



Standard Operating Procedure (SOP) for Narcotics and Controlled drugs

As per the Narcotic Drugs and Psychotropic Substances (NDPS) Act, 1985.

Essential Narcotic Section/Department of Pharmacy

All India Institute of Medical Sciences, Raipur

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All India Institute of Medical Sciences, Raipur, Chhattisgarh

(An Autonomous Body Under Ministry of Health & Family Welfare, Govt of India)



G.E. Road Tatibandh Raipur 492099

Document No.	TITLE		
AIIMS/Raipur/ Policy/01	Standard Operating Procedure (SOP) for Narcotics and Controlled drugs		
Function	Name	Designation	Signature
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Distribution: Medical Superintendent, DNS, ANS, Central Pharmacy stores, Hospital stores (Procurement section), AIIMS Raipur website (IT department.)

Revision Summary

Version Number	Effective date	Revision History
2	01-01-2026	

Details of revision: This revision includes the addition of Forms 3-C, 3-E, 3-F, 3-H, 3-I and 3J, updates to the Narcotic Consumption Record, and the introduction of Quick Review, Occurrence report, Master Security Requirements, Procedure for Annual Narcotic Drug Requirement, Procedure for annual return of narcotic drugs (form 3-I), Procedure for NDPS License Renewal, Procedure for Transport of Essential Narcotic Drugs, Patient-wise Record Maintenance in Form 3E, Daily Accounts of Essential Narcotic Drugs, Expiry, Near- Expiry



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1. Purpose

This policy outlines the general procedures for the secure handling of narcotic drugs throughout the hospital. Additional procedures provide detailed guidance on specific aspects of narcotic drug management, including ordering, record-keeping, auditing, distribution, and annual inventory.

2. General

As per the NDPS (Narcotic Drugs and Psychotropic Substances) Act 1985, AIIMS Raipur and all associated departments must ensure strict compliance with the legal requirements for handling-controlled substances. All narcotic and psychotropic drugs shall be stored in securely locked cabinets with access limited to authorized personnel only. A perpetual inventory must be maintained to ensure accurate tracking of all transactions, and drugs with a higher risk of diversion shall be provided additional Security measures. A master list (Annexure-7) of security requirements for each controlled substance will be maintained to ensure safe storage, prevent misuse or theft, and support full regulatory compliance.

3. Policy

- 3.1 Strict accounting of all Narcotic & controlled drugs is necessary to comply with NDPS act 1985 regulations.
- 3.2 Distribution of all Narcotic & controlled substances requires a valid physician order/Department Indent.
- 3.3 Each dose of a Narcotic & controlled substance is documented according to specific procedures patient wise at user level.
- 3.4 Policy violation will result in disciplinary action

4. Protocol

4.1 Physician Orders and Documentation

- 4.1.1 Only a consultant is authorized to prescribe controlled substances.
- 4.1.2 In the event of a casualty or emergency, the prescriber may obtain approval for controlled substance orders from the Essential Narcotic Drug Officer through various communication methods, including email, phone call, or WhatsApp message. All such orders must be documented in physical form and fully authenticated within 12 hours.
- 4.1.3 Before administering any narcotic drug, proper documentation must be completed, and the Assistant Nursing Superintendent (ANS) of the respective department is responsible for ensuring compliance.
- 4.1.4 Control of medications during infusion must be maintained using portless tubing, patient-controlled analgesia pumps, epidural infusion pumps, or other devices as



preferred by the prescriber.

- 4.1.5 All documentation related to the Drug administration and wastage of narcotic drugs for a patient must be entered in the Narcotic Consumption Book (NCB), and the ANS of the respective department shall cross-check the entries.
- 4.1.6 The time of Drug administration and the initials of the officer, staff, or prescriber administering the drug must be recorded in the NCB.

4.2 Employee Training

- 4.2.1 The Pharmacy shall adhere to the guidelines of the NDPS Act and ensure that all Nursing Officers and Pharmacists involved in handling narcotic drugs are sensitized through regular training. A training register shall be maintained for record purposes, and all such training sessions shall be organized through the Medical Superintendent.

4.3 Employee Responsibility

- 4.3.1 The Hospital Store is responsible solely for the procurement of NDPS drugs. The Pharmacy Department is responsible for receiving, inspecting, storing, and distributing these drugs. The respective indenting departments are responsible for the secure storage and rational use of narcotic drugs, and for maintaining all relevant records.
- 4.3.2 The Assistant Nursing Superintendent (ANS), Senior Nursing Officers (SNO), and Nursing Officers (NO) are responsible for administering injections, discarding any unused portions, and maintaining the relevant records.
- 4.3.3 The prescriber is responsible for the controlled use of NDPS drugs and may issue a verbal order under exceptional circumstances, ensuring that the order is subsequently documented and updated.
- 4.3.4 The Essential Narcotic Drug Officer is responsible for monitoring the controlled use of NDPS drugs.
- 4.3.5 The ANS, Unit/Area In-Charge, Pharmacy staff, Nursing Officers, and the Essential Narcotic Drug Officer are responsible for conducting a daily visual audit of the required documentation for narcotic and controlled drugs.



4.4 Illicit Activities by Employees

- 4.4.1 Any employee who possesses, sells, uses, or diverts controlled substances will be subject not only to legal prosecution for any illicit activity but will also become the subject of independent action regarding their continued employment, following due inquiry and approval by the competent authorities.
- 4.4.2 In addition, the Office Administration of AIIMS, Raipur will assess the seriousness of the employee's violation, the position or level of responsibility held, the employee's past record, and other relevant factors to determine whether to suspend, transfer, terminate, or take other appropriate action.

