



ALLERGY & MEDICATION RECONCILIATION

NKDA (None Known Drug Allergies)

**NO CHANGES FROM LAST VISIT
LAST DOS:** _____

Home Medication List is provided by the patient and includes; over-the-counter drugs such as Ibuprofen, Tylenol, birth control pills, Transdermal Patches, eye drops, inhalers, vitamins and herbals

Allergies	Reactions	Allergies	Reactions

Current Medication History (include over-the-counter medication, vitamins, and herbal prescription)	Dose & Frequency	Reason for taking	Hold	Take	Taken day of surgery (Time)

PATIENT’S/GUARDIAN’S SIGNATURE _____ DATE _____

New prescription	Dose	Route	Frequency	Reason for taking	Last Taken	Notes	Next dose

COPY GIVEN TO PATIENT

PACU Nurse Signature

Date