Medication List

HUDSON CENTER FOR DIGESTIVE HEALTH

Address: 534 AVENUE E SUITE 1A, Bayonne NJ 07002

Phone: 201-858-8444 Fax: 855-269-3270 Website:

Allergies

☐ NKA
☐ Others

Medication Being Taken Prior to Admission: (List all medications, OTC drugs, and herbal supplements.)

☐ Patient Takes no medications, OTC drugs, or herbal supplements on a routine basis
☐ OTC Drugs
☐ Herbal Supplements

Medication	Dose	Frequency	Indication	Last Dose (date/time)	Prescribing Physician

Source of Information: ☐ Patient ☐ Family Member ☐ Medication List

Medication List Confirmed by: _____

Date/Time: _____