5. Procedures

5.1 Procurement

Quick Review

- **Responsible unit:** Hospital Store (Procurement)
- **Basis:** Annual Requirement (Form 3-J)
- **Approval:** ENDO + Competent Authority
- **Vendor:** Authorized / Rate Contract only
- **Record maintained:** Purchase + Stock Registers

- 5.1.1 Based on the annual requirements submitted by various user departments for narcotic drugs, the monthly and annual quotas are determined in accordance with the NDPS license/approval from the competent authority. For detailed procedures, please refer to **Section 5.10** – Procedure for Annual Narcotic Drug Requirement.

- 5.1.2 The procurement of narcotic drugs is carried out by the Hospital Store (Procurement) Unit under the supervision of the Faculty In-Charge (Pharmacy) and the Essential Narcotic Drug Officer. After receipt by the Central Pharmacy, the drugs shall be issued to the respective User Departments against a valid indent/requisition approved by the competent authority at AIIMS Raipur.

- 5.1.3 The procurement of narcotic drugs shall be carried out only through authorized vendors/Rate Contract or through the governmental mechanisms in place from time to time.



Figure 1 Double Locker Cupboards



5.2 Storage

- 5.2.1 Narcotic & controlled drugs storage and inventory management done by Central Pharmacy and User Departments.
- 5.2.2 Narcotic and psychotropic drugs shall be stored in double-lock secured cupboard / almirah within the Central Pharmacy and all User Departments to prevent theft and misuse. The lockable almirah shall be kept inside a room with a locked door so that the purpose of the double-lock system is fully maintained.
- 5.2.3 The stock of narcotic and controlled drugs shall be counted at each shift change and handed over to the staff member of the incoming shift.

5.3 Procedure of Narcotic Requisition and Issuing by Pharmacy

Quick Review

- **Indent mode:** HMIS (online) + signed hard copy
- **Approval required:** ENDO
- **Issued by:** Central Pharmacy
- **Documentation:** HMIS + Stock Register
- **Overwriting allowed:** ✗ No

- 5.3.1 The Central Pharmacy shall issue narcotic drugs only to the respective User Departments of AIIMS Raipur upon receipt of a narcotic drug indent generated online through the HMIS system by the concerned ward/User Department. The indenter shall submit a printed hard copy of the HMIS-generated indent, duly signed and stamped by the prescribing doctor, clearly mentioning the doctor's Name, Designation, signature, stamp, and required quantity. No cutting or overwriting is allowed in the Indent. If an error occurs during the indenting process in the HMIS system, a new indent request must be raised, and the old indent must be cancelled with the remark "Indent error."
- 5.3.2 The hard copy of the narcotic indent must be duly approved and countersigned by the Essential Narcotic Drug Officer (ENDO) prior to issuance. Narcotic drugs shall be issued only after such approval.
- 5.3.3 No cutting, overwriting, or alteration is permitted in the HMIS-generated indent or its printed hard copy. In case of any error during the indent generation process in the HMIS system, the indenter shall raise a fresh indent, and the erroneous indent shall be cancelled online with the remark "Indent Error."
- 5.3.4 The Central Pharmacy shall retain the original hard copy of the narcotic indent, duly approved by the Essential Narcotic Drug Officer. Of the receipt copies generated by the Pharmacy through the HMIS system, one copy shall be retained by the Pharmacy, and one copy shall be issued to the respective indenter/User Department for record purposes.



Flow Chart

Central Pharmacy, AIIMS Raipur

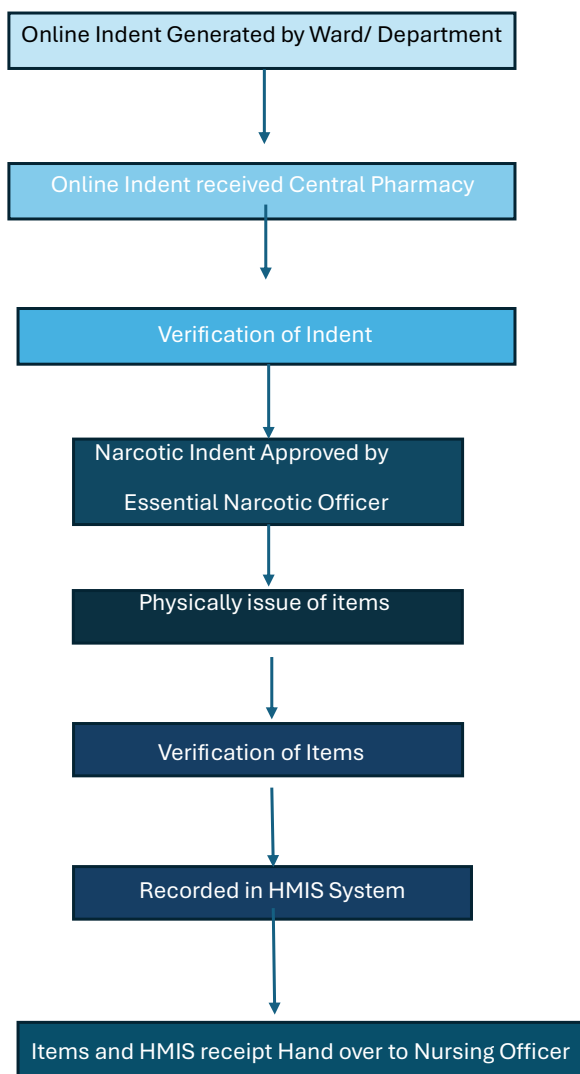


Figure 2 Dispensing Flow Chart

All India Institute of Medical Science Raipur
 अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर
 Tatibandh Road, Raipur, Chhattisgarh-492099, Chhatisgarh, India
 Phone :077125 72240

Indent Type : Indent For Issue(Dept)
 Raising Store : Trauma Ground Floor

Indent No.	101726010000036	Indent Date.	02-Jan-2026
To Store	Central Pharmacy	Indent Period	Monthly

S.No	Item Name	Req. Qty.	Approved Qty.
1	INJ FENTANYL CITRATE 50MCG/ML (2ML AMPOULE)[EDL]	500 No.	500 No.

