

Therapy Dog Program Consent & Release from Liability

I _____ hereby consent to _____
Name of Patient/Substitute Decision Maker *Name of Patient*
participating in the Therapy Dog Program during admission at London Health Sciences Centre.

I understand that the hospital reserves the right to withdraw the privileges of participation in the Therapy Dog Program at any time, at the discretion of the hospital.

I confirm _____ has no known allergies to dogs.
Name of Patient

I have been informed of, and understand, the risks and benefits of the Therapy Dog Program. I feel the benefits of the program outweigh the risks and I hereby consent to the participation of _____ in the Therapy Dog Program.
Name of Patient

I, _____, my family and agents forever releases and
Name of Patient/Substitute Decision Maker
discharges London Health Sciences Centre, its directors, officers, physicians, employees, servants, agents, contractors, administrators, successors and assigns from any and all claims, demands, damages, costs, expenses, actions and causes of actions which now have or may have, howsoever caused, which arise or may arise as a result of participation in Therapy Dog Program.

Date

Signature of Patient (if applicable)

Witness

Signature of Substitute Decision Maker (SDM)

Relationship of SDM to Patient

*DO YOU WISH TO BE WOKEN UP FOR A VISIT? Y / N

Therapy Dog Letter for Patients and Family

Our Unit has a therapy dog. The goal of this therapy is to provide patients with an opportunity to:

- Talk with the volunteer and the therapy dog
- Feel, touch, pet, stroke and/or cuddle the therapy dog
- Receive unconditional love from the therapy dog

Benefits of therapy dogs are to encourage patients to talk more to others, participate in activities, eat and sleep better, and smile more.

Other benefits of the program include:

- Reducing stress levels
- Lowering blood pressure
- Calming the distressed
- Comforting the despondent
- Distracting the pain-ridden

If you have any concerns or questions regarding a dog visiting, please speak with one of our staff. We require a signed consent if you or your loved one would like a therapy dog visit. This consent will be requested of all patients on admission to our unit.

Thank you