

Med Card

Generic name: _____

Brand/trade name: _____

Class/Intended action: _____

Therapeutic use: _____

High alert: Yes No

Dosage and frequency:

| |
|--|
| |
|--|

Special instructions

[illegible]

Indications/reasons for use

[illegible]

Contraindications (precautions)

[illegible]

Nursing considerations

Side effects or complications

Minor:

Moderate:

Severe:

Patient education

[illegible]

Additional notes

[illegible]