****End of Report****

Approved
500 nos
T. Pargay kumar
03/01/26
12.00 pm

डॉ. देवेंद्र कुमार त्रिपाठी
Dr. Debendra Kumar Tripathy
 प्राध्यापक एवं भेषजाध्यक्ष (आघात और अचानक उत्पन्न विकल्पा विभाग)
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 अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छ.ग.)
 All India Institute of Medical Sciences, Raipur (CG)

Figure 3 Indent



- 5.3.5 After receipt of the approved narcotic drug requisition through the HMIS system, the narcotic medicine shall be issued to the designated User Department, and all issuances shall be duly recorded in the Pharmacy Narcotic Stock Register in addition to online documentation in HMIS.
- 5.3.6 No cutting or overwriting is permitted in the Pharmacy Narcotic Stock Register or Indent Register. In case of an error, the incorrect entry shall be struck off with a single line, marked clearly as "ERROR," and authenticated with the signatures of two pharmacists.
- 5.3.7 The Pharmacy Narcotic Stock Register and Indent Register shall be counter-checked and signed on a monthly basis by the Faculty In-Charge, Pharmacy / Essential Narcotic Drug Officer.

5.4 Procedure of Administration and discarding of unused Narcotic & Controlled drugs

Quick Review

- **Who can administer:** Registered Nursing Officer
- **Supervision:** Consultant
- **Record:** Form 3E + NCB
- **Discard method:** Phenol + sink
- **Witness:** Consultant / ANS
- **Photo mandatory:** ☒ Yes

- 5.4.1 The administration of doses of narcotic and controlled drugs shall be carried out by Registered Nursing Officers/staff under the supervision of a Consultant and only after a written prescription by the doctor. Details of the patient to whom Essential Narcotic Drugs are dispensed shall be maintained in Form 3E (Annexure-2).
- 5.4.2 The remaining unused portion of the drug in ampoules shall be discarded in the sink with mixing of Phenol by the Nursing Officers/staff under the supervision of a Consultant. Photo should be taken by Ward In charge and stored with Record for Future Reference.
- 5.4.3 The administration and discard records shall be entered in the Narcotic Consumption Book.



Figure 4 Discarding Process



- 5.4.4 No cutting or overwriting is allowed in the Narcotic Consumption Book. If an error occurs, it should be crossed out with a single line, marked "ERROR," and signed by two Nursing Officers or Consultant.
- 5.4.5 Transdermal Patches: After removal, the used patch or partially used patches shall be folded in half so that the sticky sides adhere to each other and then return to the Central Pharmacy.
- 5.4.6 The empty ampoules along with the corresponding consumption records shall be submitted to the Narcotic Nursing Officer, Central Pharmacy, AIIMS Raipur. These empty ampoules shall be discarded in accordance with the Biomedical Waste Management (BMW) protocol after approval by the Narcotic Disposal Committee, and the details shall be recorded by the Essential Narcotic Nursing Officer.

5.5 Procedure for returning Narcotic Drugs

- 5.5.1 Rejected narcotic and controlled substances resulting from an established ADR/ADE may be returned to the Central Pharmacy, provided they are in their original, unopened, tamper-proof packaging.
- 5.5.2 Any unused tablet from a strip must be cut in such a way that the batch number and expiry date remain visible on the remaining portion of the strip. These tablets may be recirculated inter-departmentally under the supervision of the ANS, with proper documentation in the Narcotic Consumption Book (NCB).
- 5.5.3 Narcotic drug & Controlled drugs returned to the Central Pharmacy are delivered by a Registered nursing officer.
- 5.5.4 Two licensed staff members (Registered Pharmacists, Registered Nursing Officers, or Consultants) must witness the return.
- 5.5.5 If the package has been opened or the tamper seal has been removed, it must be discarded according to the prescribed discarding procedures.

5.6 Discrepancy Resolution

Quick Review

- Discrepancy type: Stock / Key / Documentation
- Resolution time: Within same shift
- Key loss reporting: Immediate
- If unresolved: Occurrence Report mandatory
- Authority informed: ENDO + Security



- 5.6.1 Any discrepancy in the count of controlled substances or in the disposition of the narcotic keys shall be resolved before the end of the shift during which it is discovered.
- 5.6.2 Resolutions may be made by reviewing dispensing and return records and consulting with all staff who have access.
- 5.6.3 In the event of a narcotic key being lost, the Essential Narcotic Drug Officer, the ANS of the respective department, and Security shall be informed immediately. If the key is found within one hour, the entire stock of narcotic and controlled drugs shall be verified in the presence of Security and the Essential Narcotic Drug Officer or the Assistant Nursing Superintendent (for the respective User department).
- 5.6.4 If the stock is found incorrect, the staff member who misplaced the key shall be held responsible. Appropriate action will be decided by the management as per institutional rules.
- 5.6.5 If the key is not found within one hour, call the Engineering person and change the lock and check if stock found improper refers to 5.6.4 rules.
- 5.6.6 Any discrepancies which cannot be resolved must be reported immediately as follows:
- Complete an Occurrence Report to Risk Management (Annexure-8), detailing the discrepancy, the steps taken to resolve it, and the names of all registered staff on duty at the time the discrepancy was noted.
 - The ANS or Unit/Area In-Charge must also report any loss of controlled substances, where theft is suspected, to Security.
 - Staff may not leave the area until discrepancies are either resolved or formally reported as unresolved

