

PRIVACY DISCLAMER
EUROPEAN GDPR 2016/679

Dear Sir/Madam/Miss

We would like to inform you that the European GDPR n. 2016/679 officially took effect on May 25th 2018 and provides for the protection of natural persons concerning the processing of personal data.

This present notice contains information that is provided pursuant to art. 13 of the aforementioned European Regulation.

The controller of their processing is the company "Villa Sant'Apollonia S.r.l.", Registered Head Office in Bergamo, viale Motta n. 37/39, C.F. and P. Iva n. 01740120165 Rea BG197198, in the person of the CEO and legal representative Dr. Toffanetti Paolo, available to the following email address: info@villasantapollonia.it

The **Data Protection Officer** designated pursuant to art. 37 GDPR is available at the following email address: dpo@villasantapollonia.it

We inform you that, pursuant to article 13 GDPR 2016/679, the personal and particular data concerning you, provided by you directly, such as personal information, anamnestic and clinical documentation, will be processed exclusively for the purposes specified below, and the data will be processed predominantly, except as specified below, at the same establishment "Villa Sant'Apollonia srl" including with IT procedures, in the ways and within the limits necessary to pursue the aforementioned purposes.

In some cases, **data concerning family members may be processed, especially with reference to the anamnesis.**

Such personal data will be processed with IT and manual systems. The databases are organized in order to allow access to data only to personnel expressly authorized by the data controller. **For an updated and detailed list of authorized and external recipients, please refer to the information sheet displayed at the entrance of the establishment.**

The data retention period is limited to the time necessary to achieve the purposes for which they were collected and processed and therefore is provided at this time based on the specific situation finalized by law. In any case, the retention period of the documentation where the aforementioned personal and sensitive data is provided, cannot be less than the retention period imposed by current legislation and in particular by the "**Massimario di Scarto**" provided by ATS Lombardia in its last updated version.

The data collection is **necessary** to pursue the purposes indicated below and **in case of refusal we will not be able to provide the requested service.** The consent to use personal data for marketing purposes is optional and will not in any way be an obstacle to the requested service.

"SHARED MANAGEMENT" OF DATA WITHIN THE SINGLE DENTISTRY OPERATIVE UNIT-

The whole personal data generated from present and past clinical events concerning the interested party, necessarily shared by the healthcare professionals of the controller who deal with the treatment, entails the specific processing of personal data, whose purpose is to document a part of the clinical history of the interested party, through the realization of an integrated information system concerning his or her state of health, accessible by the healthcare staff concerned.

The controller wishes to inform you that within the dentistry clinic, work professional specialists in various branches of odontology: gnathology, pediatric dentistry, orthodontics, conservative, endodontics, surgery/implantology, fixed and mobile prosthesis, hygiene and prophylaxis. **Given that the treatment plan of a single patient often entails the intervention of various specialist branches, the sharing of information from each branch concerning the clinical record (past, present and future) of the patient is fundamental, in order to successfully implement the treatment plan.**

The access to the shared therapeutic plan will be regulated in order to guarantee the lawfulness of the processing of the data. Access to the new software where the data is stored will be available only to authorized operatives through the use of a personalized password and elaborated on the basis of competence and relative task profiles.

The controller will have to acquire a specific authorization by the subject in case he wish to render accessible the before mentioned shared therapeutic plan, also data which are subject to further anonymity protection, or informations concerning healthcare offered to patients to whom the current legislation has ensured specific measures in order to protect their privacy and personal dignity (for example: services offered to patients HIV positive or who use narcotics, psychotropic drugs or alcohol etc...).

It is clear that in case the authorization to the processing the share of the personal data will be denied, this will not affect any access to the medical treatment requested.

In case the subject doesn't express his or her authorization to the data sharing as described above, the professional who is in charge of his or her treatment will have access only to the information given at that time by the interested party (for example: medical history gathered and information stemming from the diagnostic documentation provided) and information stemming from previous treatments performed by the same professional. Similarly, in such a circumstance the ward/ambulatory health personnel will have access only to the information concerning the episode for which the subject contacted the controller or to the information stemming from possible health services offered in the past to the patient by the same ward/ ambulatory (c.d. access to vertical departmental practice).

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We inform you, that the data you provide will not be transferred abroad and will be processed for the following purposes and under the aforementioned legal bases::

- to perform the same diagnostic, treatment and rehabilitation services (outpatient or surgical).
(legal basis: consent of the subject and execution of a contract in which the subject is a party);
- for the "shared management" of data (dentistry).
(legal basis: consent of the subject);
- for billing the service.
(legal basis: to fulfill a legal obligation to which the owner is subjected);

- for the administrative management of refund of expenses to institutional organizations. (legal basis: execution of a contract in which the person concerned is a part or execution of pre-contractual measures adopted due to the request of the person concerned);
- only if positive consent is expressed, in order to provide you commercial information on our products or services. (legal basis: consent of the person concerned);
- defense of a right in litigation. (legal basis: legitimate interest of the controller art. 6.1 and 9.2 letter f GDPR);
- Any process necessary for the request of delivery of the copy of the medical record. (legal basis: consent of the person concerned and execution of a contract in which the person concerned is a party);

The data will not be disclosed but may be communicated to:

- competent ATS and the region, for managerial, administrative, accounting, purposes of the services offered or other obligations expressly mentioned by laws and/or regulations in force;
- With reference to the "shared management" within the dentistry department, the information will be shared among all the personnel who will offer, in different time and in various functions, health assistance to the subject (for example: healthcare, consultancy request etc...). For the same purposes access to such information will be available to administrative personnel in order to best plan and manage the organization of the service;
- Public social security and insurance organizations, private pension funds;
- Other examination laboratories, only for the purpose of carrying out activities necessary for prevention, diagnosis, treatment, rehabilitation or for other services requested by you, such as pharmaceutical, specialist or other prosthetic or orthodontic laboratories;
- Controller's insurance company or its lawyers for the protection of its operators for any liability assessment;
- to professionals and / or service companies for marketing purposes (in case of consent);
- to professionals for administrative and accounting management;
- to professionals for the administration / management of patients.
- to operatives who carry out data processing, recording and archiving activities;

The maintenance and updating of the IT system is entrusted to an external company.

