



## SUGGESTED FORMULA

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Fluconazole 4%/ Ibuprofen 2%/ Itraconazole 1% Terbinafine 4% Nail Solution

Version number: 1.0 Volume: 15 mL

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Fluconazole, USP (F1355) 0.6gm
Ibuprofen, USP (IB100) 0.3gm
Itraconazole, USP (12662) 0.15gm
Terbinafine, EP (T3880) 0.6gm

Dimethyl Sulfoxide, USP (D1258) Q. S. 15mL

## SUGGESTED COMPOUNDING PROCEDURES

- 1. Weigh all powdered ingredients in C-PEC enclosure
- 2. Add ½ final volume of Dimethyl Sulfoxide to clean glass beaker, calibrated to final volume
- 3. Add powdered ingredients to DMSO and gently stir to mix
- 4. Bring step 3 to final volume with DMSO
- 5. Suggested quality assessments:
  - a. Weight to Volume calculation
  - b. Color
  - c. Clarity/particulate
  - d. External Use caution labels

Store in air tight glass containers, protect from light.

May be dispensed in glass bottle with brush applicator.

Store at Room Temperature

No claims are made as to the safety or efficacy of this preparation. This formulation is provided solely at the unsolicited request of the pharmacist.

Beyond-Use Dates of preparations are conservative estimates by the formulator using reference books, peer-reviewed literature, intended duration of therapy, formulation from commercially available products, organoleptic observations and current USP guidelines. Compounders may have stability studies performed by a reputable laboratory if they wish to extend the Beyond-Use Date. It is recommended that you follow USP <795> recommendations for potency testing.

## Beyond-Use Date is estimated to be <u>6 Months</u> per USP guidelines Precautions should be taken to prevent cross-contamination and exposure of ingredients to the compounder and contamination of the preparation by the compounder. Wear appropriate personal protective equipment. Use safety enclosures (hoods) when weighing and mixing. 2/18 JD Phone: 800.370.6231 | Fax: 732.608.5420 | Internet: SpectrumRx.com | Email: sales@spectrumrx.com