



Medications Log

Use this chart to list all of the medications your child's takes, even those not prescribed by a doctor. Include all vitamins, herbs and supplements.

If you cannot do this or are unsure of the dosage, bring **ALL** of your child's medications or take a **PICTURE** of the front and back of the bottle to show the doctor. Some medications do not work well together or may not be needed at all.

Name of medication	Dosage (Ex: two 40mg pills day & night)	How long has your child used this?	What does your child take it for?	If Rx, who prescribed it?

Allergies

Does your child have allergies? Yes _____ No

If yes, please list **ALL** allergies (ex. aspirin, latex gloves, gluten, pollen)?
