructions: During collection, the container should be stored in the refrigerator between 4° and 8° C to limit bacterial growth.

Stool Collection

To collect a stool sample, use the provided sterile container, collecting a walnut-sized amount avoiding urine or toilet water contamination. For optimal results, collect the sample in the early morning and deliver it to the lab within 1-2 hours. If not possible, store the previous day's stool in the refrigerator for a maximum of 24 hours before delivery.

Parasitological, chemical-physical test, and stool culture

For the most accurate microbiological stool test results, the sample has to be collected before starting any antimicrobial or antibiotic treatment, and as soon as possible during the acute phase of the illness, to increase the chance of detecting the pathogen.

Occult Blood Test

No special diet is required.
Avoid your menstrual cycle.
Do not brush your teeth.
Postpone the test if you have bleeding hemorrhoids.
Do not use laxatives, antidiarrheal, or antimicrobials before the test.
If collecting two or three samples, number each container and write your surname and name (in capital letters) on the label.

Scotch test

To perform the Scotch tape test for pinworm eggs, use a piece of transparent tape shorter than the slide, apply it to the perianal area immediately after waking up, then firmly attach the tape to the slide, avoiding bubbles. Repeat the test on three different days, even if the first result is negative, as pinworm egg laying is intermittent.

Semen analysis

Semen analysis: Abstain from ejaculation for 2-5 days, and then collect the entire semen sample by masturbation into a sterile container, ensuring it is delivered to the lab within one hour to prevent temperature changes.
It is essential to indicate the precise time of collection and the number of days of abstinence on the container.
Users can book this test by contacting the laboratory via email or telephone.

Fragmentation: This test is important to diagnose infertility and identify any single or double breaks in sperm DNA. The collection process is the same as a semen analysis.

Users can book this test by contacting the laboratory via email or telephone.

Sperm culture

Abstinence is not required for a sperm culture.

Collect the sample directly into a sterile container after intimate and hand hygiene. Collect only by masturbation.

All antibiotic therapy has to been discontinued for at least 5 days.

Breath Test for Helicobacter pylori

Urea Breath Test is a simple, non-invasive method that allows for the detection of Helicobacter pylori in both children and adults.

To perform the test, patient must strictly adhere to the following instructions:

- not have taken antibiotics in the last 4 weeks;
- not have taken gastroprotectives or antacids in the previous 7 days;
- not have taken probiotics (lactose-producing enzymes) and laxatives, or performed intestinal cleansing enemas in the last 2 weeks;
- refrain from using non-essential medications in the 12 hours prior to the test. On the day of the test, the patient may continue to take life-saving medications, such as those for blood pressure and heart health, but should avoid Euthyrox;
- in the week prior to the test, avoid foods containing milk and dairy products of animal origin;
- avoid foods containing lactose as an additive (carefully read the labels of foods containing lactose as an allergen);
- The day before the test, the patient must adhere to the following diet:
  - Breakfast: a glass of tea and toast
  - Lunch: boiled rice seasoned with oil
  - Dinner: grilled or boiled meat or fish seasoned with oil.
- avoid complex carbohydrates and fiber (fruit, vegetables, bread, pasta, and legumes), alcohol and carbonated drinks, candy and chewing gum, and condiments other than a small amount of raw olive oil;
- avoid excessive physical exertion at least from the evening before the test;
- refrain from smoking at least from the evening before the test;
- do not brush your teeth on the day of the test;
- on the day of the test, the patient must fast for at least 8 hours.

For the entire duration of the test (30 minutes), patient must remain in the laboratory without eating, drinking, or smoking.

The patient drinks a dose of C-Urea orally. The test is performed on exhaled breath by blowing into a bag at time 0 minutes and another bag at time 30 minutes.

Users can book this test by contacting the laboratory via email or telephone.

