

Park Avenue Orthotics, Inc.

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EQUIPMENT WARRANTY INFORMATION FORM

Every orthotic device dispensed or equipment rented by Park Avenue Orthotics, Inc. carries a one year manufacturer's warranty. Park Avenue Orthotics, Inc. will notify all Medicare beneficiaries of the warranty coverage, and will honor all warranties under applicable law. Park Avenue Orthotics, Inc. will repair or replace free of charge, all Medicare covered orthotics or equipment that is under warranty. If available, an owner's manual with warranty information will be provided to beneficiaries for all durable medical equipment.

I have been instructed and understand the warranty coverage on the product I have received.

Beneficiary Name

Beneficiary Signature

Date

PROTOCOL FOR RESOLVING COMPLAINTS

The patient has the right to freely voice grievances and recommend changes in care or services without fear of reprisal or unreasonable interruption of services. Service, equipment, and billing complaints will be communicated to management and upper management. These complaints will be documented in the Medicare Beneficiaries Complaint Log, and completed forms will include patient's name, address, telephone number, and health insurance claim number. A summary of the complaint, the date it was received, the name of the person receiving the complaint, and a summary of the actions taken to resolve the complaint will also be included.

All complaints will be handled in a professional manner. All logged complaints will be investigated, acted upon, and responded to in writing or by telephone by a manager within a reasonable amount of time after the receipt of the complaint. If there is no satisfactory resolution of the complaint, the next level of management will be notified progressively and up to the president or owner of the company.

The patient will be informed of this complaint resolution protocol at the time of service.