

My Medications List

Use this chart to keep track of all your medications. Any time your health care team prescribes a medication, tells you to stop one, or changes a dosage, record it here. Share this list with any new health care team member you visit. [Find more forms online.](#)

Date	Generic / Brand Name	Purpose	Strength (dose)	Quantity per Dose	How Often to Take

List all over-the-counter medications, vitamins, minerals, herbs, and supplements you take: