

BLACKBURN DRUG

PHONE: 307-201-1159 L FAX: 307-201-1553
BLACKBURNDRUG.COM
545 N CACHE - UNIT 10-S JACKSON WY 83001

PATIENT NAME _____ DOB _____
ADDRESS _____ PHONE _____
ALLERGIES _____

- NIFEDIPINE 0.2 % OINTMENT
 - APPLY A PEA SIZE AMOUNT RECTALLY TWICE DAILY
 - #60 GRAMS
 - REFILLS _____
- NIFEDIPINE 0.2 % LIDOCAINE 4 % OINTMENT
 - APPLY A PEA SIZE AMOUNT RECTALLY TWICE DAILY
 - #60 GRAMS
 - REFILLS _____
- NITROGLYCERINE 0.125 % OINTMENT
 - APPLY A PEA SIZE AMOUNT RECTALLY TWICE DAILY
 - #60 GRAMS
 - REFILLS _____
- NITROGLYCERINE 0.125 % LIDOCAINE 4 % OINTMENT
 - APPLY A PEA SIZE AMOUNT RECTALLY TWICE DAILY
 - #60 GRAMS
 - REFILLS _____
- DILTIAZEM 2 % OINTMENT
 - APPLY A PEA SIZE AMOUNT RECTALLY TWICE DAILY
 - #60 GRAMS
 - REFILLS _____
- DILTIAZEM 2% LIDOCAINE 4% OINTMENT
 - APPLY A PEA SIZE AMOUNT RECTALLY TWICE DAILY
 - #60 GRAMS
 - REFILLS _____

PHYSICIAN NAME _____ DATE _____
SIGNATURE _____ DEA _____