

Jewelry Removal Waiver:

I hereby acknowledge that refusal to remove jewelry or other extraneous material as directed by my surgical team/ attending practitioner involves an inherent risk of personal injury. Removal of jewelry including body piercing jewelry is for the safety of the patient.

Types of risks/injuries include but may not be limited to:

- Metal jewelry presents a potential risk of burn. Electrosurgical units with ground-referenced generators may ground through the patient's jewelry and cause severe tissue burns.
- Patient jewelry may increase the risk of infection and/or swelling causing tissue damage.
- Jewelry may become tangled in sheets or dislodged causing injury or loss of item.
- The surgeon has the right to remove the item at any time during the surgery if he/she deems it necessary for patient safety or completion of surgery.

I hereby assume all such risk, and I hereby release and agree to hold harmless Pacific Heights Surgery Center from all claims, actions, damages and liabilities for personal injury or damage relating to or arising out of my refusal to remove personal items from my person prior to the procedure except where the injury or damage is caused by the gross negligence of the hospital's employees or agents.

Signature of Patient _____

Witness to Signature only _____

If patient is a minor and/or incapable of signing, state age or reason: _____

Authorization Signature _____

Relationship _____

Witness to Signature only _____

PROPERTY OF MEDBRIDGE.
USED BY PERMISSION ONLY.

3000 California Street, Suite A • San Francisco, California 94115
415-567-1171 • fax 415-567-1181



Patient Name: _____

Case No. _____