

823 Belknap Street Suite 104 Superior WI 54880 Phone: 715-394-6355

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NAME:	Date of Birth:	

Medication List

Your insurance company requires that we maintain an updated list of medications you take. Medications include:

- Prescriptions, Over-the-Counter Medications, Herbals, Vitamins, Minerals and/or Dietary Supplements.
- Medication's name
- Dosage (how much you take i.e. 2000 mg)
- Frequency (how many per day)
- Administered route (by mouth, injection, etc.)

You may find it easier to call your pharmacy to get a listing. If you do not have a listing from your pharmacy, please fill out the following form:

NAME	DOSAGE	FREQUENCY	ADMINISTERED	
			ROUTE	
			KUUIE	
Ex: aspirin	80 mg	1 x per day	oral	
	3	1 5		