

# COMPOUNDING SHOP PHARMACY

Established 1982

11845 Wilcrest Dr, Houston, TX 77031  
Phone: 281-495-2230, Fax: 281-495-2232

Visit our website: [mycompoundingshop.com](http://mycompoundingshop.com)

## PODIATRY

ANY OF THESE MEDICATIONS CAN BE MODIFIED TO YOUR LIKING

MEDICATION			QUANTITY
( ) Ketamine 5% Lipoderm	Lipoderm/PLO Gel	RSD, Sympathetic pain	30 or 60gm
( ) Ketamine 5%/Lidocaine 5%	Lipoderm/PLO Gel	RSD, Sympathetic pain	30 or 60gm
( ) Ketoprofen 10% or 20%	Lipoderm/PLO Gel	Anti-Inflammatory (AI)	30 or 60gm
( ) Ketoprofen 20%/Lidocaine 10%	Lipoderm/PLO Gel	Anti-Inflammatory + Anesthetic	30 or 60gm
( ) Keto 10%/Lido 10%/ Carisoprodol 1%	Lipoderm/PLO Gel	AI + Anesthetic + Muscle Relaxer	30 or 60gm
( ) Keto 5%/Amitriptyline 2%/ Gabapentin 6%	Lipoderm/PLO Gel	Peripheral Neuropathy	30 or 60gm
( ) Ketamine 5%/Mexiletine 2%/ Phenytoin 5%/Clonidine 0.2%	Lipoderm/PLO Gel	Peripheral Neuropathy	30 or 60gm
( ) Ketoprofen 5%/Gabapentin 6%	Anhydrous Gel	Trigger Point	8gm
( ) Fluconazole 1% in DMSO	Brush-On	Antifungal – Nail	15ml
( ) Itraconazole/Tea Tree Oil/ Undecylenic in DMSO	Brush-On	Antifungal – Nail	15ml
( ) Thymol 4% in Alcohol	Brush-On	Antifungal – Nail	15ml
( ) Colchicine 0.1%/ Pentoxifylline 10%	Topical Gel	Ulcers – Cryofibrinogenemia	60gm
( ) Cantharidin 1%	Solution	Plantar Warts, Genital Warts	10ml
( ) Cantharidin 1%/ Podophyllum 5%/ Salicylic Acid 30%	Solution ( OFFICE USE ONLY)	Plantar Warts, Genital Warts	10ml
( ) Triple Acid 10% (Salicylic Acid, Lactic Acid, Glacial Acetic Acid)	Solution	Keratolytic/Wart Removal	15ml
( ) Urea 40%	Cream	Keratolytic	60gm
( ) Urea 40%/Clotrimazole 2%	Cream	Keratolytic/Antifungal	60gm
( ) Trichloroacetic Acid 20%	Solution	Keratolytic/Wart Removal	15ml
( ) Benzocaine 20%/Lido 6%/ Tetracaine 4%	Cream	Local Anesthetic	30 or 60gm
( ) Lidocaine 10%/Prilocaine 10%/ Tetracaine 4%	Gel	Local Anesthetic	30 or 60gm
( ) Aluminum Cl 20%	Roll-On Solution	Hyperhidrosis	60ml
( ) Aluminum Cl 20%/Clotrimazole 2%	Roll-On Solution	Hyperhidrosis	60ml
( ) Methenamine 5%	Gel/Lotion/Roll-On	Hyperhidrosis	60ml
( ) Glycopyrrolate 1%	Solution/Cream	Hyperhidrosis	15gm
( ) Glycopyrrolate 1%/Aluminum Cl 10%	Solution/Cream	Hyperhidrosis	15gm
( ) Tamoxifen Cit 0.1%/Kenalog 1%	Cream	Keloid/Hypertrophic Scars	60gm

Direction for use: \_\_\_\_\_

Refills: \_\_\_\_\_

Comments: \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Doctor's Signature \_\_\_\_\_

Doctor's Address \_\_\_\_\_

Doctor's Phone # \_\_\_\_\_

Patient's Name \_\_\_\_\_ Patient's Phone # \_\_\_\_\_