



1. <i>Do you sometimes forget to take your [health concern] pills?</i>		
2. <i>People sometimes miss taking their medications for reasons other than forgetting. Thinking over the past two weeks, were there any days when you did not take your [health concern] medicine?</i>		
3. <i>Have you ever cut back or stopped taking your medication without telling your doctor, because you felt worse when you took it?</i>		
4. <i>When you travel or leave home, do you sometimes forget to bring along your [health concern] medication?</i>		
5. <i>Did you take your [health concern] medicine yesterday?</i>		
6. <i>When you feel like your [health concern] is under control, do you sometimes stop taking your medicine?</i>		
7. <i>Taking medication everyday is a real inconvenience for some people. Do you ever feel hassled about sticking to your [health concern] treatment plan?</i>		
8. <i>How often do you have difficulty remembering to take all your medications?</i>		



<u>NO</u>	<u>REVERSED</u>
<ul style="list-style-type: none"> • • • • • 	

Citations:

Morisky DE, Ang A, Krousel-Wood M, Ward H. Predictive Validity of a Medication Adherence Measure for Hypertension Control. *Journal of Clinical Hypertension* 2008; 10(5):348-354

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