H2 Breath Test: Lactose/Lactulose/Xylose/Glucose/Sorbitol Malabsorption

To perform the test, the patient must strictly adhere to the following instructions:

- not have taken antibiotics in the last 4 weeks;
- not have taken probiotics (lactic ferments) and laxatives or performed bowel cleansing enemas in the last 2 weeks;
- refrain from using non-essential medications in the 12 hours prior to the test. On the day of the test, the patient may continue to take life-saving medications such as those for blood pressure and heart health, but should avoid Euthyrox;
- in the week before the test, avoid foods containing milk and dairy products of animal origin;

- avoid foods containing lactose as an additive (carefully read the labels of foods containing lactose as an allergen);
- the day before the test, the patient must adhere to the following diet:
  - Breakfast: a glass of tea and toasted bread
  - Lunch: boiled rice seasoned with oil
  - Dinner: grilled or boiled meat or fish seasoned with oil.
- avoid complex carbohydrates and fiber (fruit, vegetables, bread, pasta, and legumes), alcohol and carbonated drinks, candy and chewing gum, and condiments other than a small amount of raw olive oil;
- avoid excessive physical exertion at least from the evening before the test;
- refrain from smoking at least from the evening before the test;
- do not brush your teeth on the day of the test;
- on the day of the test, the patient must fast for at least 8 hours.

Test execution: The patient must wait in the waiting room for the entire test duration (4 hours for the Lactose and Sorbitol Breath Test, 2 hours for the Lactulose, Glucose, Xylose Breath Test).
The test consists of blowing into the appropriate bag once upon arrival and subsequently after the administration of the Lactose/Lactulose/Glucose/Sorbitol/Xylose solution. Subsequent blows will occur at 30-minute intervals for the Lactose/Sorbitol Breath Test and 15-minute intervals for the Lactulose/Glucose/Xylose Breath Test, for a total of nine exhalations.
Users can book this test by contacting the laboratory via email or telephone.

Throat swab

For microbiological swabs, you should not eat or brush your teeth before the test, and the test should not be performed during antibiotic therapy. It is recommended to wait for at least 5 days after your last antibiotic treatment to ensure accurate results for common germs and fungi.
Users can book this test by contacting the laboratory via email or telephone.

Microbiological swab (nasal, ocular, ear, wound, ulcer, mouth, skin, tongue, nail)

Common germs and fungi are routinely tested.
It is recommended to wait for at least 5 days after your last antibiotic treatment to ensure accurate results for common germs and fungi.

Vaginal swab (common germs, Mycoplasma, Ureaplasma, and Chlamydia)

To avoid altering the results of the vaginal swab, follow these recommendations:

- Perform the test a few days before the start of your menstrual cycle or a few days after the end of your period;
- Abstain from sexual intercourse for 48 hours prior to the test;
- Stop any antibiotic or antifungal therapy the week before the swab test;
- Stop any local vaginal therapies, such as ovules and suppositories, in the 48 hours prior to the test;
- Avoid vaginal douching;
- Clean the external genitalia.

Samples are collected from the posterior vaginal fornix using sterile swabs. Cervical swabs are examined using a sterile bivalve speculum only on non-pregnant women.
In pregnancy: For neonatal prevention of Streptococcus agalactiae (GBS), a vaginal swab is performed around the 36th-37th week of pregnancy. The same test should be performed simultaneously with a rectal swab.
Pediatrics: A vulvar swab is recommended for symptoms affecting the external genitalia.
Sample collection is performed by qualified personnel.
Users can book this test by contacting the laboratory via email or telephone.

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Pap test, HPV test

To avoid altering the test results, some recommendations should be followed:

- Wait at least 5 days after taking antibiotics or antifungal therapy;
- Discontinue any local vaginal therapies, such as ovules and suppositories, for 48 hours prior to the test.

The test is performed directly on endocervical and exocervical material, so a speculum is required.
It can be performed daily, except during the menstrual period and perimenstrual periods (5 days before and 5 days after menstruation).
HPV testing can also be performed on men using a urethral swab.
Users can book this test by contacting the laboratory via email or telephone.

Urethral swab

To avoid altering the test results, some recommendations should be followed:

- Wait at least 5 days after taking antibiotics or antifungal therapy;
- Abstain from sexual intercourse for 24 hours prior to the test;
- Perform the test a few days before the start of your menstrual cycle or a few days after the end of your period;
- Not having urinated in the last 3 hours.

The test is performed by inserting a special swab into the urethral opening.
Users can book this test by contacting the laboratory via email or telephone.

