Healthway Compounding Pharmacy

2544 McLeod Dr N. Ste #2

Saginaw, MI 48604

Phone 989-791-1691 Fax 989-791-4603

Patient:_____ DOB_____ Date_____

Address_____ City/St./Zip_____

Home Phone: (___)_____ Allergies:_____

All compounds for clinic use require a prescription written for each individual patient. Medication will be dispensed with patient specific label and patient specific package.

Most Frequently Prescribed Compounds for Colorectal

This is not an all encompassing list; Commonly prescribed options

Anal Fissure Cream

☐ Diltiazem 2%/Lidocaine 4% Ointment

Sig: Apply a pea-size amount _____.

Dispense 30gm

☐ Lidocaine 1%/Misoprostol 0.002%/Nitroglycerin 0.2%/Phenytoin 2% Cream

Sig: Apply a pea-size amount BID. Do not use if pregnant.

Dispense 30gm

☐ Nifedipine 0.3% Ointment

Sig: Apply a pea-size amount twice daily

Dispense 30gm

Hemorrhoids

☐ I/O Suppository (Rectal Rocket)

Hydrocortisone 2%/Lidocaine 1%

Sig: Insert 1 suppository rectally at HS for 6 nights.

Dispense 6

☐ Hydrocortisone 2.5%/Ketoprofen 10%/Lidocaine 4% CREAM

Sig: Apply a pea-size amount BID-TID.

Dispense 30gm

☐ Hydrocortisone 25mg/Lidocaine 50mg Suppository

Sig: Insert 1 Suppository rectally _____.

Dispense ☐ 30 ☐ 60 ☐ _____

Other

☐ Mesalamine (5-ASA) 500mg/Hydrocortisone 10mg/ Lidocaine 50mg Suppository

Sig: Insert 1 Suppository rectally once or twice daily.

Dispense ☐ 30 ☐ 60 ☐ _____

☐ Sucralfate Enema 2 gm/60ml

Sig: Use 1 Enema rectally once or twice daily, retain for 15-30 mins then expel

Dispense ☐ _____enemas

☐ Fatty Acid Enema 60ml (Sodium Butyrate 40 mm/ Sodium Acetate 60mm/Sodium Propionate 30 mm)

Sig: Use 1 Enema rectally once or twice daily, retain for 15-30 mins then expel

Dispense ☐ _____enemas

☐ Other_____

Sig: _____

Dispense ☐ _____

Refills_____Prescriber Signature:_____

Prescriber Name:(print)_____Phone:_____