HENRY FORD
MACOMB HOSPITAL
WARREN CAMPUS

RELEASE OF HOSPITAL FROM LIABILITY FOR LEAVING THE HOSPITAL AGAINST PHYSICIAN'S ADVICE

Patient _____

Date_____ Time_____ ❑ A.M. ❑ P.M.

I am leaving the hospital agains the medical advice of my attending physician. I have been fully informed and understand the risk(s) involved to be_____

_____

_____

I hereby release my attending physician, the hospital and its employees from any and all responsibility for any ill effects which may be the result(s) of my leaving the hospital against the advice of my physician.

X_____
(Patient)

If patient is unable to sign, or is a minor, complete the following:

Patient is (a minor ____ years of age or is) unable to sign because_____

_____

_____

X_____
(Witness)

_____
(Home Address)

_____
(City) (State) (Zip Code)

X_____
(Nearest relative or legal guardian)

_____
(Home Address)

_____
(City) (State) (Zip Code)

(REVERSE SIDE): Release of Hospital from Liability for Temporary Absence from Hospital with Permission.

HENRY FORD
MACOMB HOSPITAL
WARREN CAMPUS

RELEASE OF HOSPITAL FROM LIABILITY FOR TEMPORARY ABSENCE FROM THE HOSPITAL WITH PERMISSION

Patient _____

Date_____ Time_____ ❑ A.M. ❑ P.M.

Having obtained permission from the attending physician to be absent from the hospital from

_____, _____ ❑ A.M. ❑ P.M. to
(Date) (Time)

_____, _____ ❑ A.M. ❑ P.M.
(Date) (Time)

I assume all responsibility for myself or_____,
(Patient)

who is my _____, during this temporary absence and hereby
(Relationship)

release the hospital, its employees and attending physician from all responsibility during this absence and any condition as a result thereof.

X_____
(Patient)

If patient is unable to sign, or is a minor, complete the following:

Patient is (a minor ____ years of age or is) unable to sign because_____

_____

_____

X_____
(Witness)

_____
(Home Address)

_____
(City) (State) (Zip Code)

X_____
(Nearest relative or legal guardian)

_____
(Home Address)

_____
(City) (State) (Zip Code)

(REVERSE SIDE): Release of Hospital from Liability for Leaving the Hospital Against Physician's Advice.