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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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|  | 24 HOUR MEDICATION SCHEDULE | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
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|  | TIME | MEDICATION | DOSAGE | M | T | W | T | F | S | S |  |
|  | 12:00 AM | Xenazine 25mg | 1 Tablet | X | X | X |  |  |  |  |  |
|  | 1:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 2:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 3:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 4:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 5:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 6:00 AM | Vortioxetine 5mg | 2 Tablets | X | X | X |  |  |  |  |  |
|  | 7:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 8:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 9:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 10:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 11:00 AM |  |  |  |  |  |  |  |  |  |  |
|  | 12:00 PM | Gentamicin 10 mg/mL | 10ml | X | X | X | X | X | X | X |  |
|  | 1:00 PM |  |  |  |  |  |  |  |  |  |  |
|  | 2:00 PM |  |  |  |  |  |  |  |  |  |  |
|  | 3:00 PM |  |  |  |  |  |  |  |  |  |  |
|  | 4:00 PM |  |  |  |  |  |  |  |  |  |  |
|  | 5:00 PM |  |  |  |  |  |  |  |  |  |  |
|  | 6:00 PM |  |  |  |  |  |  |  |  |  |  |
|  | 7:00 PM |  |  |  |  |  |  |  |  |  |  |
|  | 8:00 PM |  |  |  |  |  |  |  |  |  |  |
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|  | 10:00 PM |  |  |  |  |  |  |  |  |  |  |
|  | 11:00 PM |  |  |  |  |  |  |  |  |  |  |
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|  | **Patient:** | JANNIFER CRISP | **Date:** | 23/10/2023 | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | **MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY SUNDAY** | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
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