



U Save It Pharmacy - Peach Valley

2310 Chesnee Hwy,

Spartanburg, SC 29303

P: 864-577-0087 F:864-577-0599

Patient Name: _____ DOB: _____ Phone #: _____

Address: _____ City/State/Zip: _____

COMPOUNDED MEDICATION	STRENGTH	DISPENSE	DIRECTIONS	REFILLS
Vulvodynia/Vaginismus:				
Diazepam – U Cream	<input type="checkbox"/> 10mg/gm	<input type="checkbox"/> 30 gm	Insert 0.5 to 1gm vaginally QHS	
Diazepam / Baclofen – U Cream	<input type="checkbox"/> 10/20mg/gm	<input type="checkbox"/> 30 gm	Apply 0.5 to 1ml 30 minutes before intercourse	
Gabapentin – U Cream	<input type="checkbox"/> 5%	<input type="checkbox"/> 30 gm	Apply a pea-size amount as directed.	
Amitriptyline HCL/Baclofen – AQ Gel	<input type="checkbox"/> 2/2 %	<input type="checkbox"/> 30 gm	Apply a pea-size amount as directed	
Yeast Infections:				
Clobetasol/Terconazole – Vaginal Cream	<input type="checkbox"/> 0.025%/0.2%	<input type="checkbox"/> 30 gm Pump	Apply a pea-size amount BID for 7 days as directed.	
Boric Acid Suppository	<input type="checkbox"/> 600mg	<input type="checkbox"/> #14 Supp	1 PV QHS	
Lactic Acid Vaginal Suppository (Acidophilus 500mg)	<input type="checkbox"/> 1%	<input type="checkbox"/> #14 supp	1 PV QHS	
Lichen Sclerosis:				
Clobetasol / Testosterone – U Cream	<input type="checkbox"/> 0.025%/1%	<input type="checkbox"/> 30 gm Pump	Apply a pea-size amount BID for 7 days as directed.	
Naltrexone – U Cream	<input type="checkbox"/> 1%	<input type="checkbox"/> 30 gm Pump	Apply a pea-size amount as directed.	

U Cream = Vaginal Cream AQ = Water based Gel

Doctor Name (Printed): _____ DEA: _____ Phone: _____

Dispense as Written

Substitution Permitted