

How to Inject Peptides

In their solid “powder” form, commonly referred to as “lyophilized” (a fancy word for freeze dried), peptides can be stable at room temperature conditions for months to years. Once they are reconstituted with bacteriostatic water (dissolved back into a liquid), most peptides must be refrigerated to preserve their usable life span, which is 1-6 months.

The depth at which an injection should be administered varies depending on the peptide and the instructions from your healthcare provider. Most are subcutaneous (under the skin) and delivered with a short needle. However, some may need an intramuscular injection for delivery deep into the muscles.

Know the appropriate areas for injecting peptides. For subQ injections, the abdomen is one of the most used areas. You can also use the side and front of your thighs, the backs of your upper arms, or the cheeks of your buttock. You will want to rotate through different areas for injecting, so familiarize yourself with your options. Injecting into the same area over and over can cause lumps or fatty buildup in the area. Pick an appropriate body region and use that area a while but move around within that area with each injection. Do not inject yourself in an area that is already bruised, swollen, sore, or an open wound. Inject at least 2 inches away from your belly button, and at least 2 inches away from any scars. As with any injection procedure, infection at the site of injection is a possibility. Signs of infection at the injection site include severe pain, redness, swelling, warmth or drainage.

What You Need: Clean hands, alcohol swabs, your medication, syringe, clean, dry surface to work on

Injecting Yourself, Step by Step:

1. Always wash your hands with soap and warm water first.
2. Use an alcohol swab on top of the vial and the area you are going to inject. Let the alcohol air dry.
3. Always make sure you're using the correct medication, at the correct dose, at the correct time.
4. Note the date and dosage on your daily peptide diary. Add any remarks/improvements from the previous injection.
5. Use a new needle and syringe with every injection.
6. Draw back the plunger to fill the syringe with air. If you forget or choose to not use this step, you can still get the medication out of the vial.
7. Insert the needle into the vial and release the air into the vial.
8. Pull back on the plunger to withdraw the correct amount of medication. You will often want to pull slightly MORE than the amount you intend to administer.
9. Remove any air bubbles. Tap the syringe to push any bubbles to the top and gently depress the plunger to push the air bubbles out. Ensure that the plunger is at the correct required dose, pull syringe out of vial.
10. At the chosen injection site, take a big pinch of skin between your thumb and index finger and hold it. (Your thumb and forefinger should be about an inch and a half apart.) This pulls the fatty tissue away from the muscle and makes the injection easier.
11. Inject the needle into the pinched skin at a 45-degree angle. You should do this quickly, but without great force. If you have very little fat on your body, you may need to inject the needle at a lower angle to the skin.
12. Slowly push the plunger to inject the medication, ensuring the plunger is fully depressed. You should inject the entire amount of medication. Wait 3 to 5 seconds before withdrawing the needle.
13. Apply pressure to the site or rub the area. Bleeding should be very minor, if any. You may notice a little bruising later. It can be normal for some bruising and redness to appear by injection sites, especially if you nick a blood vessel. Just try to avoid that area next time to avoid further irritation.
14. Put the vial back in the refrigerator until next time.
15. Dispose of the needle properly. Insulin needles can be put in a Sharps container or in the trash with their cap back on. Ensure syringes are always out of the reach of children.
16. If you are having trouble getting the last little bit out of the vial, try adding a few extra ticks of BAC water to the vial, and then inject everything you can get out. Diluting the peptides will not affect their action.

How to Rehydrate Peptides

In their solid “powder” form, commonly referred to as “lyophilized” (a fancy word for freeze dried), peptides can be stable at room temperature conditions for months to years. Once they are reconstituted with bacteriostatic water (dissolved back into a liquid), most peptides must be refrigerated to preserve their usable life span, which is 1-6 months.

What You Need: Clean hands, alcohol swabs, your medication, syringe, clean, dry surface to work on

1. Always wash your hands with soap and warm water first.
2. Pop the top off the peptide vial and the bacteriostatic water vial. These can be thrown away.
3. Use an alcohol swab on top of the peptide vial and the bacteriostatic water vial. Let the alcohol air dry.
4. Use a new needle and syringe.
5. Draw back the plunger to fill the syringe with air, up to the dose of water you are pulling out. If you forget or choose to not use this step, you can still get the medication out of the vial.
6. Insert the needle into the bacteriostatic water and release the air into the vial.
7. Turn vial and needle upside down.
8. Pull back on the plunger to withdraw the correct amount of water.
9. Ensure that the plunger is at the correct mark, pull needle out of water vial.
10. Push the needle into the center of the peptide vial and slowly inject the water into the peptides. Do not shake the vial to rehydrate, but slowly turn the vial and let the water touch all the powdered area. It should rehydrate easily.
11. The peptides should now be viable for a month or two. Make note of when they were rehydrated so you can use them before they expire (they will gradually grow weaker as time goes by).
12. Your rehydration needle may be a larger size or capacity than the ones you will use to inject. It's ok to get a new needle to do your first injection.

