Please complete the required information below to obtain your personalized medical ID and MyInteractive Health Record (MyIHR). A unique login and pin will be emailed to you once your order has been processed. Your order will include an additional charm engraved with your MyIHR access information. Patient First and Last Name (Required) Patient Email Address (Required) Patient Address (Required)

City State

Zip Code

Patient Phone
$\qquad$
Patient Birth Date
HTC or Hematologist
-
$\qquad$

## Stainless Steel Flex



Silicone Band


Stainless Steel
Small Dog Tag Red


Front
Line l: $\qquad$ 13 Character Limit

Line 2: $\qquad$ 13 Character Limit

Line 3: $\qquad$ 13 Character Limit

## Back

Line l: MORE MED INFO
Line 2: M Y I H R . C O M OR
Line 3: $800-490-2400$
Line 4: U S E R : N A M E \#
Line 5: P | N : P I N \# \# \#

Front
Line 1: $\qquad$ 11 Character Limit

Line 2: $\qquad$ 11 Character Limit

Back
Line l: $\qquad$ 20 Character Limit

Line 2: $M$ ORE MED I NFO
Line 3: M Y I HR.COM OR
Line 4: $800-490-2400$
Line 5: U S E R : N A M E \#
Line 6: P । N: P | N \# \# \#

## Sleek Silicone Bracelet*



Line 4: P | N : P I N \# \# \#

Line 1: $M Y$ I HR.C OM OR
Line 2: $800-490-2400$
Line 3: US ER: N AME \#
$\square \mathrm{s}$
$\square \mathrm{M}$
( $7^{\prime \prime}$ )

( $8^{\prime \prime}$ $\square \times \mathrm{L}\left(9^{\prime \prime}\right)$

Stainless Steel
Classic Bracelet


Front
Line 1 : $\qquad$ 10 Character Limit

Line 2: $\qquad$ 13 Character Limit

Line 3: $\qquad$ 12 Character Limit

Line 4: $\qquad$ 13 Character Limit

Line 5: $\qquad$ 10 Character Limit

Back
Line 1: M O R E M E D I N F O
Line 2: $M Y$ I HR.COM OR
Line 3: $800-490-2400$
Line 4: US ER:NAME \#
Line 5: P | N: P | N \# \# \#
Front
Line l: $\qquad$ 15 Character Limit

Line 2: $\qquad$ 15 Character Limit

Line 3: $\qquad$ 15 Character Limit

Line 4: $\qquad$ 15 Character Limit

Back
$\qquad$
Line 2: $F$ O R MOREMED I CALINFO Line 3: M Y I HR.COM $800-490-2400$

Line 4: U S ER: NAME\# P I N: P I N \# \# \#

Small Stainless Steel
Classic Bracelet
$\square 5^{\prime \prime} \quad \square 6^{\prime \prime} \quad \square 7$ 7" $\square 8^{\prime \prime}$
$\square 9^{\prime \prime} \quad \square 10^{\prime \prime}$ 25 Character Limit

Adjustable 5.5" - 6.75"


Front Line 1: $\qquad$ 16 Character Limit
Line 2: $M Y$ I HR . C O M O R
Line 3: $800-490-2400$ Line 4: U S E R : N A M E \# Line 5: $P$ I $N: \quad P$ | $N$ \# \# \#
$\qquad$

Adjustable 5.5" - 6.75"

Front
Line 1: $\qquad$ 9 Character Limit

Line 2: $\qquad$ 11 Character Limit

Line 3: $\qquad$ 13 Character Limit

## Back

$\qquad$ 11 Character Limit

Line 2: $\qquad$ 13 Character Limit

Line 3: $\qquad$ 14 Character Limit

Line 4: M O R E M E D I N F O
Line 5: $M Y$ I $H R$. $C O M O R$
Line 6: $800-490-2400$
Line 7: $U S E R: N$ A M E \#
Line 8: $P$ I $N: \quad P$ I $N \# \# \#$

Front
Line 1: $\qquad$ 8 Character Limit

Line 2: $\qquad$ 10 Character Limit

## Back

Line 1: $\qquad$ 8 Character Limit

Line 2: M E D I N F O
Line 3: $M Y$ I HR. $C O M O R$
Line 4: $800-490-2400$
Line 5: U S E R : $\quad$ N A M E \#
Line 6: $P$ I $N: \quad P$ I N \# \# \#
Line 7: $\qquad$ 10 Character Limit

Line 8: $\qquad$ 8 Character Limit

To order one of each of the complimentary items below, please check which ones you would like to receive with your primary medical ID.


InCase ID*
(attaches to back of phone)



Charm (select one)

$\square$


Expandable Wallet Card

[^0]
[^0]:    *Engraving on InCase will be identical to the engraving you provided for your above primary medical ID.

