

NAME'S MEDICAL NEEDS

NAME

NAME was diagnosed with:

NAME

CONDITION(S) AND TIME/CIRCUMSTANCE OF DIAGNOSIS (e.g., at birth, after a car accident, when s/he was 10 years old).

These conditions cause _____
(DESCRIBE SIGNS AND SYMPTOMS)

NAME takes the following medications:

NAME

	Medication Name & Brief Description <small>(e.g., yellow capsule, liquid in green bottle)</small>	Dose / Route	Next Dose Due
1			
	Special Instructions:		
2			
	Special Instructions:		
3			
	Special Instructions:		
4			
	Special Instructions:		
5			
	Special Instructions:		

	Medical Supplies	Location
1		
	Special Instructions:	
2		
	Special Instructions:	
3		
	Special Instructions:	

We also support _____ with _____
NAME (DESCRIBE TREATMENTS/THERAPIES)

_____. We hope you can help with those that we've underlined.



'S MEDICAL NEEDS

NAME _____

(CONTINUED)

SCARY, SERIOUS, AND EMERGENCY SITUATIONS

Sometimes, _____ can cause other symptoms. You might not experience these, but we'd like you to be prepared.
NAME'S CONDITION

SCARY BUT NOT DANGEROUS

The following situations might be scary for you, but they are generally not dangerous (describe situations such as common seizures, etc. If you have a video of a seizure, note here where the video is kept):

HERE'S HOW TO HELP:

SERIOUS SITUATIONS

These situations are problematic (e.g., seizures lasting more than X minutes):

HERE'S HOW TO HELP:

In addition, please contact me and the following for further instructions:

	Contact Name & Title <small>(e.g., the primary care doctor, the specialist, etc)</small>	Phone Number
1		
2		
3		
4		

THE FOLLOWING CONSTITUTE EMERGENCIES!

TAKE THESE STEPS:

AND CALL 9-1-1!

Then, please contact me & the following for further instructions:

	Contact Name & Title <small>(e.g., the primary care doctor, the specialist, etc)</small>	Phone Number
1		
2		
3		
4		

An emergency information/medical summary form can be found on pages 25-27;
it provides information for EMS and emergency care providers—
detach this page and give to these providers.