Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Prednisolone Phosphate + Moxifloxacin + Bromfenac

Prednisolone Phosphate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Burning or stinging, dysgeusia, foreign body sensation, allergic reaction, headache, Increased intraocular pressure with possible development of glaucoma and infrequent optic nerve damage, Keratitis, Mydriasis, Subscapular posterior cataract, Visual field defect, Wound healing impairment, Corneal ulcer, development of secondary infection (bacterial, fungal or viral), and conjunctivitis. Allergic reactions, dysgeusia, foreign body sensation, pruritis, blurry vision, conjunctival hyperemia, loss of accommodation and ptosis, acute anterior uveitis and perforation of the globe. The use of steroids after cataract surgery bay delay healing and increase the incidence of bleb formation. Bacterial keratitis associated with the use of multiple-dose containers.	Infants, Lactation, Pregnancy. Known hypersensitivity to corticosteroids or any of the components. Prolonged use of corticosteroids may result in posterior subcapsular cataract formation and may increase intraocular pressure in susceptible individuals. Patients with glaucoma can have an increase in intraocular pressure-monitor pressure routinely if used for 10 days or longer. Monitor for secondary infections, acute purulent infections of the eye may be masked or activity enhanced by the prescence of corticosteroid medication. Various ocular diseases and long-term use have been known to cause corneal and scleral thinning.

Moxifloxacin HCl

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Conjunctivitis, Decreased visual acuity, Dry eye, Keratitis, Ocular discomfort, Ocular hyperemia, Ocular pain, Ocular pruritus, Subconjunctival hemorrhage, and Tearing, Anaphylaxis, Growth of resistant organisms, Fever, Increased cough, Infection, Otitis media, Pharyngitis, Rash and Rhinitis.	Patients less than 1 year, Lactation, Pregnancy. Known hypersensitivity to flouroquinolones or any of the components. Growth of resistant organisms with prolonged use.

Bromfenac

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Anterior chamber eye inflammation, Headache, Vitrious floaters, Iritis, Eye pain, Ocular hypertension, Burning sensation, Conjunctival hyperemia, Corneal erosion, Corneal perforation, Corneal thinning, Corneal ulcer, Epithelial keratopathy, Eye irritation, Eye pruritus, Eye redness, Hypersensitivity reaction, Keratitis, Prolonged bleeding, Stinging sensation, Abnormal sensation in eyes, Anaphylaxis	Lactation, Pediatric patients, Pregnancy, Slow or Delayed Healing (NSAIDS), Potential for cross-sensitivity (NSAIDS) or any of the components. Increased bleeding time of ocular tissue, Keratitis, Corneal reactions. Corneal adverse events are increased in patients with dry eye syndrome, rheumatoid arthritis, repeat ocular surgeries in a short time, and diabetes mellitus.

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Prednisolone Phosphate + Bromfenac

Prednisolone Phosphate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Burning or stinging, dysgeusia, foreign body sensation, allergic reaction, headache, Increased intraocular pressure with possible development of glaucoma and infrequent optic nerve damage, Keratitis, Mydriasis, Subscapular posterior cataract, Visual field defect, Wound healing impairment, Corneal ulcer, development of secondary infection (bacterial, fungal or viral), and conjunctivitis. Allergic reactions, dysgeusia, foreign body sensation, pruritis, blurry vision, conjunctival hyperemia, loss of accommodation and ptosis, acute anterior uveitis and perforation of the globe. The use of steroids after cataract surgery bay delay healing and increase the incidence of bleb formation. Bacterial keratitis associated with the use of multiple-dose containers.	Infants, Lactation, Pregnancy. Known hypersensitivity to corticosteroids or any of the components. Prolonged use of corticosteroids may result in posterior subcapsular cataract formation and may increase intraocular pressure in susceptible individuals. Patients with glaucoma can have an increase in intraocular pressure-monitor pressure routinely if used for 10 days or longer. Monitor for secondary infections, acute purulent infections of the eye may be masked or activity enhanced by the prescence of corticosteroid medication. Various ocular diseases and long-term use have been known to cause corneal and scleral thinning.

