BRT CLINICAL
NURSING SERVICES, INC.
Phone: (951) 386-9489
Email: info@brtclinical.com

MEDICATION LIST

Patient Name:	Date of Birth:	Date Updated:
Allergies:		

Medication / Strength	Dose	Route	Frequency / Time	Reason / Indication	Prescriber

Pharmacy Name / Phone:	Medication Notes / Special Instructions:

Bring this medication list to medical appointments and update it whenever a medication is started, stopped, or changed. Include prescription medications, over-the-counter medications, vitamins, supplements, injections, inhalers, and topical medications.