# Working Instructions: Form 13 – Current Use and Disposition Form for Prescription Controlled Substances (BUP SR/ER)

# Definitions:

1. Controlled Substance - The Controlled Substances Act (CSA) places all substances which were in some manner regulated under existing federal law into one of five schedules.  This placement is based on the substance’s medical use, potential for abuse, and safety or dependence liability.  More information can be found in [Title 21 United States Code (USC) Controlled Substances Act](https://uscode.house.gov/view.xhtml;jsessionid=2C85B8DEBFB1BB15A7D31E29A34C3DAA?req=granuleid%3AUSC-prelim-title21&saved=%7CZ3JhbnVsZWlkOlVTQy1wcmVsaW0tdGl0bGUyMS1zZWN0aW9uODAx%7C%7C%7C0%7Cfalse%7Cprelim&edition=prelim) [Alphabetical List of Controlled Substances](https://www.deadiversion.usdoj.gov/schedules/orangebook/c_cs_alpha.pdf)
2. Prescription Controlled Substance – for the purpose of this form, prescription-controlled substance is defined as a controlled substance obtained/purchased through issuance of a prescription such as Buprenorphine SR/ER.
3. Registrant – A person licensed and registered with DEA to distribute, manufacture, administer, dispense, import, or export a Controlled Substance.
4. Stock Bottle – The container/bottle that was received from the supplier. The stock bottle has the original labels from the manufacturer.

# Box 1 Instructions: Registrant/PI Information

1. Complete the Registrant’s Name, DEA #, and address in this section. The information must appear exactly (in its entirety), as it does on the Registrant’s DEA License. This box must be filled out completely. If the Researcher is not a DEA Registrant then the following information should be used: the PI’s name, record N/A for the DEA #, and the address where the prescription-controlled substance is stored.

#  Box 2: Stock Bottle Information

1. Enter the Name of the Substance, Concentration/Strength, Starting Volume/Quantity, and Expiration Date and exactly as it appears on the stock bottle container. Pay special attention to the fine print on the Manufacturer’s label regarding the expiration date.
2. Record the date the stock bottle was added to inventory. This is the date the item was received in the lab and can be found on Form 8 for Schedule I – II and Form 9 for Schedule III-V.
3. Prescription number is the number found on the container.
4. Each Stock Bottle must be assigned a Unique Bottle ID. For instance, if this is the 23rd bottle of Buprenorphine SR the lab has received then the unique bottle ID could be BUPSR0023. Similarly, you could use the date received and the abbreviated drug name as the Unique Bottle ID (BUPSR021023).

# Box 3: Stock Bottle Disposition Information

1. This box is to be completed only upon destruction of the prescription-controlled substance. All prescription-controlled substances must be destroyed through EHSO (RX Destroyer).
2. In Box 3, record the name of the substance, the concentration/strength, and the total volume/quantity remaining being destroyed. The total volume/quantity being destroyed can be found on the last line on Box 4. It is recommended to record the total volume/quantity remaining on the stock bottle container.
3. Record the Method of Destruction, specifically list EHSO/RXDestroyer for Buprenorphine SR/ER.
4. Record the date of disposition. Two lab employees must sign off on the form on the date of the destruction.

# Box 4: Current Prescription Controlled Substance Use Log

1. Record the Unique Bottle ID from Box 2 and any additional pages used to record the dispensing of the prescription-controlled substance.
2. Record the date dispensed, the starting volume/quantity, amount used, and remaining balance.
3. Print the name of the person dispensing/administering.
4. Record the reason for use.

