

The Peptide Field Guide

RESEARCHGRADE - CATALOG & SOURCE REFERENCE

Every catalog product, source-described doses and schedules, and the references behind them.

Catalog checked: Oct 25, 2026 | Guide updated: Oct 24, 2026

Research reference. Dose fields describe cited studies or attributed source protocols; the evidence card describes its own source and does not validate adjacent secondary schedules; they are not personal prescriptions or product instructions. Evidence and formulation differ by source. Product links do not validate a protocol, and offer=PEPBOT does not establish a discount.

How to read this guide

Each product family and product variant is listed separately from its cited research. Protocol details preserve what the attributed source describes. They are not recommendations, product instructions, or evidence that a sold material matches the studied intervention. Missing source links are shown as unavailable rather than replaced with another URL.

Catalog scope: 50 product families and 81 product variants.

5-Amino-1MQ

Non-peptide research compounds

Research focus: Non-peptide research compounds

Product variants

AMQ_10 10 mg Vial vial	AMQ_50_CAP 50 mg Capsules 60 count capsule
----------------------------	--

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 50-100mg daily oral High dose: 100-200mg daily oral
Route	oral
Frequency	Morning
Duration	8-12 weeks on, 4 weeks off
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Adalank Nasal Spray

Additional research compounds

Research focus: Additional research compounds

Product variants

ADALANK_15_NS 15 mg Nasal Spray 15 mL nasal spray

Evidence context

Selected-study label: no compound-specific protocol identified in bounded searches

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Product Catalog.pdf (not publicly linked)

Source-described protocol records

Dosing-source gap · no compound-specific protocol identified in bounded searches

Dose as reported	No numeric regimen established by the retrieved source
Route	Not established for this product/form
Frequency	Not established
Duration	Not established in the cited record
Context	Current catalog identity and retrieved references do not yet establish a formulation-matched protocol.
Source notes	No route-matched human or preclinical source supporting this named product was retrieved. Nasal label alone does not establish route-specific evidence.

Protocol source: Product Catalog.pdf (not publicly linked)

Limitations and evidence boundaries

- Exact ingredients and ratio unknown
- No human or animal dose/frequency/duration found
- No route-matched nasal research source found

Adamax Nasal Spray

Additional research compounds

Research focus: Additional research compounds

Product variants

ADAMAX_15_NS | 15 mg Nasal Spray | 15 mL | nasal spray

Evidence context

Selected-study label: no compound-specific protocol identified in bounded searches

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Product Catalog.pdf (not publicly linked)

Source-described protocol records

Dosing-source gap · no compound-specific protocol identified in bounded searches

Dose as reported	No numeric regimen established by the retrieved source
Route	Not established for this product/form
Frequency	Not established
Duration	Not established in the cited record
Context	Current catalog identity and retrieved references do not yet establish a formulation-matched protocol.
Source notes	No exact-name dosing or composition evidence retrieved. Nasal route is present only as a catalog label; form-specific research route remains unverified.

Protocol source: Product Catalog.pdf (not publicly linked)

Limitations and evidence boundaries

- Exact composition unresolved
- No human or animal dose/frequency/duration found

- No route-matched nasal study found

AOD-9604

Metabolic research

Research focus: Metabolic research

Product variants

AOD_5 | 5 mg Vial | vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed AOD-9604 Dosing Guide (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 300mcg daily High dose: 500mcg daily
Route	Not stated in the compilation
Frequency	Morning, fasted
Duration	8-12 weeks on, 4 weeks off
Context	Source-described proposal in an unreviewed compilation. GLP-1 RECEPTOR AGONISTS
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed AOD-9604 Dosing Guide (not publicly linked)

Reconstitution notes as sourced

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed AOD-9604 Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Bacteriostatic Water

Supplies

Research focus: Supplies

Product variants

BAC_10 | 10 mL Diluent | supplies

Evidence context

Selected-study label: Supply identity

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Current public product catalog (source link unavailable)

Source-described protocol records

Diluent, not an active peptide · Supply identity

Dose as reported	No active-peptide dose. Solvent volume depends on the specific material/formulation.
Route	Not a stand-alone peptide regimen
Frequency	Not applicable
Duration	Not applicable
Context	Product catalog lists bacteriostatic water as a supply.
Source notes	The calculator performs concentration math only; it does not choose a diluent or establish sterility/stability.

