

Further Key Details

Previous key address(es)

Details of previous address(es)

Employment details / Previous employment

Detail name and address of present or previous employer

Places of interest

Detail any places of interest that you visit often or have visited in the past

Habits / Hobbies

Detail any habits and / or hobbies that you regularly enjoy

Pets

Do you have any pets at home, and if so, what kind?

Mobile phone

Do you have a mobile phone? If YES, please enter the number



Please remember to ...

1. Ensure the form is completed, dated and signed.
2. A separate form must be completed for each person in the household who lives with an illness or allergy; ask for extra forms when you receive your pack.
3. Place the bottle in your fridge, **in a door compartment**, where it will be safe and quickly found.
4. Place the green cross sticker on the outside of the fridge door.
5. Stick the other label on the **inside of your front door** at eye level and in line with your door lock if possible.
6. Ensure that your current prescription is with your medication.
7. Keep medication in a box.

Are there any other details that may be required by the emergency services?

- Special instructions concerning your medication
- Special medical aids
- Communication difficulties
- Religion
- Hearing or visual problems

If you have a personal information folder, it contains important information that will help Emergency Services/Hospital staff. Please list it here and where it is kept:

Emergency Treatment & Escalation Plan

Advanced Care and Treatment Plan

☐

HAP Care Plan
(Health Action Plan)

☐

Where is it located?

The Herbert Protocol

☐

Do Not Resuscitate Info

☐

This form was
completed by

Relationship (if not
completed by you)

All the information is correct to the best of my knowledge and I accept that it is my responsibility to ensure that ALL the information on this form is kept up to date.

Signed

Print
Name

Date



Lions Message in a Bottle

The bottle found in the fridge

We Serve – We Care.

Sponsored by your local Lions Club

This is a voluntary scheme for anyone living at home, who might be reassured to know that essential information would be readily available to the Emergency Services, not only to identify you, but to advise on relevant illnesses, allergies, medication and contact addresses, should you suffer an accident or sudden illness.

When time is saved, lives are saved

When Emergency Services see medical information and personal details of a patient, they can then render safer and speedier First Aid by short cutting time-consuming fact-finding enquiries about the patient.

What do you have to do?

Complete the form overleaf in ballpoint pen using BLOCK CAPITALS. Date and sign the form before placing it in the bottle.

A separate form must be filled in for each person in the household who has an illness or allergy; ask for extra forms when you receive your pack.

Supported by

Ambulance, Police, Fire & Rescue Services, Emergency Doctors, NHS Primary Care Trusts.

Disclaimer Lions Clubs International MD105 do not accept any responsibility for the details inserted on this form or for any additional paperwork included in the bottle.

