

CARRARA DENTAL CLINIC

SERVICE CHARTER

Dentistry and outpatient oral surgery
and facial aesthetic medicine

OUR COMMITMENT

Clinical expertise, safety, transparency and personal attention throughout the care pathway.

2 Piazza del Commercio - Marina di Carrara (MS), Italy

Tel. 0585 780192 | www.carraradentalclinic.it

Edition 2 - 14 September 2026

Essential information

Item	Information
Facility	Carrara Dental Clinic S.r.l.
Address	2 Piazza del Commercio, Marina di Carrara (MS), Italy
VAT number	01497440451
Telephone	0585 780192
Website	www.carraradentalclinic.it
Opening hours	Monday to Friday, 9:00 am to 7:00 pm, continuously
Closed	Saturday and Sunday
Legal Representative and Employer	Andrea Battella
Clinical Director	Dr Giovanni Salvetti

The Service Charter is available at the facility and on the website. It is a living document and is reviewed whenever there are significant changes to services, organisation or the commitments stated in it.

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1 Purpose of the Service Charter

Carrara Dental Clinic is a private healthcare facility providing prevention, diagnosis and treatment of dental and oral conditions, lower-complexity outpatient oral surgery and facial aesthetic medicine, within the scope of its healthcare authorisation and the professional competence of its practitioners.

This Charter informs patients about the available services, how to access them, patient rights and responsibilities, and the standards adopted by the facility. It also supports transparency, participation and continuous improvement.

PURPOSE

To guide patients, explain the care pathway clearly and state specific, measurable commitments concerning quality, safety and protection.

2 Mission vision and objectives

Mission

To care for oral health and facial harmony through personalised prevention, diagnosis and treatment pathways that integrate dentistry, outpatient oral surgery and facial aesthetic medicine. The facility provides appropriate, safe and technologically up-to-date care, with attentive listening, transparent information, comfort and continuity of care.

Vision

To be a trusted dental and outpatient surgical centre for Carrara and the surrounding area, recognised for clinical quality, safe processes, technological innovation and the ability to support patients throughout a complete pathway, from prevention to more complex treatments.

Objectives

- place each person at the centre of clinical and organisational decisions;
- promote prevention, accurate diagnosis and maintenance of oral health;
- ensure continuity between assessment, treatment planning, treatment and follow-up;
- reduce pain, anxiety and discomfort through clear communication and appropriate methods;
- ensure traceability of sterilisation processes and monitoring of technologies;
- explain treatments, alternatives, costs and payment methods clearly;
- provide continuous professional and staff development;
- collect patient feedback and assessments to improve services.

3 Fundamental principles

Principle	How it is applied
Equality and non-discrimination	Services are provided without discrimination based on age, sex, origin, language, religion, beliefs, or personal, social or health circumstances.
Impartiality and respect	Every patient is treated fairly, with dignity, confidentiality and attention to their needs.
Continuity	The care pathway is organised to maintain consistency between assessment, treatment, follow-up and subsequent instructions.
Freedom of choice	Patients receive clear information and may consent to, refuse or withdraw consent to treatment.
Participation	Comments, suggestions and complaints are used to improve services.
Appropriateness effectiveness and efficiency	Clinical, technological and organisational resources are used according to actual care needs.
Safety	Services are supported by procedures covering clinical risk, sterilisation, emergencies, radiation protection, maintenance and staff safety.

