PHYSICIANS
Surgical Center

1840 Quentin Road • Lebanon, Pennsylvania 17042
Telephone (717) 272-0007 • FAX (717) 675-2247

MEDICATION RECONCILIATION LIST

Please complete the following information and bring with you to the Physicians Surgical Center on the day of surgery.

Patient's Name _____ Date _____ Time _____

Please include all prescription, over the counter, vitamins and herbal/natural medications taken routinely.

Data Source: ❑ Patient ❑ Family ❑ Old Records ❑ Other Health Care Facilities

Patient's Pharmacy _____ Phone Number _____

Allergies (include reactions) _____

_____

Patient takes no medications ❑

Home Medication List	Dose	Frequency	Used For	Date of Last Dose?

Reviewing Pre-Op Nurse _____ Date _____