01 / MY PRESCRIBED PLAN

ADHD medication record

Medicine, formulation, dose and timing - all in one place.

Medicine / active ingredient AND brand:

Formulation / release type exactly as labelled (e.g. tablet, capsule, liquid):

Strength on the pack (with unit) / prescribed amount per dose:

Prescribed times / frequency / food instructions:

Plan start date / prescriber / next review:

How to contact my clinic / pharmacist between reviews:

Brand and release type matter

Keep the exact product name in your record. Some modified-release methylphenidate products release medicine differently; do not treat a different brand as an identical schedule. [2]

If more than one medicine or formulation is prescribed, use separate plan pages. Record agreed changes on page 5. Do not use this tracker to select a dose or change treatment.

This adult organiser supports a clinical review; it is not a diagnostic test or a validated symptom score. No upload or account is needed.

02 / EACH DOSE

What I took and when

Use one row per dose, including any prescribed later dose.

Medicine / brand / release type / plan date:

Date	Planned time	Actual time	Dose + unit taken	Notes / not taken

Write "not taken" when relevant rather than leaving it looking completed. Follow the leaflet or ask your pharmacist about missed doses; this record does not calculate a replacement dose. [4]

03 / A DAILY SNAPSHOT

Benefits & side effects

Use brief notes. Print this page again for each day you want to record.

Date: _____ Medicine / plan date:

What felt easier? / What still felt difficult?

Any change noticed after a dose? / When did it start or fade?

Possible side effects: what, when, how long, impact on my day

Appetite / meals

Sleep / bedtime / waking

Record observations without assuming the medicine caused them. New, persistent or worrying effects should be discussed with your care team. Follow urgent advice in your medicine leaflet; do not wait for a diary review. [1,3]

04 / REQUESTED CHECKS

Monitoring & review

Record readings your care team asks for, using its measurement instructions.

Clinic instructions / device and cuff details (if relevant):

Date / time	BP: upper / lower (mmHg)	Pulse (bpm)	Weight + unit	Notes / context

The clinic sets the monitoring schedule and interprets results. A blank is not a normal result. Use a separate row for repeat measurements; do not invent an average or threshold. [1]

The most useful thing to tell my prescriber

05 / AGREE THE NEXT STEP

Changes & questions

A record of decisions already made with your prescriber.

Date	Agreed medicine / dose / timing change	Who agreed it / review date

Questions for the next appointment / follow-up actions

Sources and scope

[1] NICE NG87: Medication monitoring recommendations
https://www.nice.org.uk/guidance/ng87/chapter/recommendations

[2] NHS SPS: Modified-release methylphenidate
https://sps.nhs.uk/articles/prescribing-and-switching-between-modified-release-methylphenidate/

[3] NHS: Methylphenidate side effects in adults
https://www.nhs.uk/medicines/methylphenidate-adults/side-effects-of-methylphenidate-for-adults/

[4] NHS SPS: Missed or delayed medicine doses
https://sps.nhs.uk/articles/advising-on-missed-or-delayed-doses-of-medicines/

Monitoring principles are supported by NICE. The methylphenidate sources do not describe every ADHD medicine. Always use the leaflet for your own product. No clinical review of this resource is claimed.