**Drug Pack Stock Check ALS**

**Drug pack number**:

**Sheet number:**

This form is to be used to record drug bag contents. The drug bag then has to be sealed (seal number to be noted).

After breaking the seal the contents have to be recorded again and the bag re-sealed.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | Record the date and time for each stock check completed: | | | | | | | | | |
| **DATE / TIME** | | |  |  |  |  |  | |  |  | |  |
| Drug | Presentation | | Record the number of drugs below: | | | | | | | | | |
|  | | | **Expiry** | **Pouch** | **QTY** |  |  |  | |  | |  |
| **Adenosine** | 3mg/mL | Vial |  |  | 3 |  |  | |  |  | |  |
| **Adrenaline** | 1:10000 | Syr |  |  | 5 |  |  | |  |  | |  |
| **Amiodarone** | 50mg/mL | Amp |  |  | 3 |  |  | |  |  | |  |
| **Atropine** | 1mg/mL | Amp |  |  | 2 |  |  | |  |  | |  |
| **Chlorpheniramine** | 10mg/mL | Amp |  |  | 2 |  |  | |  |  | |  |
| **Chlorpheniramine** | 2.5mg/5mL | Syrup |  |  | 1 |  |  | |  |  | |  |
| **Chlorpheniramine** | 4mg | Tab |  |  | 10 |  |  | |  |  | |  |
| **Clopidogrel** | 300mg | Tab |  |  | 2 |  |  | |  |  | |  |
| **Dexamethasone** | 4mg/mL | Amp |  |  | 2 |  |  | |  |  | |  |
| **Furosemide** | 10mg/mL | Amp |  |  | 4 |  |  | |  |  | |  |
| **Ipratropium brom.** | 250microg/2mL | Neb |  |  | 10 |  |  | |  |  | |  |
| **Lidocaine** | 1% | Amp |  |  | 1 |  |  | |  |  | |  |
| **Metoclopramide** | 10mg/2mL | Amp |  |  | 2 |  |  | |  |  | |  |
| **Naloxone** | 0.4mg/mL | Vial |  |  | 2 |  |  | |  |  | |  |
| **Ondansetron** | 2mg/mL | Amp |  |  | 2 |  |  | |  |  | |  |
| **Ondansetron** | 8mg | Melts |  |  | 4 |  |  | |  |  | |  |
| **Paracetamol** | 1g/100mL | Vial |  |  | 2 |  |  | |  |  | |  |
| **Tranexamic Acid** | 100mg/mL | Amp |  |  | 2 |  |  | |  |  | |  |
| Record new security seal number below: | | | | | | | | | | | | |
| **NEW SECURITY #** | | |  |  |  |  |  | |  |  | |  |
|  | | | Signature and PIN number (DOH) for each stock check completed: | | | | | | | | | |
| **SIGNATURE and DOH PIN #** | | |  |  |  |  |  | |  |  |  | |
| **WITNESS SIGNATURE and DOH PIN #** | | |  |  |  |  |  | |  |  |  | |

Amp = ampoule Cre = cream Neb = nebuliser Spr = spray Sus = suspension Syr = syringe (pre-filled) Tab = Tablet