

12 N Federal Hwy, Suite A Pompano Beach FL, 33062 NPI 1649771171 / NCPDP 5736939 Phone (866) 478-3761 Fax (888) 510-2297

Email: rx@yhpharmacy.com

WART AND NAIL TREATMENT

Patient Name:		Date of Birth:	
Patient Name:Address:	City:	State:	Zip:
Phone: Allergies: NKDA (no known drug allergies) Aspirin/ NSAID'	Email:		
Allergies: □ NKDA (no known drug allergies) □ Aspirin/ NSAID' □ Gabapentin □ Penicillin □ Amitriptyline □ Other:	's □ Cyclobenzaprine	☐ Lidocaine / Local Anesthetic ☐	□ Tramadol □ Opioid
	WARTS		
DISPENSE FLUOROURACIL 5% cream with together and Apply 2gm to affected area ever			Jrea #60 capsules – Mi
	NAIL FUNGUS		
1 DICLOFENAC 1.5% in 45.5% DMSO #150ml treated once daily *Cover with Bassa-Gel™* and Diclofenac (5ml), apply to all nails being to be a property of treated once daily *Cover with Bassa-Gel™*	AND DISPENSE F treated once daily	FLUĆYTOSINE 500mg Cap *Cover with Bassa-Gel™* <u>/</u>	o#30 - Mix 1 cap AND
 a. If checked, pharmacy is authorized to dispens any reason or if desired by patient 	se the below in lieu	of the medications listed in	n #1 above if needed for
i DICLOFENAC 1.5% in 45.5% DMSO #10ml - Bassa-Gel™ after all treatment done* <u>AND D</u> #10ml – Apply to all nails being treated once	DISPÉNSE TAVAB	OROLE 5% Solution (Gene	eric KERYDIN®)
ii DISPENSE DICLOFENAC 1.5%/DMSO soln Mix 2 caps and 2ml of solution, apply twice d inflammation and infection			
iii DISPENSE DICLOFENAC 1.5%/DMSO soln solution, apply twice daily to affected nail - A			
If checked, also dispense Lamisil 250mg Ge	eneric Tab #84 – Ta	ake 1 tab by mouth once da	aily
	FOOT PAIN		
DISPENSE DICLOFENAC 1.5%/DMSO soln 2ml of solution, apply twice daily to affected		caine 4% solution 60ml – M	lix together and
CMPD Topical Cream – Gabapentin 6% Lido #120gms – Apply 1-2mls three to four times of			Baclofen 2%
CMPD Topical Cream (NEEDS SEPARATE Diclofenac 3% Cyclobenzaprine 2% Baclofer			
Physician Name:			
Address:			
hone: PEA:			
	181 1		
Physician's Signature		Date	- 回殺器回 Basset***