

**GOLF SURGICAL CENTER**  
**PATIENT GRIEVANCE PROCEDURE**

\*\*\*\*\* NOTICE \*\*\*\*\*

IT IS THE FUNDAMENTAL PHILOSOPHY OF GOLF SURGICAL CENTER TO INSURE EVERY PATIENT AND FAMILY MEMBER IS SATISFIED WITH THE CARE AND TREATMENT THEY RECEIVE AT THE CENTER. OCCASIONALLY, DIFFERENCES AND COMPLAINTS WILL OCCUR AND A GRIEVANCE POLICY AND PROCEDURE IS NECESSARY TO ADDRESS THESE SITUATIONS

IF YOU HAVE CONCERNS ABOUT THE CARE BEING PROVIDED AT GOLFSURGICAL CENTER, YOU MAY FILE A COMPLAINT. PLEASE ASK ANY OF THE STAFF TO CONTACT THE APPROPRIATE MANAGER. ALL EFFORTS WILL BE MADE TO RESOLVE THE PROBLEM AT THIS TIME. IF THE PROBLEM CANNOT BE RESOLVED IMMEDIATELY AND FURTHER INVESTIGATION IS NECESSARY, OR THE APPROPRIATE MANAGER IS NOT AVAILABLE, A PATIENT COMPLAINT FORM WILL BE INITATED. THE SITUATION WILL THEN BE INVESTIGATED AND YOU WILL BE CONTACTED BY THE MANAGER WHEN THE INVESTIGATION IS COMPLETE.

THIS PROCESS WILL BE COMPLETED WITHIN 30 DAYS OF RECEIPT OF COMPLAINT.