

# Care Partner Emergency Plan

It's important to prepare for the time that you may need to rely on others to care for your loved one. Here are some suggestions for what to include in your emergency notebook/folder. You may keep the information current on your computer or in your smart phone, but it is recommended that you have information in a notebook or folder that is easily accessible to your back-up care partners and emergency personnel.

Discuss your emergency arrangements with your support team (family and/or close friends) and ensure that they know where all important information is located. NOTE: Your emergency notebook will contain sensitive information – be sure to share it only with trusted individuals.

## PERSONAL INFORMATION about CARE RECIPIENT

Full Legal Name  
Photo ID  
Date of Birth  
Address  
Medical Conditions  
Dementia/Cognitive Issues  
Mental Health Concerns  
Allergies  
Safety concerns

## CURRENT MEDICATION LIST

*(dosages, instructions)*  
Prescriptions  
Vitamins and Herbals  
Over-the-Counter  
(keep 30-90-day supply)

## ASSISTANCE DEVICES

Wheelchair  
Walker, Cane  
Hearing Aids, Glasses  
Medic Alert Co. & ID #  
*other*

## EMERGENCY CONTACTS

*(Name, phone(s), address)*

Primary caregiver  
Back-up caregivers  
Family members  
Close friends and neighbors  
*other*

## MEDICAL PROVIDERS

*(Name, phone(s), address)*

Primary Care Physician  
Other medical specialists  
Pharmacy (local & online)  
Local Hospital(s)  
Urgent Care  
Home Health Care Agency  
Personal Care Agency

## DAILY ROUTINE and PREFERENCES

Meals/Favorite foods  
Sleep habits  
Bathing and hygiene  
Medication schedule  
Activities, exercise  
Spiritual/religion  
TV, music  
Pets

## INSURANCE INFORMATION

*(photocopy of cards - front & back)*

Medicare Number  
Medicare Advantage Plan or Supplement  
Prescription Drug Plan  
Long-term Care policy  
*other*

## ACCESS TO FINANCIAL INFORMATION

Bank Accounts  
Credit and Debit Cards  
Medi-Cal/Medicaid  
VA Benefits  
Social Security  
(protect number)

## LEGAL DOCUMENTS

Advance Directive  
POLST or DNR  
Power(s) of Attorney  
HIPAA Authorization  
Will  
*other*