

Telephone Numbers & Information

Emergency Medical Service (EMS): _____

Campus Security: _____

Fire: _____ Police: _____

Poison Control Center: 800.222.1222

Local Poison Control Center: _____

National Suicide Prevention Lifeline: 800.273.8255

Community Urgent Care Center: _____ Campus Urgent Care: _____

Student Health Services: _____ After Hours Number: _____

Student Counseling/Mental Health Services: _____

Personal Physician: _____

Nearest Hospital: _____ Pharmacy: _____

Health Insurance Information

Company & Telephone Number: _____

Address: _____

Policyholder's Name & Policy Number: _____

What to Tell Your Doctor or Provider

Use this summary when you call or visit a doctor or provider. (Make copies as needed.)

Symptoms

- Pain (location and severity)
- Nausea/vomiting
- Skin problems (location and description)
- Eye, ear, nose, throat problems
- Fever/chills
- Breathing problems
- Stomach problems
- Anxiety, depression
- Duration of symptoms
- Constant or intermittent
- Things that make symptoms better or worse

Other problems: _____

Specific questions I have now: _____

What I need to do: _____

Medications

Prescribed and over-the-counter medications I take:

Name / Dose: _____

Name / Dose: _____

Name / Dose: _____

Name / Dose: _____

Herbs and supplements I take:

Name / Dose: _____

Name / Dose: _____

Name / Dose: _____

Name / Dose: _____

Medications I'm allergic to:

Name / Dose: _____

Name / Dose: _____

Name / Dose: _____

Name / Dose: _____