

Medication Disposal Log

Disposition  
A= Controlled medication  
B = Non-controlled medication

Month \_\_\_\_\_ 20\_\_\_\_\_

Medication Name	Dosage	Rx Number	Quantity	Disposition	Disposal Date	Name of Staff and Witness Completing Disposal
				A B		
				A B		
				A B		
				A B		
				A B		
				A B		
				A B		
				A B		
				A B		

Client Name: \_\_\_\_\_  
DOB: \_\_\_\_\_