



SPECIAL TERMS AND CONDITIONS FOR VOLUNTARY HEALTH INSURANCE ACCORDING TO CHOSEN PROGRAMME

GENERAL PROVISIONS

Article 1

Special Terms and Conditions for Voluntary Health Insurance According to the Chosen Programme (hereinafter referred to as „the Conditions“) together with General Terms and Conditions for Voluntary Health Insurance (hereinafter referred to as „the General Conditions“) are integral part of each and every Contract on Voluntary Health Insurance According to the Chosen Programme (hereinafter referred to as „ the Contract“) concluded between the person effecting insurance (hereinafter referred to as „ the Policyholder“), that is the Insured and Dunav Insurance Company a.d.o. (hereinafter referred to as „the Insurer“).

The Conditions hereof shall regulate rights and obligations between the Policyholder and the Insurer according to the type of the health insurance programme chosen and concluded by the Insured. Under the Conditions hereof the Insureds shall be beneficiaries of health care provided in accordance with compulsory health insurance in the manner and following the procedure different from the manner and procedure for exercising rights under compulsory health insurance prescribed by the Law regulating the health insurance and regulations for the implementation of such Law.

Insurance coverage shall apply only in the territory of the Republic of Serbia.

DEFINITIONS

Article 2

Particular terms in the Conditions hereof shall mean:

- 1) **„Insured Event“**– occurrence of circumstances which by virtue of the contract oblige the Insurer to enable the Insured to use the voluntary health insurance programme (medical examinations, laboratory analyses, and diagnostics) chosen under the Contract.
- 2) **„Call centre“** – Insurer’s centre which coordinates between the Insured and provider of medical services in the exercising of rights under the programme of voluntary health insurance chosen under the Contract.
- 3) **„Healthcare programme“**– (hereinafter referred to as „ the Programme“) content and scope of stipulated healthcare.
- 4) **„Provider of medical services“**– legal entity carrying out healthcare activities and having the licence issued by the Ministry competent for healthcare activities (hereinafter referred to as „the Ministry“) to perform healthcare activities in accordance with the law regulating health protection and with regulations enacted for the enforcement of such law, and with

which the Insurer has concluded a contract for the provision of medical services.

- 5) **„Chosen doctor“**– Doctor of medicine or specialist at the provider of medical services chosen by the Insured and with which the Insurer has concluded a contract for the provision of medical services.

ELIGIBILITY FOR INSURANCE

Article 3

Under Voluntary Health Insurance According to the Chosen Programme eligible for insurance is the person named in the policy or list attached to the policy who has paid the contracted premium or for whom the agreed premium has been paid.

The Insured status under the Voluntary Health Insurance According to the Chosen Programme may be acquired by a person with a status of insured person under compulsory health insurance and a person not covered by compulsory health insurance or a person which has not been included in the compulsory health insurance.

The Policyholder may at the same time be the Insured.

Article 4

The Contract shall be concluded in accordance with provisions of article 5 of the General Conditions, to the period of one year when the Insurer and Policyholder have put their respective signatures to the Policy.

The Contract for group insurance shall be concluded according to the records of the Policyholder. The insurance shall cover all employees/members of the Policyholder during the insurance period for which the annual premium has been paid.

The rights determined under the Contract shall be exercised pursuant to the provisions of Article 6 of General Conditions.

SCOPE OF INSURANCE COVERAGE

Article 5

Insurance under the Conditions hereof can be concluded according to the following programmes irrespective of the indicated medical health needs:

Programme A

1. One general check-up including:
 - medical examination with ECG carried out by a specialist of internal medicine;
 - laboratory analyses (full blood count, (erythrocytes,leukocytes,haemoglobin, Hct, Le formula, thrombocytes), blood



- sedimentation test, blood sugar, cholesterol, triglycerides, urinalysis);
- 2. Three examinations a year by the chosen doctor;
- 3. One abdominal ultrasound scanning;
- 4. Unlimited number of examinations by the chosen doctor paid by the Insured at the 30% discount on the regular fee, after the number of examinations set in the Programme A has been used up.

