



Loyola EMS System

Non-Transport Controlled Substance Inventory

FULL TIME DEPARTMENT

RECORD DRUG ADMINISTRATION ON LAST PAGE- ATTACH A COPY OF THE RUN REPORT

Month:	Year:	Department:		Vehicle#:			
DATE	SIGNATURE	FENTANYL <i>50 mcg/mL for total of 100 mcg (Ampule or Vial)</i>		VERSED <i>10 mg/2 mL for a total of 10 mg</i>	ETOMIDATE <i>2 mg/mL for a total 40 mg</i>		
1	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
		Ampule 2 - LOT # TAG/LOCK#	Exp. Date:	Vial 2- LOT# TAG/LOCK#	Exp. Date:	Vial 2- LOT# TAG/LOCK#	Exp. Date:
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5	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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10	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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11	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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12	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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14	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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15	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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16	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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17	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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18	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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21	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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22	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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23	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
		Ampule 2 - LOT #	Exp. Date:	Vial 2- LOT#	Exp. Date:	Vial 2- LOT#	Exp. Date:
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24	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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29	AM OFF GOING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
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		Ampule 2 - LOT #	Exp. Date:	Vial 2- LOT#	Exp. Date:	Vial 2- LOT#	Exp. Date:
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	AM ONCOMING SHIFT	Ampule 1- LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:	Vial 1 - LOT #	Exp. Date:
		Ampule 2 - LOT #	Exp. Date:	Vial 2- LOT#	Exp. Date:	Vial 2- LOT#	Exp. Date:
		TAG/LOCK#		TAG/LOCK#		TAG/LOCK#	

Date & Time	Patient Name	Drug & Amount	Given By	Replaced By	Run Report #