

Fax To: \_\_\_\_\_

Attention: \_\_\_\_\_

RealFoodBlends.com | (888) 484-9495

**PATIENT INFORMATION**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Address: \_\_\_\_\_ Sex: M F  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Responsible Party: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Primary Insurance: \_\_\_\_\_ Policy # \_\_\_\_\_  
 Secondary Insurance: \_\_\_\_\_ Policy # \_\_\_\_\_  
 Current Medical Supply Company: \_\_\_\_\_

**CLINICAL**

MD (Discharging / Referring): \_\_\_\_\_ Phone: \_\_\_\_\_

1. Reason(s) for Tube Feeding (including ICD-9 codes): \_\_\_\_\_

2. Reasons for Specialty Formula: \_\_\_\_\_

- Reflux       Constipation       Diarrhea       Nausea/Vomiting       Volume Intolerance
- Other: \_\_\_\_\_

3. Reasons for Pump Administration: \_\_\_\_\_

- Volume Intolerance       Diarrhea       Nausea/Vomiting
- Other: \_\_\_\_\_

**PHYSICIAN ORDER**

Dispensing Order / Detailed Written Order

- Real Food Blends - HCPCS B4149

Pouches Per Day: \_\_\_\_\_ Start Date: \_\_\_\_\_

- Orange Chicken, Carrots & Brown Rice (340 cal)       Beef, Potatoes & Spinach (330 cal)
- Salmon, Oats & Squash (330 cal)       Eggs, Apples & Oats (320 cal)
- Quinoa, Kale & Hemp (330 cal)       Turkey, Sweet Potatoes & Peaches (320 cal)

Free Water Flushes: \_\_\_\_\_

Additional Supplies Requested

- B9002 Enteral Nutrition Infusion Pump       B4034 Enteral Admin Kit, Syringe Fed, 30/mc (1 per day)
- E0776 IV Pole       B4035 Enteral Admin Kit, Pump Fed, 30/mc (1 per day)
- B4036 Enteral Admin Kit, Gravity Fed, 30/mc (1 per day)

Special Instructions: \_\_\_\_\_

Method of Administration (Circle One):      Syringe      Gravity      Pump      Oral

Days Per Week Administered: \_\_\_\_\_ Estimated Length of Need: \_\_\_\_\_

Physician's Name: \_\_\_\_\_

Physician's Signature: \_\_\_\_\_

UPIN / NPI # \_\_\_\_\_ Date: \_\_\_\_\_