TEMPLATE G

Go-Bag Checklist

- ☐ Medications for several days, plus the medication list
- ☐ Copy of the File of Life
- ☐ Copies of ID, insurance cards, healthcare power of attorney, advance directive
- ☐ Glasses, hearing aids and batteries, dentures
- ☐ Phone, charger, charged power bank
- ☐ Water and food that doesn't need cooking
- ☐ Flashlight and batteries; battery or hand-crank radio
- ☐ First aid kit
- ☐ Change of clothes, incontinence supplies, toiletries, small blanket
- ☐ Cane or walker; oxygen; portable breathing machine
- ☐ Cash in small bills
- ☐ Master contact sheet
- ☐ Pet supplies

Last checked: _____ Medications expire: _____