

**Appendix A to Part 92—Notice Informing Individuals About Nondiscrimination and Accessibility Requirements and Nondiscrimination Statement: Discrimination is Against the Law**

Advanced Imaging Associates, LLC, complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Advanced Imaging Associates, LLC does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Advanced Imaging Associates, LLC

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- 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:

- Qualified interpreters
- Information written in other languages

If you need these services, contact James Revella.

If you believe that Advanced Imaging Associates, LLC 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: James Revella , Administrator, 190 Munsonhurst Rd. Franklin, NJ 07416 , 973-823-8999, [TTY number—845-566-7951, Fax-973-823-8989], email: [jrevella@rapc.net](mailto:jrevella@rapc.net) You can file a

grievance in person or by mail, fax, or email. If you need help filing a grievance, James Revella, Administrator, 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://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, 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, 800-537-7697 (TDD)

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

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of Language Assistance Services**

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-481-3293 (TTY: 1-845-566-7951).

## **Appendix B to Part 92—Tagline Informing Individuals With Limited English**

### **Proficiency of Language Assistance Services**

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں۔ 1-800-481-3293 (TTY: 1-845-566-7951)۔

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PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-481-3293 (TTY: 1-845-566-7951).

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ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-481-3293 (TTY: 1-845-566-7951).

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ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

Звоните 1-800-481-3293 (телетайп: 1-845-566-7951).

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ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-481-3293 (TTY: 1-845-566-7951).



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UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-481-3293 (TTY: 1-845-566-7951).

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주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-481-3293  
(TTY: 1-845-566-7951)번으로 전화해 주십시오.

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ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-481-3293 (TTY: 1-845-566-7951).

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ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-481-3293 (TTY:  
1-845-566-7951) पर कॉल करें।

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સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે.  
ફોન કરો 1-800-481-3293 (TTY: 1-845-566-7951).

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ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.

Appelez le 1-800-481-3293 (ATS : 1-845-566-7951).

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ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-481-3293 (TTY: 1-845-566-7951).

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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 1-800-481-3293（TTY：1-845-566-7951

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ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-481-3293 (رقم

هاتف الصم والبكم: 1-845-566-7951).