

HYDROFUSE

Peptide Consult Prep Kit

Walk into your appointment knowing what to ask.



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Before your consult

Ten minutes of prep makes the visit twice as useful.

Peptides went from niche to everywhere fast. Some have decades of human data and FDA approval. Some have a handful of rat studies and a lot of Instagram posts. Most people walk into a consult unable to tell the two apart, and that's how they end up paying for the wrong thing.

This kit fixes that. It won't tell you what to take. That's your provider's job, and it should be. It makes sure you ask the right questions and bring the right information.

How to use this

1. Read the comparison chart and circle anything you want to ask about.
2. Fill out your goals worksheet and health snapshot. Keep them with you. Don't email them to anyone.
3. Bring the question list to your appointment and write down what you hear.
4. Check the red-flag page before you buy anything online, from anyone.

Use it with us too. If we can't answer these questions clearly, we haven't earned your trust either.

Want more detail on any peptide? The interactive version of this guide, with full profiles, pros, cons and side effects, lives at hydrofuse.co/peptides.html.

How to read the chart

Two things matter more than anything a seller tells you: whether a peptide is approved, and how strong the human evidence is.

FDA status

FDA-approved

Passed clinical trials and approved for at least one use. The FDA has reviewed how it's made.

Previously approved

Once approved, then discontinued by its maker for business reasons. Available through prescription compounding.

In clinical trials

Being tested in human trials. Not available by prescription outside a study.

Under FDA review

Not approved. FDA is reviewing whether pharmacies may compound it. No final rule yet.

Not approved

Not approved, with FDA safety concerns or no clear legal compounding path.

Evidence



Strong human evidence. Large randomized trials in people.



Limited human evidence. Small, mixed, or negative human studies.



Early: lab and animal. Mostly cells and rodents. Often doesn't carry over to people.

Three things that get confused in the headlines

1. **Removed from Category 2.** The FDA stopped flagging it as a significant safety risk. That isn't permission to compound it.
2. **Advisory panel vote.** Outside experts recommended the FDA allow compounding. The FDA still has to write and finalize a rule, which usually takes a year or more.
3. **FDA approval.** A specific product proved it works and is safe enough for a specific use. None of the steps above are approval.

The 15-peptide chart

The most-searched peptides as of September 2026. Circle the ones you want to ask about.

PEPTIDE	FDA STATUS	EVIDENCE	STUDIED FOR	HOW IT'S GIVEN	ONE THING TO KNOW
Semaglutide Ozempic · Wegovy · Rybelsus GLP-1	FDA-approved		Weight management, Blood sugar & metabolism	Weekly injection or daily tablet	Weight often returns after stopping
Tirzepatide Mounjaro · Zepbound GIP + GLP-1	FDA-approved		Weight management, Blood sugar & metabolism, Sleep	Weekly injection	Same regain risk after stopping as other GLP-1 drugs
Retatrutide LY3437943 · "Triple G" GIP + GLP-1 + glucagon	In clinical trials		Weight management, Blood sugar & metabolism	Weekly injection (in trials)	Not approved; no legal prescription source in the US
BPC-157 Body Protection Compound-157 Gastric peptide fragment	Under FDA review		Injury & tissue recovery, Gut health	Injection or oral (in studies)	Almost no controlled human trials
TB-500 Thymosin beta-4 fragment Thymosin β4 fragment	Under FDA review		Injury & tissue recovery, Skin & hair	Injection	No human studies of TB-500 itself
GHK-Cu Copper peptide Copper peptide	Under FDA review		Skin & hair, Injury & tissue recovery, Healthy aging	Topical serum; injection (not approved)	Skin studies are small and often industry-funded
Ipamorelin GH secretagogue	Not approved		Growth hormone & body composition, Sleep	Injection	No proven benefit for fat loss, muscle or anti-aging
CJC-1295 With DAC · Mod GRF 1-29 (no DAC) GHRH analog	Not approved		Growth hormone & body composition	Injection	Clinical development stopped in the 2000s

The 15-peptide chart, continued

PEPTIDE	FDA STATUS	EVIDENCE	STUDIED FOR	HOW IT'S GIVEN	ONE THING TO KNOW
Sermorelin Geref GHRH analog	Previously approved		Growth hormone & body composition, Sleep, Healthy aging	Daily injection	Benefits in adults aren't well proven
Tesamorelin Egrifta GHRH analog	FDA-approved		Weight management, Growth hormone & body composition, Blood sugar & metabolism	Daily injection	Approved only for HIV-related fat; other uses are off-label
MOTS-c Mitochondrial peptide	Under FDA review		Blood sugar & metabolism, Weight management, Healthy aging	Injection	No completed human efficacy trials
PT-141 Bremelanotide · Vyleesi Melanocortin agonist	FDA-approved		Sexual health	As-needed injection	Benefits in trials were modest
Thymosin Alpha-1 Thymalfasin · Zadaxin Immune peptide	Not approved		Immune support, Healthy aging	Injection	Not approved in the US
AOD-9604 Modified hGH fragment 176–191 GH fragment	Not approved		Weight management, Injury & tissue recovery	Injection	No meaningful weight loss in its main human trial
Epitalon Epithalon · AEDG Tetrapeptide	Under FDA review		Healthy aging, Sleep	Injection	Little independent replication

Status changes often. Several of these peptides had FDA status changes in 2026. Ask your provider what's current on the day of your visit.

