Your Name

A snapshot of my medical conditions and care needs.

DOB: xx/xx/xxxx

NHS Number: xxx-xxx-xxxx

*Some things you could include are:*

* *How you can support me to move.*
* *How I prefer to wash and use the toilet.*
* *How to communicate with me.*
* *Who I would like with me.*

*A few examples:*

*I have a team of personal assistants/ a support team at home and would prefer that they could support my personal care whilst I’m in hospital.*

*I need to use a hoist to move from my bed to my wheelchair.*

*I am deaf and need a BSL interpreter to support me to communicate. I would prefer this to be a family member or friend. I can also lip-read.*

*Please make sure my wheelchair is always at the left-hand side of my bed. This enables me to transfer independently and use the bathroom on my own.*

*I have a learning disability and I need some extra time to have things explained. When telling me medical information I would like my carer to be present, either in-person or over the phone.*

**My care needs and preferences:**

*Some things to include are:*

*The name of your conditions and how they affect you.*

*A description of your mobility and movement.*

*What to do in common medical scenarios you may face.*

*A few examples:*

*I have been a type 1 diabetic since 2006 and use a CCG monitor and insulin pump.*

*I have Cerebral Palsy which affects my mobility. I can walk short distances with support but normally use a powered wheelchair to move around.*

*I have Mast Cell Activation Syndrome and am prone to allergic reactions, which can become anaphylactic. If this happens, I carry an epi-pen with me. My common triggers are cleaning products, pollen, and nuts.*

**My medical conditions and how they affect me:**

*List the details of your next of kin, or anyone you wish to be informed if you are in hospital*

*For example:*

*My Next of Kin is my wife, Jane King. Her number is: 07763728192
I give my permission to share any medical information with her, and for her to speak on my behalf if I am unable to speak for myself.*

**My Important Contacts**

*List details of your GP and any other doctors/professionals who are important in your care.*

*For example:*

***GP- Dr Jones***

*Lodge Park Surgery, New Town, SY7 7ED*

*01783 555432*

***Dietician – Julie Hobbs***

*Crowner Hospital, 01783 720387*

**My Medical Team**

*List your regular medications, the dosage you take and how often you take them.*

*For example:*

*Sertraline (50mg x once daily)*

*Montelukast (4mg chewable x once daily)*

*Domperidone (10mg x thrice daily)*

*Salbutamol Inhaler (When needed)*

*A list of diagnoses when you were diagnosed and any relevant medical procedures you’ve had.*

*For example:*

*Multiple Sclerosis (Diagnosed April 2011)*

*Depression (Diagnosed July 2020)*

*Full knee replacement (September 2017)*

*Ileostomy (January 2001)*

**Diagnoses and medical history**

**Medications**

***Cardiologist- Dr Palmer***

*Crowner Hospital, 01783 627192*

***Social Worker – Dave Miller***

*Newborne Council, dave@newbornecouncil.gov.uk*

***Rheumatologist – Prof. Halden***

*Bridgehill Hospital, 08329 782917*

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