

MEDICAL INFORMATION

Having important medical information for household members and pets is critical in case you need to leave your house after a disaster.

PHYSICIAN:

Name: _____

Phone number: _____

PHARMACY:

Name: _____

Phone number: _____

HEALTH INSURANCE:

Provider: _____ Group Number: _____ ID Number: _____

CLOSEST FACILITY WITH GENERATOR IF POWER FOR MEDICAL EQUIPMENT IS REQUIRED: _____

MEDICATIONS:

- 1 _____ (PERSON NAME) _____ (NAME OF MEDICATION) _____ (DOSAGE)
- 2 _____ (PERSON NAME) _____ (NAME OF MEDICATION) _____ (DOSAGE)
- 3 _____ (PERSON NAME) _____ (NAME OF MEDICATION) _____ (DOSAGE)
- 4 _____ (PERSON NAME) _____ (NAME OF MEDICATION) _____ (DOSAGE)

PET INFORMATION:

- Pet Name: _____ Breed: _____ Approx. Age: _____
- Pet Name: _____ Breed: _____ Approx. Age: _____
- 1 _____ (PET NAME) _____ (NAME OF MEDICATION) _____ (DOSAGE)
 - 2 _____ (PET NAME) _____ (NAME OF MEDICATION) _____ (DOSAGE)



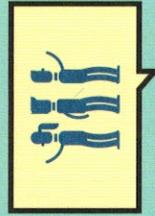
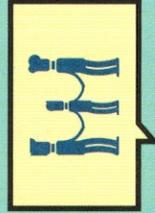
Seattle
Office of Emergency
Management

BE PREPARED

Gather Your Emergency Information

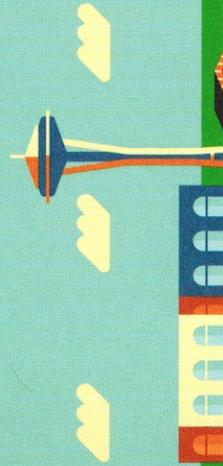
IMPORTANT PHONE NUMBERS

This might seem unnecessary — but how many phone numbers do you actually have memorized?



FRIENDS, IMMEDIATE FAMILY MEMBERS AND OUT-OF-AREA CONTACTS:

- 1 _____ (NAME) _____ (PHONE)
- 2 _____ (NAME) _____ (PHONE)
- 3 _____ (NAME) _____ (PHONE)
- 4 _____ (NAME) _____ (PHONE)



PUBLIC SAFETY LOCATIONS

Whether you need help during a disaster or not, knowing who provides your home with safety services is important



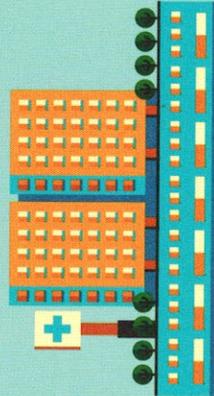
FIRE STATION

Address: _____

Phone number: _____

Total miles to station: _____

Potential route hazards: _____



MEDICAL FACILITY

Address: _____

Phone number: _____

Total miles to station: _____

Potential route hazards: _____

Public safety locations can be a centralized location for information and support for your community



POLICE STATION

Address: _____

Phone number: _____

Total miles to station: _____

Potential route hazards: _____



COMMUNITY GATHERING POINT

Address: _____

Phone number: _____

Total miles to station: _____

Potential route hazards: _____

ALTERNATIVE ROUTES TO WORK

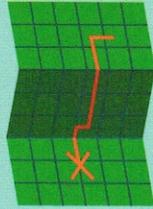
To help find routes and methods home, the following resources may help:



CURRENT ROUTE HOME: _____

Total miles: _____

Potential hazards for route: _____



ALTERNATIVE ROUTE #1: _____

Total miles: _____

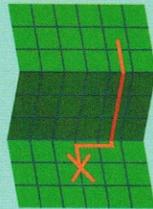
Potential hazards for route: _____



CARPPOOL OPTIONS

1. _____

2. _____



ALTERNATIVE ROUTE #2: _____

Total miles: _____

Potential hazards for route: _____



VIAIBLE PUBLIC TRANSPORTATION OPTIONS

1. _____

2. _____

3. _____