



Complex Oncology Structure in Borgomanero



USEFUL INFORMATION

INDEX

- 1) Introduction
- 2) What is chemotherapy?
- 3) Where and how is chemotherapy performed?
- 4) Ceck the effectiveness of chemotherapy
- 5) Chemotherapy and impact on daily life
- 6) Possible side effects of chemotherapy
- 7) Our Center
- 8) Our Center and voluntary service
- 9) Piedmont and Valle d'Aosta's Oncological Network
- 10)Patients' rights
- 11) Male and female workers' rights



1. Introduction

This booklet has the aim to provide useful informations to the patient who has to start a chemotherapy treatment - and to his family. Knowing the treatment that you have to face and its possible side effects can help you experience therapy with greater awareness, reducing the anxiety usually generated by the unknown. Moreover, knowing the organizational methods of the Center allows you to interact better with the staff in full respect of other patients.

The information we provide can help you get a general idea of what will happen during the illness and treatment course, but do not hesitate to ask for further explanations if needed.

2. What is chemotherapy?

Chemotherapy consists in a drugs' periodic somministration with the purpose of destroying cancer cells or controlling their growth. In this "destructive" activity even healthy cells can be damaged with the consequent appearance of often reversible side effects such as nausea, vomiting and diarrhea. The intensity, frequency, duration of side effects is related to the type of chemotherapy but also to the patient: even if you take the same therapy, each patient can present completely different side effects both in terms of type and intensity. The quantity, frequency and overall duration of chemotherapy are related to the type of tumor, the stage of the desease, the clinical conditions and the toxicity profile that will be highlighted during treatment.

Usually chemotherapy is carried out in cycles characterized by days of somministration interspersed with periods of suspension (which can vary from few to many days), to allow the therapy to operate on the tumor and at the same time the body to recover from toxic effects.

3. Where and how is chemotherapy performed?

Chemotherapy is usually performed in Day Hospital (DH) or in outpatient basis (some particular cycles in specific diseases still require hospitalization). However for some pathologies there are antineoplastic drugs that are taken at home.

The most used ways of somministration are:

- oral somministration (os): tablets or capsules;

- intravenous injection (ev): the drugs are prepared in a drip (phleboclysis) and infused through a peripheral venous access (cannula needle) or through a central one (port-a-cath or picc).

The central venous access is a must for some chemotherapy schemes that involve the continuous infusion of the chemotherapeutic drug through infusion pumps (elastomers), while in other chemotherapy schemes the choice of positioning a central venous access is linked to the lack of adequate peripheral venous access or the use of blistering drugs, i.e. drugs capable of damaging the patient's venous system.

In case a central venous access (port-a-cath or picc) is needed, we will inform you in time, explaining the reason for its use and how to position it. The photos show 3 different devices available for vein treatment:

Foto A: cannula needle (in a peripheral vein)



Foto B: port-a-cath (central venous catheter inserted in the subcutis)

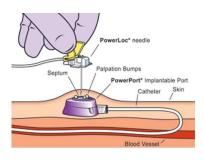
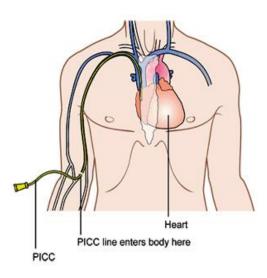




Foto C: picc (central venous catheter inserted in the vein of the arm)





4. Control of the effectiveness of chemotherapy

The effectiveness of the chemotherapeutic treatment will be evaluated halfway through the scheduled treatment or at its end through medical examination, blood tests and instrumental investigations (such as chest x-ray, skeleton x-ray, ultrasound, CT scan, NMR, PET CT scan, scintigraphy...). These will be diversified according to the underlying pathology, the follow-up protocols and the examination identified, at the beginning of the treatment, as a **parameter examination** of the disease. According to the reevaluation result, the doctor will decide whether to continue the therapeutic procedure or start the follow-up (period of absence of therapy with periodic clinicalinstrumental checks).

During treatment tests are also sometimes performed to verify any side effects (for example heart ultrasound to check the possible cardiac toxicity of some drugs). They will be indicated at the beginning of the treatment and depend on its type.

5. Chemotherapy and impact on daily life

Use of other medications: some drugs can interfere with chemotherapy. For this reason it is important that before starting a treatment you inform the doctor about the therapy you are taking (antihypertensive, hypoglycemic, etc.), updating the oncologist of any changes in the therapy.

