PACEMAKER IDENTIFICATION – WALLET CARD



Cut this card out and keep in your wallet for use when you are traveling or away from home.

PACE	MAKER IDEN	TIFICATION CARD
Name		
•		Zip code
Phone		Blood Type
I'm wearing	a pacemaker. Ir	n an emergency, conta
Doctor		
Phone		
Address		
City	State	Zip code
•		
Hospital Phone	e	
Hospital Addre	ess	
City	State	Zip code
Type of pacem	aker	
Type of leads _		
Manufacturer .	-	
Paced rate		
Model		
Serial Number	r	