

## HOME PATIENT TRAVEL ACKNOWLEDGEMENT

I acknowledge that I assume full responsibility for ensuring that when I travel, I will take with me all required dialysis products not provided by Baxter, such as ancillary products and non-Baxter products, as such will not be supplied by Baxter.

I fully acknowledge that Baxter is not responsible for any costs or fees if my travel plans are canceled or delayed for any reason (including without limitation government-imposed travel restrictions). For further clarity, in the event my travel is canceled or delayed, I recognize that I will not be entitled to any refund or reimbursement from Baxter.

I further acknowledge that:

- I may not receive treatment "free of charge" from dialysis clinics or hospital institutions when traveling abroad, and that I will be fully responsible for any fees associated with such visits.
- 2. I am responsible to purchase transformers or power adapters for my destinations. These are not provided by Baxter and are therefore my responsibility.
- 3. I am fully responsible for any Shipping and Handling fees associated with the coordination of my supplies to my travel destination.
- 4. I am fully responsible for any additional costs incurred, such as custom clearance fees, payment of any local duties or taxes on PD fluids and consumables, storage fees, returns and proper disposal of excess product. These fees are not Baxter associated; and are solely the responsibility of the patient travelling. Baxter is unable to advise on what these costs may be, however patients must be prepared to pay these fees as required on site.
- 5. I should take with me an appropriate quantity of dialysis solutions and supplies for the length of my trip in the event of a delay in the delivery or a delivery interruption for such Baxter-supplied products.
- 6. I have made my Dialysis Unit aware of my request to travel Internationally and I have discussed my travel plans with my Physician and/or nurse.

Destination:	
Travel Dates:	
Patient Name (please print):	
Patient Signature:	
Date:	

Please email completed acknowledgement form to:

Global\_Destinations@baxter.com