

COMMONS EMERGENCY PROTOCOL

Thank you for answering these questions and giving information that will be extremely valuable to those seeking to be helpful in the unlikely chance that you should incur some misfortune and not be able to communicate.

Name Unit # ... Telephone Cell Date

Who to notify in case of an emergency. Add more than two if you wish.

1) Name Phones
Address Relationship

2) Name Phones
Address Relationship

Primary physician name Phones

Dentist name Phones

Other health care providers important to you:

Title.....Name..... Phones

Title.....Name..... Phones

Allergies:

Blood Type:

Medical conditions:

Prescriptions:

Health Insurance company and policy number:

Do you have a **will**? Its location?

Do you have a **living will**? Its location?

Who in the Commons has a **key** to your house?