

Medication and Supplements List

Name: _____ Date Revised: _____ Pharmacy Name & Phone #: _____

Physician & Phone: _____ Other Physician(s) Name and Phone #: _____

Instructions: Type onto this document or print and enter the information by hand. Change this document, as needed. Hints: Keep updated medication lists at the care receiver's home in a visible location, a copy with the caregiver at all times, photo with a smart phone keep in favorites or list app. Firefighters recommend keeping a copy of important documents in a sealed plastic bag in the freezer since it is fireproof and smokeproof.

Medication	Dosage <i>mg, etc</i>	Frequency	Purpose	Physician name or initials	Special Instruction: <i>start & stop dates, side effects, and other information</i>
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					



Provided courtesy of familycaregiversonline.net, a publicly funded program which also includes several virtual services. Permission is granted to use this document and change it to meet the needs of the caregiver and the person taking medications. This is not intended to take the place of forms and advice provided by a physician or qualified health care provider.

Medication and Supplements List

Supplements

Discuss supplements with all physicians providing care. Some supplements interact with prescribed medications and can cause harm or make the medication less effective.

Supplements include products like vitamins, minerals, and herbal extracts. The FDA (Federal Drug Safety Administration) does not regulate the safety or effectiveness of supplements as strictly as drugs. It is important to practice reading labels carefully.

Visit this Healthline link [How to read Supplement Labels](https://www.healthline.com/nutrition/how-to-read-supplement-labels - regulations) <https://www.healthline.com/nutrition/how-to-read-supplement-labels - regulations>

Supplement Name <i>such as multi-vitamin</i>	Serving Size	Frequency you take	Percent Daily Value (%DV) Nutrient Content	Reason you take
1.				
2.				
3.				
4.				
5.				



Provided courtesy of familycaregiversonline.net, a publicly funded program which also includes several virtual services. Permission is granted to use this document and change it to meet the needs of the caregiver and the person taking medications. This is not intended to take the place of forms and advice provided by a physician or qualified health care provider.

Medication and Supplements List

Entering Medications Example (delete this page after reading)

Medication	Dosage <i>mg, etc</i>	Frequency	Purpose	Physician name or initials	Special Instruction: <i>start & stop dates, side effects, and other information</i>
Metformin	500 mg	Morning and evening	Diabetes	Smith	Since 2011; dosage increased 2019

Discuss daily use of **aspirin** with your physician, as not all research and physicians believe daily use is beneficial:
<https://www.heart.org/en/news/2019/03/18/avoid-daily-aspirin-unless-your-doctor-prescribes-it-new-guidelines-advise>



Provided courtesy of familycaregiversonline.net, a publicly funded program which also includes several virtual services. Permission is granted to use this document and change it to meet the needs of the caregiver and the person taking medications. This is not intended to take the place of forms and advice provided by a physician or qualified health care provider.