Serving the community 24 hours a day, 365 days a year

CHEVRA HATZOLAH חברה הצלה

VOLUNTEER EMS OF MIDDLESEX COUNTY

P.O. Box 778, Edison, NJ, 08818 Office Phone: 732-993-8645 Fax: 732-626-6532

Visit us online at http://www.HatzolahMC.org

MEDICAL HISTORY AND PATIENT INFORMATION FORM

Legal First Name: _____ Last Name: _____

Date of Birth: _____/_____/_____ Current Age: _____ Days Months Years

Sex: Male Female Weight (lbs): _____ SS#: _____ - _____ - _____

Primary Language(s) Spoken: English Hebrew Yiddish Other: _____

Emergency Contact Name: _____ Number: _____

Relationship to Patient: Son Daughter Parent Spouse Other _____

Primary Care Physician Name: _____ Number: _____

Hospital of Choice: _____

Surgical History: _____

_____

Medical History: _____

_____

_____

Medications: _____

_____

_____

Allergies: _____

EMERGENCY NUMBER: 732-456-6666