

Please **fax** completed form to **(800) 537-5193** or call (800) 518-9831  
31035 Schoolcraft Rd • Livonia, Michigan 48150 • [vioscompounding.com](http://vioscompounding.com)

PATIENT INFORMATION		PLEASE FAX WITH PATIENT DEMOGRAPHIC SHEET & RX INSURANCE CARD			
NAME		ALLERGIES			
DATE OF BIRTH	PHONE				
ADDRESS	CITY	STATE	ZIP		

	MEDICATION / CONCENTRATION	SUPPLIED	SIG	REFILLS
ACNE	Benzoyl Peroxide 5% Topical Lotion	<input type="radio"/> 30 gm <input type="radio"/> _____	Apply and leave on affected area overnight as directed.	<input type="radio"/> _____ <input type="radio"/> None
	Benzoyl Peroxide 5%, Clindamycin 1% Gel	<input type="radio"/> 30 gm <input type="radio"/> _____	Apply small amount to affected area once daily.	<input type="radio"/> _____ <input type="radio"/> None
	Formula B Daytime Clindamycin 2%, Erythromycin 4%, Ketoconazole 2%	<input type="radio"/> 60 gm <input type="radio"/> 90 gm	Apply a small to affected areas every morning as directed.	<input type="radio"/> _____ <input type="radio"/> None
	Formula B Nighttime Clindamycin 2%, Erythromycin 4%, Ketoconazole 2%, Tretinoin 0.05%	<input type="radio"/> 60 gm <input type="radio"/> 90 gm	Apply a small amount to affected areas before bedtime. Wash face thoroughly in the morning.	<input type="radio"/> _____ <input type="radio"/> None
ANTI FUNGAL	Fluconazole 10% in Recura Cream	<input type="radio"/> 30 gm <input type="radio"/> 60 gm <input type="radio"/> 90 gm	Apply once daily.	<input type="radio"/> _____ <input type="radio"/> None
	Amphotericin B 3%, Terbinafine 1%, Urea 20%, Thymol 4% in Recura Cream	<input type="radio"/> 30 gm <input type="radio"/> 60 gm <input type="radio"/> 90 gm	Apply once daily to affected areas.	<input type="radio"/> _____ <input type="radio"/> None
HAIR LOSS	Finasteride 1mg	<input type="radio"/> 30 tab <input type="radio"/> 60 tab <input type="radio"/> 90 tab	Take 1 tablet daily.	<input type="radio"/> _____ <input type="radio"/> None
	Hair Foam Finasteride 0.25%, Minoxidil 5%, Tretinoin 0.03%	<input type="radio"/> 60 mls <input type="radio"/> 120 mls	Apply to scalp as directed.	<input type="radio"/> _____ <input type="radio"/> None
	Biotin/Finasteride Capsule 5 mg/1 mg	<input type="radio"/> 30 cap <input type="radio"/> 60 cap <input type="radio"/> 90 cap	Take 1 capsule daily.	<input type="radio"/> _____ <input type="radio"/> None
MELASMA	Melasma Maintenance - Azelaic Acid 15%, Hydrocortisone 0.5%, Hydroquinone 6%, Kojic Acid 4%, Tretinoin 0.05%	<input type="radio"/> 60 gm <input type="radio"/> 90 gm <input type="radio"/> 120 gm	Apply _____ grams _____ times per day.	<input type="radio"/> _____ <input type="radio"/> None
	Melasma Peel Ointment - Azelaic Acid 15%, Hydroquinone 8%, Kojic Acid 4%, Tretinoin 0.1%	<input type="radio"/> 60 gm <input type="radio"/> 90 gm <input type="radio"/> 120 gm	To be applied by physician at office.	<input type="radio"/> _____ <input type="radio"/> None

Additional Directions

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SCAR	ScarAway - Fluticasone 1%, Hyaluronic 1%, Pentoxifylline 3%, Salicylic Acid 3%, Tretinoin 0.05%, Verapamil 6%	<input type="radio"/> 15 gm <input type="radio"/> 30 gm <input type="radio"/> 45 gm	Apply to affected scar once daily.	<input type="radio"/> _____ <input type="radio"/> None
	ScarFade - Fluticasone 1%, Hyaluronic 1%, Hydroquinone 5%, Pentoxifylline 3%, Salicylic Acid 3%, Verapamil 6%	<input type="radio"/> 15 gm <input type="radio"/> 30 gm <input type="radio"/> 45 gm	Apply to affected scar once daily.	<input type="radio"/> _____ <input type="radio"/> None
	SurgiScar - Bupivacaine 0.1%, Fluticasone 1%, Mupirocin 4%, Phenytoin 2%, Verpamil 6%	<input type="radio"/> 15 gm <input type="radio"/> 30 gm <input type="radio"/> 45 gm	Apply to affected scar once daily.	<input type="radio"/> _____ <input type="radio"/> None
	Scar S1 - Fluticasone Propionate 0.05%, Hyaluronic Acid 0.5%, Lidocaine 5%, Pentoxifylline 0.5%, Verapamil 5%	<input type="radio"/> 15 gm <input type="radio"/> 30 gm <input type="radio"/> 45 gm	Apply to affected scar once daily.	<input type="radio"/> _____ <input type="radio"/> None
	Scar S2 - Fluocinolone 0.01%, Hydroquinone 4%, Kojic Acid 6%, Lipoic Acid 3%, Tretinoin 0.05%	<input type="radio"/> 15 gm <input type="radio"/> 30 gm <input type="radio"/> 45 gm	Apply to affected scar once daily.	<input type="radio"/> _____ <input type="radio"/> None
WART	Wartex 1 - Cimetidine 6%, Ibuprofen 2%, Podophyllum 20%, Salicylic Acid 40%, Tea Tree Oil 5%	<input type="radio"/> 20 gm <input type="radio"/> 50 gm <input type="radio"/> 100 gm	Apply nightly with Q-Tip, wash off thoroughly in morning.	<input type="radio"/> _____ <input type="radio"/> None
	Wartex 2 - Cimetidine 6%, Ibuprofen 2%, Podophyllum 10%, Salicylic Acid 40%, Tea Tree Oil 5%	<input type="radio"/> 20 gm <input type="radio"/> 50 gm <input type="radio"/> 100 gm	Apply nightly with Q-Tip, wash off thoroughly in morning.	<input type="radio"/> _____ <input type="radio"/> None
	Wart Solution - Cimetidine 5%, 5-Fluorouracil 5%, Salicilic Acid 10%, Ibuprofen 10% in Collodion Solution	<input type="radio"/> 15 mls <input type="radio"/> 30 mls	Apply to affected area and cover with bandage twice daily.	<input type="radio"/> _____ <input type="radio"/> None
ECZEMA	Coal Tar _____%    Clobetasol _____%    Hydrocortisone _____%	<input type="radio"/> 120 gm <input type="radio"/> 240 gm <input type="radio"/> 360 gm	Apply to affected area QID as directed.	<input type="radio"/> _____ <input type="radio"/> None
	Triamcinolone _____%    Salicylic Acid _____%    In Petrolatum			

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<b>HYPERHIDROSIS</b> Glycopyrrolate 1%, Zinc Oxide 5%, Aluminum Chloride 12%	<input type="radio"/> 30 gm <input type="radio"/> 60 gm <input type="radio"/> 90 gm	Apply half pump to each foot daily or as directed by doctor.	<input type="radio"/> _____ <input type="radio"/> None
<b>RASH/ITCHING</b> Hydrocortisone 2%, Lidocaine 2%, Clotrimazole 1%, Topical Cream	<input type="radio"/> 30 gm <input type="radio"/> 60 gm <input type="radio"/> 90 gm	Apply to affected area QID.	<input type="radio"/> _____ <input type="radio"/> None
<b>ROUGH DRY FEET</b> Urea 40%, Lactic Acid 10%	<input type="radio"/> 60 gm <input type="radio"/> 90 gm <input type="radio"/> 120 gm	Apply to affected area 1 to 3 times daily.	<input type="radio"/> _____ <input type="radio"/> None

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