



# SPECIALTY COMPOUNDING

2222 Indiana Ave, Lubbock, TX 79410  
Call/Text: 806.209.5140

PRESCRIBER ORDER FORM  
FAX COMPLETED FORM TO: 806-209-5141

Patient Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Allergies: \_\_\_\_\_

Prescriber Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

DEA: \_\_\_\_\_ NPI: \_\_\_\_\_

## DERMATOLOGY FORMULATIONS

Tretinoin + Niacinamide 20 gm

0.025%/4%  0.05%/4%  0.1%/4%

Apply a small amount to entire face qHS. Wear sunscreen daily.

Betamethasone in Aquaphor 30 gm

0.025%  0.05%

Apply a small amount to affected area qHS. Wear sunscreen daily.

Triple rosacea cream 30 gm  
(azelaic acid 15%/ivermectin 1%/metronidazole 1%)

Apply to affected area at bedtime. Wear sunscreen daily.

Triple lightning cream 30 gm  
(hydroquinone 4%/tretinoin 0.05%/fluocinolone 0.01%)

Apply to affected area at bedtime for up to 8 weeks.  
Take a 4 week break before reapplying. Wear sunscreen daily.

Additional Instructions: \_\_\_\_\_

Dispense \_\_\_\_\_ month supply Refills 1 2 3 4 5

## MALE SPECIFIC COMPOUNDS

Tadalafil  5 mg  10 mg  20 mg |  Once daily

Sildenafil  25 mg  50 mg  100 mg |  PRN

Enclomiphene capsule  12.5 mg  25 mg  50 mg

Take 1 capsule PO daily.

Additional Instructions: \_\_\_\_\_

Dispense \_\_\_\_\_ month supply Refills 1 2 3 4 5

HERO (tadalafil 20 mg/sildenafil 50mg)

Dissolve 1 troche PO 1 hour prior to sexual activity PRN.  
Maximum 1 troches per 24 hours.

Dispense 30 troches Refills 1 2 3 4 5

## Injectable Hormones

Testosterone Cypionate in MCT oil injection 200 mg/mL

Inject \_\_\_\_\_ mL  IM  SQ every \_\_\_\_\_

Additional Instructions: \_\_\_\_\_

Dispense \_\_\_\_\_ month supply Refills 1 2 3 4 5

PROVIDER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## HAIR LOSS

Minoxidil 5%/finasteride 0.1%/bimatoprost 0.03% topical solution

Apply to affected areas daily, immediately wash off excess.  
Do not wash or blow dry hair for 4 hours after application.

Minoxidil 1.2 mg/biotin 5 mg capsule

Take 1 capsule PO daily.

Minoxidil 1.25 mg/biotin 5 mg/spironolactone 25 mg capsule

Take 1 capsule PO daily.

Additional Instructions: \_\_\_\_\_

Dispense \_\_\_\_\_ month supply Refills 1 2 3 4 5

## FEMALE SPECIFIC COMPOUNDS

O Cream (sildenafil, testosterone, L-arginine) 30 gm

Add testosterone 2 mg/mL

Apply to clitoral/vaginal area 30-45 minutes prior to sexual activity.

## Hormone Compounds

Select all that apply. Must write in controlled substances (i.e. testosterone).

Estradiol \_\_\_\_\_ mg  Progesterone \_\_\_\_\_ mg |  Cream  Capsule

DHEA \_\_\_\_\_ mg  \_\_\_\_\_ mg |  Troche  SL Oil

Once daily  Twice daily Additional Instructions: \_\_\_\_\_

Dispense \_\_\_\_\_ month supply Refills 1 2 3 4 5

## Injectable Hormones

Testosterone Cypionate in MCT oil injection 20 mg/mL

Inject \_\_\_\_\_ mL  IM  SQ every \_\_\_\_\_

Estradiol valerate injection 10 mg/mL

Inject \_\_\_\_\_ mL  IM  SQ every \_\_\_\_\_

Additional Instructions: \_\_\_\_\_

Dispense \_\_\_\_\_ month supply Refills 1 2 3 4 5

## DELIVERY

Patient Picks up and Pays

Bill and Ship to Clinic

Bill and Ship to Patient

IF YOU DO NOT SEE WHAT YOU NEED, PLEASE CALL: 806-209-5140