

## **LUPUS FOUNDATION OF JAMAICA**

## **LFJ COVID19 READINESS CHECKLIST**

| Things   | to have at home                                  |          |  |
|----------|--|----------|--|
|          | Cleaning Items (liquid soap, alcohol,            | Things   | to take when going out:                |
|          | bleach/peroxide)                                 |          | facemask                               |
|          | Water  |          | small bottle of alcohol/hand sanitiser |
|          | Nonperishable food items (Make a list)           |          | tissue                                 |
|          | Clean change of clothes                          |          | water/snacks                           |
|          | Emergency Money                                  |          |  |
| Medica   | al Information and Supplies                      |          |  |
|          | Your prescribed medications (up to 3 mo availa   | able)    |  |
|          | Panadol  |          |  |
|          | List of Medical Conditions                       |          |  |
|          | List of My Medications                           |          |  |
|          | Name of My Doctor/Clinic                         |          |  |
|          | Appointment Cards/Medical Record Number          |          |  |
|          | A recent blood test result                       |          |  |
| Import   | ant Contacts (Emergency)                         |          |  |
| •        | Family Member/Emergency Contact                  |          |  |
|          | #1   | # 2      |  |
| •        | My nearest Police Station: NAME                  |          |  |
| •        | Doctor's Office/Clinic NAME                      |          |  |
| •        | Pharmacy NAME                                    |          |  |
| •        | MOHW Covid19 Hotline 8886635683/8887547          |          |  |
|          | Nearest Hospital NAME                            |          | number                                 |
| •        | Taxi Driver # NAME                               |          |  |
| •        | Ambulance # NAME                                 |          |  |
| •        | Local Pastor/Church contact NAME                 |          |  |
| Identify | y specific persons in your support network to he | ln vou w | ith.                                   |
|          | Shopping for Groceries                           |          |  |
| •        | Prescription Refills                             |          |  |
| •        | Take you to the doctor                           |          |  |
| •        | Person to call when feeling stressed             |          |  |
| •        | Person to help you complete your Checklist       |          |  |
| •        | Other  |          |  |
| Other    | Contact info                                     |          |  |
| •        | Lupus Foundation of Jamaica Help Line 876778     | 3892     |  |
| •        | Other Numbers - PATH/Min Soc Sec 876-922-8       |          | Social Security Division               |
| -        | National Incurrence Cohema NIC (07C) 020 7144    | •        | Social Security Division,              |

## 0

- National Insurance Scheme NIS (876) 929-7144
- CARE Program <a href="https://www.wecare.gov.jm/">https://www.wecare.gov.jm/</a>
- Covid19 hotline 8886635683/8887547792/8765425998 covid19@moh.gov.jm

• News/Updates: <a href="http://www.jis.gov.jm">http://www.lupusfoundationjamaica.org</a>