



Your Tirzepatide Guide

Plain-language answers to the questions patients ask most.

What is tirzepatide, and how does it work?

Tirzepatide is a once-weekly injection that copies **two** natural gut hormones, GLP-1 and GIP. Together they help you feel full sooner, quiet hunger and food cravings, slow how quickly your stomach empties, and help your body use insulin and manage blood sugar. Paired with nutritious eating and regular movement, most people lose weight steadily and gradually.

How do I take it?

One injection, once a week, on the same day each week. Any time of day works, with or without food.

- 1 Wash your hands and check your label.** Make sure the dose matches your written instructions.
- 2 Clean your skin** with an alcohol wipe and let it dry. Use a new, sterile syringe every time.
- 3 Prepare your exact dose** by following the instructions we gave you for your supply. Check for large air bubbles.
- 4 Inject just under the skin** of your stomach or thigh. Pinch the skin, insert the needle straight in, and push slowly. Never inject into a muscle or vein.
- 5 Switch spots each week**, and dispose of the syringe in a sharps container. Never reuse or share needles.

Your dose needs to be exact

Always follow the dose written on your instructions. Syringe markings (units or mL) are **not** the same as milligrams (mg). If anything seems unclear, **call us before you inject**.

My dose: _____

My injection day: _____

What to Expect

Why does my dose go up slowly?

You start low so your body can adjust, which helps limit side effects. Your provider raises the dose step by step based on how you feel. Everyone responds at their own pace, and steady, gradual weight loss is the healthiest kind.

What if I miss a dose?

If it has been **4 days (96 hours) or less** since your missed dose, take it as soon as you remember. If **more than 4 days** have passed, skip it and take your next dose on your regular day. **Never take two doses within 3 days of each other.** If you miss two or more weeks in a row, call us before you restart.

Want to change your injection day? Ask us first. Doses must be at least 3 days apart.

What side effects are common?

Most are mild to moderate and ease as your body adjusts. They are most likely after a dose increase.

Nausea

Diarrhea

Decreased appetite

Vomiting

Constipation

Indigestion

Stomach pain

Injection-site redness

How can I ease side effects?

Nausea: eat smaller meals, eat slowly, and skip greasy, fried, or very sweet foods.

Constipation: add fiber (vegetables, whole fruit, lentils) and drink plenty of water. Ask us about over-the-counter options.

Vomiting or diarrhea: sip water or electrolyte drinks all day and keep meals light.

Injection site: rotate spots each week, and use a cold compress before or after if the area is sore.

If nausea, vomiting, or diarrhea **does not go away**, call us. It can lead to dehydration.

Staying Safe

When should I call right away or get emergency help?

Serious side effects are uncommon, but please **stop your injections and contact us or seek care** if you notice any of these. For breathing trouble or swelling of the face or throat, call 911.

Severe stomach pain that will not go away, with or without vomiting. It may spread to your back.

Gallbladder trouble: upper stomach pain, fever, yellow skin or eyes, or pale, clay-colored stools.

Severe or ongoing stomach problems that do not improve.

Changes in your vision, especially if you have diabetes.

Allergic reaction: swelling of face, lips, tongue, or throat; trouble breathing; severe rash; fainting.

Dehydration: vomiting or diarrhea that will not stop, very dark urine, or feeling faint.

A lump or swelling in your neck, hoarseness, or trouble swallowing.

Low blood sugar (if you take diabetes medicine): shakiness, sweating, confusion, fast heartbeat.

Who should not take tirzepatide?

Please do not use it, and tell us right away, if:

- You or a family member has ever had **medullary thyroid cancer (MTC)**, or you have a condition called **MEN 2**. (In rat studies, medicines like tirzepatide caused thyroid tumors. It is not known if this happens in people.)
- You have ever had a **serious allergic reaction** to tirzepatide.
- You are **pregnant**, planning pregnancy, or **breastfeeding** (see page 4).
- You are already using **another GLP-1 medicine**, including semaglutide. Never combine them.

Also tell us about any **pancreas, gallbladder, kidney, or severe stomach problems** (such as slow stomach emptying), or **diabetic eye disease**.

Special Situations

What if I need surgery, a procedure, or anesthesia?

Tirzepatide slows stomach emptying, so food or liquid can stay in your stomach longer, even after fasting. In rare cases this raises the risk of stomach contents entering the lungs during anesthesia or sedation. **Tell every provider you see** (surgeons, anesthesia teams, dentists, and endoscopy teams) that you take it. They may ask you to skip a dose or follow a special fasting plan beforehand.

Does it affect birth control pills?

Yes. Tirzepatide can make **birth control pills less effective**. Use a backup method, such as condoms, for **4 weeks after you start** and for **4 weeks after each dose increase**. Ask us if you have questions about the best option for you.

What about pregnancy and breastfeeding?

It is not known whether tirzepatide can harm an unborn baby, and it may pass into breast milk. Tell us right away if you are pregnant, think you might be, or are planning to become pregnant, and talk with us before breastfeeding. We will make a plan together.

Can I take it with my other medicines?

Often yes, but please give us a complete list of everything you take, including prescriptions, over-the-counter products, vitamins, and supplements. Because tirzepatide slows stomach emptying, it can change how some medicines are absorbed. If you take **insulin or other diabetes medicines**, your doses may need to be adjusted to prevent low blood sugar.

Everyday Questions

How should I store my medicine and supplies?

Keep your medicine in the refrigerator, in its original box to protect it from light, unless your label says otherwise. Never freeze it, and do not use it if it was frozen or is past the discard date on your label. If it was left out of the fridge, call us before using it. Use a new syringe and needle every time, and never share them.

How can I get the best results?

Eat 3 to 4 small meals and stop as soon as you feel full.

Limit sugary drinks, sweets, and heavily processed foods.

Avoid eating within 3 to 4 hours of bedtime.

Prioritize protein and fiber: lean meats, fish, tofu, beans, and vegetables.

Drink about 8 glasses of water a day instead of juice or soda.

Keep moving: walk, swim, or cycle, and add strength training to protect muscle.

A steady loss of about **1 to 2 pounds a week** is typical. If you are losing faster than that, tell us. We may adjust your plan to protect your muscle.

How long will I be on it, and what if I stop?

Obesity is a long-term condition, and many people stay on treatment to keep their results. Weight often returns after stopping, so talk with us first and we will make a plan together. We will check in regularly on your progress.

Questions? Vela Health by Rapid is here to help.

Phone: **847-867-1256**

Email: **admin@velahealth.live**

For emergencies, call 911. You can also report side effects to the FDA at [fda.gov/medwatch](https://www.fda.gov/medwatch) or 1-800-FDA-1088.