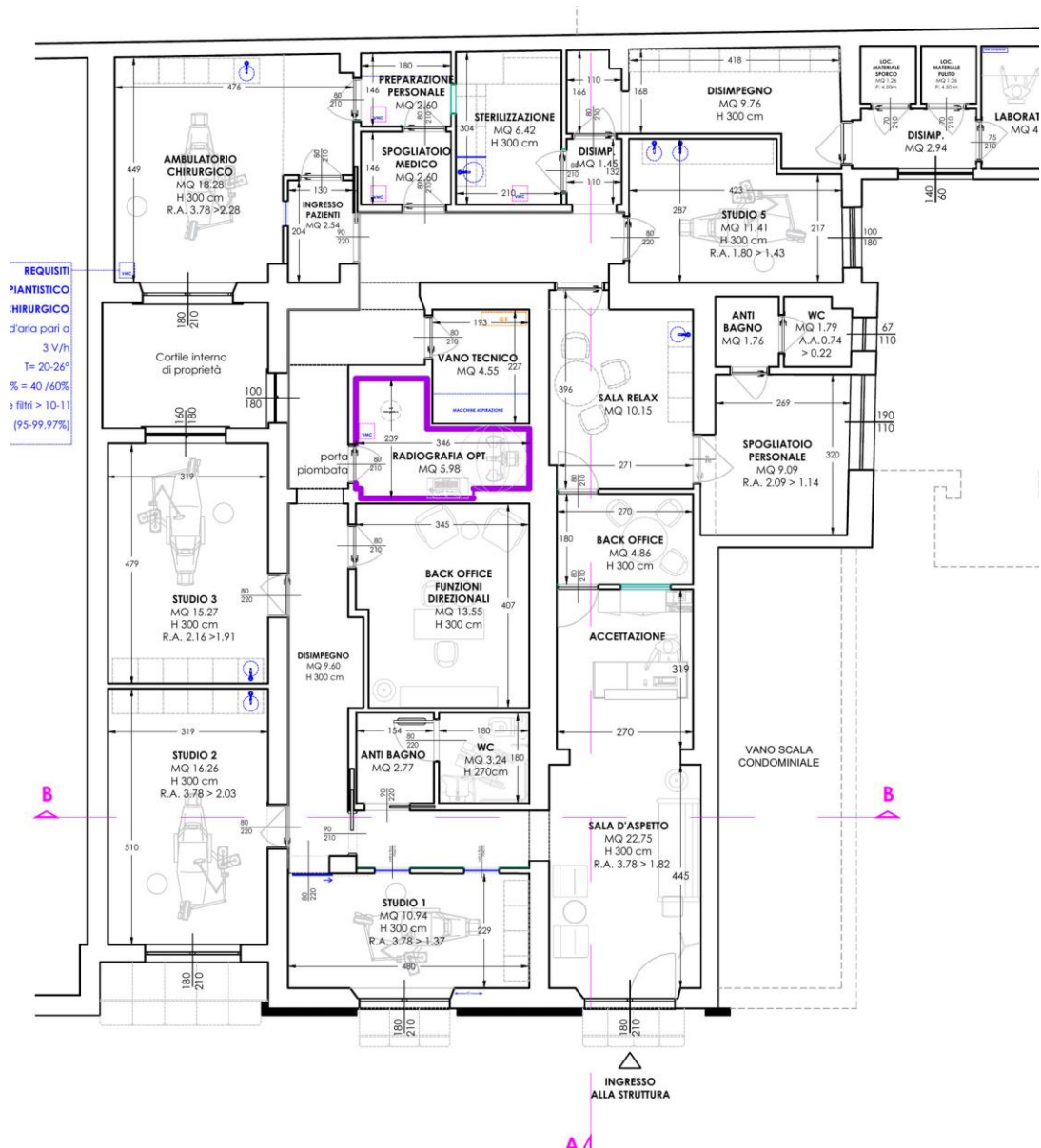
4 The facility and its premises

Carrara Dental Clinic is located on the ground floor at 2 Piazza del Commercio, in an easily accessible area with ample public parking directly opposite the facility. The premises separate public areas, clinical areas and technical or staff-only rooms.

- waiting room and reception area;
- administrative back office and management office;
- four dental treatment rooms with dental units;
- B1.7 Type B surgical treatment room with dedicated access and preparation areas;
- dental panoramic radiology room;
- sterilisation area with separate rooms for contaminated and clean materials;
- technical room and laboratory for the in-house finishing and adjustment of dental appliances;
- staff lounge, changing room and toilets;
- technical rooms and service routes.

