**COMPOUNDED PREPARATIONS FOR DENTISTRY**

**Guest Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DOB** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Sex** M or F

**Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Ph #**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Allergies** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Medical Conditions­** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **MEDICATION** | **INDICATION** | **DIRECTIONS** | **QTY** | **REFILLS** |
| **MgCl 10%/BPC-157 0.01%** Topical Cream | TMJ/Migraines | Apply a small amount to trigger points 2-3 times daily PRN | 30 gms |  |
| **Salicylic Acid 0.3%** Mouthwash | Burning Mouth Syndrome | Gently rinse 5ml daily in mouth for 1-2 minutes then spit out | 150 ml |  |
| **Magic Mouthwash:**  Nystatin 7,500 units/ml /  hydrocortisone 0.125% /  diphenhydramine 0.075% /  lidocaine 0.4% | Oral Mucositis | Gently swish \_\_\_\_ ml in mouth for 1-2 minutes then spit out, \_\_\_\_\_ times per day | **CIRCLEONE:**  240ml  400ml |  |
| **Zinc Sulfate 0.2%** Mouthwash | Oral Mucositis | Rinse mouth with 10ml twice daily for 2 weeks | 300 ml |  |
| **Nystatin** **500,000 IU/cap**  (sugar free, dye free, paraben free)\*  \*Note: *Commercially available Nystatin contains sugar* | Candidiasis, Leaky Gut | **CIRCLE ONE:**  **1 month regimen:**  Take 1 cap PO TID with meals x 2 weeks, then take 2 caps PO TID with meals x 2 weeks  **2-month regimen:**  Take 1 cap PO TID with meals x 2 weeks, then take 2 caps PO TID with meals thereafter  **3-month regimen:**  Take 1 cap PO TID with meals x 2 weeks, then take 2 caps PO TID with meals thereafter | 126 caps  180 caps  180 caps | 0 RF  1 RF  2 RF |
| **Nystatin 100,000 IU/mL suspension**  (sugar free, dye free, paraben free) | Candidiasis, Oral Thrush | Swish and swallow (or) spit 5mL  (1 teaspoon)  four times daily | **CIRCLE ONE:**  450 ml  600 ml |  |
| **Fluconazole** 100 mg tab  (not compounded) | Candidiasis, Leaky Gut | Take 1 tablet PO QD for 7 days after one month of Nystatin | 7 |  |

**Clinical Reason for Use: \*** Hypoallergenic formulation; dye and sugar-free / \*\* Patient needs paraben-free and saccharin-free formulation

**Physician Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Written \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DEA # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NPI # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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