

# Health Profile

This document gives you information that will help you to provide healthcare for me. Please read it carefully and use the information it contains.

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My name is:

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I like to be known as:

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My date of birth is:

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In an emergency please contact:

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Date this form was completed

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A photo of me can be put here



# About My Health



My health needs (medical History):



Things I am allergic to:



Tablets or medicine that I take:



The support I need to take my tablets or medicine:



How I will show you or tell you I am in pain or unwell:

# How I need you to support me (Including any reasonable adjustments I may need)



How I need you to support me:

# How I need you to support me continued



How we can best communicate:



Other important things I would like you to know about me:



Name of person completing this form:



# Proffil Iechyd

Mae'r ddogfen hon yn rhoi gwybodaeth i chi bydd yn eich helpu i ddarparu gofal iechyd i mi.

Darllenwch yn ofalus a defnyddiwch y wybodaeth sydd ynddo os gwelwch yn dda.

Fy enw i yw:

Dwi'n hoffi cael fy  
adnabod fel:

Fy dyddiad geni yw:

Mewn argyfwng  
cysylltwch â:

Dyddiad y cwblhawyd y  
ffurflen hon

Gellir rhoi llun ohonof yma



# Am fy iechyd



Fy anghenion iechyd (hanes meddygol) :



Pethau mae gen i alergedd i:



Tabledi neu feddyginiaeth rydw i'n eu cymryd:



Y gefnogaeth sydd ei hangen arnaf i gymryd fy tabledi neu feddyginiaeth:



Sut y byddaf yn dangos i chi neu'n dweud wrthy ch fy mod i mewn poen neu'n sâl:

# Sut dwi angen i chi fy nghefnogi (Gan gynnwys unrhyw addasiadau rhesymol efallai y bydd angen)



Sut dwi angen chi i fy cefnogi:

# Sut dwi angen chi i fy cefnogi: Parhad



Y ffordd orau i ni gyfathrebu:



Pethau pwysig eraill yr hoffwn i chi eu gwybod  
amdanaf i:



Enw'r person sy'n llenwi'r ffurflen hon: