

GLP-1

Wellness

Planner



Niche Passion Blogs

How to Use This Planner

This planner was designed to support you through every stage of your GLP-1 journey, whether you're just getting started or several months in.

The planner is not intended to replace qualified medical advice.

The planner is for your personal use. Do not sell or reuse elsewhere.

Start at the beginning. Fill out the Start Here section before anything else. Recording your starting point gives you something real to look back on when you need a reminder of how far you've come.

Track weekly. The weekly section is the heart of this planner. Each week has its own set of pages covering your medication, symptoms, food, movement, and wins. Print as many weekly sets as you need -- there's no limit to how long you can use this.

Check in monthly. At the end of each month, use the monthly check-in pages to zoom out. Patterns show up here that you won't always catch week to week.

Use the nutrition and side effect pages as references. You don't need to fill these out every day. Keep them handy and come back to them when you need guidance or want to log something specific.

Make it yours. There are no rules here. Skip pages that don't apply, double up on ones that do, and write in the margins. This is your journey.

Always consult your healthcare provider before making changes to your medication, diet, or exercise routine. This planner is not a substitute for medical advice, nor any form of professional advice.



My GLP-1 Journey

Fill this out on day one and keep it as your reference page throughout your journey.

My Medication Details

Medication name: _____
Prescribed by: _____
Pharmacy: _____
Start Date: _____
Starting dose: _____
Next scheduled dose increase: _____

My Goals

Primary reason for taking GLP-1: _____
What feeling my best looks like to me: _____
A habit I want to build during this journey: _____
My 30-day intention: _____
My 90-day intention: _____

My Support System

Doctor / prescriber contact: _____
Dietitian / nutritionist: _____
Coach or accountability partner: _____

Keep this page filled out and easy to find. You'll refer back to it more than you think.

Before I Begin

Take a few minutes to record your starting point. This page is not about judgment; it's about having something to look back on when you need proof of your progress.

