

# INTERNATIONAL ALLIANCE OF ALS/MND ASSOCIATIONS 

Medicine Chart

## Source:

The forms in this document were adapted from the Alaska Department of Health publication: Get Ready! Alaska's emergency preparedness toolkit for people with disabilities.

## Medicine Chart

In the morning, I take:

| Name: | Dosage: | This looks like | How I take it: |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

With lunch, I take:

| Name: | Dosage: | This looks like | How I take it: |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

In the evening, I take:

| Name: | Dosage: | This looks like | How I take it: |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

```
Before bed, I take:
```

| Name: | Dosage: | This looks like | How I take it: |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Other medications I do not use every day:

| Name: Dosage: |  | This looks like | How I take it: |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Updated:__/__/_
*Be sure to update this form yearly.

