## My Weekly Rx Tracker

Date	range:	to	

Taking your prescription(s) as prescribed is important for managing your condition(s). For each medication, fill in the scheduled time(s), then add a ✓ after you've taken each dose. Be sure to print additional sheets to help you stay on track.

	Fill your weekly pillbox							
	Medication	Dose	Time	Time	Time	Time	do you feel on this Rx?	fects/notes
>	Example: Metformin 500 mg	1 tab	8 am√			8 pm <b>√</b>	<b> ▼</b> ○ ○ □ Upset sto	mach
Sunday							0 0 0 0	
Su							0 0 0 0	
							0 0 0	
							0 0 0	
	Medication	Dose	Time	Time	Time	Time	do you feel on this Rx?	fects/notes
ay							0 0 0 0	
Monday							0 0 0	
Σ							0 0 0	
							0 0 0 0	
	Medication	Dose	Time	Time	Time	Time	do you feel on this Rx? l·Bad·Neutral·Good·Great	fects/notes
lay							0 0 0	
Tuesday							0 0 0	
F							0 0 0 0	
							0 0 0 0	
>	Medication	Dose	Time	Time	Time	Time	do you feel on this Rx? I·Bad·Neutral·Good·Great	fects/notes
Wednesday							0 0 0 0	
que							0 0 0 0	
×							0 0 0 0	
							0 0 0 0	
	Medication	Dose	Time	Time	Time	Time	do you feel on this Rx? I·Bad·Neutral·Good·Great	fects/notes
day							0 0 0 0	
Thursday							0 0 0 0	
F							0 0 0 0	
							0 0 0 0	
	Medication	Dose	Time	Time	Time	Time	do you feel on this Rx? I·Bad·Neutral·Good·Great	fects/notes
ay							0 0 0 0	
Friday							0 0 0 0	
							0 0 0 0	
							0 0 0 0	
	Medication	Dose	Time	Time	Time	Time	do you feel on this Rx? I·Bad·Neutral·Good·Great	fects/notes
Saturday							0 0 0 0	
atur							0 0 0 0	
S							0 0 0 0	
							0 0 0	

Please share this vital information with your healthcare team to review your progress.

