Remembering to Take Medication

Having a child who needs medication every day can be a challenge. Many families intend to give their child’s medication as prescribed, but sometimes simply forget. Your child may need to take medication several times a day and it is hard to remember if you gave each dose. Here are some tips that may help you.

**Use signs or symbols**
- Post notes in places you see often, like the refrigerator, bathroom mirror or front door. Change the location of the notes every once in a while.
- Wear a bracelet or some other object that reminds you to give the medication.
- Make yourself a calendar or schedule that you can put on the refrigerator or someplace else that you will see.

**Keep the medication where you can see it**
You want to keep the medication where children cannot reach but where you can see them.
- Use a pillbox and place it at the back of the kitchen counter.
- Keep it in a place that you walk by every day.

**Link giving the medication with a routine**
- At mealtimes
- When your child brushes their teeth
- At the same time each day, like at 8 am and 8 pm
- Give your child their medication at the same time you take your medication
- Come up with a time that has meaning for your family

**Use technology as a reminder**
- Set an alarm—on your cell phone, stove, TV, activity tracker or other electronic device.
- If your child is taking medication at school, send them a text message as a reminder.
- Put a free smartphone app on your phone—ask us for more information about this!

**General tips for parents**
Plan ahead if you are going on vacation or changing your routine in some way.
- Try to get extra medication from the pharmacy if you are leaving the area.
- Print out a medication schedule that you can take with you.
- Keep extra doses of medication in your purse, backpack or sleepover bag in case you forget to bring their medication with you.
Plan to help give every dose of medication. Which plan did you pick?

☐ Visual reminder  ☐ Pair with Routine  ☐ Person Reminder  ☐ Alarm  ☐ Smartphone App

Who will be involved?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Where will this happen?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

When will this happen?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

How will you know it’s working?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

If this plan does not work, we will try:

☐ Visual reminder  ☐ Pair with Routine  ☐ Person Reminder  ☐ Alarm  ☐ Smartphone App

If we need help, we can call:

☐ Nurse

☐ Social Worker

☐ Other