

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
5 \$165	2	0.5	20	10
		0.75	30	6.5
		1.0	40	5

Typical Dose Range

400 to 600 mcg per day, administered subcutaneously, 5 times a week.

Administration Timing

Often taken in the morning on an empty stomach to optimize absorption..

Cycle Length

8-10 weeks - Recommended to incorporate an extended off cycle (4-8 weeks)

The provided units may be adjusted slightly for practical administration purposes. Minor variations in dosage are not expected to significantly impact the patient's response.

Important Notes

AOD-9604 (the most hydrophobic peptide) may form a gel-like consistency following reconstitution. This can occur due

to peptide concentration, pH, excipient type, or storage temperature and does not necessarily indicate degradation or loss of potency.

If gelling occurs, gently roll or invert the vial (do not shake) to redisperse the solution. Avoid vigorous agitation, as this can denature the peptide.

Discontinue use if visible particulates, discoloration, or cloudiness persist.

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$180	2	0.25	5	40
		0.5	10	20
		1	20	10
		1.5	30	6
		2	40	5

General Dose

250-500 mcg in the morning

Post OP or acute injury Dose:

1mg - 2 mg in the morning, split dose is also acceptable.

Cycle Length

Depends on the health status and response to treatment.

Useful Information

BPC-157 (Body Protection Compound-157) is a synthetic 15-amino acid fragment derived from a naturally occurring gastric protective peptide (BPC) found in human gastric juice.

It promotes healing by upregulating angiogenesis, fibroblast migration, and collagen synthesis, while modulating nitric oxide and growth factor pathways (including VEGF, FGF, and EGR-1).

BPC-157 exhibits broad regenerative effects in muscle, tendon, ligament, nerve, and gut tissue, largely via cytoprotective and anti-inflammatory mechanisms.



CJC-1295 (No DAC)

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
5	2	0.3	12	16
		0.4	16	12
		0.5	20	10
		0.3	6	33
10 \$189		0.4	8	25
		0.5	10	20

General Dose

300-500 mcg AM before workout in a fasted state, 5 days a week.

General Dose

300-500 PM is often taken at night because it aligns with the body's natural growth hormone (GH) release cycle. Growth hormone secretion is highest during deep sleep, particularly in the early sleep cycles. By administering CJC1295 at night, it can enhance the natural GH release, maximizing the peptide's benefits, which may include improved muscle recovery, fat metabolism, and support for tissue repair.

Cycle Length

8-10 weeks

Recommended to incorporate an extended off cycle (4-8 weeks)

Should Stack with Ipamorelin for greater benefits

Important Notes

Carbs and fat can stunt growth hormone releases. Best taken 30 minutes before eating or 2 hours after.



CJC-1295/Ipamorelin Blend

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
5/5 \$220	2	0.3	12	16
		0.4	16	12
		0.5	20	10

General Dose

300-500 mcg AM before workout in a fasted state, 5 days a week.

General Dose

300-500 PM is often taken at night because it aligns with the body's natural growth hormone (GH) release cycle. Growth hormone secretion is highest during deep sleep, particularly in the early sleep cycles. By administering CJC1295 at night, it can enhance the natural GH release, maximizing the peptide's benefits, which may include improved muscle recovery, fat metabolism, and support for tissue repair.

Cycle Length

8-10 weeks
Recommended to incorporate an extended off cycle (4-8 weeks)

Important Notes

Carbs and fat can stunt growth hormone releases. Best taken 30 minutes before eating or 2 hours after.

DSIP

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
5	2	0.125	5	40
		0.25	10	20

Standard Dose

100 to 200 micrograms (mcg) per day.

Timing

Administer 1 to 3 hours before bedtime to promote sleep onset.

Frequency:

DSIP is typically administered once per day, 30-60 minutes before bedtime, to maximize its sleep-enhancing effects

Important Notes

This peptide can cause the complete opposite reaction if dosed too high. Start very low and judge tolerance.



Epithalon

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10	1	5	50	2
		10	100	1
50 \$399		5	10	10
		1	100	5

General Dose

10 mg per day.

Administration

Subcutaneous injections, either as a single 10 mg dose at bedtime or divided into two 5 mg doses in the morning and at bedtime.

Duration

Every other day for 5 days.

Frequency

This cycle can be repeated up to twice a year, with intervals of 4 to 6 months between cycles.

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
50 \$129	3	1	6	50
		1.5	9	33
		2	12	25
100 \$205	3	1	3	100
		1.5	4.5	66
		2	6	50

General Dose

1 to 2 mg per day

Burning at the inject sight is very common, it has been reported that adding BPC157 to the same syringe at the recommended dose may lessen some of the irritation.

