

CHHF PRESCRIPTION SHEET 2021		Patient Name: _____	
Circle Medication and Strength.		AGE: _____ WEIGHT: _____	
Write instructions and amount at the right.			
ANALGESIC/ANTIINFLAMMATORY	INSTRUCTIONS	GASTROINTESTINAL	INSTRUCTIONS
Acetaminophen 325MG 500 mg		Bisacodyl 10 mg	
Acetamin. 80 or 160 mg chewable		Bismuth (Pepto Bismal) 262 mg	
Acetaminophen Elixir 160 mg/5 ml		Bismuth (Pepto Bismal) Susp	
Ibuprofen 200 400 600 800 mg		Calcium Carbonate 500 mg	
Ibuprofen Suspension		Colace 100 mg 200 mg	
Meloxicam 15 mg		Dicyclomine 10 mg	
Naproxen 220 mg 375mg 500 mg		Esomeprazole 20 mg 40 mg	
Prednisone 5 10 20 mg		Famotidine 20 mg	
Prednisolone Syrup		Loperamide (Imodium) 2 mg	
ANTIBIOTICS		Loperamide Liquid	
Amoxil 500 mg.		Meclizine 12.5 mg 25 mg	
Amoxil Susp. 125 250 400mg		Omeprazole 20 mg 40 mg	
Amoxil Chewable 250 mg.		Pantoprazole 40 g	
Augmentin 875 mg		Promethazine 12.5 25 mg	
Augmentin suspension		Promethazine suppository	
Azithromycin 250 mg		Probiotics	
Azithromycin suspension		OPHTHALMIC & OTIC	
Bactrim 400 mg 800 mg		Cortisporin otic suspension	
Bactrim Susp 200 mg		Gentamicin Ophthalmic drops	
Cephalexin 250 500 mg		Ofloxacin 0.3%/10 ml	
Cephalexin Suspension 125 250 mg		Lubricant Drops / Artificial Tears	
Cipro 250 mg 500 mg		Tetrahydrozoline Drops Decongestant	
Clindamycin 150 mg		RESPIRATORY - ASTHMA	
Clindamycin Liquid 25 mg/ml		Albuterol tab 4 mg OR Syrup	
Doxycycline 50 mg 100 mg		Albuterol Inhaler	
Levofloxacin 250 500 750 mg		Albuterol nebulization	
Pen Vee K 500 mg		Ipratropium nebulization	
ANTICONVULSANTS		Beclomethasone Inhaler	
Phenytoin 50 100 mg		Montelukast (Singulair) 4 5 10 mg	
Levetiracetam 500 mg		Budesonide/Formoterol Inhaler	
ANTIDEPRESSANT		Futicasone/Salmeterol Inhaler	
Sertraline 50 mg 100 mg		RESPIRATORY - GENERAL	
ANTIMICROBIAL-PARASITIC/PROTOZOA		Cetirizine (Zyrtec) 10 mg	
Albendazole 200 mg		Cetirizine Syrup	
Chloroquine 150 mg OR liquid		Chlorpheniramine 4 mg	
Fluconazole 150 200 mg		Diphenhydramine (Benadryl) 25 50 mg	
Metronidazole (Flagyl) 500 mg		Diphenhydramine Syrup	
Tinidazole 500 mg		Fexofenadine (Allegra) 60 180 mg	
ANTI-VIRUS		Guaifenesin 400 mg	
Acyclovir 200 mg		Guaifenesin Syrup	
CARDIOVASCULAR		Loratadine (Claritin) 10 mg	
Aspirin 81 mg (Prevention)		Decongestant Nasal Spray	
Enalapril (ACE or ARB) 5mg 10mg		Fluticasone Nasal Spray	
Lisinopril (ACE or ARB) 10 mg 20 mg		Saline Nasal Spray	
Losartan (ACE or ARB) 50 mg 100		SCABIES & LICE	
Atenolol (Beta Blocker) 50 mg 100 mg		Ivermectin 6 mg	
Metoprolol (Beta Blocker) 50 mg 100 mg		Lice Shampoo	
Amlodipine (CC Blocker) 5 mg 10 mg		Permethrin cream 5%	
Diltiazem (CC Blocker) 120, 180, 240		Scabies Soap or Solution	
Furosemide (Diuretic) 20 mg 40 mg		TOPICALS/CREAM/OINTMENT	
HCTZ (Diuretic) 12.5 mg 25 mg		Bacitracin/Triple Antibiotic	
DIABETES		Clotrimazole 1 %	
Glipizide 5 mg 10 mg.		Diphenhydramine cream	
Metformin 500 mg 1000 mg.		Hemorrhoidal cream	
Insulin Lantus OR Levemir		Hydrocortizone 1%	
VITAMIN/MINERAL/ELECTROLYTE		Ketoconazole (Nizoral)	
Adult		Silvadine	
Children's Chewable		Triamcinolone cream 1 %	
Infant Multivitamin Drops		VAGINAL	
Prenatal		Clotrimazole Cream	
Ferrous Sulfate 325 mg		Miconazole Cream 2%	
Ferrous Sulfate Elixir		WOMEN'S & MEN'S SPECIFIC	
Folic Acid		Tamsulosin (Flomax) 0.4 mg	
Oral Rehydration / Pedialyte		Condoms	
FOOD OR SUPPLEMENT PACKAGES		Oral Contraceptive	
Rise Against Hunger food packages			
Rice and Beans purchased locally			
		Provider Signature	