SPRINGFIELD FAMILY MEDICAL CENTER

123 Medical Plaza Drive • Springfield, IL 62701 • Phone: (555) 123-CARE

EMERGENCY CONTACT INFORMATION

IMPORTANT: Please provide at least one emergency contact who can be reached in case of a medical emergency. This person should be someone other than yourself who is familiar with your medical history and can make decisions on your behalf if necessary.

PRIMARY EMERGENCY CONTACT	
Full Name*	
Relationship to Patient*	Primary Phone Number*
Alternate Phone Number	Email Address
Home Address	
City State SECONDARY EMERGENCY CONTACT (Optional)	ZIP Code
Full Name	
Relationship to Patient	Primary Phone Number
MEDICAL DECISION MAKING	
In the event that you are unable to make medical decisions for behalf?	yourself, who would you like to be contacted to make decisions on your
Name of Medical Decision Maker	
Relationship	Phone Number

Patient Signature	Date
*Required fields must be completed	

I certify that the emergency contact information provided above is accurate and current. I authorize Springfield Family Medical Center

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to contact these individuals in case of a medical emergency.