Introduction

There are many ways to let folks know about the medicines you take, persons to be contacted in the event of an emergency, who your doctor is, what health and dental insurance you carry, and a host of other related topics. Every time you see a new doctor, or one you've not visited for some time, the receptionist will ask what medicines you are using. Some wallets have a little form where you can enter some of this information. A number of years ago I developed an EMERGENCY DATA FORM for presentation at Backpacking Seminars and made it available in hard copy and electronic form. I keep a copy of my form in: each daypack; my backpack; my bicycle bag; the truck glove compartment; and on our refrigerator. This may be excessive. But, to me, the more chances folks have of finding one in an emergency, the better chance I have.

In this Education Handout are some ideas you might use when developing your own EMERGENCY DATA FORM.   You can take ideas from the club EMERGENCY DATA FORM, modifying them to suit your needs. If you don't like the form, you can type or write out your own form. All the club is doing is giving you, the outdoor enthusiast, some ideas that 'may' prove useful. How you use or distribute the EMERGENCY DATA FORM is strictly up to you.

Down below is a sample EMERGENCY DATA FORM. The width is designed so that, when folded, the form will fit in most wallet photograph holders. I suggest highlighting the top row to make it more visible. Keeping it near your drivers license might be a good idea. When folks search for that they may see your EMERGENCY DATA FORM.

Protection

Since your EMERGENCY DATA FORM contains much personal information, it **must be protected** as well as you protect your purse, your wallet, your bank and credit cards, and your drivers license.

Important Reminders

● On the second line of the form, make sure you fill in the location where you keep the form on your computer. That way, when you need to update the form with a new medicine next year, you can find it.
● Also on the second line, always insert a new date when you update the form. That way, when you replace copies, or your doctor replaces a copy, the new edition can readily be recognized.

Emergency Data Form

● Click on the link below to download a hard copy blank EMERGENCY DATA FORM, like the sample shown below.

Link one

● Click on the link below to download an electronic version of the EMERGENCY DATA FORM in WORD 2003 format.

NOTE: Form cells on the electronic version are not locked. You may add/delete cells/rows as desired. Also, cells will expand as desired.

Link two

Another Option

Another option is to wear an wrist, shoe or ankle form of identification/emergency data. You might want to look at ROAD ID ORIGINAL and ROAD ID INTERACTIVE, and other such items found at www.roadid.com. These were initially developed by the biking community, but are useful for **all** outdoor enthusiasts.

Sample Form: To download a hard copy or an electronic copy use the links listed above.

EMERGENCY DATA FORM

Last Update:	File Name-Location:

Name:
Date of Birth:
Mailing Address:
Drivers License:
Military Service Branch:
  Service Number:

Telephone – Work ( ) -	Telephone - Home ( ) -
Blood Type :	
Last Tetanus Shot:	

Allergies	
Medical Conditions	
Religion	
Medi- cations	Name, dosage, time, and amount taken

Primary Care Physician: Name	Day ( ) - Night ( ) -
Medical Insurance: and group, member, account, or other identifying number/s	Tel: ( ) -
Supplemental Insurance:and group, member, account, or other identifying number/s	Tel: ( )
Prescriptions: and group, member, account, or other identifying number/s	Tel: ( ) -
Dental Insurance: and group, member, account, or other identifying number/s	Tel: ( ) -
Emergency Point of Contact: Relationship:	Name: Address: WP: ( ) - HP: ( ) -
Alternate Emergency Point of Contact: Relationship:	Name: Address: WP: ( ) - HP: ( ) -

Living Will on file at:	Name-address-telno
Health Care Proxy on file at:	Name-address-telno