American Stroke Association.
A division of the
American Heart Association.

MEDICINE CHART

Name: _____ Date: _____

NAME OF MEDICINE	COLOR	WHAT'S IT FOR?	DOSE	HOW OFTEN & WHAT TIME	PRESCRIBING DOCTOR	PHARMACY PHONE NO.	SPECIAL INSTRUCTIONS	REFILL DATE
EXAMPLE Aspirin	white	blood thinner	1 pill	once daily at night	Dr. Jones	650-555-1234	take with food	9/1/19

Learn more about stroke at strokeassociation.org.

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