Programme B

1. One general check-up including:
 - medical examination with ECG carried out by a specialist of internal medicine;
 - laboratory analyses (full blood count, (erythrocytes, leukocytes, haemoglobin, Hct, Le formula, thrombocytes), blood sedimentation test, blood sugar, cholesterol, triglycerides, urinalysis);
2. Three examinations a year by the chosen doctor;
3. One abdominal ultrasound scanning;
4. One specialist main examination and two check-ups carried out by the same specialist;
5. Unlimited number of examinations by the chosen doctor paid by the Insured at the 30% discount on the regular fee, after the number of examinations set in the Programme B has been used up.

Programme C

1. One general check-up including:
 - medical examination with ECG carried out by a specialist of internal medicine;
 - laboratory analyses (full blood count, (erythrocytes, leukocytes, haemoglobin, Hct, Le formula, thrombocytes), blood sedimentation test, blood sugar, cholesterol, triglycerides, urinalysis);
2. Three examinations a year by the chosen doctor;
3. One abdominal ultrasound scanning;
4. One specialist main examination and two check-ups carried out by the same specialist. The specialist main examination shall mean diagnostics associated with the chosen specialist examination. Diagnostics procedures must be indicated by the doctor of the corresponding specialist medical practice;
5. Unlimited number of examinations by the chosen doctor paid by the Insured at the 30% discount on the regular fee, after the number of examinations set in the Programme C has been used up.

Programme W1 (women)

1. One gynecological examination with breast exam,
2. One Pap test and one analysis of degree of cleanliness,

3. One colposcopy examination,
5. One gynecological ultrasound scan,
6. One breast ultrasound scan.

Programme W2 (women)

1. Two gynecological examinations with breast exam,
2. Two Pap tests and two analyses of degree of cleanliness,
3. One colposcopy examination,
4. One gynecological ultrasound scan,
5. One breast ultrasound scan,
6. One mammography.

Medical examinations, laboratory analysis and diagnostic methods of each and every programme indicated in the article hereof which shall be approved and paid by the Insurer are specified in the Detailed Description of Diagnostic methods indicated and carried out by the doctor of the corresponding specialist medical practice which is the integral part of the Conditions hereof.

INCEPTION AND INSURANCE PERIOD

Article 6

The insurance shall be concluded for the period of one year.

Article 7

The inception and insurance period are agreed on in accordance with provisions of article 7 and article 8 of the General Conditions.

In the group insurance, the persons employed after the inception of the insurance indicated in the Policy shall be subsequently included, the Insurer being entitled to the annual premium and the insurance period shall be valid until the date indicated in the Policy.

TERMINATION OF INSURANCE

Article 8

The insurance shall terminate even before the agreed term in the event of the:

1. Death of the Insured,
2. Cancellation of contract pursuant to article 19 of the General Conditions,
3. Annulment of the Contract according to article 20 of the General Conditions.

In the event of Contract annulment the Insurer shall keep the collected premiums and shall be entitled to request payment of premium for the period of insurance in which he requested the contract nullification. If the Insured have started using the health services according to the programme agreed upon, the Insurer shall be entitled to the contracted annual premium.



OBLIGATION OF THE INSURER

Article 9

The Insurer shall be obliged to enable the Insured to use health and medical services during the insurance period and in accordance with the contracted insurance programme, rendered by the chosen provider of health and medical service in the network of health institutions with which the Insurer has concluded a contract on business cooperation.

The Insurer is obliged to up-to-date and make available the list of health institutions on his web page.

When the Insured reports to the Insurer's Call centre, it shall check the scope and amount of cover for the programme agreed upon and shall make appointment with the chosen health institution for the specific health and medical service to be provided.

The Insurer is obliged to pay to the provider of health and medical services the costs of health and medical services used according to the programme.

EXCLUSION OF INSURER'S LIABILITY

Article 10

The Insurer shall not be liable in cases where:

1. The Insured has given incorrect and false data, i.e. he has concealed significant circumstances that have an impact on the conclusion of the Contract.
2. The due premium has not been paid either by the Policyholder/Insured or any other person on his behalf within the agreed term.
3. The Policy i.e. Insurance document has been misused.
4. The range of agreed health and medical services i.e. amount of costs has been exceeded.
5. The indemnity claim is based on false data and false documents.

INSURANCE PREMIUM

Article 11

The premium amount shall be set for each respective programme, specified under article 5 of the Conditions thereof depending on the age of the Insured.

Accounting and premium payment methods and terms are provided under article 18 of the General Conditions.

