



GLP-1 Order Form

Prescriber Information

Physician Name NPI

Clinic Name

Clinic Address Ste #

City State Zip

Phone Email

Patient Information

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

Patient Name DOB

Phone Email

Patient Address Apt #

City State Zip

Medication Order

Semaglutide 1mg/mL QTY

5mL Dispense Volume
5mg Total

Unit Conversion Chart		
1mg/mL		
Volume	Units	Milligrams
0.25mL	25	0.25
0.50mL	50	0.5
1.0mL	100	1.0

For doses > 1mg/mL, please see Olympia's next visit size to allow patients at least a 30 day supply.

Tirzepatide 25mg/mL QTY

3mL Dispense Volume
75mg Total

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

Semaglutide 5mg/mL QTY

3mL Dispense Volume
15mg Total

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

My patient would like to learn more about OTC supplements that mitigate GLP-1 side effects. Please include a 30 day supply of syringes.

We will contact the patient to collect payment and confirm shipping information. All orders are shipped via UPS Next Day Air following payment. If you would like to place a bill to physician order, please call 407-250-4000 to sign up for an account.

Directions for Use Refills

Physician Name NPI

Physician Signature Date

Please fax this form to 407-604-6434

4600 L B McLeod Road, Orlando, Florida 32811