Children's Hospital and Health System Administrative Policy and Procedure

SUBJECT: Visitors and Special Guests

<u>PURPOSE</u>: To promote a culture that supports our staff, patients, and families. We act in service of children and families in all we do.

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Definitions:

Adult supportive person refers to an individual specifically identified by a parent or legal guardian as a necessary aide to the parent of legal guardian, or in place of the parent or legal guardian.

Approved Visitor

Visitors that are on a patient's visitor list.

Staff refers to employees, providers, students, interns, volunteers, and people contracted by Children's Wisconsin to perform a service inside one of our locations.

Immediate caregiver refers to parents, grandparents same sex parents, stepparents, foster parents, legal guardians, or other individuals specifically identified by the parent or legal guardian as a primary care giver of the patient.

Sibling A sibling or other household member under the age of 18.

Visitor refers to persons who present at a location for the purpose of seeing a patient, a patient's family, or a staff member. For the purposes of this policy document, "visitor" will refer broadly to all immediate care givers, siblings, visitors and special guests collectively, unless a specific reference to a group is made (e.g. "visitors to patient care staff").

Special guest Public figures, entertainers or other individuals who are invited by Children's Wisconsin to meet with patients. Special Guests can also refer to authorities that may need to be on site during the care of a child. Examples of these special guests are the following: Law Enforcement, Child Protective Services.

POLICY

To provide and maintain a safe environment for patients, staff and visitors while supporting the patient's right to privacy and confidentiality. Children's Wisconsin reserves the right to change/modify procedure.

Visitors should not come to the hospital if they're experiencing any symptoms of illness or are COVID-19 positive or exposed.

See the table below for regular visiting and restricted visiting guidelines.

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	Normal Visiting	Restricted Visiting
COVID-19 positive patients on any unit	 *2 adults (18 and over) on visitor list; names must remain the same for the entire stay. 2 at the bedside at a time 	 2 adults (18 and over) on visitor list; names must remain the same for the entire stay. 2 at the bedside at a time
COVID-19 exposed patients on any unit	 4 adults (18 and over) on visitor list; names must remain the same for the entire stay. 2 at the bedside at a time 	 4 adults (18 and over) on visitor list; names must remain the same for the entire stay. 2 at the bedside at a time
Pediatric Unit	 20 people (of any age) are allowed on a patient's visitor list; names must remain the same for the entire stay. 4 people can be at the bedside at a time. Only parents/guardians and grandparents may visit outside of our 9 a.m. – 9 p.m. visiting hours. Visitors under 18 must be with an adult at all times. 	 6 people on the list 12 years old and up. Names must remain the same for the entire stay. 4 people can be at the bedside at a time. Only parents/guardians and grandparents may visit outside of our 9 a.m. – 9 p.m. visiting hours. * Visitors under 18 must be with an adult at all times.
NICU	6 people in addition to parents and siblings of any age are allowed on a patient's visitor list; names must remain the same	6 people including parents age 18 or over are allowed on a patient's visitor list;

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- for the entire stay. Non sibling visitors must be 18 years old or older.
- 2 people can be at the bedside at a time. (Exception of 4 at bedside if 2 are siblings and 2 adults.).
- Only parents/guardians and grandparents may visit outside of our 9 a.m. – 9 p.m. visiting hours.
- Siblings under 18 must be with an adult at all times.
- Visitor restrictions are subject to change at any time per leadership discretion.

- Names must remain the same for the entire stay.
- 2 people can be at the bedside at a time.
- Only parents/guardians and grandparents may visit outside of our 9 a.m. – 9 p.m. visiting hours.
- Visitor restrictions are subject to change at any time per leadership discretion.

PROCEDURE

Visiting Hours

- General visiting hours are from 9:00 a.m. to 9:00 p.m. Parents/guardians, adult supportive person, and grandparents are able to visit 24 hours daily.
- These hours may change without notice to ensure safety of patients and visitors.
- For NICU, when a baby is admitted, the mother and 1 support person are the only visitors allowed for the first 4 hours. If the mother cannot visit in the first 4 hours, she can designate another support person to visit in her place. Any visitor who is not a parent needs a release of information signed (ROI) to be able to receive information about the patient.

Visitor Badging Process

- All visitors are required to stop at the front door of each unit.
- All visitors should be free of infection. Staff will inform visitors, including parents, not to visit if they have signs/symptoms of illness.

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- All visitors will be issued an identification badge. The badge is to be displayed on the outermost garment at all times while the visitor is in the hospital. Staff observing a visitor without
 a badge is expected to redirect the visitor to the front desk to obtain a badge. All CW inpatient floors, will maintain a supply of badges.
- Front desk staff issuing the badge will obtain the name of the patient that the visitor is here to see. They will then, review the approved visitor list for that visitor's name.
 - o If the **visitor is on the approved list**, the staff member will verify visitor identity with photo ID.
 - o If the **visitor is not on the approved list**, the staff person will reach out to the parent/guardian to see if the visitor can be added to the visitor list.
 - If the parent/guardian cannot be reached, the staff person can contact the nurse to see if they have visitor list information that has not yet been entered. The nurse is not to add to the visitor list without parent approval.
 - o If the patient is listed as "Anonymous" or "Confidential", the visitor MUST offer the password and provide the patient's legal first name, last name without prompting or the staff member must say "I have no information for you on that patient. I suggest you contact the family for more information". See Administrative Policy and Procedure: "Confidential Patient Status" for more details.
- All visitors will be asked to provide picture identification. A note will be placed in the
 exception section of the visitor list if a photo ID is not available. If the visitor does not have
 picture ID, contact social work for assistance.
- Legal guardians (max of 2) will also be issued one of their infant's ID bracelets to replace the need for continually showing a photo ID.
- Badges are to be turned in at the front desk when the visitor is exiting. Once the visitor leaves
 the badge in the dirty bin staff will don gloves with clean hands to clean the badges with oxivir
 wipes. After cleaning the badges, staff will doff gloves and perform hand hygiene.
 - *** If the patient is in isolation, the visitor badge will be disposed of and a new badge will be used each time.
 - Badges are issued for the current date only and must be re-issued daily.

Visitor List

The patient's parent or legal guardian will be asked to create a visitor list of names approved by the parent or legal guardian to visit during each hospitalization.

- The visitor list will be initiated by the Unit staff.
- The visitor list will be maintained on a paper copy at the front desk, as well as entered into the EHR.
- The visitor list will also include any special exceptions or restricted visitor information.
- Information regarding the patient's health status is only given to legal guardians, unless a release of information form has been signed. Being on the visitor list does not take the place of a release of information.
- The visitor list is removed by the unit's Health Unit Coordinator (HUC), upon discharge.
- * Patients who are their own legal guardians (i.e., generally patients 18 years old or older)
 may be the creator of the list. This information should be noted in exceptions on the visitor
 list. See Addendum B for information on what our care teams need to

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- Children's reserves the right to change or revoke the visitor list for reasons which may include:
 - o Aggressive, harassing, or threatening behavior
 - Assault, damage to property, disorderly conduct or other crime.
 - o Court orders, restraining orders or other legal mandates.
 - Use of illegal drugs, alcohol or other substances
 - o Conviction record of sexual assault, child abuse or child neglect
 - o Inability to follow visiting guidelines.
 - o Interference, disruption, or non-compliance with medical care
 - o Outbreaks, epidemics, or other community related issues
 - If a person is disallowed from visiting a patient or being on Children's property, any decision to restore visitation must be jointly determined by the Director of Security and Risk Management or Legal Department, following a "huddle" of relevant people with input for decision making.

Contact Medical Social Work or Security for assistance when a parent/guardian requests that the other parent/guardian be restricted from visiting.

- * Any exceptions must be listed in the visitor list and approved by the Manager on-call (MOC). Exceptions during restricted visiting should be extremely limited. In order to provide the best and safest care, the number of visitors allowed at the bedside at one time are restricted according to the table above. Children's Wisconsin reserves the right to modify this number at any time. The patient's nurse is responsible to manage the number of visitors in the patient room at any time.
 - If the mother and father state they are the parents we assume they both have equal authority over the visitor list. If at any time Children's is presented with information/documentation that tells us otherwise, such information should be reviewed. For questions on the information/documentation, please contact Social Work and/or Risk Management. This information/documentation may impact who can control the visitor list. Generally, parents cannot remove each other from the visitor list.

