



2814 N University Drive
Coral Springs, FL 33065

Phone: 954 575 7085
Fax: 954 575 7083

Name: _____

DOB : _____

Address: _____

Phone: _____

BLT

(Benzocaine 20%, Lidocaine 4%, Tetracaine 4% in plasticized base)

25GM \$32.95

Sig: Apply topically to area 1 hour prior to procedure and repeat
30 minutes later (rub in well).

Refills _____

Signature _____

Print Name _____

Phone _____