Starting Stats

Date: _____

Weight: _____

Height: _____

BMI: _____

Measurements

Neck: _____

Chest: _____

Waist: _____

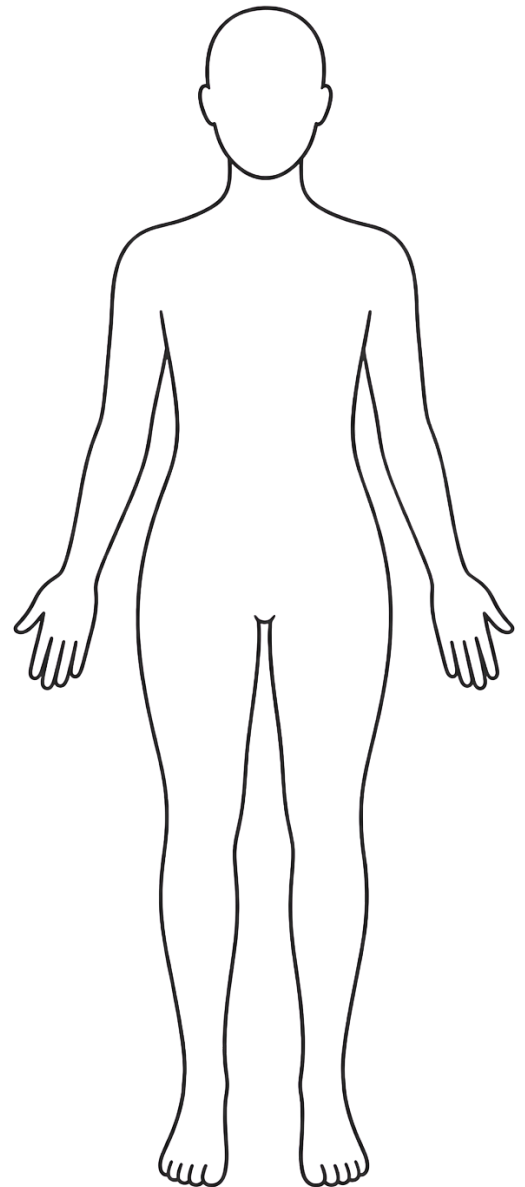
Hips: _____

Left arm: _____

Right arm: _____

Left thigh: _____

Right thigh: _____



How I Feel Today

Energy level (1-10): _____

Mood (1-10): _____

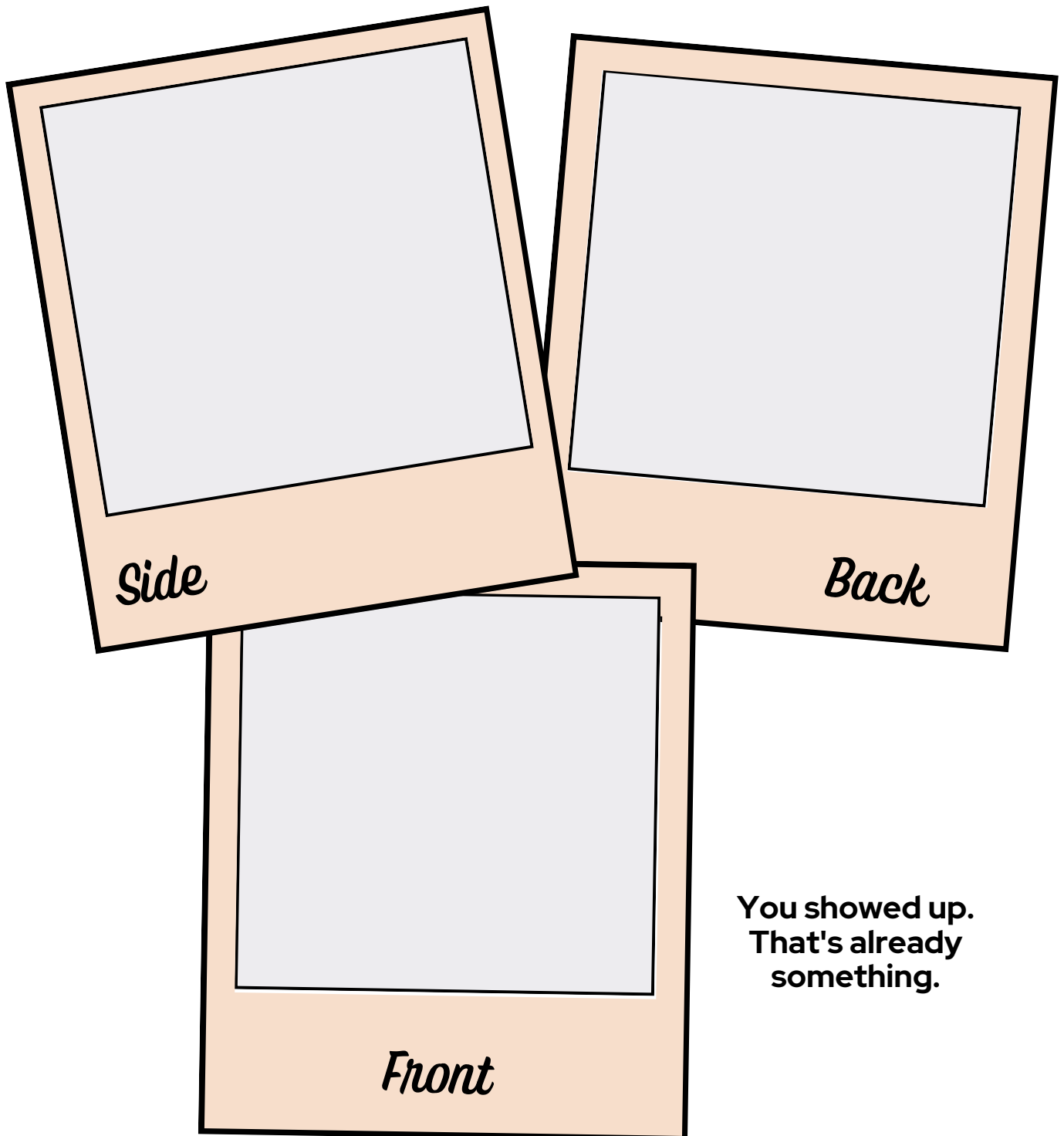
Sleep quality (1-10): _____

How I would describe how I feel in my body right now:

Starting Photos

Taking front, side, and back photos today gives you a visual record that the scale will never fully capture.

Photo date: _____



**You showed up.
That's already
something.**

Weekly Overview

Week #: _____ Week of: _____

My Medication This Week

Medication name: _____

Current dose: _____

Injection day: _____

Injection site (circle one): Abdomen | Thigh | Upper Arm

Did I take my dose this week? ☐ Yes ☐ No ☐ Delayed

If delayed or missed, why: _____

My Numbers This Week

Weight: _____

Change from last week: _____

Water intake goal: _____ oz/day Average per day: _____

Daily protein goal: _____ g/day Average per day: _____

My Focus This Week

One thing I want to be consistent about this week:

One thing I want to do better than last week:

How I'm Feeling Going Into This Week

Energy: 1 2 3 4 5 6 7 8 9 10

Motivation: 1 2 3 4 5 6 7 8 9 10

Overall mood: 1 2 3 4 5 6 7 8 9 10

Weekly Symptom Tracker

Week #: _____ Week of: _____

Track how your body is responding this week. Note severity on a scale of 1-5 (1 = mild, 5 = severe). Leave blank if not experienced.

