

Medical History Summary

Last updated: _____

A one-place summary of the health history of the person I support, for new doctors, hospital staff, and backup caregivers.

Name of the person I support: _____

Emergency contact & phone: _____

Primary doctor & phone: _____

Health care agent or proxy & phone: _____

Copy from records or a patient portal when possible. Visit summaries, discharge papers, and vaccine records are more accurate than memory. Leave a blank or write “unsure” rather than guess. **Medications and allergies:** see the Medication & Allergy List (not repeated here).

CURRENT DIAGNOSES AND CONDITIONS

Diagnosis or condition	Year diagnosed	Treating doctor	Notes

SURGERIES AND PROCEDURES

What was done	When	Where (hospital or clinic)

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

Private health information. Store securely.



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HOSPITAL STAYS AND ER VISITS

Date	Hospital	Reason	Outcome

IMPLANTED DEVICES *(pacemaker, stents, joint replacements, shunts, hearing implants)*

Device	Year and where in the body	Device card kept at / notes

MRI safety: tell staff about every implant before any MRI or scan, and bring the device card if there is one.

VACCINATIONS *(copy dates from records)*

Vaccine	Dates given
Flu	
COVID-19	
Pneumococcal (pneumonia)	
Shingles	
Tetanus (Td or Tdap)	
Other	

VISION, HEARING, AND DENTAL

Vision (glasses, cataracts, other): _____

Hearing (hearing aids, implants, other): _____

Dental (dentures, recent work, dentist): _____

SIGNIFICANT FAMILY HEALTH HISTORY *(if known)*

Parents, brothers, sisters (for example heart disease, diabetes, cancer, dementia): _____

This summary does not replace medical records or advice. Confirm details with the care team.