Your goals

A provider can only help with what you tell them. Be specific.

What do you want help with?

Check all that apply.

- | | |
|---|--|
| ☐ Weight management | ☐ Blood sugar & metabolism |
| ☐ Injury & tissue recovery | ☐ Gut health |
| ☐ Skin & hair | ☐ Growth hormone & body composition |
| ☐ Sleep | ☐ Healthy aging |
| ☐ Immune support | ☐ Sexual health |

In your own words, what's going on?

What have you already tried, and how did it go?

What would a win look like in three months?

Peptides you want to ask about

[illegible]

- ☐ Thyroid cancer, especially medullary thyroid cancer, or MEN2 syndrome
- ☐ Pancreatitis, gallbladder problems, or kidney disease
- ☐ Pregnant, trying to conceive, or breastfeeding
- ☐ Diabetes, or taking insulin or other blood-sugar medication
- ☐ High blood pressure or heart disease
- ☐ Cancer history of any kind
- ☐ I compete in a drug-tested sport

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10 questions to ask

Ask every one. Write down what you hear. How they answer tells you as much as what they say.

1. Is this FDA-approved, compounded, or neither?

LISTEN FOR A clear category, said plainly. If it's compounded, they name the pharmacy.

2. Which pharmacy makes it, and is it licensed?

LISTEN FOR A named, state-licensed 503A pharmacy or FDA-registered 503B facility.

3. What does the research show for my specific goal?

LISTEN FOR Honest about the evidence, including what hasn't been studied.

4. What will the first two weeks feel like?

LISTEN FOR Specific side effects and what to do about each one.

5. Does it interact with anything on my medication list?

LISTEN FOR They read your list before answering.

6. What labs do you want before I start, and during?

LISTEN FOR A real plan, not "we'll see."

7. How will we know it's working, and when do we check?

LISTEN FOR A measure and a date.

8. What happens when I stop?

LISTEN FOR A straight answer about regain or rebound.

9. What's the total monthly cost, with visits and labs?

LISTEN FOR One number you don't have to calculate.

10. Who do I contact if something feels wrong after hours?

LISTEN FOR A name or a number, not a web form.

Gray-market red flags

Online “research peptides” are a booming business. Independent testing keeps finding wrong doses and contamination. Walk away if you see any of these.

“Research use only” or “not for human consumption” on the label

It isn't made or tested for people. That label is the seller telling you so.

No prescription, no consult, no questions

Anyone can buy it. That means no one checked whether you should.

They send you a dosing chart or calculator

Real dosing comes from a provider who knows your history and follows up.

No pharmacy name anywhere

You can't verify what you can't trace.

“FDA approved” next to BPC-157, TB-500 or retatrutide

None of them are FDA-approved. The claim alone tells you enough.

A price that seems too good to be true

Legitimate compounded medication costs money to make and test.

Payment by crypto, gift card or payment app only

Hard to dispute, hard to trace.

Ships from overseas in powder form to mix yourself

Unknown purity, unknown dose, and a sterility risk every time you mix.

What legitimate looks like: a licensed provider who reviews your history, a prescription, a named licensed pharmacy, a follow-up plan, and a clear price.

Plain-English glossary

The words you'll hear in a consult, and what they actually mean.

Peptide

A short chain of amino acids. Insulin and GLP-1 are peptides your body already makes.

GLP-1 / GIP

Gut hormones released after meals. They affect appetite, digestion and blood sugar.

Secretagogue

Something that makes a gland release a hormone. GH secretagogues prompt your own growth-hormone release.

Off-label

Prescribing an approved drug for something not on its label. Legal, and common, at a provider's judgment.

503A pharmacy

A state-licensed pharmacy that compounds for individual patients.

Category 1 / Category 2

FDA's interim lists for compounding ingredients under review. Category 2 means the FDA flagged significant safety concerns.

Phase 3 trial

The large, late-stage human trial a drug usually needs before approval.

WADA

The World Anti-Doping Agency. Its list decides what tested athletes can't use.

Agonist

A molecule that switches on a receptor. A GLP-1 agonist switches on GLP-1 receptors.

GH / IGF-1

Growth hormone, and the marker your liver makes in response to it. IGF-1 is what labs usually measure.

FDA-approved

A finished product that passed clinical trials for a specific use, dose and manufacturing process.

Compounded

Made by a licensed pharmacy for one patient with a prescription. Not FDA-approved as a finished product.

503B outsourcing facility

An FDA-registered facility that compounds in larger batches under stricter manufacturing rules.

PCAC

The Pharmacy Compounding Advisory Committee. Outside experts who advise the FDA. Their votes are recommendations, not approvals.

RCT

Randomized controlled trial. The strongest kind of study: one group gets the drug, a comparison group doesn't.

Research use only (RUO)

A label on products not approved for people. Common on gray-market peptides.

Notes from your visit

Provider name, what was recommended, next steps, and your follow-up date.

Provider

What we discussed

Next steps and follow-up date

Questions I still have

Bring this kit to us.

HydroFuse is a nurse-run wellness clinic in Rancho Cucamonga, powered by Orbit Infusion Solutions. Every weight-management program starts with a consult and clinical approval. We'll go through your worksheet with you and answer every question on page 8.

Book a consult at hydrofuse.co

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