

MEDICATION RECORD

Patient Name _____ Date _____

Prescribing Doctor's Name _____ Phone Number _____

Pharmacy Name/Address _____ Phone Number _____

Medication Allergies _____

Medication Information (Discuss with Your Doctor)

1. What is the Brand Name? _____
 2. What does this medication do? _____
 3. Why do I need to take this medication? _____
 4. Can I take the Generic version of this medication? _____
 5. When do I take this medication? How much? For how long? (Complete schedule on next page)
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Medication Instructions

(Read the Printed Information provided with the Medication)

(Ask the Pharmacist for Counseling)

1. Do I need to eat or drink with the medication? _____
2. Should I avoid any medications, food, alcohol or activities when taking this medication?

3. What should I do if I forget to take the medication? _____
4. Are there any other special instructions? _____
5. How will this medication make me feel? _____
6. How will I know if the medication is working? _____
7. Are there any side effects to look out for? _____
8. What should I do if I have a side effect? _____

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Medication Schedule (Discuss with Doctor)

Name of Medication _____ Color _____

Special Instructions? _____

Place a √ in the box to schedule medication.

Dose	Time	How much?	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
1	:								
2	:								
3	:								
4	:								
5	:								
6	:								

Refill Record (Complete Blanks and Write on Calendar)

This medication can be refilled every _____ days.

Month/Day/Year

Refill #1 Call Pharmacy on / /

Refill #4 Call Pharmacy on / /

Refill #2 Call Pharmacy on / /

Refill #5 Call Pharmacy on / /

Refill #3 Call Pharmacy on / /

Refill #6 Call Pharmacy on / /

Record of Medication Side Effects (Follow-up with Doctor)

Some medicines can interact with other medicines, foods, drinks or health conditions. Side effects are unplanned symptoms or feelings you have when taking a medicine. Examples of side effects are fatigue, dizziness, nausea or drowsiness.

Call your Doctor immediately if you are having a severe side effect or you feel like something is seriously wrong. Your Doctor may be able to offer tips to lower the side effects or suggest another medication. Write down your side effects below.
