My Medication List

Medication Name	Dosage	# of Times taken/day	Reason for Medication	Type	
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement
				☐ Rx ☐ OTC	☐ Vitamin ☐ Supplement

Allergies: Make a note of any allergies you have, especially medication-related allergies as well as any sensitivities or reactions you've had to prescription or OTC medications.

Allergy to:	Reaction:

For more information, visit: CrystalRunHealthcare.com