

# Physician's Medication Order Form:

## Skin Lightening



**LIBERTY DRUG**

195 Main Street - Chatham, NJ 07928  
(Phone) 877.836.0111 (Fax) 973.635.6208

[www.LibertyDrug.com](http://www.LibertyDrug.com)

LibertyDrugRx@gmail.com

PHYSICIAN NAME: \_\_\_\_\_ DEA# \_\_\_\_\_ NPI# \_\_\_\_\_

PHYSICIAN ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHYSICIAN PHONE: \_\_\_\_\_ PHYSICIAN FAX: \_\_\_\_\_

PHYSICIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Hydroquinone Cream**

**8%**

**12%**

DIRECTIONS:

\_\_\_\_\_

**Tri-Luma Cream (Hydroquinone 8%, Tretinoin 0.1%, Kojic Acid 1%)**

DIRECTIONS:

\_\_\_\_\_

**Hydroquinone, 8%, Tretinoin 0.025%, Kojic Acid 1%, Niacinamide 4%, Fluocinolone 0.025% Cream**

DIRECTIONS:

\_\_\_\_\_

**Other:**

DIRECTIONS:

PATIENT NAME: \_\_\_\_\_ GENDER: \_\_\_\_\_ DOB: \_\_\_\_\_

PATIENT ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

The documents accompanying this telecopy transmission contain confidential information belonging to the sender that is legally privileged. It is intended only for the use of the individual or entity named above. The authorized recipient of this information is prohibited from disclosing this information to any other party and is required to destroy the information after its stated need has been fulfilled. If you are not the intended recipient you are hereby notified that any disclosure, copying, distribution or action taken in reliance on the contents of these documents is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone. Thank you.

**FAX (973) 635-6208**