In-house finishing of dental appliances does not replace work reserved for a dental laboratory and is carried out within the applicable professional scope of practice.

Indicative floor plan



Layout of the premises - final plan, September 2026.

Technical, sterilisation and staff-only areas may be accessed by patients only when expressly authorised and accompanied.

5 Organisation and professionals

Organisational and clinical responsibilities are defined in the company organisation chart. Professionals work within their respective licences, professional registrations, competencies and clinical responsibilities.

Role	Name
Legal Representative and Employer	Andrea Battella
Clinical Director	Dr Giovanni Salvetti
Deputy Clinical Director	Dr Mattia Fontana
Occupational Physician	Dr Tiziano Bianchi
Head of the Prevention and Protection Service (RSPP)	Emilio Chini
Radiation Protection Expert	Edoardo Nuti
Radiology Equipment Manager	Dr Ettore Remoli

Clinical team

Area	Professionals
Anaesthesia and Intensive Care	Dr Ilaria Bertolla
Nursing care	Dr Paula Ilie
Dentists	Dr Lin Bandoni; Dr Alessandro Tongiani; Dr Andrea Gaggelli; Dr Andia Boshnjaku; Dr Sara Vitale; Dr Mattia Fontana; Dr Letizia Panichi
Dental hygienists	Dr Daniela Ponzanelli; Dr Giulia Tognini; Dr Riccardo Aliboni; Dr Selene Lucetti
Dental surgery assistants (ASO)	Dr Rebecca Mosti; Dr Roberta Nicastro; Dr Alessandra Tedeschi; Dr Francesca Gigli

This list reflects the organisation in place on the date of issue. Any updates are recorded in the current organisation chart available at the facility.

6 Services and treatments

Treatments are provided after assessment by the relevant professional. Whether a treatment can be performed depends on the clinical indication, the patient's condition, its complexity, the available equipment and the authorised scope of the facility.

6.1 General and specialist dentistry B1.10

- dental examinations, diagnostic assessments and treatment planning;
- prevention, professional oral hygiene and periodontal maintenance;
- restorative dentistry and treatment of dental caries;
- endodontics and root canal retreatment;
- non-surgical and surgical periodontology;
- fixed, removable and implant-supported prosthodontics;
- aesthetic dentistry and smile rehabilitation;
- conventional orthodontics and clear aligners for adults, children and adolescents;
- paediatric dentistry;
- oral surgery and implant dentistry;
- clinical follow-up and supporting dental radiology where indicated.

6.2 Outpatient oral surgery B1.7 Type B

The surgical treatment room is intended for lower-complexity procedures that allow same-day discharge and do not require continuous postoperative care. The responsible professional assesses the suitability of both the patient and the procedure in advance.

- simple and complex dental extractions, including impacted teeth;
- surgical exposure of impacted teeth;
- apicectomy and retrograde endodontic surgery;
- periodontal, gingival and mucogingival surgery;
- reconstructive and regenerative oral surgery;
- alveoloplasty and pre-prosthetic surgery;
- treatment of selected odontogenic lesions and cystic formations;
- closure of oroantral communications or fistulas in suitable cases;
- labial or lingual frenotomy and frenectomy;
- removal of small oral soft-tissue lesions and biopsy procedures;
- implant dentistry and selected pre-implant procedures, subject to clinical and organisational assessment.

SAFETY LIMITS

The name of a procedure alone does not establish whether it can be performed. Before scheduling, the clinician assesses invasiveness, general health, expected duration, planned sedation, care requirements and clinical risk.

6.3 Facial aesthetic medicine

Carrara Dental Clinic complements oral health and smile care with medical treatments intended to support facial harmony. These services are provided only by appropriately licensed and trained professionals, within the scope permitted by law and the facility's healthcare authorisation.

- individual assessment of facial and perioral aesthetic balance;
- non-invasive or minimally invasive treatments intended to improve skin quality, hydration, tone and tissue harmony;
- injectable treatments using authorised products and medical devices when clinically indicated;
- post-treatment review and instructions.

