

Me and My Medications - Module 5 Worksheet

Fill in the blanks. A prescription will tell you.....

Word Bank:

many when name what much why

- The medication's _____.
- _____ you are taking the medication.
- _____ the medication is for.
- _____ to take it (time).
- How _____ to take.
- How _____ days it should be taken.



Circle the tips you might use to help you remember to take your medications:

- A. Set a timer
- B. Have someone remind you
- C. Take your medication(s) at the same time every day
- D. Use a pill box

What is the first thing you should do if your stomach hurts after taking your medication? (Circle your answer)



Call your doctor immediately

go to the hospital



Call 9-1-1

True or False?

- My medication label says I should take my medication with food in the morning. I should take my medication with breakfast.

True

False

- I can share my medications with anyone I want to.

True

False

- I forgot to take my medications, but that is OK. I will just skip a day.

True

False

- My medication label says to take 1 pill a day, but I can take more if I want to.

True

False

- I can't remember if I took my medication, but it doesn't matter.

True

False

- I should update my medication list when I get a new medication.

True

False

- I don't need to worry about what my medication label says. I can take my medication any time I want to.

True

False

- I have a rash and I think it might be from my medication. I should call my doctor right away.

True

False

