

# Daily Medicine Record for Your Child

## Why should I keep a Daily Medicine Record for My Child?

- **To keep your child safe.** A daily record will help you keep track of the amount of medicine your child takes so you or someone else won't accidentally give too much.
- To have a way of sharing this information with others who may be caring for your child, such as a spouse, grandparent, babysitter, and your child's healthcare professional.

## How do I keep a Daily Medicine Record?

Use the blank record provided, or make your own record and write down the following:

- name of the child
- child's age and weight. (It is always best to use your child's weight to decide how much medicine to give. Use age if you don't know your child's weight.)
- today's date
- time of day you give the medicine
- symptom or problem the medicine is used for
- medicine's name
- medicine's active ingredient(s)
- the medicine's formula (infant, children, junior, or other)
- the amount of medicine you give

## Where should I keep the Daily Medicine Record?

You should keep it where all of your child's caregivers can easily find it. The information you write will help you and others remember the last time a dose was given and how much your child has taken.

Always keep medicines where they cannot be seen or reached by children and pets.  
A locked box, cabinet, or closet is best.

## How often should I fill out a Daily Medicine Record?

You should fill out the Daily Medicine Record each time your child takes a medicine. Start a new Daily Medicine Record each day until your child is no longer taking a medicine.

### Example:

Child's name: Sally Today's date: January 01, 2012

Age: 2 years old Weight: 30 pounds

Time	Problem or Symptom	Name of Medicine	Active Ingredient(s)	Infant, Children, Junior, or Other Formula	Amount Given
2:00 a.m.	Fever	Feel Better Pain and Fever Reducer	acetaminophen	Infant	1.6 mL
p.m.					

## Daily Medicine Record

Child's name: \_\_\_\_\_ Today's date: \_\_\_\_\_

Age: \_\_\_\_\_ Weight: \_\_\_\_\_ (pounds)

Time	Problem or Symptom	Name of Medicine	Active Ingredient(s)	Infant, Children, Junior, or Other Formula	Amount Given
a.m.					
p.m.					
a.m.					
p.m.					
a.m.					
p.m.					
a.m.					
p.m.					
a.m.					
p.m.					
a.m.					
p.m.					
a.m.					
p.m.					
a.m.					
p.m.					
a.m.					
p.m.					
a.m.					
p.m.					

<p><b>In case of an accidental overdose call:</b> Poison Control Center: 1-800-222-1222 or call Emergency: 9-1-1</p>
--