

Personal Information Sheets

If you are concerned that an emergency regarding your child's mental health is possible, it is better to be prepared. That way, if you find yourself and your child in a mental health emergency, you will be empowered to respond.

We recommend you fill out the information in these Personal Information Sheets, print them, and save them in a convenient place. That way, if you have an emergency and go to a hospital, you can share this helpful information with emergency officials.

Crisis/Emergency Services

Medical Information		
Family Doctor		
Psychiatrist		
Psychologist		
Pediatrician		_
Other		
Other		_
Other		





Individual Information Sheet

Personal Information	
Person's Name	Date Completed
Address	
Phone	Health Card Number
Able to provide consent Yes No Unknown Guardian Name(s)	Sub-Decision Maker Yes No Phone
Psychiatric Information	
Case Manager Name	Phone
Agency	
Primary Contact	Phone
Psychiatrist Name	Phone
Agency	
Psychiatric Diagnosis	
Medical Information	
Family Doctor Name	Phone
Address	
Medical Diagnosis	
Other Relevant Medical Information	





Individual Information Sheet

Medications				
Pharmacy		Phone		
Medication Name	Dosage	Time	Prescribing Doctor	Target Symptoms
Other Relevant Medication Information (eg. allergies)				





Individual Information Sheet

Behaviour Information

Please include	relevant	behaviour	information,	including	pertinent	safety	cautions,
necessary for	providing	appropria	te care to thi	s person.			

necessary for providing appropriate care to this person.				
Important Safety Information				
Behaviour Triggers				
Behaviour Strategies				
	Current and Effective Strategies			
Behaviours	Intervention	Expected Outcome		
Known Ineffective Strategies				
Behaviours	Intervention	Expected Outcome		



