

# Special Needs Emergency Information Form

Please complete the following form and give to your local 911 call center, local police and fire departments and rescue squads. (NOTE: The form can be completed on-screen but cannot be saved to your computer, as it is a PDF document. Please complete the form and print it. Be sure to print a copy for your personal records.) This information can be added to most 911 emergency response systems and can be programmed to appear on a computer screen when an emergency call is made from your home. The information will alert emergency responders, prior to their arrival, to the possibility of a unique situation at your home, involving a person with special needs.

1. Be sure to attach a photo of the adult or child with special needs to the form. Update this photo routinely.
2. Give as many details as possible regarding characteristics and behaviors that may attract attention or may be misunderstood. For example: if the person repeats everything that is said, flaps their hands, won't look at the person talking to them, etc. Give details as to the likes and dislikes of the person with the special needs.
3. Give as specific information as possible for sensory, medical or dietary issues. For example: the flashing lights or loud sirens on emergency vehicles upset the person; the person does not feel pain – even when they are obviously in pain, the person feels pain when lightly touched, etc.
4. Attach the following information to the form before giving it to your local 911 call center/local police/fire departments:
  - A. Map and addresses of nearby properties with water sources and/or dangerous features. Highlight the locations.
  - B. Blueprint or drawing of home with bedroom of the individual with special needs highlighted.
5. Attach a list of precautionary security measures that are in place at the person's residence. For example, if the windows are nailed shut or have bars on them, or if they are made of Plexiglass or Lexan; if there are locks on all doors – including interior doors; if there is a locked gate around the property, etc. These are important details for emergency responders to know ahead of time, so that they are prepared to handle the special safety measures when they arrive on-scene.

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Operation Lifesaver ID #:

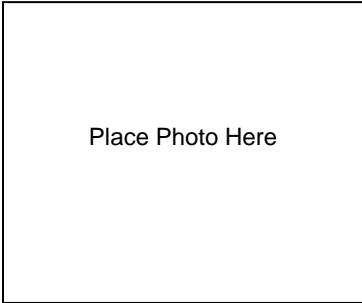
<b>Address:</b>	
<b>Name:</b>	
<b>Nickname:</b>	
Home Phone Number:	
Work Phone Number:	

**Physical Description  
of Person**

Age:	
Height:	
Weight:	
Eye Color:	
Hair Color:	
Additional:	

**Method of Communication**

Verbal:	<input type="checkbox"/>
Non Verbal:	<input type="checkbox"/> Sign Language
	<input type="checkbox"/> Picture Board
	<input type="checkbox"/> Written Word
Other:	



**Additional Emergency Contact Information:**

Name of Parent or Guardian:	
Address:	
Home Phone:	
Work Phone:	
Cell Phone:	

Additional Contact:	
Address:	
Home Phone:	
Work Phone:	
Cell Phone:	

**Describe any unique or special behaviors / characteristics for this individual**

**Describe best approach technique for responders to use with this individual**

**Describe any Sensory, Medical or Dietary issues for this individual**

**ID Wear: jewelry, tags, name on clothes, tattoos, etc.**

**List favorite places where this individual might be found**