

Patient: _____ Date: ___ / ___ / _____

Date of Birth: ___ / ___ / _____ Phone Number: (____) ____ - _____

Doctor's Name: _____

Phone Number: (____) ____ - _____ DEA or NPI: _____

Nail Fungus Solutions: Apply to affected nail(s) twice daily.

___ #1 Clear Nail Lacquer (Terbinafine/Econazole); 15ml

___ #2 Thymol 4% in alcohol: 30ml or 60ml

Wart Preparations: Apply a small amount to wart(s) at bedtime and then cover with a bandage.

___ #1 5-FU 5% and Salicylic Acid 20% in DMSO Gel; 15 ml

___ #2 5-FU 5%/Salicylic Acid 15%/Cimetidine 5% in Lipoderm®; 30 gm

___ #3 Salicylic Acid ___ % in Flexible Collodion; ___ ml

___ #4 Salicylic Acid ___ % and Lactic Acid ___ % in Flexible Collodion; ___ ml

___ #5 Salicylic Acid ___ % in Petrolatum; ___ gm

___ #6 Cantharidin Plus Liquid 1/30/5%; 10ml (For in-office application only!)

Miscellaneous Creams: Apply 1-2 grams to affected area(s) up to four times daily.

Diabetic Neuropathy Creams in Lipoderm®:

___ #1 Ketamine* 10%/Gabapentin 6%/Clonidine 0.2%/Nifedipine 2%

___ #2 Ketamine* 5%/Amitriptyline 2%/Baclofen 5%/Ketoprofen 10%

___ #3 Gabapentin 6%/Baclofen 2%/Lidocaine 5%/Ketoprofen 5%/Clonidine 0.2%/Nifedipine 2%

___ #4 Ketamine* 10%/Gabapentin 6%/Imipramine 3%/Nifedipine 2%/Baclofen 2%/Tetracaine 2%

___ Circulatory Cream: Nifedipine 4% in Lipoderm®

___ Foot Cramp Cream: Ketoprofen 10% and Cyclobenzaprine 2% in Lipoderm®

___ Foot Preparation Cream (soften skin): Urea 20% and Lactic Acid 5%

___ Heel Spur Cream: Ketoprofen 10% and Lidocaine 5% in Lipoderm®

___ Inflammation Creams in Lipoderm®:

___ #1 Ibuprofen 20%

___ #2 Diclofenac 1% or ___ % (1-10%)

___ Needle Stick Anesthetic Cream: Benzocaine 20%/Lidocaine 6%/Tetracaine 4%/Phenylephrine 0.01% in Lipoderm®

Dispense: 15 grams 30 grams 60 grams 120 grams 240 grams or _____ grams
(Max of ___ gm per day)

Refills: _____ **Signature** _____

*Please note that Ketamine is **C3** and can have a maximum of 5 refills.

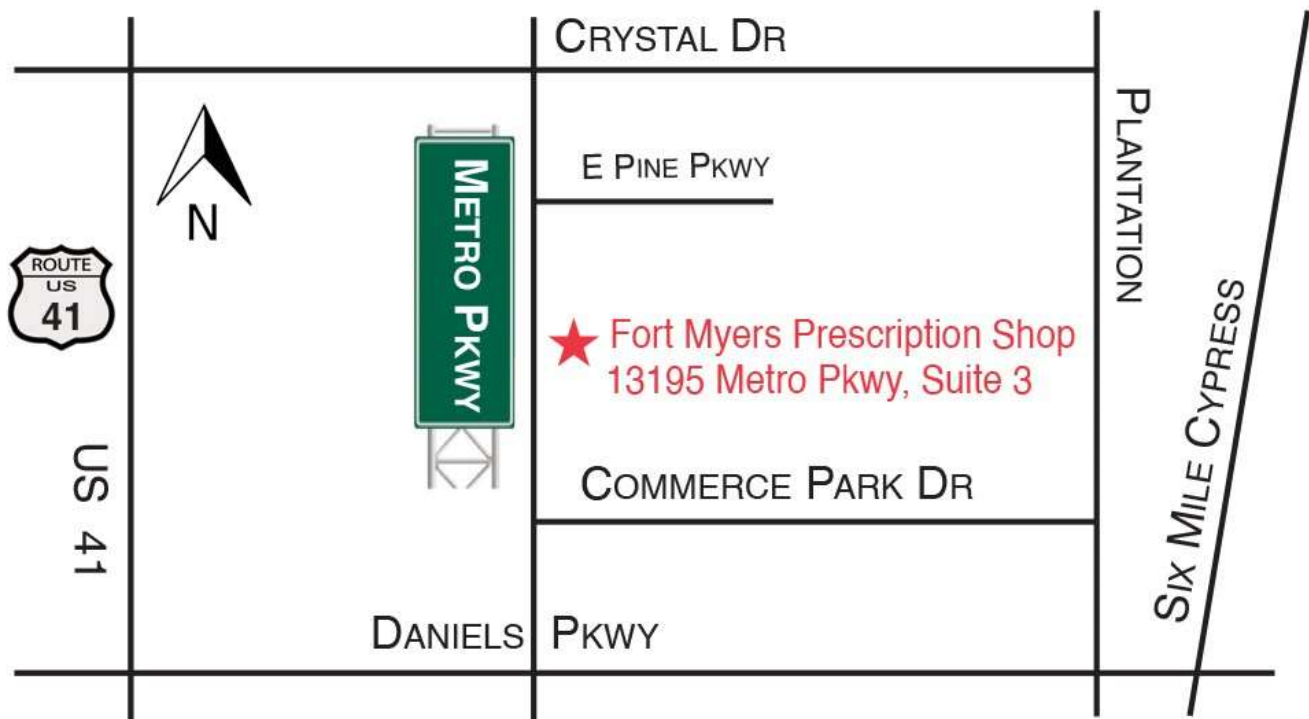
Please bring in or ask your doctor to fax the prescription to

Fort Myers Prescription Shop

13195 Metro Pkwy, suite 3
Fort Myers, FL 33966

Phone: 239-939-0249
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