Bromfenac

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Anterior chamber eye inflammation, Headache, Vitrious floaters, Iritis, Eye pain, Ocular hypertension, Burning sensation, Conjunctival hyperemia, Corneal erosion, Corneal perforation, Corneal thinning, Corneal ulcer, Epithelial keratopathy, Eye irritation, Eye pruritus, Eye redness, Hypersensitivity reaction, Keratitis, Prolonged bleeding, Stinging sensation, Abnormal sensation in eyes, Anaphylaxis	Lactation, Pediatric patients, Pregnancy, Slow or Delayed Healing (NSAIDS), Potential for cross-sensitivity (NSAIDS) or any of the components. Increased bleeding time of ocular tissue, Keratitis, Corneal reactions. Corneal adverse events are increased in patients with dry eye syndrome, rheumatoid arthritis, repeat ocular surgeries in a short time, and diabetes mellitus.

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Prednisolone Phosphate + Moxifloxacin

Prednisolone Phosphate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Burning or stinging, dysgeusia, foreign body sensation, allergic reaction, headache, Increased intraocular pressure with possible development of glaucoma and infrequent optic nerve damage, Keratitis, Mydriasis, Subscapular posterior cataract, Visual field defect, Wound healing impairment, Corneal ulcer, development of secondary infection (bacterial, fungal or viral), and conjunctivitis. Allergic reactions, dysgeusia, foreign body sensation, pruritis, blurry vision, conjunctival hyperemia, loss of accommodation and ptosis, acute anterior uveitis and perforation of the globe. The use of steroids after cataract surgery bay delay healing and increase the incidence of bleb formation. Bacterial keratitis associated with the use of multiple-dose containers.	Infants, Lactation, Pregnancy. Known hypersensitivity to corticosteroids or any of the components. Prolonged use of corticosteroids may result in posterior subcapsular cataract formation and may increase intraocular pressure in susceptible individuals. Patients with glaucoma can have an increase in intraocular pressure-monitor pressure routinely if used for 10 days or longer. Monitor for secondary infections, acute purulent infections of the eye may be masked or activity enhanced by the prescence of corticosteroid medication. Various ocular diseases and long-term use have been known to cause corneal and scleral thinning.

Moxifloxacin HCl

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Conjunctivitis, Decreased visual acuity, Dry eye, Keratitis, Ocular discomfort, Ocular hyperemia, Ocular pain, Ocular pruritus, Subconjunctival hemorrhage, and Tearing, Anaphylaxis, Growth of resistant organisms, Fever, Increased cough, Infection, Otitis media, Pharyngitis, Rash and Rhinitis.	Patients less than 1 year, Lactation, Pregnancy. Known hypersensitivity to flouroquinolones or any of the components. Growth of resistant organisms with prolonged use.

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Moxifloxacin + Bromfenac

Moxifloxacin HCl

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Conjunctivitis, Decreased visual acuity, Dry eye, Keratitis, Ocular discomfort, Ocular hyperemia, Ocular pain, Ocular pruritus, Subconjunctival hemorrhage, and Tearing, Anaphylaxis, Growth of resistant organisms, Fever, Increased cough, Infection, Otitis media, Pharyngitis, Rash and Rhinitis.	Patients less than 1 year, Lactation, Pregnancy. Known hypersensitivity to flouroquinolones or any of the components. Growth of resistant organisms with prolonged use.

Bromfenac

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Anterior chamber eye inflammation, Headache, Vitrious floaters, Iritis, Eye pain, Ocular hypertension, Burning sensation, Conjunctival hyperemia, Corneal erosion, Corneal perforation, Corneal thinning, Corneal ulcer, Epithelial keratopathy, Eye irritation, Eye pruritus, Eye redness, Hypersensitivity reaction, Keratitis, Prolonged bleeding, Stinging sensation, Abnormal sensation in eyes, Anaphylaxis	Lactation, Pediatric patients, Pregnancy, Slow or Delayed Healing (NSAIDS), Potential for cross-sensitivity (NSAIDS) or any of the components. Increased bleeding time of ocular tissue, Keratitis, Corneal reactions. Corneal adverse events are increased in patients with dry eye syndrome, rheumatoid arthritis, repeat ocular surgeries in a short time, and diabetes mellitus.

