LIFE FILE

Menomonee Falls Fire Department
Mobile Integrated Health Division
W140 N7501 Lilly Road
Menomonee Falls, WI 53051-3140
(262) 532-8848 Fax (262) 532-8829

PARTICIPANT INFORMATION

Name: _____ Gender: _____ DOB: _____
Address: _____ Apt: _____
City: _____ State: _____ Zip: _____
Phone: _____

EMERGENCY CONTACTS

First Contact: _____
Phone: _____ Relationship: _____

Second Contact: _____
Phone: _____ Relationship: _____

PATIENT HISTORY

- ☐ Anxiety
- ☐ Arthritis
- ☐ Asthma
- ☐ Cancer:
- ☐ Cardiac History:
  - ☐ Arrhythmia
  - ☐ Heart Attack/MI
  - ☐ Heart Failure (CHF)
  - ☐ Implanted Defibrillator
  - ☐ Pacemaker
  - ☐ Surgery:
- ☐ Chronic Kidney Disease
  - ☐ Dialysis:
- ☐ COPD
- ☐ Dementia/Alzheimer's
- ☐ Depression
- ☐ Diabetes
- ☐ GERD
- ☐ Hearing Impairment
- ☐ Hypertension
- ☐ Hypotension
- ☐ Hyperthyroidism
- ☐ Hypothyroidism
- ☐ Liver Failure
- ☐ Seizures
- ☐ Sickle Cell Anemia
- ☐ Stroke
- ☐ TIA
- ☐ Visually Impaired
- ☐ Other:
  - ☐ _____
  - ☐ _____
  - ☐ _____

CURRENT MEDICATIONS

Medication	Reason	Dosage	Frequency	Date prescribed

ADDITIONAL INFORMATION

Physician(s):_____
Allergies: _____
Surgeries: _____

ADVANCED DIRECTIVES

Hospital Preference: _____
Power of Attorney: _____
Do Not Resuscitate (DNR): _____