

Practice Name: _____ Phone: _____ Fax: _____ DEA# _____

Patient Name: _____ DOB: _____ Date: _____

Address: _____ Phone: _____

Allergies: _____ Other: _____



Fax. 770-809-5048

Hair Loss Combinations: (Topical Use)

Minoxidil 5% (50 mg/mL) / Finasteride 0.1% (1 mg/mL) / Tretinoin 0.01% (0.1 mg/mL) Topical Foam Solution

Check to add:

- Azelaic Acid 2.5% (25 mg/mL) *Use as a substitute for Tretinoin/Retinoic Acid
- Estradiol 0.02% (0.2 mg/mL) *For women only
- Rosemary Oil 1%
- Ketoconazole 2% (20 mg/mL)
- Melatonin 0.05% (0.5 mg/mL)
- Progesterone 0.25% (2.5 mg/mL)
- Spironolactone 0.1% (1 mg/mL) *Use as a substitute for Finasteride

Disp # _____ Ref # _____

SIG: Apply 2 to 4 pumps to affected areas of scalp QHS and rub in well. Rinse the following morning.

Minoxidil 5% / Finasteride 0.1% / Progesterone 0.25% / Tretinoin 0.025% Topical Foam Solution Disp # 60 mL Ref # _____

SIG: Apply 2 to 4 pumps to affected areas of scalp QHS and rub in well. Rinse the following morning.

Minoxidil 7.5% / Finasteride 0.1% / Betamethasone 0.05% / Caffeine 0.005%

Dosage Form: Topical lotion Foam Solution

Disp # 60 mL Ref # _____

SIG: Apply topically to affected areas of scalp QHS and rub in well. Rinse the following morning.

Minoxidil 5% / GHK-Cu 0.5% Topical Foam Solution

Disp # _____ Ref # _____

SIG: Apply 2 to 4 pumps to affected areas of scalp QHS and rub in well. Rinse the following morning.

Hair Loss Combinations: (Oral Use)

- Minoxidil Capsule 0.25mg 0.5mg 1mg _____ mg
- Biotin 5 mg / Minoxidil 0.25 mg / Spironolactone 25 mg Capsule
- Biotin 5 mg / Minoxidil 0.25 mg Capsule
- Biotin 5 mg / Finasteride 1 mg / Dutasteride 0.5 mg Capsule

SIG: _____ Disp # _____ Ref # _____

Refill (Circle): 1 2 3 4 5 _____ times PRN NR

Physician Name: _____ Physician Signature: _____