



ESTADO DE SANTA CATARINA
SECRETARIA DE ESTADO DA SAÚDE
SUPERINTENDÊNCIA DE Planejamento em Saúde

TERMO DE COMPROMISSO DE GARANTIA DE ACESSO ESTADUAL
TCGAE AC - ALTA COMPLEXIDADE NEUROLOGIA –
NEUROCIRURGIA ENDOVASCULAR / TROMBECTOMIA MECÂNICA (Código 16.18)
HABILITAÇÃO ESTADUAL – DELIBERAÇÃO CIB Nº 756/2023

1. IDENTIFICAÇÃO

Hospital: HOSPITAL SANTA ISABEL
CNPJ: 60.922.168/0052-26
CNES: 2558246
Município: BLUMENAU
Especificação: Neurocirurgia Endovascular/Trombectomia Mecânica (16.18) – Habilitação Estadual Unidade já possui as seguintes habilitações: • Unidade de Assistência de Alta Complexidade em Neurologia/Neurocirurgia (16.01), com os seguintes serviços /Classificação: ○ Serviço de Atenção em Neurologia / Neurocirurgia/Neurocirurgia do Trauma e Anomalias do Desenvolvimento (105-001) ○ Serviço de Atenção em Neurologia / Neurocirurgia/Coluna e Nervos Perifericos (105-002) ○ Serviço de Atenção em Neurologia / Neurocirurgia/ Tumores do Sistema Nervoso (105-003) ○ Serviço de Atenção em Neurologia / Neurocirurgia/Neurocirurgia Vascular (105-004) ○ Serviço de Atenção em Neurologia / Neurocirurgia/Tratamento Neurocirurgico da Dor Funcional (105-005) ○ Serviço de Atenção em Neurologia / Neurocirurgia/Investigação e Cirurgia DE epilepsia (105-006) ○ Serviço de atenção em Neurologia/Neurocirurgia/Tratamento Endovascular (105-007) • Centro de Atendimento de Urgência Tipo III aos Pacientes com AVC. (16.17)
Vigência: Fevereiro/2024

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TCGAE AC - ALTA COMPLEXIDADE NEUOROLOGIA/NEUROCIRURGIA – TROMBECTOMIA MECÂNICA

2. FUNDAMENTAÇÃO LEGAL

- Portaria nº GM/MS nº 1.161 de 07/07/05 e SAS/MS nº756 de 27/12/05, que define as diretrizes e estabelece o regulamento técnico, normas e critérios para a Assistência de Alta Complexidade ao Portador de Doença Neurológica.
- Plano Estadual de Neurologia – CIB/Nº 268/2012.
- Portaria de Habilitação nº SAS 646/2008.
- Deliberação CIB nº 663 de 19/10/2023.
- Portaria GM/MS nº 1.996, de 24 de novembro de 2023, que Inclui, na Tabela de Procedimentos, Medicamentos, Órteses, Próteses e Materiais Especiais do Sistema Único de Saúde - SUS, procedimento relativo à trombectomia mecânica para acidente vascular cerebral isquêmico agudo.
- Deliberação CIB nº 756/2023, de 07/12/2023, que aprova a habilitação estadual para a realização do procedimento relativo à trombectomia mecânica para acidente vascular cerebral isquêmico agudo, dentro do Plano da Rede Estadual de Atenção em Alta Complexidade em Neurologia em Santa Catarina, para a reorganização de fluxos e serviços.
- Portaria de Autorização nº 144/2024, que autoriza o habilitação Estadual em neurocirurgia Endovascular / Trobectomia Mecânica (Código 16.18), no Hospital Santa Isabel, CNES 2558254, localizado no município de Blumenau, em pacientes do SUS, conforme portaria do Ministério da Saúde, portaria GM/Ms nº 1.996 de 24/11/2023 e a deliberação CiB nº 756/CIB/2023, de 07/12/2023.

3. INTERNAÇÕES

3.1 - Internações Cirúrgicas de Alta Complexidade (Subgrupo 04.03)

Região de Saúde	Pop 2023	Cota Mensal	
		Físico	Financeiro
Médio Vale do Itajaí	812.942	10	R\$ 200.000,00
Alto Vale do Itajaí	309.805		
Foz do Rio Itajaí	810.890		
Oeste	408.835		
Xanxerê	206.971		
Extremo Oeste	241.275		
Total	2.790.718	10	R\$ 200.000,00

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Custo Médio: R\$ 17.807,97 + 2.192,03 (custo Tabela SIGTAP/MS + projeção de insumos hospitalares)

As consulta e exames necessários já estão incluídos no TCGA da Alta Complexidade em Neurocirurgia, habilitado pelo Ministério da Saúde.