Every aesthetic treatment is preceded by an assessment, specific information, medical history review, contraindication screening and informed consent. The aim is a proportionate result consistent with the person's features, without unjustified alteration of facial characteristics.

7 Access appointments and waiting times

Access and appointments

Services are provided privately and normally by appointment. Appointments may be requested by calling 0585 780192 or in person at reception during opening hours. Current information about the facility and its services is available at www.carraradentalclinic.it.

When an appointment is booked, staff collect only the information needed to identify the appropriate service and professional. Diagnoses are not provided by telephone.

Appointment and waiting time management

- the appointment date is agreed according to professional availability and the patient's stated needs;
- situations reported as urgent are assessed clinically and organisationally, taking account of scheduled activity;
- significant changes or delays are communicated as soon as possible;
- if there is a delay at the facility, the patient is informed and may choose to wait or reschedule;
- the facility is not an emergency department. In a serious medical emergency, call 112.

Cancellations

Patients are asked to give prompt notice if they cannot attend so that the appointment can be offered to another patient and the schedule can be managed effectively.

8 Reception and the patient pathway

1. Appointment booking and initial information about the requested service.
2. Reception, identity details check and privacy requirements.
3. Medical history and clinical assessment by the professional.
4. Any necessary diagnostic investigations and treatment planning.
5. Explanation of expected benefits, risks, alternatives, timescales and costs.
6. Consent where required and provision of the agreed treatment.
7. Clinical record keeping, post-treatment instructions and follow-up.

At the first appointment, patients should bring any relevant reports, radiographs, a list of current medicines, known allergies and other clinical documentation. The professional may request further investigations or medical assessments where needed for safe treatment.

9 Information consent and freedom of choice

The care relationship is based on clear communication between the professional and the patient. Before treatment, the patient receives information suited to their ability to understand, covering the diagnosis or clinical assessment, purpose and method of treatment, expected benefits, foreseeable risks, alternatives and the consequences of declining treatment.

- consent is obtained in a manner appropriate to the treatment and recorded in the patient's clinical record;
- specific written documentation is used for invasive or more complex procedures;
- patients may ask questions, request clarification and take a reasonable amount of time to decide;
- consent may be withdrawn and treatment may be refused after the patient has been informed of the possible consequences;

- for minors and people who lack capacity, the legal representation rules apply while still taking account of the person's wishes and ability to understand;
- clinically inappropriate or disproportionate treatments are not undertaken.

These principles are applied in accordance with Italian Law No. 219 of 22 December 2017, insofar as it applies to the dental and outpatient services provided.

10 Pain anxiety and sedation management

Preventing and managing pain and anxiety form part of the care pathway. The professional assesses the patient's clinical condition and agrees the most appropriate method.

Method	Description
Dental local anaesthesia	Topical, infiltration or nerve-block anaesthesia, depending on the procedure.
Inhalation conscious sedation	Oxygen and nitrous oxide mixture administered using Master Flux equipment.
Intravenous conscious sedation	Pharmacological sedation provided under the responsibility and in the presence of a specialist in Anaesthesia and Intensive Care, with monitoring and confirmation of discharge criteria.

Sedation remains non-deep, with spontaneous breathing maintained and full alertness and independence restored before discharge. Pre-treatment and post-treatment instructions must be followed, including any requirement for an accompanying adult.

11 Privacy and access to health records

Privacy protection

Personal and health data are processed in accordance with Regulation (EU) 2016/679 and applicable Italian law. Information may be accessed only by authorised persons for purposes connected with care, legal obligations and the administrative management of services.

- consultations and clinical activities take place in settings that protect confidentiality;
- staff do not disclose health information in the presence of unauthorised persons;
- information is disclosed to family members or accompanying persons only with the patient's consent or where permitted by law;
- preferences concerning promotional communications are managed separately from the provision of care.

Access to health records

The patient, their legal representative or a person holding written authority may request a copy of the available health records, including clinical notes, consent forms, treatment plans, reports and radiological images, within the limits established by law.