Common GLP-1 Symptoms

Symptom	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Nausea							
Vomiting							
Constipation							
Diarrhea							
Fatigue							
Headache							
Dizziness							
Stomach pain							
Loss of appetite							
Heartburn / reflux							
Hair thinning							
Injection site reaction							

What Helped This Week

Did I Contact My Doctor This Week?

☐ Yes - Reason: _____

☐ No

Overall Symptom Severity This Week

Compared to last week, my symptoms were:

☐ Better ☐ About the same ☐ Worse

If you are experiencing severe or persistent symptoms, contact your healthcare provider.

Weekly Food + Hydration Log

Week #: _____ Week of: _____

Focus on protein and hydration first. Everything else is secondary.

Daily Hydration Tracker Goal oz per day: _____

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Oz consumed							
Goal met?							

Daily Protein Tracker Goal g per day: _____

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Grams consumed							
Goal met?							

Daily Meals

Jot down what you ate -- no need to log every calorie. Just stay aware.

	Breakfast	Lunch	Dinner	Snacks
Sun				
Mon				
Tue				
Wed				
Thu				
Fri				
Sat				

How Did I Eat This Week?

Compared to last week, my eating felt:

☐ More intentional ☐ About the same ☐ I struggled this week

Weekly Movement Log

Week #: _____ Week of: _____

Movement on GLP-1 isn't just about calories. It's about protecting your muscle mass and keeping your energy up. Any movement counts.

My movement goal this week: _____

Daily Movement Tracker

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Type of movement							
Duration (mins)							
Intensity (1-5)							
How I felt after							

Strength Training This Week

Resistance training is especially important on GLP-1 to prevent muscle loss. Track it separately here.

[illegible]

Weekly Movement Log

Steps

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Step count							
Goal met?							
Daily step goal:	_____						
Weekly total:	_____						

Rest + Recovery

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Days I intentionally rested:							
Avg. sleep hours per night							
Sleep quality (1-10):							

How Did Movement Feel This Week?

- ☐ Strong - I showed up consistently
- ☐ Moderate -- I moved but could have done more
- ☐ Low - life happened, I'll reset next week

What got in the way (if anything):

What I want to focus on next week:

Weekly Wins

Week #: _____ Week of: _____

This is your space to celebrate, reflect, and reset. Don't skip it.

Three things I'm proud of this week:

1. _____

2. _____

3. _____

One non-scale victory I noticed this week: _____

How I'm Feeling Going Into This Week

Energy: 1 2 3 4 5 6 7 8 9 10

Motivation: 1 2 3 4 5 6 7 8 9 10

Confidence: 1 2 3 4 5 6 7 8 9 10

Honest Reflection

Something that was harder than expected this week:

Something I want to do differently next week:

How I would describe this week in one word:

My intention for next week: _____

Notes

Use this however you need -- jot down observations, questions for your doctor, things you want to remember, or anything that doesn't fit elsewhere.

[illegible]

Monthly Weight + Measurements Tracker

Month: _____

Weight

Week	Date	Weight	Changes From Last Week
Week 1			
Week 2			
Week 3			
Week 4			
Month End			

Starting weight this month: _____

Ending weight this month: _____

Total change this month: _____

Total change since I started: _____

Measurements

	Start of Month	End of Month	Change
Neck:	_____	_____	_____
Chest:	_____	_____	_____
Waist:	_____	_____	_____
Hips:	_____	_____	_____
Left arm:	_____	_____	_____
Right arm:	_____	_____	_____
Left thigh:	_____	_____	_____
Right thigh:	_____	_____	_____

