## **Family Emergency Health Information Sheet**

During a flu pandemic or other health emergency, you may be required to provide specific health information about yourself and others in your care to those offering health care services. This information is essential to health care providers when considering how best to treat you and your family. Using the chart below, fill in as much information as possible for each family member.

	Member 1	Member 2	Member 3	Member 4	Member 5	Member 6
Name						
- Charles						
Date of Birth						
Provincial Health Card Number						
Blood Type						
Allergies						
<b>Existing Medical Conditions</b>						
<b>Medications (include dosage)</b>						
Name and Contact Information for Current Health Care Provider(s)						
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## **List of contacts**

## **Emergency contact**

In the event you or your family members become ill, you may wish to have a relative or friend notified of the situation. They may be able to offer additional information to the health care providers treating you or may be able to help with your care.

Name:		Name:				
Telephone Number:		Telephone Number				
Relationship to you (or your family):		Relationship to you (or your family):				
Hospitals						
Name of Hospital:		Name of Hospital:				
Telephone Number:		Telephone Number:				
Pharmacy		Public Health Hotline				
Name of Pharmacy:		Telephone Number:				
Telephone Number:						
If you and/or a family member are ill, you may need others to notify your place of work or any schools your children attend. In addition, during a pandemic, you may need to check periodically to determine if these facilities have closed their operations.						
Work	Schools					
Name of Contact:	Name of School:		Name of School:			
Telephone Number:	Telephone Number:		Telephone Number:			