## For Fax Transmittal to Patient's Choice of Pharmacy or Healthway Compounding Pharmacy 989-791-4603

## **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: () Aller	gies:
All compounds for clinical use require a written prescription for each individual patient. Medication will be dispensed with a patient specific label and patient specific package.  Most Frequently Prescribed Compounds for Podiatry  *This is not an all encompassing list; Commonly prescribed options*	
Formulas for Onychomycosis:  □ Ibuprofen 2% / Terbinafine 1.6% Tea Tree Oil/DMSO	Anti-Inflammatory Transdermal Creams for: <u>Musculoskeletal Pain:</u>
☐ Ibuprofen 2%/ Itraconazole 1% Tea Tree Oil/DMSO	☐ Ketoprofen 10%/Lidocaine 5%/Cyclobenzaprine 2%/
Sig: Brush on nail BID Qty 15ml	Baclofen 2% cream
Formulas for Warts:	SIG:Qty
☐ Salicylic Acid 60% in Aquaphor	Arthritis, Rheumatoid Arthritis, Osteoarthritis:
☐ Cimetidine 5%//Tea Tree Oil 2%/Ibuprofen 2% cream	Plantar Fasciitis, Tendonitis, Epicondylitis:
SIG:Qty	☐ Diclofenac 4%/Bupivacaine 1% cream
Formulas for Diabetic Neuropathy or Pain:  Amitriptyline 2% /Baclofen 2% cream  Ketamine 10% /Gabapentin 6%/Lidocaine 4% cream	□ Ibuprofen 20%/Piroxicam 1% cream  SIG:Qty  Formulas for Wound Healing and Circulation: □ Nifedipine 8% cream
SIG: Apply 1/2ml every 2 hours until pain is relieved, then TID-QID prn  Qty60ml120ml  Amantadine 2%/Bupivacaine 0.5%/Cyclobenzaprine 1%/ Dextromethorphan 1%/Ketoprofen 10% roll-on solution  SIG: Roll-on every 2 hours until pain is relieved, then TID-QID prn	SIG: Apply 1/2ml to affected area(s) twice daily . Qty 30 60  Ketoprofen 2%/Lidocaine 2%/Misoprostol .003%/Phenytoin 2% In mucosal bandage accordion puffer  SIG: puff onto wound daily. Qty 10gm  Formulas for Nodules:
Qty30ml60ml90ml	☐ Verapamil 15%/EDTA 1% cream
Restless Leg Syndrome:  MagnaGel (Topical Magnesium)  SIG: Massage over a large area on legs at bedtime.	SIG: Apply 1/2ml around nodule area BID  Qty 30ml
Formulas for Hyperhidrosis and Foot Odor:  Aluminum Chloride 25%/Glycopyrrolate 0.5% roll-on  SIG:Qty30ml  Refills Dispense Other	HEALTHWAY COMPONING PHARMAY ACCREDITED Compounding Pharmacy
Prescriber Phone: Prescriber Name Prescriber Signature:	e (print)

Fax completed form to Patient's choice of pharmacy or Healthway Compounding Pharmacy 989-791-4603

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to provide compounded solutions to medication problems. No claims are made as to the efficacy, safety or use of compounded formulations. Formulations not FDA approved. The information provided herein is for reference only and is not to be relied upon as making any representation as to the efficacy of any particular formulations. The sample formulations described herein result from prescriptions previously ordered by professionals licensed to write prescriptions in their respective discipline. Nothing herein is intended to replace or influence the independent judgment of any licensed professional.. Version 03/19