- the request must be submitted in writing to reception;
- the applicant's identity, authority and any written delegation must be verified;
- records may be supplied on paper or electronically, subject to availability and channel security;
- records are normally made available within 15 working days, unless the request is particularly complex or a different legal deadline applies;
- any charges relate only to copying, storage media or postage and are communicated in advance.

12 Safety sterilisation and radiation protection

Sterilisation and infection prevention

Reusable instruments are reprocessed through a defined pathway that separates contaminated and clean materials. The process includes protected collection, washing and thermal disinfection, inspection, packaging, sterilisation in a Class B autoclave, cycle verification, traceability and correct storage.

Dedicated equipment, including the ARX Clean Evo system and S5X and Lisa autoclaves, records cycle outcomes. The appointed dental surgery assistants carry out the required activities under the overall supervision of the Clinical Director.

Technology and maintenance

Dental units, healthcare equipment, systems and devices are inventoried and undergo the required inspections and maintenance. Before use, staff confirm that equipment is suitable and promptly report faults or unavailability.

Radiation protection

Dental radiological examinations are performed only when justified for diagnostic or therapeutic purposes, using dedicated equipment and in accordance with radiation protection procedures. The organisation appoints a Radiation Protection Expert and a Radiology Equipment Manager.

Emergencies

The facility has procedures and emergency equipment appropriate to its activities. In an acute event, staff activate the internal response, provide assistance within their competence and, where necessary, call the single European emergency number 112.

13 Accessibility and inclusion

The facility is on the ground floor and its layout supports access for people with disabilities or temporary mobility limitations. Accessible routes and a suitable toilet are available, and reception staff provide practical assistance where required.

Language and cultural barriers

- use of plain, understandable language without unnecessary technical terms;
- information may be repeated or supplemented and written materials may be used;
- with the patient's consent, a trusted accompanying person or interpreter may be involved;
- an English version of the Service Charter is prepared and published on the website.

Where communication does not provide sufficient understanding for valid consent, non-urgent treatment is scheduled only after a suitable means of communication has been identified.

14 Staff identification

Every patient must be able to identify who is involved in their care and understand each person's role. Carrara Dental Clinic uses different identification methods for clinical, support, administrative and trainee staff.

Category	Identification method
Dentists and doctors	Clinical coats or scrubs in the colour assigned to the professional category, with a name badge stating the qualification.
Dental hygienists	Scrubs in the assigned colour, with a name badge stating the qualification.
Dental surgery assistants (ASO)	Scrubs in the assigned colour, with a name badge stating the role.
Nursing staff	Recognisable clinical clothing and a name badge stating the qualification.
Front office	Smart coordinated clothing consisting of a shirt, jacket and trousers, with a name badge.
Trainees and staff in training	Name badge stating the person's name and role and clearly marked 'Trainee' or 'Staff in training'; activities are performed under supervision.

Different colours identify professional categories, while the name badge identifies the individual staff member. Colours are set by the facility's internal code and communicated to staff.

15 Patient rights and responsibilities

Rights

- to be treated with respect and without discrimination;
- to receive clear information about services and how to access them;
- to know the responsible professional and the roles of staff involved;
- to receive understandable clinical information and participate in decisions;
- to consent to, refuse or withdraw consent to treatment;
- to have confidentiality protected and access personal health records;
- to receive an estimate and understand the financial terms before planned treatment;
- to make comments, suggestions or complaints without affecting the right to care.

Responsibilities

- provide truthful and complete information about health, medicines, allergies and medical history;
- attend appointments and give prompt notice of cancellations;
- follow pre-treatment and post-treatment instructions and report changes in health;
- behave respectfully towards staff, professionals and other patients;
- respect the premises, equipment, safety rules and smoking ban;
- meet the agreed financial commitments.

16 Payments and estimates

For planned treatments, patients receive a financial plan or estimate consistent with the treatment plan. Any clinical change that materially affects the estimate is communicated before proceeding, where the patient's care needs allow.