Vaccines: it is advisable to consult your oncologist before carrying out any vaccinations, in order to verify the compatibility with the therapy in progress.

As far as the infleunza vaccination in cancer patients it is safe, minimally invasive and has low costs. Influenza vaccination is recommended for all patients undergoing chemotherapy and/or biological drugs or in any case with active disease. Although the optimal time to vaccinate during therapy is not defined, the somministration a few days after the chemotherapic cycle is preferable.

For patients in follow up or for patients not requiring active therapy, after radical surgery, vaccination should be considered on the basis of recommendations available for the whole population.

Vaccination of family members living in contact with the patient and of the Oncology Wards is recommended, as it increases "GROUP IMMUNITY" with consequent reduction of the circulation of the virus **and therefore the risk of infection.**

"Natural" products and alternative medicines: the use of these substances should also be communicated to the doctor as they could interfere with chemotherapy. For example grapefruit juice can interfere with the absorption and efficacy of some antineoplastic drugs.

Work and free time: in general it is not necessary to change one's lifestyle, although treatment's tolerance is very subjective. There are people able to work even the day following chemotherapy and others confined to bed for a few days due to fatigue. In the days following chemotherapy, in case you feel more fatigued, it is useful to slow down your rhythms by taking moments to rest. It will be useful to modify your activities according to your energy. It is advisable to take walks outdoors and maintain an adequate diet.

Sexual life: therapy can cause psychological effects that could also affect the sexual sphere. As a matter of fact there are no contraindications. However, in couples in fertile age, conception in this period is not recommended due to the damage that chemotherapy could cause to the unborn child. Therefore it is advisable to take precautions to be discussed with the referring doctor, if necessary.

Diet: during chemotherapy it is necessary to eat regularly and healthily. Where feeding difficulties cause a significant weight loss, do not hesitate to report it to the referring doctor in order to set the necessary remedies. For patients on preventive treatment it will be useful to change your life style through a healthy diet. You can find numerous useful tips on nutrition for either during or at the end of the treament in the booklet "what should I eat", which is available at our Center.

6. Possible side effects of chemotherapy

Chemotherapeutic drugs act not only on cancer cells, but also on healthy ones and in particular on those that multiply rapidly (oral and gastro-intestinal mucous membranes, bone marrow and hair follicles). The damage, often transitory, manifests itself through those that are called side effects. During treatment possible reactions can be controlled by supportive therapy prescribed by the doctor, in prophylaxis; it is useful to urgently inform the referring doctor of all the side effects that will eventually occur. At the beginning of chemotherapy the referring doctor will explain the side effects that may occur according to the planned chemotherapy scheme. He will also tell you what to do in such cases, giving you an "emergency" kit containing the necessary drugs to solve the most frequent diseases.

The most frequent side effects of chemotherapy are: changes in taste, nausea and vomiting, diarrhea or constipation, stomatitis (an inflammatory state of the mouth which can manifest itself with swelling or redness of the gums and inner walls of the mouth, with whitish areas on the mucous membrane or with ulcerations which can cause feeding difficulties). In addition: hair loss (transient event not present in all therapies), skin alterations (dryness or increased pigmentation of the shin, with the appearance of redness, striae or darker spots), haematological changes (reduction of some blood components produced by the bone marrow and in particular the decrease of white blood cells (leukopenia), which are used to fight any infections contracted by the body, decrease of red blood cells and/or hemoglobin (anemia), decrease of platelets (thrombocytopenia), which promote blood clotting and prevent bleeding.

Before each treatment, therefore, a blood sample will be taken in order to evaluate the number of white blood cells, platelets and red blood cells (this test is called blood count). In case of values below-norm, the doctor will decide whether:

- somministrate chemotherapy at a reduced dosage;
- postpone therapy;
- prescribe drugs to stimulate the production of blood cells (growth factors for white blood cells and red blood cells).

Growth factors for white blood cells are also used in prevention, in cases where the chemotherapy schemes have a particular depressive action on the bone marrow. In case of use the method of somministration and the expected side effects will be explained to you, with indications of the necessary therapy to solve any disease. In case of severe anemia or significant reduction in platelets, it will be necessary to resort to transfusions of red blood cells and platelets (this eventuality is rather infrequent, but possible).

7. Our Center (Complex Oncology Structure)

Our Center is located in Building H of the Hospital Unit in Borgomanero. The Oncological DH is on the 3rd floor, while the Reception and Services Center (CAS) is on the 2nd floor, together with the Library and the Refreshment Point where you can have breakfast and wait for your turn for treatment.

