

My Medicine Schedule

Taking medicines as prescribed is important for your health. Use this sheet to keep track of your medicines and when to take them. Include all prescriptions, over-the-counter medications, vitamins, herbal supplements, and dietary supplements. If there are changes to your medicines, update your list. Talk to your doctor before you stop taking medicines, start taking new ones, or change the amount you are taking. Bring this list to all doctor appointments. If you have questions about your medications or need help filling out this sheet, call your doctor or reach out to the Healthmap Solutions Care Navigation team at **1-800-481-0474**.

Name: _____ Last updated on: _____

Please list your allergies: _____

Please list your pharmacy name and phone number: _____

MEDICATION DOSE AND FREQUENCY	PURPOSE	BEFORE BREAKFAST 	MORNING 	LUNCH TIME 	EVENING 	BEDTIME 	OTHER 	SPECIAL INSTRUCTIONS



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