Alcohol and Drug test

At reception, patient must show identification and health insurance card and specify the reason for the tests (occupational medicine, self-monitoring, driving license or competitive exam commissions, firearms license).
The patient is asked to sign an informed consent form.
In cases of medico-legal significance, the blood and/or urine sample is taken in the presence of a healthcare professional. A sampling report is drawn up, and the samples, appropriately labeled, are sealed with patient signatures. The patient is given a copy of the sampling report.

Detection for Fungi or Dermatophytes

It is recommended to avoid the use of nail or antifungal treatments in the days leading up to the sampling.
Detection for Dermatophytes requires at least one month.

Dysbiosis

Urine sample has to be collected in special sterile containers sold at pharmacies or provided by the laboratory.
The minimum required quantity is 30 ml.

Urine Cytology Test

The cytology test must be performed on three urine samples collected over three consecutive days.
To perform the test, you must be provided with a package containing: three pre-filled containers with a suitable liquid for storing and transporting urine samples, three self-adhesive labels, and this instruction sheet.
Urine should be collected from the second morning void.
On the first day of collection, open the "SAMPLE 1" container containing the preservative and pour in the urine until the maximum level is reached (just below the rim of the container). Carefully close the container with the screw cap, write your personal information on the provided self-adhesive label, and apply it to the sample tube. Store at room temperature.
Repeat the procedure on the second and third days, using the containers labeled "SAMPLE 2" (urine sample from the second day) and "SAMPLE 3" (urine sample from the third day).

Place the three samples in the container and deliver them together to the analysis laboratory as soon as possible (within 2 hours).
Transportation: It is recommended to keep the tubes upright.

Microbiota

Stool should be collected in a suitable sterile plastic container purchased from a pharmacy or provided by the laboratory, in a quantity equal to the volume of a walnut, avoiding possible contamination with urine and/or toilet water. The sample must be delivered to the collection room within 8 hours. Store the sample at 4°-8°C until delivery to the laboratory.

Behavioral tips before/after blood sampling

- Fast for several hours before undergoing blood sampling;
- Enter the blood sampling room one person at a time (minors must be accompanied by a parent or relative);
- Inform the medical staff of any complications encountered during previous blood sampling;
- Allow the medical staff to apply the tourniquet and disinfect the skin;
- If you are easily agitated, it is advisable not to watch the blood sampling procedure directly;
- During the blood sampling procedure, do not make any movements that could cause the needle to slip out or move from the vein;
- Wait for the medical staff to inform you that the blood sampling is complete;
- Keep sterile cotton wool pressed against the wound to allow the blood to clot quickly;
- Wait for medical personnel to check your health before leaving.

Notes on possible complications

If any complications occur, return to the laboratory immediately and notify the medical staff.
If person has previously experienced loss of consciousness, it is advisable to be accompanied by personnel responsible for monitoring them before, during, and after the blood draw.

6. SECTION 6 – SAMPLE TRANSPORT LOGISTICS

Cerba Healthcare Abruzzo S.r.l. has a contract with Cerba Healthcare Italia Services (a company belonging to the Cerba Group) for the transport of samples from outsourced tests (listed in the price list) and those sent to the laboratory at Via Luigi Tripoti 31/C Teramo, from all laboratories of the Cerba Healthcare Abruzzo Srl. Group.
The price list is available for consultation in the waiting room.
Biological samples travel at controlled temperatures in dedicated vehicles with trained personnel.
The sample transport procedure is available upon request from the reception desk.

TEST	CLINICAL PURPOSE	PRINCIPLE
MICROBIOLOGY		
Urine culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Stool culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Culture of various specimens	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Semen culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Stool culture for Campylobacter	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Fungal culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Bronchial aspirate/lavage culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Sputum culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Mycoplasma and Ureaplasma culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Streptococcus agalactiae culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Synovial fluid culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Cerebrospinal fluid culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Neisseria gonorrhoeae culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Oropharyngeal swab culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Vaginal swab culture + susceptibility testing	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Cervical swab culture + susceptibility testing	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Conjunctival swab culture + susceptibility testing	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Urethral swab culture + susceptibility testing	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Deep wound swab culture + susceptibility testing	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Ascitic/peritoneal fluid culture + susceptibility testing	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics

