



MEDICATION QUESTIONNAIRE

Name:

Date:

Date of Birth:

DIRECTIONS: Please place a check mark in the box that describes your experience with any of the medications listed below.

Generic Name	Trade Name	Helpful	Not Helpful	Current Use	History of Use	Adverse Reaction	Patient, Parent, Guardian or Physician/NPP Comments
ANTIDEPRESSANTS							
Amitriptyline	Elavil						
Bupropion	Wellbutrin, Wellbutrin SR, Wellbutrin XL						
Citalopram	Celexa						
Clomipramine	Anafranil						
Desipramine	Norpramin						
Desvenlafaxine	Pristiq						
Doxepin	Sinequan, Silenor						
Duloxetine	Cymbalta						
Escitalopram	Lexapro						
Fluoxetine	Prozac, Sarafem						
Fluvoxamine	Luvox, Luvox CR						
Imipramine	Tofranil						
Isocarboxazid	Marplan						
Levomilnacipran	Fetzima						
Milnacipran	Savella						
Mirtazapine	Remeron, Remeron SolTab						
Nefazodone	Serzone						
Nortriptyline	Pamelor						
Paroxetine	Paxil, Paxil CR						
Phenelzine	Nardil						
Selegiline Transdermal	Emsam						
Sertraline	Zoloft						
Tranylcypromine	Parnate						
Trazodone	Desyrel, Oleptro						
Venlafaxine	Effexor, Effexor XR						
Vilazodone	Viibryd						
Vortioxetine	Trintellix, Brintellix						
ANTIPSYCHOTICS "major tranquilizers"							
Aripiprazole	Abilify						
Asenapine	Saphris						
Brexpiprazole	Rexulti						
Cariprazine	Vraylar						
Chlorpromazine	Thorazine						
Clozapine	Clozaril, FazaClo, Versacloz						
Fluphenazine	Prolixin, Prolixin Decanoate						
Haloperidol	Haldol, Haldol Decanoate						
Iloperidone	Fanapt						



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Loxapine	Loxitane						
Lurasidone	Latuda						
Molindone	Moban						
Olanzapine	Zyprexa, Zyprexa Zydis, Zyprexa Relprevv						
Paliperidone	Invega, Invega Sustenna, Invega Trinza						
Perphenazine	Trilafon						
Pimavanserin	Nuplazid						
Quetiapine	Seroquel, Seroquel XR						
Risperidone	Risperdal, Risperdal Consta, Risperdal M-Tab						
Thioridazine	Mellaril						
Thiothixene	Navane						
Trifluoperazine	Stelazine						
Ziprasidone	Geodon						
ANXIOLYTICS “anti-anxiety” “minor tranquilizers”							
Alprazolam	Xanax, Xanax XR						
Bupirone	BuSpar						
Chlordiazepoxide	Librium						
Clonazepam	Klonopin, Klonopin Wafers						
Clorazepate	Tranxene						
Diazepam	Valium						
Hydroxyzine	Vistaril, Atarax						
Lorazepam	Ativan						
Oxazepam	Serax						
ANTICHOLINESTERASE/ALZHEIMER’S AGENTS							
Donepezil	Aricept						
Galantamine	Razadyne						
Memantine	Namenda, Namenda XR						
Rivastigmine	Exelon						
Selegiline	Eldepryl						
Tacrine	Cognex						
ALCOHOL/DRUG/SMOKING CESSATION AGENTS							
Acamprosate	Campral						
Buprenorphine/ Naloxone	Suboxone, Bunavail, Zubsolv						
Bupropion	Zyban						
Disulfiram	Antabuse						
Methadone	Dolophine						
Naltrexone	ReVia, Vivitrol						



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Varenicline	Chantix						
MOOD STABILIZING AGENTS/AED's							
Carbamazepine	Tegretol, Tegretol XR						
Fluoxetine/Olanzapine	Symbyax						
Gabapentin	Neurontin						
Lamotrigine	Lamictal, Lamictal XR, Lamictal ODT						
Levetiracetam	Keppra, Keppra XR						
Lithium	Eskalith, Eskalith CR, Lithobid						
Oxcarbazepine	Trileptal						
Tiagabine	Gabitril						
Topiramate	Topamax						
Valproate	Depakene, Depakote, Depakote ER, Valproic Acid						
PSYCHOSTIMULANTS							
Amphetamine Salts	Adderall, Adderall XR						
Armodafinil, Pemoline	Nuvigil, Cylert						
Atomoxetine	Strattera						
Dexmethylphenidate	Focalin, Focalin XR						
Dextroamphetamine	Dexedrine, Dextrostat						
Lisdexamfetamine	Vyvanse						
Methylphenidate	Ritalin, Ritalin SR, Ritalin LA, Concerta, Metadate ER/CD, Methylin, QuilliChew ER, Quillivant XR						
Methylphenidate Transdermal	Daytrana						
Modafinil	Provigil						
SEDATIVE/HYPNOTICS							
Chloral Hydrate	Noctec						
Eszopiclone	Lunesta						
Flurazepam	Dalmane						
Ramelteon	Rozerem						
Suvorexant	Belsomra						
Temazepam	Restoril						
Triazolam	Halcion						
Zaleplon	Sonata						
Zolpidem	Ambien, Ambien CR, Intermezzo, Edluar						
OTHER							
Benzotropine	Cogentin						



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Clonidine	Catapres, Kapvay						
Cyproheptadine	Periactin						
Diphenhydramine	Benadryl						
Guanfacine	Tenex, Intuniv						
Prazosin	Minipress						
Propranolol	Inderal						
Trihexyphenidyl	Artane						

HERBAL PREPARATIONS

I am unable or unwilling to complete this form.

I have completed this form to the best of my ability.

Signature of Patient/Parent/Guardian:

Date:

Reviewed in person with the patient.

Reviewed over the phone with the parent/guardian of the patient.

Reviewed in person with the patient and / or parent/guardian of the patient.

Signature of Psychiatrist/NPP:

Date/Time: