**Guest Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DOB** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Sex** M or F

**Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Ph #**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Allergies** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Medical Conditions­** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- |
| **PEPTIDE** | **STRENGTH** | **DOSAGE FORM** | **DIRECTIONS** | **QUANTITY** | **REFILLS** |
| Vasoactive intestinal polypeptide (VIP) | 50mcg/spray | Nasal Spray | Use 1 spray in one nostril \_\_\_\_\_ time(s) daily as directed (alternate nostrils) | 12ml  (12 ml = 120 sprays) |  |
| KPV | **Circle one:**  0.25mg  0.5mg | Oral capsule | Take \_\_\_\_\_ capsule(s)  by mouth \_\_\_\_\_\_ daily |  |  |
| Phys Pref DSIP\* | **Circle one:**  0.2mg  0.4mg | Sublingual Tablet | Six days out of the week, dissolve 1 tablet under the tongue daily 2-3 hours before bedtime on an empty stomach |  |  |
| Phys Pref GHK-Cu | **Circle one:**  2.5mg  5mg | Sublingual Tablet | Dissolve \_\_\_\_\_ tablet(s) under the tongue \_\_\_\_\_ time(s) daily on an empty stomach |  |  |
| Phys Pref Dihexa | **Circle one:**  1mg  2mg  5mg | Oral capsule | Take \_\_\_\_\_ capsule(s) by mouth \_\_\_\_\_\_ daily on an empty stomach |  |  |
| Phys Pref Optimizer  (CJC-1295/Ipamorelin) | 0.5mg/1mg | Sublingual Tablet | Dissolve 1 tablet under the tongue at bedtime at least 90 minutes after the last meal of the day |  |  |
| Phys Pref Repair  (BPC-157) | 0.5mg | Sublingual Tablet | Dissolve \_\_\_\_\_ tablet(s) under the tongue \_\_\_\_\_ time(s) daily on an empty stomach |  |  |
| Phys Pref Repair  (BPC-157) | 0.5mg | Oral capsule | Take \_\_\_\_\_\_\_\_ capsule(s) by mouth \_\_\_\_\_\_ daily on an empty stomach |  |  |
| Phys Pref Function  (PT-141) | **Circle one:**  0.5mg  1mg | Sublingual Tablet | Dissolve \_\_\_\_\_\_\_\_\_ tablet(s) under the tongue \_\_\_\_\_\_\_\_\_ time(s) daily on an empty stomach |  |  |
| Phys Pref Brain  (Semax) | 0.5mg | Sublingual Tablet | Dissolve 1 tablet under the tongue \_\_\_\_\_\_ time(s) daily on an empty stomach |  |  |
| Phys Pref Immune (Thymosin Alpha-1) | 0.5mg | Sublingual Tablet | Dissolve \_\_\_\_\_ tablet(s) under the tongue \_\_\_\_\_ time(s) daily on an empty stomach |  |  |
| Phys Pref Rejuvenation  (Epitalon) | 0.5mg | Sublingual Tablet | Dissolve 1 tablet under the tongue once daily on an empty stomach |  |  |

**Printed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Physician Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Written \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DEA # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NPI # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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