



Emergency information

This resource may be completed in part or full and is intended for use by the person it relates to as a means of reassurance for the walker and communication with fellow walkers and/or the emergency services in an emergency where they are unable to communicate their needs.

This information belongs to

In the event of an emergency, I would like a fellow walker to contact my next of kin/ICE contact to calmly inform them that the emergency services have attended to help me and that I have been taken to hospital.

Circle as appropriate: **Yes** **No**

Next of kin name

Next of kin contact number

Next of kin relationship to walker

To support the emergency service in identifying me

Date of birth

GP surgery registered at

GP surgery address

To inform the emergency service providing treatment

Allergies	Medical conditions	Current medication

In the event medical treatment is needed urgently the table above is helpful to identify new or exacerbated injuries from what is normal for the patient and inform appropriate treatment to avoid allergic reactions and medication interactions.