

## Senior Citizen Emergency Medical ID Kit



Dear Senior Citizen,

The Momence Police Department is, as always, interested in your safety first. If a medical emergency occurs in your home, seconds may be precious! This Emergency Medical ID Kit is intended to provide Emergency Responders with the information they need to quickly treat a patient at the scene and transport the patient to the hospital for treatment. There should be one completed ID Kit for every potential patient in the home. Once fully completed, attach the ID Kit to your refrigerator where emergency responders can easily locate it. Store all your medications in one location and note that location on this form. Keep this form up to date by printing needed copies from <a href="http://police.cityofmomence.com">http://police.cityofmomence.com</a>

Last Name	First	Middle	Doctor			Phone #
Address			Doctor			Phone #
City	State	Zip Code	<b>Emergency Contact</b>			Phone #
Phone	ss#	Gender M/F	Emergency Cont	act		Phone #
Age	Birth Date	Blood Type	DNR? Yes / No	Living Will? Yes / No		Health Records At:
Any Allergies to N	Medications, Foods, or stings	s?	Current Medicat	tion	Dosage	Frequency
Any Recent or Pa	st Surgeries?	Month and Year?				
Medical Condition	ns (Post and Present?)					
2.)	nny Name		Where ca	nn medications	s be found?	

1.) Fill out form completely and keep updated.

2.) Affix to your refrigerator in plain view.