Siblings

- Before bringing siblings to visit a patient, the parent or legal guardian must get permission from the child's nurse. Exceptions exist for NICU. See unit specific details.
- All siblings must be listed in the visitor list and must stay with their family in the patient room during visits.
- Playrooms are intended for patient use only. Siblings may not go to the playroom but can access activities for play within the patient room with the help of a Child Life Specialist. Child Life Specialists have the discretion to work with siblings who are having a difficult time with their sibling's hospitalization within the playroom, provided the room is not being used by patient(s). The Child Life Specialist will screen such sibling(s) for healthy status and provide one-on-one time for the sibling(s) within this space. Child Life Specialists will collaborate with RN's who request access to the playroom for sibling use.
- When going to the dining areas, lobby, gift shop or any other general areas, siblings must be accompanied by an adult.
- Visiting hours for visitors and siblings are listed as 9:00 a.m. 9:00 p.m. daily. Siblings of

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the patient may not stay overnight with the patient and immediate caregiver. All visitors who are not the immediate caregiver, **including siblings**, must leave at 9:00 p.m. when visiting hours have ended.

While we do our best to identify siblings under the age of 18, we do not universally require
identification upon entry to the hospital. Consequently, there may be siblings under the age
of 18 who are granted the visiting privileges of an adult. When we become aware, sibling
visiting privileges will be enforced.

Overnight Stays on the Pediatric Unit

- Immediate caregivers or adult supportive persons are the only people allowed to stay overnight.
- Siblings and minor children are not allowed to stay overnight.
- A maximum of two people may stay in the patient's room overnight. Due to space constraints, one is recommended.
- Unmarried parents over the age of 18 may be approved after providing proof of age.
- Sexual activity in the hospital is prohibited.
- Mothers under the age of 18 may stay overnight in the patient room alone or with their adult parent/legal guardian.
- If a parent is unable to stay with the patient, the family may identify an adult supportive person over the age of 18 to stay with the child. Nursing staff may require proof of identification to determine the age of the supportive person. The parent or legal guardian, the patient and the Patient Care Director or designee must approve the supportive person chosen.
- When the patient is under the age of 18, Children's will not allow the patient's boyfriend/girlfriend to be the supportive person identified to stay overnight under any circumstance. The supportive person must be listed on the visitor list under exceptions and must be independent in meeting his/herself needs.
- Overnight stays may not interfere with the access to the patient at any time.
- Children's may allow a healthy infant sibling less than 7 months old whose sole nutrition source is breastfeeding to stay in the patient's room with the breastfeeding mom during the hospital stay. Refer to the attached Waiver form (Addendum A) to be signed and completed by the parent to plan for this accommodation. Parents should be reminded that it is their responsibility to provide all care for the infant, as well as provide a safe sleep environment. * In unplanned/urgent/emergent/extenuating circumstances, you may wish to explore the following in determining if exceptions need to be made and how best to serve the patient and family.
 - Best practice is for the infant to return home to limit exposure in the hospital. Does the parent have a suitable, safe, and willing support person to take the infant home?
 - In house leaders or manager on call should be consulted to assist in decision-making on above situations. Social Work can be the partner in decision-making.
- Infants who are 7 months and older who are nursing and not the patient of CW may not stay overnight in the patient room with the mother. The family will need to make arrangements to care for the healthy infant outside of CW. CW staff will support the mother's

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- need to express milk, label, and refrigerate the milk (in family lounge refrigerators or in cold packs in for the visiting infant.) Exception requests are reviewed by the Manager on Call.
- In the event of a deteriorating medical condition, nursing leadership may alter overnight stays to best accommodate the family.
- Shoes, hard-soled slippers, or non-slip socks/booties must be worn by overnight visitors.

Safe Sleep Protocol

- CW does not allow the hospitalized child to sleep with the parent in the parent bed. We
 also do not allow the adult (parent or support person) to sleep in the child's hospital bed.
- See Patient Care Policies and Procedures: "Fall Prevention" and "Infant Safe Sleep CW" for more details.

