



Batch No:  
 Order Priority: S/D O/N  
 Dispatch Date  
 (Stock bags/Syringes)

**Neonatal/Paediatric Parenteral Nutrition (PN) Lipid Stock Bag/Syringe Order Form  
 (August 2012- version 2)**

ITH Pharma DOES NOT take any clinical responsibility for prescribed PN.  
 Please complete the table below and fax with an accompanying cover note to ITH Pharma  
 on 020 8838 8271 allowing 72 hours for delivery.  
 Regimes will be formulated with a maximum possible expiry.  
 Please call to confirm receipt of order form on 020 8838 8273.

*Please PRINT clearly using black ink.*

<b>Order number</b>	
<b>Hospital name</b>	
<b>Regimen name</b>	
<b>Quantity required</b>	

		Requirements/kg	
Lipid (g) <i>(Inclusive of Vitlipid N Infant)</i>			
Calories (KCal)			
Solivito N (ml) <i>(Recon. with WFI/Vitlipid N Infant (delete))</i>			
Vitlipid N Infant (ml)			
Venous access (please state - Central (C) Peripheral (P) Either (E))			
Volume (ml)			
Duration (hours) (if applicable)			
Flow Rate (ml/hour) (if applicable)			
Overage		25ml	
Final container (please delete)		Bag	Syringe
<b>Ordering Pharmacist (print and sign) / date</b>			
<b>Contact telephone No.</b>	<b>Direct</b>		
	<b>Switchboard</b>		
	<b>Bleep number</b>		

Paperwork Requirements:    Details Sheet  
 Packaging Requirements:    Light protection folded behind

Prep By: Rao Thotkura    Checked By: David Hearn    Customer Checked By: \_\_\_\_\_