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Prednisolone Phosphate + Moxifloxacin HCl + Ketorolac Tromethamine

Prednisolone Phosphate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Burning or stinging, dysgeusia, foreign body sensation, allergic reaction, headache, Increased intraocular pressure with possible development of glaucoma and infrequent optic nerve damage, Keratitis, Mydriasis, Subscapular posterior cataract, Visual field defect, Wound healing impairment, Corneal ulcer, development of secondary infection (bacterial, fungal or viral), and conjunctivitis. Allergic reactions, dysgeusia, foreign body sensation, pruritis, blurry vision, conjunctival hyperemia, loss of accommodation and ptosis, acute anterior uveitis and perforation of the globe. The use of steroids after cataract surgery bay delay healing and increase the incidence of bleb formation. Bacterial keratitis associated with the use of multiple-dose containers.	Infants, Lactation, Pregnancy. Known hypersensitivity to corticosteroids or any of the components. Prolonged use of corticosteroids may result in posterior subcapsular cataract formation and may increase intraocular pressure in susceptible individuals. Patients with glaucoma can have an increase in intraocular pressure-monitor pressure routinely if used for 10 days or longer. Monitor for secondary infections, acute purulent infections of the eye may be masked or activity enhanced by the prescence of corticosteroid medication. Various ocular diseases and long-term use have been known to cause corneal and scleral thinning.

Moxifloxacin HCl

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Conjunctivitis, Decreased visual acuity, Dry eye, Keratitis, Ocular discomfort, Ocular hyperemia, Ocular pain, Ocular pruritus, Subconjunctival hemorrhage, and Tearing, Anaphylaxis, Growth of resistant organisms, Fever, Increased cough, Infection, Otitis media, Pharyngitis, Rash and Rhinitis.	Patients less than 1 year, Lactation, Pregnancy. Known hypersensitivity to flouroquinolones or any of the components. Growth of resistant organisms with prolonged use.

Ketorolac Tromethamine

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Stinging and burning on instillation, Allergic reactions, Corneal edema, Iritis, Ocular inflammation, Ocular irritation, superficial keratitis and superficial ocular infections. Eye pain and irritation, Headache, Hypersensitivity reaction, Ocular edema, Corneal infiltrates, Corneal ulcer, Eye dryness, Blurry vision, Bronchospasm or exacerbation of asthma. Corneal erosion, Corneal perforation, Corneal thinning and epithelial breakdown. Bacterial keratitis associated with the use of multiple-dose containers.	Patients less than 3 years of age, Lactation, Pregnancy, Child bearing aged females, Slow or Delayed healing (NSAIDS), Potential for cross-sensitivity (NSAIDS) or any of the components. Increased bleading time of ocular tissue, Keratitis, Corneal reactions. Corneal adverse events are increased in patients with dry eye syndrome, rheumatoid arthritis, or repeat ocular surgeries in a short time, and diabetes mellitus.

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Atropine Sulfate

Atropine Sulfate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Eye pain and stinging on administration, Blurred vision, Photophobia, Decreased lacrimation, superficial keratitis. Allergic reactions such as papillary conjunctivitis, contact dermatitis, and lid edema may also occur less commonly. Systemic side effects noted with Atropine 1%: Increased heart rate and blood pressure, dryness of skin, mouth, and throat from decreased secretions from mucus membranes; restlessness, irritability or delirium from stimulation of the central nervous system. Bacterial keratitis possible with multiple use container.	Do not give to children less than 3 months of age. Patients 65 years of age or older, use this preparation with care. Pregnant or breast-feeding, talk to your physician prior to use. Potential for cross-sensitivity to any components. Use precaution if patient using MAOI (potential to precipitate hypertensive crisis).

