



## **INFORMATION FOR CYTOLOGICAL OR HISTOLOGICAL SLIDE REVIEW**

**Note: The review of histologic/cytologic material prepared in another medical structure is not covered by the Servizio Sanitario Nazionale and therefore there is a charge of € 180.00 (+ € 2.00 tax) for the revision.**

To proceed with the revision:

Request the histologic or cytologic material (stained and unstained slides, and/or paraffin blocks) to the laboratory of Anatomic Pathology of the Hospital where the procedure/sampling was carried out.

Deliver this material along with all the clinical/radiological reports available to the Pathology Reception Desk (opening hours: 9.00-13.00 Mo-Fri) and pay the due fee to:

**Banca Popolare di Sondrio located on the ground floor inside the hospital.**

Alternatively send by mail the material with a copy of the original pathology report and of all the clinical/radiological reports available to:

**Segreteria Anatomia Patologica (Ufficio Consulti)**

**Istituto Nazionale Tumori**

**Via G. Venezian 1**

**20133 Milano**

**Phone +39 02 23902813 (from 9.00 to 13.00 Mo-Fri); e-mail address:**

**[consulti.anatomia@istitutotumori.mi.it](mailto:consulti.anatomia@istitutotumori.mi.it)**

Receipt of the fee payment indicating the name of the patient, date and place of birth, codice fiscale and "*consulto dipartimentale*" should be included.

Payment can be made:

-With a credit transfer showing the patient name and "*consulto dipartimentale*" to the:  
**Fondazione IRCCS Milano, c/o Banca Popolare di Sondrio. Ag 21 Politecnico, via E. Bonardi,4, 20133 Milano, CODICE IBAN IT15 C0569601 6200 0000 2001 X82 /swift code POSOIT22 or**

-With a Postal credit transfer to the:

**Fondazione IRCCS Milano, c/o Banca Popolare di Sondrio. Ag 21 Politecnico, via E. Bonardi,4, 20133 Milano, c/c postale n.44065209.**

All the patient personal data will be handled according to: art. 7 of d.lgs.n.19672003.

Hereby I authorize, according to the art. 7 of d.lgs.n.19672003 the processing of:



20133 Milano - via Venezian, 1 - tel. 02 23901 - codice fiscale 80018230153 - partita i.v.a. 04376350155

DIPARTIMENTO DI PATOLOGIA DIAGNOSTICA E LABORATORIO  
Tel 02 23902813 Fax 02 23902877 e-mail: [consulti.anatomia@istitutotumori.mi.it](mailto:consulti.anatomia@istitutotumori.mi.it)

---my personal data (health)

---as parent, tutor, physician etc of the personal/sensitive data (health) of the patient.....

Signature

Date

.....

Please complete also this form:

<b>Name and surname</b>	
<b>Date of birth</b>	
<b>Site of birth</b>	
<b>Fiscal code</b>	
<b>Phone</b>	
<b>Mobile</b>	
<b>Address where send the histological report</b>	
<b>Address of residence</b>	
<b>Zip code</b>	
<b>Town</b>	
<b>State</b>	
<b>Signature</b>	