

Approval for animal visitation within the hospital

- ___ Patient has an established relationship with the animal being brought in.
- ___ Written documentation of current vaccinations is provided.
- ___ Animal has been bathed within the past 24 hours.
- ___ Handler agrees to have the animal caged or on a short leash and stay in attendance at all time.
- ___ Handler is aware that they may be asked to leave with the animal at any time and agrees.
- ___ Handler is aware that the animal is prohibited in the following areas:
 - Cafeteria
 - Food preparation area
 - Clean/Sterile supply storage
 - Operating room, labor/delivery room
 - Recovery room

Permission has been given to _____ to bring the following animal
(Print Name)

into the hospital for the sole purpose of visiting _____
(Print Patient's Name)

Type of animal _____

Relationship to patient _____

Permission given by _____

INFECTION CONTROL MANAGER or ADMINISTRATOR DATE _____