





Tablets/

Capsules

Liquid

Inhaler

## **My Medicines List**

This page helps you list all the medicines you need to be taking.

There are extra pages attached to this sheet for each medicine you take. This is to help you understand about each of your medicines, and how to use them safely once you have gone home.

My name is	s					
My medicin	ne is					2
Tablets/ Capsules	Liquid	Inhaler	Cream/ Ointment	Syringe	Drops	Other
My medici	ne is					
						□ ?

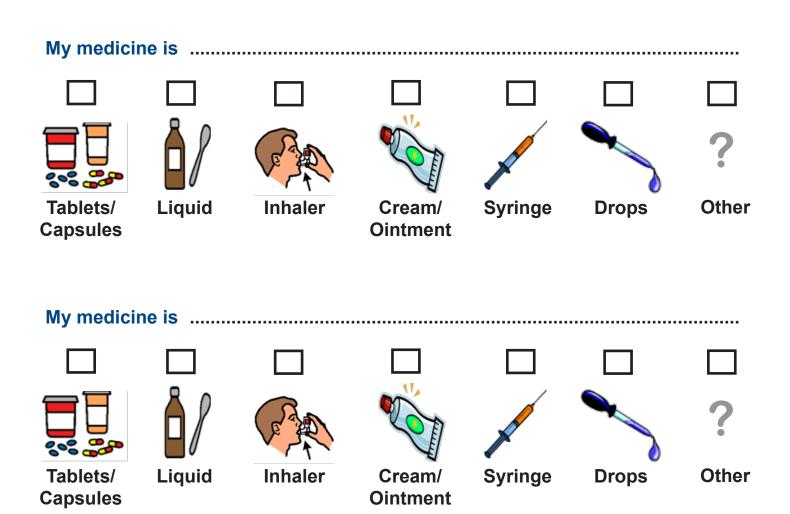
Cream/

**Ointment** 

Syringe

**Drops** 

Other



If there is anything you would like to tell us about your visit to the hospital, please:



speak to a member of staff.



visit our website at: www.wihb.scot.nhs.uk/feedback or share your story at: www.careopinion.org.uk or tel. 0800 122 31 35.



tel. 01851 708069 or 07814 071868 on Monday to Friday between 9am-5.30pm.

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## Disclaimer

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