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
- go to the hospital
Me and My Medications - Module 5 Worksheet

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