Important notes

If you have a known allergy to copper, using GHK-Cu (Copper Peptide) might not be safe without consulting a healthcare provider. Copper allergies can vary in severity, and reactions can range from mild skin irritation to more serious allergic responses

Hypotension: GHK-Cu can lower blood pressure; thus, higher doses may pose risks of hypotension.

Side Effects (Extremely Common)

- Redness, swelling, or bruising at the injection site.
- Mild discomfort or pain, sometimes radiating
- Allergic reactions (e.g. itching, rash) is caused by GHK-Cu histamine response



Glow (BPC-157 + TB-500 + GHK-CU)

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
50/10/10 \$359	3	2.5/.5/.5	15	20

- **GHK-Cu**
General Dose

2.5 mg per day in the morning

- **BPC-157**
General Dose

500 mcg per day in the morning

Cycle Length

Depends on the health status and response to treatment.

- **TB-500**
General Dose

500 mcg per day in the morning

Cycle Length

Depends on the health status and response to treatment.

- **Cycle Length**

Loading phase 5 days a week, 2 days off for 4-5 weeks
Maintenance 2 to 3 times a week

- **Side Effects (Extremely Common)**

Redness, swelling, or bruising at the injection site
Mild discomfort or pain, sometime radiating
Allergic reactions (e.g. itching, rash) is caused by GHK-Cu

Ipamorelin

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$150	2	0.3	6	33
		0.4	8	24
		0.5	10	20
		1	20	10

General Dose

300 mcg - 1 mg AM before workout in a fasted state, 5 days a week.

General Dose

300 mcg - 1mg PM is often taken at night because it aligns with the body's natural growth hormone (GH) release cycle. Growth hormone secretion is highest during deep sleep, particularly in the early sleep cycles. By administering Ipamorelin at night, it can enhance the natural GH release, maximizing the peptide's benefits, which may include improved muscle recovery, fat metabolism, and support for tissue repair.

Cycle Length

8-10 weeks

Recommended to incorporate an extended off cycle (4-8 weeks)
Higher dosage should be split into two times a day.

Important Notes

Carbs and fat can stunt growth hormone releases. Best taken 30 minutes before eating or 2 hours after.

Kisspeptin

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
5 \$145	3	0.1	6	50
		0.2	12	25
		0.3	18	16
		0.4	24	12
		0.5	30	10
		0.6	36	8
		0.7	42	7
		0.8	48	6
		0.9	54	5
		1	60	1

Useful Information

Kisspeptin-10 is a synthetic decapeptide fragment of the endogenous KISS1 protein, which plays a central role in the regulation of the hypothalamic–pituitary–gonadal (HPG) axis.

It binds to the GPR54 (KISS1R) receptor on GnRH neurons, stimulating gonadotropin-releasing hormone (GnRH) secretion. This cascade increases luteinizing hormone (LH) and follicle-stimulating hormone (FSH) levels, ultimately enhancing testosterone, estrogen, and fertility signaling.

- **Follicle Development and Egg Quality Ovarian Stimulation (IVFF/ART)**

General Dose

6.4-12.8 per kg body weight.

Frequency

Single or repeated subcutaneous (SubQ) injections daily.

Timing

Administered during the follicular phase (days 2-12) or according to ovarian stimulation protocols

Purpose

Enhances LH and FSH secretion to support follicle maturation.

- **Ovulation Induction**

Dose

A single injection of 1-3 mg subcutaneously.

Timing

Typically administered 36 hours before ovulation or egg retrieval to induce the LH surge.

Purpose

Replaces hCG to trigger ovulation in ART cycles.

- **Individual Response**

Patients may respond differently to kisspeptin therapy. Therefore, starting at the lower end of the dosage range and adjusting based on clinical response and hormone levels is advisable.

Improving Egg Quality (Natural Cycles)

Dose

0.3-2mg subcutaneously, once daily.

Timing

Administered during the follicular phase for 7-14 days, depending on response.

Purpose

Stimulates endogenous gonadotropins to improve follicular development in natural cycles.

- **Monitoring**

Regular monitoring of reproductive hormone levels (LH, FSH, estradiol, and testosterone) is recommended to assess efficacy and adjust dosing as necessary.



Klow (BPC-157 + TB-500 + GHK-CU+KPV)

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
50/10/10/10 \$399	3	2.5/.5/.5/.5	15	20

- **GHK-Cu**
General Dose

2.5 mg per day in the morning

- **BPC-157**
General Dose

500 mcg per day in the morning

Cycle Length

Depends on the health status and response to treatment.

