

List of medications

Personal details

Name	Personal identity code
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Medication you take regularly

Medication you take regularly	Dosage	Where is the medication prescribed from (if not from the health centre)?

Medication that you take as needed or occasionally

Medication that you take as needed or occasionally	Dosage	How long have you been taking the medicine for?

Vitamins, natural health products and other similar products you take

Vitamins, natural health products and other similar products you take	Dosage	How long have you been taking the product in question?