



My medications/supplements




It is important that you keep track of all the medications (both prescribed and over-the-counter [OTC]) and supplements (either tablet or liquid) you are taking. If there are some that you are no longer taking, you can also note them here for a complete record. Provide as much detail as possible.




Name of medication/supplement	Prescribed or OTC	Reason for taking
Who prescribed/recommended	How much to take	How often to take it
Start date	Notes (for example, stop date and reason for stopping)	




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More sheets can be downloaded from www.StomachCancerResources.com or www.DebbiesDream.org.