

Donation Referral Information:

Please have the following information ready when you call:

- Patient's Name, Age and DOB
- Estimated Height and Weight
- Time of Death / Last Time Seen
- Relevant Medical History
- EMS Intervention?
 - If Yes: IV Fluids Given?
 - Name of EMS Agency?
- Legal Next of Kin—Name, Address, Primary and Secondary Phone Number
- Estimated Refrigeration Time
- Autopsy Scheduled? Yes or No
- Any Known Restrictions?

We respect your time and appreciate your effort — your support makes the gift of donation possible.



AMERICAN DONOR SERVICES

877.365.DON8 (3668)

24/7