I have sustained a brain injury.

Name: ________________________________
Address: ______________________________
Telephone: ____________________________
Emergency Contact: ____________________
Emergency Phone: ______________________

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Symptoms directly attributed to my injury may include:
- Poor coordination, balance, muscle control, or atypical gait
- Impaired speech, vision, hearing, understanding, or memory
- Confusion, disorientation, dizziness, or distractibility
- Delayed communication, processing, or response times
- Agitation, irritability, restlessness, impatience, or anxiety
- Lack of planning, judgment, insight, or reasoning
- Disinhibition, impulsivity, or otherwise inappropriate behavior
- Inability to control anger, aggression, or explosive behavior
- Seizures

Please exercise due courtesy and patience, and assist me during crisis by calling the Emergency Contact number on the back of this card.

For brain injury information, visit https://biaid.org/