

My stickers

For family and friends

How would you like to be involved in the care planning of your child or friend?

Is there anybody else we should be in touch with? Please leave their name, number and relation to you here:

If you would like this information in another language or format such as EasyRead or Braille, please telephone the number below or email equality@uhl-tr.nhs.uk

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸے دوسرے زبان میں دیکھنا چاہتے ہو، تو 'ਕਿਰਪਾ' ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।
إذا كنت ترغب في الحصول على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu
જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો.

0116 250 2959

We welcome your feedback on the All About Me patient passport. Please contact Sophie Wilson on Sophie.EJ.Wilson@uhl-tr.nhs.uk or 07908 454 867. Tell us what can be improved!



All About Me Patient Passport



#hello my name is...



KEY INFORMATION

My name is:

Please call me:

My date of birth is:

I have a long term health condition,
it's:

Today's date is:

The languages I understand and/or
speak:

Other ways I communicate are:

My religious and cultural needs are:

I do / do not take medication, it is:

Somebody else is completing this for
me. Their name and relation to me
is:

I will only take medication if:

I will / will not need help going to the toilet

It is sometimes / never okay to hold me

I also want you to know:

COMFORT

I enjoy the following drinks:

I will only drink this YES / NO

I enjoy the following foods:

I will only eat this YES / NO

I dislike the following drinks:

My mealtimes are:

I do / do not need helping eating
meals. This is what helps me:

I dislike the following foods:

I also want you to know:

The place I like to eat is:

COMMUNICATION AND CARE

The school/nursery I am at is:

How I communicate and express my needs (do you use aids?):

Things that help me settle:

How I normally get about:

Things that upset me:

I am sensitive to (do you use aids?):

You will know I am in pain, anxious, hungry or tired if:

When you come to see us at Leicester Children's Hospital, please bring along:

- ✓ This All About Me Patient Passport
- ✓ All medication that you're taking (in the packaging it comes in)
- ✓ Any communication aids that you use (like picture boards, symbols, etc.)
- ✓ Any sensory aids that you use (like hearing aids, glasses, noise defending ear phones)

We look forward to seeing you!