Refill countdown

Tick off each tablet and see when to ask for your next pack.

Medicine name, as on my label

Pack started on

Tablets in this pack

Repeats left on my prescription

My pharmacy

Ask for my next pack by

My countdown

Tick a box for each tablet you take. Shade any boxes beyond your pack size. Mark the day to ask for more.

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	32	33	34	35

Before I run out

- [ ] Check how many repeats are left on my prescription
- [ ] Book an appointment if I need a new prescription
- [ ] Ask my pharmacy to have my next pack ready

Notes

Refill countdown

Tick off each tablet and see when to ask for your next pack.

Medicine name, as on my label	Pack started on	Tablets in this pack
From my pharmacy label	Sunday 1 November	30

Repeats left on my prescription	My pharmacy	Ask for my next pack by
2	Corner pharmacy	Friday 20 November

My countdown

Tick a box for each tablet you take. Shade any boxes beyond your pack size. Mark the day to ask for more.

1 ✓ 1 Nov	2 ✓ 2 Nov	3 ✓ 3 Nov	4 ✓ 4 Nov	5 ✓ 5 Nov	6 ✓ 6 Nov	7 ✓ 7 Nov
8 ✓ 8 Nov	9 ✓ 9 Nov	10 ✓ 10 Nov	11	12	13	14
15	16	17	18	19	20 Ask today	21
22	23	24	25	26	27	28
29	30	31	32	33	34	35

Before I run out

- [x] Check how many repeats are left on my prescription
- [ ] Book an appointment if I need a new prescription
- [ ] Ask my pharmacy to have my next pack ready

Notes

The pharmacy asked me to call two days ahead.