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Timolol + Bimatoprost

Timolol Maleate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Ocular burning/stinging on instillation, blurred vision, cataract, conjunctival injection, headache, hypertension, Infection, Itching, and decreased visual acuity, potentiation of respiratory reactions including asthma, asthenia/fatigue and chest pain, bradycardia, arrhythmia, hypotension, syncope heart block, cardiac arrest, pulmonary edema, raynaud's phenomenon, nausea, diarrhea, dyspepsia, anorexia, dry mouth, dizziness, somnolence, insomnia, depression, confusion, alopecia, bronchospasm, anaphylaxis, nasal congestion, potentiation of muscle weakness, masked hypoglycemia, masked thyrotoxicosis, ocular pain, ocular irritation (conjuctivitis, blepharitis, keratitis, ocular pain, discharge, crusting, foreign body sensation, tearing, dry eyes, ptosis), visual disturbances, and decreased libido, choroidal detachment after filtration procedures. Bacterial keratitis associated with the use of multiple-dose containers.	Patients Less than 12 Years, Lactation, Pregnancy, Bronchial Asthma, Severe COPD, chronic bronchitis, emphysema, brochospastic disease, History of Sinus Bradycardia, Second or third-degree atrioventricular block, Overt cardiac failure, Cardiogenic shock. Known hypersensitivity to any components. Do not use concomitantly with systemic beta-blockers, calcium antagonists, catecholamine-depleting drugs, digitalis, quinidine. Do not use in angle-closure glaucoma.

Bimatoprost

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Conjuctival hyperemia and edema, conjunctival hemorrhage, eye irritation, eye pain, eye pruritus, erythema of eyelid, eyelids pruritus, growth of eyelashes, hypertrichosis, instillation site irritation, punctate keratitis, skin hyperpigmentation, vision blurred, and visual acuity reduced. Iris pigmentation changes (brown), Eyelid skin darkening, Eyelash changes (increased length, thickness, pigmentation and number of lashes). When Bimatoprost is discontinued increased pigmentation of the iris is likely to be permanent, while pigmentation of the periobital tissue and eyelash changes have been reported to be reversible. Intraocular inflammation, Macular edema, Foreign body sensation, Punctate keratitis, Stinging, Blurred vision, Itching, Burning, Excessive tearing, Eyelid discomfort/pain, Dry eye, Eye pain, Eyelid margin crusting, Erythema of the eye lid, Photophobia, Asthma like symptoms, Dyspnea. Bacterial keratitis possible with multiple use container.	Patients less than 16 years, Lactation, Pregnancy, Child-bearing aged females. Potential for cross-sensitivity to any components. Caution in patients with active intraocular inflammation (trauma or infection), uveitis, aphakic patients, pseudophakic patients with torn posterior lens capsule, known risk factors for macular edema.

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Timolol + Brimonidine Tartrate + Dorzolamide

Timolol Maleate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Ocular burning/stinging on instillation, blurred vision, cataract, conjunctival injection, headache, hypertension, Infection, Itching, and decreased visual acuity, potentiation of respiratory reactions including asthma, asthenia/fatigue and chest pain, bradycardia, arrhythmia, hypotension, syncope heart block, cardiac arrest, pulmonary edema, raynaud's phenomenon, nausea, diarrhea, dyspepsia, anorexia, dry mouth, dizziness, somnolence, insomnia, depression, confusion, alopecia, bronchospasm, anaphylaxis, nasal congestion, potentiation of muscle weakness, masked hypoglycemia, masked thyrotoxicosis, ocular pain, ocular irritation (conjuctivitis, blepharitis, keratitis, ocular pain, discharge, crusting, foreign body sensation, tearing, dry eyes, ptosis), visual disturbances, and decreased libido, choroidal detachment after filtration procedures. Bacterial keratitis associated with the use of multiple-dose containers.	Patients Less than 12 Years, Lactation, Pregnancy, Bronchial Asthma, Severe COPD, chronic bronchitis, emphysema, brochospastic disease, History of Sinus Bradycardia, Second or third-degree atrioventricular block, Overt cardiac failure, Cardiogenic shock. Known hypersensitivity to any components. Do not use concomitantly with systemic beta-blockers, calcium antagonists, catecholamine-depleting drugs, digitalis, quinidine. Do not use in angle-closure glaucoma.

Brimonidine Tartrate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Oral dryness, Ocular hyperemia, Burning and stinging on instillation, Headache, Blurred vision, Foreign body sensation, Fatigue/drowsiness, Conjunctival follicles, Ocular allergic reactions, Ocular pruritis, Corneal staining/erosion, Photophobia, Eyelid edema, conjunctival edema, Ocular ache/pain, Ocular dryness, tearing, Upper respiratory symptoms, Dizziness, Blepharitis, Ocular irritation, gastrointestinal symptoms, asthenia, conjunctival blanching, abnormal vision and muscular pain. Lid crusting, Conjunctival hemorrhaging, Abnormal taste, Insomnia, Depression, Hypertension, Anxiety, Palpitations/arrhythmias, Nasal dryness and syncope, Bradycarida, Apnea, Hypotension, Nausea, Skin reactions. Bacterial keratitis associated with the use of multiple dose containers.	Infants and children less than 2 years of age, Lactation, Pregnancy. Potential for cross-sensitivity to any components. Concomitant MAOI, Tricyclic antidepressants, CNS depressants, antihypertensives or cardiac glycosides. Should be used with caution in patients with vascular insufficiency, severe cardiovascular disease.

Dorzolamide

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Ocular burning, stinging, or discomfort, immediately following ocular administration. Bitter taste, Superficial punctate keratitis, Ocular allergic reaction, Conjunctivitis and lid reactions, Blurred vision, Eye redness, Tearing, Dryness, Photophobia, Headache, Nausea, Asthenia/fatigue, and rarely Skin rashes, Urolithiasis, Iridocyclitis. Stevens-Johnson syndrome, dizziness, parasthesia, ocular pain, transient myopia, choroidal detachment following filtration surgery, eyelid crusting; dyspnea, epistaxis, dry mouth and throat irritations. Bacterial keratitis associated with the use of multiple-dose containers.	Neonates and Patients Less than 12 Years, Lactation, Pregnancy. Sulfonamide allergy or Hypersensitivity to any of the components. Patients with low endothelial cell counts, acute anglepclosure glaucoma. Concomitant use with oral carbonic anhydrase inhibitors, high-dose salicylate therapy, severe renal impairment.

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Timolol + Brimonidine Tartrate + Dorzolamide + Bimatoprost

Timolol Maleate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Ocular burning/stinging on instillation, blurred vision, cataract, conjunctival injection, headache, hypertension, Infection, Itching, and decreased visual acuity, potentiation of respiratory reactions including asthma, asthenia/fatigue and chest pain, bradycardia, arrhythmia, hypotension, syncope heart block, cardiac arrest, pulmonary edema, raynaud's phenomenon, nausea, diarrhea, dyspepsia, anorexia, dry mouth, dizziness, somnolence, insomnia, depression, confusion, alopecia, bronchospasm, anaphylaxis, nasal congestion, potentiation of muscle weakness, masked hypoglycemia, masked thyrotoxicosis, ocular pain, ocular irritation (conjuctivitis, blepharitis, keratitis, ocular pain, discharge, crusting, foreign body sensation, tearing, dry eyes, ptosis), visual disturbances, and decreased libido, choroidal detachment after filtration procedures. Bacterial keratitis associated with the use of multiple-dose containers.	Patients Less than 12 Years, Lactation, Pregnancy, Bronchial Asthma, Severe COPD, chronic bronchitis, emphysema, brochospastic disease, History of Sinus Bradycardia, Second or third-degree atrioventricular block, Overt cardiac failure, Cardiogenic shock. Known hypersensitivity to any components. Do not use concomitantly with systemic beta-blockers, calcium antagonists, catecholamine-depleting drugs, digitalis, quinidine. Do not use in angle-closure glaucoma.

