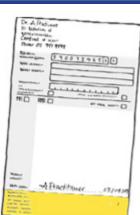
## Me and My Medications - Module 5 Worksheet

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)



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