

**UNIVERSAL MEDICATION FORM INSTRUCTION SHEET**

0, 2, 4, 6, 8, 10, 12, 14, 16, 18, 20, 22, 24, 26, 28, 30, 32, 34, 36, 38, 40, 42, 44, 46, 48, 50, 52, 54, 56, 58, 60, 62, 64, 66, 68, 70, 72, 74, 76, 78, 80, 82, 84, 86, 88, 90, 92, 94, 96, 98, 100

1. **ALWAYS KEEP THIS FORM WITH YOU.** You may want to fold it and keep it in your wallet



Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

**Indications (examples: aspirin, antacids) and**

**keep your form up-to-date.**

Indications	Doctors Name