Infection Control

- For infection control purposes and for purposes of confidentiality, families and visitors are not allowed to enter the rooms of patients other than the patient they came to visit. All visitors must be free of any identifiable communicable diseases. This includes any recent exposure to a known communicable disease to which they are not immune or vaccinated. Staff, generally the patient's nurse, will inform visitors, including parents/caregivers, not to visit if the visitor is ill or is confirmed to have a communicable disease and are in their isolation time. Those with a communicable disease are not allowed to visit until their isolation time is complete, this includes those who are asymptomatic.
- Visitors will be instructed to follow respiratory etiquette guidelines and to perform hand hygiene when entering and leaving patient's room.
- Visitors are screened for illness at the front desk upon check in. Visitors with known exposure to contagious infections other than an exposure to the patient they are visiting should not visit. (For example, if the patient has Influenza and the visitor was exposed to Measles, they should not visit.)
- Isolation technique is to be observed at all times when indicated. Nursing personnel will
 provide visitors with instructions on the appropriate technique. Isolation precautions are
 posted outside each patient room.
 - * AIRBORNE, AIRBORNE CONTACT, AIRBORNE VAR, AIRBORNE VAR
 CONTACT or HEIGHTENED ISOLATION PRECAUTIONS (Examples: Varicella (chicken pox), Measles, Covid-19, Monkeypox):
 - _Visitors are to remain in the patient room and should not enter any public space*
 - Visitors should have a mask on at all times, including while in the room to prevent additional exposure to themselves.
 - When leaving, they should directly exit the building and not stop at any public space*
 - Unit staff should contact Infection Prevention for instructions on when the visitors may go to public areas after the patient's isolation time is complete

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TB/AIRBORNE ISOLATION, TB/AIRBORNE CONTACT, TB/AIRBORNE SPECIAL CONTACT:

- Visitors are to remain in the patient room and should not enter any public space.
- Visitors should have a mask on at all times, including while in the room to prevent additional exposure to themselves.
- When leaving, they should directly exit the building and not stop at any public space.
- Visitors should remain in the patient's room for the duration of their visit until cleared by their local health department.
- Contact the Infection Preventionist on call to verify if the visitor has been cleared by the health department. (This will need to occur during normal business hours so that Infection Prevention can contact the health department.)

MENINGITIS SPECIFIC REQUIREMENTS (SUSPECTED OR CONFRMED)

- Visitors are to remain in the patient room and should not enter any public space.
- Visitors should have a mask on at all times, including while in the room to prevent additional exposure to themselves.
- When leaving, they should directly exit the building and not stop at any public space.
- Once an organism is identified as the cause for meningitis, follow the isolation specific guidance for that organism (Refer to the Infection Prevention and Control Isolation chart)
- Patient's nurse should contact Infection Prevention for instructions on when the visitors may go to public areas after the patient's isolation time is complete* DROPLET, DROPLET/CONTACT PRECAUTIONS (Examples: Influenza, Mumps, Pertussis):
 - Visitors may go to public places while wearing an isolation mask if they remain asymptomatic.
 - Visitors should complete hand hygiene with each entry and exit of patient room.

* Contact Plus, PRECAUTIONS (Examples: C. diff, Norovirus):

- Visitors may go to public places only after completing hand hygiene with soap and water if they remain asymptomatic.
- Visitors should complete hand hygiene with soap and water with each entry and exit of the patient's room.
- Movement to public places may be restricted by Infection Prevention if there is an outbreak.

* DROPLET/SPECIAL CONTACT PRECAUTIONS:

 Visitors may go to public places while wearing an isolation mask and completing hand hygiene with soap and water if they remain asymptomatic.

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- Visitors should complete hand hygiene with soap and water with each entry and exit of the patient's room.
- Movement to public places may be restricted by Infection Prevention if there is an outbreak.

* CONTACT PRECAUTIONS:

- Visitors may go to public places after completing hand hygiene.
- Hand hygiene should be completed with each entry and exit of the patient's room.
- Exceptions may include end of life care/compassion and siblings of patients who are exclusively breastfed. Exceptions need to be approved by the MOC.
- Infection Prevention is on call 24/7. Page or message the Infection Prevention Team if there are further questions regarding isolation concerns.