Gardnerella culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Stool culture for Yersinia	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Rectal swab culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Dermatophyte culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
Streptococcus pyogenes culture	Identification of pathogenic microorganisms + assessment of the identified microorganism's susceptibility to various antibiotics	In vitro cultivation of microorganisms + exposing the isolated bacterium to known concentrations of various antibiotics
CHROMATOGRAPHIC IMMUNOASSAY TESTS		
Fecal Occult Blood 1	Colorectal screening: detecting trace amounts of blood in the stool	Chromatographic immunoassay tests
Helicobacter pylori Antigen Test	Identifying infections caused by the specific bacterium H. pylori in the stool	Chromatographic immunoassay tests
Chlamydia trachomatis Antigen Test	Identifying infections caused by the specific bacterium Chlamydia trachomatis in the urogenital tract	Chromatographic immunoassay tests
Adenovirus Test	Identifying viral infections in the stool	Chromatographic immunoassay tests
Rotavirus Test	Identifying viral infections in the stool	Chromatographic immunoassay tests
Giardia Antigen Test - Stool	Identifying parasitic infections in the stool	Chromatographic immunoassay tests
Clostridium difficile GDH Antigen	Detecting the presence of the C. difficile bacterial antigen in the stool	Chromatographic immunoassay tests
Clostridium difficile Toxin A/B	Detecting the presence of dangerous toxins produced by the C. difficile bacterium in the stool	Chromatographic immunoassay tests
Fecal Elastase	Assessing the digestive function of the pancreas	Chromatographic immunoassay tests
MICROSCOPY EXAMINATIONS		
Trichomonas screening	Diagnose trichomoniasis, a sexually transmitted infection caused by the protozoan Trichomonas vaginalis	Fresh microscopic analysis to detect the presence of the parasite
Scotch tape test	Diagnose enterobiasis (pinworm infection)	Fresh microscopic analysis to observe the parasite's characteristic motility
Stool parasite exam	Identify the presence of more complex intestinal parasite infestations	Microscopic analysis of the stool sample
Stool analysis	Microscopic examination of fecal components	Basic visual, chemical, and microscopic analysis of the stool sample
MALE FERTILITY TEST		
Semen analysis	Male fertility assessment	Macroscopic (physicochemical characteristics) and microscopic analysis of seminal fluid
Sperm DNA fragmentation test	Male fertility assessment	Evaluation of the integrity of the genetic material contained within the spermatozoa
COAGULATION		
Prothrombin Time	Evaluate the effectiveness of the blood coagulation system	Measures the time it takes for a clot to form by activating the extrinsic pathway.
INR	Evaluate the effectiveness of the blood coagulation system	Standardizes the PT result to monitor oral anticoagulant therapy.
Partial Thromboplastin Time (APTT)	Evaluate the effectiveness of the blood coagulation system	Assesses clotting time by activating the intrinsic and common pathways.
Fibrinogen	Evaluate the effectiveness of the blood coagulation system	Quantifies the key protein converted into fibrin to form the clot network.
Antithrombin III	Evaluate the effectiveness of the blood coagulation system	Measures the activity of the primary natural coagulation inhibitor that prevents excessive thrombosis.
D-Dimer	Evaluate the effectiveness of the blood coagulation system	Detects fragments resulting from fibrin degradation to rule out the presence of an active thrombus.
CLINICAL CHEMISTRY (SERUM/URINE) – HORMONES – VIRUSES		
GOT Transaminase (AST)	Liver function test	Enzymatic kinetic assays
GPT Transaminase (ALT)	Liver function test	Enzymatic kinetic assays
Creatinine	Kidney function test	Enzymatic kinetic assays
Gamma-GT	Liver function test	Enzymatic kinetic assays
Glucose	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Potassium	Assess fluid-electrolyte balance and hydration status	ISE (Ion-Selective Electrode)
Sodium	Assess fluid-electrolyte balance and hydration status	ISE (Ion-Selective Electrode)
Total Protein	Assess metabolic-nutritional function	Biuret reaction
Total Bilirubin	Liver function test	Enzymatic kinetic assays
Triglycerides	Assess fat metabolism (cardiovascular risk)	Enzymatic and colorimetric reactions
HDL Cholesterol	Assess fat metabolism (cardiovascular risk)	Enzymatic and colorimetric reactions
Total Cholesterol	Assess fat metabolism (cardiovascular risk)	Enzymatic and colorimetric reactions
LDL Cholesterol	Assess fat metabolism (cardiovascular risk)	Enzymatic and colorimetric reactions
Uric Acid	Assess purine metabolism	Enzymatic and colorimetric reactions
C-Reactive Protein	Detect acute inflammatory states	Enzymatic kinetic assays
Ferritin	Assess iron status—specifically, circulating iron levels and the body's stored iron reserves.	Immunometry (e.g., CLIA – Chemiluminescence Immunoassay)