- **TB-500**
General Dose

500 mcg per day in the morning

Cycle Length

Depends on the health status and response to treatment.

- **KPV**
General Dose

500 mcg per day in the morning

Cycle Length

Depends on the health status and response to treatment.

- **Cycle Length**

Loading phase 5 days a week, 2 days off for 4-5 weeks
Maintenance 2 to 3 times a week

KPV

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$180	2	0.25	5	40
		0.5	10	20
		0.75	15	13

General Dose

200 to 500 micrograms (mcg) per day

Cycle Length

Continue until the desired outcome is achieved.

Important Notes

Discontinue if skin irritation occurs or worsens.

Useful Information

KPV is a naturally occurring tripeptide (Lysine-Proline-Valine)

derived from the C-terminal region of alpha-melanocyte-stimulating hormone (α -MSH). It acts primarily through activation

of melanocortin-1 and melanocortin-3 receptors (MC1R / MC3R), suppressing key inflammatory pathways such as NF- κ B, TNF- α , IL-1 β , and IL-6.



L-Glutathione

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
600 \$219	3	100	50	3
		200	100	2
	2	300	100	1.5
	1	400	66	1
		500	83	1
		600	100	

- **Subcutaneous Injection**

Dosage

100 to 600 milligrams (mg) per injection 1 to 3 times per week, depending on therapeutic objectives and individual response.

Treatment Duration

Courses often last several weeks to months, based on therapeutic needs.

- **Intravenous (IV) Injection**

Dose

600 to 1,200 mg per session.

Frequency

Commonly administered once or twice a week.

Treatment Duration

Similar to sub-Q injections, treatment duration depends on individual health goals and response.

Important Notes

The provided units may be adjusted slightly for practical administration purposes. Minor variations in dosage are not expected to significantly impact the patient's response.

Melanotan 2

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$120	2	0.25	5	40
		0.5	10	20
		1	20	10
		2	40	5

- **Initial Loading Phase**

General Dose

0.25 to 0.5 milligrams (mg) per day.

Duration

5 to 10 days, or until the desired level of pigmentation is achieved.

- **Maintenance Phase**

Dosage

0.5 to 1 mg per week.

Administration

Can be divided into one or two injections per week to maintain pigmentation

Important Notes

It's important to start with a lower dose to assess how your body reacts, as Melanotan 2 can sometimes cause side effects such as nausea, flushing, and increased libido.

Unnatural color may occur in some individuals.



MOTS-C

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$169	1	5	50	2
		10	100	1

General Dose

5 to 10 milligrams (mg) per injection.

Administration Frequency

Typically administered 2 times per week.

Cycle Length

Commonly, a 4-week cycle is followed by a break period
*(4 vials required for full cycle regimen)

Important Notes

Emerging research indicates that MOTS-C may exhibit stability for only 10 minutes post-reconstitution. This observation warrants consideration until additional data provides further clarification

NAD+

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
1000	5	50	25	20
		100	50	10

- **Injections (Subcutaneous)**

General Dose

5 to 10 milligrams (mg) per session.

Administration Frequency

Varies by individual and treatment goals.

Anti-aging protocols often start with 1-2 injections weekly, with maintenance doses monthly or as needed after the initial phase.

For recovery purposes (e.g., chronic fatigue, neurodegenerative conditions), higher and more frequent doses may be administered.

- **Injections (IV Therapy)**

General Dose

250 mg to 1,000 mg per infusion.

Administration Frequency

Once weekly to once monthly depending on therapeutic goals (e.g., energy restoration, addiction recovery, anti-aging)

- **Side Effects**

Include but not limited to

Nausea, Flushing, Chest pressure, fatigue (day of) headache and low blood pressure.

PT-141

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$120	2	0.5	10	20
		1	20	10
		2	40	5
		3	60	3
		4	80	2.5

- **Dosage for Men**

Starting Dose

1 to 2 mg, administered subcutaneously but can be increased up to 4 mg but always start lower.

Administration Frequency

As needed, but not more than once within a 24-hour period and no more than eight times per month.

- **Dosage For Woman**

Starting Dose

500 mcg- 1 mg, administered subcutaneously at least 45 minutes before anticipated sexual activity.

Frequency

As needed, adhering to the same frequency limitations as men.

- **Effects**

Onset of Action

Effects typically begin within 30 to 60 minutes after administration.

Duration of Effect

The therapeutic effects can last between 2 to 6 hours.