Protocol source: Current public product catalog (source link unavailable)

Limitations and evidence boundaries

- Bacteriostatic water is a diluent, not a peptide or a treatment protocol.

BAM15

Non-peptide research compounds

Research focus: Non-peptide research compounds

Product variants

BAM15_50_CAP 50 mg Capsules 60 count capsule	
--	--

Evidence context

Selected-study label: preclinical primary study; mouse dietary admixture

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: [BAM15-mediated mitochondrial uncoupling protects against obesity and improves glycemic control](#)

Source-described protocol records

Animal-study dose only · preclinical primary study; mouse dietary admixture

Dose as reported	0.1% w/w in diet; estimated intake approximately 85 mg/kg/day in one mouse experiment
Route	oral via food admixture
Frequency	ad libitum access
Duration	3 weeks
Context	diet-induced obese male C57BL/6J mice
Source notes	The estimate is model- and intake-dependent. It is not a human dose and does not support the catalog capsule regimen.

Protocol source: [BAM15-mediated mitochondrial uncoupling protects against obesity and improves glycemic control](#)

Limitations and evidence boundaries

- No human administration/dose study identified
- Mouse food admixture cannot be translated to the public capsule product

BPC-157

Repair biology

Research focus: Tendon repair biology

Product variants

BPC_10 10 mg Vial vial	BPC_30_NS 30 mg Nasal Spray 30 mL 150 mcg per spray nasal spray
BPC_5 5 mg Vial vial	BPC_500_CAP 500 mcg Capsules 60 count capsule

Evidence context

Selected-study label: Animal + cell study

Selected study: A rat Achilles-tendon injury study and accompanying cell experiments reported improved healing measures and tendon-cell growth after BPC-157 exposure.

Source: [Gastric pentadecapeptide BPC 157 accelerates healing of transected rat Achilles tendon and in vitro stimulates tendocytes growth](#) · 2003

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Microdosing: 200-500mcg daily Standard: 500mcg-1mg daily High dose (injury): 4-10mg daily split into 2-3 doses Gut health: 500mcg-1mg daily
Route	Not stated in the compilation
Frequency	Night dosing aligned with GH pulse, or split doses morning/evening
Duration	2-4 weeks acute injury, 8-12 weeks chronic, 4 weeks maintenance, 2-4 weeks off
Context	Source-described proposal in an unreviewed compilation. RECOVERY & TISSUE REPAIR PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed BPC-157 Dosing Guide + Dr. Alex Tatum Research + Dr. Abud Bakri Podcast (not publicly linked)

Reconstitution notes as sourced

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed BPC-157 Dosing Guide + Dr. Alex Tatum Research + Dr. Abud Bakri Podcast (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- Rat injury and cell findings do not establish human benefit, safety, or effects of products sold under this name.
- A colitis/enema dose claim from the compilation is withheld pending verification against an original study. The tendon paper does not support it.

BPC-157 Nasal Spray

Repair biology | bpc-157

Research focus: Tendon repair biology

Product variants

BPC_15_NS 15 mg Nasal Spray 15 mL nasal spray	
---	--

Evidence context

Selected-study label: Animal + cell study

Selected study: A rat Achilles-tendon injury study and accompanying cell experiments reported improved healing measures and tendon-cell growth after BPC-157 exposure.

Source: [Gastric pentadecapeptide BPC 157 accelerates healing of transected rat Achilles tendon and in vitro stimulates tendocytes growth](#) · 2003

Source-described protocol records

Underlying-compound reference, not a nasal regimen · Unreviewed secondary compilation

Dose as reported	Microdosing: 200-500mcg daily Standard: 500mcg-1mg daily High dose (injury): 4-10mg daily split into 2-3 doses Gut health: 500mcg-1mg daily
Route	Not stated in the compilation
Frequency	Night dosing aligned with GH pulse, or split doses morning/evening
Duration	2-4 weeks acute injury, 8-12 weeks chronic, 4 weeks maintenance, 2-4 weeks off
Context	Source-described proposal in an unreviewed compilation. RECOVERY & TISSUE REPAIR PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The source does not establish a dose, absorption equivalence or per-spray directions for this nasal product.

