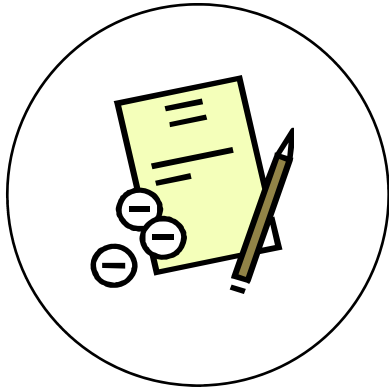


Does our practice have an updated list of all your medicines?



Using the template form inside this brochure, please write down the name and dose of every medicine that you take. On this list, include prescriptions, over-the-counter medicines, herbals, supplements, minerals, ointments and vitamins. Compare this list with what we have in your medical record file.

Now take it one step further: Update this list every time you start or stop taking a medicine. Update us each time you visit.

For more information or a different template form, visit:

www.mymedicinelist.org



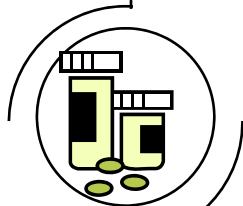
www.mymedicinelist.org

What we don't know about your medicines could harm you.

Medicines are:

- Substances that are meant to change the way your body deals with an illness or injury, or to maintain your health and well-being
- Prescriptions, over-the-counter medicines, herbals, supplements, and vitamins

Medicines are not only what we prescribe.



	What I'm taking	Form	Dosage	How Much and When	Use	Start/Stop Dates	Notes, Directions, Reasons for Use
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** Be sure to include ALL prescription drugs over-the-counter drugs, vitamins, and herbal supplements.*

Ex:	Aspirin	Pill	325 mg.	1-2 pills when needed for pain	Occasionally for headache	1/20/09-ongoing	A circular logo with a blue border. Inside, a hand holds a white card that says 'MY MEDICINE LIST'. The text 'Carry And Share It' is written in a curve at the top, and 'A List Can Save Your Life!' is written in a curve at the bottom.
1							
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