ROGUE RIVER
FAMILY PRACTICE CLINIC

509 E. Main Street
Rogue River, Oregon 97537
www.rogueriverfpc.com
541-582-0505

MEDICATIONS

Preferred pharmacy _____

ALLERGIES AND REACTIONS *(please include medications, foods, latex, dye, etc.)*

_____

_____

CURRENT MEDICATIONS *(list all medications, including prescription, vitamins, over-the-counter, and herbs)*

Medication	Dose	Frequency	Reason for taking