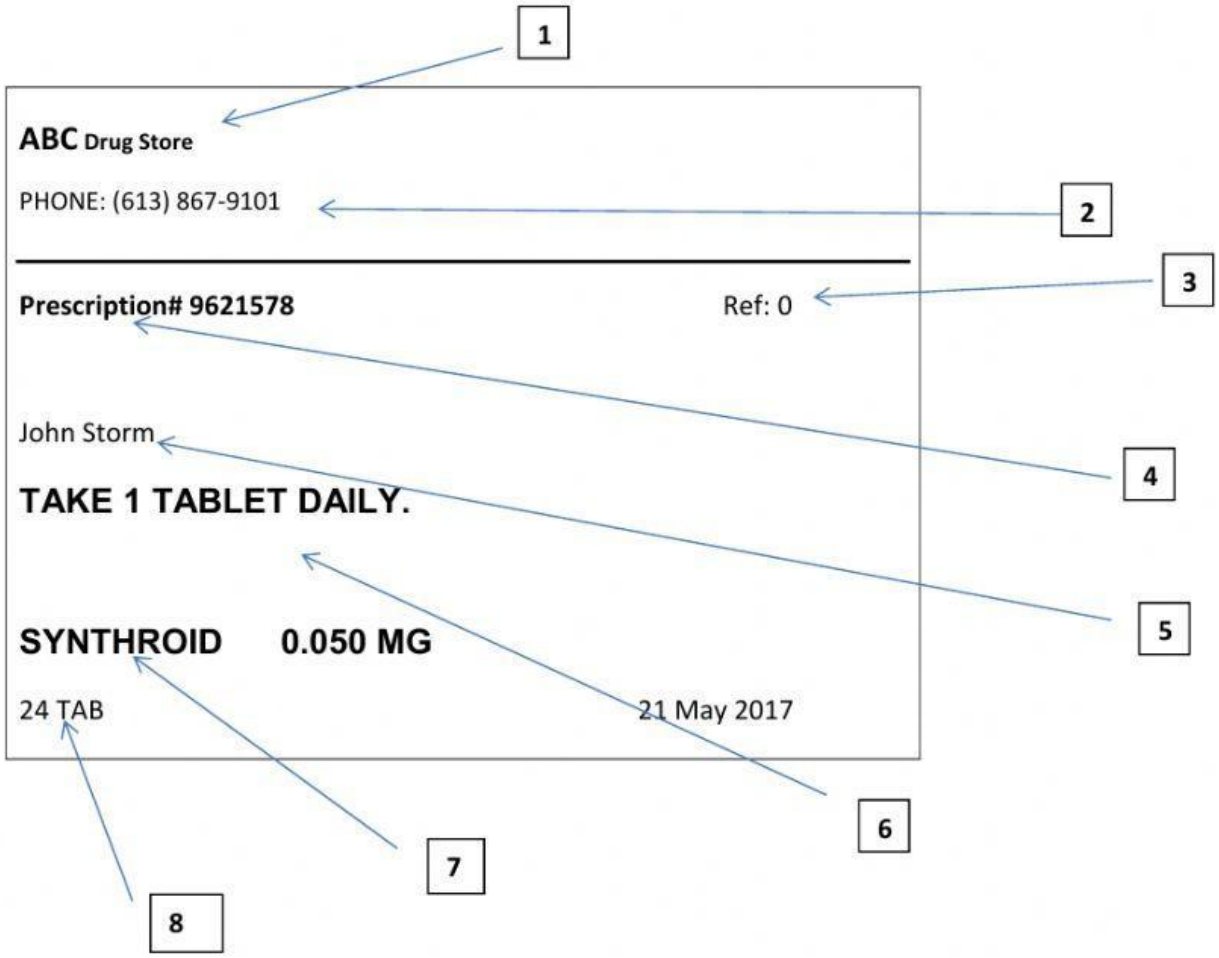
SKILL-BUILDING ACTIVITY 4 – Review of Medication Label Parts

Student Name: _____ Date: _____

Look at the label below. Do you know the parts of a prescription label? Write the numbers beside the correct words below the label.



_____ Name of medicine

_____ Pharmacy's name

_____ Number of tablets

_____ Number of refills

_____ Prescription number

_____ Pharmacy phone number

_____ Patient name

_____ dosage instructions

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LIVEWORKSHEETS