

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

Prednisolone Phosphate + Moxifloxacin

Prednisolone Phosphate

Possible Adverse Reaction

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.

Potential Contraindications / Warnings and Precautions

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 |
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| 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, Bash and Bhinitis. | 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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