



E.D.P.A.® Patented

ANAMNESTIC FORM
to be attached to the dust samples
to request the E.D.P.A.®

Fill in this Anamnestic form in all parts

First name	Age
Surname	
Address	
City	Country
Email	
Phone n.	Fax
Fiscal code and/or VAT number of the person effecting the payment:	

Please send the E.D.P.A.® report and the invoice to:
to the following e-mail address:
or to the following fax number:
and / or to the email address of your doctor:



URANIA Entomofauna del Mondo S.r.l.
Via Giovanni Cecchini, 18 - 06129 Perugia - C.F. e P. IVA : 01940210543
Tel. e Fax: 075 / 5002436 - Cell.: 334 / 2687323 - E-mail: urania@edpa.it - www.edpa.it

Mark with an X the anamnestic form in case of
DERMATOLOGICAL PROBLEMS

When did the first lesions start (period)?

Where are your lesions?

HEAD **FACE** **NECK** **ARMS** **HANDS**

TRUNK

back
 shoulders
 breast
 belly

PELVIS

buttocks
 genitals

LEGS

thighs
 calves
 ankles
 feet

OTHER (specify) _____

What kind of lesions are they?

- A lot of small reddish spots (about 1mm)
- Swelling reddened with a central bladder
- Big reddish swellings with a central lesion (about 2 cm)
- Simple rash with itch
- other (specify) _____

The lesions are more often:

grouped scattered

Have all in the family any lesions?

Yes No Just some

Appearance of itch mainly:

during the day by night in the morning in the evening no itch

Particular notes that you want to communicate to the laboratory: _____

Kind of dwelling:

flat in the city house/country house

Do you spend any time in the garden?

No Yes

Are there any animals at home?

Dog Cat

Other (specify) _____

Are there any plants at home?

No Yes

Are there any woodworm-eaten furniture?

No Yes (specify in which rooms) _____

Do you keep firewood at home?

No Yes

Are there any moisture or mold stains on the walls?

No Yes (specify in which rooms) _____



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Mark with an X the anamnestic form in case of
BREATHING PROBLEMS

During the day have you got any bronchial asthma access?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
During the day have you got any bronchial asthma access?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
In some rooms, do you:		
try a sense of choking?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

		(specify in which rooms)
often cough suddenly?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

		(specify in which rooms)
have discomfort and irritation of the nostrils?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

		(specify in which rooms)
have sometimes rhinitis and tearing?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

		(specify in which rooms)
While sleeping, have you a breathing noisy with wheezing?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Particular notes that you want to communicate to the laboratory:	_____	

Kind of dwelling:	<input type="checkbox"/> flat in the city	<input type="checkbox"/> house/country house
Do you spend any time in the garden?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Are there any animals at home?	<input type="checkbox"/> Dog	<input type="checkbox"/> Cat
	<input type="checkbox"/> Other (specify) _____	
Are there any plants at home?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Are there any moisture or mold stains on the walls?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

		(specify in which rooms)
ENVIRONMENTAL CHECK		
<input type="checkbox"/> I request this exam just to know if in my house there are dangerous insects or mites.		



Privacy policy and consent

Dear customer, we would like to inform you that Regulation (EU) 2016/679 lays down rules on the protection of individuals with regard to the processing of personal data, as well as rules relating to the free movement of those data.

According to the above mentioned European Regulation, personal data will be processed lawfully, correctly and transparently with regard to the person concerned.

Therefore, pursuant to Article 13 of Regulation (EU) 2016/679, we provide you with the following information:

1. The owners of the processing of your personal data and of the protection of the same are the two following companies that manage our Urania Research Centre, in the person of their own sole Administrator :
 - the company Urania Entomofauna del Mondo S.r.L., with registered office in Perugia, Via Giovanni Cecchini 18, 06129 Perugia (Italy) email addresses : urania@edpa.it , uraniaentomofaunadelmondosrl@pec.it ,telephone n.: (+39)75-5002436;
 - the company Perprin S.r.L., with registered office in Via Pietro Nenni 1, Loc. Tavernelle, Panicale (PG), email address: perprin@legalmail.it , telephone n.(+39)75-5002436.
2. The personal data provided by you will be processed for the purposes related to the research activities and to the services offered by our URANIA Research Centre, in particular :
 - Examination of the Anamnestic form;
 - Examination of the dusts and other material supplied by you for the request of one of our services (E.D.P.A. ®, E.D.P.A.I. ®, Scabies-Test, Arthropod Identification Service);
 - Elaboration of the results obtained by drawing up a written report;
 - Issuance of the invoice for the payment of the service;
 - Archiving of information at our network;
 - Anonymous use of results for research, scientific publications, national and international scientific projects;
 - Anonymous use of any photos provided, as long as they are not clearly attributable to the subject concerned, for research, scientific publications, national and international scientific projects.
3. The categories of subjects responsible for the processing of your data will be:
 - the staff involved in the examination of dusts and other services of our URANIA Research Centre requested and in the written report with the results of the research carried out;
 - doctors or other individuals, to whom the report of our examination will be sent, on your possible express request.
4. The personal data provided by you will be stored by the controller until the existence of the activity of our Urania Research Centre for research purposes, scientific publications, national and international scientific projects.
5. At any time, you may exercise your rights and ask the data controller:
 - the purpose of the treatment;
 - the logic used for the processing of personal data;
 - the categories of personal data in question;
 - the recipients or categories of recipients to whom personal data have been or will be communicated, in particular if recipients of third Countries or international organisations;
 - the retention period of the personal data envisaged, or the criteria used to determine that period;
 - to access your personal data and to ask for rectification or deletion (article 16 and 17), or the limitation of treatment (art. 18) concerning them or to oppose their treatment (art. 21), in addition to the right to data portability (art. 20) ;
 - to revoke the consent at any time, without affecting the lawfulness of the consent-based treatment prior to revocation;
 - to propose a complaint to a supervisory authority.
6. All requested data shall be indispensable for the above mentioned purposes, including the data which may be conferred on the members of your household. The above mentioned aims may also involve sensitive data, both yours and those of the members of your household (art. 9) and may result in the communication of the data, including sensitive ones, to third parties (if you request the examination results to be sent to your doctor or other person).
7. The treatment shall be carried out by the following means:
 - paper
 - electronic media
8. Such personal and sensitive data may be processed and used only with your written consent (art. 6 and 7 of Reg. (EU) 2016/679).

We therefore ask you to express your consent for:

-processing and using personal data (point 2) and sensitive data (point 6) for the purposes referred to in point 2.

Place and date..... Sign for consent.....

-communicating personal data (point 2) and sensitive data (point 6) to third parties referred to in point 3.

Place and date..... Sign for consent.....



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