

**Central DuPage Hospital
Emergency Medical Services System**

Agency / Unit:	Month: 20__
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MEDICATION TOTALS		EXPIRATION DATES			
1	Fentanyl 200mcg	___/20__		___/20__	
2	Versed 20mg	___/20__	___/20__	___/20__	___/20__
3	Ketamine 1000 mg	___/20__		___/20__	

Ambulance - ALS Inventory Record

Date	Time	Fentanyl 200 mcg	Versed 20 mg	Ketamine 1000mg	Checked By:	Checked By:	Tag
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