



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.

Commonly Prescribed Compounds for Primary Care

Arthritis and Muscle Pain

△ ABC Pain Formula Cream

Amitriptyline 2%/Baclofen 2%/Cyclobenzaprine 2%/
Diclofenac 3%/ Lidocaine 5% in cream base

Dispense: △ 60ml △ 90ml △ ____ml

Sig: Apply 1ml every 2 hours to painful area until pain is
relieved then TID-QID PRN

△ ABC Pain Formula Roll-On

Amantadine 2%/Bupivacaine 0.5%/ Cyclobenzaprine 1%/
Ketoprofen 10%/ Dextromethorphan 1% in Cutters solution

Dispense: △ 60ml △ 90ml △ ____ml

Sig: Roll on every 2 hours to painful area until pain is
relieved then TID-QID PRN

△ ABC Alternative Cream

Ketamine 5%/Ketoprofen 10%/Lidocaine 5% in cream base

Dispense: △ 60ml △ 90ml △ ____ml

Sig: Apply 1ml every 2 hours until pain is relieved then TID-
QID PRN

△ Low Dose Naltrexone Capsules

△ 1.5mg △ 3mg △ 4.5mg

Dispense: △ 30 △ 60 △ 90

Sig: Take 1 capsule by mouth at bedtime

Refills: _____

Bio-Identical Option for HRT

△ Bi-Est 0.1mg (80/20 Estriol/Estradiol)/Progesterone 25mg/
Testosterone 1mg/ml cream (**more options available**)

Sig: Apply 1ml to upper inner arm. Rub in well and wash
hands thoroughly.

Dispense: △ 30ml △ 60ml △ ____ ml

Vaginal Dryness/Atrophy

△ Estradiol 0.25mg/gm vaginal cream

Dispense: △ 30 gm △ 60 gm

Sig: Insert 2 grams vaginally at bedtime for 2 weeks, then 3
times a week for 2 weeks, then 1 gram 3 times weekly PRN

△ Estradiol 0.1mg/Progesterone 10mg/gm vaginal cream

△ Estradiol 0.05mg/ Estriol 0.05mg/Progesterone 10mg/gm
vaginal cream

Dispense: △ 60 gm △ ____gm

Sig: Insert 2 grams vaginally every day for 7 days, then 3
times per week

Non-Hormonal Option

△Hyaluronic acid 5mg/gm aloe vera gel

Dispense: △ 60 gms △ ____ gms

Sig: Insert 2 grams vaginally daily as needed

Testosterone for Men Transdermal Atrevis

△ 50mg/ml △ 25mg/ml △ ____ mg/ml

Dispense: △ 30ml △ 60ml △ ____ ml

△ Sig: Apply 1 ml to dry hairless area once daily in the
morning

△ Sig: Apply ½ ml to dry hairless area twice daily

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Prescriber: _____ Prescriber

Phone: _____

Prescriber

Signature: _____

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Anal Fissures

△ Misoprostol 0.002%/Nitroglycerin 0.2%/Lidocaine 1%/ Phenytoin 2% cream

△ Diltiazem 2%/ Lidocaine 4% cream

Dispense: △ 30 grams

Sig: Apply a pea size amount twice daily to affected area

Headaches

△ Isometheptene mucate 65mg capsule

Dispense: △ 60

Sig: Take 2 by mouth at onset. Repeat 1 by mouth every hour as needed. Max 5 per 24 hours

△ Plevmagra (Mg 30mg/ Vit B-2 400mg/Ca 10mg/ feverfew) capsule

Dispense △ 60

Sig: Take 1 by mouth twice daily

Chronic Otitis

△ Boric Acid 1.5gm/ Fluconazole 0.2gm/Gentamycin Sulfate 1.5gm/Hydrocortisone 0.03 gm powder

Dispense: △ 5gm

Sig: Use 1-2 puffs in affected ear twice daily

Hemorrhoids

△ I/O suppository Lidocaine 1%/ Hydrocortisone 2%

Dispense: 6

Sig: Insert 1 suppository rectally at bedtime for 6 nights

△ Hydrocortisone 2.5%/ Lidocaine 5% cream

Dispense: 30 grams

Sig: Apply a pea size amount twice daily

Psoriasis

△ Clobetasol 0.05% Zinc Pyrithione spray

△ Triamcinolone 0.1%/Urea 10%/ Lactic Acid 5%/ Coal Tar 3% cream

△ Clobetasol 0.05%/Salicylic Acid 5%/ LCD 4% topical solution

Dispense: 120ml

Sig: Apply to affected area twice daily

Recurrent Vaginosis

△ Boric Acid 600mg suppository

Dispense: 30

Sig: Insert 1 suppository vaginally once daily

Refills: _____



Prescriber: _____ Prescriber

Phone: _____

Prescriber

Signature: _____

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