

Controlled Substances Log

Date:

Prior Count	Quantity:
-------------	-----------

AM Count	Quantity:
----------	-----------

Shipment Received
Quantity:

Manager + Witness
Initials:

Manager + Witness
Initials:

Patient Name

Reason for Medication

Time of Administration

Drug Administered

Community Tablets/Pills Administered

Staff Initials

Notes:

Total Quantity	
Administered Today :	

Expected PM Quantity
Count:

Actual PM Quantity
Count:

Manager + Witness
Initials:

Manager + Witness
Initials:

All Tablets/Pills Accounted For (circle one):

Yes

No