

# My Medication List

Last Updated: \_\_\_\_\_  
Date & Initials

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Pharmacy & Phone: \_\_\_\_\_

Allergies and Reactions:

List all prescriptions, over-the-counter medicines, vitamins, herbs, dietary supplements, oxygen, inhalers and homeopathic remedies.

Medication Name & Date Started	Dose (mg, units, drops)	When Taken (daily, at bedtime, etc..)	Reason for Taking (blood pressure, diabetes, etc...)	Prescribing Healthcare Provider & Phone

Complete this form and keep it in your Red Files at all times. Update your medication information on this form often. Keep your Red File on your refrigerator for first responders and emergency personal. Bring your Red File with you to any visit to the hospital or emergency care.

Access this form and other Operation Red File forms at [www.eastidahoaging.com/operationredfile](http://www.eastidahoaging.com/operationredfile)  
Operation Red File is presented by the Eastern Idaho Area Agency on Aging at EICAP. 208.522.5391



NEED HELP WITH YOUR PRESCRIPTION COSTS? CALL 208.522.5391 TO FIND OUT MORE ABOUT A FEDERAL LIMITED INCOME RX SUBSIDY PROGRAM CALLED "EXTRA HELP".

