



**IN CASE OF EMERGENCY**



**SAPF**

**SOUTH AFRICAN PORPHYRIA FOUNDATION**

**EMERGENCY MEDICAL CARD**

**THIS PATIENT HAS AN ACUTE PORPHYRIA  
EMERGENCY CONTACT & MEDICAL DETAILS - SEE OVERLEAF**

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# MEDICAL EMERGENCY CARD

IN THE EVENT OF AN EMERGENCY PLEASE NOTE FOLLOWING



**AVOID DRUGS**

**MEDICAL CONDITION**

**CONTACT PERSON**

**CELL PHONE**

**DOCTOR**

**CELL PHONE**