

## NYC Poison Control Center--Materials Request Form

Please complete the following information. Fax the completed form to the NYC Poison Center at 212-447-8223. You may also order materials via telephone by calling 212-447-2666. All information is free of charge.

<b>Name of Product</b>	<b>Languages Available</b>	<b>Quantity Requested</b>	<b>Language Requested</b>
<i>Telephone Stickers</i>			
Telephone Stickers 212-POISONS, 212-VENENOS			
Telephone Stickers Poison Help 800-222-1222			
<i>Magnets</i>			
Poison Help 800-222-1222			
<i>Brochures</i>			
Call Your Poison Control Center- You Might Save a Life	English Spanish Creole Russian Chinese		
You Can Poison Proof Your Home	English Spanish Creole Russian Chinese		
You Can Prevent Carbon Monoxide Poisoning	English Spanish Creole Russian Chinese		
You Can Prevent Plant Poisonings	English Spanish Creole Russian Chinese		
Your Poison Center	English Spanish		
<i>Medicine Safety Brochures</i>			
Learning About Your Medicine	English Spanish Creole Russian Chinese Bengali		
Medicine Safety	English Spanish Creole Russian		

	<b>Chinese Bengali</b>		
Your Over-the-Counter Medicine	<b>English Spanish Creole Russian Chinese Bengali</b>		
Your Prescription Medicine	<b>English Spanish Creole Russian Chinese Bengali</b>		
Vitamins, Herbals, and Minerals	<b>English Spanish Creole Russian Chinese Bengali</b>		
Your Medical Appointment	<b>English Spanish Creole Russian Chinese Bengali</b>		
<b><i>Curriculum</i></b>			
K-6 Curriculum	<b>English</b>		
<b><i>Fact Sheets</i></b>			
Poison Lookout Checklist	<b>English Spanish</b>		
Emergency Action	<b>English/Spanish</b>		
Medicines: Use Them Safely	<b>English</b>		
<b><i>Posters</i></b>			
Candy is not Medicine Look Alike Poster	<b>English Spanish</b>		
<b><i>Videos</i></b>			
Spike (video for children)	<b>English</b>		
Poison Prevention (adults)	<b>English Spanish</b>		

**Your Name** \_\_\_\_\_  
**Title** \_\_\_\_\_  
**Organization** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_  
**Telephone Number** \_\_\_\_\_ **Fax** \_\_\_\_\_  
**Email** \_\_\_\_\_

NYC PCC Use Only  Date received _____ Completed by _____ Entered in Toxicall _____
---