Daily Controlled Medication Record
Operating Room/Nursing

Southern Health Santé Sud

■ _____

Unit: **O.R./Nursing**

ADDING TO &/OR REMOVING STOCK FROM COUNT-USE RED PEN
CHANGE OF SHIFT COUNT-USE RED PEN
SIGN OUT FOR ADMINISTRATION &/OR WASTAGE-USE BLACK/BLUE PEN
Reviewed by _____(sign/date)

Double signature required for:
1) Adding to &/or removal of stock
2) Shift counts including keys
3) High alert medications
4) All wastages
5) Balance brought forward AND Balance

Year: **Balance brought forward:**

Date (day/month)	Time	Pharmacy Addition/PACU Count in OR Count out	Physician	Remove	Return	midazolam 1 mg/mL (5 mL vial)	midazolam 1 mg/mL (2 mL ampoule)	morphine **LP** Epidural 1 mg/mL (5 mL vial)	**SUF**entanil 50 mcg/mL (1 mL OR 5 mL ampoule)	fenta**NYL** 50 mcg/mL (2 mL ampoule)	fenta**NYL** 50 mcg/mL (5 mL vial)	morphine 10 mg/mL (1 mL ampoule)	remifentanil 1 mg/vial	ketamine 10 mg/mL (200 mg/20 mL vial)	**HYDRO**morphone 2 mg/mL (1 mL ampoule)	acetaminophen/codeine 325/30 mg (Tylenol #3)	**KEYS** (Total = 1 set per shift count)	Signature	Co-Signature
						BENZODIAZEPINE		NARCOTICS								ORAL			
					Balance														

Master Signature:_____Initials_____ Master Signature:_____Initials_____ Master Signature:_____Initials_____ Master Signature:_____Initials_____

*Please note: It is the responsibility of nurses doing the count to verify that all doses have been properly signed off since the last count