



PERSONAL HEALTH RECORD

Take this health record to ALL doctor and hospital visits.

Name:	
Date of Birth:	
Allergies to Medication:	
Pharmacy Name:	
Pharmacy Phone Number:	

EMERGENCY CONTACT INFORMATION

	NAME	RELATIONSHIP	PHONE NUMBER
1			
2			
3			

PHYSICIAN INFORMATION

SPECIALTY/TYPE OF DOCTOR	NAME	PHONE NUMBER
Primary Care Physician (PCP)		

HEALTH PLAN CONTACT INFORMATION

	DESCRIPTION	PHONE NUMBER
1	Customer Service	
2	Case Manager Name: _____	
3		

HEALTH HISTORY AND RED FLAGS

HEALTH CONDITIONS	
1	
2	
3	
4	
5	

RED FLAGS	ACTION

QUESTIONS FOR YOUR DOCTOR	
1	
2	
3	
4	
5	
6	

Next scheduled PCP visit (date and time): _____

Next scheduled Specialist visit (date and time): _____

PERSONAL GOALS	
1	
2	
3	
4	
5	

MEDICATION RECORD

- Tell your doctor about ALL medications that you are taking, including over-the-counter drugs, vitamins and herbal formulas.
- Update this Medication Record every time there is a change in the medications you are taking.
- Know the reason you take each medication, and how much, when and for how long to take each medication.
- Know possible medication side effects and understand what to do if you have side effects.
- Call your doctor if you have questions about your medications or if you want to change how you take your medications.

	MEDICATION NAME (include over-the-counter)	DOSE mg/mcg/cc	FREQUENCY (ex: 1X/day, 2X/day, every other day)	REASON FOR TAKING MEDICATION
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				



PERSONAL HEALTH RECORD

If you have any questions about your health plan benefits, please call Customer Service at **1-877-344-7364** (HMO) or **1-866-557-7300** (PPO), seven days a week, from 8 am to 8 pm; TTY/TDD: **711**.

ATTENTION: If you speak other languages, language assistance services, free of charge, are available to you. Call **1-877-344-7364** (HMO) or **1-866-557-7300** (PPO) (TTY: **711**). ATENCIÓN: Si usted habla español, tiene a su disposición, gratis, servicios de ayuda para idiomas. Llame al **1-877-344-7364** (HMO) or **1-866-557-7300** (PPO) (TTY: **711**).

HIP Health Plan of New York (HIP) is an HMO plan and Group Health Incorporated (GHI) is a PPO plan with a Medicare contract. Enrollment in HIP and GHI depends on contract renewal. HIP and GHI are EmblemHealth companies.