Drug Information Request		Date/time required:			
and Response Form ¹					
Date	Time	Contacted by	Patient specific?		
		In person Fax	Yes No		
Requestor Patient MD	DDS Other	Phone E-mail			
Pharm RN	Vet				
Nature of Request:	Interactions	Pharmacology	Toxicity		
Therapeutics	Pregnancy/Lactation	Kinetics	Alternative Medicine		
Dosage/Route	Compatibility	Pharmaceutics			
ADR/Safety	Other	Ingredients			
		Response prepared by:			

Question

Background Information

Response (Type here or attach response)

<u>References</u> (Attach citations - Vancouver Style - for any primary literature used to answer the DIR)

Therapeutics		Pregnancy & Lactation		ADRs & Interactions		CAMS	
Resource	Page #/Edition	Resource	Page #/Edition	Resource	Page #/Edition	Resource	Page #/Edition
DIR		Briggs		Meylers		Natural Standard	
CPS/eCPS		BC Women's Handbook		Eval Drug Interactions		Natural Med Compr Dtbse	
Martindale		ReproRisk System		MedEffect (Health Canada)		Review Natural Products	
Therapeutic Choices		Motherisk Site		Reactions (Ingenta)		Prof Handbook Compl Med	
Clinical Drug Data		Hale		Stockley			
AHFS		Medications and Mothers Milk		Hansten & Home			
UpToDate				Drug Interaction Facts			
DrugDex				Davies			
DiPiro/Koda- Kimble				Lexi-Comp Interactions			
USP DI							
Harrison's Online							
ClinicalKey							
First Consult							

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