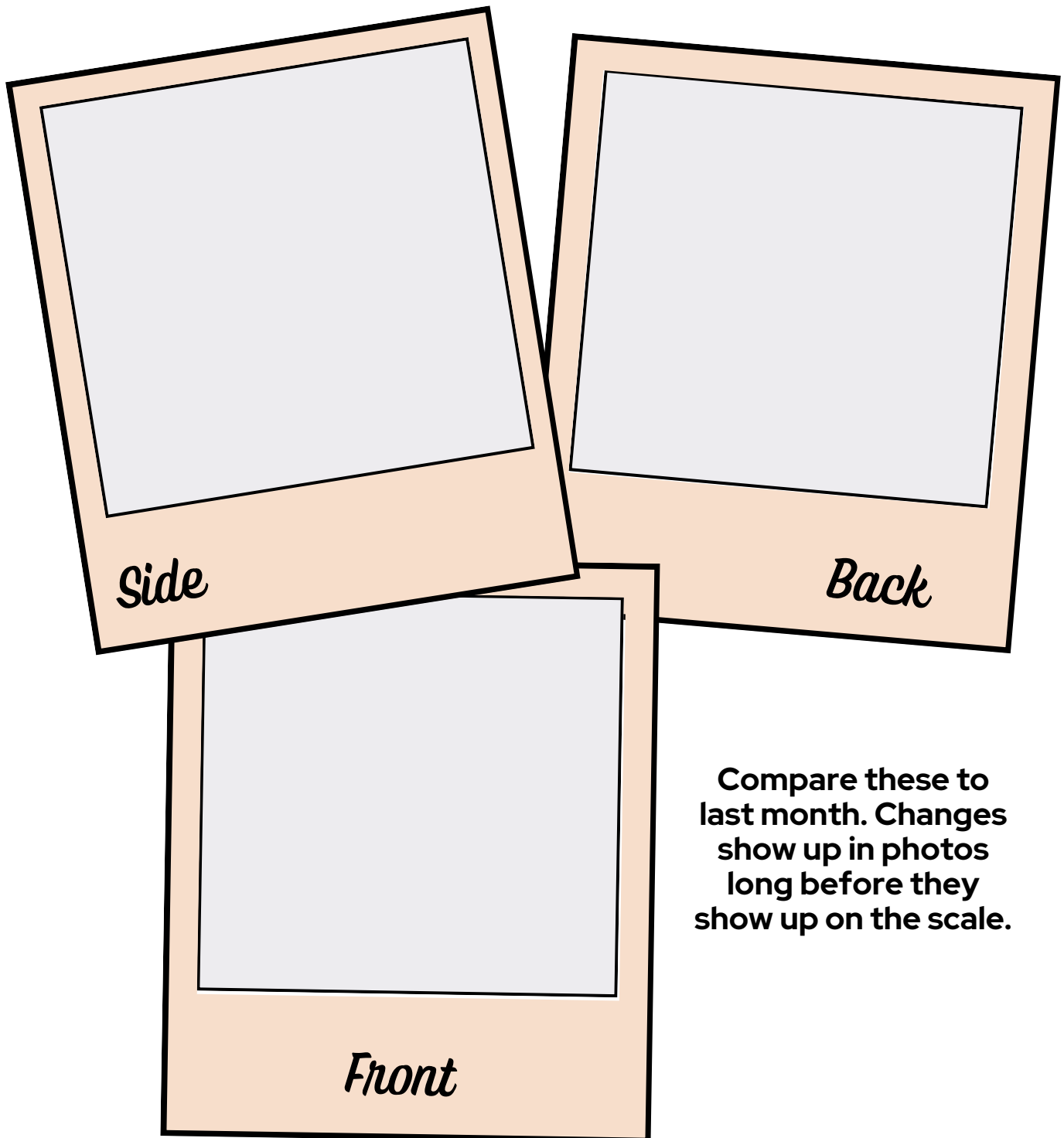
How My Body Feels This Month Compared to Last Month

☐ Noticeably better ☐ Somewhat better ☐ About the same

Monthly Photo Check-In

Taking front, side, and back photos today gives you a visual record that the scale will never fully capture.

Photo date: _____



Compare these to last month. Changes show up in photos long before they show up on the scale.

Monthly Non-Scale Victories

Month: _____

The scale is one data point. This page is for everything else that matters.

Physical NSVs

How is your body performing and feeling differently?

- ☐ Clothes fit differently
- ☐ Moved more easily or with less pain
- ☐ Slept better
- ☐ Had more energy throughout the day
- ☐ Kept up with activities I used to struggle with
- ☐ Noticed changes in my face, skin, or hair
- ☐ Reduced or eliminated a medication (with doctor guidance)
- ☐ Blood pressure, blood sugar, or cholesterol improved
- ☐ Other _____

Mental + Emotional NSVs

How is your relationship with food, your body, and yourself shifting?

- ☐ Made a food choice I'm proud of
- ☐ Stopped eating when I was full without guilt
- ☐ Didn't use food to cope with stress or emotions
- ☐ Felt more confident in my body
- ☐ Set a boundary around food or my health
- ☐ Showed up for myself even on a hard day
- ☐ Let go of all-or-nothing thinking
- ☐ Other _____

Social + Lifestyle NSVs

How is your life opening up?

- ☐ Said yes to something I would have avoided before
- ☐ Felt comfortable in a social situation involving food
- ☐ Kept up with family or friends more easily
- ☐ Tried something new (a class, activity, or experience)
- ☐ Felt present instead of preoccupied with my body
- ☐ Other

My Biggest NSV This Month

A Note to Myself About This Month

[illegible]

Mental Health Check-In

Month: _____

GLP-1 medications can affect mood, appetite, and emotional patterns. This page helps you stay connected to how you're feeling beyond the physical.

My Mood This Month

Rate each on a scale of 1-10 (1 = very low, 10 = very high):

	Week 1	Week 2	Week 3	Week 4
Overall mood				
Anxiety level				
Energy level				
Motivation				
Self-confidence				
Stress level				

My Relationship With Food This Month

GLP-1 changes hunger and appetite significantly. Check in with how that's affecting you.

