Alliance Behavioral Health Specialists
43155 Main St, Suite #2316
Novi, MI 48375

Phone: (248) 934-0274, Ext 102 or operator
Fax: (248) 934-1987
Email: info@abhsnow.com

MEDICATION LIST and RECONCILIATION

Medical Marijuana card:	Yes	No	Reason for using medical marijuana:
			Name and address of physician:

Medication Name Include: Prescriptions, OTC, supplements/Herbal	**Strength**	**Frequency** ex: 3x's/day; 1@bed; 2 in am; etc.	**Prescribing Physician**

In order to coordinate your care and avoid medication interactions, it is important that you list the names/addresses of all prescribing physicians and their specialties (e.g., neurologist, cardiologist, etc.)

Name of Physician	**Address & Phone Number**	**Specialty**