

Patient Name: _____ Date of Birth: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____
 Allergies: NKDA (no known drug allergies) Aspirin/ NSAID's Cyclobenzaprine Lidocaine / Local Anesthetic Tramadol Opioid
 Gabapentin Penicillin Amitriptyline Other: _____

GASTROENTEROLOGY COLORECTAL & FISTULA HEALTH

COMPOUNDED CREAMS AND OINTMENTS:

- | | | |
|--|---------------------------------------|---|
| <input type="checkbox"/> Nifedipine 0.1% | <input type="checkbox"/> Lidocaine 1% | <input type="checkbox"/> Nitroglycerin 0.1% |
| <input type="checkbox"/> Nifedipine 0.2% | <input type="checkbox"/> Lidocaine 2% | <input type="checkbox"/> Nitroglycerin 0.2% |
| <input type="checkbox"/> Nifedipine 0.3% | <input type="checkbox"/> Lidocaine 5% | <input type="checkbox"/> Nitroglycerin 0.3% |
| <input type="checkbox"/> Diazepam 2% | <input type="checkbox"/> Diltiazem 2% | |

ORAL

- Oral Viscous Budesonide 2mg/8ml #240ml

COMBINATIONS:

- | | |
|--|--|
| <input type="checkbox"/> Nifedipine 0.1% w/ 2% Lidocaine | <input type="checkbox"/> Lidocaine 5% w/ Nifedipine 0.5% |
| <input type="checkbox"/> Nifedipine 0.2% w/ 2% Lidocaine | <input type="checkbox"/> Lidocaine 3% w/ Hydrocortisone 2.5% |
| <input type="checkbox"/> Nifedipine 0.3% w/ 2% Lidocaine | <input type="checkbox"/> Lidocaine 5% w/ Diltiazem 2% |

- Diclofenac Sodium 1.5%-Lidocaine 2.5%-Prilocaine 2.5% Cream
(60 grams prior to and post procedure)

Quality: 30 grams

Directions: Apply 1 Gram to rectal area Once daily Twice daily Three times a day

Refills: _____

Prescription meds:

Generic **ANUCORT-HC** Hydrocortisone suppositories \$49.95 #12 Suppositories
Directions: Insert 1 suppository daily as directed at bedtime

- Budesonide ER 9mg Tab #30** - Take 1 tablet by mouth once daily AND DISPENSE **CMPD Naltrexone 1.5mg EC Cap #90** - Take 1 - 3 capsules by mouth once daily
- a. If checked below, pharmacy is authorized to dispense the following in lieu of the medications listed in #1 above if needed for any reason or desired by patient
- Budesonide EC 3mg Cap #90** - Take 3 capsules by mouth once daily AND DISPENSE **CMPD Naltrexone 1.5mg EC Cap #90** - Take 1 - 3 capsules by mouth once daily
- CMPD Budesonide 3mg - Naltrexone 1.5mg EC Cap #90** - Take 3 capsules by mouth once daily

Physician Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____
 DEA: _____ NPI: _____

 Physician's Signature

 Date