Article 12

If the premium payment has been agreed in installments and the premium has not been paid either until the maturity date or upon the expiry of 30 days from the date when the Insurer has sent the registered letter in which he has notified the Policyholder about the premium maturity- where however, such date cannot expire before the expiry of 30 days from the premium maturity- the following consequences shall arise depending on to

which extent the agreed health and medical services have been used:

- The insurance shall terminate attaching no further obligation of premium payment if the Insured has not used any of the agreed services, while the premium paid until then shall be kept by the Insurer.
- Temporary suspension of health and medical services until the date when the premium due shall be paid together with default interest and attaching the obligation to pay the aggregate annual premium, if the Insured has partially used the health and medical services agreed upon.
- Temporary suspension of the medical examinations on which the Insured has the discount until the date when the premium due shall be paid together with the default interest and attaching the obligation to pay the aggregate annual premium if the Insured has used up all the other health services agreed upon.

RIGHTS AND OBLIGATIONS OF THE INSURED AND POLICYHOLDER

Article 13

When exercising his respective rights under the Contract the Insured shall submit evidence of the conclusion of the Contract in compliance with provisions of Article 18 Rules for Voluntary Health Insurance.

When exercising his respective rights under the Contract the Policyholder/Insured shall contact the Call Centre and provide all necessary data from the Insurance document based on which it will be established the scope of agreed health and medical services according to the programme agreed upon.

Upon the medical examination, i.e. service provided in the health institution, the Insured is obliged to put his signature on the corresponding form prescribed by Insurer and presented by the doctor in confirmation that he has been provided with the medical service.

In case the number of examinations or services used by the Insured exceeds those stipulated in the Programme, the expenses of the same shall be charged against the Insured.

APPLICATION OF REGULATIONS

Article 14

Provisions of General Conditions, Rules for Voluntary Health Insurance, Voluntary Health Insurance Regulations, Law of Contract and Tort and other statutory provisions of the Republic of Serbia regulating the insurance sector shall apply to all relations between contracting parties not regulated under the Conditions hereof.



Article 15

In all cases when contracting parties cannot agree on particular issues concerning mutual rights and obligations the disputable issues shall be settled:

1. By complaint to the competent body of the Insurer.
2. By legal proceedings instituted with the competent court.

Article 16

If the Insurer makes any amendments to the Conditions he shall be obliged to notify thereof in writing or in any other appropriate manner (daily newspapers, radio, television, Insurer's web presentation etc) the Policyholder/Insured with whom he has concluded a long-term Insurance Contract.

In the event of any amendments to Conditions hereof during the insurance period of long-term insurance it may be agreed that new Conditions shall apply starting with the following insurance year subject to approval in writing by the Insured.

FINAL PROVISIONS

Article 17

The Conditions hereof shall override the Conditions of Private Supplementary Health Insurance (Company Bulletin, Nos.2/03 and 7/05).

Article 18

The Conditions hereof shall be made public on the web site of the Insurer.

The Conditions hereof shall come into force on the day following the day of their publication in the Company Bulletin and shall apply as of January 1, 2010.

**MEDICAL SERVICES STANDARDS AND DETAILED DESCRIPTION OF DIAGNOSTIC METHODS COVERED BY VOLUNTARY HEALTH INSURANCE****TYPE AND STANDARDS OF MEDICAL EXAMINATIONS**

Ordinal no.	TYPE OF MEDICAL EXAMINATION	MEDICAL EXAMINATION STANDARDS
1.	2.	3.
1.	Main examination carried out by a specialist in internal medicine and examination by a subspecialist in internal medicine: 1. Cardiological 2. Endocrinological 3. Pulmological 4. Gastroenterological 5. Nephrological 6. Rheumatological	<ul style="list-style-type: none"> - case history taking - analysis of presented medical documents - general clinical check-up, evaluation of patient` s general state of health with special reference to the underlying disease where there is any - pulse and blood pressure taking - establishing of a diagnosis (working or final) - giving of medical opinion and suggestions for further treatment - referral to other consultative specialist examinations, x-ray laboratory examination or inpatient clinic, if required - prevention of secondary complications of illness - patients` education for therapy purposes - entering of data in medical documents - making an appointment for a check-up
1.a	Check-up by a specialist in internal medicine and examination by a subspecialist in internal medicine: 1. Cardiological 2. Endocrinological 3. Pulmological 4. Gastroenterological 5. Nephrological 6. Rheumatological	<ul style="list-style-type: none"> - analysis of presented medical documents - pulse and blood pressure taking - diagnosis establishing- repeated clinical examination - referral to further consultative specialist examinations and making of a new appointment if required - assigning of therapy or therapy correction where required - entering of data in medical documents
2.	Main gynaecological examination by a specialist	<ul style="list-style-type: none"> - swab taking for Pap test and vaginal swab taking - colposcopy examination - referral to radiological examinations for screening envisaged with respect to the patient` s age - evaluation of the state of health and factors of risk to health - health related- educational activities - taking of family and personal case history - preparing of equipment, materials and instruments - breast examination by palpation - abdomen examination - blood pressure taking - external and internal gynaecological examination - speculum examination - referral to further consultative-specialist, laboratory and other examinations - diagnosis establishing - assigning of therapy and therapy-related advice - keeping of medical documents and records and making new appointment for the following examination - entering of data in medical documents