How would you describe your appetite this month?

- ☐ Significantly reduced ☐ Somewhat reduced
☐ About the same ☐ Irregular

Did reduced appetite cause any stress or anxiety around eating?

- ☐ Yes ☐ Sometimes ☐ No

Did I eat enough to support my body this month?

- ☐ Most days ☐ Some days ☐ I struggled with this

Emotional Check-In

Something that supported my mental health this month:

Something that challenged my mental health this month:

How I took care of myself emotionally this month:

Support Check-In

Do I feel supported in my journey right now?

- ☐ Yes, I have good support around me
- ☐ Somewhat, I could use more
- ☐ No, I'm navigating this mostly alone

Who or what supported me most this month:

One Thing I Want to Protect My Mental Health Next Month

If you are experiencing significant changes in mood, depression, or anxiety, please reach out to your healthcare provider. You don't have to navigate this alone.

Monthly Reflection

Month: _____

Take 10 minutes at the end of the month. No rushing through this one.

Looking Back

What went well
this month?

What was harder
than expected?

What surprised
me this month?

One Thing I Learned This Month About...

My body

My habits

Myself

Adjustments Going Into Next Month

Habit to keep

Habit to drop

What to focus on

My Numbers This Month

Starting weight: _____

Ending weight: _____

Total lost /gained: _____

Current dose: _____

My Word for Next Month

Protein Goal Calculator + Daily Protein Tracker

Protein is your most important nutrient on GLP-1. It protects your muscle mass, keeps you fuller longer, and supports your energy. Use this page to set your goal and track it daily.

Calculate Your Protein Goal

A general starting point for GLP-1 users is 0.7 to 1 gram of protein per pound of body weight. Work with your healthcare provider or dietitian to dial in your personal target.

My current weight: _____ My protein goal: _____

Example: If you weigh 180 lbs, aim for 126 to 180 grams of protein daily.

My Top Protein Sources

Write in the foods you actually eat and enjoy. Reference this list when planning meals.

[illegible]

Daily Protein Tracker

Log your protein intake each day. Aim to hit your goal at least 5 out of 7 days.

Date	Breakfast	Lunch	Dinner	Snacks	Daily Total	Goal Met?

Weekly Protein Check-In

Days I hit my protein goal this week: _____ out of 7

What made it easier to hit my goal:

What made it harder:

Struggling to hit your protein goal? Try adding a protein shake, Greek yogurt, cottage cheese, or eggs to your day. Small portions with high protein density are your best friends on GLP-1.

High-Protein Food Reference List

On GLP-1 your appetite is reduced, so every bite needs to work harder. Keep this page handy when planning meals or grocery shopping.

Animal Proteins

Food	Serving Size	Approx. Protein
<i>Chicken breast (cooked)</i>	<i>3 oz</i>	<i>26g</i>
<i>Turkey breast (cooked)</i>	<i>3 oz</i>	<i>25g</i>
<i>Canned tuna</i>	<i>3 oz</i>	<i>22g</i>
<i>Salmon (cooked)</i>	<i>3 oz</i>	<i>22g</i>
<i>Shrimp (cooked)</i>	<i>3 oz</i>	<i>20g</i>
<i>Lean ground beef (93%)</i>	<i>3 oz</i>	<i>22g</i>
<i>Pork tenderloin (cooked)</i>	<i>3 oz</i>	<i>22g</i>
<i>Eggs</i>	<i>2 large</i>	<i>12g</i>
<i>Egg whites</i>	<i>2 large</i>	<i>11g</i>
<i>Canned sardines</i>	<i>3 oz</i>	<i>21g</i>

Dairy

Food	Serving Size	Approx. Protein
<i>Greek yogurt (plain, nonfat)</i>	<i>1 cup</i>	<i>17g</i>
<i>Cottage cheese (low fat)</i>	<i>½ cup</i>	<i>14g</i>
<i>Ricotta cheese (part skim)</i>	<i>½ cup</i>	<i>14g</i>
<i>String cheese</i>	<i>1 piece</i>	<i>7g</i>
<i>Milk (skim)</i>	<i>1 cup</i>	<i>8g</i>
<i>Parmesan cheese</i>	<i>1 oz</i>	<i>10g</i>

Plant-Based Proteins

Food	Serving Size	Approx. Protein
Edamame	½ cup	9g
Lentils (cooked)	½ cup	9g
Black beans (cooked)	½ cup	8g
Chickpeas (cooked)	½ cup	7g
Shrimp (cooked)	3 oz	20g
Tofu (firm)	3 oz	8g
Tempeh	3 oz	16g
Hemp seeds	3 tbsp	10g
Pumpkin seeds	1 oz	9g

Protein Supplements

Food	Serving Size	Approx. Protein
Whey protein powder	1 scoop	20-25g
Plant-based protein powder	1 scoop	15-20g
Collagen peptides	1 scoop	10g
Protein bar (varies by brand)	1 bar	10-20g
Premier Protein shake	1 bottle	30g

Quick High-Protein Snack Ideas

- Hard boiled eggs + string cheese
- Greek yogurt + hemp seeds
- Cottage cheese + sliced cucumber
- Tuna pouch + whole grain crackers
- Edamame + a sprinkle of sea salt
- Deli turkey roll-ups with cream cheese
- Protein shake blended with frozen berries

All protein values are approximate. Individual products and preparation methods may vary.

