

PARTICIPANT'S WORKSHEET

Name _____ Date _____

1. What are the benefits of using medicines safely?

2. Check the appropriate box(es) for each statement below.

Statement	Prescription Medicines	Over-the-Counter (OTC) Medicines	Dietary Supplements & Herbal Remedies
Are ordered by a healthcare professional			
May interact with another drug and/or food			
Should be reviewed by you and your healthcare team			
Are only available at a pharmacy			
Are self-prescribed – you decide what you need			
Should only be taken as directed			
Can cause side effects, such as headache, upset stomach, etc.			

3. Dietary supplements and herbal remedies undergo the same rigorous study as prescription medicines and OTCs. (*circle one*) *True or False.*

4. What are some potential medicine use problems? (List 3 or more)

5. It is important to keep an updated list of all medicines that you use. Take the list with you and review it carefully with your healthcare providers. *(circle one) True or False.*

What items should appear on this list?

(Check all that apply)

- Names of each medicine
- Name of healthcare provider who prescribed each medicine
- What the medicines are used for
- How often you need to take them and at what dose
- What OTC, dietary supplements and herbal remedies you use regularly
- Any new medicine you need to start taking
- Note the expiration dates(s) for refills

Remember to update your list as needed. Make copies for your records and to share with your healthcare providers, including your pharmacist.

6. OTC Drug Fact Labels can help guide you when making decisions about which OTC medicine to use. Match the different parts of the OTC Drug Facts label so you know what to look for. Ask the pharmacist to help you if you have any questions.

- | | |
|---|--|
| <input type="checkbox"/> Uses | a. Recommended daily dosage and frequency. Follow this strictly. |
| <input type="checkbox"/> Active ingredients | b. This section tells you the ONLY symptoms the medicine is approved to treat. |
| <input type="checkbox"/> Inactive ingredients | c. This section tells you what to avoid and who should not use this. |
| <input type="checkbox"/> Directions | d. A chemical compound that has no effect on your body. |
| <input type="checkbox"/> Warnings | e. Chemical compound in the medicine that works with your body to bring relief. |

**You are an important part of your healthcare team.
Learn how to ask questions and make good decisions,
so you can use your medicines safely.**

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