RhinOrinse[®] Compounding Prescription

Patient Information (written or use patient sticker)

Name (Last, First, Initial):	DOB:				
Address:					
	Province:				
Postal Code:	Phone:		(cell / home)		
Medication Allergies:	Cultu	re/Sensitivity/Organism:			
Prescriber's Information					
Name (Last, First, Initial):		MD	Other:		
License #:					
Phone:					

Medication (Check needed ingredients only)	Dose (Per 150 mL flush)	Frequency	Duration of Therapy	Number of Repeats
Budesonide [*] (corticosteroid)	0.25 mg	Once Daily		
		Twice Daily		
Betamethasone [*] (corticosteroid)	0.21 mg	Once Daily		
		Twice Daily		
Gentamicin ^{**} (antibiotic)	40 mg	Once Daily		
		Twice Daily		
Ceftazidime ^{**} (antibiotic)	100 mg	Once Daily		
		Twice Daily		
Clindamycin** (antibiotic)	60 mg	Once Daily		
		Twice Daily		
Tobramycin ^{**} (antibiotic)	8 mg	Once Daily		
		Twice Daily		
Acetylcysteine (mucolytic)	80 mg	Once Daily		
		Twice Daily		
Mometazone (corticosteroid)	1.5 mg	Once Daily		
		Twice Daily		
Other		Once Daily		
		Twice Daily		

*Based on Y. Cai, D.A. Gudis. Is topical high-volume budesonide sinus irrigation safe? Laryngoscope 2018; 128:781.

**Based on K. Elliot, S. Stringer. Evidence-based recommendations for antimicrobial nasal washes in chronic rhinosinusitis. American J. Rhinology 2006; 20.

Signature: MD

AD Date:_____

All medications to be delivered in a 1.5 L Rhinorinse bag using a Rhinoclear Nasal Rinse Bottle (1 bag = 10 x 150 mL treatments). This product must be compounded under sterile conditions and is not available at all pharmacies. Visit www.rhinoclear.com for a list of all participating pharmacies.

