

Healthway Compounding Pharmacy

Phone: 989-791-1691 • Fax 989-791-4603 • 2544 McLeod Dr. Saginaw, MI 48604

Patient: _____ DOB _____ Date _____

Address _____ City/St./Zip _____

Home Phone: (____) _____ Alt. Phone: (____) _____

Allergies: _____

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

Commonly Prescribed Compounds for Dermatology page 1 of 5

This is not an all encompassing list; Commonly prescribed options

Acne-Topical

☐ Professional Acne Formula (F98485) Azelaic 17%/
Clindamycin 2%/Niacinamide 4%/Tretinoin 0.03%

SIG: Apply a thin layer once daily

Dispense ☐ 30 ☐ 60

☐ Clindamycin 1%/Benzoyl Peroxide 5% Topical Cream

☐ Clindamycin 1%/Niacinamide 4%/Tretinoin 0.025%

SIG: Apply a thin layer once daily

Dispense ☐ 30 ☐ 60

Psoriasis-Topical

☐ Clobetasol Propionate 0.05% in Dermazinc solution

☐ Clobetasol Propionate 0.05%/LCD 0.5% in Dermazinc

☐ LCD 10% Shampoo

☐ Montelukast 1%/Ketotifen 0.05% Topical Cream

SIG: Apply to affected area(s) twice daily

Dispense ☐ 30 ☐ 60

Eczema Flare/Flare-up Topical

☐ Betamethasone 0.008%/Mupirocin 0.015%
(preferred <12yo)

☐ Betamethasone 0.016%/Mupirocin 0.015%
(preferred 12yo+)

☐ Triamcinolone 0.025% in CeraVe

☐ SIG: Apply a thin layer once/twice daily

Dispense ☐ 30 ☐ 60 ☐ 240

☐ Sig: Apply to affected area(s) 5 time daily for 1 week,
then Apply to affected area(s) 4 time daily for 1 week, then
Apply to affected area(s) 3 time daily for 1 week, Apply to
affected area(s) 2 time daily for 1 week, then daily repeat if
flair up.

Dispense ☐ 60 ☐ 240 ☐ 454

Rosacea-Topical

☐ Azelaic Acid 15%/Ivermectin 1%/Metronidazole 1%

☐ Ketotifen 0.05% Topical Cream

☐ Oxymetazoline 0.06%/Ivermectin 1%

SIG: Apply a thin layer once daily

Dispense ☐ 30 ☐ 60

Refills _____ Dispense _____

Sig: _____

Prescriber Signature: _____

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Hyperhidrosis

- ☐ Aluminum Chloride 25% in Roll-On applicator
(Isopropyl Alcohol Base 70%) _____ 60ml
- ☐ Aluminum Chloride 25%/Glycopyrrolate 0.5% in Roll-On Applicator
(Ethyl Alcohol with 0.1% Tea Tree Oil base)
- ☐ Atropine ☐ 0.25% ☐ 0.5% in Roll-On Applicator
- ☐ Glycopyrrolate ☐ 0.5% ☐ 1% in Roll-On Applicator

QTY:

☐ 30ml ☐ 60ml ☐ 90ml ☐ _____

Dispense _____ Refills _____

Sig: _____

Prescriber Signature: _____



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Lightening Cream

- ☐ Fluocinolone 0.01%/Hydroquinone 6%/Tretinoin 0.05% (f:11553)
- ☐ Hydrocortisone 2.5%/Hydroquinone 6%/Tretinoin 0.05% (f:95558)
- ☐ Hydrocortisone 0.5%/Hydroquinone 8%/Tretinoin 0.05% (f:98819)
-
- ☐ Hydrocortisone: _____ 0.5% _____ 1% _____ 2%
- ☐ Hydroquinone: _____ 4% _____ 6% _____ 8% _____ 10% (max)
- ☐ Kojic Acid: _____ 6% _____ %
- ☐ Tretinoin: _____ 0.025% _____ 0.05% _____ 0.1%

Dispense _____ Refills _____

Sig: _____

Prescriber Signature: _____



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Commonly Prescribed Compounds for Dermatology page 4 of 5

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Hair Loss

☐ **Mens Hair Growth: Finasteride 0.1%/Minoxidil 6%/Retinoic Acid 0.025 (f:3612)**

☐ **Womens Hair Growth: Azelaic Acid 5%/Minoxidil 5%/Retinoic Acid 0.025% (f:3688)**

☐ **Finasteride** _____ 0.1% _____ %

☐ **Melatonin** _____ 0.003% _____ %

☐ **Minoxidil** _____ 1% _____ 2% _____ 5% _____ %

☐ **Spironolactone** _____ 1% _____ %

☐ **Topical T-3 (liothyronine)** _____ 0.05% _____ 0.1% _____ %

Dispense _____ Refills _____

Sig: _____

Prescriber Signature: _____



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Scars

- ☐ Aloe vera 0.5%/Naltrexone 1%/Topiramate 2.5% in Pracasil (f:99861)
☐ Clindamycin 1%/Niacinamide 4%/Tretinoin 0.025%
☐ : PracasilPlus Base (can be used alone)

☐ : Aloe _____ 0.5% _____ 1% _____ %
☐ : Naltrexone _____ 1% _____ %
☐ : Pramoxine _____ 1% _____ %
☐ : Topiramate _____ 2.5% _____ %

Dispense _____ Refills _____

Sig: _____

Prescriber Signature: _____



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