A COMPANION TO THE BOOK

The GLP-1 Toolkit

Printable Pack - All 7 Fill-In Tools

1 First-Visit Checklist

2 My Medication List

3 The 12-Week Roadmap

4 Weekly Dashboard

5 Side-Effect Log

6 Doctor-Visit Prep Sheet

7 My Maintenance Week

Print as many copies as you need. Fill them in. Bring them to your doctor.

From “Semaglutide & GLP-1 for Seniors” by Carol Bennett

These tools organize information; they are not medical advice. Always work with your own doctor.

Tool 1 - Before You Start: First-Visit Checklist

Take this to the visit where you start, or seriously consider, the medication.

Bring with you:

- [ ] My complete medication list (Tool 2, filled in)
- [ ] Notes on my health history - thyroid, pancreas, gallbladder, kidney, or eye conditions
- [ ] My questions, most important one first
- [ ] A family member or friend, for a second set of ears

Ask your doctor:

- [ ] Given my age and my other conditions, is this a good choice for me - and any reason it might not be?
- [ ] Do I have any reason not to take it, such as a personal or family history of medullary thyroid carcinoma (MTC), MEN 2, or a past serious allergic reaction?
- [ ] Which of my current medications might need adjusting now that I will be eating less?
- [ ] How will we increase the dose, and how slowly?
- [ ] What weight change is realistic for me, and over what sort of time?
- [ ] What side effects should I expect - and exactly when should I call rather than wait?
- [ ] Which lab tests will you want, and how often?
- [ ] When do you want to see me again, and how do I reach you between visits?
- [ ] If I cannot tolerate it, what are our options?
- [ ] Is cost or coverage something we should plan for?

Tool 2 - My Medication List

Bring this to every appointment and pharmacy visit. Update it the day anything changes. Include prescriptions, over-the-counter pills, vitamins, and supplements.

Medicine	Dose & how often	Why I take it	Prescriber

Allergies or medications that have caused me a bad reaction:

Tool 3 - The 12-Week Roadmap

Your doctor sets your dose and its schedule. This roadmap tracks your part around it. Never change your dose on your own.

Week 0 - Before your first dose

First-visit checklist done, medication list built, hydration target set with your doctor, check-in day chosen, starting weight noted

Done on (date): _____ *Notes:* _____

Weeks 1-2 - Starting (lowest dose)

Run your weekly check; eat protein first; keep fluids up; log any side effects. Mild nausea is common; the scale may barely move - normal

Done on (date): _____ *Notes:* _____

Weeks 3-4 - Starting

Habit taking hold; do your first strength self-test as a baseline. Watch the trend across weeks, not any single reading

Done on (date): _____ *Notes:* _____

Around a dose step-up

Give those days extra attention; smaller, plainer meals; stay on fluids. A brief return of early side effects usually settles

Done on (date): _____ *Notes:* _____

Weeks 5-8 - Building

Protein at each meal; resistance work 2-3x a week; monthly strength test. Watch for dizziness if you take blood pressure medicine

Done on (date): _____ *Notes:* _____

Weeks 9-12 - Into steady

Keep the rhythm; complete your first follow-up labs; run the 90-day review below

Done on (date): _____ *Notes:* _____

Checkpoints:

- [ ] 30 days - has the weekly check become a habit?
- [ ] 60 days - is a protein and movement routine in place and feeling normal?
- [ ] 90 days - real conversation with my doctor done, first follow-up labs in, strength holding?

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Tool 4 - Weekly Dashboard

The heart of the system. Print one per week and fill it in on the same day each week.

Week of: _____

Weight (same day, same time): _____

Strength - chair-stands in 30 seconds: _____

Symptoms this week, and how strong: _____

_____

Hydration - did I meet my target? _____

Medication changes or notes: _____

Non-scale wins this week: _____

_____

Questions for my doctor: _____

_____

_____

Ask three questions of every number:
Is it moving the way I expect? Is it moving too fast? Is anything new?
Watch the trend, not one morning.

Tool 5 - Side-Effect Log

Jot a line whenever something shows up. Patterns here are what help your doctor help you.

Date	What happened (symptom and how strong)	What I tried - did it help?

Get help now - not this log - for: severe belly pain, vomiting you cannot stop, signs of a serious allergic reaction, or severe low blood sugar.

Tool 6 - Doctor-Visit Prep Sheet

Fill this in the night before an appointment, from your dashboard pages.

My numbers

Weight: started at _____ now _____ about _____ per week _____

Strength (chair-stand count) trend: _____

Blood pressure readings, if I track them: _____

Symptoms to report

_____

_____

My top questions, most important first

1. _____
2. _____
3. _____

☐ I brought my medication list (Tool 2)

Tool 7 - My Maintenance Week

Once you and your doctor move into maintenance: the same system, tuned for holding.

This week I did:

- ☐ Weighed in once, the same careful way - and it is within my comfortable range
- ☐ Protein at each of my three meals
- ☐ Resistance routine two or three times this week
- ☐ Steady hydration and good plates
- ☐ Strength self-test (once a month)

My regain trigger

If my weight climbs by _____ pounds, I will call my doctor rather than wait. _____

Caught at a few pounds, regain is a small course correction.
That is the whole reason the weekly weigh-in never stops.

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