The Reception and Services Center (CAS) takes care of patients with suspected/recent cancer diagnosis, welcoming them and activating the necessary procedure to complete the diagnostic process. It takes care of prescribing and booking the necessary exams, providing informations on how to prepare, providing drugs for exam preparations when necessary, collecting reports, activating where and when necessary the psychologist and the social worker, issues the exemption of the prescription charge for oncological pathology 048, notifies the attending doctor that the patient has been taken in charge. It is a job which provides welcoming, listening and caring in a very delicate phase for the patient.

After the diagnostic confirmation, the CAS reports the case to the GIC (Interdisciplinary and Cure Groups: it includes all the branch specialists who deal with the specific tumor: surgeon, oncologist, radiologist, pathologist, etc.) of reference for the pathology where the case is discussed, confirming the indication for medical, surgical or supportive treatment.

On the ground of the discussion, if the patient has to perform chemotherapy, CAS activates the Oncological Day Hospital for the patient's taking charge.

In the Oncological DH the patient will be able to perform the preparatory blood work for chemotherapy, the inter-cycle control draws (between one cycle of therapy and the next) and the chemotherapy treatment that will be set up.

Our Center is part of Piedmont and Valle d'Aosta's Oncology Network. DH opening hours: from Monday to Friday from 8.00 to 15.30. CAS opening hours: from Monday to Friday from 8.00 to 14.00. DH secretariat telephone: 0322/848880 from 8.00 to 12.00. DH nurses' room telephone: 0322/848309 from 9.00 to 15.30. CAS telephone: 0322/848254 from 10.00 to 15.00.

Activities organization

8.00 - 9.30: blood draws and visits for patients who have to perform therapy on the same day;

10.00 - 11.00: visits of patients who only perform follow up tests;

from 10.30: chemotherapy startup in vein (startup depends on the time of arrival of chemotherapies from the pharmacy, on its duration, on the necessity of performing hydration in the vein before chemotherapy).

Services provided:

- blood draws;
- outpatient visits;
- somministration of chemotherapy drugs;
- supportive therapies;
- washing of Central Venous Catheters;

- dressings;
- connection with the various hospital services.

Outpatient visits can be divided into:

- first oncological visit: the doctor examines your documentation, carries out the clinical examination, requests further investigations if necessary and, if indicated, prescribes chemotherapy treatment to which you will have to undergo. In this phase it will be explained the type of therapy that you will have to carry out and its main side effects, so that you can consciously sign the informed consent to the proposed treatment.
- visit during therapy: it is performed before each cycle of therapy in order to verify the toxicity of the treatment through the interview with the patient, the medical examination and the evaluation of blood tests. These visits are necessary to confirm the treatment and perform any changes and customizations of the therapy according to the toxic effects detected;
- end of therapy visit: it is performed at the end of the therapy after the execution of blood and instrumental tests necessary to evaluate the response to treatment, the resolution of toxic effects and the setting of controls or subsequent therapies;
- follow up visit: the doctor reviews the exams previously requested, performs the clinical visit and gives an appointment for a new check, if there are no signs of disease recurrence, or to set up a new treatment if necessary.

What to do when you have to perform chemotherapy?

Show up at 8.00 at the DH, fasting (unless otherwise indicated) and wait for your turn in the waiting room to perform blood draw. After this, patients who have to undergo chemotherapy (in vein or by mouth) will have to wait for their turn for the visit with the reference oncologist before having breakfast. On days in which chemotherapy and/or control visits are carried out, it will be possible to collect the drugs that have to be used at home directly from the direct drug distribution service set up by the Hospital Pharmacy . Outside these occasions, prescriptions for drugs should be requested from your doctor. Only prescription drugs in class A are dispensed. Moreover, the direct drug distribution service is only possible for patients under ASL NO.

Furthermore, thanks to the collaboration with the Associazione Mimosa Amici del DH Oncologico di Borgomanero, support drugs necessary for the control of side effects that are not given by National Health Services are provided free of charge (in drug kits) at the beginning of the chemotherapy treatment.

After the visit with the reference oncologist, the patient will be able to have breakfast at the refreshment point. He/she then will have to wait for his/her turn for therapy in the waiting room on the 2nd floor.

What should I do to perform the control blood count?

