



GLP-1 Order Form

Prescriber Information

Physician Name NPI

Clinic Name

Clinic Address Ste #

City State ZIP

Phone Email

I would like to learn more about opening an account with Olympia.

Patient Information

Patient Name DOB

Phone Email

Patient Address Apt #

City State ZIP

Medication Order

We will contact the patient to collect payment and confirm shipping information. If you would like to place a physician order, please call 407-250-4000 to sign up for an account.

Semaglutide 5mg/mL

3mL Dispense Volume QTY
15mg Total

Tirzepatide 25mg/mL

3mL Dispense Volume QTY
15mg Total

PeptideVite Capsules

60 Capsules Total QTY
30 Day Supply

Unit Conversion Chart		
5mg/mL		
Volume	Units	Milligrams
0.05mL	5	0.25
0.1mL	10	0.5
0.2mL	20	1.0
0.35mL	35	1.75
0.5mL	50	2.5

Unit Conversion Chart		
25mg/mL		
Volume	Units	Milligrams
0.1mL	10	2.5
0.2mL	20	5
0.3mL	30	7.5
0.4mL	40	10
0.5mL	50	12.5
0.6mL	60	15

Please include a 30 day supply of syringes.

Shipping Method: Ground 3rd Day 2nd Day Next Day

**Tirzepatide requires Next Day Air on Ice.

Directions for Use Refills

Physician Name NPI

Physician Signature Date

Please fax this form to 407-604-6434

4600 L B McLeod Road, Orlando, FL 32811