**Sample Form 13:** **Current Use and Disposition Form for Prescription Controlled Substances (BUP SR/ER)**

**Note: This form is only to be used when a Researcher obtains a controlled substance through a prescription for the clinical care of animals. One form needs to be used every new bottle received.**

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| **Box 1: Registrant/PI Information** |
| **Registrant/PI Name:** Joe Smith | **DEA # (if applicable):** RS1234567 | **Address:** 123 Main Street, Atlanta, GA, 30325 |

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| **Box 2: Stock Bottle Information** |
| **Name of Substance:** Buprenorphine SR | **Concentration/ Strength:** 0.05mg.ml | **Starting Volume/****Quantity:** 10ml | **Expiration Date:** 08/30/2026 | **Date added to inventory:** 02/10/23 | **Prescription #:** RX123546790 | **Unique Bottle ID:** BPSR0023 |

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| **Box 3: Stock Bottle Disposition Information** |
| **Name of Substance:** Buprenorphine SR | **Concentration/Strength**0.05.mg/ml | **Total Volume/Quantity Disposed:** 0.5 ml | **Method of Destruction:** EHSO | **Disposition Date:** 06/10/23 |
| **Research Staff Printed Name:** Joe Smith | **Signature:** Joe Smith | **Date:** 06/10/23 |
| **Research Staff Printed Name:** JoAnn Taylor | **Signature: JoAnn Taylor**SAMPLE | **Date:** 06/10/23 |

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| **Box 4: Current Prescription Controlled Substance Use Log** | **Unique Bottle ID:** BPSR0023 |
| **Date** | **Starting Volume/Quantity** | **Amount Used** | **Balance Remaining**  | **Printed Name of Person who Dispensed/Administered Drug** | **Reason for Use** |
| 02/11/23 | 10ml | 0.5ml | 9.5ml | Joe Smith | Pain Management |
| 02/15/23 | 9.5ml | 0.5ml | 9.0ml | JoAnn Taylor | Pain Management |
| 02/19/23 | 9.0ml | 1ml | 8ml | Joe Smith | Pain Management |
| 02/28/23 | 8ml | 2ml | 6ml | Joe Smith | Pain Management |
| 03/05/23 | 6ml | 0.5ml | 5.5ml | Joe Smith | Pain Management |
| 03/10/23 | 5.5ml | 2ml | 3.5ml | JoAnn Taylor | Pain Management |
| **Box 4: Current Prescription Controlled Substance Use Log** | **Unique Bottle ID:** BPSR0023 |
| **Date** | **Starting Volume/Quantity** | **Amount Used** | **Balance Remaining**  | **Printed Name of Person who Dispensed/Administered Drug** | **Reason for Use** |
| 03/11/23 | 3.5ml | 2ml | 1.5ml | JoAnn Taylor | Pain Management |
| 03/15/23 | 1.5ml | 0.5ml | 1ml | Joe Smith | Pain Management |
| 03/20/23 | 1ml | 0.5ml | 0.5ml | JoAnn Taylor | Pain Management |
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**Form 13: Current Use and Disposition Form for Prescription Controlled Substances (BUP SR/ER)**

**Note: This form is only to be used when a Researcher obtains a controlled substance through a prescription for the clinical care of animals. One form needs to be used every new bottle received.**

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| **Box 1: Registrant/PI Information** |
| **Registrant/PI Name:**  | **DEA # (if applicable):**  | **Address:**  |

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| **Box 2: Stock Bottle Information** |
| **Name of Substance:**  | **Concentration/ Strength:**  | **Starting Volume/****Quantity:**  | **Expiration Date:**  | **Date added to inventory:**  | **Prescription #:**  | **Unique Bottle ID:**  |

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| **Box 3: Stock Bottle Disposition Information** |
| **Name of Substance:**  | **Concentration/Strength** | **Total Volume/Quantity Disposed:**  | **Method of Destruction:**  | **Disposition Date:**  |
| **Research Staff Printed Name:**  | **Signature:**  | **Date:**  |
| **Research Staff Printed Name:**  | **Signature:** | **Date:** |

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| **Box 4: Current Prescription Controlled Substance Use Log** | **Unique Bottle ID:**  |
| **Date** | **Starting Volume/Quantity** | **Amount Used** | **Balance Remaining**  | **Printed Name of Person who Dispensed/Administered Drug** | **Reason for Use** |
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| **Box 4: Current Prescription Controlled Substance Use Log** | **Unique Bottle ID:**  |
| **Date** | **Starting Volume/Quantity** | **Amount Used** | **Balance Remaining**  | **Printed Name of Person who Dispensed/Administered Drug** | **Reason for Use** |
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