



## PERSONAL EMERGENCY PROFILE



DATE: \_\_\_\_\_



NAME: \_\_\_\_\_



AGE: \_\_\_\_\_



ADDRESS: \_\_\_\_\_



PHYSICAL DESCRIPTION: \_\_\_\_\_

## PLACE PHOTO HERE



## EMERGENCY CONTACT(S) IF LOST, I MAY BE FOUND AT: \_\_\_\_\_

(Likely places to go)

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_



## RESTRICTIONS: (Allergies and diet)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## SIGNS OF ESCALATION: (Do's and don'ts)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## MEDICAL NEEDS:

DIAGNOSIS: \_\_\_\_\_

MEDICATION/DOSES: \_\_\_\_\_

HEALTH CONCERNS: \_\_\_\_\_



## LIKES: (Attractions, favorite things, hobbies interests, foods, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## DISLIKES: (Triggers, sensitivities, fears, things to avoid.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**COMMUNICATION:** (Does the individual speak in full sentences, phrases, has some words, is non verbal, uses pictures, uses a device, uses sign language.)

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Place familiar pictures/icons below if they help the individual to communicate. In an emergency situation these can be used by pointing.