To perform the control blood count show up at 8.30 a.m. at the DH, non fasting (unless otherwise indicated) and wait for your turn to perform the blood sample in the waiting room. As soon as the blood tests are available, all patients will be called by the reference oncologist to evaluate the tests and verify the toxicity of the treatments performed.

What should I do to book an oncological visit?

Call the Reception and Services Center 0322/848254 from Monday to Friday from 10.00 to 15.00.

What should I do to talk to the reference oncologist for problems related to chemotherapy or for complications related to the disease?

Call 0322/848309 from Monday to Friday from 9.00 to 15.30. If urgent, your call will be immediately forwarded to the referring doctor, otherwise, having taken note of your needs, you will be called back as soon as possible. This filter and call-back service is used to avoid continuous interruptions during visits with patients.

Between 8.00 and 9.00, only in case of real urgency, you can also call 0322/848880.

In addition, every oncologist has a company email that can be used to contact him/her.

What should I do to book the washing of the port-a-cath or PICC?

Call 0322/848309 from Monday to Friday from 9.00 to 15.30.

After the first washing the nurse will directly fix you the next date. The washings are performed on Thursday afternoon from 14.00 to 15.00. Wait for your turn in the waiting room on the 3rd floor.

Why should I ask for an interview with a psychologist?

Because the diagnosis of oncological disease involves not only physical, but also psychological, emotional and relational frailty. It is when in crisis that greater internal energy is needed to cope and adapt to the situation. Psychological support helps patients find these resources, learning to understand and manage both their own and family 's emotional reactions, understanding how to deal with them in a better way, in particular with children and elderly, improving their quality of life, because psychological processing of the disease reduces the risk of side effects to treatments.

In order to book a psychological interview it is necessary to leave your personal data to the staff of DH or CAS.

8. Our Center and voluntary association

A voluntary association is active in our Center and its called Associazione Mimosa-Amici del DH Oncologico in Borgomanero - ODV, which was founded in 2004 with the following goals:

1) Promote prevention in the oncology field

2) Support oncological patients and their families during the disease being integratade with the activity of the oncological DH

3) Promote staff training of DH and PO in Borgomanero in order to improve patient guidance in the diagnosis and treatment process

4) Improve care environments through constant ambient humanization

During the years the Association has enlarged allowing a constant growth of provided activities:

- editing, printing and free shipping the information sheets of the Association to promote its initiatives and cancer prevention;

- organizing courses for patients and their families with the aim of creating support during all the disease period through moments of socialization (music therapy course, art therapy, yoga, fit walking, etc.);

- distribution on the occasion of Christmas and Easter of gifts to patients in chemotherapy prepared by the volunteers of the Hobbyist Course and organization of markets to collect drugs funds;

- purchase and free distribution of drugs to patients who need to start chemotherapy and perform instrumental tests (drug kits);

- organization of breakfasts at the Refreshment Point with volunteers;

- free medical legal advice;

- convention on the purchase of wigs from a leading company;

- organization of some recreational moments for patients and their families such as a Lunch on the Feast of the Cancer Patient, the Christmas Concert and theme nights;

- creation and management of the library;

- free beauty oncologic consultations with distribution of informative material and aesthetic kits;

- free distribution of picc-covers and waterproof picc-covers;

- secretary point of the Association: 3 times a week at the DH;

- conferences on cancer prevention and health promotion;

- print of information material for the Association and for the DH;

- interventions of recovery and improvement of rooms;

- support for study protocols;

- in-site sexology clinic;

- financing scholarships, training courses, purchase of technological material to improve the diagnosis of cancer.

For information about the Association, request the special leaflet at the secretary point or connect to the website <u>www.associazionemimosa.it</u> or call 349/6565971 during the opening days of the secretary (Monday, Wednesday and Friday from 14.00 to 16.00).

At the Center there is a large Library where it is possible to borrow books. The Library is self-managed, therefore it is useful to report on the register the data of the books when leaving the department.

9. Piedmont and Valle d'Aosta's Oncology Network

The Piedmont Region has been the first on national level to build and implement the Regional Oncology Network allowing to improve the quality of medical care and rationalize resources. The Oncology Network of Piedmont and Valle d'Aosta in fact, since 1999/2000 has been assisting and guiding the patient along diagnosis and therapy, offering multidisciplinary treatment methods and administrative assistance from dedicated centers. The objectives of the Oncology Network territorial are: overcome inhomogeneities in terms of health services and performances provided, achieve increasingly higher treatment standards, simplify all phases of access to services by the patient and the development of diagnosis and therapy paths, bring services closer to the persons' in need of care life context, identify uniform and coherent diagnostic-therapeutic and assistance paths and develop concrete research activities. At the base of the Network organization there is the "Compass of Values", a cultural reference model for its operators to which behaviors, organizational models and operating procedures are aligned. It declines all the individual values that inspire the Network in behaviors that concretize them and responsibilities that guarantee them. The values of the Network are: quality, taking charge, dignity, sustainability, communication, dialogue and training.

