Protein-First Meal Planner

The medicine takes care of eating less. **Your job is eating enough**, *starting with protein.*

One palm portion = the size and thickness of your palm

Start every meal with one palm of protein, before anything else on the plate. Small appetite? Eat the protein first and stop when you're full. If your care team gave you a goal in grams, use the food label instead and write grams in the planner.

Your plate, by hand

Protein: your palm · **Vegetables**: your fist · **Starch** (rice, bread, potatoes): one cupped hand · **Fat** (oil, butter, nuts): your thumb.

Smaller, slower, lower-fat meals help nausea. Stop at the first sign of fullness.

Easy every day

- 2 eggs, any style
- A pot of thick (Greek) yogurt
- Cottage cheese, ½ cup
- A piece of chicken or turkey
- A fillet of fish, or a can of tuna or salmon
- Lean beef or pork, palm-sized

Plants

- A block of firm tofu
- A bowl of beans or lentils
- Edamame, 1 cup
- Tempeh, palm-sized

Gentle on queasy days

- Plain yogurt or kefir, sipped slowly
- A scrambled egg on dry toast
- Clear soup with shredded chicken
- A protein shake, sipped over 30 minutes
- String cheese with crackers
- Cold chicken or tofu: less smell than hot food

My 7-day protein plan · write the food, then the palms (or grams)

DAY	BREAKFAST	LUNCH	DINNER	SNACK	TOTAL
Mon					
Tue					
Wed					
Thu					
Fri					
Sat					
Sun					

My shopping list

_____ _____

_____ _____

My goal from my care team

Protein a day _____

Water a day _____

Protein first and strength training are advised for people on GLP-1 medicines to help limit muscle loss (joint nutrition advisory of ACLM, ASN, OMA and TOS, 2025). Kidney disease? Ask how much protein and fluid is right for you. Not eating more than a few bites a day, or feeling faint: call your doctor.

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Dose-Step Week Plan

Side effects often rise for a week or two after a dose change, **then ease**. *Plan the week before it starts.*

My dose changes on _____
New dose, as prescribed _____

Who to call with questions _____
Phone _____

Easy meals I'll have ready _____
_____

What usually helps

Nausea

· Small meals, eaten slowly; stop at the first sign of fullness
· Lower-fat, plain food; skip greasy and very sweet
· Sip fluids between meals rather than with them
· Don't lie down right after eating
· Fresh air, cold food, less cooking smell

Constipation

· Water through the day, a little more than feels natural
· Fiber slowly: fruit, vegetables, beans, oats
· A walk after meals
· Ask your pharmacist before taking a laxative

Diarrhea, heartburn

· Small sips of fluid often; add salty broth if it lasts
· Smaller, earlier dinners for heartburn
· Note it in your log and how long it lasts

The week after the change

· rate 0 none, 1 mild, 2 changes what I eat or do, 3 can't eat, drink or work

DAY	NAUSEA 0–3	BOWELS 0–3	ATE ENOUGH? ✓ / ½ / ×	FLUIDS CUPS	PROTEIN PALMS	WHAT HELPED · WHAT DIDN'T
Day 1						
Day 2						
Day 3						
Day 4						
Day 5						
Day 6						
Day 7						

▲ Call your doctor within a few days if

A side effect is still a 2 or 3 after a week, you can't eat enough for several days, or you take insulin or a sulfonylurea and have shaky or sweaty spells. Ask whether to stay on this dose longer before the next step.

■ Get seen now if

Severe belly pain that won't stop, often spreading to the back; vomiting or diarrhea so constant you can't keep fluids down, or you pass little urine; upper-right belly pain with fever or yellow eyes; sudden blurred vision or vision loss; swollen lips or face, a rash all over, trouble breathing.

Based on the US FDA prescribing information for injected semaglutide and tirzepatide (2026) and *I Lost Weight on a Shot. Now What?* (Your Body, Decoded, Vol. 14). Every dose and every change of dose comes from your prescriber. This page does not replace your medicine's leaflet.

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Wallet cards

Your medicine travels with you. **Let every team that treats you know.**

✂ Cut along the dashed line, fold along the dotted line so your details are on the back, and keep one card in your wallet and one in your bag. Cover with clear tape to make it last.

I TAKE A GLP-1 MEDICINE — PLEASE READ

It slows how fast my stomach empties. **Before anesthesia, sedation, surgery or an endoscopy**, please check how my team wants me to prepare.

☐ I also take insulin or a sulfonylurea: **low blood sugar is possible** .

Severe belly pain, vomiting I can't stop, or sudden blurred vision: I need to be seen now.

MY DETAILS

Name _____

Medicine · shot day _____

Started on _____

Doctor · phone _____

In an emergency call _____

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MY DETAILS

Name _____

Medicine · shot day _____

Started on _____

Doctor · phone _____

In an emergency call _____

Before surgery, an endoscopy or sedation

- ☐ Tell the team about the GLP-1 medicine when the procedure is booked, not on the day
- ☐ Ask whether to change anything before it: meals, liquids, the timing of the shot
- ☐ Mention insulin, a sulfonylurea or blood thinners too
- ☐ Bring this card and your medicine list

Travel with your pen

- ☐ Pen and spare needles in hand luggage, never in a checked bag
- ☐ How long the pen can stay out of the fridge: check the leaflet
- ☐ Crossing time zones? Ask your pharmacist how to keep your shot day
- ☐ A sharps container, or a travel one, for used needles

Procedure advice follows the 2024 multi-society guidance (ASA, AGA, ASMBS, ISPCOP, SAGES): most people keep taking the medicine, but some are asked to delay or to have only liquids beforehand. Your own team decides.

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