

Personal Emergency Contacts

Name/Phone Number

Local personal emergency contact _____

Out-of-town emergency contact _____

Hospitals near work _____

school _____

home _____

Family physician(s) _____

State Public Health Department (see list on www.pandemicflu.gov)

Pharmacy _____

Employer contact and emergency information _____

School contact and emergency information _____

Religious affiliation _____

Veterinarian _____

Other _____