Our Center has been part of Piedmont and Valle d'Aosta's Oncology Network since 2004 and since then we have been trying to work to follow the indications of the Network: always placing the patient and his family at the center of our care. The values of the Compass are important to us and we try to actualise them on a daily basis by welcoming, listening and accompanying you along diagnosis and treatment, aware that each patient is unique and as such must be respected, supported and guided in the best therapeutic choice.



For more information about Piedmont and Valle d'Aosta's Oncology Network and the Compass of Values go on the following website: <u>www.reteoncologica.it</u>.

10. Patients' rights

Right to a quality medical care

The patient has the right to receive the most effective treatments available today. For this reason our DH is always in contact with the Research Institutes to improve the management of our patients by reporting them to the Reference Centers for all the therapies that cannot be performed at our Center.

The Center also tries to provide the patient with personalized care through a multidisciplinary approach (GIC) that takes into account their health and psychological needs, always preserving a dignified quality of life.

The diagnostic-therapeutic procedures, the nursing and technical-health services provided, are based on clinical-assistance courses developed according to national and international guidelines, clinical protocols and targeted therapies for a personalized-care.

The provided service is based on the principles of respect for the person and for human dignity with a global management of the patient according to the fundamental principle of Piedmont and Valle d'Aosta's Oncological Network to which we belong.

Right to information

The patient has the right to receive timely and correct information on how to access to services, waiting time and services offered. Therefore comprehensible and complete informations will be provided on the disease, in terms of diagnosis, treatment and course and on the cures and related risks and inconveniences, so that an informed consent can be signed.

Right to access to medical records

At each access to our Center, the patient will be provided with a discharge letter that collects all the clinical information and therapies to be performed at home. In case of hospitalization in DH, the Medical Record can be requested at the Archive Acceptance Office of the Borgomanero Hospital from Monday to Thursday from 8.15 to 16.00 and on Friday from 8.15 to 14.00.

The copy of the Medical Record is given to the entitled persons and is a paid service. You will be given specific information on the costs and way of collection by the staff in charge.

Right to privacy

To guarantee privacy, patients will be asked to fill in a form where they can report the name of the person (s), relatives, friends or doctors to whom they wish that disease-related-informations are transmitted by health personnel. People not included in this list will not obtain any information from doctors about the patient's state of health and care.

Right to complain

The patient has the right to comment, ask, report and complain on the quality of the diagnosis and treatment activities performed at our Center and on the general organization of assistance.

You can report complaints directly to the URP (Public Relations Office) of our ASL in the following ways:

email: ure@asl.novara.it

telephone: 0321/374530 from Monday to Friday from 9.00 to 13.00.

It is understood that the director of our facility is available to accept comments, questions, reports and complaints at any time.

In fact, in order to monitor the quality of the service provided for years, it promotes the detection of "Customer Satisfaction " through the compilation

of questionnaires. It was also installed at our DH a letterbox where you can write your opinions on the service while maintaining anonymity.

Right to research: participation to clinical studies

At our Center no clinical trials are carried out but if we identify patients who can benefit from an experimental protocol, they will be reported to the research institutes that we collaborate with.

Right to pain treatment

Pain therapy is carried out at our Center. Moreover, at Borgomanero Hospital there is one of the first Complex Structures of Palliative Care Units with whom we collaborate closely also through the multidisciplinary discussion of clinical cases. The Painless Hospital Committee is also present with a task to ensure that all users have the right to an optimal pain control and other symptoms that sometimes are part of cancer.

Right to safety

The Technical Department together with the Prevention and Protection Service, in addition to the continuous verification of what is required by the legislation on workplace-safety, constantly works to increase comfort and safety conditions of our Center for users and their helpers.

