

## QUESTIONS FOR MY DOCTOR OR PHARMICIST:

1. Please check my current medications list on reverse. Will this new medicine interact with other medicines I use?

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2. What does this medicine do and how should I use it?

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3. Are any side effects likely? Should I expect to feel any different while taking this medicine? What can I do to reduce the chance of side effects?

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4. When should the medicine be reviewed or stopped?

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5. May I increase or decrease the dose? If so, under what circumstances?

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6. What exactly does "as needed" mean?

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7. May I ever change dosage times, or skip days? If so, under what circumstances?

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8. What should I do if I miss a dose?

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9. What food, drink, activity or storage might affect how well this medicine works?

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10. Is it OK to lie down after taking this medication?

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11. Is a Physician's Insert available for this drug? (If so, ask for and hold on to this reference in case any uncommon side effects emerge.)

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IF YOU HAVE TROUBLE READING YOUR MEDICATION LABEL ASK YOUR DOCTOR TO REQUEST THAT THE PHARMACIST PRINT THE DIRECTIONS IN LARGE TYPE.

List any medications that you are allergic to\_\_\_\_\_

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Name \_\_\_\_\_



## CURRENT MEDICATIONS LIST

**\*Be sure to include over the counter medications and herbal remedies\***

Medication	Dosage	Number of Pills per dose	Reason for Taking	When to Take	Questions or Comments