

# EMERGENCY DEPARTMENT PREPAREDNESS CHECKLIST

## 1. Essential Patient Information

- ☐ Full name, age, and contact information
- ☐ Confirmed diagnosis and MPS/related condition type
- ☐ Patient blood type

## 2. Current Medications & Treatments

- ☐ Regular medications and exact dosages
- ☐ Enzyme replacement therapy (ERT) or recent treatments
- ☐ Infusion schedule (if applicable)

## 3. Medical History & Known Risks

- ☐ Known airway difficulties
- ☐ Previous anesthesia complications
- ☐ Allergies (medications, foods, environmental)
- ☐ Cardiac (heart), respiratory (lung), or skeletal issues

## 4. Emergency Contacts & Communication

- ☐ Known airway difficulties
- ☐ Previous anesthesia complications
- ☐ Allergies (medications, foods, environmental)
- ☐ Cardiac (heart), respiratory (lung), or skeletal issues

## 5. Support Documents

- ☐ Health Passport or Emergency Toolkit documents
- ☐ Advance care plans or special medical instructions

## 6. Important Information for Medical Staff

- ☐ MPS type clearly identified
- ☐ Anesthesia risks and precautions
- ☐ Known airway or respiratory complications
- ☐ Current or recent infusion treatments



### Purpose:

**To ensure fast, safe, and informed emergency care.**

### Bring With You to the Emergency Department

- ☐ Health Passport
- ☐ Updated medication list (with dosages)
- ☐ Allergy information
- ☐ Contact details for treating physicians/specialists
- ☐ Emergency contact list
- ☐ Insurance documentation (if required)