Protocol source: Alpha BioMed BPC-157 Dosing Guide + Dr. Alex Tatum Research + Dr. Abud Bakri Podcast (not publicly linked)

Limitations and evidence boundaries

- Nasal-specific dose and pump-delivery equivalence are not established by the underlying-compound reference.
- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- Rat injury and cell findings do not establish human benefit, safety, or effects of products sold under this name.
- A colitis/enema dose claim from the compilation is withheld pending verification against an original study. The tendon paper does not support it.

Cagrilintide

Metabolic research

Research focus: Metabolic research

Product variants

CAGRI_10 10 mg Vial vial	CAGRI_5 5 mg Vial vial
------------------------------	----------------------------

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Cagrilintide Dosing Guide (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Starting: 0.6mg once weekly Titration: Increase by 0.6mg every 4 weeks Maintenance: 2.4mg once weekly
Route	Not stated in the compilation
Frequency	Once weekly
Duration	Ongoing
Context	Source-described proposal in an unreviewed compilation. GLP-1 RECEPTOR AGONISTS
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Cagrilintide Dosing Guide (not publicly linked)

Reconstitution notes as sourced

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed Cagrilintide Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

CJC-1295 (DAC)

Endocrine research

Research focus: Growth-hormone and IGF-I signaling

Product variants

CJC_DAC_2 | 2 mg Vial | vial

Evidence context

Selected-study label: Human RCT

Selected study: Randomized studies in healthy adults found sustained increases in growth hormone and IGF-I after CJC-1295; the study measured hormone levels, not clinical benefit.

Source: [Prolonged stimulation of growth hormone \(GH\) and insulin-like growth factor I secretion by CJC-1295, a long-acting analog of GH-releasing hormone, in healthy adults](#) · 2006

Source-described protocol records**Ascending-dose pharmacokinetic/pharmacodynamic trials · Human study, defined trial population**

Dose as reported	The abstract does not enumerate all dose arms; it identifies 30 or 60 micrograms/kg as doses particularly well tolerated. Do not infer that these were the only study doses.
Route	subcutaneous
Frequency	First study: single ascending doses. Second study: 2 or 3 doses administered weekly or biweekly; abstract does not provide a more exact schedule by dose.
Duration	Two trials with durations of 28 and 49 days
Context	Healthy adults aged 21-61; randomized placebo-controlled, double-blind ascending-dose trials assessing pharmacokinetics, GH/IGF-I response and safety, not clinical benefit.
Source notes	PubMed abstract supports route, trial design, schedule categories, duration and the 30/60 micrograms/kg tolerability phrase, but not a complete dose-arm table. Treat as DAC-containing long-acting CJC-1295 study; do not generalize to no-DAC CJC-1295. Abstract reviewed, not full paper.

Protocol source: [Prolonged stimulation of growth hormone \(GH\) and insulin-like growth factor I secretion by CJC-1295, a long-acting analog of GH-releasing hormone, in healthy adults](#)

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 2mg once weekly High dose: 2mg twice weekly
Route	Not stated in the compilation
Frequency	Once or twice weekly, evening
Duration	8-12 weeks on, 4 weeks off
Context	Source-described proposal in an unreviewed compilation. GROWTH HORMONE SECRETAGOGUES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed CJC-1295 with DAC Dosing Guide (not publicly linked)

Reconstitution notes as sourced

2mg vial + 2mL BAC water = 1mg/mL

5mg vial + 2mL BAC water = 2.5mg/mL

Source: Alpha BioMed CJC-1295 with DAC Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- Hormone changes are not clinical benefit. This long-acting study form must not be assumed equivalent to materials marketed as CJC-1295 without DAC.

