

# Metformin Medication

## Patient Information

Patient Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Medical Record Number: \_\_\_\_\_

Date of Prescription: \_\_\_\_\_

Healthcare Provider: \_\_\_\_\_

## Medication Details

Medication Name: \_\_\_\_\_

Dosage Form: \_\_\_\_\_

Strength: \_\_\_\_\_

Route of Administration: \_\_\_\_\_

Dosage: \_\_\_\_\_

Frequency: \_\_\_\_\_

Duration: \_\_\_\_\_

## Pharmacological Action

Mechanism of Action

## Indications

## Contraindications

## Precautions

## Complications

Common Side Effects

Serious Side Effects

Drug Interactions

## Administration Instructions

Take with Food: \_\_\_\_\_

Dosage Timing: \_\_\_\_\_

Missed Dose Instructions:

\_\_\_\_\_

## Monitoring and Evaluation

Regular Blood Glucose Monitoring:

\_\_\_\_\_

Assessment of Side Effects:

\_\_\_\_\_

## Patient Education

Medication Purpose and Importance:

\_\_\_\_\_

Common Side Effects and When to Seek Medical Attention:

\_\_\_\_\_

Dietary and Lifestyle Recommendations:

\_\_\_\_\_

Importance of Medication Adherence:

\_\_\_\_\_

## Follow-up

Next Appointment Date: \_\_\_\_\_

Review of Medication Efficacy and Tolerance: