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#### **PERSONAL INFORMATION**

<b>Last Name</b> Smith	First Name Jane	Middle Name	
Date of Birth	Primary Language	Gender	
10/01/1960	English	Female	
Address		<b>Building Type</b>	
1234 Main Street		House	
City	State	Zip Code	
Los Angeles	California	90012	
Additional Instructions This is a gated complex. The pas	ss code for entry is 1234		
Home Phone	Mobile Phone	Fax	
(213) 484 - 4800	(213) 555 - 1234		
Email Address	Alternative Phone		
readylaemd@gmail.com	(213) 800 - 1000		

#### **EMERGENCY CONTACT INFORMATION**

#### **Local Area Contact Information**

Name	Relationship	Home Phone	Mobile Phone	Email Address
Dan Smith	Sibling	(213) 555 - 1234	(213) 555 - 1212	dan.smith@hotmail.com

#### **Out-of-Area Contact Information**

Name	Relationship	Home Phone	Mobile Phone	Email Address
Richard Brown	Cousin	(415) 123 - 1234	(415) 555 - 1212	richard.brown@hotmail.co m



#### **ASSISTANCE & TRANSPORTATION**

Do you need physical assistance in the case of a Mandatory Evacuation?	No
Do you need transportation assistance in the case of a Mandatory Evacuation?	No
Do you need assistance evacuating service animals, pets and/or livestock?	No



#### **GENERAL MEDICAL INFORMATION**

Do you have physician?	[Yes]
------------------------	-------

Physician Speciality	Physician Name	Physician Telephone	Physician Address
Internal Medicine	Dr. Jerry Rice	(213) 321 - 1212	1500 Culver Blvd. Culver City California

Insurance Company Kaiser	Policy Number 123123123	Hospital Affiliation Kaiser
Medi-cal Number	Medicare Number	Blood Type O postive
Allergies / Sensitivities / Reac sulfur	tions To Medications	

#### **MEDICATION INFORMATION**

Do you take prescription and/or over-the-counter medication(s)?

[Yes]

Medication Name	Dosage	Medical Condition	Frequency	Prescription#	Prescribing Doctor
hydrochloride	50 mg	Blood pressure	1 time a day	12345	Dr. Rice

Pharmacy Name	Phone Number
Walgreen	(213) 999 - 9999
Mental Health Professional Name	Mental Health Professional Telephone
Substance Abuse Counselor Name	Substance Abuse Counselor Telephone
Recovery Sponsor Name	Recovery Sponsor Telephone
Recent Surgery Hip replacement	



#### **DENTAL INFORMATION**

Dentist Name	Phone Number	Dentures	<b>Dentures</b> No	
Dr. Shuttle	(818) 896 - 5555	No		
Special Dental Information				



## SERVICE ANIMALS, PETS AND/OR LIVESTOCK INFORMATION

Do you have a pet? [Yes]

Name	Animal Type	Color/Breed	Blood Type	Chip Number	License Number	Allergies & Sensitivities
Rusty	Dog	black collie			4567MVP	



#### **PERSONAL INFORMATION**

<b>Last Name</b> Smith	First Name David	Middle Name	
Date of Birth	Primary Language	Gender	
11/15/1998	English	Male	
Address		<b>Building Type</b>	
1234 Main Street		House	
City	State	Zip Code	
Los Angeles	California	90012	
Additional Instructions This is a gated complex. The pas	s code for entry is 1234		
Home Phone	<b>Mobile Phone</b> (213) 999 - 9999	Fax	
Email Address david.smith@gmail.com	Alternative Phone		

#### **EMERGENCY CONTACT INFORMATION**

#### **Local Area Contact Information**

Name	Relationship	Home Phone	Mobile Phone	Email Address
Jane Smith	Grandchild		(213) 555 - 1234	jane.smith@gmail.com

#### **Out-of-Area Contact Information**

Name	Relationship	Home Phone	Mobile Phone	Email Address
Jennifer Staples	Friend		(916) 555 - 1212	jennifer.staples@hotmail.c om



