



Emergency Medical Information Card

An emergency medical information card communicates to rescuers what they need to know about you if they find you unconscious or incoherent, or, if they need to quickly help evacuate you. An emergency medical information card should contain information about medications, equipment you use, allergies and sensitivities, communication difficulties you may have, preferred treatment and treatment-medical providers, and important contact people.

<p><u>Emergency Medical Information Card</u></p>	<p style="text-align: center;">Patient Info</p> <p><u>Name:</u> <u>Address:</u></p> <p><u>Phone Number:</u> <u>Birth Date:</u> <u>Primary Contact:</u></p> <p><u>Primary Contact Number:</u></p> <p><u>Physician:</u> <u>Phys. Number:</u></p>	<p style="text-align: center;">Allergies & Medical Conditions</p> <p><u>Allergies & Reactions:</u></p> <p><u>Medical Conditions:</u></p> <p><u>Past surgeries/major medical procedures:</u></p>																												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Medications</th> <th style="width: 25%;">When Taken</th> <th style="width: 25%;">Dose</th> <th style="width: 25%;">Reason(s) for Taking</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>		Medications	When Taken	Dose	Reason(s) for Taking																									<p style="text-align: center;">Additional Info</p> <p><u>I am a CMU _____ and I work with:</u></p> <p><u>Please test for related diseases/conditions, such as:</u></p> <p><u>Continued on back →</u></p>
Medications	When Taken	Dose	Reason(s) for Taking																											

Instructions for completing:

In each of the appropriate sections, fill out the following on the computer or neatly with a blue/black ink pen.

1. Patient Information

- a. Fill out your full name (first and surname), street/mailling address, phone number, and birthdate (mm/dd/yyyy).
- b. Include the name and relation of your first/primary emergency contact and the phone number they can most easily be reached at (ex: Jane Doe (mother), cell phone number (123-456-7890)).
- c. Fill in the name and phone number of your primary care physician.

2. Allergies & Medical Conditions

- a. Allergies and Reactions: List any allergies and possible reactions. Examples- Latex (skin rash), cat dander (hives, trouble breathing), peanuts (anaphylaxis)
- b. Preexisting Medical Conditions: List any preexisting health conditions. Examples- Type II diabetes, asthma, high cholesterol, stroke
- c. Past surgeries or major medical procedures: List any major surgeries or medical procedures and the year in which they occurred. Examples- Valve replacement (2010), appendectomy (2000), hip replacement (2009)

3. Medications

- a. In the table, list the medications you take, how frequently you take them and at what time of day (ex: once a day, at night), the dosage in milligram (mg) amounts (amount per dose should be given on the package), and why you have to take this medication. Example below:

Medications	When Taken	Dose	Reason(s) for Taking
Benadryl	As needed, at night	2 x 25 mg tablets (50 mg total)	Congestion due to allergies

4. Additional Info

- a. Fill in the blank with your job title and list all of the top hazards you are exposed to in your job (Ex- I am a CMU researcher and I work with: Mammalian cells and HIV-1 lentivirus). If there are specific associated diseases or conditions with these hazards, record what they are.
- b. Use the back of the card to continue your list of hazards and associated conditions or to provide additional helpful medical information to emergency responders.

MAKE SURE TO KEEP YOUR CARD UP-TO-DATE! It is imperative that emergency responders have current and accurate information, in order to provide you with the best possible care.

Safety concern, training request, or other inquiry?
Reach out to the Environmental Health and Safety Department today!
safety@andrew.cmu.edu
412-268-8182