

**5310 N. LA CHOLLA BLVD. • TUCSON, AZ 85741 • 520-229-8878 • FAX: 520-229-9107**



1. CUT OUT AROUND DOTTED LINE

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*Please include all daily medications and their doses, inhalers, any as-needed medications (aka PRN meds), ointments, eye drops and all vitamins and supplements.*

[illegible]

*Please bring this card with you each time you visit our office. Thank you.*

Med Form Revised 5-11-12

(NOMBRE COMPLETO)

Patient Name: \_\_\_\_\_

(ALERGIAS A MEDICAMENTOS)

Drug Allergies:

(FARMACIA/TELEPHONO)

Pharmacy/Phone: \_\_\_\_\_

Pulmonary/Sleep Dx:

(DOCTOR PRIMARIO)

Primare Care Physician:

(EN CASO DE EMERGENCIA)

**IN CASE OF EMERGENCY CONTACT:**

**Dr. Amitab Puri, MD, FCCP, FCCM, DABSM, FACSM**  
(PULMONOLOGO)

(PULMONOLOGO)

Pulmonologist

**520-229-8878**

## YOUR POCKET MEDICATION GUIDE



**Pulmonary Medicine, Critical Care Medicine & Sleep Disorders Medicine**

## PIMA LUNG & SLEEP, PC

AMITAB PURI, MD, FCCP, FCCM, DABSM, FACS

**520-229-8878**

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