# Med Form 5

**This should be completed and displayed in prominent areas of the school**

 EMERGENCY PLANNING

1. Dial **999**
2. Ask for an **ambulance** and be ready with the following information:
3. Give your **name**
4. The school **telephone number**
5. Give brief description of **pupil’s symptoms**
6. Give your **location** as follows; (insert school address and postcode)
7. Give exact **location in the school** (insert brief description)
8. Inform Ambulance Control of the **best entrance** and state that the crew will be met and taken to