

Permit Number: _____

MONTGOMERY COUNTY

Emergency Medical Services



Month/Year:

1608 Haynes Street Clarksville, TN 37043

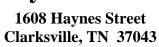
Controlled Drug Log Main Box

Please Print Clearly									
Day	Tag Number	Removed from Unit	Placed back on Unit	Leaving Personnel	Receiving Personnel				
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
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29									
30									



MONTGOMERY COUNTY

Emergency Medical Services





Controlled Drug Log Main Box

Permit Number:			Month/Year:							
Please Print Clearly Morphine										
Lot Number	Exp. Date	Date Used	Replacement Lot #	New Exp Date	New Tag #	Used/Changed By				
			•	•						
Valium										
Lot Number	Exp. Date	Date Used	Replacement Lot #	New Exp Date	New Tag #	Used/Changed By				
Fentanyl										
Lot Number	Exp. Date	Date Used	Replacement Lot #	New Exp Date	New Tag #	Used/Changed By				

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