## Canton City Public Health OENDP Take Home Medication Dispensing Logsheet



ATTACH PATIENT STICKER OR ENTER INFO: **Patient Name or Agency Code** Naloxone Furnisher Signature Medication **Exp Date** Mfg. Date Quantity Lot 1 2 nasal **ADAPT** Narcan® 4mg/0.1mL spray Pharma (naloxone HCI) devices Inc 2 nasal **ADAPT** Narcan® 4mg/0.1mL spray Pharma (naloxone HCI) devices Inc 2 nasal **ADAPT** Narcan® 4mg/0.1mL spray Pharma (naloxone HCI) devices Inc 2 nasal **ADAPT** Narcan® 4mg/0.1mL spray Pharma (naloxone HCI) devices Inc 2 nasal **ADAPT** Narcan® 4mg/0.1mL spray Pharma (naloxone HCI) devices Inc 2 nasal **ADAPT** Narcan® 4mg/0.1mL spray Pharma (naloxone HCI) devices Inc 2 nasal **ADAPT** Narcan® 4mg/0.1mL spray Pharma (naloxone HCI) devices Inc

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