



FILE of LIFE EMERGENCY Medical Information



Name _____

In an EMERGENCY DIAL 911

Number
Emergency
of E

My
**Medical
Info**



Yellow Dot Medical Information
INFORMATION CURRENT
for more on StoreSMART.com/Life

Why do it?

Medical personnel can make the best decisions regarding emergency treatment when they know a person's medical conditions, medications or medical allergies. This information is critical between life and death.

1. Photograph

Place a clear photograph of yourself or your participant into the pocket on the back of the form so personnel can instantly identify you or your participant.

2. Medical Form

Fill out this medical form. Keep all your information up to date.

3. Refrigerator or Glove Box

Place the completed form in the pocket. **Vial of Life:** Place the pocket on your fridge. **Yellow Dot:** Place the pocket in your vehicle's glove box.



To download this form, visit StoreSMART.com/Life for more information and to contact StoreSMART.

CONDITIONS: Check all that exist

ALL CONDITIONS KNOWN

- Allergies
- Anemia
- Asthma
- Blood Pressure
- Diabetes
- Epilepsy
- Eye Problems
- Fainting
- Heart Disease
- High Blood Pressure
- HIV/AIDS
- Hypertension
- Kidney Problems
- Liver Problems
- Lung Problems
- Mental Health
- Multiple Sclerosis
- Neck Pain
- Osteoporosis
- Parkinson's
- Rheumatoid Arthritis
- Seizures
- Stroke
- Tuberculosis
- Ulcers
- Varicose Veins
- Vertigo
- Wound Healing

Other: _____

CONDITIONS & ALLERGIES

- Contact Lenses
- Fragrance
- Latex
- Aspirin
- Caffeine
- Codeine
- Environmental
- Penicillin
- Pseudoephedrine
- Shellfish
- Soy
- Sulfa
- Tetracycline
- Wheat
- Yeast



EMERGENCY Medical Information

Name _____

In an EMERGENCY DIAL 911

1. Name and Phone Number
2. Address of the Emergency
3. Describe the type of Emergency
4. Stay on the phone until dispatcher hangs up
5. Have someone wait outside to direct help

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My
Medical Info
is on:

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