Please bring ALL your medicines to your next appointment.

•	• •
☐ Prescription medicines.	☐ Inhalers.
☐ Medicines you buy without	☐ Injections.
a prescription (like Tylenol®	☐ Vitamins and herbal
or cold medicine).	medicines.
☐ Ointments or creams.	☐ Any questions you have
☐ Bottles of drops	about your medicines

Your next appointment is

Mon. Tue. Wed. Thur. Fri. Sat.

Date:______AM[] PM[]