



NORTHERN MICHIGAN

PERSONAL PROPERTY POLICY

NOTICE: THIS POLICY STATEMENT WAIVES MCLAREN NORTHERN BHU'S LIABILITY PERTAINING TO PERSONAL PROPERTY. MCLAREN BAY REGION REQUESTS YOU SEND YOUR PERSONAL PROPERTY HOME.

MCLAREN NORTHERN BHU DOES NOT ASSUME RESPONSIBILITY OR LIABILITY FOR THE PERSONAL PROPERTY OF OUR PATIENTS OR VISITORS.

Personal Property includes, but is not limited to, the following:

- Cash, including traveler's checks or credit cards
• Clothing
• Personal medical equipment, wheelchairs, crutches, braces, splints, walking casts, canes
• Jewelry, including wedding bands, watches, necklaces, bracelets or earrings
• Razors or Shavers
• Cell phones, iPods, laptop computers or electronic chargers

McLaren Northern BHU has procedures in place to protect a patient's personal belongings that would be required during their hospital stay, such as:

- Eyeglasses, contact lenses, or other eyewear
• Dentures, dental bridges, partial plates, or other dental materials

If you need assistance with eyewear or dental appliance, please ask your nurse or other care giver.

When situations make it impossible for you to send your personal property home, McLaren Northern BHU can assist in securing your property:

- 1) Valuables such as cash or jewelry may be secured in the facility safe. Security can provide a "Personal Property Valuables Envelope" to deposit your valuables in the facility safe. These envelopes are available to the patient, and/or a patient representative upon request. A receipt will be issued and McLaren Northern BHU will only surrender the contents of the envelope to the individual who presents the receipt.
2) Personal medical equipment may be tagged with an armband that contains patient identification information. Patients and/or patient representatives may request assistance from the staff on the nursing unit in obtaining an armband with the patient information for these items.

If you choose to keep your valuables or personal items with you, you will be accepting full responsibility for their loss, whether by theft, fire or otherwise, and for their replacement if necessary. Such items may become lost due to room transfers, linen changes, or when a patient takes an item out of the room during surgery, physical therapy or other testing.

McLaren Northern BHU encourages you to send valuables home. If you are unable to send valuables home, you may place your money or other valuables in our safe. Please contact security for assistance. If you require your valuables from the safe during your stay, the secure valuables envelope will be brought to your room by Security. If you choose to keep your money or valuables with you, and find them missing, McLaren Northern BHU is not liable for this loss.

For safety and comfort reasons, no personally owned televisions, radios, stereos or CD players. Laptop computers are permitted but the patient accepts full responsibility for use and storage. You may rent a television through Nursing Service. Equipment not in compliance with the various safety rules will be removed from the patient care area.

- Please -
- Firearms and/or other weapons are not allowed.
  - Personal effects are subject to inspection by our staff.
  - NO DRUGS OR ALCOHOL.

If there is a medication your physician would like you to take that is not available from the hospital, the physician may write an order for you to bring in the medication from home to be administered here.

I, or my designee, have received a copy of the above policy and agree to abide by the above policy.

I, or my designee, understand that if I choose not to place my personal property or money in McLaren Northern BHU's safe, and if I find my personal property or money missing or damaged, I, or my designee, hereby waive my rights, privileges, claims, causes or action or demands arising out of any and all losses and I agree to hold McLaren Northern BHU, its employees and its agents, harmless for said losses or damages.

PERSONAL PROPERTY LEFT UNCLAIMED WILL BE EITHER DONATED TO CHARITY OR DISPOSED OF AFTER 30 DAYS.

Table with 2 columns: Signature, Date Signed. Rows for Patient, Patient Representative, and Witness.

ADDRESSOGRAPH



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