|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** |  | | **DOB** |  |
| **Address** |  | | **Phone** |  |
| **Diagnosis** |  | | | |
| **Allergies** |  | | | |
| **Wt:** | **Diabetes? Y/N** | | | |
| **Treatment Plan/No. of treatments?** |  | **G6PD:** | **eGFR:** | |
| **Frequency of treatments** |  | | **Review Date** |  |
| **Special Indications or Instructions** |  | | | |

**Patient Details:**

**Doctor Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dr Name** |  | | |
| **Dr Signature** |  | **Date:** |  |
| **Address** |  | | |
| **Provider Number** |  | **Phone:** |  |

**PATIENT TREATMENT CHART:**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DATE:** | | | | | | | | | | | |
| **NUTRIENT** | **DOSE** | **TICK** | **DAY 1** | **DAY 2** | **DAY 3** | **DAY 4** | **DAY 5** | **DAY 6** | **DAY 7** | **DAY 8** | **DAY 9** |
| **VITAMIN C** |  |  |  |  |  |  |  |  |  |  |  |
| **IVB DOSE** | 2ml |  |  |  |  |  |  |  |  |  |  |
| **ZnCl** | 5.1mg |  |  |  |  |  |  |  |  |  |  |
| **MgS04** | 2.47g |  |  |  |  |  |  |  |  |  |  |
| **MgCl** | 480mg |  |  |  |  |  |  |  |  |  |  |
| **Glutathione** | 500mg |  |  |  |  |  |  |  |  |  |  |
| **Glutathione** | 1000mg |  |  |  |  |  |  |  |  |  |  |
| **Ferinject** | 500mg |  |  |  |  |  |  |  |  |  |  |
| **Ferinject** | 1g |  |  |  |  |  |  |  |  |  |  |
| **IM Injections** | | | | | | | | | | | |
| **IM VItamin D3** | 600,000iu |  |  |  |  |  |  |  |  |  |  |
| **IM Neocytamen** | 1mg |  |  |  |  |  |  |  |  |  |  |
| **IM B-Dose forte** | 2.5ml |  |  |  |  |  |  |  |  |  |  |
| **IM Methyl-B12** | 10mg |  |  |  |  |  |  |  |  |  |  |

**Notes:** The usual starting dose for IV vitamin C (IVC) is 15 gram

**Practice Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please send the completed form AND the patient’s medical history summary to** [**Clinic@niim.com.au**](mailto:Clinic@niim.com.au)

1. Patients having 30g IVC or higher doses need
   1. Normal renal function: eGFR >90
   2. Normal G6Pd assay
   3. **(PLEASE PROVIDE THESE VALUES)**
2. IV Vitamin B (IVB) does not contain vitamin B12
3. A basic Immune Support order is IVC 15g + IVB + Zinc with B12 IM.

**Note: Glutathione and vitamin D are now authority medications!**