Medication List- Information for Patients

In an effort to provide better and safer care for you we are making a priority for all patients to have an up to date medication list on the chart and a copy given to you for your use.

The many reasons to have a current medication list:

- Bring this on visits to other doctors if referred
- Use this as an aid in helping you remember your medicines
- Help you understand why you are on certain medicines
- Help us help you minimize your number of medicines
- Help us identify drug interactions and over the counter medicine interactions
- Help us mutually find the best cost effective medicines for your health problems

If you do not know what you are on, what the medicines are for, the doses, and the major side effects—this is not safe and we need your help to remedy it.

If you cannot accurately fill this out please bring ALL your medicines to your next visit.

*While you are waiting for your doctor please fill this out as best you can. Your doctor or nurse will assist if you need help.*

Request a copy when you leave.

Keep us posted of changes and we will update your medication list.
Medication List

Name: ___________________  Doctor: ___________________

Please list all prescriptions, over-the-counter medicines, vitamins, herbs, dietary supplements, oxygen, inhalers and homeopathic remedies.

<table>
<thead>
<tr>
<th>Medication Name</th>
<th>Dose (mg, drops, etc)</th>
<th>When Taken (daily, at bedtime, etc)</th>
<th>Reason for Taking (blood pressure, diabetes etc)</th>
<th>Stop Date</th>
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Allergies and reactions: (Please Describe):

UNIVERSAL MEDICATION FORM

You can help make your health care safer by keeping this list current.

Complete this form and keep it in your wallet.

Bring this form with you to any visit to a hospital, healthcare provider, pharmacist or doctor.

Reviewed or Updated: Please Date and Initial in the Boxes below.