#### **ASSISTANCE & TRANSPORTATION**

Do you need physical assistance in the case of a Mandatory Evacuation?	No
Do you need transportation assistance in the case of a Mandatory Evacuation?	No
Do you need assistance evacuating service animals, pets and/or livestock?	No



#### **GENERAL MEDICAL INFORMATION**

Do you have physician? [Yes]

Insurance Company Kaiser	Policy Number K123356	Hospital Affiliation Kaiser Sunset
Medi-cal Number	Medicare Number	Blood Type O postive
Allergies / Sensitivities / Reactinone	ons To Medications	,

#### **DENTAL INFORMATION**

Dentist Name	<b>Dentures</b> No
Special Dental Information	



#### **BUILD A FIRST AID KIT**

Buy only currently dated stock, and rotate your supply. Check fire extinguishers, fire alarms, carbon monoxide devices, and rotate stock at the same time you change your clocks for Daylight Savings Time.

Disposable Burn Blanket	Latex Gloves	Antibiotic Ointment
Anti-bacterial Towelettes	Burn Ointment	Tweezers
Eye Pad	Scissors	Sunscreen
Diarrhea Medication	Laxative	Antacid
Eye drops	Cold/cough medicine	Antihistamines (Benadryl)
Insect Spray	Ear and nose drops	Hydrogen Peroxide, Betadine
Aspirin and/or Pain Relief Pills	Surgical Mask	Instant Cold and Heat Packs
Ace Bandages	Butterfly Bandages	Gauze Pads (4" x 4")
Cotton/Q-tips/Swabs	Adhesive Tape (2")	Gauze Wide Sterile Roller (2" & 4")
Safety Pins, Sewing Needles & Thread	Triangular Bandage for sling	Thermometer
Tongue Depressors (Popsicle sticks)	Ear Plugs	Splint Material
Medical Latex Gloves	Band-Aids (various assortments)	Skin Disinfectant Spray
Spray Bottle with 10% Bleach Solution for disinfecting objects.		

#### DON'T FORGET . . .! KEEP A FIRST AID MANUAL WITH YOUR SUPPLIES!!!!



#### OTHER IMPORTANT ITEMS YOU MAY NEED . . .

- Battery or crank operated radio or television to receive information about the disaster and at least one extra set of batteries.
- Whistle or loud bell to attract attention.
- **Smoke Alarm and Carbon Monoxide Device** batteries should be checked and tested once a month and replaced every six months.
- **Fire Extinguisher**. Check every six months to see if it is charged and know how to use it safely. If you have chemical sensitivities or allergies, be aware of any sensitivity to the fire extinguisher contents.
- Wrench or pliers for utility and gas shut-off. Use only if you smell gas or are instructed to do so. If you turn the gas off, a professional must turn it back on. DO NOT attempt to do this yourself.
- **Keep a pair of shoes under the bed, between the mattresses, or at the foot of the bed.** Be sure they are sturdy enough to protect your feet from broken glass, nails, and other debris.
- Keep a pair of sunglasses, a hat, and a pair of gloves readily available in your kit.
- Toilet paper, moist towelettes or baby wipes, garbage bags, plastic ties or closeable containers, and gloves for personal waste disposal.
- Keep extra eyeglasses, optical aids, contact lenses, hearing aids and/or mobility aids.
- Important family documents. Make copies and store in a fire and waterproof safe or portable container, and back up information on a flash drive. You can then access your documents from any computer. If you have warning, you can E-mail them to yourself and then they could be accessed from any device with Internet connection.
  - Legal Documents: Wills/Living Trusts and Letter of Instruction, Power(s) of Attorney (i.e., medical and personal property), such as Mortgage or Real Estate Deeds of Trust, insurance policies; and Vehicle Registration/Ownership documents.
  - **Family Documents:** Birth and death certificates, marriage license, adoption papers, divorce papers, social security card(s), passport(s), green card(s), naturalization documents and driver's license(s).