2.a	Gynaecological check-up by a specialist	<ul style="list-style-type: none">- taking of additional anamnestic data on the course of illness after the first examination- evaluation of the state of health and local findings against previous findings- external and internal gynaecological examination- analysis of laboratory and other findings obtained- diagnosis establishing- assignment of therapy- advice and instructions related to further treatment- entering of data in medical documents
3.	Main neurological examination by a specialist	<ul style="list-style-type: none">- clinical examination- examination of mental state, pyramidal and extrapyramidal system, muscle tone, muscle strength testing, limbs measurement, testing of muscle reflex, surface and deep sensibility, balance, coordination of movement and walk, speech function, peripheral nerves disorders, psychomotor skills, meningeal marks- referral to inpatient treatment- patients` education for therapy purposes- entering of patient`s data in medical documents- case history taking- analysis of presented medical documents- complete neurological examination of the patient- psychical functions examination- diagnosis establishing- assigning of therapy- instructions related to further treatment- referral to further additional examinations- making appointment for a new check-up if required- entering of data in medical documents
3.a	Neurological check-up by a specialist	<ul style="list-style-type: none">- taking of additional anamnestic data on the course of illness after the first examination- analysis of presented medical documents- complete neurological examination of the patient- diagnosis establishing and assigning of therapy- referral to further check-ups- making appointment for a new check-up if required- entering of data in medical documents
4.	Main psychiatric examination by a specialist	<ul style="list-style-type: none">- referral to additional examinations and investigations- referral to inpatient treatment- patients` education for therapy purposes- assigning of therapy- entering of patient`s data in medical documents- taking of family and personal case history- inspection of medical documents- patient interview- initial psychiatric interview- general clinical examination- psychical functions examination- diagnosis establishing and function establishing- entering of data in medical documents



4.a	Psychiatric check-up by a specialist	<ul style="list-style-type: none">- taking of additional case history data- therapeutic measures evaluation- undertaking of new diagnostic and therapeutic measures if required- entering of data in medical documents
5.	Main ophthalmological examination by specialist	<ul style="list-style-type: none">- biomicroscopy- determination of eye pressure (aplanation tonometry, tonometric curve, by mechanic Schiottz tonometer)- indirect ophthalmoscopy- gonioscopy- keratometry- sciascopy- refractometry- analysis of medical documents- working or final diagnosis- professional opinion- proposing of therapy- referral to additional examinations and investigations- referral to inpatient treatment- patients` education for therapy purposes- assigning of therapy- entering of patient` s data in medical documents- taking of short case history- external eye examination- eye segments examination- digital estimation of ocular tension- general examination of extraocular muscles and visual field- examination of transparent areas- fundus examination by ophthalmoscop- determination of visual acuity- eyeglasses prescription- entering of data in medical documents
5.a	Ophthalmological check-up by a specialist	<ul style="list-style-type: none">- local examination by a specialist- control of previously prescribed therapy treatment- continuation of prescribed therapy- possible referral to additional examinations and check-ups- entering of data in medical documents
6.	Main ORL examination by a specialist	<ul style="list-style-type: none">- otoscopy- otomicroscopy- rhinoscopy- epipharyngoscopy (indirect)- indirect laryngoscopy- giving of medical opinion- proposing of medical aids- referral to inpatient treatment- patients` education for therapy purposes- entering of data in medical documents- case history taking- general specialist examination with reference to the main health problems of a patient- evaluation of the state of health and local findings- analysis of medical documents- preliminary and final diagnosis establishing- referral to further check-ups and treatments



