## **DEA Controlled Substance Inventory Form**

A separate initial inventory is required for each registered location.

Date:			∃Start of Day	□End of	Day					
DEA Registrant Name (Print Name):										
DEA Registrant Address (as appears on DEA Form 223):										
DEA Regi	stration #:									
State Controlled Substance License # (if applicable):										
Inventory P	erformed by:									
		Print Name		Signature						
Inventory W	/itness:									
	t of Day of Day	Print Name		Signature						
Ena	Controlled	Container Unit	Concentration	Container	Remaining					
DEA Schedule	Substance Name	Type (Vial, syringe, patch, etc)	(mg/ml)	Quantity	Amount/ Container Volume					
DEA	Substance	(Vial, syringe,	(mg/ml)	Quantity  Zero	Container					
DEA Schedule	Substance Name	(Vial, syringe, patch, etc)		·	Container Volume					

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<sup>(1)</sup> When issued a DEA registration, a registrant must take an initial inventory, which is an actual physical count of all controlled substances in their possession. If there are no stocks of controlled substances on hand, the registrant should make a record showing a zero inventory. (2) Cross out the unused lines. Keep the inventory record at the licensed-registered location. (3) Schedule 1 and II drugs must be separated from all other drugs or placed on a separate form. (4) Unopened containers of the same substance, manufacturer, volume, and concentration can be listed together. (5) List open containers as separate line items. (6) Measure in weight (powder or crystals) or volume (liquids) or number of units (tablets or capsules).

## **DEA Biennial Controlled Substance Inventory Form**

A separate biennial inventory is required for each registered location.

Date:		□S	Start of Day	∃End of Day	1					
DEA Registrant (Print Name):										
DEA Regis	trant Address	s (as appears on I	DEA Form 223):							
		nce License # (if a		Signature						
				ngnature						
nventory Wi	tness:			Signature						
nventory Wi	itness:	Print Name	5	Signature						
DEA Schedule	Controlled Substance		Concentration (mg/ml)	Container Quantity	Remaining Amount/ Container Volume					
DEA	Controlled	Print Name  Container Unit Type (Vial, syringe,	Concentration	Container	Amount/ Container					
DEA Schedule	Controlled Substance	Container Unit Type (Vial, syringe, patch, etc)	Concentration (mg/ml)	Container Quantity	Amount/ Container Volume					

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Measure in weight (powder or crystals) or volume (liquids) or number of units (tablets or capsules).