

RENAISSANCE FAMILY SERVICES
Medication Log

MS 749.1541 – One log per medication or supplement is required

a cumulative record of all prescriptions administered (and non-prescription medications and supplements for children under 5) must be kept together in the child's record and updated within 24 hours of medication administration

Child Name:	Foster/Adoptive/Kinship Home:	
Date (Month & Year):	List any Drug or Supplement Allergies or Contraindications (if applicable):	
Prescriber Name (if applicable):	List Child's refusal to accept medication (if applicable):	
Name of Medication or Supplement: <input type="checkbox"/> Psychotropic Medication <input type="checkbox"/> Non-Psychotropic Medication	Strength:	Dosage:
Frequency: <input type="checkbox"/> Daily <input type="checkbox"/> Twice Daily <input type="checkbox"/> Three Times Daily <input type="checkbox"/> PRN (as needed) <input type="checkbox"/> Other: _____		
<u>Prescribed Medication</u> - List the reason for the prescribed medication:		
<u>Nonprescription medication and supplements for children under 5 years old and PRN (as needed) psychotropic medication</u> - List the reason for administering the medication, including specific symptoms, conditions, and/or injuries of the child that the caregiver is treating:		
Child Name:	Foster/Adoptive/Kinship Home:	Date (Month & Year):

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Calendar Day:	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Time:																																
Initials:																																
Amount Remaining																																
Calendar Day:	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
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Printed Name of Caregiver

Signature of Caregiver

Date

Initials

Printed Name of Caregiver

Signature of Caregiver

Date

Initials