



State of New Hampshire
Board of Pharmacy

Office of Professional Licensure & Certification
121 South Fruit Street, Suite 401 - Concord, NH 03301-2412
Tel.: (603) 271-2350 | Fax: (603) 271-2856 | Website: www.oplc.nh.gov/pharmacy/

NEW HAMPSHIRE CONTROLLED DRUG LOSS FORM

NH Pharmacy Rule Ph 703.03 requires the pharmacist-in-charge or pharmacist on duty report any theft or significant controlled substance loss to the Board of Pharmacy. Complete both pages of this form and send by either fax to 603-271-2856 or preferably by email to Pharmacy.Compliance@oplc.nh.gov

Form section containing checkboxes for 'Initial Report of Loss', 'Final / 30-Day Report on Loss', and 'Revision to Initial Report of Loss'. Includes fields for 'Name & Address of Pharmacy', 'NH Pharmacy Permit Number', 'DEA Number', 'Pharmacy Phone Number', 'Name of Pharmacist-In-Charge', and 'Name of Pharmacy District Manager'.

Form section containing fields for 'Date of Loss', 'Number of Losses by Pharmacy In Past 2 Years', and 'Type of Theft or Loss' (Night Break-In, Armed Robbery, Customer Theft, Employee Theft, Lost In Transit, Other). Includes questions about armed robbery (killed/injured) and value of drugs lost/stolen.

Form section titled 'If Drugs Lost In Transit, Complete the Following:'. Includes fields for 'Name of Common Carrier', 'Name of Consignee', 'Consignee DEA #', and questions about carton receipt and tampering.

Form section titled 'For Board Office Use Only:'. Includes checkboxes for 'NFA', 'CI Follow-Up Required', and 'Immediate Action Required by Compliance', along with a field for 'Initials of CCI / BA'.

