



**Collingwood  
General & Marine  
Hospital**

**PRE-ANESTHETIC  
PATIENT  
MEDICATION LIST**

Patient Name and Date of Birth

Please fill out as completely as possible and bring to your Preanesthetic Clinic Appointment

**PRESCRIPTION MEDICATIONS**

Name of Drug	Dosage	Directions

**NON-PRESCRIPTION MEDICATIONS**

(eg. Herbals, over counter meds, vitamins & minerals, recreational)

Name of Drug	Dosage	Directions