



Medication Risk Assessment Questionnaire*

If you take several medications, you may benefit from talking with a clinical pharmacist to ensure you have answers to your medication questions and are getting the best possible treatment results.

To find out if you could benefit from this service, please answer the following questions as best you can:

	NO	YES
Do you take 5 or more different medications? <i>(including prescription, non-prescription, vitamins, and herbal therapies)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Do you take 12 or more pills each day? <i>(including prescription, non-prescription, vitamins, and herbal therapies)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Do you take any medications for:		
Nerves, stress, anxiety, or depression	<input type="checkbox"/>	<input type="checkbox"/>
Blood pressure or heart disease	<input type="checkbox"/>	<input type="checkbox"/>
Arthritis or pain	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
Lung Disease	<input type="checkbox"/>	<input type="checkbox"/>
Does more than 1 physician or nurse practitioner prescribe medications for you on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>
Are you taking medications for 3 or more medical conditions?	<input type="checkbox"/>	<input type="checkbox"/>
Do you get your prescriptions filled at more than 1 pharmacy ?	<input type="checkbox"/>	<input type="checkbox"/>
Have your medications, or the instructions on how to take them, changed 4 or more times in the past year?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have difficulties taking your medications as prescribed?	<input type="checkbox"/>	<input type="checkbox"/>
Do you sometimes worry about the long-term effects of your medications?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any unanswered questions about your medications?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered **YES** to **3 or more questions** we encourage you to ask for an appointment with the on-site clinical pharmacist or phone the **UBC Pharmacists Clinic at 604-827-2584** for an appointment.

*Makowsky MJ, Cave AJ, Simpson SH. Feasibility of a self-administered survey to identify primary care patients at risk of medication-related problems. *Journal of multidisciplinary healthcare.* 2014;7:123