		<ul style="list-style-type: none">- assigning of therapy- entering of data in medical documents
6.a	ORL check-up by a specialist	<ul style="list-style-type: none">- evaluation of local findings in relation to the main illness- analysis of findings and results of other diagnostic examinations- check of effectiveness of prescribed therapy- assigning of further therapy and therapeutic procedures- entering of data in medical documents
7.	Main dermatovenerological examination by a specialist	<ul style="list-style-type: none">- detailed skin examination, examination of visible mucous membranes (oral, anogenital) and skin formations (hair and nails), test of skin barrier function, examination of pigmented lesions of skin and early uncovering of malignancy- assigning of therapy- patients` education for therapy purposes- performing of hygienic-epidemiological monitoring (epidemiological survey, hygienic-epidemiological monitoring and intervention) via cooperation with Social Welfare Center- case history taking- inspection of presented medical documents- general specialist clinical examination, analysis with reference to the main health problems of a patient- preliminary and final diagnosis establishing- assigning of therapy- referral to specialist examinations, laboratory examinations and possible stationary treatment- making an appointment for a check-up- keeping of corresponding documents- entering of data in medical documents
7.a	Dermatovenerological check-up by a specialist	<ul style="list-style-type: none">- taking of additional case history- examination of presented documents- general specialist clinical examination- evaluation and check of diagnosis and therapy and possible change of or supplement to diagnosis and therapy- entering of data in medical documents
8.	Main surgical examination by a specialist	<ul style="list-style-type: none">- case history taking- general clinical examination to determine general state of health with reference to the main health problems of a patient, in order to establish general condition and local findings- information about previous medical treatment- diagnosis establishing- determining of additional examinations and findings- referral to operative treatment if necessary- keeping of medical documents- entering of data in medical documents
8.a	Surgical check-up by a specialist	<ul style="list-style-type: none">- analysis of additional medical documents- examination and valuation of the general state of health and basic illness- deciding on further treatment and making of an appointment for a check-up, if required- entering of data in medical documents
9.	Urological examination by a specialist	<ul style="list-style-type: none">- case history taking- general clinical examination- clinical examination of urinary tract and genitals- establishing of diagnosis- establishing of additional examinations required- referral to hospital (clinical) treatment



		<ul style="list-style-type: none">- making an appointment for a check-up- entering of data in medical documents
9.a	Urological check-up by a specialist	<ul style="list-style-type: none">- analysis of additional medical documents- examination and valuation of the general state of health and basic illness- deciding on further treatment and making an appointment for a check-up if required- entering of data in medical documents
10.	Main orthopedic check-up by a specialist	<ul style="list-style-type: none">- case history taking- analysis of the presented medical documents- clinical examination of locomotive system- establishing of diagnosis- making an appointment for a check-up or referral to stationary treatment- entering of data in medical documents
10.a	Orthopedic check-up by a specialist	<ul style="list-style-type: none">- analysis of additional medical documents- examination and valuation of the general state of health and basic illness- deciding on further treatment and, if necessary, making an appointment for a check-up- entering of data in medical documents
11.	Main oncological check-up by a specialist	<ul style="list-style-type: none">- case history taking- general clinical examination to determine general state of health with reference to the main health problems of a patient, in order to establish general condition and local findings- information about previous medical treatment- establishing of diagnosis- determining of additional examinations and findings required- referral to operative treatment, if necessary- keeping of medical documents- entering of data in medical documents
11.a	Oncological check-up by a specialist	<ul style="list-style-type: none">- analysis of additional medical documents- examination and valuation of general state of health and basic illness- deciding on further treatment and making an appointment for a check-up if required- entering of data in medical documents
12.	Main psychiatric examination by a specialist	<ul style="list-style-type: none">- evaluation of patient's functional state including: posture, walk, active and passive mobility of a spine and all joints, tonus, trophic and muscle strength by MMT (manual muscle testing), reflex activity, sensibility, anthropometric measures (extremities measurement), state of peripheral circulation, Barthel Index test, establishing of the extent of fallen arches – podoscope, plantogram.- preliminary and final diagnosis- referral to additional check-ups and examinations- assigning the therapy- patients' education for therapy purposes- case history taking- analysis of the existing medical documentation- clinical examination of locomotive system- establishing of diagnosis- making an appointment for a check-up or referral to stationary treatment- entering of data in medical documents