Brimonidine Tartrate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Oral dryness, Ocular hyperemia, Burning and stinging on instillation, Headache, Blurred vision, Foreign body sensation, Fatigue/drowsiness, Conjunctival follicles, Ocular allergic reactions, Ocular pruritis, Corneal staining/erosion, Photophobia, Eyelid edema, conjunctival edema, Ocular ache/pain, Ocular dryness, tearing, Upper respiratory symptoms, Dizziness, Blepharitis, Ocular irritation, gastrointestinal symptoms, asthenia, conjunctival blanching, abnormal vision and muscular pain. Lid crusting, Conjunctival hemorrhaging, Abnormal taste, Insomnia, Depression, Hypertension, Anxiety, Palpitations/arrhythmias, Nasal dryness and syncope, Bradycarida, Apnea, Hypotension, Nausea, Skin reactions. Bacterial keratitis associated with the use of multiple dose containers.	Infants and children less than 2 years of age, Lactation, Pregnancy. Potential for cross-sensitivity to any components. Concomitant MAOI, Tricyclic antidepressants, CNS depressants, antihypertensives or cardiac glycosides. Should be used with caution in patients with vascular insufficiency, severe cardiovascular disease.

Dorzolamide

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Ocular burning, stinging, or discomfort, immediately following ocular administration. Bitter taste, Superficial punctate keratitis, Ocular allergic reaction, Conjunctivitis and lid reactions, Blurred vision, Eye redness, Tearing, Dryness, Photophobia, Headache, Nausea, Asthenia/fatigue, and rarely Skin rashes, Urolithiasis, Iridocyclitis. Stevens-Johnson syndrome, dizziness, parasthesia, ocular pain, transient myopia, choroidal detachment following filtration surgery, eyelid crusting; dyspnea, epistaxis, dry mouth and throat irritations. Bacterial keratitis associated with the use of multiple-dose containers.	Neonates and Patients Less than 12 Years, Lactation, Pregnancy. Sulfonamide allergy or Hypersensitivity to any of the components. Patients with low endothelial cell counts, acute anglepclosure glaucoma. Concomitant use with oral carbonic anhydrase inhibitors, high-dose salicylate therapy, severe renal impairment.

Bimatoprost

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Conjuctival hyperemia and edema, conjunctival hemorrhage, eye irritation, eye pain, eye pruritus, erythema of eyelid, eyelids pruritus, growth of eyelashes, hypertrichosis, instillation site irritation, punctate keratitis, skin hyperpigmentation, vision blurred, and visual acuity reduced. Iris pigmentation changes (brown), Eyelid skin darkening, Eyelash changes (increased length, thickness, pigmentation and number of lashes). When Bimatoprost is discontinued increased pigmentation of the iris is likely to be permanent, while pigmentation of the periobital tissue and eyelash changes have been reported to be reversible. Intraocular inflammation, Macular edema, Foreign body sensation, Punctate keratitis, Stinging, Blurred vision, Itching, Burning, Excessive tearing, Eyelid discomfort/pain, Dry eye, Eye pain, Eyelid margin crusting, Erythema of the eye lid, Photophobia, Asthma like symptoms, Dyspnea. Bacterial keratitis possible with multiple use container.	Patients less than 16 years, Lactation, Pregnancy, Child-bearing aged females. Potential for cross-sensitivity to any components. Caution in patients with active intraocular inflammation (trauma or infection), uveitis, aphakic patients, pseudophakic patients with torn posterior lens capsule, known risk factors for macular edema.

