☐ **CONTROLLED MEDICATIONS DISPOSED**
(NURSE + WITNESS TO DO)

☐ **NON-CONTROLLED MEDICATIONS DISPOSED**
(2 STAFF TO DO)

Bates DRUG STORES, INC.
Bates Pharmacy & Medical Supply
Serving Spokane Since 1942
Employee Owned Since 2002

MEDICATION DISPOSAL LOG

RESIDENT NAME	MEDICATION NAME & STRENGTH	RX#	AMOUNT DISPOSED	METHOD OF DISPOSAL	REASON FOR DISPOSAL	DISPOSED OF BY (SIGNATURE)	WITNESSED BY (SIGNATURE)	DATE DISPOSED

***COMPLETE ONE FORM FOR CONTROLLED MEDICATION DISPOSAL AND ONE FORM FOR NON-CONTROLLED MEDICATION DISPOSAL (REMEMBER: CONTROLLED MEDICATIONS ARE LABELED BY PHARMACY WITH A RED "C"**