Iron	Assess iron status—specifically, circulating iron levels and the body's stored iron reserves.	Chemical-colorimetric reaction (spectrophotometry)
Calcium	Assess fluid-electrolyte balance and hydration status	ISE (Ion-Selective Electrode)
Alkaline Phosphatase	Evaluate the health of the liver, biliary tract, and bone tissue	Spectrophotometry
Creatine Kinase (CK)	Detect and monitor skeletal muscle injury or inflammation	Spectrophotometry
Magnesium	Assess fluid-electrolyte balance and hydration status	ISE (Ion-Selective Electrode)
Chloride	Assess fluid-electrolyte balance and hydration status	ISE (Ion-Selective Electrode)
Phosphorus	Assess fluid-electrolyte balance and hydration status	ISE (Ion-Selective Electrode)
LDH - Lactate Dehydrogenase	Monitor widespread tissue or cellular damage and serve as a non-specific marker in oncology or hematology	Spectrophotometry
Rheumatoid Factor (Rheumatest)	Support screening and diagnosis of systemic autoimmune diseases, particularly rheumatoid arthritis	Immunoturbidimetry
IgA Immunoglobulins	Quantitatively assess antibody efficiency to rule out immune deficiencies or document responses to infections and chronic inflammation	Immunoturbidimetry
IgM Immunoglobulins	Support screening and diagnosis of systemic autoimmune diseases, particularly rheumatoid arthritis	Immunoturbidimetry
IgG Immunoglobulins	Quantitatively assess antibody efficiency to rule out immune deficiencies or document responses to infections and chronic inflammation	Immunoturbidimetry
Antistreptolysin O (ASO)	Detect recent or past Group A streptococcal infection	Immunoturbidimetry
Direct Bilirubin	Liver function test	Saggi cinetici enzimatici
Indirect Bilirubin	Liver function test	Saggi cinetici enzimatici
Fasting Glucose	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Glucose 30'	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Glucose 60'	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Glucose 90'	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Glucose 120'	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Glucose 150'	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Glucose 180'	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Postprandial Glucose	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Blood Urea Nitrogen (BUN/Urea)	Assess kidney function	Colorimetric enzyme kinetics:
Iron-Binding Capacity	Assess iron status—specifically, circulating iron levels and the body's stored iron reserves.	Immunometry (e.g., CLIA – Chemiluminescence Immunoassay)
Total Transferrin	Assess the body's capacity to transport iron in the bloodstream	Immunoturbidimetry
Lipase	Pancreatic function test	Enzymatic kinetic assays
Pancreatic Amylase	Pancreatic function test	Enzymatic kinetic assays
Albumin	Assess liver and kidney function and nutritional status	Spectrophotometry
TSH	Evaluate thyroid function	Immunometry (ELISA / CLIA)
FT3	Evaluate thyroid function	Immunometry (ELISA / CLIA)
FT4	Evaluate thyroid function	Immunometry (ELISA / CLIA)
Total PSA	Monitor or support the diagnosis of specific oncological conditions	Immunometry (ELISA / CLIA)
Total PSA Reflex	Monitor or support the diagnosis of specific oncological conditions	Immunometry (ELISA / CLIA)
Free PSA	Monitor or support the diagnosis of specific oncological conditions	Immunometry (ELISA / CLIA)
Free PSA/Total PSA Ratio	Monitor or support the diagnosis of specific oncological conditions	Immunometry (ELISA / CLIA)
Beta-hCG	Confirm and monitor pregnancy status	CLIA - Chemiluminescence Immunoassay
FSH	Assess reproductive system function and fertility	Immunometry (ELISA / CLIA)
17-Beta-Estradiol	Evaluate ovarian function, female fertility, and the proper balance of the reproductive system	Chemiluminescence Immunoassay
CEA	Monitor or support the diagnosis of specific oncological conditions	Immunometry (ELISA / CLIA)
LH	Assess reproductive system function and fertility	Immunometry (ELISA / CLIA)
Progesterone	Assess reproductive system function and fertility	Immunometry (ELISA / CLIA)
CA 19-9 (GICA)	Monitor or support the diagnosis of specific oncological conditions	Immunometry (ELISA / CLIA)
Testosterone	Assess reproductive system function and fertility	Immunometry (ELISA / CLIA)
Prolactin	Investigate hypothalamic-pituitary axis dysfunction in both women and men	Chemiluminescence Immunoassay
CA 125	Monitor or support the diagnosis of specific oncological conditions	Immunometry (ELISA / CLIA)
Folic Acid	Evaluate levels of this water-soluble vitamin, which is essential for DNA synthesis, cell division, and the proper production of red blood cells. Monitor or support the diagnosis of specific oncological conditions	Chemiluminescence Immunoassay
Alpha-Fetoprotein	Identify vitamin deficiency states	Immunometry (ELISA / CLIA)
Vitamin B12	Diagnose and monitor autoimmune thyroid diseases	Chemiluminescence Immunoassay
Thyroglobulin Antibodies	Diagnose and monitor autoimmune thyroid diseases	Chemiluminescence Immunoassay
Anti-TPO (Microsomal) Antibodies	Assess sugar metabolism (diabetes diagnosis)	Chemiluminescence Immunoassay
Glucose 1h after Breakfast	Assess sugar metabolism (diabetes diagnosis)	Enzymatic and colorimetric reactions
Glucose 2h after Full Lunch	Assess levels of this sulfur-containing amino acid to estimate cardiovascular risk and identify B-vitamin deficiencies	Enzymatic and colorimetric reactions
Homocysteine	Assess the body's capacity to transport iron in the bloodstream	Chemiluminescence immunoassay (CLIA) or colorimetric enzymatic assays
Unsaturated Transferrin	Identify current or past viral infections	Immunoturbidimetry
Cytomegalovirus IgG Antibodies	Identify current or past viral infections	Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence.