4. VALORES GERAIS ALOCADOS

Grupo/Procedimento	Cota Mensal	
	Físico	Financeiro
Internação Cirúrgica	10	R\$ 200.000,00
Total Geral		R\$ 200.000,00

5. ESPECIFICAÇÕES

Cabe ao gestor municipal ou estadual responsável pela gestão do serviço objeto desse termo, contratá-lo por meio de instrumento contratual ou congênere conforme a Lei nº 8.666 de 21/06/93 e considerando os seguintes eixos:

A distribuição do número de cirurgias por município/região será realizada pela regulação, levando-se sempre em consideração a gravidade clínica dos casos.

Manter as condições técnicas estabelecidas nas portarias ministeriais de forma contínua e sistemática, sendo que a qualquer momento poderá passar por vistoria dos Gestores Estadual e/ou Municipal.

O serviço deverá ser regulado através das centrais de regulação quando de seu funcionamento e cumprir os protocolos clínicos estabelecidos pela Secretária de Estado da Saúde.

Na utilização de Órteses, Próteses e Materiais especiais – OPM, a unidade fica condicionada as regras do Sistema Único de Saúde – SUS e materiais constantes na tabela do SIGTAP, salvo as exceções dos materiais padronizados pela SES/SC e solicitados dentro dos protocolos existentes.

A alimentação correta dos sistemas de informação Ambulatorial e Hospitalar se faz necessária, visto a importância da observação e avaliação dos dados pelo sistema oficial de produção TABNET/DATASUS. (Relatório de Glossa)

O serviço deverá garantir os leitos clínicos e cirúrgicos específicos para o serviço de neurologia.

Atendimento **integral** em neurologia (consultas, diagnóstico, tratamento e reabilitação) pelo SUS, **sem qualquer ônus** ao paciente, e com garantias de retorno para reavaliação física e ou outras cirurgias decorrentes da cirurgia principal, independente se o profissional que o assistiu ainda permaneça ou não na instituição.

Os procedimentos ambulatoriais devem ser 100% regulados.

A unidade deverá ser regulada pelo gestor responsável pelo serviço e cumprir os protocolos clínicos estabelecidos.

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O Gestor correspondente acompanhará mensalmente o cumprimento deste Termo, quanto à produção ambulatorial e hospitalar.

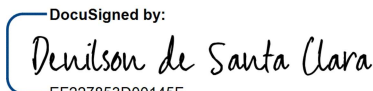
A Unidade Hospitalar deverá cumprir de forma integral este Termo, respeitando as quantidades pactuadas, quando da disponibilidade do total de recursos financeiros previstos.

Denúncias relacionadas ao atendimento e cobranças indevidas, bem como o não cumprimento deste Termo, estarão sujeitas às penalidades previstas na legislação: advertência escrita, advertência escrita com prazo para correção, penalidade pecuniária, ordem de recolhimento, boletim de diferença de pagamento, suspensão temporária da prestação de serviço ou perda desta habilitação, junto ao Sistema Único de Saúde.

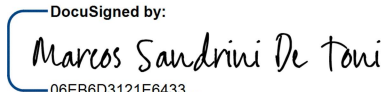
6. POPULAÇÃO DE REFERÊNCIA

A população referência será a macrorregião de Saúde a que o hospital pertence, ficando a cargo da Regulação Regional os encaminhamentos.

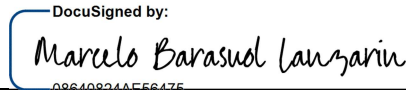
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UNIDADE PRESTADORA DE SERVIÇO

ASS:  DocuSigned by: Marcos Sandrini De Toni 06EB6D3121E6433...

RESPONSÁVEL TÉCNICO DO SERVIÇO

ASS:  DocuSigned by: Marcelo Barasud Lanzarin 08640824AE56475...

GESTOR MUNICIPAL DE SAÚDE

ASS: _____

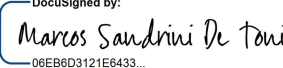
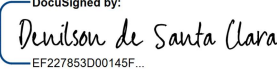
GESTOR ESTADUAL DE SAÚDE

Certificado de Conclusão

Identificação de envelope: 53F61FAE4FEA48BDA7596EAFD8F7156B		Status: Concluído
Assunto: HSI: Termo de Acesso Estadual Neurologia/Trombectomia		
Envelope fonte:		
Documentar páginas: 6	Assinaturas: 3	Remetente do envelope:
Certificar páginas: 5	Rubrica: 9	FABRICIO ANTONIO PIVETTA
Assinatura guiada: Ativado		Rua Cincinato Braga, 144 – Bela Vista.
Selo com Envelopeld (ID do envelope): Ativado		SP, SP 01333-010.
Fuso horário: (UTC-08:00) Hora do Pacífico (EUA e Canadá)		fabricio.pivetta@redesc.org.br
		Endereço IP: 177.69.36.49

Rastreamento de registros

Status: Original	Portador: FABRICIO ANTONIO PIVETTA	Local: DocuSign
15/03/2024 07:08:01	fabricio.pivetta@redesc.org.br	

