

My Medication List

Hospitals and other health care facilities do not have your current list of medications automatically available. By keeping this information up to date and readily available for doctor visits or emergencies, you can help prevent potential problems with your medications and improve the quality of your health care.

Name: _____ Date of Birth: _____

Local Address: _____

Home Phone #: _____ Cell Phone #: _____

Height: _____ Weight: _____ lbs.

In Case of Emergency Call: _____

I am allergic to: (include drugs and food) _____

Primary Doctor's Name: _____

Pharmacy Name and Phone #: _____

All the medicines I am taking:
(include prescriptions, over the counter medications, herbs, vitamins, dietary supplements, etc.)

Drug Name	Dose	Directions	Used to Treat	Physician

