



# FUNCTIONAL THERAPEUTICS

## OCCUPATIONAL THERAPY & ELDER CARE

### NOTICE OF CLIENT'S RIGHTS

I, Lynda Letourneau, OTR/L of Functional Therapeutics, recognize that each client is entitled to legal and ethical rights. Also, I adhere to the ethical principles of the North Carolina Board of Occupational Therapy and to the National Certification Board of Occupational Therapy. Accordingly, a summary of your rights as a client is as follows:

1. The right to be treated fairly with consideration and respect for personal dignity, autonomy, and privacy.
2. The right to have your civil rights respected, as stipulated by Federal and State laws, so that you may not be discriminated from services on grounds of your race, color, religion, creed, handicap, ancestry, national origin, age, gender, sex, or sexual orientation.
3. The right to be informed of your own condition, diagnosis, proposed or current services, risks/benefits of treatment, and alternative therapies or treatments.
4. The right to know your treatment plan and the right to participate in designing your own treatment plan.
5. The right to confidentiality between client and healthcare provider, including personally identifying information, within the limits and requirements for disclosure to medical insurance companies, within the limits and requirements of the law, and within the limits of verbal and/or written consents as authorized by you.
6. The right of personal privacy assured by Federal and State Laws, assured and protected within the constraints of the individual treatment plan.
7. The right to know the cost of services or assessments as defined by the insurance company and/or the fees for these services or assessments completed by me.
8. The right to receive an explanation for the denial of services or the discontinuation of services by me.
9. The right to consult with another treatment provider and the right to share information from another provider with me.
10. The right to make your grievances known to me without any reprisals or compromise to the quality of services.
11. The right to consent to or refuse services for yourself.
12. The right to know your rights.

I have read the Notice of Client's Rights and agree to proceed treatment with Lynda Letourneau, OTR/L of Functional Therapeutics.

\_\_\_\_\_  
Client's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client's Name Printed

\_\_\_\_\_  
Lynda Letourneau, OTR/L for  
Functional Therapeutics

\_\_\_\_\_  
Date