Foods to Focus On / Foods to Limit

This is not a diet plan. It's a practical guide to help you get the most out of your GLP-1 journey. Work with your healthcare provider or dietitian to personalize your approach.

Foods to Focus On

These foods support your goals, protect your muscle mass, and help you feel your best on GLP-1.

Lean Proteins

Chicken, turkey, fish, shrimp, eggs, Greek yogurt, cottage cheese, tofu, tempeh, legumes

Non-Starchy Vegetables

Leafy greens, broccoli, cauliflower, zucchini, cucumbers, peppers, mushrooms, asparagus, green beans, tomatoes

Healthy Fats

Avocado, olive oil, nuts, seeds, nut butters (in small amounts)

High-Fiber Foods

Lentils, beans, oats, berries, chia seeds, flaxseed, whole grains

Hydrating Foods

Watermelon, cucumber, celery, broth-based soups, herbal teas

Gut-Friendly Foods

Greek yogurt, kefir, sauerkraut, kimchi, miso

Foods to Limit

These foods are harder on your system while on GLP-1 and can worsen side effects like nausea, bloating, and fatigue.

High-Fat + Fried Foods

Fast food, fried chicken, greasy takeout, heavy cream sauces, full-fat processed meats

GLP-1 slows digestion. High-fat meals sit in your stomach longer and can intensify nausea.

Sugary Foods + Drinks

Soda, juice, candy, pastries, sweetened coffee drinks, energy drinks

Blood sugar spikes and crashes are harder to manage and can increase cravings.

Refined Carbohydrates

White bread, white rice, regular pasta, crackers, chips, most packaged snack foods

Low in protein and fiber, these foods don't support your goals and can cause energy crashes.

Carbonated Beverages

Sparkling water, soda, beer, champagne

Carbonation increases bloating and discomfort, which is already a common GLP-1 side effect.

This is for general informational purposes only and is not a substitute for personalized medical or nutritional advice.

A Few Practical Tips

Avoid Alcohol: Why? Alcohol sensitivity can increase on GLP-1. Even small amounts may feel stronger than before. Always check with your doctor.

Avoid Large Portions of Any Food Why? Your stomach empties more slowly on GLP-1. Overeating, even healthy foods, can cause significant nausea and discomfort.

- Eat slowly and stop at the first sign of fullness
- Prioritize protein at every meal before anything else
- Keep meals small & frequent if three larger meals feel like too much
- Stay hydrated between meals rather than drinking with meals
- If a food causes symptoms, note it in your weekly tracker and avoid it for a while

My Food Notes

[illegible]

Weekly Meal Planner

Week of: _____

Plan small, protein-first meals. You don't need to fill every slot because on GLP-1 some days are lighter than others. That's okay.

My Protein Goal This Week: _____ g/day

My Hydration Goal This Week: _____ oz/day

	Breakfast	Lunch	Dinner	Snacks
Sun				
Mon				
Tue				
Wed				
Thu				
Fri				
Sat				

This Week's Protein-First Meal Ideas

Jot down a few go-to meals you can rotate through when you don't feel like thinking about food.

Breakfast	Lunch	Dinner	Snacks

How Did Meal Planning Go This Week?

- ☐ Stuck to my plan most days
- ☐ Used it as a loose guide
- ☐ Didn't follow it but helped me think ahead
- ☐ I need a different approach next week

Notes

Grocery List

Week of: _____

Shop with protein first, then what you need for your meal plan.

Proteins

Vegetables

Fruits

Dairy

Pantry

Frozen

Protein Supplements + Drinks

Other

Reminders:

Common GLP-1 Side Effects

Side effects are common, especially in the first few weeks or after a dose increase. Most improve over time. This page is for reference – keep it handy.

Nausea

Why it happens: GLP-1 slows stomach emptying, which can trigger nausea especially after eating.

What helps:

- Eat smaller portions more slowly
- Avoid high-fat, fried, or spicy foods
- Stay upright for 30–60 minutes after eating
- Ginger tea, ginger chews, or peppermint tea
- Try eating cold/room temp foods if hot foods trigger nausea
- Take your injection at night so peak effects happen while you sleep

Constipation

Why it happens: Slowed digestion means slower movement through your digestive system.

