

**Associates In Primary Care, P.C.**  
426 East Freemason Street  
Norfolk, Virginia 23510  
Telephone: (757) 623-6072 Facsimile: (757) 623-9748  
Patient Portal: [myhealthrecord.com](http://myhealthrecord.com)  
Website: [www.associatesinprimarycarepc.com](http://www.associatesinprimarycarepc.com)

## NOTICE OF NON-DISCRIMINATION

**Associates In Primary Care, P.C.** complies with applicable Federal civil rights laws and does not discriminate based on race, color, national origin, ancestry, age, disability, sex (including pregnancy), marital status, gender, sexual orientation, gender identity or religion.

**Associates In Primary Care, P.C.** does not exclude people or treat them differently because of race, color, national origin, ancestry, age, disability, sex (including pregnancy), marital status, gender, sexual orientation, gender identity or religion.

**Associates In Primary Care, P.C.:** Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Over the phone interpreting (OPI)
- On-site interpreting (OSI)
- Video remote interpreting (VRI)
- Document translation/localization
- If you do not speak English, language assistance services, free of charge, are available to you.

If you need these services, contact Lea J. Solinap Laplace, M.D., President, Associates In Primary Care, P.C.

If you believe that Associates In Primary Care, P.C. has failed to provide these services or discriminated in another way on the basis of race, color, national origin, ancestry, age, disability, sex, marital status, gender, sexual orientation, gender identity or religion, you can file a grievance with: Lea J. Solinap Laplace, M.D., President, 426 East Freemason Street, Norfolk, Virginia 23510, telephone number (757) 623-6072, facsimile number (757) 623-9748, email: [lea.laplace@associatesinprimarycarepc.com](mailto:lea.laplace@associatesinprimarycarepc.com). You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, Dr. Lea J. Solinap Laplace 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 <https://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html>, or by mail or phone 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. TTY 1-800-537-7697.

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

**ARABIC:** لك تتوافر اللغوية المساعدة خدمات فإن، اللغة اذكر تتحدث كنت إذا :ملحوظة  
1-757-623-6072 برقم اتصل .جانالم

**ARMENIAN:** ՌԻՃԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել [եզվական աջակցության ծառայություններ: Չանգահարեք 1-757-623-6072:

**CHEROKEE:** Hagsesda: iyuhno hyiwoniha [tsalagi gawonihisdi]. Call 1 – 757-623-6072.

**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 1-757-623-6072。

**FARSI:** گانیرا بصورت یزبان لاتیتسه، دیکن یم گفتگوی فارسی زبان به اگر :توجه  
1-757-623-6072 با .باشد یم فراهم شما یرا

**FRENCH:** ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-757-623-6072.

**GERMAN:** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-757-623-6072.

**HAWAIIAN:** E NĀNĀ MAI: Inā ho'opuka 'oe i ka 'ōlelo [ho'okomo 'ōlelo], loa'a ke kōkua manuahi iā 'oe. E kelepona iā 1-757-623-6072.

**INDONESIAN:** PERHATIAN: Jika Anda berbicara dalam Bahasa Indonesia, layanan bantuan bahasa akan tersedia secara gratis. Hubungi 1-757-623-6072.

**ITALIAN:** ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-757-623-6072.

**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。1-757-623-6072 まで、お電話にてご連絡ください。

**KOREAN:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-757-623-6072 번으로 전화해 주십시오.

**SPANISH:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-757-623-6072.

**TAGALOG:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-757-623-6072.

**VIETNAMESE:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-757-623-6072.