# INTRACAMERAL INJECTION ORDER FORM

**Fax: 866-515-0196**

| ☐ **Dexamethasone Sodium Phosphate 0.1% Moxifloxacin HCl 0.5% Ophthalmic Solution**<br>Injection to be administered by physician only<br>Total # of 1 ml vials ____________ | **PO#**_____________________________________________ |
|---|---|

Date(s) of surgery: __________________ Please only prescribe one medication per form. Use additional forms as needed.

| Patient Name | DOB | Allergies | # of Vials |
|---|---|---|---|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| 7. | | | |
| 8. | | | |
| 9. | | | |
| 10. | | | |

**All orders received will be processed by the following business day for shipping.**
All fields required. Incomplete orders may delay processing.

I have reviewed my patients medical record and determined the medication(s) ordered are medically necessary. I verify I have examined and diagnosed the patient as indicated above. I will comply with state and federal documentation requirements by retaining a copy of this prescription in the patients' medical record. The prescription is to be dispensed as written unless otherwise instructed.

Prescriber Signature: ________________________ Prescriber Name: ________________________ NPI # __________

Facility Name: ________________________________ Address: ________________________________

City/State/Zip: ________________________________ Phone: ____________________ Fax: ______________

Prescriber Email: ________________________________________________________________

Credit Card Number: ________________________________ Exp: ____________ CVC: ________________

Credit Card on file ending in: ____________________________

Compounds are available by prescription only. The FDA does not approve compounds to cure, treat, or mitigate disease. This facsimile transmission is intended to be delivered to the named addressee and may contain information that is confidential, privileged, and proprietary or exempt from disclosure under applicable law. If it is received by anyone other than the named addressee, the recipient should immediately notify the sender at the address and/ or telephone number set forth herein and obtain instructions as to the transmitted material. In no event should such material be read or retained by anyone other than the named addressee.