5.7 Procedure of discarding empty ampoules

- 5.7.1 Empty ampoules along with their consumption records shall be collected from different user departments/wards by the Central Pharmacy or designated authority.
- 5.7.2 The collected empty ampoules shall be consolidated at a designated area and physically counted by authorized personnel. The count shall be cross verified with the respective consumption records.
- 5.7.3 After verification, the empty ampoules shall be stored in a secure and designated storage area with proper labeling,



Figure 5 Inspection of Committee Member
(Essential Narcotic Drug Officer)



आरोग्यम् सुखं सम्पदा

अतिआवश्यक स्वापक औषधि अनुभाग/भेषजी विभाग
Essential Narcotic Drug Section/Department of Pharmacy
अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छत्तीसगढ़)
All India Institute of Medical Sciences, Raipur (Chhattisgarh)
 Gate no.4, D-Block, Lower Ground Floor, Tatibandh, GE Road, Raipur-492 099 (CG)
 Phone no. +917712577384, Web: www.aiimsraipur.edu.in, E-Mail: pharmacy@aiimsraipur.edu.in

mentioning details such as name of drug, quantity, date, and department.

- 5.7.4 A request for disposal approval shall be submitted to the **Narcotic Disposal Committee**, along with the verified records and count details of empty ampoules.
- 5.7.5 Upon obtaining written approval from the Narcotic Disposal Committee, the empty ampoules shall be properly packed as per BMW (Biomedical Waste) guidelines.



आरोग्यम् सुखं सम्पदा

केंद्रीय भेषजी
Central Pharmacy
अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छत्तीसगढ़)
All India Institute of Medical Sciences, Raipur (Chhattisgarh)
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 Tatibandh, GE Road, Raipur-492 099 (CG)
 Phone no.+917712577384, www.aiimsraipur.edu.in, pharmacy@aiimsraipur.edu.in,
pharmacy.aiims@gmail.com

AIIMS/R/Pharmacy/ow...3195.....

Date: 03/07/2025

Sl. No.	Name of essential narcotic drug	Used Broken Ampoules/Vials Quantity till dated 02/07/2025
1	Inj. Fentanyl Citrate 50 mcg/ml (2ml Ampoule)	7693 Amp
2	Inj. Fentanyl Citrate 50 mcg/ml (10ml Ampoule)	320 Amp
3	Inj. Morphine 15mg/1ml (1ml Ampoule)	72 Amp

The above listed Used Broken Ampoule of Essential Narcotic Drugs (ENDs) is discarded in presence of following committee members.

Remarks	
---------	--

Office order: No./Hosp. Admin./Pharmacy/Narcotic Drugs/ 49-206/56/2024-MS Dated: 14.03.2024		
Narcotic Disposal Committee		
	Name	Signature
Chairman	Medical Superintendent/ Deputy Medical Superintendent	Dr. Ramesh Chandrakar
Member Secretary	Officer Incharge Essential Narcotics Drugs	Dr. Pugazhenthian T
Member	Drug Inspector (AIIMS Raipur region)	Mrs. Laxmi Kaushik
Member	Narcotic Nursing Officer	Miss. Verity Kharbudon
Member	Office Incharge Hospital Stores Drugs & Medicines and Consumables	Dr. Yogendra N. Keche
Member	Pharmacist Gr-1	Mr. Arif Khan
Member	Pharmacist Gr-1	Mrs. Apoorva Kendurkar
Member	Technical Assistant (OT)/Staff	Mr. Sanjeev Rajput
Member	Technical Assistant (OT)/Staff	Mr. Jagdish Atariya

Figure 6 Narcotic Disposal Committee



- 5.7.6 The packed empty ampoules shall be handed over to the BMW Department along with complete documentation for disposal as per approved BMW protocols through a government-authorized agency.
- 5.7.7 After handing over for disposal, a copy of the Narcotic Disposal Committee approval and relevant disposal documents shall be emailed to the FDA for information and record purposes.

5.8 Warning and Cautions:

It is requested that all Residents (Junior Residents/Senior Residents) handle ampoules, vials, and other NDPS drugs with utmost care. Any empty or accidentally broken materials must be duly handed over to the technical personnel in charge (OT In-Charge/Pharmacist/Nursing Officer) to ensure that no information is missing from the Narcotic Consumption Book. The Consultant In-Charge of the respective departments should remain vigilant regarding this matter.

- 5.8.1 Missed Broken Information Report (MBIR Form): MBIR form to be filled mandatory in case any missing of ampoule is discovered.

5.9 Sub store Custodian:

The departments/sub custodian may be nominated by competent authority AIIM Raipur for keeping stocks of NDPS drugs as per need and as per extent rules.

5.10 Procedure for Annual Narcotic Drug Requirement (Form 3-J) (As per Rule 52 T (I) NDPS Rules, 2015)

Quick Review

- Submitted by: All user departments
- Due date: On or before 31 October
- Consolidated by: ENDO / Pharmacist
- Submitted to: State Drug Controller
- Due date (FDA): On or before 31 November
- Legal basis: Rule 52T NDPS Rules

All user departments shall submit their annual requirements of narcotic drugs via email as a soft copy and also submit a duly signed hard copy to the Essential Narcotic Drug Officer on or before 31 October each year.

- 5.10.1 The requirement shall be calculated based on:



- Previous year's consumption
- Anticipated patient load
- Changes in services or procedures
- Emergency buffer requirement (if applicable)

5.10.2 The Essential Narcotic Nursing Officer/ Pharmacist shall consolidate the annual requirements received from all departments.

