**The Savvy Diabetic Personal Medical Resume (All About ME!)**

This is IMPORTANT! It speaks for you and has all your essential information in one place, gathered BEFORE an emergency.

DO NOT GET OVERWHELMED! Just organize these items carefully and thoroughly … you only have to do this complete file ONCE!!!

You might want to create a file on your computer where you keep all these documents … makes it much easier when you need to update information. It’s all in one place

I put each page, back to back, into sheet protectors, figured out the order that I thought might be valuable ... and put them in a clasp folder.

These documents are included in this post, are set up as generic … you must fill in your own personal information.

It should include the items below (more or less, depending on your needs).  I’ve suggested how you might want to organize these pages but you choose what to include and in what order.

* Page 1, front side: Table of Contents
* Page 1, back side: Copy of most current labs (including HbA1c, kidney, thyroid and lipids)
* Page 2, front side: **My Essential Information Page**
	+ Your address, address and date of birth
	+ Name of your emergency contact
	+ Statement that **YOU HAVE TYPE 1 DIABETES (INSULIN DEPENDENT)** requiring continuous insulin and blood glucose monitoring
	+ Your current treatments (including devices, settings and other medical conditions (with their treatments)
	+ Allergies
* Page 2, back side:
	+ List and contact information for your advocates
	+ List and contact information of your T1 Diabuddies, who might help your advocates with diabetes and device questions
	+ Several TYPE 1 DIABETES wristbands
	+ I have these available as 5 wristbands for $5, postage included.
	+ Venmo $5 for 5 wristbands to Joanne-Milo-1
	+ Email me your mailing address (US only) to joanne@TheSavvyDiabetic.com
	+ I’ll mail them out within a day

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* Page 3, front side: Detailed T1 and Health Management
	+ Detailed letter of information on **how I manage my health**
	+ Includes information on T1 and other conditions
* Page 3, back side
	+ Copy of your current driver license
	+ Copy of all your insurance cards
* Page 4, front side: My Medication List
	+ List of all medications and supplements that you take
	+ Include dosages and when taken
* Page 4, back side
	+ Specify which medications are CRITICAL
	+ Show how and at what times you take your CRITICAL medications
* Page 5, front side: List of Health Care Providers
	+ Include internist and endocrinologist at top
	+ List all current and important medical team members
	+ Include the name and contact information for your pharmacy
	+ Include name, address, specialty and contact information
* Page 5, back side: Immunizations
	+ If you have these, it would be great to include them by date
	+ You can usually get this information from your primary care physician or local pharmacy
* Page 6, front side: Your History of Diagnoses and Surgeries
	+ List these by year/date and condition (and anything else important)
	+ Do this in short, bullet format, by date, oldest to most current
* Page 6, back side: Surgeries
	+ List all surgeries, by date, any anesthesia, reactions, surgeon name
	+ If no surgeries (GOOD FOR YOU!), note: NO SURGERIES
* Page 7, front side: Advance Health Care Directive
	+ You can download an editable form for your state on the internet or get own from your local hospital or family attorney
	+ Must be signed by 2 witnesses (but NO NOTARY)
* Page 7, back side: Important Contacts (with name, address, contact info)
	+ Spouse, significant other, parent or adult children
	+ Close family members
	+ Family attorney
* Page 8 & 9: OPTIONAL
	+ Google Health Record form
	+ Copies of recent Dexcom/Libre and Nightscout summaries

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