Hospital ______________________ Hospital Registration No. ______________

RECORD OF NARCOTICS ADMINISTERED

Floor ________ Ward ______________ Department ______________ Month of ______________

DATE	TIME	NAME OF PATIENT	PHYSICIAN	REG. NO.	NARCOTIC	DOSE	ADMINISTERED BY	REMARKS

BINDING MARGIN - NO PRINTING

NARCOTIC RECORDS

FORM M-151 - 4,600 entries, 200 single pages. Size 9-1/2" x 12". Both sides identical. 23 lines per page. Binding: Green cloth with red corners and back.

FORM M-152 - Paper-covered book. Size 9-1/2 x 12". Both sides identical. White ledger stock. These books have summary of inventoried drugs on bottom of each page.

If you have any questions about our other products, or if you would like to place an order, please contact us toll-free at 1-800-323-9268.

PLEASE NOTE:
This is a sample page only. It is intended as a view of the general layout of this logbook and is not indicative of print quality. There may be slight variations in column width and layout.

Physicians' Record Company
3000 S. Ridgeland Ave. • Berwyn, IL 60402
1-800-323-9268 • F: 708-749-0171
www.physiciansrecord.com

This form to be used for reporting Narcotic Solutions, using name of department in place of "name of patient"

EXPLANATION OR REMARKS:

Amount accounted for on this sheet:	Amount remaining in Drug Cabinet:
Morphine sulphate	Morphine sulphate
Codeine sulphate	Codeine sulphate
Cocaine hydrochloride	Cocaine hydrochloride
* Other	* Other

* Each narcotic drug administered should be listed separately according to the form of the alkaloid or salt or other derivative; thus separate lines should be used for granulated or powdered opium, morphine, hydrobromide, codeine sulphate, etc.