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Page No.	Drug name, form and strength								

WARD REGISTER OF DRUGS OF ADDICTION - POISONS AND THERAPEUTIC GOODS ACT 1966

				***************************************							Trai	Date Time rece or gi	Drug (name strength) form
											Transferred Balance from Page:	Time Patient's name/Received from or given	e ngth
												Amount received	
												Amount given	
												Discard	
										-		Balance	
												Name of prescriber	
												Print name of administering or supplying person	Wa
												Signature of administering or supplying person	Ward
								 		•		Print name of person witnessing, supervising or directing	
												Signature of person witnessing, supervising or directing	
												Comments/ Professional Registration number if applicable	