

Compound preparation documentation

Affix Rx label or

Batch #: _____

Date prepared: _____

Compound name: _____

Strength: _____

Dosage form: _____

Total quantity: _____

Source of formula: _____

Beyond-use date assigned: _____

Deviations from written formula: _____

Deviations approved by: _____

Quantity	Ingredients	MFR	DIN	Lot #	Expiry date	Measured by	Verified by

Calculations:

Calculated by:	Verified by:
Prepared by:	Verified by:

Write additional calculations on back