# Coping with an emergency on placement information sheet

**UNIVERSITY OF BRIGHTON**

**SCHOOL OF HEALTH SCIENCES**

**BSc (Hons) Occupational Therapy**

**COPING WITH AN EMERGENCY WHILE ON PROFESSIONAL PRACTICE PLACEMENT**

**INFORMATION SHEET**

**This information is confidential. This form should be kept in a safe place.**

This information sheet should be completed by the student on the first day of the placement. Please ensure that a copy is given to the practice placement educator.

**If there is anything in the student’s behaviour, attitude or state of health that causes concern please contact the University immediately during office hours. Tel.: 01273 643772**

**Student’s name:**

**Student’s placement accommodation address:**

**Student’s daytime tel. number:**

**Student’s out of office hours tel. number:**

**Next of kin/person to be contacted in an emergency:**

**Tel. number of next of kin/person to be contacted in an emergency:**

**Name and address of local General Practitioner:**

**Details of any medical condition that may affect performance (in the interests of safety, students are strongly advised to give this information to their supervisor):**

Occupational Therapy Administration Office, University of Brighton

8.30am – 5.00pm (Monday – Thursday)

8.30am – 4.30pm (Friday) Tel.: 01273 643772

Placement educators may like to give the following details to the student in confidence on the condition that they are used only in case of an emergency, or they may like to make alternative arrangements

**Placement Educator’s name and telephone number (outside office hours):**

**Add any other relevant information:**