



Medication Weekly Count

Resident Name: Christopher Cruz-Chavez Name of Facility/Home: Lake Orion

Date: 3/24/20 to _____ Staff Doing Count: _____

Medication	# of Refills	Frequency	Expiration Date	Week 1	Week 2	Week 3	Week 4	Week 5
Lithium 300mg 2 tabs		qd		47 days				
Lithium 300mg 3 tabs		hs		40 days				
Divalproex 250mg		bid		37 days				
Latuda 80mg		bid		19.5 day				
Trazodone 150mg		hs		27				
Lorazepam 1mg		PRN		25				
Lorazepam 1mg		bid		12.5				
Vitamin D2 50,000		1/wk		Ø				



BEACON
Specialized Living

Medication Weekly Count

Resident Name: Michael McGill Name of Facility/Home: Lake Orion

Date: 3/24/20 to _____ Staff Doing Count: _____

Medication	# of Refills	Frequency	Expiration Date	Week 1	Week 2	Week 3	Week 4	Week 5
Lorazepam 0.5mg		bid		28.5 day				
Ursodiol 300mg		bid		23 days				
Omeprazole DR 20mg		qd		39				
Aspirin 81mg		qd		40				
Trihexyphenidyl 2mg 1/2		bid		37 days				
Haldol 10mg		bid		38.5 day				
Oxybutynin 5mg		qd		23 days				
Carbamazepine ER 200n		tid		34.6 day				
Daily Vitamin		qd		17				
Atorvastatin 10mg		qd		23				
Levothyroxine 50mcg		qd		26				
Loratadine 10mg		qd		25				
Vitamin D3 1000unit		qd		24				
Ibuprofen 800mg		PRN		170				
Albuterol 108mcg/1act		PRN		53 puffs				