The information relating to your state of health will be communicated to you personally by a doctor of our establishment. The report will be delivered to you personally. The medical report, in a sealed envelope, may also be given to a member of your family or to an acquaintance, who you have expressly authorized. If the person concerned is a minor, only the person exercising parental authority or, in specific cases, his or her general practitioner, can collect the documentation. If the person concerned is subject to guardianship administration, only the designed guardianship administrator can collect the documentation.

The report may be sent to you, only with your explicit consent, by the Italian post office to the address communicated by you.

RIGHTS OF THE SUBJECT

Furthermore, we also inform you that the data controller provides you with the following additional information, necessary to ensure correct and transparent processing:

- a) the right of the person concerned to ask the data controller for access to personal data and the correction or deletion of the same or the limitation of the processing concerning him or to oppose their processing, in addition to the right to portability of some data;
- b) the possibility of obtaining the right to be forgotten by deleting, as far as possible, the data processed without unjustified delay pursuant to art. 17 (Recitals 65 and 66) of GDPR 2016/679;
- c) the possibility to lodge a complaint with a supervisory authority, below links for forms:
<http://www.garanteprivacy.it/web/guest/home/docweb/-/docweb-display/docweb/1089924>
- d) the obligation of the controller to communicate to each of the recipients to whom the personal data has been transmitted, any corrections or deletion or limitations of the processing carried out, unless this proves impossible or involves a disproportionate effort. The data controller will communicate the identity of the recipients to the interested person concerned if he or she requests it;
- e) the right not to be subjected to automated individual decision-making, including profiling which produces legal effects concerning him or her or similarly significantly affects him or her.
- f) the right to communication of any possible violation of your personal data, all without unjustified delay and if the violation is likely to present a high risk for the rights and freedoms of the person concerned.
- g) the right to withdraw your given consent at any time. The withdrawal of consent does not affect the lawfulness of the processing based on consent before the revocation. The consent can be revoked by sending an email to info@villasantapollonia.it asking for its revocation.
- h) An important safeguard guarantee for the privacy of the subject who has expressed his or her own wish concerning the processing of personal data via the "sharing of the same" in the dentistry department, consists in the possibility available to him or her to hide some data or consultable health documents via the same means.

Having acquired the information provided by the data controller pursuant to art. 13 of GDPR 2016/679,
the person concerned gives his consent as follows:

the undersigned,

Surname _____ Name _____

on his own behalf or as a parental authority over the indicated minor (mandatory release of identity documents of the parties exercising parental responsibility jointly or separately) or in the role of guardianship administrator (mandatory proof of appointment decree),

- Name of person exercising parental responsibility / Administrator _____

- Name of minor / person submitted to guardianship administration _____

AUTHORIZES

free of charge, also pursuant to art. 10 and 320 cod. civ. and articles 96 and 97 law 22.4.1941, n. 633, Law on copyright, the use of photos or videos possibly taken **during the supply of the treatment involved in this practice** which portray himself or his son all for clinical, demonstrative / comparative or educational purposes also through their publication on paper, electronic support and publication on the web, as well as authorizing the conservation of the photos and audio / video themselves in the computer archives of the Clinic "Villa Sant'Apollonia Srl" **for a period of time not exceeding that necessary to achieve the purposes for which they were collected and processed.** This release / authorization may be revoked at any time with written communication to be sent to the e-mail address repeatedly indicated above.

This authorization does not allow the use of photographs and videos in contexts that compromise the patient's personal dignity and in any case for use and / or purposes other than those indicated above.

When possible and always in compliance with the purposes indicated in this authorization, the persons in charge will acquire adequately anonymized images also through restricted shots or other techniques necessary for this purpose.

The undersigned, both on his own and in the quality as indicated above, confirms that he or she has nothing to claim on the basis of the foregoing and irrevocably renounces any right, action or claim deriving from the foregoing.

The granting of consent is optional. Denying the consent will not allow the use of the images and / or audiovisual footage of the person concerned for the purposes indicated above.

Optional I Authorize I deny the authorization signature _____

Does the subject give his or her consent to the processing of his or her particular and personal data for the purposes indicated in the aforementioned statement and for the communication/sharing of the same data for the purposes and the subjects indicated? The sharing concerns medical history, clinical, radiology, photographic data acquired during appointments with odontologists, medical anesthetists, hygienists, dental assistants. Concerning the right to hide data please refer to statement (h) above, in the chapter regarding the rights of the subject.

I give consent I deny consent signature _____

You could receive phone calls or SMS, to the mobile number you have communicated, from authorized parties relating to changes in the appointment or communications concerning the service provided, also as a reminder of the appointments you have fixed at our facility.

Essential for a correct patient service I give consent I deny consent

You give your consent to the processing of personal data in order to provide you with commercial information on our products and services (marketing)

Optional I give consent I deny consent E-mail _____

The undersigned also agrees that communication relating to his state of health is given and that his health documentation (including medical prescriptions, specialist requests, investigation reports, medical records, etc ...) can be entrusted if necessary:

Only to me to anyone who requests it to all first degree relatives to the spouse

to the following people _____

Date ____/____/____ signature _____