

Arbitration Agreement

- a. Any controversy, dispute or disagreement arising out of or relating to my medical treatment shall be settled by arbitration, which shall be conducted in Chester County, Pennsylvania in accordance with the NHLA Alternative Dispute Resolution Services Rules of Procedure for Arbitration. This shall be conclusive and binding on the parties. All costs of arbitration shall be shared equally by the parties, and each party shall be responsible for its own legal expenses incurred.

- b. Any party seeking resolution of such a dispute shall request arbitration not later than twenty-four (24) months from the date he knew or should have known the dispute regarding the event giving rise to the arbitration request was irresolvable through informal means. A failure to act hereunder shall constitute a waiver of any and all rights or claims relating to the dispute.

Signature of Patient _____ **Date** _____

Signature of Witness _____ **Date** _____