

Circle Of Life: Cancer Education and Wellness

for American Indian and Alaska Native Communities

Appendix B: Medicine List

Name of drug*	Dose	Time(s) the drug is taken	What is the medicine for?	Who prescribed the medicine?	How long has this medicine been taken?	When should this medicine be stopped?

*Be sure to list everything you take. Include things like vitamins, herbs, or other supplements. Also list drugs you take “as needed,” or every now and then, and things like Tylenol or allergy medicines you get at the drug store.