GORDON C GUNN, MD, FACOG
CONCIERGE PERSONALIZED CARE
GYNECOLOGY • HORMONE THERAPY
INTEGRATIVE MEDICINE

MEDICATION, SUPPLEMENT & ALLERGY RECORD

Name: _____ DOB: _____ Date: _____

List ALL Allergies to Medications, Supplements, Food and Materials (eg. Latex):

Allergic To:	Describe Allergic Reaction You Experienced:

List ALL Prescription Medications, Supplements, Vitamins and Recreational Drugs Currently Taking

Name of Drug or Supplement	Purpose	Dosage	Frequency	Name of Doctor

Reviewed By: _____ Date: _____ **Revised 01.07.2018**