What helps:

- Increase water intake significantly
- Add more fiber through vegetables, fruits, and legumes
- Move your body daily even if just a short walk
- Magnesium glycinate (check with your doctor first)
- Establish a consistent bathroom routine

This is for general informational purposes only. Always consult your healthcare provider about your specific symptoms and medication.

Diarrhea

Why it happens: Your digestive system is adjusting to the medication.

What helps:

- Avoid high-fat and greasy foods
- Stick to bland, easy-to-digest foods temporarily
- Stay hydrated to replace lost fluids
- Note which foods seem to trigger it and avoid them for now

Fatigue

Why it happens: Reduced calorie intake and your body adjusting to the medication can cause low energy.

What helps:

- Prioritize protein and iron-rich foods
- Stay hydrated; dehydration worsens fatigue significantly
- Keep movement gentle during high fatigue periods
- Protect your sleep routine
- Check in with your doctor if fatigue is severe or persistent

Hair Thinning

Why it happens: Rapid weight loss and reduced nutrient intake can trigger temporary hair shedding (telogen effluvium).

What helps:

- Hit your protein goals consistently - this is most important
- Consider a biotin supplement (check with your doctor)
- Be gentle with your hair; avoid heat and tight styles
- Know that this is usually temporary and resolves as your body stabilizes

Muscle Loss

Why it happens: When the body loses weight rapidly it can break down muscle along with fat.

What helps:

- Strength train at least 2-3 times per week
- Hit your daily protein goal every day
- Avoid very low calorie intake; undereating accelerates muscle loss
- Consider working with a dietitian to dial in your nutrition

Injection Site Reactions

Why it happens: Mild irritation, redness, or bruising at the injection site is common.

What helps:

- Rotate injection sites every week
- Let the medication reach room temperature before injecting
- Inject slowly and steadily
- Avoid injecting into the same spot repeatedly
- Contact your doctor if you notice significant swelling or lumps

When to Call Your Doctor

Contact your healthcare provider if you experience:

- Severe or persistent vomiting
- Severe abdominal pain that doesn't go away
- Signs of pancreatitis - upper abdominal pain radiating to the back
- Significant changes in mood or mental health
- Rapid heart rate
- Signs of low blood sugar if you also take insulin or other diabetes meds
- Any symptom that feels serious / is getting worse rather than better

Side Effect Log

Use this page to track symptoms over time. Patterns are easier to spot when they're written down and this log is valuable to bring to your doctor appointments.

How to Use This Log

Record the date, symptom, severity (1-5), how long it lasted, what you tried, and whether it helped. One row per symptom per day.

Date	Symptom	Severity (1-5)	Duration	What I Tried	Did It Help?

Bring this log to every doctor appointment. The more specific you can be about your symptoms, the better your provider can support you.

Symptom Patterns I've Noticed

Symptoms that seem to be getting better over time:

Symptoms that seem to be triggered by specific foods:

Symptoms that seem to be triggered by specific activities:

Symptoms that seem to be triggered by injection day or timing:

Symptoms that are persistent or getting worse:

What Has Helped Me Most Overall

Questions to Ask My Doctor

Don't leave your appointment wishing you had said something. Write your questions down before you go and bring this page with you.

Before You Start or at Your First Appointment

- ☐ Use these as a starting point; check off the ones you want to ask and add your own.
- ☐ What GLP-1 medication are you recommending for me and why?
- ☐ What is the starting dose and how will it increase over time?
- ☐ How long will I be on this medication?
- ☐ What results should I realistically expect and on what timeline?
- ☐ What side effects should I watch for and when should I call you?
- ☐ What should I do if I miss a dose?
- ☐ Do I need any lab work before starting?
- ☐ What dietary or lifestyle changes should I make before I start?
- ☐ Will my insurance cover this medication; what are my options if it doesn't?

Ongoing Appointment Questions

- ☐ Is my current dose working or should we adjust it?
- ☐ My side effects include _____, is this normal and what should I do?
- ☐ I've noticed _____, is that related to the medication?
- ☐ My weight loss has slowed, is that expected at this stage?
- ☐ I'm concerned about muscle loss, what do you recommend?
- ☐ Should I be taking any supplements on GLP-1?
- ☐ I'm experiencing hair thinning, what can I do?
- ☐ My mood has changed since starting, is that related?
- ☐ Can I drink alcohol on this medication?
- ☐ What do I need to know about storing my medication when I travel?

My Personal Questions for This Appointment

Add your own questions here before you go.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

Notes From This Appointment

Date: _____ Provider: _____

Current weight: _____ Current dose: _____

What we discussed: _____

Changes to my plan: _____

Next appointment: _____

You are your own best advocate. No question is too small to ask.

