PETITION TO THE TOWN COUNCIL

TOWN CLERK'S OFFICE
BRISTOL, RHODE ISLAND
DATE RECEIVED
2026 AUG 31 PM 3:24

To the Honorable Town Council of the Town of Bristol:

The undersigned hereby respectfully request of your Honorable Body that:

Petition Regarding Giuliana Michelutti's Camp Injury and Medical Expenses

Melissa Cordeiro
Council Clerk

I am submitting this petition regard the injury our daughter, Giuliana sustained while attending camp on July 23, 2026, and the medical treatment and expenses that have resulted from that injury.

Giuliana sustained an injury to her hand while at camp on July 23, 2026. Although her grandmother was eventually notified, we were not informed until the end of the day, and neither my husband nor I, as Giuliana's parents, were notified of the injury at all. We did not receive direct notification from the camp regarding what happened or the extent of her injury.

Giuliana was taken to a local urgent care on July 24, 2026, where imaging confirmed that she had sustained fractures to her hand. Because of the injury, she was then evaluated by University Orthopedics on July 28, 2026.

At her University Orthopedics appointment on July 28, Giuliana was placed in a cast. We were informed that the injury was more significant than we initially understood, involving a fracture to the base of her pinky as well as an injury to her ring finger.
She had a follow-up appointment on August 11, 2026 with University Orthopedics, and she continues to require medical care. Her next orthopedic appointment is scheduled for August 28, 2026 and she is also scheduled to begin physical therapy for her hand on August 28, 2026.
Although camp has now ended, Giuliana's injury has continued to affect her well beyond the date of the incident. She has required urgent medical evaluation, orthopedic treatment, casting, follow-up appointments, and will require physical therapy as part of her recovery. These medical needs have also resulted in significant expenses for our family.

(continued on back)

PLEASE NOTE:
Please ensure that your petition is submitted by 4:00 PM two (2) Wednesdays before the Town Council meeting scheduled for 9/16/26
In order to be included on the Town Council docket. According to Council policy, petitions cannot be addressed unless recommendations, if needed from the relevant departments are received before the Council meeting.

SIGNATURE: [signature]

NAME: Christine Michelutti

ADDRESS: 15 Sunnyside Ave

The amount currently due for her medical treatment is $659.15, and additional expenses are anticipated as she continues with orthopedic care and physical therapy.

I understand that children participate in games and physical activities at camp and that accidents can happen. However, I am concerned not only about the circumstances surrounding Giuliana's injury, but also about the lack of direct notification to her parents when the injury occurred. As her parents, we should have been promptly informed that our daughter had sustained an injury significant enough to ultimately require urgent care, orthopedic treatment, a cast, continued follow-up, and physical therapy.

I respectfully request that the circumstances surrounding Giuliana's injury and the camp's response to the incident be reviewed, including:

1) The circumstances and activity during which Giuliana was injured;
2) What first aid or evaluation was provided at camp;
3) When and how the injury was documented;
4) Why her parents were not directly notified of the injury;
5) Why notification to her grandmother did not occur until the end of the day; and
6) Whether the camp followed its policies and procedures regarding parental notification of an injured child.

I am requesting consideration for reimbursement of the medical expenses resulting from Giuliana's injury, including the $659.15 currently due, as well as consideration of additional reasonable medical expenses associated with her ongoing treatment and physical therapy.

My primary concern is Giuliana's health and recovery. This was not simply a minor incident that ended when she left camp. The injury has required continued medical treatment and rehabilitation, and she continues to experience the consequences of what happened on July 23, 2026.

I respectfully request a fair and thorough review of this matter and appropriate consideration of the medical and financial impact this injury has had on Giuliana and our family.

Thank you for your time and consideration.

Sincerely,

Christine Micheletti
Parent/Guardian of Giuliana

Due Now

$308.17 bill for visit on Aug 11, 2026

Giuliana's visit with **SONIA RODRIGUES, PA** and **SONIA RODRIGUES, PA** at **University Orthopedics**

Insurance Coverage

Insurance was applied to this bill on Aug 26, 2026, and all services were eligible under your plan. However, insurance has not paid anything. Learn more.

Reference this bill at our office with claim #4178928

Summary

You owe
$308.17

Original cost	$762.00
Insurance adjustment	-$453.83
Insurance paid	$0.00
You previously paid	$0.00
Amount Due	**$308.17**

3 Services in This Bill

Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. when using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.

Service Code 99213

Insurance applied

Amount Due: **$42.26**

Details

Radiologic examination, hand; minimum of three views, left side

Service Code 73130

Insurance applied

Amount Due: **$46.80**

Details

Application, cast; elbow to finger (short arm), left side

Service Code 29075

Insurance applied

Amount Due: **$219.11**

Due Now

$350.98 bill for visit on Jul 28, 2026

Giuliana's visit with **SONIA RODRIGUES, PA** and **SONIA RODRIGUES, PA** at **University Orthopedics**

Insurance Coverage

Insurance was applied to this bill on Aug 12, 2026, and all services were eligible under your plan. However, insurance has not paid anything. Learn more.

Reference this bill at our office with claim #4157638

Summary

You owe
$350.98

Original cost	$957.00
Insurance adjustment	-$606.02
Insurance paid	$0.00
You previously paid	$0.00
Amount Due	**$350.98**

3 Services in This Bill

Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. when using time for code selection, 45-59 minutes of total time is spent on the date of the encounter.

Service Code 99204

Insurance applied

Amount Due: **$83.78**

Details

Radiologic examination, finger(s), minimum of two views

Service Code 73140

Insurance applied

Amount Due: $48.09

Details

Application, cast; elbow to finger (short arm), left side

Service Code 29075

Insurance applied

Amount Due: $219.11