



**FLOWER MOUND
FAMILY PHYSICIANS**

DISCLOSURE OF PHYSICIAN OWNERSHIP

NOTICE TO PATIENTS

Please carefully review the information contained in this notice.

1. Dr. Nazia Malick is an owner of Texas Health Presbyterian Hospital Flower Mound.
2. This information is being provided to you to help make an informed decision about your health care. You have the right to choose the provider of your health care services. Therefore, you have the option to use a health care facility other than Texas Health Presbyterian Hospital Flower Mound.
3. You will not be treated differently by your physician if you choose to obtain health care services at a facility other than Texas Health Presbyterian Hospital Flower Mound. If desired, your physician can provide information about alternative providers.

If you have any questions concerning this notice, please feel free to ask your physician or any representative of Texas Health Presbyterian Hospital Flower Mound.

By signing this Disclosure of Physician Ownership, you acknowledge that you have sufficient time to read and consider the information presented in this notice, that you understand this notice, and hereby understand that your physician has an ownership interest in Texas Health Presbyterian Hospital Flower Mound. Lastly, you further acknowledge your signature below evidences your informed decision to decline the option to have your healthcare provided at another health care facility.

Patient Name

_____/_____/_____
Date of Birth

Signature of patient or patient's legal representative

_____/_____/_____
Date

Print Name and relationship to patient