

# Intralipid Referral Form



Preferred Clinic (select one):

Referral Status: New Referral Updated Referral Referral Renewal

## PATIENT INFORMATION

DOB: Patient Name: Patient Phone:  
Patient Address: Patient Email:  
NKDA Allergies: Weight (lbs/kg): Height:  
ICD-10 Code (required): ICD-10 Description: Last Treatment Date: Last 4 Digits SSN:

## PROVIDER INFORMATION

Referral Coordinator Name: Referral Coordinator Email:  
Ordering Provider: Provider NPI:  
Referring Practice Name: Phone: Fax:  
Practice Address: City: State: Zip Code:  
Physician Preferred Method of Contact: Email: Fax: Phone:

## NURSING

Infusion to be administered per Vivo protocols.

## LABORATORY ORDERS

CBC at each dose every \_\_\_\_\_  
 CMP at each dose every \_\_\_\_\_  
 CRP at each dose every \_\_\_\_\_  
OTHER \_\_\_\_\_

## INTRALIPID THERAPY ADMINISTRATION (\$300/treatment)

**\*\*Medication to be obtained by patient\*\***

Intralipids 20% 100 ml in 0.9% Sodium Chloride (500 ml)  
Intralipids 20% 250 ml in 0.9% Sodium Chloride (750 ml)

## PREMEDICATIONS

acetaminophen (Tylenol) 500 mg 650 mg 1000 mg PO  
cetirizine (Zyrtec) 10mg PO  
loratadine (Claritin) 10mg PO  
diphenhydramine (Benadryl) 25 mg 50 mg PO IV  
methylprednisolone (Solu-Medrol) 40mg 125mg IV  
hydrocortisone (Solu-Cortef) 100mg IV  
Other: \_\_\_\_\_  
Dose: \_\_\_\_\_ Route: \_\_\_\_\_

Frequency: \_\_\_\_\_

## REQUIRED DOCUMENTATION

Patient Demographics

Progress Notes Supporting Dx

Medication List and H&P

\*Consider administering premedication for prophylaxis against infusion reactions and hypersensitivity reactions. \*\*Order is valid for one year unless otherwise noted\*\*

Provider Name (Print)

Provider Signature

Date

Email Referrals To: [referrals@vivoinfusion.com](mailto:referrals@vivoinfusion.com) OR Fax Below

Have a Question? Call (720) 902-4111

Colorado: 303-418-4679	Michigan: 833-957-2188	New York: 800-540-1852	Texas: 469-340-0044
Connecticut: 203-724-4838	Minnesota: 763-290-0903	Ohio: 216-400-0674	Virginia: 804-500-5941
Florida: 904-930-4211	Nevada: 702-489-5744	Oklahoma: 918-770-4421	Wisconsin: 414-600-5383
Massachusetts: 781-202-1629	New Jersey: 609-955-3711	Pennsylvania: 215-399-9244	

Revision Date 3/2025