Special K Fitness

3180 N Butler Ave Bldg. 300
Farmington, NM 87401

P. T.

Phone: (505) 326-2460
Fax: (505) 325-1943

Medication List

Please list all prescriptions and over the counter medications and supplements you are currently taking. If you already have a list, please provide a copy and just check the box below.

_____
Print patient name

☐ **List attached**

PRESCRIPTION NAME	DOSAGE	TIMES PER DAY	HOW GIVEN
Example: Tylenol	*250mg*	*As needed*	*Oral*