CJC-1295 (No DAC)

Endocrine research

Research focus: Endocrine research

Product variants

CJC_NODAC_10 | 10 mg Vial | vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed CJC-1295 No DAC Dosing Guide (not publicly linked)

Source-described protocol records

Unverified no-DAC schedule, unit/range conflict · Unreviewed secondary compilation

Dose as reported	Standard: 1-2mg daily High dose: 2-3mg daily
Route	Not stated in the compilation
Frequency	Evening, before bed
Duration	8-12 weeks on, 4 weeks off
Context	Source-described proposal in an unreviewed compilation. GROWTH HORMONE SECRETAGOGUES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. This milligram-range schedule conflicts with the separate PeptidesExplorer article, which describes 100-300 mcg per no-DAC administration. No primary evidence here resolves the discrepancy; do not infer a corrected dose.

Protocol source: Alpha BioMed CJC-1295 No DAC Dosing Guide (not publicly linked)

Reconstitution notes as sourced

2mg vial + 2mL BAC water = 1mg/mL

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed CJC-1295 No DAC Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- No-DAC and DAC materials are not interchangeable. The DAC human study does not validate this no-DAC schedule. Secondary sources disagree on units/range.

CJC-1295 / Ipamorelin

Combination references

Research focus: Combination references

Product variants

CJC_IPA_10 | 10 mg Vial | vial

Evidence context

Selected-study label: Secondary protocol article, not a combination trial

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: [CJC-1295 Dosage: Complete Protocol Guide | PeptidesExplorer](#)

Source-described protocol records

Article-described combination example · Secondary protocol article, not a combination trial

Dose as reported	100 mcg CJC-1295 (no DAC) plus 200 mcg ipamorelin per administration
Route	The article describes injection; the numerical stack section does not independently establish a route-matched clinical protocol
Frequency	Article's minimum example: once daily before bed
Duration	No course duration established by this quoted stack section
Context	An unreviewed protocol article describes separate components. Its example is not proof of efficacy or safety, and does not establish a dose for the current mixed-vial ratio.
Source notes	The article also lists other proposed schedules. No direct human combination-arm evidence is established by this source. The quoted 1:2 component dose must not be assumed achievable from a catalog blend with a different ratio.

Protocol source: [CJC-1295 Dosage: Complete Protocol Guide | PeptidesExplorer](#)

Dosing-source gap · no dedicated human combination protocol identified in bounded searches; secondary review reports murine-only combination evidence

Dose as reported	No numeric regimen established by the retrieved source
Route	Not established for this product/form
Frequency	Not established
Duration	Not established in the cited record
Context	combination evidence described as murine in a secondary review; exact regimen not verified here
Source notes	Individual-component studies do not establish a combination protocol. Bounded searches did not identify a dedicated human trial; this is not proof none exists.

Protocol source: [Narrative review of CJC-1295 / Ipamorelin combination research](#)

Limitations and evidence boundaries

- No dedicated human combination dose found
- No verified current-product ratio
- Route/frequency/duration unresolved
- Do not combine component-specific evidence into a blend protocol

Dihexa

Cognitive & longevity research

Research focus: Cognitive & longevity research

Product variants

DIHEXA_10_CAP 10 mg Capsules 30 count capsule	
---	--

Evidence context**Selected-study label:** Unreviewed secondary compilation**Selected study:** Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records**Vendor / commentary reference · Unreviewed secondary compilation**

Dose as reported	Standard: 10-20mg daily oral High dose: 20-40mg daily oral
Route	oral
Frequency	Morning
Duration	2-4 weeks on, 1-2 weeks off
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

DSIP

Cognitive & longevity research

Research focus: Cognitive & longevity research**Product variants**

DSIP_10 10 mg Vial vial	
-----------------------------	--

Evidence context**Selected-study label:** Unreviewed secondary compilation**Selected study:** Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records**Vendor / commentary reference · Unreviewed secondary compilation**

Dose as reported	Standard: 100-200mcg daily High dose: 200-500mcg daily
Route	Not stated in the compilation
Frequency	Before bed
Duration	2-4 weeks on, 1-2 weeks off
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Dr. Alex Tatum Research (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL

Source: Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

DSIP Nasal Spray

Cognitive & longevity research | dsip

Research focus: Cognitive & longevity research

Product variants

DSIP_15_NS | 15 mg Nasal Spray | 15 mL | nasal spray

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records

Underlying-compound reference, not a nasal regimen · Unreviewed secondary compilation

Dose as reported	Standard: 100-200mcg daily High dose: 200-500mcg daily
Route	Not stated in the compilation
Frequency	Before bed
Duration	2-4 weeks on, 1-2 weeks off
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The source does not establish a dose, absorption equivalence or per-spray directions for this nasal product.

