University of Kentucky College of Agriculture, Food and Environment Cooperative Extension Service

ADULT

HEALTH BULLETIN



JANUARY 2023

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THIS MONTH'S TOPIC:

EMERGENCY HEALTH INFORMATION (EHI) CARDS

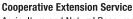


LEXINGTON, KY 40546

n Emergency Health Information (EHI) card can be a helpful tool. If you are in an emergency in which you cannot communicate with first responders, an EHI card can help. It will tell medical providers important information about how to help you. While you cannot predict when an emergency may happen, you can be prepared. Make sure that key health information is up to date, correct, and handy. If you have children, make them a card too. You may not be available to tell emergency workers about your child, and your child might not be able to communicate either.

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An EHI card gives first responders or other emergency workers essential health information they can use to give you better care.

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You can find Emergency Health Information card templates online to print and fill out. You also can use an index card or other small piece of paper. Please keep in mind, not all card templates ask for appropriate information. Below is a list of information that you should and should NOT include on your EHI card.

Information you should include on an EHI card:

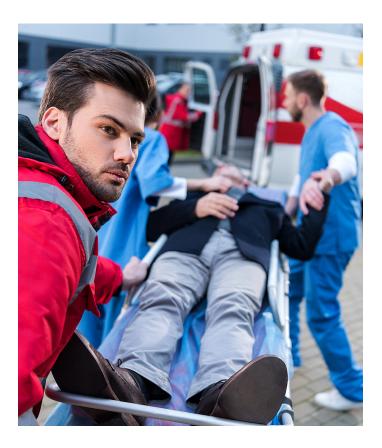
- Full legal name
- Date of birth
- Medication names, doses, and schedules
- Medical equipment (Insulin pump, wheelchair, oxygen, etc.)
- Chronic medical conditions (epilepsy, diabetes, COPD, heart conditions, etc.)
- Disabilities that affect care (mobility, speech, memory loss, vision, hearing, etc.)
- Blood type
- Allergies to food or medications
- Recent immunization record
- Emergency contact name and phone number
- Medical contacts (doctors and pharmacy)

It is important to note that EHI cards are about the health and medical treatment of a person, not payment information. First responders and hospital staff do not need, nor can they require, financial information to treat you in an emergency. To protect yourself from identity theft, keep certain information separate from an EHI card.

Information you should <u>NOT</u> include on an EHI card:

- Financial or banking information
- Social Security Number
- Health insurance information such as insurance provider or ID number

The purpose of an EHI card is to give first responders or other emergency workers essential health information they can use to give you



better care. Make this information easy to find. Put copies of your and your children's EHI cards in easy to see places in your home, car, and personal belongings that you carry every day.

Where to put copies of an EHI card:

- Purse, wallet, or backpack
- First aid kits and emergency supply kits
- On your refrigerator or kitchen cabinet door
- Vehicle glove box
- On the side of children's car seats
- On mobility devices such as wheelchair or walker

REFERENCE:

https://www.mayoclinic.org/first-aid/emergency-health-information/basics/art-20134333

ADULT
HEALTH BULLETIN

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Stock images:
123RF.com

OTHER IMPORTANT INFORMATION	MOST RECENT IMMUNIZATIONS	① DOCTORS	LE L
Include information such as other relevant health history, surgeries, devices,	Pneumonia:	Name:	
DNR location, etc.	Tetanus:	Phone:	
	Hepatitis:	Name:	Emergency Health
	Flu:	Phone:	intormation Card
	Other:		+ PERSONAL INFO
	Other:	Name:	Name:
	⊕ BLOOD TYPE:	Phone:	Phone:
		+ PHARMACIES	Address:
	ALLERGIES	Name:	
		Phone:	─── EMERGENCY CONTACT
		Name:	
		Phone:	
OTHER IMPORTANT INFORMATION Include information such as other relevant	⊕ MOST RECENT IMMUNIZATIONS	⊕ DOCTORS	LEHA KEHA
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	Hepatitis:	Name:	Emergency Health
	Flu:	Phone:	Intormation Card
	Other:		PERSONAL INFO
	Other:	Name:	Name:
	⊕ BLOOD TYPE:	Phone:	 Phone:
	ALLERGIES	PHARMACIES	Address:
	ALLENGIES	Name:	
		Phone:	─── EMERGENCY CONTACT
		Name:	
		Phone:	Phone:

Emergency Health Information Card

MEDICATIONS I SHOULD INCLUDE. Prescription medications, over-the-counter medications, vitamins or herbal remedies, respiratory medications (inhalers, etc.), and blood factors.

(+) KEEP THIS FORM UP TO DATE. Write down all changes made to your medicines; cross out any medicines that are no longer valid.

Start date	Drug name and strength	Dose (pills, units, puffs, drops)	When do you take it? (times a day, AM or PM, after meals)	Purpose Why do you take it?

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Information to include on an EHI card



Information NOT to include on an EHI card





ACTIVITY

T Chart Answer Key



Information to include:

- Full legal name
- Medications you take regularly
- Date of birth
- Emergency contact information
- Allergies to foods or drugs
- Chronic medical conditions



Information NOT to include:

- Social Security number
- Bank account information
- Health insurance provider
- Health insurance policy numbers

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ACTIVITY

T Chart Cards

Full legal name

Chronic medical conditions

Medications you take regularly

Social Security number

Date of birth

Bank account information

Emergency contact information

Health insurance provider

Allergies to foods or drugs

Health insurance policy numbers

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