

This **Permanent Health Record** is the personal and private property of -

.....
It is yours for all your life, to go with you to wherever you live.

Please keep it safe and available.

To make it easier to use, please remove the temporary cover and put the pages in an A4 ring binder.

Please take it to all appointments with all your medical carers, and ask for the Running Health Contact Sheet to be filled in at each visit.

Once each year (for example in your birthday month) ask your doctor to update the permanent pages and to supply a new Running Health Contact page if required and any of the special optional pages that may be appropriate for you. Book in for a double appointment if possible, to have your annual health review.

Notes for patients, parents and carers:

- This Health Record was designed as a life-time health record for people who have a developmental disability or any long term condition or illness
- Ideally it should be issued in childhood and up-dated whenever necessary, so that filling it in is never a major task, but it can be started at any age.
- You can take responsibility for adding information to pages whenever you feel it is appropriate. This will keep the amount of up-dating the doctor needs to do to a minimum, and promote a sense of involvement in the keeping of accurate records.
- When a sheet is full, obtain a new sheet, label it as sheet 2 (or 3 etc) and place it in front of the old sheet. Plastic envelopes and covers can be replaced whenever necessary to keep the record in good order.

Replacement Pages: New or extra pages or Special pages can be obtained from -

- The Centre for Developmental Disability Health on (03) 501 2400, (Fax 8575 2270), or
- The CDDHV Website: <http://www.cddh.monash.org> or
- Dr Mary Burbidge on (03) 93977300 or (03)93971353 (please leave a message) or
- By e-mail to mary.burbidge@med.monash.edu.au

Special optional pages are available for-

- weight chart / dietary advice
- epilepsy seizure charts
- behaviour record chart
- menstruation chart
- syndrome specific information sheets -

- Down Syndrome

- Cerebral Palsy

- Epilepsy

- Autism

- Fragile-X syndrome

- Prader Willi Syndrome

- Angelman Syndrome

- William Syndrome

- Rett Syndrome

- Tuberous Sclerosis

Other special pages will be developed if there is a need.

All pages will be up-dated from time to time and suggestions are welcome

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PATIENT HEALTH CARE RECORD

Date of Initial Completion :

Name :

Change of Name:

Date of Birth:

Blood Group:

Medicare Number:
.....

Pension Number:
.....

Address

Fill out and date the new address whenever it changes.

Put a line through the old address.

Type of accommodation = family home, CRU, hostel, etc.

1. No.& Street..... Phone:
Town
Postcode Date
Type of Accommodation

2. No.& Street..... Phone:
Town
Postcode Date
Type of Accommodation

3. No.& Street..... Phone:
Town
Postcode Date
Type of Accommodation

4. No.& Street..... Phone:
Town
Postcode Date
Type of Accommodation

5. No.& Street..... Phone:
Town
Postcode Date
Type of Accommodation

