



Surgical Center

Release of Liability As To Driving Of Motor Vehicle

The undersigned, _____ is a patient at the Urology Specialists Ambulatory Surgical Center; a South Dakota limited Liability Corporation. The undersigned is being discharged from Urology Specialists Ambulatory Surgical Center. The undersigned has been advised that the undersigned should not drive a motor vehicle upon discharge. It is the desire of undersigned to drive a motor vehicle contrary to the advice of the attending physician, _____ and the Urology Specialists Ambulatory Surgical Center.

The undersigned acknowledges that he/she has been full informed of the risks, to him/herself and to others involved in operating a motor vehicle after surgery. These risks may include, but not limited to, traffic violations, motor vehicle accident or fatality involving the patient, any passengers, other motorists or pedestrians; damage to vehicles or property.

The undersigned hereby releases the attending physician and the Urology Specialists Ambulatory Surgical Center, all of its partners, agents, and employees from any and all claims, damages, liabilities, judgments, costs, and expenses; including attorney's fees, arising from operating of a motor vehicle by the undersigned upon discharge.

In addition, the undersigned agrees to indemnify and hold harmless, without payment being made, the attending physician and Urology Specialists Ambulatory Surgical Center, its partners, agents, and employees from all claims, demands, liabilities, judgments, costs, and expenses; including attorney's fees, arising from the undersigned decision to operate a motor vehicle upon discharge.

Patient: _____ Patient's Representative: _____

Witness: _____ Relationship to Patient: _____

Date: _____ Time: _____