

3701-62-04

### DNR Comfort Care Wallet Identification Card

DNR Comfort Care       DNR Comfort Care Arrest  
 Name \_\_\_\_\_  
 Birthdate \_\_\_\_\_ Gender  M    F

Physician name \_\_\_\_\_  
 Physician phone \_\_\_\_\_  
 Other emergency phone \_\_\_\_\_  
  
 The person named on the front of this card may revoke  
 DNR Comfort Care status by destroying this card.