Dosage

Date	Medicine	Tablets/Day

Start of treatment on :
with:

Dosage

Date	Medicine	Tablets/Day

Start of treatment on :
with:

LITHIUM PASS

Name:
Birthdate:
Address:

Doctor:

A service of

MED INFO & SERVICE CENTER
regulatory-medical@teofarma.it
FAX 0039 0382 525845

Tests schedule for checks

Date	Time
/20	
/20	
/20	
/20	
/20	
/20	
/20	
/20	
/20	
/20	
/20	
/20	
/20	
/20	

Serum lithium level

Date	Tabs/Day	Medicine	mmol Li/l serum

Serum lithium level

Date	Tabs/Day	Medicine	mmol Li/l serum