



DAY-ONE HANDOUT

Semaglutide — Day One

A clean reference for your first dose: storage, technique, what to feel for, and what to call us about.



IMPACT HEALTH | PATIENT GUIDE

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STARTING SEMAGLUTIDE

Weekly GLP-1 injections: how to use, what to expect, and when to call.

QUICK START

- Once-weekly subQ on the same day; rotate abdomen, thigh, or upper arm.
- Start low and step up slowly to reduce nausea—stay on the schedule we set.
- Small, protein-forward meals; pause when full; hydrate steadily.

WHY IT WORKS

Semaglutide slows gastric emptying and boosts satiety signals, helping you feel full sooner and longer while supporting glycemic control.

HOW TO TAKE IT

Weekly injection

- Choose the same day weekly; rotate sites to avoid lumps.
- Clean skin, pinch, insert at 90° (or 45° if lean), inject slowly.
- Dispose of needles in a sharps container; never reuse needles.
- Store pens refrigerated; once in use, keep in original pen and protect from heat.

Missed dose

- If it's within 5 days of your scheduled day, take it; otherwise skip and resume the next scheduled dose.
- Do not double up doses.

GI comfort

- Eat slowly; smaller portions; favor lean protein, produce, and fiber.
- Avoid heavy/greasy meals and large late-night meals.
- Hydrate through the day; add electrolytes if needed.

WHAT TO EXPECT BY WEEK

Weeks 0–2

Appetite often softens; mild nausea or fullness is common —small meals help.

Weeks 2–8

Weight change typically begins; steady satiety; adjust titration per plan.

8+ weeks

Weight loss builds with habits; dosing may stabilize once goals/labs are met.

MONITORING

- Visits and titration: typically every 4–8 weeks during ramp, then space out.
- Labs as indicated (glycemic markers, lipids, metabolic panel) per your plan.
- Track weight, appetite, hydration, and any GI symptoms.

COMMON, USUALLY MILD

- Nausea, early fullness, reflux, constipation or loose stools.
- Injection-site redness or itch (should be mild/brief).

Call us immediately

- Severe or persistent abdominal pain (especially with nausea/vomiting).
- Cannot keep fluids down; signs of dehydration or dizziness.
- Yellowing of skin/eyes or severe right-upper abdominal pain.
- Allergic reaction: swelling, rash, trouble breathing.

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HABITS THAT AMPLIFY RESULTS

- Protein target: ~0.7–1.0 g/lb goal body weight (adjust per clinician).
- Fiber and hydration daily; walk after meals for glucose control.
- Resistance training 2–4x/week to preserve lean mass.
- Limit alcohol; space caffeine away from late meals.

FAQs

- **Travel?** Keep pens refrigerated when possible; use an ice pack in a carry-on; don't freeze; keep needles in sharps or travel bin.
- **Meals feel too small?** Slow down, add lean protein and veggies first; stop at comfortable fullness.
- **Constipation?** Hydrate, add fiber, walk daily; ask before adding OTC options.

This guide is educational and not a substitute for medical advice. Follow your clinician's instructions.

SIDE EFFECTS? QUESTIONS?

Most are normal. We will tell you which.

Mild nausea and reduced appetite are part of the protocol. Anything sharper, call — your clinician will guide you through it.

[Schedule a Consultation](#)

[Call 877-665-6767](tel:877-665-6767)

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