

GENERAL COMPOUNDING FORMULATIONS

Call our pharmacist to discuss additional treatment options

CUSTOMER SERVICE: 866.465.1043 FAX: 901.861.3095
PLEASE FAX DEMOGRAPHICS

Patient Name _____
Address _____
City _____ State _____ Zip _____
Home Phone _____ Cell _____
DOB _____ SSN _____
Drug Allergies _____ Male Female

Prescriber Name _____ Lic# _____
DEA# _____ NPI _____
Practice Name _____
Address _____ Suite _____
City _____ State _____ Zip _____
Office Phone _____ Fax _____

BIO-IDENTICAL HORMONE REPLACEMENT FORMULA EXAMPLES (FEMALE)

- BI-EST _____
- TRI-EST _____
- PROGESTERONE _____
- _____
- DHEA _____

We can formulate indicated strength into creams, gels, capsules, suppositories & drops. Can be combined.

THYROID FORMULA EXAMPLES

- T-3 SR Capsules _____
- T-4 SR Capsules _____
- T-3 & T-4 SR Capsules _____

FEMALE SEXUAL DYSFUNCTION FORMULA EXAMPLE

- _____ 1 mg/1ml Topical Cream

VAGINAL YEAST INFECTION FORMULA EXAMPLE (FEMALE)

- Boric Acid Suppository 600 mg (Quantity: 14)
Insert 1 suppository vaginally once a day at bedtime.

HEADACHE FORMULA EXAMPLE

- _____
(_____ 100mg/ Isometheptene 65mg/ Acetaminophen 325mg)

NAUSEA & VOMITING FORMULA EXAMPLES

- Promethazine 25 mg/ml gel
Apply 1ml to inner wrist every 4-6 hours PRN for nausea/vomiting.
- Ondansetron 8mg/ml gel
Apply 1ml to inner wrist every 8 hours PRN for nausea/vomiting.

SIG: _____

PRESCRIBER'S SIGNATURE _____

MALE REPLACEMENT FORMULA EXAMPLES

- _____ Cream - 100mg/ml
- _____ Cream - 200mg/ml
Apply 1 ml to upper arm or shoulder once a day.
- _____ / Chrysin Cream - 100mg/10%
Apply 1 ml to upper arm or shoulder once a day.

HEMORRHOID RECTAL ROCKET FORMULA EXAMPLES (QTY. 3)

- Lidocaine 2% / Hydrocortisone 1%
- Tetracaine 3% / Hydrocortisone 3%
Rinse 1 suppository under lukewarm water & insert into rectum at bedtime. Leave in overnight.

ACNE FORMULA EXAMPLES

- Tretinoin 0.1% Topical gel in PracaSil
- Clindamycin 1% / Benzoyl Peroxide 5% topical gel
- Tretinoin 0.02% / Clindamycin 1% /
Sulfacetamide Sodium 5% topical cream

APTHOUS ULCERS FORMULA EXAMPLES

- Magic Mouthwash
(Diphenhydramine / Lidocaine 2% Viscous / Nystatin / Maalox - in equal parts)
- Swish & spit 5 ml by mouth 3-4 times daily PRN*
- Swish & swallow 5 ml by mouth 3-4 times daily PRN*

NAIL FUNGUS FORMULA EXAMPLES

- Itraconazole 1% / Ibuprofen 2% in DMSO
- Fluconazole 2% in DMSO
- Fluconazole 3% in DMSO
Apply to affected nail(s) twice daily.

WARTS FORMULA EXAMPLES

- Salicylic Acid 70% in Petroleum Jelly
- 2-Deoxy-D-Glucose 0.19% / Diphenhydramine 1% /
Pramoxine 1% / Miconazole 2.4% (treating Molluscum)
- Cimetidine 10% / 2-Deoxy-D-Glucose / Ibuprofen 2% PLO gel
- Fluorouracil 5% / Salicylic Acid 20% in DMSO
- Fluorouracil 5% / Pyruvic Acid 2% cream

QTY: _____ REFILLS: _____

DATE _____

DIAGNOSIS _____

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