



PSYCHOTROPIC MEDICATION HISTORY

NAME: \_\_\_\_\_

DATE STARTED (when the medication was first ordered)	MEDICATION/DOSAGE (for example: Zyprexa 20mg BID)	PURPOSE OF THE ORDERED MEDICATION	PHYSICIAN	DATE ENDED OR DATE DOSE CHANGED	REASON FOR ENDING MEDICATION OR CHANGING DOSE

**\*\*This Medication History should be continuous and ongoing. It is meant to indicate what psychotropic medications have been ordered AND which ones have been changed to achieve a positive effect. It is also meant to indicate which psychotropic medications have been reduced or stopped, either because of no apparent effect, negative side effects, or the individual no longer requires the medication. Please keep the history accurate and complete.\*\***