“I speak …”

The person holding this card is limited English proficient (LEP).

By laws, you MUST provide him/her with interpretation/ translation services.

Language assistance must be provided:

1. At all points of contact
2. Without unreasonable delay
3. At no cost to the person

You MAY NOT:

1. Ignore the person’s language needs
2. Ask the person to bring their own interpreter
3. Require the person to pay for interpreter services

Please contact your Language Service Department OR head nurse for an interpreter.

Language Access Laws and Regulations

1. Title VI of Civil Rights Acts of 1964
2. CA Gov’t Code §11135
3. Dymally Alatore Bilingual Services
4. Kopp Act
5. SB 853

DHHS/Office for Civil Rights:
(415)437-8310
415)437-8310

SSG/PALS for Health &
213-553-1818
www.palsforhealth.org

ALAS para tu Salud
213-627-4850 (Español)

Your Health is Precious

Important Reminders:

- √ Request for an interpreter when scheduling your appointment
- √ Make a list of all allergies
- √ Request that your preferred language is noted in your chart
- √ Make a list of medications you are currently taking
- √ Write down all questions for doctors ahead of time
- √ Ask doctors all of the questions that you may have
- √ Request an interpreter for subsequent appointments

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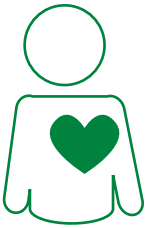

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