Healthway Compounding Pharmacy 2544 McLeod Dr N. Ste #2 •Saginaw, MI 48604 • Phone: 989-791-1691 Fax 989-791-4603	
Address City/St.	/Zip
Home Phone: () Alle:	rgies:
package. Most Frequently Prescr	tient. Medication will be dispensed with a patient specific label and patient specific <b>ibed Compounds for Podiatry</b> ng list; Commonly prescribed options*
Formulas for Onychomycosis:	Anti-Inflammatory Transdermal Creams for:
Ibuprofen 2% / Terbinafine 1.6% Tea Tree Oil/DMSO	Musculoskeletal Pain:
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
	Ibuprofen 20%/Piroxicam 1% cream
Formulas for Diabetic Neuropathy or Pain:	SIG:Qty
☐ Amitriptyline 2% /Baclofen 2% cream	Formulas for Wound Healing and Circulation:
Ketamine 10% /Gabapentin 6%/Lidocaine 4% cream	□ Nifedipine 8% cream
SIG: Apply 1/2ml every 2 hours until pain is relieved, then TID-QID prn	SIG: Apply 1/2ml to affected area(s) twice daily . Qty $\Box$ 30 $\Box$ 60
Qty60ml120ml	☐ Ketoprofen 2%/Lidocaine 2%/Misoprostol .003%/Phenytoin 2%
Amantadine 2%/Bupivacaine 0.5%/Cyclobenzaprine 1%/ Dextromethorphan 1%/Ketoprofen 10% roll-on solution	In mucosal bandage accordion puffer
SIG: Roll-on every 2 hours until pain is relieved, then TID-QID prn	SIG: puff onto wound daily. Qty 10gm
Qty30ml60ml90ml	Formulas for Nodules:
	Verapamil 15%/EDTA 1% cream
Restless Leg Syndrome:	SIG: Apply 1/2ml around nodule area BID
□ MagnaGel (Topical Magnesium)	Qty 30ml
SIG: Massage over a large area on legs at bedtime.	
Formulas for Hyperhidrosis and Foot Odor:   Aluminum Chloride 25%/Glycopyrrolate 0.5% roll-on   SIG:Qty30ml   Refills Dispense Other	HEALTINNA UNAVIEW JUNA Juna Juna Juna Juna Juna Juna Juna Juna
Prescriber Phone:Prescriber Nam	ne (print)
Prescriber Signature:	

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