- Financial Documents: Living Will, previous year's tax return, Property Tax Statement, Bank or Credit
  Union Statements, credit and debit card statements, retirement accounts, investment accounts. Copy of
  government benefits, securities, and loan numbers, including addresses and phone numbers.
- Medical Documents: Health Insurance Card, copies of records of immunizations, allergies, list of
  medications (include name, RX number, dosage, frequency, color/size, medical issue, and prescribing
  doctor), pharmacy name and phone number, documentation of disability (include a copy of any
  disabled placard or license plate that has been issued to you or a family member), durable medical
  equipment, consumable medical supplies used daily, dental records, and child identity cards/DNA
  swabs.
- Military Documents: Current Military ID, Veteran's Benefits, Military Discharge papers (DD Form 214). If you or family members need to obtain records, you can access information at the National Archives Veterans Service Records http://www.archives.gov/veterans/.
- Household Inventory: List contents in household and include serial numbers. Take photographs and/or videotape contents in each room, especially jewelry, paintings, and any collectables.
- List specifications for adaptive equipment or durable medical equipment prosthetics, orthotics, and other devices. Include model number, vendor name, vendor telephone number, serial number and if it is covered by insurance, in case it needs to be replaced.
- Extra blankets, sleeping bag or warm blanket for each person. If gas or electricity is out, you may not have heat. Inexpensive solar blankets can be purchased at large discount stores.
- **Include feminine and personal hygiene supplies** (i.e. hairbrush, deodorant, toothbrush, toothpaste, soap, shampoo, wash cloths, etc.) Don't let your stock get lower than a one-week's supply.
- A gallon of chlorine bleach and a standard-size medicine dropper to be used only for this purpose. Use to sterilize water and food preparation areas in order to control germs and parasites that could come into contact with water/food.
- **Clothing** A complete change of clothing for each person, including a long sleeve shirt, long pants, and sturdy shoes.
- Plastic bucket with a tight lid.



#### MORE GOOD ITEMS TO HAVE . . .

- Duct tape, masking tape or electrical tape for temporary repairs and to shelter in place.
- **Rubber or heavy gloves, broom, etc.**, to clear up broken glass or other unsafe conditions, such as chemical product spills.
- Paper and Pencils especially if you have a communication or mental health disability or think you may have difficulty communicating your needs. Include a dark felt tip pen and high contrast paper if that makes it easier to see.
- Laminated emergency communication boards or communication cards with pre-printed messages and pictures.
- Signal flares and matches kept in a waterproof container.
- · Glow sticks.
- Paper towels, paper plates and utensils, especially if you utilize modified utensils, cups or straws due to a
  disability.
- Aluminum Foil for such things as covering chairs, the floor, sleeping areas, food, etc.
- Activities, books, games, cards, and puzzles for children.
- ADDITIONAL ITEMS TO CONSIDER . . .
  - Charcoal mask and/or respirator.
  - Baking soda stored in a waterproof container for washing.
  - Portable charcoal water filter.
  - Portable BBQ, cooking pots, pans, and utensils.



#### **CREATE AN EMERGENCY "GO KIT"**



Prepare a bag with your most essential items that you could grab and take with you if there is a need to quickly evacuate. Make sure it is not too heavy to lift and carry easily.

- **Include necessary medications** (in the original bottles or have a copy of the prescription), basic toiletries, and any special sanitary supplies.
- Include a copy of the list of important medical information that includes names, dosage and the way of administering your medications. Specify any allergies, sensitivities, reactions, most effective treatments, and those that are harmful to you, in addition to any special equipment you use.
- Include a copy of the contact list of whom to notify in emergencies with name(s), telephone/videophone numbers (including mobile and text,) and Email addresses. Include information related to social media applications, screen names for instant messaging, Skype, Facetime, etc.
- If you are a person who has trouble communicating verbally, write your own communication cards or create emergency communication boards and laminate them. Include various statements or questions that you believe you may need to ask or respond to during an emergency, such as: personal care needs, specific dietary needs, the proper way to lift and move you should that become necessary, medical issues such as allergies, medication, sensitivities, anything that may be harmful to you, and any other important information.
- Include business cards for personal care attendants (PCA), support service providers (SSP), sign language interpreters, other service agencies, and any other individuals or organizations that may be able to provide assistance to you.
- Gather copies of irreplaceable family photos and back up digital photos on a portable hard drive or flash drive.
- **Include copies of important family documents** in a 3-ring binder or expanding file folder, tear and water resistant, or on a flash drive.