Cytomegalovirus IgM Antibodies	Identify current or past parasitic infections	Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence.
Toxoplasma IgG Antibodies	Identify current or past parasitic infections	Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence. Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence.
Toxoplasma IgM Antibodies	Identify current or past viral infections	Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence.
HIV (p24 antigen and HIV antibodies) 1+2)	Identify current or past viral infections	Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence.
HCV Ab	Identify current or past viral infections	Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence.
HBs Ag	Identify current or past viral infections	Immunometry
Total IgE (PRIST)	Confirm suspected allergic diseases	Ultra-high analytical precision sandwich immunoassay
Troponin T - hs (high-sensitivity)	Rapid diagnosis of acute myocardial infarction	Immunometry (ELISA / CLIA)
Insulin	Assess insulin response	Immunometry (ELISA / CLIA)
Basal insulin	Assess insulin response	Immunometry (ELISA / CLIA)
Insulin 30'	Assess insulin response	Immunometry (ELISA / CLIA)
Insulin 60'	Assess insulin response	Immunometry (ELISA / CLIA)
Insulin 90'	Assess insulin response	Immunometry (ELISA / CLIA)
Insulin 120'	Assess insulin response	Immunometry (ELISA / CLIA)
Insulin 150'	Assess insulin response	Immunometry (ELISA / CLIA)
Insulin 180'	Assess insulin response	Immunometry (ELISA / CLIA)
Early postprandial insulin	Assess insulin response	Immunometry (ELISA / CLIA)
Vitamin D (25-OH)	Evaluate calcium metabolism, bone health, and parathyroid gland function	Chemiluminescence immunoassay
Parathyroid hormone (PTH)	Evaluate calcium metabolism, bone health, and parathyroid gland function	Non-competitive "sandwich" immunoassay
Reflex TSH	Assess thyroid function	Immunometry (ELISA / CLIA)
Glycated hemoglobin	Conduct an in-depth assessment of sugar metabolism	Non-enzymatic glycation
Amylase isoenzyme	Identify the tissue origin and cause of abnormally high blood amylase levels	Selective immunological inhibition
HOMA index	Conduct an in-depth assessment of sugar metabolism	Non-enzymatic glycation
Insulin after breakfast	Assess insulin response	Immunometry (ELISA / CLIA)
Insulin 2h after full lunch	Assess insulin response	Immunometry (ELISA / CLIA)
Microalbuminuria	Detect early signs of and monitor damage or alterations to the kidney's filtration system	Immunoturbidimetry
24h microalbuminuria	Detect early signs of and monitor damage or alterations to the kidney's filtration system	Immunoturbidimetry
Proteinuria	Detect early signs of and monitor damage or alterations to the kidney's filtration system	Colorimetric method
24h proteinuria	Detect early signs of and monitor damage or alterations to the kidney's filtration system	Colorimetric method
Urinary chloride	Evaluate renal filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
24h urinary chloride	Evaluate renal filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
Urinary urea	Monitor kidney function	Urease method
24h urinary urea	Monitor kidney function	Urease method
Urinary uric acid	Monitor kidney function	Uricase/peroxidase method
24h urinary uric acid	Monitor kidney function	Uricase/peroxidase method
Urinary phosphorus	Evaluate renal filtration and excretion capacity	Quantitative measurement of urine solutes
24h urinary phosphorus	Evaluate renal filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
Urinary calcium	Evaluate renal filtration and excretion capacity Assess the kidney's filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
24h urinary calcium	Assess the kidney's filtration and excretion capacity	Quantitative measurement of urine solutes
Urinary sodium	Assess the kidney's filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
24h urinary sodium	Assess the kidney's filtration and excretion capacity	Quantitative measurement of urine solutes

