



**\*\*Comments**

*“The Annie”*

*Medication and Supplement Log*

*Medication for the week of:* \_\_\_\_\_

Allergies to Medications:

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MEDICATION / SUPPLEMENT	PRESCRIBING DOCTOR:	DOSAGE (mcgs/units)	FOOD (Y/N)	TIME OF DAY:	TIMES PER DAY:	GIVEN BY:	SUN	MON	TUES	WED	THUR	FRI	SAT

**\*\*Note symptoms of nausea, vomiting, diarrhea, constipation, headache, dizziness, drowsiness, fatigue, blurred vision, and any others, and report them to your doctor.**



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