

Farmington Chiropractic

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COVID-19 Liability Release Waiver

Due to the 2019-2020 outbreak of the novel Coronavirus (COVID-19), Farmington Chiropractic is taking extra precautions with the care of our patients and staff to include health history review and enhanced sanitation/disinfecting procedures in compliance with CDC guidance.

Symptoms of COVID-19 include:

Fever, Fatigue, Dry Cough, Difficulty Breathing

I agree to the following:

- I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days.
- I affirm that I, as well as all household members, have not been diagnosed with COVID-19 within the past 30 days.
- I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the past 30 days.
- I affirm that I, as well as all household members, have not traveled outside of the country or to any city considered to be a "hot spot" for COVID-19 infections within the past 30-days.

I understand that Farmington Chiropractic cannot be held liable for any exposure to the COVID-19 virus caused by misinformation on this form or the health history provided by each patient.

Our business is following these enhanced procedures to prevent the spread of COVID-19:

- Masks are required to enter the office
- Only scheduled patients allowed in the office
- Physical distancing in the waiting area
- Enhanced cleaning schedule of touchable surfaces
- Front desk staff physically distanced with protective lexan glass
- Exam table disinfected and new face paper between patients
- Doctors disinfect hands and wipe down touchable surfaces between patients
- Doctors will wear gloves and mask upon request

I understand that due to the nature of chiropractic care, close proximity between doctor and patient is necessary. Farmington Chiropractic recommends patients wear masks while in office, however will not refuse care to those patients un-masked. By signing below, I agree to each statement above, assume the risks involved and release Farmington Chiropractic from any and all liability for unintentional exposure or harm due to COVID-19.

Patient Printed Name: _____

_____ Date