12.a	Physiatric check-up by a specialist	<ul style="list-style-type: none">- analysis of additional medical documents- examination and valuation of the general state of health and basic illness- deciding on further treatment and, if necessary, making an appointment for a check-up- entering of data in medical documents
13.	Examination by a chosen doctor	<ul style="list-style-type: none">- case history taking- analysis of the existing medical documents- establishing of the general state of health and local findings- pulmonary and cardiac examination performed with a stethoscope- therapy adjustment and giving of prescriptions- referral to other specialist examinations- referral to stationary treatment if necessary- entering of data in medical documents
14.	Main specialist paediatric examination and subspecialist paediatric examination: <ol style="list-style-type: none">1. Cardiac2. Endocrinological3. Pulomological4. Gastroenterological6. Nephrological7. Orthopedic8. ORL examination9. Physiatric	<ul style="list-style-type: none">- anthropometric measures- case history taking- analysis of the existing medical documents- establishing of the general state of health and local findings- pulmonary and cardiac examination performed with a stethoscope- therapy adjustment and giving of prescription- if necessary, referral to other consulting specialist examinations, X-ray laboratory analysis or stationary treatment- making an appointment for a check-up- entering of data in medical documents



DETAILED DESCRIPTION OF DIAGNOSTIC METHODS RECOMMENDED AND PERFORMED BY A CORRESPONDING SPECIALIST AND PAYABLE BY THE INSURER

SPECIALIST	DIAGNOSTIC METHODS			
Internist	ECG	Laboratory analysis (complete blood count {erythrocytes, leukocytes, hemoglobin, HCT, leukocyte formula, thrombocytes}, sedimentation, sugar, cholesterol, triglycerides, urine test)	Abdominal ultrasound	One X-ray
Cardiologist	ECG	Echocardiography	One chest X-ray	Laboratory analysis: cholesterol, HDL, LDL, triglycerides, sugar, CK, K, Na, Cl, LDH
Endocrinologist	Thyroid ultrasound	Laboratory analysis: sugar		
Pulmonologist	Spirometry	Chest X-ray	Laboratory analysis: blood count {erythrocytes, leukocytes, haemoglobin, HCT, leukocyte formula, thrombocytes }, sedimentation	
Gastroenterologist	Abdominal ultrasound	Plain abdominal X-ray	Laboratory analysis: transaminases (ALT, AST, GGT) bilirubin	
Nephrologist	Kidney ultrasound	Laboratory analysis: urea, creatine, K, Na, Cl		
Gynecologist	Gynecological ultrasound	Pap test	Degree of cleanliness	Colposcopy
Neurologist	ECG			
Psychiatrist				
Ophthalmologist	Goldman visual field test	Measurement of intraocular pressure	Keratometry examination and eyeglasses prescription	
Dermatovenerologist	Urethral smear	Skin smear	Wound smear	
Rheumatologist	2 X-rays of extremity, joints and spine	Laboratory analysis: ASO and Latex fixation test, Waaler-Rose, phosphatase, sedimentation		



SPECIALIST	DIAGNOSTIC METHODS			
Physiatrist	2 X-rays			
Orthopedist	2 X-rays			
General surgeon	Abdominal ultrasound	Plain abdominal X-ray	Laboratory analysis: sedimentation, blood count {erythrocytes, leukocytes, haemoglobin, HCT, leukocyte formula, thrombocytes }	
Oncologist	Ultrasound	1 X-ray by choice	Laboratory analysis: blood count {erythrocytes, leukocytes, haemoglobin, HCT, leukocyte formula, thrombocytes }, sedimentation	
Urologist	Prostate and urinary bladder ultrasound	Laboratory analysis: urine, sedimentation, urethral smear, blood count {erythrocytes, leukocytes, haemoglobin, HCT, leukocyte formula, thrombocytes }	Plain urinary tract X-ray	PSA
ORL	Tone audiometry	Evaluation of hearing impairment	Ear irrigation or ear toilet	Throat and nose smear
Pediatrician		Laboratory analysis: urine, sedimentation, blood count {erythrocytes, leukocytes, haemoglobin, HCT, leukocyte formula, thrombocytes }		