Medication Log: _____ Month/Year _____

Care Recipient Name

Medication Name, Dose, Time	Day																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

Caregiver: Please initial the appropriate box as medications are taken by your care recipient. Make note of any medication-related problems or concerns on your daily log.

Instructions For Using a Monthly Medication Log

The monthly medication log is designed to permit a caregiver to see what medications are to be offered to your care recipient, and for the caregiver to record that medications were offered as ordered by the doctor. Following is an example of a properly completed medication log. The caregiver has initialed in the appropriate space for each dose taken:

Medication Name, Dose, Time	**Day**																														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
8 a.m:.Lescol XL, 80 mg .	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg									
8 a.m. Zanaflex 6 mg.	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg									
~~8 a.m. Celebrex 200mg.~~	cg	cg	cg	cg	cg	cg	cg	cg	cg	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8 a.m. multi-vitamin with minerals	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg									
8 p.m. Zanaflex 6 mg.	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg										
Every Tuesday: Actonel 35 mg		cg							cg							cg															

Note that in this example 4 medications/vitamins are taken in the morning, and one medication is repeated in the evening (the doctor stopped the Celebrex on the 10th. The responsible family member deleted it from the list and removed the pharmacy container and the remaining tablets). One medication is to be taken only once a week.

If you set up a bill box or medication dispenser for your caregiver to use, your Medication Log might look like this. This is more work and responsibility for the person setting up the medication dispenser, but is easier for hired caregivers and other family members to manage:

Medication Name, Dose, Time	**Day**																														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Breakfast	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg								
Lunch	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg								
Dinner	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg									
Bedtime	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg	cg									