Urinary potassium	Assess the kidney's filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
24h urinary potassium	Assess the kidney's filtration and excretion capacity	Quantitative measurement of urine solutes
Urinary magnesium	Assess the kidney's filtration and excretion capacity	Quantitative measurement of urine solutes
24h urinary magnesium	Assess the kidney's filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
Urinary creatinine	Assess the kidney's filtration and excretion capacity	Quantitative measurement of urine solutes
24h urinary creatinine	Assess the kidney's filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
Urinary glucose	Detect abnormal sugar excretion in the urine, a sign of blood sugar overload or a renal defect	Sequential enzymatic reaction
24h urinary glucose	Detect abnormal sugar excretion in the urine, a sign of blood sugar overload or a renal defect	Sequential enzymatic reaction
Urea clearance	Assess the kidney's filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
Uric acid clearance	Assess the efficiency with which the kidneys remove (clear) uric acid from the bloodstream	Quantitative measurement of urine solutes
Creatinine clearance	Assess the kidney's filtration and excretion capacity over a 24-hour period	Quantitative measurement of urine solutes
CA15-3	Monitor or support the diagnosis of specific oncological conditions	Immunometry (ELISA / CLIA)
Rubella IgG antibodies	Identify active or past viral infections	Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence. Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence.
Rubella IgM antibodies	Identify active or past viral infections	Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence.
HBs Ab titration	Identify active or past viral infections	Detection of antigens (parts of the virus) or antibodies (IgG and IgM) produced by the immune system against the pathogen, via antigen-antibody binding detected by chemiluminescence.
Urinary amylase	Confirm or monitor a diagnosis of acute pancreatitis	Spectrophotometry
PROTEIN ELECTROPHORESIS		
Serum protein electrophoresis – Protein electrophoresis pattern	Assessment of nutritional status and organ function, detection of inflammatory states, screening for immune abnormalities.	Capillary electrophoretic migration
EMATOLOGY/VES		
Complete Blood Count	General assessment, diagnosis of anemia, detection of infections or inflammation, investigation of coagulation disorders	Counting and classifying blood cells (white blood cell differential, red blood cells, and platelets)
Platelet Count	Monitoring blood clotting ability	Counting platelets
Reticulocyte Count	Evaluating bone marrow function in red blood cell production	Determining the percentage of young red blood cells recently released into the bloodstream from the bone marrow
VES	Detecting and monitoring the presence of inflammation	Measuring the rate at which red blood cells separate from plasma and settle to the bottom
CHROMATOGRAPHIC IMMUNOASSAY TESTS		
SARS-CoV-2 Antigen Rapid Test (Qualitative)	Diagnosing active SARS-CoV-2 infection	Chromatographic immunoassay tests
Waaler-Rose Test	Diagnosing autoimmune diseases—particularly rheumatoid arthritis—or monitoring their status	Chromatographic immunoassay tests
Group A Beta-Hemolytic Streptococcus Test	Detecting the presence of *Streptococcus pyogenes* in the pharynx	Chromatographic immunoassay tests
Mononucleosis Rapid Test	Diagnosing the viral disease caused primarily by the Epstein-Barr virus (EBV)	Chromatographic immunoassay tests
Pregnancy Test	Confirming pregnancy	Chromatographic immunoassay tests
BREATH TEST		
H. pylori Breath Test	Diagnosing Helicobacter pylori stomach infections	The patient ingests a solution containing urea labeled with a non-radioactive carbon isotope (^{13}C). If *Helicobacter pylori* is present in the stomach, the urease enzyme produced by the bacterium metabolizes the urea, releasing labeled carbon dioxide.
Glucose Breath Test	Diagnosing food intolerances or alterations in gut flora	Lactulose or glucose is administered orally. If an abnormal amount of bacteria is present in the small intestine (SIBO), they will ferment the administered sugar prematurely. Breath analysis will show an early peak in hydrogen or methane.

