YELLOUX COVE FOUNDATION

DAILY MEDICATION & REMINDER LOG

A quick everyday record of medication timing, reminders, and whether intake was confirmed.

Person Supported / Care Recipient: _____ **Date:** _____

Caregiver Completing Log: _____ **Relationship:** _____

Use this for routine daily tracking. If you did not personally see the medication taken, mark 'could not confirm' instead of guessing.

DAILY MEDICATION CHECK

Outcome key: F = full dose P = partial dose N = not taken U = could not confirm NA = not due / not needed

Medication + dose	Due time	First offered	Reminders	Final time	Outcome	Initials / quick note
			☐ 0 ☐ 1 ☐ 2-3 ☐ 4+		☐ F ☐ P ☐ N ☐ U	
			☐ 0 ☐ 1 ☐ 2-3 ☐ 4+		☐ F ☐ P ☐ N ☐ U	
			☐ 0 ☐ 1 ☐ 2-3 ☐ 4+		☐ F ☐ P ☐ N ☐ U	
			☐ 0 ☐ 1 ☐ 2-3 ☐ 4+		☐ F ☐ P ☐ N ☐ U	
			☐ 0 ☐ 1 ☐ 2-3 ☐ 4+		☐ F ☐ P ☐ N ☐ U	
			☐ 0 ☐ 1 ☐ 2-3 ☐ 4+		☐ F ☐ P ☐ N ☐ U	
			☐ 0 ☐ 1 ☐ 2-3 ☐ 4+		☐ F ☐ P ☐ N ☐ U	

MEDICATION CONCERNS TODAY

- ☐ Took longer than usual to accept/take medication
- ☐ Needed repeated reminders or repeated approaches
- ☐ Declined or said no
- ☐ Could not confirm whether medication was taken
- ☐ Reported fear, concern, or unwanted effect
- ☐ Medication supply / refill / pharmacy problem
- ☐ Provider or pharmacist contacted
- ☐ No medication concern today

Brief note if something stood out: _____

END-OF-DAY QUICK SUMMARY

Doses due: _____ **Full doses:** _____ **Partial / not taken:** _____ **Uncertain:** _____

Last confirmed medication time: _____ **Follow-up needed tomorrow:** _____

This log is for caregiver organization. It does not replace prescribing instructions, medication administration records, or medical advice. Do not change a dose, schedule, or treatment based on this form.