Prohibited Items

- No live animals (with the exception of the Animal Assisted Therapy Volunteer Program, service animals, or approved pets) may be brought into the hospital for safety and infection control purposes. See The Patient Care Policy and Procedures: "Service Animals; Pet Visitation-Family Pet; Therapy Dogs."
- Latex balloons are not allowed.
- Alcoholic beverages, drugs, medications (other than those prescribed by the visitor's physician), pornography, weapons or explosives will not be allowed in the hospital. Anyone suspected of using or possessing these, or any other inappropriate or illegal item(s) will be asked to leave the hospital. Security must be notified in these situations.
- Telephones and televisions are available to families. Personal audio, video or gaming equipment is allowed, but personal televisions are not. See Safety Policy and Procedure: "Electrical Safety"

NICU Specific

- All visitors must be listed on the visitor list which is managed and edited by NICU staff only.
- No children under the age of 18 are allowed unless they are the siblings of the patient.
 Siblings may be any age.
- Parents/Guardians, adult supportive person, or grandparents may visit at any time, all other visitors will be limited to visiting hours. 9am to 9pm
- Anyone showing signs of illness should not visit the NICU.
- Only 2 visitors (4 if siblings are visiting) will be allowed at a bedside per family.
- All visits by anyone under the age of 18 will be limited to 1 hour per day.
- Adult supervision of children in the lobby is required. Children 12 years or older may be left alone in the lobby as appropriate. Children under the age of 18 may not be the designated supervisor of other children/siblings.
- Sleeping accommodations are not provided in the NICU due to the POD style room configuration. Families may not sleep at the bedside in the POD's. Families can utilize family rooms following unit guidelines.

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Police or Protective Custody Policy

- Visitation may be restricted. See exception notes in the visitor list.
- Hospital staff will not supervise visitation for parents; if supervision is required, Child Welfare must provide and arrange for supervised visits.
- If the patient is in the custody of law enforcement-corrections, then the agency that has custody of that patient can restrict visitation and use of TV, telephone or other electronic devices.
- Security Services must be notified of all patients in protective custody.

End of Life

- A Patient Care Manager or Administrator On-Call must approve lifting visiting restrictions.
- Unit staff must enter "end of life" in the exceptions field of the patient's visitor list.
- End of life means all visitors are allowed at all hours, to the extent visiting does not interfere with patient care.
- Security must be consulted, if there is a Security Risk Assessment for the patient.

Suicide Precaution

- Visitors are not allowed to give any item to a patient on suicide precautions unless the patient sitter, nurse or physician check the item thoroughly to determine it is safe.
- See the Suicide Risk Assessment and Care of the Suicidal or Potentially Suicidal Patient-FV Policy and Procedure.

Former Patients and/or their Parents

- For the safety of our patients, we do not allow visitors to go to patient care areas that are not named on a patient visitor list. For this reason, we:
 - Do not allow former patients and/ or parents to go to patient care areas to visit other patients or their families without contacting the parents and having their name(s) placed on the patient's visitor list.
 - Do not allow former patients and/ or parents to visit staff in any patient care area. Staff may meet their visitors in common areas (lobbies).

Visitors to Patient Care Staff

- For the safety of our patients, we do not allow visitors to go to patient care areas that are not named on a patient visitor list. For this reason, we:
 - o Do not allow visitors to staff to go to any patient care area.
 - Do not allow staff to escort their visitor(s) to any patient care area.
- Staff may meet their visitors in common areas lobbies.
- Staff must have the approval of their supervisor before leaving the patient care area.

Staff Visiting Patients

- Staff who wishes to visit a patient must be listed on the patient's visitor list.
- Staff may only visit during visiting hours.
- Staff may not visit a patient on paid time.

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Donations, Gifts, Donated Food

 See Administrative Policy and Procedure: "Gifts / Donations of Toys, Clothing, Books – Screening and Distribution."

Observers/Job Shadow

* See Administrative Policy and Procedure: "Observers – Job Shadows."

