



Organ donor card

Organ donations can save lives: Organs, tissue and cells that are removed and transplanted after death help other people to overcome severe health impairments or life-threatening diseases.

An organ donor card allows you to specify in writing what is to be done with your body after you die. This document ensures that your wishes are binding, even after your death: You alone decide.

If you change your mind regarding organ donation, please complete a new organ donor card and destroy the old one.

<p>IMPORTANT TELEPHONE NUMBERS</p> <table border="0"> <tr> <td>Ambulance</td> <td>144</td> <td>Police</td> <td>117</td> </tr> <tr> <td>Rega</td> <td>1414</td> <td>Fire service</td> <td>118</td> </tr> <tr> <td>Tox Institute</td> <td>145</td> <td></td> <td></td> </tr> </table> <p>Family doctor:</p> <p>Telephone number:</p>	Ambulance	144	Police	117	Rega	1414	Fire service	118	Tox Institute	145			<p style="text-align: right;">HIRSLANDEN </p> <p style="text-align: center;">ORGAN DONOR CARD</p> <div style="text-align: right;">  </div>
Ambulance	144	Police	117										
Rega	1414	Fire service	118										
Tox Institute	145												
<p><input type="checkbox"/> No, I object to the removal of my organs, tissue and cells.</p> <p>or:</p> <p>Telephone:</p> <p>Postcode / City:</p> <p>Street:</p> <p>First name / Last name:</p> <p>representative:</p> <p><input type="checkbox"/> I cede the decision about organ donation to the following</p> <p>or:</p>	<p><input type="checkbox"/> Other tissue or cells</p> <p><input type="checkbox"/> Pancreas <input type="checkbox"/> Corneas <input type="checkbox"/> Heart valves and blood vessels</p> <p><input type="checkbox"/> Heart <input type="checkbox"/> Lungs <input type="checkbox"/> Liver <input type="checkbox"/> Kidneys <input type="checkbox"/> Small intestine</p> <p><input type="checkbox"/> Yes, I consent to the following removals and the associated preparatory procedures:</p> <p>or:</p> <p><input type="checkbox"/> Yes, I consent to the removal of any organs, tissue or cells and the associated preparatory procedures.</p> <p>If organ, tissue or cell donation is a viable option after my death, my wishes are as follows:</p> <p>Signature:</p> <p>Date of birth:</p> <p>First name / Last name:</p>												

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Cut along the dotted line

