

Injection Site Reference Guide

Subcutaneous & Intramuscular Peptide Administration

Subcutaneous (SC) Injection Sites

1. Abdomen (Most Common for Peptides)

- Best area: 2 inches around the navel (avoid 1 inch directly around navel)
- Pinch skin and inject at 45-90 degree angle depending on needle length
- Rotate injection sites to prevent lipodystrophy
- Avoid areas with visible veins, scars, or stretch marks
- Preferred for: Semaglutide, Tirzepatide, BPC-157, CJC-1295/Ipamorelin

2. Thigh (Front/Outer)

- Use the middle third of the outer thigh
- At least 4 inches above the knee and 4 inches below the hip
- Good for self-injection due to easy access and visibility
- Preferred for: TB-500, Growth hormone peptides

3. Upper Arm (Posterior)

- Use the fatty area on the back of the upper arm
- May require assistance for proper technique
- Good rotation site when abdomen and thighs need rest

4. Lower Back / Love Handle Area

- Pinch the fatty tissue above the hip on either side
- Good alternative for patients with limited abdominal fat

Injection Technique - Step by Step

- Step 1: Wash hands thoroughly with soap and water
- Step 2: Clean injection site with alcohol swab in circular motion
- Step 3: Allow alcohol to dry completely (30 seconds)
- Step 4: Pinch a fold of skin between thumb and forefinger
- Step 5: Insert needle at 45-90 degree angle in one smooth motion
- Step 6: Release the skin fold
- Step 7: Inject medication slowly and steadily
- Step 8: Wait 5-10 seconds before withdrawing needle
- Step 9: Withdraw needle and apply gentle pressure with gauze
- Step 10: Do NOT rub the injection site

Site Rotation Schedule

Systematic rotation prevents tissue damage and ensures consistent absorption:

Day	Morning	Evening	Alt Morning	Alt Evening
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Mon	L Abdomen	R Abdomen	L Thigh	R Thigh
Tue	R Abdomen	L Abdomen	R Thigh	L Thigh
Wed	L Thigh	R Thigh	L Abdomen	R Abdomen
Thu	R Thigh	L Thigh	R Abdomen	L Abdomen
Fri	L Abdomen	R Abdomen	L Arm	R Arm
Sat	R Abdomen	L Abdomen	R Arm	L Arm
Sun	Rest/Vary	Rest/Vary	Rest/Vary	Rest/Vary

Needle Selection Guide

Injection Type	Gauge	Length	Volume	Best For
SC - Standard	27-30G	1/2 inch	<1 mL	Most peptides, insulin syringes
SC - Thin skin	30-31G	5/16 inch	<0.5 mL	Low volume peptides, lean patients
SC - Auto-inject	27G	1/2 inch	0.5-1 mL	Semaglutide, Tirzepatide pens
IM - Standard	22-25G	1-1.5 in	1-3 mL	Testosterone, B12, some peptides
IM - Deltoid	23-25G	1 inch	1-2 mL	Smaller volume IM injections

Common Injection Issues & Solutions

Bruising

- Cause: Hitting a small blood vessel
- Prevention: Apply ice before injection; avoid visible veins
- Treatment: Cold compress for 10 minutes; usually resolves in 3-5 days

Lumps or Nodules

- Cause: Injecting too quickly or not rotating sites
- Prevention: Inject slowly; follow rotation schedule
- Treatment: Warm compress; massage gently after 24 hours

Pain or Stinging

- Cause: Cold medication, rapid injection, or dull needle
- Prevention: Allow medication to reach room temperature; use fresh needles
- Treatment: Ice the area; consider numbing cream for sensitive patients

Lipodystrophy (Fat Loss/Gain at Site)

- Cause: Repeated injections in the same location
- Prevention: Strict site rotation; space injections at least 1 inch apart
- Treatment: Avoid the affected area; may slowly resolve over months