

University of Michigan  
 Controlled Substance Research Records  
**General Inventory Log**

Controlled Substance: **Ketamine**

Schedule (I-V): **III**

Container Type: **Vial**

Container Size: **10 ml**

Concentration: **0.3 mg/ml**

DEA Registrant name: **John Smith**

DEA Registrant Address (as appears on DEA Certificate of Registration): **Lab address, building name, room number, University of Michigan, Ann Arbor, MI 48109**

**\*Container ID # is assigned by lab upon drug receipt**

Date	Amount Received	*Container ID #	Amount Dispensed	Container Balance	Authorized Personnel Initials	Comments (Received from supplier, transferred to multi-dose or dilution log, or sent to OSEH for disposal)
2/5/15	5 X 10 ml	1A		1		Rcv'd from UMHS B2 Rx
		2A		2		
		3A		3		
		4A		4		
		5A		5		
2/25/15		1A	1	4	KC	Transferred to multi-dose log
2/28/15		2A	1	3	EZ	Transferred to dilution log
3/3/15		3A	1	2	KC	Transferred to dilution log
2/5/16		4A	1	1	KC	2 vials expired- OSEH pick up
		5A	1	0	KC	