#### PET DISASTER SUPPLY KIT FOR SERVICE ANIMALS AND PETS ...

Prepare a Pet Disaster Supply Kit for your service dog or pet(s) covering their needs for 7 - 10 days. Pack the supplies in a container or bag that the animal can carry, in case you are evacuated. Be sure to include:

Food (7-10 days)	Two non-spill Bowls
Treats	Favorite toy
Extra harness & leash	Muzzle
Blanket for bedding	Stakes & tie-downs
Foil or plastic lids for cans	Manual can opener and spoon
Litter box, pan, and scoop	Microchip information
Water (1 gallon per pet, per day, for 7 days)	Name and telephone number of your veterinarian
Medications and medical condition, if any (dosage and frequency)	Current photo with you and description of each pet
Plastic bags/paper towels for disposing of feces	Roll of gauze bandage and bandage tape
Crate/carrier with ID tag and picture (critical for evacuation and public shelters)	Current medical and vaccination records and any other pertinent medical information
First Aid Kit (include large/small bandages with elastic tagointment, saline eyewash, and hydrogen peroxide)	pe, scissors, tweezers, Q-tips/cotton balls/swabs, antibiotic

Check with your veterinarian to see if there is anything specific you should include for your service dog or pet.

**LARGE ANIMAL EVACUATIONS** – contact the Los Angeles Department of Animal Services for guidance on where to evacuate large animals.



#### SANITATION DURING AN EMERGENCY

After a major disaster, water and sewage lines may have been disrupted and you may need to improvise and create a personal emergency toilet.

#### **BUILDING A TEMPORARY OR MAKESHIFT TOILET...**

#### **SUPPLIES YOU WILL NEED**

Medium-sized plastic bucket with tight lid	Soap, liquid detergent
Toilet paper	Plastic garbage bags and ties (Heavy duty)
Towelettes or wet wipes	Household chlorine bleach

- Line the inside of a toilet bowl, or if backed-up, a 5-gallon bucket or any other appropriately sized waste container with two heavy-duty plastic garbage bags.
- To make a toilet seat, place two boards parallel to each other across the bucket or remove your toilet seat and place it on the bucket.
- Place kitty litter, fireplace ashes, or sawdust into the bottom of the bags.
- At the end of each day, securely tie the bags and remove them to a protected location such as a garage, basement, outhouse, etc., until you are informed by local government of safe disposal options.
- At the end of each day, pour bleach or other disinfectant into the container to help avoid infection and stop the spread of disease.
- Cover the container tightly when not in use.
- During a declared emergency, you will be informed of options to disposing of these bags. Keep up-to-date on information.
- If garbage cannot be buried immediately, strain any liquids into the emergency toilet.
- Wrap the residue in several layers of newspapers and store it in a large can with a tight-fitting lid.



#### **EMERGENCY SUPPLIES – STORAGE**

It is helpful to have all of your emergency supplies stored together in a location that you can reach in the event of an emergency. The diagram on the following page, entitled "Earthquake Kit" illustrates a convenient way to arrange and store your supplies at home so that you can get to them easily in an emergency.

An earthquake or other emergency may strike when you are not at home; therefore, it is a good idea to keep emergency supplies in your vehicle as well as in your home. Here are some suggestions for preparing your car/van with the emergency supplies you may need when away from home.

#### **CAR/VAN KIT**

Canned food, manual can opener	NON-PERISHABLE FOOD: nutrition bars, dried fruits, jerky, crackers, cookies, etc.
Flashlight, batteries, glow sticks	Fire extinguisher
Small first-aid kit	Extra clothing
Bottled water	Sturdy shoes
Toilet tissue	Street maps
Folding chair, blankets and/or sleeping bags	Disability related supplies

#### **EARTHQUAKE KIT**

#### STORING SUPPLIES AT HOME

Use large containers such as a footlocker or 30-gallon trash can, and label each item with the date of purchase or the last date it should be used. Items with the shortest shelf life should be easily reached. Place the container in a cool, accessible place, raised off the ground.

A good rule to follow is to check, rotate or replace supplies when clocks are changed to or from daylight savings time, twice a year. When assembling a survival kit, don't forget about food and water for pets and/or service animals.

