

Record-Keeping  
Requirements:  
Ordering/Receiving  
CS/DD





In this presentation

The main objective of this presentation is to discuss the importance of keeping accurate ordering and receiving controlled substances (CS) and dangerous drugs (DD) records.

## Why is this important?

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All registrants are **required by law** to keep complete and accurate records of all substances manufactured, imported, **received**, sold, delivered, exported, or otherwise **disposed** of by him/her for a period of **two years**.

Emory Policy requires that records are kept **3 years past the date of disposition**.








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## Ordering CS/DD

All CS/DD orders should be purchased through Emory Express. No personal credit cards should be used.

If you have trouble obtaining a particular drug, reach out to the [Procurement Help Desk](#)

Emory's updated Policy 7.25 does allow for transfers/sales of controlled drugs from one PI to another, but you must contact ORIC [for approval prior to the transfer.](#)




# Ordering Schedule I-II CS require a DEA Form 222

All Registrants should be using the single Form 222 for Schedule I-II drugs. All DEA Form 222s in triplicate should be voided and can be sent back to the local DEA office in Atlanta. Please contact ORIC for further instructions.

If you make an error on the form, it must be voided, and a new DEA Form 222 must be issued. Keep the voided form in your DEA Binder.

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# Ordering Schedule I-II CS require a DEA Form 222

Fill out the DEA Form 222 completely. Upon completion, **make a copy**, file the copy in your binder, and send the original form to the Supplier's mailing address listed on the DEA Form 222.

If there are errors on the Purchaser's DEA Form 222, then the Supplier must and will return the form to the Purchaser with a "Reason for Return" statement letter. The DEA Form 222 must be voided by the Purchaser and the Reason for Return letter must be filed with the voided DEA Form 222 in the Registrant's binder.

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PURCHASER INFORMATION

REGISTRANT NAME  
1599 EMORY WAY #5211  
ATLANTA, GA

REGISTRATION INFORMATION

REGISTRANT#: RM1234567  
REGISTRATION TYPE: RESEARCHER  
SCHEDULES: 1N, 2N, 2, 3N, 3, 4, 5  
ORDER FORM #: 12000022658  
DATE ISSUED: 03/14/2023

SUPPLIER DEA #

MS1234567

PART 2: TO BE FILLED IN BY PURCHASER

BUSINESS NAME McKesson Distributor LLC

STREET ADDRESS 12567 Distributor Way  
Norcross, GA 30009

PART 1: TO BE FILLED IN BY PURCHASER

John Smith, Professor  
PRINT OR TYPE NAME AND TITLE  
John Smith

SIGNATURE OF REQUESTING OFFICIAL

ITEM	NO. OF PACKAGES	PACKAGE SIZE	DATE SHIPPED
1	1	100	01/20/24
2	10	10ML	01/20/24
3	1	100ML	01/20/24
4	2	500	01/20/24
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

\*\*\*\*\* AT THIS POINT STOP, MAKE A COPY OF THIS FORM, FILE THE COPY IN THE DEPARTMENT READY BINDER AND SEND THE ORIGINAL TO THE SUPPLIER \*\*\*\*\*

DO NOT FILL OUT THIS SECTION. THIS IS FOR THE SUPPLIER ONLY

LAST LINE COMPLETED(MUST BE 20 OR LESS)

# Receiving Forms from Supplier



The Supplier's record must include:

- Supplier's Info: Name, Address, DEA or State license number, Invoice #
- Purchaser Information: Name, Address, DEA or State license number
- Drug Name, Strength/Concentration, Quantity, # of Containers, and Drug Form
- Quantity Shipped
- Date Shipped

The Purchaser must note on the invoice/packing slip from the Supplier:

- Quantity Received
- Date Received
- The receiver should initial the document



# PATTERSON VETERINARY

EMORY UNIVERSITY  
101 WOODRUFF C...  
ATLANTA GA 30322-0001  
US

Patterson Veterinary Supply, Inc.  
21111 N 9th PL  
Phoenix AZ 85024-5636  
US

## INVOICE

Order #	Pack Slip #	Invoice #

Ship Date: Oct 23, 2023 5:02:50 PM  
Invoice Date: Oct 23, 2023  
Customer P.O.: A890616  
Shipped From: Patterson Logistics Services, Inc.  
1004 CORNERSTONE DR  
MOUNT JOY PA 17552-9419  
US  
DEA #:

Customer #: [REDACTED] Bill Cust #: [REDACTED] Telephone: 800-225-7911  
DEA #: [REDACTED] Representative: Elizabeth Beaudry

Rx License #: [REDACTED] Practitioner #: [REDACTED] Practitioner: PHARMACY EXEMPT PRACTITIONER PARTNER

