Controlled Substances

Office of Research Integrity
University Hall Suite 540

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University of CINCINNATI

Usage Log

Drug Name			Concentration	Container Size
Vendor Name	Unique Container Number	Date Received	Date Container Opened	Expiration Date
Drug Storage Location (postal address, including building/room)		DEA Registration Number	Principal Investigator Name	
		_	_	

Date	Species	Patient Name or Number	Amount Used	Amount Remaining	Initials

Date	Species	Patient Name or Number	Amount Used	Amount Remaining	Initials

Revised 2/13/2023 Controlled Substances Usage Log