11. The rights of male and female workers

If you are a worker affected by oncological pathologies, you have the right to:

a) transformation of the employment relationship from full- to part-time, both vertical or horizontal, if you have a reduced working capacity due also to the side effects of the treatment. When your state of health makes it possible, you can ask to change your employment relationship from part- to full-time again. b) choose the workplace closest to your home and if needed, give your consent for the transfer to another location.

c) a period of paid leave for medical treatment, if you are recognized as having a disability of more than 50%, for a maximun duration of 30 days a year to be used even separately. The days of leave for treatment are added to the days of illness provided for by the National Employment Contract.

d) paid leave of 2 hours a day or 3 days a month, if you are recognized as having a disability (law 104).

e) job placement with registration in the guided placement lists, if a civil disability of more than 67% is recognized.

f) overcoming of architectural barriers, reduced VAT for the purchase of vehicles suitable for the transport of disabled people, exemption from the payment of tax for vehicles suitable for the transport of disabled people (law 104)

g) ordinary disability allowance, if you are recognized as having a disability between 74 and 99% (subject to income and age limits). When, on the other hand, you are recognized as having total and permanent disability (100%), you can apply for a disability pension. To its access, it is necessary to be registered with INPS with 5 years of contributions and insurance, of which 3 years in the 5 years previous to the presentation date of the application.

h) the exemption of the total prescription charge, if you are recognized as having a civil disability equal to or greater than 67%

i) the accompanying allowance provided without age and income limits, if a 100% disability is recognized with inability to walk without help or if you need continuous assistance not being able to perform the daily acts of life

j) free aids and prostheses, if you are recognized as having a disability greater than 33 %

k) free circulation card on urban and extra-urban lines and railways (regional trains and some extra-regional trains) if you are recognized as having a disability of more than 67%

l) the special free circulation and parking mark for vehicles of disabled people that is issued by the municipalities of residence for patients with walking difficulties and for blind people.

How can you activate your rights?

The first step to be able to take advantage of the benefits provided by law for workers suffering from oncological pathologies consists in obtaining the acknowledgement of civil invalidity and its status in a serious situation (law 104).

It is necessary to contact a certified doctor (usually your own doctor or a qualified specialist) who will send the certificate online to INPS, issuing the transmission receipt. It is appropriate to request invalidity and law 104 at the same time in order to perform a single visit for both requests.

With the transmission receipt it will be necessary to contact a patronage or trade associations to submit the application for recognition of disability and disability status.

Once the request has been completed through the Patronage or the trade associations, there will be a call to report to the ASL-INPS Medical Commission within 15 days of the application. In the event that the doctor certifies the non-portability, the Commission is performed at home.

A copy of the documentation certifying the pathology and, if available, the letter from the specialist indicating the diagnosis and the therapeutic program must be brought to the ASL-INPS Medical Commission.

Upon completion of the assessment, the report will be sent to the domicile which can be immediately used to request all the benefits provided by law.

In case of failure or erroneous health recognition, legal recourses against INPS are only allowed within 180 days, under penalty of forfeiture of the notification of the health report.

When civil invalidity is recognized, it is possible, in relation to the clinical situation and the prognosis of the disease, an inability to work and an incapacity pension can also be requested from INPS.

Who to contact for information on rights and obligations?

At your workplace, you can contact the Human Resources Department, the Trade Union Representatives, the Workers' Safety Representative and the competent Doctor directly.

Furthermore, the general practitioner, the charities, the trade unions and some voluntary associations can provide the necessary informations.

In our Center it is possible to have these informations from Social Services: to contact it, simply ask our staff.

What rights do family members have?

Family members are entitled to:

- a- a paid leave of 3 days a month provided that the person to be assisted is not hospitalized full time (law 104)
- b- a paid leave of 3 working days a year
- c- the priority of the employment contract from full- to part- time in case the oncological diseases is affecting the spouse, children or parents of the worker as well as in the case in which the worker assists a cohabiting person with total and permanent incapacity for work, which assumes gravity connotations
- d- period of continuous or split overtime paid leave up to a maximum of 2 years provided that the person to be assisted is not hospitalized fulltime (for spouse / cohabitant of the sick person, for parents even if not cohabiting, for cohabitating child if other family members are not available, cohabiting brother or sister)
- e- adjustment of family allowances for households in which there is at least one disabled member and with at least 70% of income deriving from subordinate work.

My reference oncologist is:

My reference nurse is:



Oncologic Network of Piedmont and Valle d'Aosta "YOU AT THE CENTER AND WE BY YOUR SIDE"

This booklet was produced thanks to the contribution of the

Associazione Mimosa Amici del DH Oncologico in Borgomanero

www.associazionemimosa.it

