

14. Can I discontinue any medications I currently take?

15. How should I take this? With or without food, alcohol, in the morning or at bedtime?

16.What are the side effects?

17. Can this be split, chewed or crushed?

18. Are there any drug interactions?

19. What should I do if I miss a dose?

### Ask the pharmacist

Take this sheet to the visit to remember the questions. Let someone at the office and the pharmacy fill out the sheet below so you remember what was discussed!

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When clinicians and patients work together to make medication and treatment decisions that include patient preferences.

1. What is medication for?
2. Are there any non-drug options?
3. What happens if I don’t take this medication?
4. How much will it cost?
5. Are there less expensive alternatives?
6. Will my insurance cover this drug?
7. How does it work?
8. How long will this take to start working?
9. How will I know if it is working?
10. How long before following up on this medication?
11. How long do I need to take this medication for?
12. Do you have any educational materials?
13. Should I avoid any activities?

### Ask the doctor

**Shared Decision Making**

19 Questions that Must be Asked for Every Medication

Know your medications

Medication:

Date \_\_\_\_\_\_\_\_\_

Ask the doctor

13.

12.

11.

10.

9.

8.

7.

6.

5.

4.

3.

2.

1.

Integer at diam. Ut vel quam vitae orci aliquam mattis. Nullam sem risus, dignissim non, tempus eget, laoreet et, est. Vestibulum eget tortor. Sed ante. In suscipit, metus sed luctus ornare, pede est dictum metus, sit amet posuere ante enim a ligula.

Nunc sodales. In ut enim. Quisque scelerisque pretium pede. Integer convallis. Praesent malesuada lacus sit amet lectus. Aliquam erat volutpat. Nullam lacus urna, faucibus et, placerat at, pulvinar id, massa. Morbi nec enim et leo placerat suscipit. Aenean sed massa non est vestibulum convallis. Mauris nec est sed est varius faucibus.

Medication:

Date \_\_\_\_\_\_\_\_\_

Ask the Pharmacist

19.

18.

17.

16.

15.

“Pellentesque eget mauris et magna sollicitudin lacinia. Duis lectus?”

Date \_\_\_\_\_\_\_\_\_

Medication:

Know your medications?