Emergency Transport Card

Name:				(Female	/ Male)	
(ID/Passport#:)	
Date of Birth	dd /	mm	year / 20	A	ge)	weigh Ko	
Address:							
Tel:		_		_	-		
Emergency Coname	ontact relatio	onship	- -	phon	- -		
Diagnosis:							
The patient has a "RISK" to have fatal brain damage or life threatening, if seizure will be prolonged.							
Please transfer this patient to hospital ASAP!							
Remarks (ot	her med	lical co	nditions	· aller	gies)		
Hospital Na	ime _	-		My de	octor		
				ا الم	DravetS ラベ症候	yudrome JP 详患者家族会	

Seizure ^{dd r} Start date: /	/ 20 time: PM :					
Temperature						
Rescue Medicines	AM·PM :					
Diazepam	[4·6·10]mg					
Midazolam Nasal S						
Buccolam	(0.5 · 1 · 1.5 · 2 cc					
Lorazepam Types of Science	[]mg/ml					
Types of Seizure eye deviation: left / right / up Tonic Simple Partial Comlex Partial						
Clonic Sim	Myoclonic Clusters					
Tonic-Clonic						
Effective Rescue Medicines to my child in A&E / ER						
☐ Midazolam IV ☐ Lorazepam IV ☐ Phenobarbital IV ☐ Thiopental IV						
Special notes from my neuro Dr. 1st line medicine: 2nd line:						
Current <u>Kg</u> AED Medications	What is "Dravet Syndrome"? It is a rare severe epilepsy that affects one in 20,000-40,000 people worldwide. A seizure will be triggered by fever or raise body temperature and the seizure may be prolonged (Status Epilepticus/SE). There are risks of fatal brain damage or after-effect due to SE so that it is very important to stop a seizure ASAP! WARNING					
Dravet Syndrome JP ドラベ症候群患者家族会	Phenytoin & Fosphenytoin should AVOID using to Dravet Syndrome Patients					
□ トノハ症候群思看家族芸	doing to provet syndrome rationts					