

**In order for medications to work properly they must be taken correctly.** Many things can affect how medications work:

**Diet** – Some foods impact the effectiveness or toxicity of medications.

**Adherence** – Take your medications exactly as directed by your healthcare providers. Do not change or stop your medications without talking to your providers.

**Other medications** – Drug-to-drug interactions are a concern. Some interactions may cause serious medical problems.

**Make sure that your healthcare provider knows exactly what drug(s) you are taking.** Include medicines you buy without a prescription and any dietary supplements such as vitamins, minerals and herbals. Use this form to write down what medications you are taking, the dosage, and when you take it. Be sure to keep this record up-to-date, and to keep a copy with you at all times, as well as a copy at home.

By providing your healthcare provider with this completed record during each of your appointments, you are ensuring that they are able to properly prescribe medications for you.

Your Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Healthcare  
Provider's Name \_\_\_\_\_

Healthcare Provider's  
Phone Number \_\_\_\_\_

Allergies \_\_\_\_\_



## My Current Medications & Supplements

1. Name of Drug	Dose	When Taken
2. Name of Drug	Dose	When Taken
3. Name of Drug	Dose	When Taken
4. Name of Drug	Dose	When Taken
5. Name of Drug	Dose	When Taken
6. Name of Drug	Dose	When Taken
7. Name of Drug	Dose	When Taken
8. Name of Drug	Dose	When Taken