

Contacts & Care Team

Version date: _____

Who to call for the person I support. Fill in by hand, keep it near the phone or in the binder, and update it whenever someone changes.

Name of the person I support: _____

Home address: _____

Main caregiver & phone: _____

Preferred hospital: _____

In an emergency, call 911 first. Then call the contacts below.

FAMILY & EMERGENCY CONTACTS *(in the order to call)*

#	Name	Relationship	Phone	Best time to call	Has a house key?
1					
2					
3					
4					
5					
6					

CARE TEAM

Role	Name or practice	Phone	Notes (after-hours line, portal, fax)
Primary care doctor			
Specialist:			
Specialist:			
Specialist:			
Dentist			
Eye doctor			
Therapist or counselor			
Other:			

PHARMACY

Pharmacy	Name and location	Phone	Hours or delivery
Main pharmacy			
Mail-order or other			

Free to print and share. From Lighthouse by Dragonfly, an iPhone app for organizing care information, medications, and appointments. lighthousebydragonfly.com

Private information. Store securely. Do not write Social Security, Medicare, insurance member, or bank account numbers on this sheet.



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AGENCIES & SERVICES

Service	Agency and contact person	Phone	Days, hours, or notes
Home care or aide			
Home health (nurse, therapy)			
Hospice or palliative care			
Adult day program			
Meals or delivery			
Transportation			
Medical equipment supplier			
Case manager or social worker			
Other:			

INSURANCE & BENEFITS PHONE LINES *(phone numbers only, no member or account numbers)*

Plan or program	Name	Phone	Notes
Health insurance			
Prescription plan			
Other:			

NEIGHBORS & HELPERS NEARBY

Name & phone: _____

Name & phone: _____

Faith community or group: _____

WHO CAN SPEAK WITH DOCTORS

Health care agent (POA) & phone: _____

Backup agent & phone: _____

Names only. Note where the documents are kept on the Insurance & Document Locator.

HELPFUL NATIONAL NUMBERS *(U.S.)*

Emergency: 911 **Poison Help:** 1-800-222-1222 **Suicide & Crisis Lifeline:** call or text 988

Eldercare Locator (local aging services): 1-800-677-1116 **Alzheimer's Association 24/7 Helpline:** 1-800-272-3900

Keep a copy with the binder and a photo on your phone. Ask the person I support before sharing their contacts.

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