

# Medications



I take this **medication**.

**Dosage** is 2 **pills**. 

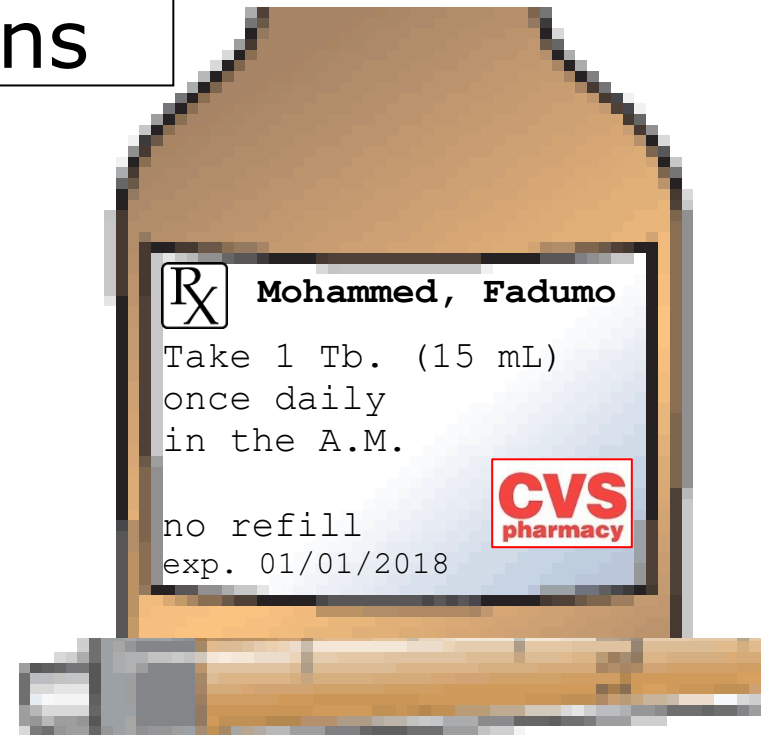
1 **pill**, **twice daily**. 2 times, every day.

I take 1 **pill** in the morning.  **A.M.**

I take 1 **pill** at night. **P.M.** 

I take the pills **with food**. 

2 **refills**.   **Expiration** is in June.



I take this **medication**.

**Dosage** is 1 **tablespoon**. 

**Once daily**. 1 time, every day.

1 **tablespoon** is 15 mL. 

I take it in the morning. **A.M.** 

No **refill**.  **Expiration** is in January. 