5.10.3 The consolidated Form 3-J (Annexure-6) shall be verified and signed by Essential Narcotic Drug Officer.

5.10.4 The approved Form 3-J (Annexure-6) shall be submitted to the State Drug Controller/FDA by 30th November for the Preceding calendar year as per NDPS Rules.

5.11 Procedure for annual return of narcotic drugs (form 3-I) (As per Rule 52R (I) (D), NDPS Rules, 2015)

Quick Review

- Compiled by: ENDO / Pharmacist
- Records used: NCB + Stock Registers
- Due date: On or before 31 March
- Submitted to: State Drug Controller
- Legal basis: Rule 52R NDPS Rules

5.11.1 All departments shall maintain complete records of narcotic drug receipt, issue, consumption, balance, and disposal throughout the year.

5.11.2 At the end of each calendar year, these records shall be compiled into Form 3-I (Annexure-5) by the Essential Narcotic Nursing Officer/Pharmacist.

5.11.3 From 3-I entries shall be cross-verified with:

5.11.4 Ward/Departmental Narcotic Consumption Book

5.11.5 Central Pharmacy Narcotic Stock Registers

5.11.6 Consumption records and disposal entries

5.11.7 The completed Form 3-I shall be verified by the Essential Narcotic Drug Officer and signed by the competent authority.



5.11.8 The approved Form 3-I shall be submitted to the State Drug Controller/FDA on or before 31st of March of the subsequent year, and a copy shall be kept in Central Pharmacy for audit and inspection.

5.12 Procedure for NDPS License Renewal (Form 3-F) (As per Rule 52O (I), NDPS Rules, 2015)

Quick Review

- **Initiation:** 60 days before expiry
- **Responsible officer:** ENDO
- **Submission:** State Drug Controller
- **Display required:** Central Pharmacy
- **Legal basis:** Rule 52O NDPS Rules

5.12.1 The Essential Narcotic Drug Officer shall monitor the NDPS license validity and initiate renewal 60 days before the expiry date.

5.12.2 The renewal application in Form 3-F (Annexure-3) must include:

5.12.3 Copy of existing NDPS license (Certificate of Recognition)

5.12.4 Overall Incharge Certificate of Recognition

5.12.5 Inspection reports (If any)

5.12.6 Form 3-F shall be verified and signed by Essential Narcotic Drug Officer.

5.12.7 The signed Form 3-F shall be submitted to the State Drug Controller as per prescribed procedure (online/offline).

5.12.8 Acknowledgment and follow-up of the renewal application shall be documented until the renewed license is issued.

5.12.9 A copy of the renewed NDPS license shall be:

- Displayed in Central Pharmacy
- Shared with all concerned departments
- Filed for record and audit purposes



5.13 Procedure for Transport of Essential Narcotic Drugs (Form 3-C) (As per Rule 52D of NDPS Rules, 2015)

Quick Review

- **Applicable for:** Inter-State transport
- **Document required:** Form 3-C / Invoice
- **Copies:** Triplicate
- **Record retention:** Minimum 2 years
- **Legal basis:** Rule 52D NDPS Rules

5.13.1 No consignment of Essential Narcotic Drugs (ENDs) shall be transported, imported inter-State, or exported inter-State unless it is accompanied by a Consignment Note in Form 3-C (Annexure-1), as required under Rule 52D (1) of the NDPS Rules, 2015, subject to the conditions of Rule 52C.

5.13.2 The Consignment Note (Form 3-C) shall be prepared in triplicate by Vendors:

- The original and duplicate copies shall accompany the consignment to the consignee (Pharmacy).
- Upon receipt of the consignment, the consignee shall endorse the quantity received on both copies.
- The consignee shall then return the duplicate copy to the consignor for record Purposes.

5.13.3 Both the consignor and the consignee shall preserve the Consignment Note (Form 3-C) for a minimum period of two (02) years, as mandated under Rule 52D (3).

5.13.4 The requirement of Form 3-C shall not apply if the consignment of Essential Narcotic Drugs is accompanied by a duly signed sale bill, invoice, cash memo, or any equivalent document, issued by the consignor or an authorized signatory. Such document must include the following details:

5.13.5 Name, address, and license number of the consignor and consignee*

5.13.6 Description of the drug, batch number, and quantity

5.13.7 Mode of transport and transportation details

5.13.8 (*The license number of the consignee is not required when the consignee is a patient receiving ENDs for personal use, a registered medical practitioner, a recognized medical institution, a research institution, or a hospital.)

5.13.9 The sale bill, invoice, cash memo, or equivalent document described above shall be preserved by both the consignor and the consignee for two (02) years, as per Rule 52D.



5.14 Patient-wise Record Maintenance in Form 3E/ 3E Register (As per Rule 52H (3), NDPS Rules, 2015)

Quick Review

- Maintained by: Consultant
- Applicable to: OPD & IPD
- Details recorded: Drug, quantity, balance
- Preservation period: 2 years
- Legal basis: Rule 52H NDPS Rules

5.14.1 Every Consultant prescribing or administering Essential Narcotic Drugs shall maintain a separate patient-wise record in Form 3E (Annexure-2) or 3E Register (Essential Narcotic Consumption Record), as mandated under Rule 52H (3) of the NDPS Rules, 2015.

5.14.2 Form 3E will be maintained for OPD patients, and Form 3E has been converted into a Form 3E Register (Essential Narcotic Consumption Record) to ensure proper handling and maintenance of documents.

5.14.3 The Form 3E/3E Register record must include complete details of:

- Patient identification
- Date and quantity of Essential Narcotic Drug prescribed or administered
- Balance remaining for the patient
- Purpose and clinical justification
- Signature/initials of the Consultant

5.14.4 Each patient-wise Form 3E/3E Register record shall be preserved for a minimum period of two (02) years from the date of the last entry and must be readily available for inspection by competent authorities.

