

Record of In-Home Medication Disposal

The following amount(s) of medication (Prescription, OTC, and/or Herbal) are being disposed of at				
	n their residence with this f		T	
Medication Disposed	Dispensing Pharmacy	RX Number or Lot Number	Quantity	
Method of disposal:liquid soap and water)		(example: mixed with used	_ (example: mixed with used coffee grounds or	
Disposed by:		, SafeMed Outreach Worker		
Witnessed by:,		, SafeMed Outreach Worker	, SafeMed Outreach Worker	
The signature below represents the authorization of medication disposal by SafeMed Program associates in my residence.				
SafeMed Patient or Car	regiver:	Г)ate:	