



Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board

Health Passport (Traffic Light Assessment)



HOSPITAL INFORMATION

RED



Things you must know.

AMBER



Things which you should
know about me.

GREEN



Things I would
like to happen.

Name:.....

RED

Important Information about Me

Name:	GP:
Know as:	
Address:	Address:
Tel No:	Tel No:
Date of Birth:	

Next of Kin:	Relationship:	Tel No:
Carer:	Relationship:	Tel No:
Professionals Involved:	Relationship:	Tel No:
	Relationship:	Tel No:
Care Manager:		Tel No:
Religion:	Religious Requests:	

Current Medical Conditions:

Current Medication:

Brief Medical History:

Allergies:

Medical interventions:

Level of understanding:

Behaviours which may challenge or cause risk:

Completed by Relationship Date

AMBER

Things Which You Should Know about Me

Communication:

Understanding:

Medication:

Eating and Drinking:

Going to the toilet:

Seeing / hearing:

Moving around:

Personal Care:

Oral Care:

Level of Support:

Keeping safe:

Sleeping:

Pain:

Completed by:

Date:

Relationship:

GREEN



Things That Would Make My Stay More Enjoyable

Things I Like

Things I Don't Like

Completed by:

Date:

Relationship:

This Hospital Health Passport has been supplied by:
Paul Ridd Foundation,
19 Mardon Park, Baglan Energy Park, Port Talbot, SA12 7AX
Tel: 01639 820026 / 07437 013356 www.paulriddfoundation.org
Email: info@paulriddfoundation.org