#### **TOP**

- · Batteries with Tester
- · Flashlight & Glow Sticks
- Portable Radio
- First-aid Kit



#### **MIDDLE**

- · Manual Can Opener
- Food and Water for pets (Life 3 Months)
- Dry & Instant foods (pasta, rice)(Check Expiration Dates)
- Water and Purification Tablets(Life 6 Months)
- Canned food (Check Expiration Dates)
- Disability-related Supplies (Life 1 Year)



#### **BOTTOM**

- Blankets
- Tarps
- Extra Clothing & Shoes
- Towelettes
- Personal Hygiene Items (toilet paper, diapers, soap, deodorant, toothbrush and toothpaste, shampoo, towels, wash cloths, and heavy-duty plastic bags.)



#### **QUICK REFERENCE EMERGENCY RESOURCES**

- DIAL 9-1-1 IF YOU HAVE A LIFE-THREATENING EMERGENCY.
- This number accepts direct TTY calls. If the line is busy, for Fire or Paramedics only (not Police), call (800) 688-8000.
- For routine City business and non-emergency services, you should call 3-1-1 or (213) 473-3231 for referrals and updated information. If you are outside the City of Los Angeles and need assistance within the Counties of Los Angeles, Orange, Riverside, San Bernardino, and Ventura, you can contact the City of Los Angeles 3-1-1 Center toll-free at: (866) 4LACITY.
  - If you are outside the above mentioned areas, please call: CITY OF LOS ANGELES CALL CENTER 3-1-1 OR
     (213) 473-3231
- CITY OF LOS ANGELES DEPARTMENT OF WATER AND POWER (DWP): (800) 342-5397 Voice; (800) 432-7397 TTY
- CITY OF LOS ANGELES, EMERGENCY MANAGEMENT DEPARTMENT (EMD): (213) 484-4800 Voice; (213) 978-0517 Fax; <a href="http://emergency.lacity.org/index.htm">http://emergency.lacity.org/index.htm</a>
  - Public Information Helpline Updated recorded information during emergencies and significant events -(800) 439-2909.
- CITY OF LOS ANGELES FIRE DEPARTMENT (LAFD) Fire/Safety Information: (818) 756 9671 Voice; (818) 971-6983 TTY; <a href="http://LAFD.org/">http://LAFD.org/</a>
- LOS ANGELES DEPARTMENT OF ANIMAL SERVICES (DAS): (888) 452-7381 Voice; (877) 875-8205 TTY; <a href="http://www.LAAnimalServices.com/">http://www.LAAnimalServices.com/</a>
- LOS ANGELES POLICE DEPARTMENT (LAPD) NON-EMERGENCY NUMBER: (877) 275-5273 Voice or TTY; http://www.LAPDOnline.org/
- 2-1-1 L.A. County Partners with the Los Angeles County Office of Emergency Management to be the primary provider of disaster preparedness and response information service to the community before, during, and after disasters.



- In times of local or national distress, L.A. County 2-1-1 will provide timely and accurate information to any member of the community.
- NOAA WEATHER RADIO <a href="http://www.Weather.gov/nwr/">http://www.Weather.gov/nwr/</a>
- AMERICAN RED CROSS OF GREATER LOS ANGELES <a href="http://www.Acrossla.org/">http://www.Acrossla.org/</a>
- SAFE AND WELL PROGRAM AMERICAN RED CROSS https://SafeAndWell.Communityos.org/cms/index.php
  - Register yourself as "Safe and Well" After a disaster, letting your family and friends know that you are safe and well can bring your loved ones great peace of mind. This website is designed to help make that communication easier.
  - Search for Loved Ones Concerned family and friends can search the list of those who have registered themselves as "safe and well" by clicking on the "Search Registrants" button. The results of a successful search will display a loved one's first name, last name, and a brief message.
- Ready LA The City of Los Angeles Disaster Tips, Emergency Preparedness and Recovery Website http://www.readyla.org/







# Family Communication Plan

Emergencies can happen at any time. Does your family know how to get in touch with each other if you are not all together?

**Before** an emergency happens, have a family discussion to determine who would be your out-of-state point of contact, and where you would meet away from your home — both in the neighborhood and within your town.