Side Effects

Common side effects include nausea, flushing, headache, and injection site reactions. It's advisable to monitor blood pressure, as PT-141 can cause transient increases

Selank

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$120	2	0.2	5	50
		0.3	6	33
		0.4	8	25
		0.5	10	20
		0.6	12	16
		0.7	14	14
		0.8	16	12
		0.9	18	11
		1	20	10

- Useful Information

Mechanism of Action: Selank is a synthetic analogue of the endogenous tetrapeptide Tuftsin, a natural immune modulator. It functions as a neuropeptide and anxiolytic, modulating expression of brain-derived neurotrophic factor (BDNF) and influencing GABAergic and serotonergic signaling.

Selank helps normalize dopamine and serotonin turnover, reduces stress-induced inflammatory cytokines (IL-6, TNF- α), and enhances cognitive stability, focus, and emotional regulation without sedation or dependence.

Selank

- **Anxiolytic Use**

General Dose

400 mcg to 1 mg per day.

Administration

Typically divided into two doses-one in the morning and one in the early afternoon-to provide symptom relief while avoiding interference with sleep.

Maximum Dose

B2 mg/week.

- **Cognitive Enhancement**

Dose

200 to 400 mcg per day

Administration

Often divided into two doses, similar to the anxiolytic regimen.

Cycle Length

Cycles of 4 to 6 weeks are commonly followed to avoid building up tolerance. Taking 2 weeks off between cycles allows the body's sensitivities to reset.

- **Considerations**

Starting Dose

It is best to start at lower doses, like 200 mcg, and assess tolerance before increasing the dosage.

Individual Response

Dosage frequency and size should be tailored to the individual based on their needs and response to the compound.

Effects can vary substantially between users.

Semax

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$139	2	0.5	10	20
		0.6	12	16
		0.7	14	14
		0.8	16	12
		0.9	18	11
		1	20	10

- **Cognitive Enhancement**

General Dose

500 mcg to 1 mg per day.

Administration

Often divided into two doses.

- **Treatment of Ischemic Stroke**

General Dose

1 mg administered four times daily for up to 10 days.

- **Intranasal Spray**

This is the most common method, allowing the peptide to cross the blood-brain barrier efficiently. Effects can often be felt within 30 minutes due to the nasal administration.

- **Considerations**

Starting Dose

It is best to start at lower doses and assess tolerance before increasing the dosage.

Individual Response

Dosage frequency and size should be tailored to the individual based on their needs and response to the compound.

Effects can vary substantially between users.

Sermorelin

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10	2	.4	8	25

General Dose

400 mcg PM is often taken at night because it aligns with the body's natural growth hormone (GH) release cycle. Growth hormone secretion is highest during deep sleep, particularly in the early sleep cycles.

Cycle Length

8-10 weeks

Recommended to incorporate an extended off cycle (4-8 weeks)

Important Notes

Carbs and fat can stunt growth hormone releases. Best taken 30 minutes before eating or 2 hours after.

SS-31

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$179	1	2	20	5
		5	50	2
		10	100	1
25	2	2	16	12.5
		5	40	5
		10	80	2.5

- **Subcutaneous**

Research Dose

10 mg, 3 times a week.

Therapeutic Dose

2 mg, daily

- **Intravenous Infusion**

Dosage Range

0.01 mg/kg/h to 0.25 mg/kg/h over a 4-hour period

- **Cycle Length**

Cycle length depends on the health status and response to treatment. Please note treatment longer than 4 weeks has not been extensively studied in humans

Thymosin Alpha 1

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$239	2	1.6	32	6
10	2	1.6	20	10

Chronic Viral Infections (e.g.c Hepatitis B and C)

1.6 mg twice weekly for 6 to 12 months.

Cancer Support

1.6 - 3.2 mg administered 2 to 3 times weekly during treatment, often used alongside chemotherapy.

Immune Deficiency

1.6 mg twice weekly for 3 to 6 months, with reassessment after the initial course.

Acute Viral Infections

1.6 mg daily for 5 to 10 days, as used in some COVID-19 protocols.

Vaccine Adjuvant

1.6 mg administered once on the day of vaccination to potentially enhance vaccine response.

Useful Information

Thymosin Alpha-1 (TA-1 or Tα1) is a 28-amino acid peptide originally isolated from thymus tissue. It plays a central role in immune system regulation, promoting the differentiation and activation of T-cells, dendritic cells, and natural killer (NK) cells.



TESAMORELIN

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
10 \$249	2	1	20	10
		1.5	30	6
		2	40	5

General Dose

1-2 mg AM before workout in a fasted state, 5 days a week.

General Dose

1-2 mg PM is often taken at night because it aligns with the body's natural growth hormone (GH) release cycle. Growth hormone secretion is highest during deep sleep, particularly in the early sleep cycles. By administering Tesamorelin at night, it can enhance the natural GH release, maximizing the peptide's benefits, which may include improved muscle recovery, fat metabolism, and support for tissue repair.

