

Blood type and rhesus factor
 A B O Rh+ (D+) Rh- (D-)

parent/carer _____

Date, signature of the card holder or

NHS No. _____ EHCIC No: _____

Date of birth _____

Address _____

Address _____


Address _____

Address _____

Address _____

Photo

♂ M ♀ F

 112 European emergency number
(UK 999; Switzerland 144)

Local emergency doctor: _____

EMERGENCY CARD

OESOPHAGEAL ATRESIA

Malformation of the Oesophagus
with or without Tracheo-Oesophageal Fistula



- Food choking / Bolus obstruction
- Respiratory risk (apnoea, laryngomalacia)
- Gastro-oesophageal reflux
- Latex allergy
- _____
- _____

For doctors and emergency staff information only.

Name of GP _____

Phone _____

IN CASE OF EMERGENCY PLEASE CONTACT FOLLOWING PEOPLE

1. Full Name _____

Address _____

Phone _____

Mobile Phone _____

2. Full Name _____

Address _____

Phone _____

Mobile Phone _____

FOR FURTHER INFORMATION:



Tracheo Oesophageal Fistula Support,
the UK charity supporting adults and families of
children born unable to swallow.

Tel 0115 961 3092

www.tofs.org.uk

1. Hospital carrying out the treatment

Name _____

Address _____

Phone _____

2. Consultant

Name _____

Phone _____

3. Other

Name _____

Address _____

Phone _____

IN CASE OF EMERGENCY, PLEASE CONTACT:

PERSONAL MEDICAL INFORMATION

Type of Oesophageal Atresia

- Oesophageal Atresia yes no
- Oesophageal Atresia with Fistula yes no
- Tracheo-Oesophageal Fistula only yes no
- Long-gap yes no

Date and type of surgeries:

- Primary anastomosis
- Dilatation
- Tracheostomy
- Other - Please Specify _____

Associated anomalies on other organs

e.g. VACTERL, CHARGE,

- Heart Kidney Vertebrae:
- Limb(s) Anorectal
- VACTERL CHARGE
- Other - Please Specify _____

Respiratory function

- Symptomatic tracheomalacia Asthma
- Chronic obstructive bronchopathy
- Tracheostomy, date and type of surgery: _____

PATIENT PARTICULARLY AT RISK BECAUSE OF REFLUX AND ASPIRATION

ANATOMICAL ANOMALIES

- Gastric transposition
 - Upper anastomosis
 - Stomach
 - Heart
 - Pyloroplasty
 - Duodenum
- _____
- _____
- _____
- _____
- Special precautions

ADDITIONAL NOTES

- Allergies and intolerances

Digestive function

- Anastomotic stricture, treatment: _____
- Swallowing disorders, treatment: _____
- Dysphagia, treatment: _____
- Gastro-oesophageal reflux, current treatment: _____
- Gastrostomy, date and type of surgery: _____
- Jejunostomy, date and type of surgery: _____
- Coloplasty Elongation
- Gastric transposition
- Date and type of surgery: _____
- Dumping syndrome
- Enteral feeding
- Special oral nutrition