

INew CLIENT COMPOUND SEMAGLUTIDE

Compound Semaglutide (**ENTER FULL MEDICATION NAME AND STRENGTH**) subcutaneous injection

Approved by: (enter doctor name)

Weight:

Blood Pressure:

BMI:

Pulse:

Client given Compound Semaglutide subcutaneous injection. Dosage (Units):

Pharmacy Name:

Medication Lot#

Medication Expiration Date:

Note:

WEEKLY VISIT COMPOUND SEMAGLUTIDE

Weight:

Client given Compound Semaglutide (**ENTER FULL MEDICATION NAME AND STRENGTH**) subcutaneous injection. Dosage (Units):

Pharmacy Name:

Medication Lot#:

Medication Expiration Date:

Side Effects: (check the below)

- Nausea
- Constipation
- Dizziness
- Diarrhea
- Headaches
- No Side Effects

Note: