

3408 N. Eastern Ave. Los Angeles, CA 90032

**Prescriber Information:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
 NPI #: \_\_\_\_\_ DEA #: \_\_\_\_\_ LIC #: \_\_\_\_\_

**Patient Information:**

Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 ICD-9/Bodyparts: \_\_\_\_\_ Allergies: \_\_\_\_\_

Label Language:  
 English  Spanish  Workman's Compensation  PPO  Personal Injury/Auto/PIP

**\*\*\*Please Include Demographics and Copy of Insurance with this Form\*\*\***

**SCARS & ANTI-FLAMMATORY**

Flurbiprofen 20% - Cyclebenzaprine 4% - Lidocain 5% (FCL)  
 Ketoprofen 15% - Baclofen 4% - Cyclebenzaprine 2% - Gabapentin 10% - Lidocain 2% (KBCGL)  
 Flurbiprofen 15% - Baclofen 4% - Verapamil 7% - Tetracaine 2% - (FBVT)  
 \_\_\_\_\_% - Acyclovir 2% - Amitriptyline 2% - DDG 0.1% - Keoprofen 15% - Lidocaine 2%  
 EGCg 1% - Dimethyl Sulfone 2% - Tranilast 1% - Ascorbic Acid 2% - Caffeine 1% - Topical Gel (Pracasil™ - Plus) (EDTA)  
 Gabapentin 15% - Prilocain 3% - Fluticasone 1% - Levocettrizine 2% - Topical Gel (Pracasil™ - Plus) (GPEL)

**NEUROPATHIC PAIN**

Capsaicin 0.0375% - Menthol 5% - Camphor 2% - Tramadol 8% - Gabapentin 10% - Cyclobenzaprine 4% (CAPS-3TGC)  
 Ketamine 15% - Prilocaine 7% - Gabapentin 6% - Baclofen 3% - Diclofenac 2% - Clonidine 0.2%  
 Ketoprofen 20% - Loperamide 7% - Menthol 5% - Capsaicin 0.0375% (KLMC)  
 Ketoprofen 15% - Cyclobenzaprine 4% - Gabapentin 6% - Loperamide 5% - Tetracaine 2% (KCGLT)  
 \_\_\_\_\_% - Cyclobenzaprine 4% - Gabapentin 6% - Tramadol 8% - Amitriptyline 4% - Clonidine 0.2%  
 Ketoprofen 15% - Baclofen 4% - Gabapentin 5% - Loperamide 5% - Amitriptyline 2% - Nifedipine 2% - Clonidine 0.2% (KBCLANC)

**WOUND CARE**

Misoprostol 0.0024% - Phenytoin 5% - Gentamicin 0.2% - Lidocain 5% (Pracasil™ - Plus) (MPGL)  
 Misoprostol 0.0024% - Phenytoin 5% - Lidocain 5% (Pracasil™ - Plus) (MPGL)  
 Tobramycin 5% - Mupirocin 5% - Itraconazole 2% - Spira-wash™ Gel (TMI)  
 Sumatriptan 5% - Tramadol 2% - Pentoxifylline 5% - Dexamethasone 0.1% - Lidocaine 5% (STPDL)  
 (Apply to temple area, behind ears and to base of neck twice daily)

**WARTS, ANTI-FUNGAL, PLANTAR FASCIITIS**

\_\_\_\_\_% - Baclofen 2% - Gabapentin 10% - Amitriptyline 2% - Clonidine 0.2%  
 Flurbiprofen 15% - Dextromethorphan 5% - Lidocain 5% - Piroxicam 2.5% - Amitriptyline 2% - Dexamethasone 1% (FDLPAD)  
 \_\_\_\_\_% - Gabapentin 6% - Nifedipine 7% - Pentoxifylline 5% - Lidocain 3% - Clonidine 0.2%  
 Flurouracil 5% - Salicylic acid 20% - in DMSO (FS) – 60mL (Apply to wart(s) twice a day)  
 Salicylic acid 40% solution (s) - 30MI (Apply to wart(s) twice daily for one week. Then once daily for three to six weeks as directed or tolerated)  
 Terbinafine 1.67% - Ketoconazole 2% - Miconazole 2% - Ibuprofen 2% - Tea Tree Oil 1% (TKMIT) - 120GM (Apply to affected nail(s) twice a day. Clean nail(s) with rubbing alcohol every 7 days, repeat cycle)  
 Terbinafine 2% - Fluconazole 2% - Ibuprofen 2% in DMSO (TFI) - \_\_\_\_\_

**Dermatology**

Hydroquinone 8% - Kojic acid 3% - Vitamin C 10% - Hydrocortisone 1%  
 Sulfatamide 10% - Sulfur 5% - Sulfur cleanser/wash  
 Lidocaine 23% - Tetracaine 7% numbing cream

**\*\*\*SIG: APPLY 1-2 GRAMS TO AFFECTED AREA 3-4 TIMES PER DAY\*\*\***  
**Please Circle QTY** 120 GM 180 GM 240 GM Others: \_\_\_\_\_ REFILLS: \_\_\_\_\_

**Patient has been instructed on correct body part(s) to apply the right quantity of the transdermal cream.**

All compound topical creams are prepared in accordance with State and Federal regulations governing compounds. Compounds are available by prescription only. The FDA does not approve compounds to cure, treat, or mitigate disease. This facsimile transmission is intended to be delivered to the named address and may contain information that is confidential, privileged, and proprietary or exempt from disclosure under applicable law. If it is received by anyone other than the names addressee, the recipient should immediately notify the sender at the address and/or telephone number set forth herein and obtain instructions as to the disposal of the transmitted material. In no event should such material be read or retained by anyone other than the named addressee.

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Physician Signature

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Date