**Out-of-Town Contact** 

# Let them know you're OK!

Pick the same person for each family member to contact. It might be easier to reach someone who's out of town.

**Neighborhood Meeting Place:** 

# Important Information

Fill in this information and keep a copy in a safe place, such as your purse or briefcase, your car, your office, and your disaster kit.

Be sure to look it over every year and keep it up to date.

Name:	
Home:	
Cell:	
Email:	Regional Meeting Place:
Facebook:	
Twitter:	
Work Information	School Information
Workplace:	School:
Address:	Address:
Phone:	Phone:
Facebook:	Facebook:
Twitter:	Twitter:
Evacuation Location:	Evacuation Location:
	School:
Workplace:	Address:
Address:	Phone:
Phone:	Facebook:
Facebook;	Twitter:
Twitter:	Evacuation Location:
Evacuation Location:	School:
	Address:
	Phone:
	Facebook:
BEA	Twitter:
http://www.ready.gov/kids	Evacuation Location:
nttp://www.ready.gov/kids	







# Important Information (continued)

#### **Family Information Medical Contacts** \_\_\_\_\_ Date of Birth: \_\_\_\_ Doctor: \_\_ Phone: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ Important Medical Information: Doctor: \_\_\_ Phone: \_\_ Pediatrician: \_\_\_\_\_ Name: Date of Birth: Phone: \_\_ Social Security Number: \_\_\_\_\_ Dentist: Important Medical Information: Phone: \_\_\_ Phone: \_\_ Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_ Specialist: Phone: \_\_ Important Medical Information: Specialist: Phone: \_\_\_ Date of Birth: Name: \_\_ Pharmacist: \_\_\_ Social Security Number: \_\_\_ Important Medical Information: \_\_\_ Veterinarian/Kennel: \_\_\_ Phone: Date of Birth: **Insurance Information** Social Security Number: \_\_\_ Medical Insurance: Phone: \_\_\_ Important Medical Information: \_\_\_\_ Policy Number: \_\_\_\_\_ Homeowners/Rental Insurance: \_\_\_\_\_ Date of Birth: \_\_\_\_ Phone: \_\_ Name: \_\_\_ Social Security Number: \_\_\_\_\_ Policy Number: \_\_ Important Medical Information: \_\_\_\_\_



#### Text, don't talk!

Unless you are in danger, send a text. Texts may have an easier time getting through than phone calls, and you don't want to tie up phone lines needed by emergency workers.







# Family Communication Plan

Emergencies can happen at any time. Do you know how to get in touch with your family if you are not together?

#### Let them know you're OK!

Pick the same person for each family member to contact. It might be easier to reach someone who's out of town.

#### Text, don't talk!

Unless you are in immediate danger, send a text. Texts often have an easier time getting through during emergencies, and you don't want to tie up phone lines needed by emergency responders (like 911)



# Know the Numbers

Home:	Adult:
	Home:
Parent:	Cell:
Cell:	
Work:	
	Home:
Parant	Cell:
Parent:	
Cell:	Neighbor:
Work:	Home:
	Cell:
My cell:	
	Out of state friend/relative:
Sibling:	<del></del>
Cell:	nome:
	Cell:
Sibling:	Memorize your home and parents'
Cell:	

Cut this out and keep it somewhere safe like your backpack, school notebook, or wallet. Or input these numbers into your cell phone if you have one. 



http://www.ready.gov/kids 







# Know Where to Go... -- and How to Get There.

### Pick a Meeting Spot

Where will you meet up with your family if you have to get out of your house quickly? Where will you meet if your neighborhood is being evacuated and you're not at home?

#### In your neighborhood:

(such as neighbor's house or big tree)

#### Out of your neighborhood:

(such as the library or house of worship)

# Draw a Map

Put a  $\Delta$  to show your home. Put a O to show your school. Mark your out-of-neighborhood meeting spot with an X and label it.

# **Know the Exits**

Do you know two ways out of every room in your house in case of a fire? Draw a floor plan of your bedroom in the space below and circle the two ways to get out. Hint: one may not be a door!



http://www.ready.gov/kids