

EMERGENCY PREPAREDNESS CHECKLIST

Have You Completed or Signed-Up for the Following as Part of Your Emergency Plan?

- | | | |
|--|-----------|----------|
| 1. File of Life | Yes _____ | No _____ |
| 2. Typical Day Sheet | Yes _____ | No _____ |
| 3. Wanderer's Identification Program | Yes _____ | No _____ |
| 4. Senior Locator Program | Yes _____ | No _____ |
| 5. Advanced Directives: | | |
| Durable Power of Attorney | Yes _____ | No _____ |
| Designation of Health Care Surrogate | Yes _____ | No _____ |
| Florida Living Will Declaration | Yes _____ | No _____ |
| Health Information (HIPPA) Release | Yes _____ | No _____ |
| 6. Financial Logs | Yes _____ | No _____ |
| 7. Pre-Selection of two (2) Facilities | Yes _____ | No _____ |
| 8. Special Needs Shelter Registration | Yes _____ | No _____ |

We will assist you in getting all the above completed. If you answered "No" to any of the above and would like some help, please talk to us at the Alzheimer's Support Network.

To sign up for Programs with the Senior Crime Prevention Unit, Seniors at Risk, and Free cell phones (for 911 use only) Call: (239) 252-0722

Name: _____

Date: _____

