tate of Florida requires proper record keeping and documentation of drugs
all into the following categories:

- < Prescription drug samples or complimentary drugs--"Viable Samples"
- < Viable prescription drugs--unopened, unadulterated; can be expired

ds must identify the name and manufacturer of the prescription product (or code) and the quantity removed from the establishment OPEN 8/20/25

☐ The pharmaceuticals are non-viable* CLOSE 10/08/25

*Non-viable pharmaceuticals do not require inventory

Generator Name: Rayus Radiology
Generator Address: 1000 w Broadway st
Oviedo, FL 32765
Contact Name: Gina Hardman
Stericycle Customer ID: 8284947-3001071456
Date: 08/06/25
DOH License # & Expiration: FM3322156 EXP DATE: 1/31/2027

Drug Name	National Drug Code (NDC)	Sample (Y or N)	Strength	Manufacturer	Quantity
OMNIPAQUE 240	0407-1412-30	N	240mg/ml	GE Healthcare	255
DOTAREM 5ML	67684-2000-0	N	.5MMOL	GUERBET LLC	45
LIDOCAINE 2%	0409-4277-17	N	20MG/1ML	HOSPIRA	22
LIDOCAINE 1%	0409-4279-16	N	10MG/ML	HOSPIRA	
DEPO MEDROL 80	0009-3475-01	N	80MG/1ML	AMNEAL	
DEPO MEDROL 40	0009-3073-01	N	40MG/1ML	PHARMACIA ~~PFIZER~~ & UPJOHN	1
BETAMETHASONE	0517-0720-01	N	30MG/5ML	AMERICAN REGENT	4
KENALOG 40	0003-0293-05	N	40MG/ML	BRISTOL MYERS SQUIBB	
BUPIVICAINE	55150-169-10	N	50MG/10ML	EUGIA	
DIPHENHYDRAMINE	0641-0376-21	N	50MG/1ML	HIRANA	
EPINEPHRINE	4202-159-01	N	1MG/ML	PAR PHARMACUETICAL	
DEXAMETHASONE	70069-021-01	N	10MG/ML	SOMERSET THERAPIES	3

OPEN: 10/9/2025 CLOSE: 11/03/2025

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*Non-viable pharmaceuticals do not require inventory

Generator Name: Rayus Radiology
Generator Address: 1000 w Broadway st
Oviedo, FL 32765
Contact Name: Gina Hardman
Stericycle Customer ID: 8284947-3001071456
Date: 08/06/25
DOH License # & Expiration: FM3322156 EXP DATE: 1/31/2027

Drug Name	National Drug Code (NDC)	Sample (Y or N)	Strength	Manufacturer	Quantity
OMNIPAQUE 240	0407-1412-30	N	240mg/ml	GE Healthcare	142
DOTAREM 5ML	67684-2000-0	N	.5MMOL	GUERBET LLC	28
LIDOCAINE 2%	0409-4277-17	N	20MG/1ML	HOSPIRA	15
LIDOCAINE 1%	0409-4279-16	N	10MG/ML	HOSPIRA	
DEPO MEDROL 80	0009-3475-01	N	80MG/1ML	AMNEAL	
DEPO MEDROL 40	0009-3073-01	N	40MG/1ML	PFIZER	
BETAMETHASONE	0517-0720-01	N	30MG/5ML	AMERICAN REGENT	3
KENALOG 40	0003-0293-05	N	40MG/ML	BRISTOL MYERS SQUIBB	1
BUPIVICAINE	55150-169-10	N	50MG/10ML	EUGIA	2
DIPHENHYDRAMINE	0641-0376-21	N	50MG/1ML	HIRANA	
EPINEPHRINE	4202-159-01	N	1MG/ML	PAR PHARMACUETICAL	
FAMOTIDINE	0641-6028-25	N	10MG/ML	HOSPIRA	25
ATROPINE SULFATE	76329-33401	N	1MG/10ML	JHMS LIMITED	2
BUPIVICAINE	0409-1162-18	N	50MG/10ML	HOSPIRA	16
KETOROLAC TROMETHAMINE	72266-118-1	N	30MG/1ML	FOSUN PHARMA	1

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CLOSE 1/30/26

☐ The pharmaceuticals are non-viable*

*Non-viable pharmaceuticals do not require inventory

Generator Name: Rayus Radiology
Generator Address: 1000 w Broadway st
Oviedo, FL 32765
Contact Name: Gina Hardman
Stericycle Customer ID: 8284947-3001071456
Date: [redacted]
DOH License # & Expiration: FM3322156 EXP DATE: 1/31/2027

Drug Name	National Drug Code (NDC)	Sample (Y or N)	Strength	Manufacturer	Quantity
OMNIPAQUE 240	0407-1412-30	N	240mg/ml	GE Healthcare	286
DOTAREM 5ML	67684-2000-0	N	.5MMOL	GUERBET LLC	54
LIDOCAINE 2%	0409-4277-17	N	20MG/1ML	HOSPIRA	30
LIDOCAINE 1%	0409-4279-16	N	10MG/ML	HOSPIRA	3
DEPO MEDROL 80	0009-3475-01	N	80MG/1ML	AMNEAL	
DEPO MEDROL 40	0009-3073-01	N	40MG/1ML	PFIZER	
BETAMETHASONE	0517-0720-01	N	30MG/5ML	AMERICAN REGENT	
KENALOG 40	0003-0293-05	N	40MG/ML	BRISTOL MYERS SQUIBB	
BUPIVICAINE	55150-169-10	N	50MG/10ML	EUGIA	2
DIPHENHYDRAMINE	0541-0376-21	N	50MG/1ML	HIRANA	
EPINEPHRINE	4202-159-01	N	1MG/ML	PAR PHARMACUETICAL	
LIDOCAINE 1%	65282-1605-1	N	30/5ML	SPECTRA MEDICAL	112
					Total