CHARLOTTE SURGERY CENTER

Disclosure Statement

The facility will provide the patient, or as appropriate, the patient’s representative with information concerning its policies on advanced directives, including a description of applicable State health and safety laws and, if requested, official State advanced directive forms. Your signature on the day of your visit will also confirm that you have been made aware of your physician’s approximate 1% ownership interest in the facility and that you have been provided names and addresses of alternate facilities if you wish to use them.

SURGEONS WITH OWNERSHIP INTEREST

ALEXANDER, MD, JAMES R
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CHASNIS, ALEXANDER W
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CONNOR, MD, PATRICK M
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DAVIS, MD, W. HODGES
DELAY, MD, BRIAN S
DOCKERY, MD, MICHAEL L
ELLINGTON, MD, JOHN K
FEHRING, MD, THOMAS
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FUESY, DPM, CHRISTOPHER R
FUTERMAN, DPM, RONALD V
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GAUL, MD, JOHN STUART
GREENMAN, MD, HERBERT E
HARSTON, MD, PHILLIP R
HORD, MD, CHARLES D
HORNER, MD, DONALD S
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