Product #	Ordered	Shipped	Unit	Vendor	Vendor #	Description	Unit Price	Amount	Q
78947617	2.000	2.000		WVG	86084010030	ETHIQA XR BUPRENOR 1.3MG/ML (CIII)3ML VI NDC : 8608410030	\$ 415.00	\$ 830.00	
Compliance Data									
Ship-to:						Practitioner: PHARMACY EXEMPT PRACTITIONER PARTNER DEA Registrant: PHARMACY EXEMPT PRACTITIONER PARTNER PRAC RX LICENSE : [REDACTED] DEA REGISTRATION: [REDACTED]			
Sold-by:						BRANCH STATE RX : [REDACTED] BRANCH STATE CS: EXEMPT			
Shipped From:						FC STATE RX: EXEMPT FC STATE CS: EXEMPT FEDERAL DEA REG. [REDACTED]			
<p style="text-align: right; font-size: 1.2em; font-weight: bold;">Rec'd: 3:35PM @ 10/25/23 by APM</p>									
<b>Total</b> 2 2									

Payment Terms  
VET Std Net Due on 25th  
Remit Payment to :  
Patterson Veterinary Supply, Inc.  
PO Box 978738  
Dallas TX 75373-2865

Say #so long# to #no news is good news#. Auto DX Alerts automatically notifies clients of pet#s negative test results, saving your staff time and giving owners peace of mind. Visit [pattersonvet.com/autodxalerts](http://pattersonvet.com/autodxalerts). Patterson has made DSCSA/state law transaction statements, info and history documents available to you by TraceLink. Enter <https://app.tracelink.com/login> into your web browser, to access this info. A one-time registration is required. Manual checks may be converted and collected electronically.

Sub Total		\$ 830.00
Local Tax	0.00 %	\$ 0.00
State Tax	0.00 %	\$ 0.00
<b>Total</b>		<b>\$ 830.00</b>

# Emory Receiving Forms

These forms are optional **if** you keep **all** your invoices/packing slips from the Supplier. If the Registrant does not receive an invoice/packing slip from the Supplier then the Registrant should contact the Supplier to request a copy and fill out the Emory Receiving records.

## **Controlled Substances**

Form 8 – For Scheduled I & II drugs (does not replace the DEA Form 222)

Form 9 – For Schedule III – V drugs

**Dangerous Drugs-** Form B – for all dangerous drugs



## Form 8: Schedule I – II Controlled Substance Receiving Log

*Note: All Schedule I-II Controlled Substances must be received on the DEA Form 222. This form is not a substitute for receiving the controlled substance on the official form.*

Box 1: Registrant Information		
Registrant's Name: <i>Joe Smith</i>	DEA #: <i>RS1234567</i>	Registered Address: <i>101 Emory Way, Room #1234, Atlanta, GA, 30303</i>

Box 2: Receiving Log for all Schedule I – II Controlled Substances								
DEA Form 222 Order Form #	Name of the Controlled Substance	Concentration /Strength	Volume/Quantity of each container	Drug Form	Number of Containers	PO #	Date Received	Name of Person Receiving the C/S
<i>12458895689</i>	<i>Psilocybin</i>	<i>100</i>	<i>5 grams</i>	<i>powder</i>	<i>1</i>	<i>PO1263749</i>	<i>07/01/23</i>	<i>Joe Smith</i>
<i>1245889560</i>	<i>Oxycodone HCL</i>	<i>100</i>	<i>10 grams</i>	<i>powder</i>	<i>1</i>	<i>PO1263749</i>	<i>07/01/23</i>	<i>Joe Smith</i>
<i>4385489540</i>	<i>Dexamethylphenidate HCL</i>	<i>5mg</i>	<i>100</i>	<i>tablets</i>	<i>4</i>	<i>PO8458489</i>	<i>07/15/23</i>	<i>Joe Smith</i>
<i>2732898349</i>	<i>Morphine Sulfate ER</i>	<i>20mg</i>	<i>1000</i>	<i>capsule</i>	<i>1</i>	<i>PO8548984</i>	<i>07/25/23</i>	<i>Joe Smith</i>
<i>2732898349</i>	<i>Fentanyl Base</i>	<i>100</i>	<i>1 gram</i>	<i>powder</i>	<i>1</i>	<i>PO8548984</i>	<i>07/25/23</i>	<i>Joe Smith</i>





# Knowledge Check





# Our contact info

- Office email: [oric@emory.edu](mailto:oric@emory.edu)
- Office Website: <https://rcra.emory.edu/oric/index.html>

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Office of Research Integrity and Compliance  
Research Compliance and Regulatory Affairs



Thank you!  
Any Questions?