Medication Matters!

Name _____

Take me to a UnityPoint Health® hospital

Pharmacy Information

Primary Pharmacy _____

Pharmacy Phone _____

Doctor Information

Doctor _____

Doctor's Phone _____

Grundy County Memorial Hospital
UnityPoint Health

Personal Health Record

Name _____

Date of Birth _____

Doctor _____

Doctor's Phone _____

Emergency Contact

Name _____

Phone _____

My Health Conditions Include:

☐ Arthritis	☐ Stroke	☐ Heart Problems	☐ Liver Problems	☐ Dentures/partials	☐ Defibrillator
☐ Diabetes	☐ Seizures	☐ High Blood Pressure	☐ Joint Replacement	☐ Lens Implant	☐ Hearing Aid
☐ Cancer	☐ Lung Problems	☐ Kidney Problems	☐ Contact Lenses	☐ Pacemaker	☐ Other _____

Advance Directives I Have Completed: ☐ Living Will ☐ Durable Power of Attorney for Health Care ☐ Neither

Past Surgeries	Year

Allergies *(Medications, Foods, Latex, other)*	Reaction

Immunization Dates: Tetanus _____ Flu_____ Pneumonia_____

Medical Insurance Information

Primary Medical Insurance Name _____

Number _____

Secondary name/number _____

Medication Matters!

Update this card and keep it with you at all times. Remember to ask your doctor or pharmacist:

- What is the name of the medication and what is it supposed to do?
- How and when do I take it — and for how long?
- What foods, drinks other medicines or activities should I avoid while taking this medication?
- Are there any side effects? What should I do if they occur?
- Is there written information available about the drug?

Personal Medication Record

For _____ Phone _____

Height _____ Weight _____

- List all medications you are taking, **including** over-the-counter drugs, supplements, herbal products, eye drops, inhalers, oxygen, etc.
- Do not list medications you will be on for less than two weeks (for example antibiotics).
- Use a pencil so changes can be made.

Date *(added/changed)*	**Medication Name**	**Strength/Dosage**	**How Often**	**Why do you take it?**	**Prescribing physician**

Tips for your medication safety:

- Use only one pharmacy when possible.
- Always present this card at your doctor's office to be reviewed and updated.
- Always have your pharmacist review this card when a new prescription is added.
- Always carry this card with you.
- Use pencil for easy changes.
- Always keep this card current!

To learn more or download additional copies go to: unitypoint.org/grundycounty/medication-matters.

Grundy County Memorial Hospital
UnityPoint Health

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