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Tropicamide + Phenylephrine HCl

Tropicamide

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Transient stinging, blurred vision, photophobia, superficial punctate keratitis, increased intraocular pressure, dryness of the mouth, tachycardia, headache, allergic reactions, nausea, vomiting, pallor, central nervous system disturbances and muscle rigidity. Bacterial keratitis associated with the use of multiple-dose containers.	Patients less than 12 years of age (may cause CNS disturbances which may be dangerous in pediatric patients), Lactation, Pregnancy. Known sensitivity to any components. Patients should be warned not to engage in potentially hazardous activities while pupils are dilated.

Phenylephrine HCl

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Eye pain and stinging on instillation, temporary blurred vision and photophobia, conjunctival sensitization. Cardiovascular effects are seen primarily in phenylephrine 10% ophthalmic so recommended to use 2.5% (our dose) effects include: increase in blood pressure, syncope, myocardial infarction tachycardia, arrhythmia and subarachnoid hemorrhage. Rebound Miosis. Bacterial keratitis associated with the use of multiple-dose containers.	Neonates and patients less than 1 year of age, Lactation, Pregnancy. Known hypersensitivities to any components. Concomitant use with Atropine may enhance the pressor effects and induce tachycardia. Potent inhalation anestheticc agents may potentiate cardiovascular depressant effects.

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Compound Formulation Active Pharmaceutical Ingredients and the Associated Adverse Effects and Potential Contraindications/Warnings and Precautions

Brimonidine Tartrate + Dorzolamide

Brimonidine Tartrate

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Oral dryness, Ocular hyperemia, Burning and stinging on instillation, Headache, Blurred vision, Foreign body sensation, Fatigue/drowsiness, Conjunctival follicles, Ocular allergic reactions, Ocular pruritis, Corneal staining/erosion, Photophobia, Eyelid edema, conjunctival edema, Ocular ache/pain, Ocular dryness, tearing, Upper respiratory symptoms, Dizziness, Blepharitis, Ocular irritation, gastrointestinal symptoms, asthenia, conjunctival blanching, abnormal vision and muscular pain. Lid crusting, Conjunctival hemorrhaging, Abnormal taste, Insomnia, Depression, Hypertension, Anxiety, Palpitations/arrhythmias, Nasal dryness and syncope, Bradycarida, Apnea, Hypotension, Nausea, Skin reactions. Bacterial keratitis associated with the use of multiple dose containers.	Infants and children less than 2 years of age, Lactation, Pregnancy. Potential for cross-sensitivity to any components. Concomitant MAOI, Tricyclic antidepressants, CNS depressants, antihypertensives or cardiac glycosides. Should be used with caution in patients with vascular insufficiency, severe cardiovascular disease.

Dorzolamide

Possible Adverse Reaction	Potential Contraindications / Warnings and Precautions
Ocular burning, stinging, or discomfort, immediately following ocular administration. Bitter taste, Superficial punctate keratitis, Ocular allergic reaction, Conjunctivitis and lid reactions, Blurred vision, Eye redness, Tearing, Dryness, Photophobia, Headache, Nausea, Asthenia/fatigue, and rarely Skin rashes, Urolithiasis, Iridocyclitis. Stevens-Johnson syndrome, dizziness, parasthesia, ocular pain, transient myopia, choroidal detachment following filtration surgery, eyelid crusting; dyspnea, epistaxis, dry mouth and throat irritations. Bacterial keratitis associated with the use of multiple-dose containers.	Neonates and Patients Less than 12 Years, Lactation, Pregnancy. Sulfonamide allergy or Hypersensitivity to any of the components. Patients with low endothelial cell counts, acute anglepclosure glaucoma. Concomitant use with oral carbonic anhydrase inhibitors, high-dose salicylate therapy, severe renal impairment.

*For professional use only. OSRX specializes in customizing compounded medications to meet unique patient and practitioner needs. Compounded drugs are not FDA-approved, which means they have not undergone FDA premarket review for safety, effectiveness, and quality. **View potential adverse events and contraindications at: www.osrxpharmaceuticals.com/osrx-api-aecontraindication**

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