Weight Loss Milestone Tracker

Every pound is progress. This page is for celebrating the milestones that the weekly tracker doesn't always make room for.

My Starting Point

Start date: _____

Starting weight: _____

My goal weight: _____

Total to lose: _____

Milestone Tracker

Fill in your personal milestones below or use the suggested ones. Mark each one when you hit it.

Milestone	Target	Date Reached	How I Celebrated
First 5 lbs lost			
First 10 lbs lost			
First 15 lbs lost			
First 20 lbs lost			
First 25 lbs lost			
First 30 lbs lost			
Halfway to my goal			
Custom milestone: _____			
Custom milestone: _____			
Custom milestone: _____			
Goal reached			

Visual Progress Bar

*Shade in each segment as you hit each 5 lb milestone.
Watching this fill in is its own motivation.*



Milestone Moments

The milestone that meant the most to me so far:

How I felt when I hit it:

What hitting that milestone made possible:

How I Plan to Celebrate My Next Milestone

Plan it now so you have something to look forward to. Make it non-food if possible.

*The number on the scale is one measure of progress.
It is not the whole story.*

Non-Scale Victory Milestone Tracker

The scale doesn't measure confidence, energy, or the moment your favorite jeans fit again. This page does.

What is a Non-Scale Victory?

An NSV is any positive change that isn't measured by the scale. It's the proof that your body and your life are shifting in ways that matter, often before the numbers catch up.

Physical NSV Milestones

Mark the date when you experience each one. Add your own in the blank rows.

NSV	Date
<i>Clothes fitting differently</i>	
<i>Went down a clothing size</i>	
<i>Went down two clothing sizes</i>	
<i>Moved without pain or discomfort</i>	
<i>Climbed stairs without getting winded</i>	
<i>Walked further than I could before</i>	
<i>Slept through the night consistently</i>	
<i>Woke up with more energy</i>	
<i>Reduced or eliminated a medication</i>	
<i>Improved lab results</i>	
<i>Noticed changes in my face or body shape</i>	

Mental + Emotional NSV Milestones

NSV

Date

Stopped eating when I was full

Chose food intentionally instead of emotionally

Felt comfortable in my body in public

Looked in the mirror and felt good

Wore something I had been avoiding

Let go of all-or-nothing thinking

Felt in control around food for the first time

Stopped obsessing over the scale

Social + Lifestyle NSV Milestones

NSV

Date

Said yes to something I would have avoided before

Felt comfortable at a social event involving food

Kept up with my kids, grandkids, or pets

Traveled or was active on a trip

Tried a new physical activity

Felt present instead of preoccupied with my body

These victories are yours. No one can take them away.

Progress Photo Log + Reflection

Photos tell the story the scale can't. This page is your visual record of how far you've come.

How to Take Consistent Progress Photos

For the most accurate comparison photo to photo:

- Use the same location and background each time
- Use the same lighting - natural light works best
- Wear the same or similar fitted clothing
- Take photos at the same time of day
- Take front, side, and back shots every time

*Progress is not
always linear.
But it is always
happening.*

My Progress Photo Log

Date	Week / Month	Weight	What I Notice

Photo Reflections

Compare your photos over time. How do you feel, what has changed?

1 Month	3 Months	6 Months

A Note to My Future Self

Write this on day one. Read it when you need a reminder of why you started.

[illegible]

My GLP-1 Journey Summary

Fill this out when you reach a significant milestone; the end of your first 90 days, six months in, or when you hit your goal. Come back and update it as your journey continues.

Where I Started

Start date: _____ Starting weight: _____

Starting measurements:

Waist: _____ Hips: _____ Chest: _____ Arms: _____ Thighs: _____

How I felt in my body when I started: _____

Where I Am Now

Date: _____ Current weight: _____ Total lost: _____

Current measurements:

Waist: _____ Hips: _____ Chest: _____ Arms: _____ Thighs: _____

Total inches lost: _____ Current dose: _____

How I feel in my body now: _____

My Biggest Wins

Top 3 scale victories:

1. _____

2. _____

3. _____

Top 3 non-scale victories:

1. _____

2. _____

3. _____

You did this. Every tracked meal, every injection day, every hard week you pushed through. This is proof.

What's Next

Reaching a milestone is not the finish line. This page helps you think about what comes next so you don't lose momentum when the planner runs out.

Am I still on GLP-1 medication?

☐ Yes ☐ No ☐ Transitioning off

My Next Chapter

What does maintaining or continuing my progress look like for me?

What am I still working toward?

My Maintenance Goals

Nutrition	Movement	Mental Health	Medication

If I Hit a Rough Patch

The first thing I will do if I start to struggle:

The person I will reach out to: _____

The reminder I need to hear on a hard day:
