

Emergency Preparedness Supplies for MEDIUM-CHAIN ACYL-CoA DEHYDROGENASE DEFICIENCY (MCADD)

- Metabolic geneticist name and contact information _____
- Dietitian name and contact information _____
- Primary care provider or pediatrician name and contact information _____
- Local hospital/emergency room name and contact information _____
- Pharmacy name and contact information _____
- Formula manufacturer name and contact information _____
- Formula prescription _____
- Medication manufacturer name and contact information _____
- Medication prescription _____

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|--|--|
| <input type="checkbox"/> Emergency letter with diagnosis and treatment plan from genetics clinic | <input type="checkbox"/> Argo cornstarch |
| <input type="checkbox"/> Carnitine | <input type="checkbox"/> Container for mixing with water, syringes or cups |
| <input type="checkbox"/> High carbohydrate food | <input type="checkbox"/> Solar-powered chargers |
| <input type="checkbox"/> Drinks containing sugar (Gatorade, Koolaid, etc.) | <input type="checkbox"/> Adapters for car chargers |
| | <input type="checkbox"/> Hand-powered radio |

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