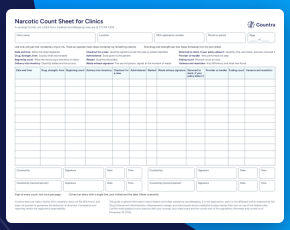
Countra

Narcotic Count Sheet for Clinics


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A narcotic count sheet is a perpetual inventory of the controlled substances held at a clinic: what is on hand, what was delivered into inventory, what was checked out for a case, what was administered, what was wasted and witnessed, and what the physical count showed at the end of a shift. There is no DEA form for it and no official template to download, because federal rules require complete and accurate records that are readily retrievable rather than one prescribed layout (21 CFR 1304.21(a), 1304.04).

How clinics commonly run the count

Common practice is a two-person count at the open and close of the safe or at shift change, with both signing the ending count, so the number never rests on one person's word. How often you count and who pairs up is set by your own policy, your state board and your accreditor rather than by one federal line.

Some clinics return an unused quantity to stock and record the return. Others waste everything that leaves the safe. Both are defensible, and which one you are held to is set by your own policy, your state board and your accreditor. What is not defensible is a sheet where the quantity checked out does not equal what was administered, plus what was wasted, plus what came back.

What do you do when the count does not close?

Work it while the day is fresh. Recount with a second person, walk the sheet back to the last point where it balanced, check the cases and the cancellations in that window, and confirm every waste has its witness signature. Most discrepancies have an ordinary explanation: a missed entry, a partial dose recorded against the wrong line, a delivery logged twice. Then write down what you found and the time you found it, and raise it the same day with whoever owns the record.

There is no federal clock on working a discrepancy itself. Where a discrepancy turns out to be a theft or a significant loss, a separate reporting path opens with its own deadlines, and that determination belongs to the registrant.

When does a count sheet stop being enough?

A count sheet is enough while one person can hold the whole picture. It stops being enough when enough providers share one supply that nobody can see across all of them, because a sheet records each handling step in isolation and nothing in it compares one provider to another. That is a limit of the format, not a failure of the people using it.

Countra is a controlled-substance documentation and per-provider diversion-monitoring software for multi-provider clinics and surgery centers that handle controlled substances in-house, with no hospital pharmacy and no dispensing cabinet.

countra.ai/pain-clinics

Countra does not make a facility DEA compliant, does not file DEA forms, and does not prevent or guarantee the detection of diversion. Compliance and reporting remain the registrant's responsibility.

This guide is general information about federal controlled-substance recordkeeping. It is not legal advice, and it is not affiliated with or endorsed by the Drug Enforcement Administration. Requirements change, and state boards and accreditation bodies impose their own on top of the federal rules. Confirm what applies to your practice with your counsel, your state board and the current text of the regulations. Reviewed and current as of November 18, 2026.

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A working format, not a DEA form. Federal recordkeeping rules are at 21 CFR 1304.

Countra

Clinic name	Location	DEA registration number	Month or period	Page
				_____ of _____

Use one unit per line: containers, mg or mL. Track an opened multi-dose container by remaining volume. One drug and strength per line. Keep Schedule II on its own sheet.

Date and time When the step happened
Drug, strength, form Exactly what was handled
Beginning count What the record says should be on hand
Delivery into inventory Quantity added and the source
Checkout for a case Quantity signed out and the case or patient identifier
Administered Dose given to the patient
Wasted Quantity discarded
Waste witness signature The second person, signed at the moment of waste
Returned to stock, if your policy allows it Quantity that went back, and who returned it
Provider or handler Who performed the step
Ending count Physical count at close
Variance and resolution Any difference, and what was found

Date and time	Drug, strength, form	Beginning count	Delivery into inventory	Checkout for a case	Administered	Wasted	Waste witness signature	Returned to stock, if your policy allows it	Provider or handler	Ending count	Variance and resolution

Counted by	Signature	Date	Time	Counted by	Signature	Date	Time
Counted by (second person)	**Signature**	**Date**	**Time**	**Counted by (second person)**	**Signature**	**Date**	**Time**

Sign at every count, not once per page. Correct an entry with a single line, your initials and the date. Never overwrite.

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