Eventos do signatário	Assinatura	Registro de hora e data
Marcos Sandrini De Toni marcos.detoni@redesc.org.br Nível de segurança: E-mail, Autenticação da conta (Nenhuma)	DocuSigned by:  06EB6D3121E6433... Adoção de assinatura: Estilo pré-selecionado Usando endereço IP: 201.44.179.210 Assinado com o uso do celular	Enviado: 15/03/2024 07:13:56 Visualizado: 15/03/2024 07:28:05 Assinado: 15/03/2024 07:30:06
Termos de Assinatura e Registro Eletrônico: Aceito: 03/11/2021 06:42:23 ID: 774a6bdf-e6d9-453e-aa8f-9e3a28473324		
Denilson de Santa Clara denilson.sclara@redesc.org.br Dir.Ex.Saúde Rede Santa Catarina Nível de segurança: E-mail, Autenticação da conta (Nenhuma)	DocuSigned by:  EF227853D00145F... Adoção de assinatura: Estilo pré-selecionado Usando endereço IP: 189.111.76.103	Enviado: 15/03/2024 07:30:08 Visualizado: 15/03/2024 07:31:03 Assinado: 15/03/2024 07:31:26
Termos de Assinatura e Registro Eletrônico: Aceito: 21/05/2021 07:11:41 ID: 9cc43b77-feae-4491-aff8-da9f591ed811		
Aline Jorgetto Cezarani alline.cezarani@redesc.org.br Superintendente Nível de segurança: E-mail, Autenticação da conta (Nenhuma)	DocuSigned by:  DE71B012CB43462... Adoção de assinatura: Estilo pré-selecionado Usando endereço IP: 187.57.34.136	Enviado: 15/03/2024 07:31:30 Visualizado: 15/03/2024 07:38:42 Assinado: 15/03/2024 07:39:52
Termos de Assinatura e Registro Eletrônico: Aceito: 15/03/2024 07:38:42 ID: 88ea051c-8558-43d9-97e2-70457f4db125		

Eventos do signatário presencial	Assinatura	Registro de hora e data
Eventos de entrega do editor	Status	Registro de hora e data
Evento de entrega do agente	Status	Registro de hora e data
Eventos de entrega intermediários	Status	Registro de hora e data
Eventos de entrega certificados	Status	Registro de hora e data

Eventos de cópia	Status	Registro de hora e data
Eventos com testemunhas	Assinatura	Registro de hora e data
Eventos do tabelião	Assinatura	Registro de hora e data
Eventos de resumo do envelope	Status	Carimbo de data/hora
Envelope enviado	Com hash/criptografado	15/03/2024 07:13:56
Entrega certificada	Segurança verificada	15/03/2024 07:38:42
Assinatura concluída	Segurança verificada	15/03/2024 07:39:52
Concluído	Segurança verificada	15/03/2024 07:39:52
Eventos de pagamento	Status	Carimbo de data/hora
Termos de Assinatura e Registro Eletrônico		

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Identificação de envelope: 43D662D7B4DC4C319DF4243A5EE9D4A9		Status: Concluído
Assunto: TCGAE AC Trombectomia		
Envelope fonte:		
Documentar páginas: 9	Assinaturas: 1	Remetente do envelope:
Certificar páginas: 4	Rubrica: 3	SUELEM MORAES FERREIRA CARDOSO
Assinatura guiada: Ativado		Rua Cincinato Braga, 144 – Bela Vista.
Selo com Envelopeld (ID do envelope): Ativado		SP, SP 01333-010.
Fuso horário: (UTC-03:00) Brasília		suelem.cardoso@redesc.org.br
		Endereço IP: 189.39.17.129

Rastreamento de registros

Status: Original	Portador: SUELEM MORAES FERREIRA	Local: DocuSign
26/03/2024 17:35:04	CARDOSO	
	suelem.cardoso@redesc.org.br	

Eventos do signatário	Assinatura	Registro de hora e data
Marcelo Barasuol Lanzarin semus@blumenau.sc.gov.br Nível de segurança: E-mail, Autenticação da conta (Nenhuma)	DocuSigned by:  08640824AE56475... Adoção de assinatura: Estilo pré-selecionado Usando endereço IP: 187.72.56.160	Enviado: 26/03/2024 17:39:48 Visualizado: 27/03/2024 07:56:20 Assinado: 27/03/2024 07:56:37

Termos de Assinatura e Registro Eletrônico:
Aceito: 27/03/2024 07:56:20
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Eventos do signatário presencial	Assinatura	Registro de hora e data
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Evento de entrega do agente	Status	Registro de hora e data
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Eventos de entrega certificados	Status	Registro de hora e data
Eventos de cópia	Status	Registro de hora e data
Eventos com testemunhas	Assinatura	Registro de hora e data
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Eventos de pagamento	Status	Carimbo de data/hora
Termos de Assinatura e Registro Eletrônico		

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