MUSC-MC PERPETUAL INVENTORY SHEET (g05_5.frm)
(to be kept on ALL prescription drugs stored outside of the pharmacy area*)

DRUG (include dosage form):_____ **Location:**_____
Units: (e.g., tablets, capsules, bottles, tubes, vials, etc):_____

Date	Patient name (MRN) or activity**	QTY(units) (+/-)***	Lot #	Exp. date	Balance	Signature of person withdrawing dose
9/09/99	Received into inventory	+100	99999A	9/99	100	*Susie Brown*
9/10/99	John Doe (999999)	- 10	99999A	9/99	90	*Ray Smith, MD*
9/31/99	Removed from inventory- expired	- 90	99999A	9/99	0	*Susie Brown*

* **Excludes** drugs which are SAMPLES, in PYXIS, delivered from the pharmacy areas pursuant to a physician's order, medications from home, etc. Drugs ordered via the Pharmacy Distribution Center would be subject to tracking using this sheet.

** **Patient name or activity** refers to the action that leads to a change in the balance e.g., dispensed to patient," received into inventory", or "removed from inventory" (recall or expired).

*** **Quantity** refers to quantity dispensed to the patient (-), quantity received into inventory (+) , or quantity disposed of (-), using the designation in the "units" space above.