Lactose Breath Test	Diagnosing food intolerances or alterations in gut flora	The patient ingests the sugar to be tested while fasting. In the event of a deficiency in the enzyme responsible for digestion (e.g., lactase), the sugar is not absorbed by the small intestine and reaches the colon intact. There, bacterial flora ferment it, producing large quantities of hydrogen (H_2) and/or methane (CH_4).
Lactulose Breath Test	Diagnosing food intolerances or alterations in gut flora	Lactulose or glucose is administered orally. If an abnormal amount of bacteria is present in the small intestine (SIBO), they will ferment the administered sugar prematurely. Breath analysis will show an early peak in hydrogen or methane.
Sorbitol Breath Test	Diagnosing sorbitol malabsorption	The patient ingests the sugar to be tested while fasting. In the event of a deficiency in the enzyme responsible for digestion (e.g., lactase), the sugar is not absorbed by the small intestine and reaches the colon intact. There, bacterial flora ferment it, producing large quantities of hydrogen (H_2) and/or methane (CH_4).
COMPLETE URINALYSIS		
Complete urinalysis	Assess the function of the urinary system	Physicochemical and microscopic analysis of urinary sediment
DRUG TEST		
Detection of Opiates and Metabolites	Level 1 toxicological-analytical testing for occupational medicine, clinical monitoring, emergency medicine, and forensic medicine	Detecting narcotic substances using immunochromatographic methods
Detection of Cocaine and Metabolites	Level 1 toxicological-analytical testing for occupational medicine, clinical monitoring, emergency medicine, and forensic medicine	Detecting narcotic substances using immunochromatographic methods
Detection of Cannabinoids	Level 1 toxicological-analytical testing for occupational medicine, clinical monitoring, emergency medicine, and forensic medicine	Detecting narcotic substances using immunochromatographic methods
Detection of Amphetamine/Methamphetamine	Level 1 toxicological-analytical testing for occupational medicine, clinical monitoring, emergency medicine, and forensic medicine	Detecting narcotic substances using immunochromatographic methods
Detection of Ecstasy (MDMA)	Level 1 toxicological-analytical testing for occupational medicine, clinical monitoring, emergency medicine, and forensic medicine	Detecting narcotic substances using immunochromatographic methods
Detection of Methadone	Level 1 toxicological-analytical testing for occupational medicine, clinical monitoring, emergency medicine, and forensic medicine	Detecting narcotic substances using immunochromatographic methods
Detection of Buprenorphine	Level 1 toxicological-analytical testing for occupational medicine, clinical monitoring, emergency medicine, and forensic medicine	Detecting narcotic substances using immunochromatographic methods


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