



Memorial Pharmacy and Compounding

7017 S. Staples St Suite 103B

Corpus Christi, Texas 78413

Phone: 361-356-6279 Fax: 361-480-0090

Date: _____ Date of Birth: _____

Patient: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

Allergies: _____

All compounds for clinical use will require a written prescription for each individual patient. Medication will be dispensed in patient specific package.

Dental Prescription Compounds

Pain Formulations

△ **TMJ Formulation:** Potassium Salts Complex 18%/Ketoprofen 2% in DMSO lotion
SIG: Apply 1/4ml to each side of jaw BID.

△ **Cyclobenzaprine 2%/Ketoprofen 20% cream** △ 60ml △ 120ml

△ **Amitriptyline 2%/Baclofen 2%/Cyclobenzaprine 2%/Diclofenac 3%/Lidocaine 5% in transdermal base.**
Sig: Apply up to 1ml QID △ 60ml △ 120ml

Burning Mouth Syndrome

△ **Lipoic Acid Supreme capsules** (Oral Alpha Lipoic Acid)
Sig: Take 300-900mg by mouth daily

△ **Low Dose Naltrexone Capsule** △ 1.5mg △ 3mg △ 4.5mg
Sig: Take 1.5mg HS for 30 days, 3mg HS for 30 days, 4.5mg HS for 30 days

△ **Amitriptyline 5mg/Baclofen 5mg/Gabapentin 50mg oral lozenge** △ 60 △ 120
Sig: Use 1 troche dissolved in mouth up to QID

Mucositis

△ **Oral Rinse #5** (Nystatin 0.22%/Doxycycline 0.4%/ Triamcinolone 0/1%/Chlorpheniramine 0.02%/ Deoxy-D-Glucose 0.1% for aphthous ulcers) △ 120ml

Sig: Hold 5-10ml in mouth for 3 min and spit out up to 4 times daily. No food/drink for 1/2 an hour.

Note: Lidocaine may be added. For pediatric patients please ask us to remove doxycycline.

△ 1% △ 2% lidocaine

△ **Ketamine Oral Rinse** △ 10mg/5ml △ 20mg/ml △ _____
Sig: Swish and spit 5ml by mouth every 4 hours as needed for pain △ 60ml △ 120ml △ 300ml △ ____ml

Refills _____

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Prescriber: _____ Prescriber

Phone: _____

Prescriber

Signature: _____

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Dental Prescription Compounds

Topical Anesthetics

△ Tetracaine 4%/ Phenylephrine 2%/ Lidocaine 20% gel △ 5ml △ 10ml △ ____ml

△ Lidocaine 10%/ Prilocaine 10%/Tetracaine 4% gel △ 5ml △ 10ml △ ____ml

Gag Reflex

△ Electrolyte Troches Qty: 30 SIG: Dissolve 1 troche in mouth has needed

△ Tetracaine Sucker 0.5% △ Grape △ Green Apple △ Orange △ Cherry

Qty: _____ SIG: Place 1 lollipop in mouth for 10-15 seconds only. Medication takes 1-2 min to start working.

Dry Mouth

△ Electrolyte Troches Qty: 30 SIG: Dissolve 1 troche in mouth as needed

△ Artificial Saliva (Xero Spray Mint Flavor) SIG: Spray in mouth as needed. △ 120ml

Additional Compounds

△ Oxytetracycline HCL 0.5%/HC suspension 1.5%

△ Deoxy DG2 0.2% cream for cold sores Qty: 10 gms SIG: Apply 5 times daily

△ Dry socket formulations (call for suggestions)

△ Nicotine lollipop △ 2mg △ 10mg (call for flavors) Qty: 5 SIG: Place lollipop in mouth until smoke urge passes then place back into container. Use PRN.

△ Lidocaine 4% mucosal bandage SIG: Puff onto painful mouth ulcer up to 4 times daily.

△ Acyclovir 6%/2DDG 0.2% cream SIG: Apply 5 times daily

△ Magic Mouthwash (Lidocaine 33%/Benadryl 33%/Maalox 33%) (Nystatin addition upon request)



Other: _____

Refills: _____

Prescriber: _____ Prescriber

Phone: _____

Prescriber

Signature: _____