

PATIENT INFORMATION

Name _____

M F DOB / /

Allergies _____

Address _____

City _____

State _____ Zip Code _____

Home Phone _____

Cell Phone _____

PRESCRIBER INFORMATION

Practice Name _____

Address _____

Phone _____

Print Name _____

Signature _____

DEA / NPI # _____

Date _____

Brown-Tail Topical Spray

Diphenhydramine HCL 2.0 %
Betamethasone Valerate 0.05 %
Tetracaine 1.0 %
Menthol USP 0.5%
in Isopropyl Alcohol Base

Spray 120ml

SIG:

Spray to affected area every 4 to 6 hours as needed.

Brown-Tail Topical Cream or Lotion

Diphenhydramine HCL 2.0 %
Betamethasone Valerate 0.05 %
Pramoxine 1.0 %
Aloe Vera 0.5 %
Zinc Acetate 0.2 %
Menthol USP 0.5 %

Cream 30gm 60gm

Lotion 60ml 120ml

SIG:

Apply to affected area every 4 to 6 hours as needed.

Refills # _____

None PRN

Fax to: (207) 619-7273 or E-mail to info@scirxpharmacy.com

Upon receipt we will contact your client to arrange for pickup or mailing.