

Physician-Approved Medication Log Form Sample

Keep track of your medications efficiently with this **physician-approved medication log form** sample. Designed to help patients and healthcare providers manage prescriptions accurately, it promotes clear communication and ensures proper dosage adherence. Use this template to maintain an organized record of all prescribed medications for improved health outcomes.

Patient Information

Patient Name:		Date of Birth:	
Physician Name:		Phone Number:	
Date:			

Medication Log

#	Medication Name	Dosage	Frequency	Route	Start Date	End Date	Prescribing Physician	Notes / Side Effects
1								
2								

Physician Approval

Physician Signature:		Date:	
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Note: Bring this form to every appointment and update it whenever there are changes to your medications.