Recommended To-Do List for Your Name, DOB: Your Date of Birth

## **Recommended To-Do List**

Prepared on:

You can get the best results from your medications by completing the items on this **"To-Do List."** 



Bring your **To-Do List** when you go to your doctor. And, share it with your family or caregivers.

## My To-Do List

What we talked about:	What I should do:

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