

**OKLAHOMA STATE BOARD OF PHARMACY (OSBP)  
CONTROLLED SUBSTANCE INVENTORY**

(Inventory must be taken at **Start** or **Close** of business)

Pharmacy \_\_\_\_\_ Date of Inventory \_\_\_\_\_  
Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ OSBP Lic # \_\_\_\_\_  
Pharmacy Manager / Pharmacist-In-Charge: \_\_\_\_\_  
*(PRINT name and certificate #)*

**NOTE:** A signed and dated controlled substance inventory **MUST** accompany all **Pharmacy Renewal Applications** and notice of **change of Pharmacist-In-Charge**.

**INVENTORY WAS CONDUCTED AT** (✓ check one)

Close       Start of Business       24-Hour Pharmacy (Time: \_\_\_\_\_ )

**REASON FOR INVENTORY** (✓ check one)

Change of Pharmacist-In-Charge \*       Ownership Change       Pharmacy Closing  
 Annual Inventory for Renewal **(May 1st thru June 30th)**

**NO CONTROLLED SUBSTANCES** are stocked.

(Please **COMPLETE THIS PAGE AND RETURN** it with your renewal application)

**\* CHANGE of Manager / Pharmacist-in-Charge (PIC)**

Effective Date \_\_\_\_\_

INcoming PIC \_\_\_\_\_  
(print name and number)

OUTgoing PIC \_\_\_\_\_  
(print name and number)

Does this end employment at this location for the **OUTGOING PIC**?  Yes  No

I swear and affirm under penalty of perjury pursuant to Title 21 O.S. § 491 and/or discipline by the Board of Pharmacy under the pharmacy laws and rules of the State of Oklahoma, that all information I have supplied herein is true and complete to the best of my knowledge and belief.

*(Signature and Certificate # of pharmacist responsible for taking inventory)*

**MUST BE SIGNED AND DATED**







Use blank lines to insert strength and dose form and list generic drugs. If additional lines are needed, attach to this form.

Mebaral	
Meprobamate	
Meridia	
Micrainin	
Midrin	
Miltown	
Nembutal Suppositories	
Niravam	
Noctec	
Norco	
Nucofed	
Nuvigil	
Oxazepam	
Pancof	
Panlor	
Paregoric	
Pentazocine	

Pentothal	
Phenaphen with Codeine	
Phendimetrazine	
Phenergan with Codeine	
Phenobarbital	
Phentermine	
Placidyl	
Prolex DH	
Promethazine with Codeine	
Promethazine VC with Codeine	
Propoxyphene Compound	
Propoxyphene HCL 65 mg	
Propoxyphene HCL/APAP 65/650	
Propoxyphene Napsylate/APAP 100/650	
Prosom	
Protuss Liquid	
Protuss-D Liquid	
Provigil	
Restoril	
Robitussin AC	
Robitussin DAC	

Rutuss with Hydrocodone	
Ryna-C Liquid	
Sanorex	
Serax	
Soma	
Soma Compound	
Soma Compound with Codeine	
Sonata	
Stadol	
Suboxone	
Subutex	
Synalgos DC	
Talacen	
Talwin	
Temazepam	
Tenuate	
Tranxene	
Tussend	
Tussi-Organidin	
Tussionex	
Tylenol with Codeine	

