FAMILY CONTACT TRACKING/COMMUNICATION OF EMERGENCY

Nature of Emergency / Code:

Resident Name	Primary Contact / Relationship	Location of contact	Phone #	Date / Time of Call	Take resident home? Y/N	Move to ____ (enter name) Receiving Site Notes / Questions	Transferred to Hospital Notes / Questions	Confirmed in EHR	Follow up
Mary Smith	*John Smith (spouse)*	*ABC Town*	*555-555-5555*	*20-Oct-21*	*N*	*Y; family member will visit there*	*N/A*	*Y*	*Nurse spoke with spouse in for visit today 10/25/21*