VIRGINIA SURGICAL SERVICES
703-594-1583 | Secure fax 571-601-2937

Medication and allergy list

Include prescriptions, over-the-counter medicines, vitamins, supplements, and injections.

Patient name | **Date of birth** | **Medical record no. (office use)**

ALLERGIES AND REACTIONS

Medication, food, latex, adhesive, or other allergy and the reaction

☐ No known medication allergies

CURRENT MEDICATIONS

Medication / supplement	Dose	How often	Last dose	Reason

MEDICINES THAT NEED SPECIFIC PRE-OP REVIEW

☐ Blood thinner / antiplatelet

☐ Insulin or diabetes medicine

☐ GLP-1 / weight-loss medicine

☐ Steroid

☐ Opioid or chronic pain medicine

☐ Herbal supplement