Special Guests

- In most cases, we do not allow groups to distribute gifts or visit directly with patients. Any exceptions must be approved by the Patient Care Director.
- All visits must be arranged ahead of time with the Public Relations Department.
- Any special guests who arrive at the hospital without prior approval will be asked to leave and given information about how to schedule a future visit.
- The CW Foundation, Administration or Marketing and Communications may arrange for a group of special guests to visit a patient care area. All such events are generally prearranged.
- Special guests are restricted to public figures and groups (no larger than five people) whom children will recognize and like to meet, such as professional athletes and national entertainers.
- Performers must be professional entertainers with experience performing for children. Child life staff screens anyone interested in performing for patients. Interested individuals should be directed to the Volunteer Coordinator.
- In order to protect the privacy of our patients, bedside visits are limited and written permission from the child's legal guardian must be provided ahead of time.
- Photos of patients may not be taken without the written consent of the patient's legal guardian. A staff member will ask legal guardians to sign a consent form for media or visitors to photograph or videotape.
- Entertainers or other special guests who wish to invite the media must work with Marketing and Communications at least one week prior to the proposed visit.
- A hospital representative must accompany special guests at all times.
- We recommend special guests visit on regular business days (Monday through Friday) between 10 a.m. and 4 p.m., when most children are awake, and staff is available to help. Visits must not interfere with the medical needs of the child.
- Due to infection control concerns, special guests under the age of 16 cannot have any direct contact with patients.
- All special guests must be badged and screened for illness.
- All special guests must wash hands upon entering or exiting a patient room.

Media

 Media personnel are <u>never</u> allowed without prior approval from Marketing and Communications (MarCom)

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- If MarCom has not notified us of the visit, contact MarCom to confirm. Contact Security if needed.
- Any questions after-hours can be directed to the on-call PR staff.

Photography

 See Administrative Policy and Procedure: "Privacy - Photographing - Videotaping and Other Imaging of Patients and or Caregivers"

Conference Attendee

- Conferences should be pre-arranged with a leader and a Security leader.
- All attendees must be badged with CW Visitor badges or pre-approved CW conference badges.
- For larger conferences, conference planners are asked to provide additional staffing.

Vendors

- Vendors must use computer in ThedaCare Regional Medical Center's (TCN's) main lobby to log their arrival and print a vendor badge, even if they are simply here for a meeting.
- See Administrative Policy and Procedure: "Vendor Representatives"

Tours

- In order to protect the privacy and health of our patients, we do not allow individuals or groups to tour our facility without the expressed permission of hospital administration or foundation.
- Staff is not allowed to invite individuals or groups for tours without permission.

Approved by:

Scott Turner

COO, Children's Hospital of WI

EVP, Children's Hospital and Health System

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Addendum A



Release of Liability for Extended Visitation of Breastfeeding Infant Sibling

WAIVER

Children's Hospital of Wisconsin (CHW) may allow a healthy infant sibling who is breastfeeding to stay in the patient's room with the mom during the stay. Based on patient care needs, we may not be able to accommodate healthy siblings to stay the night. This will be a conversation with the patient's health care team. Please know that depending on care needed, this decision may change throughout the course of the stay.

I understand and agree to the following:

- · Infant is the sibling of the patient.
- · Infant is healthy and does not have a fever.
- · Infant is under 7 months of age.
- · Infant has all immunizations up-to-date.
- Breastfeeding mom is sole/only source of nutrition for the fant.
- Family will provide sleep environment in the form of a Pack and Pack and follow all safe sleep guidelines as outlined in the safe sleep teaching sheet. No co-seeping will be allowed in the hospital.
- . CHW makes no arrangement for expressed break nilk containment for a non-patient.
- Infant is primarily restricted to patient room and parel analysis be present to supervise visiting infant, even if infant is sleeping.
- . CHW is not responsible for care of the infar
- . Family must provide all personal care it ms to the infant (diapers, wipes, clothing, etc.).
- . Failure to comply with an of the above vill result in loss of this privilege.

In consideration for bringing my healthy infant to stay in the hospital, I hereby release from any and all liability, extend absolute immunity to, and age is not to sue Children's Hospital of Wisconsin, Inc. and any related entity thereof and/or its authorized employees, office is, agents, volunteers, directors, and/or representatives from/for any and all claims, damages, liabilities, a sits and/or expenses which might occur related to injury, death or property damage resulting from my healthy infant staying in the hospital.

I understant this are release applies to myself and my personal representatives, heirs and assigns. I also waive the oht I have be bargain for different release of liability terms. I have read this waiver and understand the terms used in its not their lightful frame.

This waiver is freely and voluntarily given with the understanding that I am giving up my right to legal recourse against Children's Hospital of Wisconsin. My signature on this document is intended to bind myself and/or my legal representative.

Parent/Legal Guardian:	Print Name	
Parent/Legal Guardian Signature:		Date:
Witness of Parent/Legal Guardian Signature:		Date:

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When completed, scan into electronic medical record.

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