NEUROLOGY CENTER OF FAIRFAX, LTD.
Fairfax Office 3020 Hamaker Ct, Suite 400, Fairfax, VA 22031
Reston Office 1830 Town Center Dr, Suite 305, Reston, VA 20190
Office Phone 703.876.0800 | Fax 703.876.0866
After hours emergency 703.755.1450

Medication list

Name: _____ D.O.B.:_____ Date: _____

Mail order pharmacies

Name	Address	Phone	Fax
_____	_____	_____	_____
_____	_____	_____	_____

Local pharmacies

Name	Address	Phone	Fax
_____	_____	_____	_____
_____	_____	_____	_____

Prescriptions

If you need additional space, continue on the next page

Name	Dosage	Frequency	Reason for Taking	Prescribed by
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Vitamins

Name	Dosage	Frequency
_____	_____	_____
_____	_____	_____

Over the counter medications

Name	Dosage	Frequency	Reason
_____	_____	_____	_____
_____	_____	_____	_____

Allergies

Name	Severity
_____	_____
_____	_____

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Additional Medications/Vitamins/OTC:

Name	Dosage	Frequency	Reason for Taking	Prescribed by