Wake Forest™ School of Medicine

# Controlled Substance Receipt Log (Liquid)

DEA Number: _____ Registrant Name: _____

| Date of Receipt | Drug Name | Drug Concentration (mg/ml) | Bottle Volume (total mg) | Quantity (Number of Bottles) | Assigned Unique ID Number(s) | Vendor | Purchase Order Number | Initials of Person Receiving |
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**Instructions**: **The receipt of all controlled substances must be recorded. All columns of this form must be completed for every order received. Individual receipt logs are recommended for labs using multiple controlled substances. Packing slips or other receipt documents should be kept in a separate file.**

Example