Cycle Length

8-10 weeks

Higher dosage should be split into two times a day

Recommended to incorporate an extended off cycle (4-8 weeks)

Important Notes

Carbs and fat can stunt growth hormone releases. Best taken 30 minutes before eating or 2 hours after.

Tirzepatide

Acclimation Dose

1.25 mg once per week for two (2) weeks

Starting Dose

2.5 mg subcutaneously once per week after four (4) weeks For additional glycemic control increase dosage in 1 - 2 mg increments after at least 4 weeks on current dose, or weight loss stall.

Maximum Dose

20 mg subcutaneously once a week

Don't Exceed

a concentration that yields more than six doses per vial for individual patients, as this may compromise the stability of bacteriostatic water. This guideline is intended for clinical settings where lower dosages are administered across multiple uses.*

Clinicians are advised that rapid titration may not be necessary, as a slower, more gradual increase in dosage can allow for better monitoring of patient tolerance and response. This approach minimizes potential side effects and provides a safer experience for patients, especially for those new to peptide therapy.

Constipation Relief

Adding 200 mg of magnesium glycinate at night is recommended by some users to relieve constipation, a potential side effect.

The provided units may be adjusted slightly for practical administration purposes. Minor variations in dosage are not expected to significantly impact the patient's response.

Beyond Beauty Med Spa

PRICE LIST

Tirzepatide/B12 (17.2mg/ml)		Beyond Beauty Protocol	
Week	Dose	Price each dose	Price each dose
1 - 4	2.5 mg	\$ 60	\$ 240
5 - 8	3.4 mg	\$ 70	\$ 280
9 - 12	4.25 mg	\$ 80	\$ 320
13 - 16	5 mg	\$ 90	\$ 360
17 - 20	5.9 mg	\$ 100	\$ 400
21 - 24	6.8 mg	\$ 115	\$ 460
25 - 28	7.5 mg	\$ 130	\$ 520
29 - 32	8.5 mg	\$ 145	\$ 580
33 - 36	9.3 mg	\$ 160	\$ 640
37 - 40	10 mg	\$ 175	\$ 700

Individual Vial

2.5 ml (200u) Vial

\$600

4 ml (400u) Vial

\$1000

Lipo-C (Methionine / Choline Chloride / Carnitine / Dexpanthenol - 15/50/50/5 mg/ml)

Dose	Price each dose	Price Monthly	Price kit with 8
1 ml injection	\$ 30	\$ 110	\$ 220

NAD+ (Nicotinamide adenine dinucleotide)

Dose	Price each dose	Price Monthly	Price kit with 8
25 mg	\$ 30	\$ 110	\$ 220
50 mg	\$ 45	\$ 170	\$ 340
75 mg	\$ 60	\$ 230	\$ 460
100 mg	\$ 80	\$ 310	\$ 620

B12

Dose	Price each dose	Price Monthly	Price kit with 8
500 mg	\$ 15	\$ 50	\$ 100
1000 mg	\$ 30	\$ 110	\$ 220

Wolverine Stack (BPC-157+TB-500)

MG	BAC Water/ML	Dosage (MG)	Insulin Needle Units	Total Per Vial
5/5 \$219	2	0.5	20	10
		1	40	5
		1.5	60	3
		2	80	2.5
10/10 \$339	2	0.5	10	20
		1	20	10
		1.5	30	6
		2	40	5

Useful Information

Mechanism of Action:

The BPC-157 / TB-500 blend unites two complementary peptides that target distinct yet synergistic tissue-repair pathways:

- BPC-157 enhances angiogenesis, fibroblast migration, and collagen formation, reducing inflammation and protecting endothelial and gastrointestinal tissues.
- TB-500 (a fragment of Thymosin Beta-4) promotes actin polymerization, cell migration, and vascular growth accelerating tissue remodeling and recovery.



Wolverine Stack (BPC-157+TB-500)

- **BPC-157**

General Dose

500 mcg - 1 mg in the morning

Post OP or acute injury Dose

1 mg - 2 mg in the morning, split dose is also acceptable.

- TB-500

General Dose

200 to 400 mcg per day

Administration

1 - 2 mg in the morning, blend will be split in even doses throughout the week.

Cycle Length

Depends on the health status and response to treatment.

- **Dosage Comment**

- The blend is designed to be administered together in a single injection for balanced systemic and localized effects
- If individualized dosing or titration is desired, we recommend purchasing BPC-157 and TB-4 as separate peptides for precise control of ratios and timing.
- This is a 1:1 ratio and dosage can not be split.