



Campaign for Meds Management
INSPIRED BY YOU – IMPACTING PEOPLE EVERYWHERE

PATIENT/CAREGIVER MEDICATION MANAGEMENT CHECKLIST

An action plan
will help you
manage multiple
medications!



Lisa uses a spreadsheet to remind her when to give her daughter her different medications.

Dan uses pillboxes to help keep his 15 different medications organized.



INSTRUCTIONS

1. Go through this checklist and answer each question
2. Which items did you answer “No” to?
3. Go to the CMM Resource Center for tools you can use at home.
4. Ask your doctor or pharmacist for tools that can help with those items.

**If you are a caregiver, go through this checklist with the person you are helping.*

		YES	NO
1.	I have a complete and up-to-date list of my prescriptions, vitamins, and over-the-counter medications.	<input type="checkbox"/>	<input type="checkbox"/>
2.	I know why I take each medication.	<input type="checkbox"/>	<input type="checkbox"/>
3.	I know when I should take each medication.	<input type="checkbox"/>	<input type="checkbox"/>
4.	I know who to call if I have questions or need help with my medications.	<input type="checkbox"/>	<input type="checkbox"/>
5.	I know the main side effects to watch out for with each medication.	<input type="checkbox"/>	<input type="checkbox"/>
6.	I am confident I am not experiencing a side effect or allergy to my medications (rash, dizziness, upset stomach, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
7.	I am able to get my prescriptions when I need them.	<input type="checkbox"/>	<input type="checkbox"/>
8.	I can afford all of my prescriptions.	<input type="checkbox"/>	<input type="checkbox"/>
9.	I remember to take my medications as prescribed.	<input type="checkbox"/>	<input type="checkbox"/>
10.	I am physically able to take my medications without help.	<input type="checkbox"/>	<input type="checkbox"/>

✂ Fill this out & keep it with your meds, in your wallet, on your fridge, or in another handy place.

Your Name: _____

Doctor: _____

Name: _____

Pharmacist: _____

Name: _____

“In Case of Emergency” Contact: _____

Name: _____

Phone: _____

Phone: _____

Phone: _____

Want to look at tools that will help you manage your medications? Go to the online CMM Resource Center to get ideas for what you can do to successfully manage your medications.

But, don't forget to speak with your doctor or pharmacist. Let them know how you feel about your medication management plan. They can help you get tools that will work for you!



Campaign for Meds Management RESOURCE CENTER

Check out the CMM Resource Center at www.qioprogram.org/cmm for tools to help you overcome your specific challenges and create an action plan.

The CMM Resource Center includes:

- Medication management spreadsheet templates,
- Infographics on how to read prescription labels,
- Success stories from other medication users,
- Tools for overcoming different challenges,
- And so much more!

Never Hesitate to Ask Your Doctor or Pharmacist!

Make sure you get all the information you need about your medications.

- What is the list of medications I should be taking?
- Have some medications been added, or should I stop taking some medications?
- How do I take these medications and when should I take them?
- How long should I take this medication for?
- How do I know the medication is working?
- Are there side effects or allergies I should look out for?
- When should I come in to see the doctor next?

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