5.14.5 The Assistant Nursing Superintendent (ANS), Senior Nursing Officer (SNO), and Narcotic Nursing Officer shall ensure that Consultants maintain Form 3E accurately and that no overwriting or alterations are made without proper authentication.

5.14.6 These patient-specific Form 3E/3E Register records shall be cross-verified during audits, annual returns, and inspections by the Essential Narcotic Drug Officer.



5.15 Daily Accounts of Essential Narcotic Drugs in 3 H (As per Rule 52R (1) (C), NDPS Rules, 2015)

Quick Review

- Maintained at: Pharmacy & User Departments
- Record type: Receipt, issue, balance
- Stock type: Perpetual
- Preservation period: 2 years
- Legal basis: Rule 52R NDPS Rules

5.15.1 All receipts and disbursements of Essential Narcotic Drugs (ENDs) within the Central Pharmacy and all User Departments shall be recorded in Form 3H (Annexure-4), as mandated under Rule 52R(c) of the NDPS Rules, 2015.

5.15.2 The Form 3H record shall include:

- Opening Stock
- Quantity Received
- Consignment Note/Bill/ Invoice/ Cash Memo, Number etc.
- Quantity Dispensed
- Specify registration number of the patient(s) maintained in form 3B and quantity dispensed to each
- Closing stock

5.15.3 No cutting, overwriting, or alteration shall be made in Form 3H.

5.15.4 Form 3H shall function as a perpetual stock and accountability record for all Essential Narcotic Drugs, and must be reconciled with:

- Pharmacy Narcotic Stock register
- Departmental Narcotic Consumption Book
- HMIS dispensing records
- Consumption and disposal entries

5.15.5 All entries in Form 3H shall be preserved for a minimum period of two (02) years from the date of the last entry and must be made available for inspection by regulatory authorities, audit teams, or the Essential Narcotic Drug Officer.



5.16 Management of Near-Expiry Narcotic & Controlled Drugs

- 5.16.1 All narcotic/controlled drugs must follow FEFO – First Expiry First Out for minimizing wastage.
- 5.16.2 Drugs with ≤ 6 months to expiry shall be segregated, labeled and stored separately as per Near-Expiry Drug SOP of AIIMS Raipur
- 5.16.3 ANS/SNO/NO must perform monthly expiry checks and document near-expiry narcotics in their respective areas (ward/OT/department), and Pharmacists must perform the expiry checks in the Central Pharmacy.
- 5.16.4 The Essential Narcotic Drug Officer shall coordinate:
- Inter-departmental transfers
 - Immediate utilization
 - Return to Central Pharmacy
 - Replacement from supplier
- 5.16.5 For detailed procedures on the management of near-expiry and expired drugs, please refer to the “Near-Expiry and Expired Drug Management SOP” of AIIMS Raipur.

5.17 Handling of Expired Narcotic & Controlled Drugs

- 5.17.1 Expired narcotic/psychotropic drugs fall under Bio-Medical Waste Management Rules – Category Yellow (Pharmaceutical Waste) and shall be segregated accordingly.
- 5.17.2 Expired narcotic drugs shall be kept in a double-locked cupboard labelled “Expired Narcotic Drugs – Not for Use.”
- 5.17.3 Disposal shall be done ONLY after approval from competent authority and in presence of the nominated committee.
- 5.17.4 From time to time, whenever any narcotic drugs expire, a new committee is constituted each time by the Competent Authority.
- 5.17.5 The narcotic drugs shall be disposed of by mixing them with an appropriate quantity of phenyl, and the resultant mixture shall thereafter be flushed into the wash basin.
- 5.17.6 For detailed procedures on the Handling of Expiry Drugs, please refer to the “Near-Expiry and Expired Drug Management SOP” of AIIMS Raipur.



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Essential Narcotic Drug Section/Department of Pharmacy
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Annexure-A

Narcotic Consumption Book/Form 3E Register

Essential Narcotic Consumption Record

Sr. No.	Date	Department	Patient Name	Age/Sex	Body Wt	UHID/CR No	Diagnosis	Prescriber		Quantity				Shift Incharge		Assigned Staff		Remarks
								Name	Signature	Received	Used	In Hand	Discarded	Name	Signature	Name	Signature	

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Annexure-B

MBIR Form



केंद्रीय भेषजी
Central Pharmacy
अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छत्तीसगढ़)
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pharmacy.aiims@gmail.com

Part B

MBIR FORM

Date:

Name of the Drug:

Quantities:

Department:

Reason:

Signature of In-charge/Faculty of Department:

Signature of ENNO:

Signature of Pharmacist (opioids dealing):

Signature of END Officer

*MBIR -MissedBroken Information Report
* END - Essential Narcotic Drugs
* ENNO - Essential Narcotic Nursing Officer
*MBIR to be reported within 24hrs.
*Faculty in-charge of respective department may provide awareness for JR/SR regarding the importance of empty vials for future audits and accounting.

