

- | University of Kentucky A.B. Chandler Hospital
- | UK HealthCare Good Samaritan Hospital
- | UK HealthCare Ambulatory Services
- | UK Dental and Oral Health Clinics

UK Pediatric Therapies at Child Development Center of the Bluegrass

EXPECTATIONS AND FAMILY RIGHTS

UK Pediatric Therapies at Child Development Center of the Bluegrass is located inside an operating childcare facility (Child Development Center of the Bluegrass). The following expectations have been established to help ensure the safety and wellbeing of all children receiving services at or visiting this facility:

1. A parent or guardian must stay on premises during the therapy session. If you are going to be outside during the treatment session, please let your child's therapist know.
2. Families may observe therapy sessions in the observation room or with a therapist in the therapy areas.
3. Siblings must remain with parents during treatment sessions. Please be mindful that other children / families are engaged in treatment during these times.
4. Food and beverages must be kept in the lobby. The only exception is when a child is engaged in therapeutic activities involving food.
5. Be mindful of others in treatment and please silence your cell phones.
6. Therapy equipment is only to be used in conjunction with a therapist during a therapy session.
7. If a child receiving therapy services exhibits extremely aggressive behavior, that could endanger themselves or others, University of Kentucky Pediatric Therapies at Child Development Center of the Bluegrass may suspend services.
8. Families are expected to demonstrate appropriate behavior while on campus and when communicating with UK Pediatric Therapies staff. Unprofessional behavior will not be tolerated (i.e., vulgar language, aggressive tone, loud volume of voice or electronic devices).
9. In the event of inclement weather please follow University of Kentucky for delays and closing. Please tune into LEX-18 or WKYT-27 for up-to-date information.
10. In an effort to keep all families as healthy as possible, we ask you to please keep your child home if they exhibit any of the following:
 - More than one episode of diarrhea that is not associated with a change in diet
 - One episode of vomiting
 - Abdominal pain of more than a 2 hour duration
 - Fever above 101 Fahrenheit
 - Mouth sores with drooling
 - Pink or red conjunctiva (pink eye)
 - Unexplained rash
 - Severe sore throat
 - Chickenpox
 - Head lice or nits

I have read the above Expectations and Family Rights. By signing below I agree to abide by these statements and understand that any violation could result in a suspension of service.

Child's Name: _____

Parent / Guardian Name: _____

Parent/Guardian Signature: _____ Date / Time: _____