

Dialysis Emergency Information Sheet

Organize dialysis type, schedule, center, nephrologist, access context, medications, allergies, and contacts.

Person & contacts

- Name / DOB _____
- Emergency contacts _____
- Caregiver contacts _____
- Transportation contact _____

Medical basics

- Medications _____
- Allergies _____
- Pharmacy _____
- Primary doctor _____

Dialysis context

- Dialysis type _____
- Usual schedule _____
- Dialysis center _____
- Nephrologist _____

Handoff notes

- Access type/location if shared _____
- Care plan location _____
- Diet/fluid notes as context _____
- Document location _____

