# Investigational Product Accountability Log: Subject Record

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| --- | --- |
| **Name of Site:** | **Product Name:** |
| **Principle Investigator:** | **Manufacturer:** |
| **Protocol #:** | **Dose Form and Strength:** |
| **Protocol Title:** | **Dispensing Area:** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Line No. | Date | Subject ID Number | Subject’s Initials | Dose | Quantity Dispensed and/or Received | Balance Forward / Balance | Lot No. | Recorder’s Initials |
| *Ex.* | *15Feb2012* | *12345* | *ABC* | *10 mg* | *- 100 tabs* | *600*  *500* | *98765* | *JAD* |
| 1. |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |  |  |
| 5. |  |  |  |  |  |  |  |  |
| 6. |  |  |  |  |  |  |  |  |
| 7. |  |  |  |  |  |  |  |  |
| 8. |  |  |  |  |  |  |  |  |
| 9. |  |  |  |  |  |  |  |  |
| 10. |  |  |  |  |  |  |  |  |

Check if final page of log: Checkbox.