



Northland Regional Ambulance District 1000 Platte Falls Road Platte City, MO 64079 www.nrad-ems.org

PLEASE KEEP THIS FORM UP TO DATE

Name:	Date of form completion:
Address:	Phone:
DNR $\Box$ No $\Box$ Yes – Where is it?	Date of Birth:
Emergency Contact: (name and phone)	Second Emergency Contact: (name and phone)
Social Security #:	Medicare #:
Other Medical Insurance:	
Doctor:	Other doctors:
Hospital choice:	2 <sup>nd</sup> Hospital choice:

Prescription Medicines:	Medical Conditions:
□ None	□ None
□ Include additional info if needed	
Allergies:	Anything else we need to know in an emergency:
□ None	□ None
□ Include additional info if needed	

# FILE OF [IFE For Emergencies Dial 9-1-1

# **KNOW THE SIGNS**

### Signs of a Stroke

-Confusion and/or Dizziness -Numbness and/or Paralysis -Drooping Eye and/or Mouth

## Signs of a Heart Attack

- Shortness of Breath
- Sweating, Nausea or Vomiting

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1000 Platte Falls Road Platte City, MO 64089 (816) 858-4450 www.nrad-ems.org

#### -Chest Pain -Radiating Pain in Shoulders, Neck Jaw or Arms

# Hands-Only CPR



Tap or gently shake victim. Ask the victim loudly -"Are you OK?"



Have someone call 9-1-1, or call 9-1-1 yourself.



Initiate hands-only CPR. Push hard and fast in the center of the chest -**COMPRESS** at least 100 times a minute!



NRAD'S ADDRESS SIGN PROGRAM **COULD BE A REAL LIFE-SAVER.** Readily-visible addresses are critical when every second counts. Call our office or visit our website today to learn how you can make certain first responders can find you or your loved one quickly.

For additional forms or information on our Educational programs call (816) 858-4450 or visit us on the web at *www.nrad-ems.org*