Double Check Your Dosage – USE COMMON SENSE!

There are two ways of measuring the peptides you will be injecting. One is by dry weight, in **mg or mcg**. This is usually the amount listed on the vial if there is a label on the vial.

EXAMPLE: If you have a 5 mg vial, and your dose is 500 mcg (.5 mg), then there are 10 doses in a vial

$$5 \text{ mg} / .5 \text{ mg} = 10 \text{ doses}$$

However, once you rehydrate the vial for your use, you will actually dose in **CC or “ticks”**. The amount of Bacteriostatic water you choose to add to the vial will determine your dosage.

EXAMPLE: IF you add 1 CC (100 ticks) of water to that 5 mg vial which contains 10 doses, then each dose would be 10 ticks

$$100 \text{ ticks of Bac water} / 10 \text{ doses} = 10 \text{ ticks per dose}$$

OR

You can choose to add more water for a more accurate measurement. In the above example you could add 200 ticks instead of 100. Adding more water is useful if your dosage is 2 ticks or less, that amount is just small and hard to measure.

$$200 \text{ ticks of water} / 10 \text{ doses} = 20 \text{ ticks per dose}$$

Confused? Please watch the videos at the bottom of this page <https://www.vigeohealth.net/peptides>
Still confused? Call Dawn @ 801-834-1234 before you think you are going to do these steps incorrectly!

How to COMBINE multiple vials into just one:

BPC-157 and TB500 now come in separate vials with more doses. You should have one vial of 10 mg BPC-157, and either (one vial of 10 mg TB500) or (two 5 mg vials of TB500). Since we are using the same injection dosage for each peptide, and combining them, we want to rehydrate each vial with the same amount of water relative to the mg size of the vial.

1. Always wash your hands with soap and warm water first.
2. Pop the top off the peptide vial and bacteriostatic water vial. These can be thrown away.
3. Use an alcohol swab on top of the peptide vial and the bacteriostatic water vial. Let the alcohol air dry.
4. Use a new needle and syringe. You should have a 2 CC, 25-gauge syringe just for this step in your kit.
5. Draw back the plunger to fill the syringe with air. If you forget or choose to not use this step, you can still get the medication out of the vial.
6. Insert the needle into the bacteriostatic water vial and release the air into the vial.
7. Turn vial and needle upside down.
8. Rehydrate each vial using the correct amount of bacteriostatic water.
 - a. **10 mg BPC-157 – add 1 CC (100 ticks) of water.**
 - b. **10 mg TB500 – add 1 CC (100 ticks) of water.**
 - c. **5 mg vial of TB500 (you should have 2 of these) – add .5 CC (50 ticks) to each vial.**
 - d. **The combined amount from a. and (b. or c.) should add up to 2 CC or 200 ticks.**
9. Pull back on the plunger to withdraw the correct amount of bac water.
10. Ensure that the plunger is at the correct mark, pull needle out of water vial.
11. Push the needle into the center of the peptide vial and slowly inject the water into the vial. Do not shake the vial to rehydrate, but slowly turn the vial and let the water touch all the powdered area. It should rehydrate easily.
12. Repeat step 11 for each of your (2 or 3) vials, using **100 ticks for a 10 mg vial and 50 ticks for a 5 mg vial.**
13. The peptides should now be viable for about 2 months. Make note of when they were rehydrated (they will gradually grow weaker as time goes by).
14. Wait until your vials are fully rehydrated (let them sit for at least a few minutes) and liquid is clear.
15. Draw back the plunger to fill the syringe with air.
16. Insert the needle into the peptide vial and release the air into the vial.
17. Pull back on the plunger to withdraw ALL the liquid. Pull the needle halfway out at the end to get everything.
18. Inject all the liquid into the other peptide vial. Do this twice if you are using 5 mg vials of TB500.
19. You should now have (1) vial which contains 200 ticks of both BPC-157 and TB500.
20. Use a smaller 31-gauge needle for your first injection (not the 25 gauge, it will hurt!)
21. Put the vial back in the refrigerator until next time.
22. Dispose of the needle properly. Insulin needles can be put in a Sharps container or in the trash with their cap back on. Ensure syringes are always out of the reach of children.

Double Check Your Dosage – USE COMMON SENSE!

There are 20 doses of each peptide:	$10 \text{ mg} / .5 \text{ mg/dose} = 20 \text{ doses}$
You added 100 ticks of liquid to each 10 mg vial:	$100 \text{ ticks} / 20 \text{ doses} = 5 \text{ ticks per dose}$
Or you added 50 ticks to each 5 mg vial:	$(50 \text{ ticks} \times 2 / 10 \text{ doses} \times 2) = 5 \text{ ticks per dose}$

BUT

You combined (2) vials so your dosage is doubled: $200 \text{ ticks} / 20 \text{ doses} = 10 \text{ ticks per injection}$
Essentially you are getting 5 ticks of BPC-157 and 5 ticks of TB500, you just don't have to inject yourself twice!

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