

Please complete the required information below to obtain your personalized medical ID and MyInteractive Health Record (MyIHR). A unique login and pin will be emailed to you once your order has been processed.

**Your order will include an additional charm engraved with your MyIHR access information.**

**Patient First and Last Name (Required)**

**Patient Email Address (Required)**

**Patient Address (Required)**

**City**

**State**

**Zip Code**

Patient Phone

HTC or Hematologist Phone Number

Patient Birth Date

HTC or Hematologist

Health Professional Completing Form

## Stainless Steel Flex



### NATO Band

Blue/Pink  Blue/Red  Multicolor  Blue/Green/Red

### Silicone Band

Black  Blue  Red  White  Pink  Purple

S (6")  M (6.75")  L (7.5")  XL (8.5")

## Stainless Steel Small Dog Tag Red



18"  20"  24"  27"

### Front

Line 1: \_\_\_\_\_

Line 2: \_\_\_\_\_

Line 3: \_\_\_\_\_

### Back

Line 1: M O R E M E D I N F O

Line 2: M Y I H R . C O M O R

Line 3: 8 0 0 - 4 9 0 - 2 4 0 0

Line 4: U S E R : N A M E #

Line 5: P I N : P I N # # #

### Front

Line 1: \_\_\_\_\_

Line 2: \_\_\_\_\_

### Back

Line 1: \_\_\_\_\_

Line 2: M O R E M E D I N F O

Line 3: M Y I H R . C O M O R

Line 4: 8 0 0 - 4 9 0 - 2 4 0 0

Line 5: U S E R : N A M E #

Line 6: P I N : P I N # # #

**Stainless Steel  
Classic Bracelet**



- 7"    8"    9"    10"

**Front**

Line 1: \_\_\_\_\_  
 Line 2: \_\_\_\_\_  
 Line 3: \_\_\_\_\_  
 Line 4: \_\_\_\_\_

**Back**

Line 1: \_\_\_\_\_  
 Line 2: F O R M O R E M E D I C A L I N F O \_\_\_\_\_  
 Line 3: M Y I H R . C O M 8 0 0 - 4 9 0 - 2 4 0 0 \_\_\_\_\_  
 Line 4: U S E R : N A M E # P I N : P I N # # # \_\_\_\_\_

**Small Stainless Steel  
Classic Bracelet**



- 5"    6"    7"    8"
- 9"    10"

**Front**

Line 1: \_\_\_\_\_  
 Line 2: \_\_\_\_\_  
 Line 3: \_\_\_\_\_  
 Line 4: \_\_\_\_\_  
 Line 5: \_\_\_\_\_

**Back**

Line 1: M O R E M E D I N F O \_\_\_\_\_  
 Line 2: M Y I H R . C O M O R \_\_\_\_\_  
 Line 3: 8 0 0 - 4 9 0 - 2 4 0 0 \_\_\_\_\_  
 Line 4: U S E R : N A M E # \_\_\_\_\_  
 Line 5: P I N : P I N # # # \_\_\_\_\_

**Sleek Silicone Bracelet\***



- Black   Blue   Red   White   Pink   Purple
- 
- S (6")    M (7")    L (8")    XL (9")

**Front**

Line 1: M Y I H R . C O M O R \_\_\_\_\_  
 Line 2: 8 0 0 - 4 9 0 - 2 4 0 0 \_\_\_\_\_  
 Line 3: U S E R : N A M E # \_\_\_\_\_  
 Line 4: P I N : P I N # # # \_\_\_\_\_

**Action Bracelet**

Adjustable 5.5" - 6.75"



- Dolphin   Floral Butterfly   Dinosaur   Super Star
- 

**Front**

Line 1: \_\_\_\_\_  
 Line 2: M Y I H R . C O M O R \_\_\_\_\_  
 Line 3: 8 0 0 - 4 9 0 - 2 4 0 0 \_\_\_\_\_  
 Line 4: U S E R : N A M E # \_\_\_\_\_  
 Line 5: P I N : P I N # # # \_\_\_\_\_

\*ID with MyHR will not allow for additional personalized engraving space.



**Stainless Steel Classic Necklace**

- 18"     24"
- 22"     27"

**Front**

Line 1: \_\_\_\_\_

Line 2: \_\_\_\_\_

Line 3: \_\_\_\_\_

**Back**

Line 1: \_\_\_\_\_

Line 2: \_\_\_\_\_

Line 3: \_\_\_\_\_

Line 4: M O R E M E D I N F O \_\_\_\_\_

Line 5: M Y I H R . C O M O R \_\_\_\_\_

Line 6: 8 0 0 - 4 9 0 - 2 4 0 0 \_\_\_\_\_

Line 7: U S E R : N A M E # \_\_\_\_\_

Line 8: P I N : P I N # # # \_\_\_\_\_



**Small Stainless Steel Classic Necklace**

- 18"     24"
- 20"     27"

**Front**

Line 1: \_\_\_\_\_

Line 2: \_\_\_\_\_

**Back**

Line 1: \_\_\_\_\_

Line 2: M E D I N F O \_\_\_\_\_

Line 3: M Y I H R . C O M O R \_\_\_\_\_

Line 4: 8 0 0 - 4 9 0 - 2 4 0 0 \_\_\_\_\_

Line 5: U S E R : N A M E # \_\_\_\_\_

Line 6: P I N : P I N # # # \_\_\_\_\_

Line 7: \_\_\_\_\_

Line 8: \_\_\_\_\_

**To order one of each of the complimentary items below, please check which ones you would like to receive with your primary medical ID.**



InCase ID\*  
(attaches to back of phone)



Charm  
(select one)



Expandable Wallet Card

*\*Engraving on InCase will be identical to the engraving you provided for your above primary medical ID.*