<table>
<thead>
<tr>
<th>Drug</th>
<th>Concentration</th>
<th>Daily Dose</th>
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Today’s Date  ___ / ___ / _____

Next Refill Date / Time

Physician

Clinic

Telephone

Patient / Caregiver Emergency Information on reverse
PATIENT / CAREGIVER EMERGENCY INFORMATION

Morphine

Medication: Morphine (Opioid) for pain management delivered from an implanted pump through a catheter placed in the fluid that surrounds my spinal cord.

Symptoms of Overdose:
- Slow and shallow breaths
- Dizziness
- Breathing Stops
- Sedation
- Euphoria
- Seizures
- Anxiety

If symptoms appear: Seek emergency attention immediately, if necessary perform CPR.