

Date Checked	Date Checked	<i>Emergency Kit Supplies</i>
		<i>Battery or crank operated radio</i>
		<i>Working flashlight with extra working batteries</i>
		<i>Test smoke &amp; carbon monoxide detectors, change batteries</i>
		<i>Signaling device (i.e. whistle, beeper, bell) to reach the attention of others</i>
		<i>Food for at least 3 days--easy to prepare packages or cans</i>
		<i>Water—one gallon per person per day for at least 3 days</i>
		<i>Food and water for your service and companion animals or pets</i>
		<i>Non-electric can opener that you are able to use</i>
		<i>Extra blankets or sleeping bags (for winter emergencies)</i>
		<i>First Aid kit with Band-Aids, bandages, hand sanitizer, insect repellent, topical ointments, flu and cold remedies, and vitamins to boost general health</i>
		<i>Medications &amp; Medication List updated</i>
		<i>Emergency Contact Numbers (inside of this pamphlet)</i>
		<i>ABC-type fire extinguisher</i>

## **AFTER THE DISASTER**

The emotions following a disaster can be devastating. It is crucial for the safety of your family to remain calm, listen for and then follow official instructions.

- ◆ Follow plan for the specific disaster or emergency and treat injuries
- ◆ Listen to news reports for information and instruction
- ◆ Assess condition of the house using a flashlight, NOT an open flame
- ◆ Do not enter an unsafe structure
- ◆ Smell for gas leaks, starting at the water heater
- ◆ Shut off any damaged utilities
- ◆ Clean up any hazardous or flammable spills
- ◆ Notify local and out-of-town contacts if possible, then only use the phone to report life-threatening emergencies



Assistance. Advocacy. Answers on Aging.

1-800-582-7277

## **EMERGENCY PREPAREDNESS**

Name \_\_\_\_\_

Address \_\_\_\_\_

## **Highland County**

Are you prepared for any type of emergency? Will you remain safe or do you have someone to assist you? Please take the time to plan NOW and be prepared when the emergency arrives.

### **Evacuation Plan**

Where will you go? \_\_\_\_\_

How will you get there? \_\_\_\_\_

Emergency number list (see next page)

What will you take? (clothes, medications, current medication list, equipment)

What will you do about your pets? \_\_\_\_\_

Notify your Case Manager \_\_\_\_\_

### **Shelter in Place (For Gas or Chemical spills)**

Where in your home will you stay until it is safe? \_\_\_\_\_

Shut windows/doors, turn off fans, heating/AC

Place towels at door thresholds and window sills

Listen to radio/TV (station) \_\_\_\_\_

Area Agency on Aging District 7

Serving Ten Counties in Southern Ohio. Services provided on a non-discriminatory basis

# HIGHLAND COUNTY EMERGENCY NUMBERS

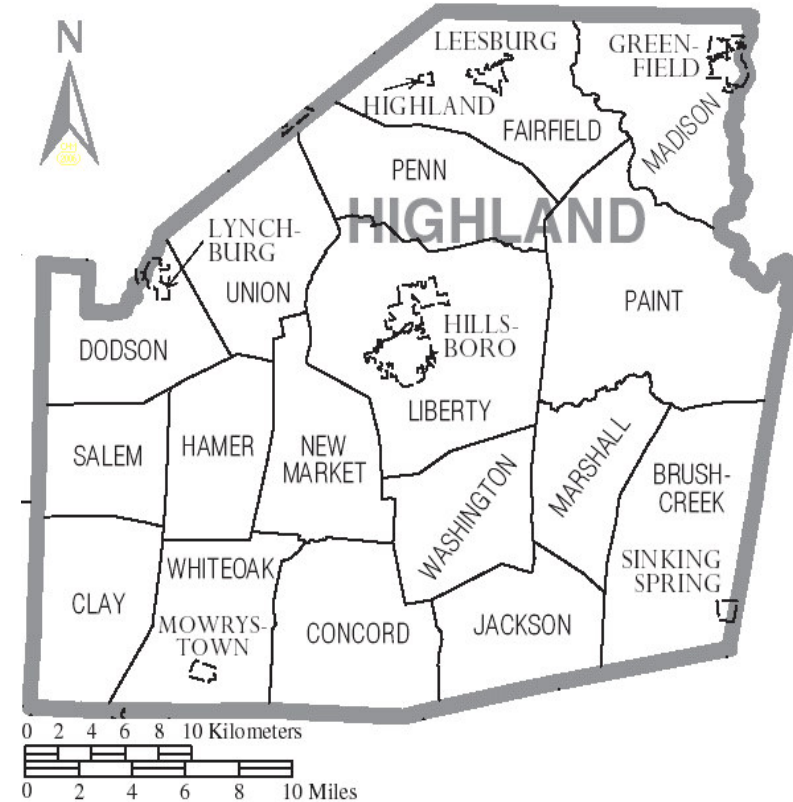
**CONTACT PERSON:** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**CARE MANAGER:** \_\_\_\_\_ **NUMBER: 800-582-7277 EXT** \_\_\_\_\_  
**HIGHLAND EMA** **NUMBER: 937-393-5880**  
**FAMILY DOCTOR:** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**PHARMACY** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**HOME MEDICAL EQUIP** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**PREFERRED HOSPITAL** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**FIRE DEPARTMENT:** **911**  
**HIGHLAND COUNTY SHERIFF:** **NUMBER: 937-393-1421**  
**LOCAL POLICE:** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**RED CROSS:** **NUMBER: 800-255-7070**  
**LOCAL SHELTER** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**ANIMAL RESCUE HUMAN SOCIETY** **NUMBER: 937-393-2110**  
**FOUR SEASONS ANIMAL BOARDING** **NUMBER: 937-393-9611**  
**ELECTRIC COMPANY** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**GAS COMPANY** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**WATER COMPANY** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**PHONE COMPANY** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_

## LOCAL HOSPITALS

**ADENA MEDICAL CENTER** **740-779-7500**  
**CLINTON MEMORIAL HOSPITAL** **937-382-6611**  
**HIGHLAND DISTRICT HOSPITAL** **937-393-6100**

## NURSING AND REHABILITATION FACILITIES:

**CRESTWOOD NURSING CENTER** **937-393-6700**  
**HEARTH & CARE GREENWOOD** **937-981-3349**  
**HEARTLAND OF HILLSBORO** **937-393-5766**  
**LAURELS OF HILLSBORO** **937-393-1925**



I live in \_\_\_\_\_ township.

## ADDITIONAL NUMBERS

\_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
 \_\_\_\_\_ **NUMBER:** \_\_\_\_\_