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Figure 7 MBIR Form

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Annexure-C

List Of Forms

Sr. No.	Forms	Descriptions	Controller
1	3-C	Consignment Note	Narcotic Officer
2	3-E	Details of the patient to whom Essential Narcotic Drugs Dispensed	Narcotic Nursing Officer
3	3-F	Application for Issue/Renewal of Certificate of Recognition	Narcotic Officer
4	3-H	Daily Account of Essential Narcotic Drugs to be maintained by RMI	Narcotic Nursing Officer
5	3-I	Annual Return of Procurement/ Disbursement of Essential Narcotic Drugs	Narcotic Officer
6	3-J	Estimate of Annual Requirement of Essential narcotic Drugs	Narcotic Officer



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Annexure-1

Form 3C

APPENDIX 2 - FORM NO. 3C (See rule 52D)

CONSIGNMENT NOTE

Date and time of dispatch of the consignment: _____

1.	Name and complete postal address of the consignor	:	
2.	Whether Manufacturer or Licenced Dealer (Quote Licence Number and the Issuing Authority)	:	
3.	Name and complete postal address of the consignee	:	
4.	Description and quantity of the consignment	:	
Particulars of the essential narcotic drugs showing Trade Marks, Proprietary Names, Batch number, etc.		Number of packages	Quantity
			Gross Net

5.	Mode of transport (particulars of the transporter, Registration number of the vehicle or Railway Receipt. / Lorry Receipt, if the transport is by railways or good transports)	:	
----	---	---	--

Full Name / Designation (if any)	Signature of the Consignor with date
----------------------------------	--------------------------------------

To be filled by the consignee

6.	Date and time of receipt by the consignee and his remarks	:	
7.	Whether the consignment received in full as per description and quantity mentioned at serial number 4 above	:	Yes / No (If 'no', details to be mentioned below.)

Full Name / Designation (if any)

Signature of the Consignee with date

Note:

- (1) This consignment note shall be serially numbered on annual basis.
- (2) The consignor shall record a certificate on the cover page of each book containing consignment note indicating the number of pages contained in the consignment note-book.
- (3) The consignor shall maintain a Register showing the details of the books of consignment note brought in use during a particular year.
- (4) This consignment note shall be retained for a period of two years from the date of transaction.
- (5) The records referred to in this note shall be produced before the concerned authorised officers whenever called upon during the course of their inspection/investigation.

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Annexure-2

Form 3E

APPENDIX 4 - FORM NO. 3E

[See rule 52H(3)]

**DETAILS OF THE PATIENT TO WHOM ESSENTIAL NARCOTIC DRUGS DISPENSED
(TO BE MAINTAINED BY REGISTERED MEDICAL PRACTITIONER / RECOGNISED MEDICAL
INSTITUTION)**

Registration Number : _____ Date : _____

AADHAR No. of Patient may be added

1.	Name	:		
2.	Complete postal address (with contact number, if any)	:		
3.	Brief description of the illness	:		
4.	Whether registered with any other registered medical practitioner / recognized medical institution (If yes, details to be recoded)	:		
5.	Details of the essential narcotic drugs dispensed	:		
Date	Name of the essential narcotic drugs	Quantity	Signature / Thumb impression of the patient	Remarks, if any

Note:

- (1) This record shall be retained for two years from the date of last entry.
- (2) This record shall be produced before the concerned authorised officers whenever called upon during the course of their inspection/investigation.



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Annexure-3

Form 3F

FORM NO. 3F

[See rule 52-O(1)]

**APPLICATION FOR ISSUE / RENEWAL OF CERTIFICATE OF
RECOGNITION AS RECOGNISED MEDICAL INSTITUTION**

1.	Name and complete postal address of the institution with telephone number, facsimile number and e-mail ID (relevant supporting documents to be submitted)	:	
2.	Name of the Head / In-charge of the Institution	:	
3.	Number of persons employed (i) Doctors (ii) Nursing staff (iii) Others	:	
4.	Number of patients treated during the previous calendar year (i) in patients (ii) out patients (iii) home care	:	
5.	Name (s) of the qualified medical practitioner (s) who would prescribe essential narcotic drugs (give details of their training in pain relief and palliative care or opioid dependence treatment)	:	
6.	If there is more than one qualified medical practitioner who would prescribe essential narcotic drugs, indicate the name of the medical practitioner who shall be overall in charge	:	
7.	Number and date of the certificate of recognition issued earlier (attach copy)	:	
8.	Whether the recognition of the institution was withdrawn earlier (if the recognition was withdrawn earlier, the details are to be given)	:	

Date : Signature :
Place : Full Name :
Seal : Position :

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Annexure-4

Form 3H

APPENDIX 7 - FORM NO. 3H

[See rule 52R (1)(c)]

**DAILY ACCOUNTS OF ESSENTIAL NARCOTIC DRUGS TO BE MAINTAINED BY
RECOGNISED MEDICAL INSTITUTION**

Name of the Essential Narcotic Drug : _____ Date : _____

1.	Opening stock	:	
2.	Quantity received	:	
2(i)	Received from (give details)	:	
2(ii)	Consignment Note / Bill / Invoice / Cash Memo, Number etc.	:	
3.	Quantity dispensed	:	
4.	Specify registration number of the patient (s) maintained in Form No. 3E and quantity dispensed to each)	:	
5.	Closing stock	:	

Signature of the overall in charge

Full Name / Designation (if any)

Note:

- (1) This record shall be maintained on day to day basis and entries shall be made for each day.
- (2) Entries shall be completed for each day before the close of the day.
- (3) The pages of the register shall be serially numbered.
- (4) Separate record shall be maintained for each essential narcotic drug.
- (5) This record shall be retained for two years from the date of last entry.
- (6) This record shall be produced before the concerned authorised officers whenever called upon during the course of their inspection/investigation.



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Annexure-5

Form 3I

APPENDIX 8 - FORM NO. 3-I

[See rule 52R (1)(d)]

ANNUAL RETURN OF PROCUREMENT / DISBURSEMENT OF ESSENTIAL NARCOTIC DRUGS

(TO BE FILED BY RECOGNISED MEDICAL INSTITUTION)

Return for the year	:		Date of submitting return	:	
1.	Number and date of the current certificate of recognition			:	
2.	Name of the Recognised Medical Institution			:	

Sl. No.	Name of essential narcotic drug	Quantity in original annual estimate	Quantity in revised annual estimate (if any)	Opening stock	Quantity procured during the year	Quantity disbursed to patients during the year *	Closing stock
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

* The designated medical practitioner or the over-all in charge, as the case may be, shall record a brief justification where the actual disbursement is more than ten per cent. of the estimate or revised estimate, as the case may be.

