

## NOTICE OF NONDISCRIMINATION AND ACCESSIBILITY

UW Medicine Primary Care complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. UW Medicine Primary Care does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. UW Medicine Primary Care:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (a) qualified sign language interpreters; and (b) written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as: (a) qualified interpreters; and (b) information written in other languages.

If you need any of the above services, please ask for the Clinic Manager when you are at the clinic, or contact UW Medicine Primary Care Patient Relations at 206-520-4294 (phone) or uwpc-cares4u@uw.edu (email).

If you are deaf or hard of hearing dial 1-800-833-6384 or 7-1-1 for Telecommunications Relay Services.

If you believe that UW Medicine Primary Care has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: UW Medicine Primary Care Patient Relations, Box 358051, Seattle, WA98195, 206-520-4294 (phone), 206-520-5599 (fax), uwpc-cares4u@uw.edu (email). You can file a grievance in person or by mail, fax, or email.

If you need help filing a grievance, the Patient Relations manager is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

### Getting Help in Other Languages

**Español (Spanish):** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-520-5000 TTY: 7-1-1.

**繁體中文 (Chinese):** 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-877-520-5000 TTY: 7-1-1.

**Tiếng Việt (Vietnamese):** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-877-520-5000 TTY: 7-1-1.

**한국어 (Korean):** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-520-5000 TTY: 7-1-1. 번으로 전화해 주십시오

**Русский (Russian):** ВНИМАНИЕ: Если Вы говорите на русском языке, то Вам доступны бесплатные услуги переводчика. Звоните по телефону 1-877-520-5000 TTY: 7-1-1.

**Tagalog (Filipino):** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-877-520-5000 TTY: 7-1-1.

**Українська (Ukrainian):** УВАГА! Якщо Ви розмовляєте українською мовою, Ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-877-520-5000 TTY: 7-1-1.

**ខ្មែរ (Cambodian):** ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសាដោយមិនគិតល្អល គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 1-877-520-5000 TTY: 7-1-1. ។

**日本語 (Japanese):** 注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。1-877-520-5000 TTY: 7-1-1. まで、お電話にてご連絡ください。

**አማርኛ (Amharic):** ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ 1-877-520-5000 TTY: 7-1-1.

**Oroomiffa (Cushite):** XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-877-520-5000 TTY: 7-1-1.

ملوحظة (ARABIC):

إذا كنت تتحدث اللغة العربية ، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل بالرقم 1-877-520-5000 TTY: 7-1-1. مستشفى هابرفيو او بالمركز الطبي لجامعة واشنطن بالرقم 1-877-520-5000 TTY: 7-1-1.

**ਪੰਜਾਬੀ (Punjabi):** ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-877-520-5000 TTY: 7-1-1.

'ਤੇ ਕਾਲ ਕਰੋ।

**Deutsch (German):** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-877-520-5000 TTY: 7-1-1.

**ພາສາລາວ (Lao):** ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-877-520-5000 TTY: 7-1-1.

