— CALL 911 —
STROKE & HEART ATTACK ARE EMERGENCIES!

BLOOD PRESSURE GOAL: _____

_____

ALLERGIES: _____

NAME: _____

MEDICATIONS

MARQUETTE GENERAL HEALTH SYSTEM

Your doctor may order you a new drug as part of your treatment. Your health care providers *need to know* what medications you are taking. This includes both **prescription and non-prescription (over-the-counter) medications such as sleeping aids, vitamins, laxatives, dietary supplements, herbal preparations, and antacids**. Sometimes it is hard to recall details (such as a medicine dose).

Fill out this card, **fold it** and **carry it** with you for stressful times such as going to the hospital or seeing your doctor can cause you to forget what medicines you are taking. Keep it up-to-date by noting changes and dates.

Help us provide you with the best care!

Thank you,
Your Health Care Providers

NAME OF MEDICINE	DOSE	TIMES TAKEN	REASON

These cards are provided free by calling the
Health Information Center at
906-225-4950 or 1-800-562-9753, ext. 4950.

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