



NOTICE TO PATIENTS


According to Arizona law, a physician must notify a patient that the physician has a direct financial interest in a separate diagnostic or treatment agency to which the physician is referring the patient and/or in the non- routine goods or services being prescribed by the physician, and whether these are available elsewhere on a competitive basis. A.R.S. §32-1401(27)(ff). Arizona Pain supports this law, because it helps patients make reasoned financial decisions concerning their medical care.

In compliance with the requirements of this law, you are being advised that Physicians of Arizona Pain have a direct financial interest in the diagnostic or treatment agency or in the non-routine goods or services named below. Further, as indicated below, goods or services Arizona Pain has prescribed are available elsewhere on a competitive basis.

DIAGNOSTIC OR TREATMENT AGENCY OR NON-ROUTINE GOODS AND SERVICES:

-  **Arrowhead North Surgical Center LLC**
-  **Hayden Surgical Center LLC**
-  **SanTan Surgery Center LLC**
-  **Uptown Surgery Center**

ARE THESE SERVICES AVAILABLE ELSEWHERE ON A COMPETITIVE BASIS?

 **Yes** _____ **No** **If yes, which ones:**

Interventional Pain Procedures at Honor Health and other accredited facilities

The law provides for the acknowledgement of your having read and understood these disclosures by dating and signing this form in the spaces provided below. We will keep the signed original in your patient file; you are entitled to a copy if you so choose.

ACKNOWLEDGEMENT: I/We have read this “Notice to Patients” form, and I/We understand the disclosures that it contains.

DISCLAIMER: By typing your name below, you are signing this acknowledgement electronically. You agree that your electronic signature is the legal equivalent of your physical signature on this document.

Signature (Patient or if minor Signature of parent or guardian)

Date