Full Name / Designation (if any)

Signature of the overall in charge

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Annexure-6

Form 3J

APPENDIX 9 - FORM NO. 3J

[See rule 52T(1)]

ESTIMATE OF ANNUAL REQUIREMENT OF ESSENTIAL NARCOTIC DRUGS

Estimate for the year	:	_____	Date of submitting estimate	:	_____
1.	Number and date of the current certificate of recognition		:		
2.	Name of the Recognised Medical Institution		:		
3.	Details of the estimated annual requirement of essential narcotic drugs		:		

Sl. No.	Name of the essential narcotic drug	Quantity disbursed during previous year	Estimated annual requirement	Revised estimated annual requirement*	Reason for revision
(1)	(2)	(3)	(4)	(5)	(6)

* Please attach copy of the original estimate

Full Name / Designation (if any)

Signature of the overall in charge.”.

[F. No. N/11011/1/2014-NC-II (1)]



Annexure-7

Master Security Requirements

Sr. No.	Descriptions
1.	Double Locked cupboard/ Safe/Almirah with one lock and 2 nd lock in the door of storage room
2.	Access is restricted to the authorized personnel only.
3.	Preferably double-lock system + CCTV monitoring.
4.	Maintain separate registers for each narcotic/psychotropic drug.
5.	Use NDPS-prescribed forms (e.g., Form 3D/3E/7 for ENDs).
6.	Record every receipt, issue, balance immediately.
7.	Registers must be bound , page-numbered, and preserved for minimum 2 years .
8.	Dispense ONLY against a valid prescription from an authorized doctor.
9.	Pharmacy must have proper NDPS authorization/licence to stock these medicines.
10.	Maintain documentation for procurement, stock, use, and return .
11.	Daily or periodic stock count (as per institutional SOP).
12.	Stock must match register entries exactly.
13.	Any discrepancy → immediate reporting to Essential Narcotic Drug Officer .
14.	Submit required NDPS returns to NDPS Authority on Annual Basis.
15.	Report loss, theft, or breakage immediately to Essential Narcotic Drug Officer .
16.	Expired/damaged narcotics must be destroyed only with NDPS authority approval and in presence of an authorized committee.
18.	Maintain destruction records.



Annexure-8

Occurrence report form

ORF Ref No.: OCF// Dept Code / YYYY / MM/DD/Sr. No.

Date _____

Occurrence Report Format (For Risk Management)

AIIMS Raipur – Occurrence Report (For Reporting Narcotic/Controlled Drug Discrepancies, Incidents & Variations)

1. Basic Information

• Date of Report: _____ • Time of Report: _____

• Location/Department/Ward: _____ • Unit/Area In-Charge Name: _____

• Type of Incident:

Narcotic Count Discrepancy ☐

Missing/Unaccounted Dose ☐

Lost Key ☐

Documentation Error ☐

Medication Error ☐

Unauthorized Access ☐

Other (Specify) ☐

2. Details of Incident

• Date & Time Incident Noticed: _____ • Drug Name (Generic/Brand): _____

• Strength & Formulation: _____ • Batch No.: _____

• Quantity Involved: _____

• Description of the Incident:

3. Immediate Actions Taken

Actions Performed:

☐ Stock Rechecked

☐ Narcotic Keys Verified

☐ Reviewed NCB / NLB / Form 3H

☐ Staff on Duty Notified

☐ Central Pharmacy Informed

☐ ANS / SNO / NO Informed

☐ Essential Narcotic Drug Officer Informed

☐ Security Notified (if applicable)

Summary of Actions:



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4. Staff on Duty at the Time of Incident

Name _____ Designation _____ Signature _____

Contact No. _____

5. Verification

- Was the discrepancy resolved?

Yes ☐ No ☐

- If yes, explanation:

- If no, reason/pending actions:

6. Reporting

- Reported To:

Essential Narcotic Drug Officer ☐

Medical Superintendent ☐

Security Department ☐

- Date & Time of Reporting: _____

7. Signatures

- Reporting Staff (Name/Designation):

Signature: _____ Date: _____

- ANS / Unit In-Charge:

Signature: _____ Date: _____

- Essential Narcotic Drug Officer:

Signature: _____ Date: _____



Abbreviations

ADE	Adverse Drug Event
ADR	Adverse Drug Reaction
AIIMS	All India Institute of Medical Sciences
ANS	Assistant Nursing Superintendent
BMW	Biomedical Waste Management
CEO	Chief Executive Officer
ENDOI	Essential Narcotic Drug Officer In-charge
ENDs	Essential Narcotic Drugs
FDA	Food and Drug Administration
FEFO	First Expiry First Out
FIFO	First In First Out
FIP	Faculty In charge Pharmacy
HMIS	Hospital Management and information System
IT	Information Technology
MBIR	Missed Broken Information record
NCB	Narcotic Consumption Book
NDPS	Narcotic Drugs and Psychotropic Substances
NO	Nursing Officer
OIC	Office In Charge
OT	Operation Theater
PMSSY	Pradhan Mantri Swasthya Suraksha Yojna
SNO	Senior Nursing Officer
SOP	Standard Operating Procedure

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The SOP provides clear and effective guidance for the safe handling, storage, documentation, and control of narcotics and controlled drugs. It supports regulatory compliance, accountability, and patient safety while minimizing the risk of misuse or diversion. Overall, the SOP is well structured, practical, and fit for purpose.