- payment is made according to the deadlines agreed and communicated by reception;
- cash is accepted within legal limits, together with card payments and bank transfers where agreed;
- the required fiscal documentation is issued;
- administrative staff explain financial terms but do not replace the professional when clinical information is required.

17 Feedback complaints and satisfaction

Patients may submit comments, suggestions or complaints verbally to reception staff or in writing at the facility. Each report is recorded, classified and assigned to the appropriate function under the company procedure so that any problems can be addressed and services improved.

- simple verbal reports are handled immediately where possible;
- written complaints normally receive a response within 30 days, unless further justified investigation is required;
- the facility may request additional information needed for the investigation;
- patient experience is also assessed through satisfaction surveys;
- aggregated results, reports and improvement actions are reviewed periodically by management.

Involvement of professionals

When a report concerns clinical care, assistance or patient safety, the Clinical Director involves the relevant professionals, gathers the information required for assessment and includes them in defining any corrective or improvement actions. The assessment outcome, decisions and verification of implementation are documented. Information is handled with due regard for the confidentiality of the patient and the staff involved.

18 Quality commitments and standards

Area	Declared standard	Verification
Information	Essential information on access, services, opening hours and contact details is available in the Charter and on the website.	Periodic content review.
Identification	Staff identifiable by role and name; trainees clearly recognisable.	Organisational check.
Consent	Consent documented for all treatments for which it is required.	Sample document audit.
Sterilisation	Controlled and traceable cycles for reusable instruments.	Equipment logs and reports.
Waiting at the facility	Patients informed of significant delays, generally those exceeding 30 minutes.	Reports and appointment schedule review.
Health records	Normally available within 15 working days, unless the request is complex or another legal deadline applies.	Request register.
Complaints	Written response normally within 30 days.	Complaints and responses register.
Technology	Maintenance and inspections according to schedules and manufacturer instructions.	Equipment records.
Training	Professional development and internal training appropriate to roles and activities.	Certificates and training register.
Improvement	Periodic review of reports, satisfaction and non-conformities.	Management review.
Monitoring	Six-monthly review of declared commitments and annual summary of results.	Review minutes and annual report.

The standards are organisational objectives of the facility. Failure to meet one standard does not automatically indicate that clinical care was inappropriate, but it triggers assessment and, where necessary, improvement action.

Monitoring and availability of results

The Legal Representative and Clinical Director review the commitments and standards in this Charter every six months. Monitoring uses registers, feedback, complaints, organisational indicators, document audits and any other evidence relevant to the services provided.

Results are recorded in review minutes and included in an annual report. For each standard, the outcome, evidence reviewed and any improvement actions are stated, together with the responsible person and implementation deadline. A summary of the annual report is available to patients at reception and may be published on the facility's website.

Validity publication and updates

The Service Charter takes effect on the date of approval. It is available at the facility and published on the website. It is updated following significant changes and reviewed periodically by management.

The detailed list of services, professionals, individual service hours and financial terms may be updated. Current information is available from reception.

Main references

- Directive of the President of the Council of Ministers of 27 January 1994 and Decree of the President of the Council of Ministers of 19 May 1995 on the general principles of healthcare service charters;
- Tuscany Regional Law No. 51 of 5 August 2009 and its implementing regulation;
- Italian Law No. 219 of 22 December 2017 on informed consent;

- Regulation (EU) 2016/679 and Italian Legislative Decree No. 196/2003, as amended, on personal data protection;
- Italian Legislative Decree No. 81 of 9 April 2008 on health and safety at work;
- Italian Legislative Decree No. 101 of 31 July 2020 on radiation protection;
- Italian Law No. 24 of 8 March 2017 on patient safety and healthcare professional liability.

Approval

This Service Charter, Edition 2 dated 14 September 2026, is approved by the Legal Representative and the Clinical Director. The space below is reserved for signatures on the controlled copy held at the facility.

PRINTABLE COPY

This document is available to patients at reception. The current digital version is published on the facility's website.

Legal Representative

Andrea Battella

Signature _____

Clinical Director

Dr Giovanni Salvetti

Signature _____