Protocol source: Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Nasal-specific dose and pump-delivery equivalence are not established by the underlying-compound reference.
- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Epitalon

Cognitive & longevity research | Epithalon

Research focus: Cognitive & longevity research

Product variants

EPITH_10 | 10 mg Vial | vial

EPITH_50 | 50 mg Vial | vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Dr. Alex Tatum Research + Dr. Abud Bakri Podcast (not publicly linked)

Source-described protocol records

Injectable proposal from commentary · Unreviewed secondary compilation

Dose as reported	10 mg daily for 10 days
Route	Injectable; precise route not established
Frequency	Morning
Duration	10 days for the listed dose example; other cycle wording conflicts
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The compilation alternates between 10-day cycles every 2-4 months and 3-4 weeks followed by a break; this conflict is unresolved.

Protocol source: Dr. Alex Tatum Research + Dr. Abud Bakri Podcast (not publicly linked)

Oral proposal from commentary · Unreviewed secondary compilation

Dose as reported	3-10 mg daily for 10 days
Route	Oral; not a route match for the catalog vials
Frequency	Morning
Duration	10 days for the listed dose example; other cycle wording conflicts
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The compilation alternates between 10-day cycles every 2-4 months and 3-4 weeks followed by a break; this conflict is unresolved.

Protocol source: Dr. Alex Tatum Research + Dr. Abud Bakri Podcast (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL

50mg vial + 2mL BAC water = 25mg/mL

Source: Dr. Alex Tatum Research + Dr. Abud Bakri Podcast (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- Injectable and oral proposals are separate, unverified source claims. They are not equivalent formulations. The compilation alternates between 10-day cycles every 2-4 months and 3-4 weeks followed by a break; this conflict is unresolved.

GHK-Cu

Repair biology

Research focus: Fibroblast collagen biology

Product variants

GHK_100 100 mg Vial vial	GHK_2_CAP 2 mg Capsules 60 count capsule
GHK_50 50 mg Vial vial	

Evidence context

Selected-study label: Cell study

Selected study: In cultured fibroblasts, the GHK-copper complex increased collagen synthesis under the conditions tested.

Source: [Stimulation of collagen synthesis in fibroblast cultures by the tripeptide-copper complex glycyl-L-histidyl-L-lysine-Cu²⁺](#) · 1988

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 1-5mg daily High dose: 5-10mg daily
Route	Not stated in the compilation
Frequency	Evening
Duration	Ongoing or 8-12 weeks intensive, 30 days on/14 days off (Alpha BioMed recommendation)
Context	Source-described proposal in an unreviewed compilation. RECOVERY & TISSUE REPAIR PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed GHK-Cu Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Reconstitution notes as sourced

50mg vial + 2mL BAC water = 25mg/mL

100mg vial + 2mL BAC water = 50mg/mL

Source: Alpha BioMed GHK-Cu Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- Cell-culture results do not establish skin, wound, or other clinical outcomes in people, or effects of a particular formulation.

GHK-Cu Nasal Spray

Repair biology | ghk-cu

Research focus: Fibroblast collagen biology

Product variants

GHK_25_NS 25 mg Nasal Spray 15 mL nasal spray	
---	--

Evidence context

Selected-study label: Cell study

Selected study: In cultured fibroblasts, the GHK-copper complex increased collagen synthesis under the conditions tested.

Source: [Stimulation of collagen synthesis in fibroblast cultures by the tripeptide-copper complex glycyl-L-histidyl-L-lysine-Cu²⁺](#) · 1988

Source-described protocol records

Underlying-compound reference, not a nasal regimen · Unreviewed secondary compilation

Dose as reported	Standard: 1-5mg daily High dose: 5-10mg daily
Route	Not stated in the compilation
Frequency	Evening
Duration	Ongoing or 8-12 weeks intensive, 30 days on/14 days off (Alpha BioMed recommendation)
Context	Source-described proposal in an unreviewed compilation. RECOVERY & TISSUE REPAIR PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The source does not establish a dose, absorption equivalence or per-spray directions for this nasal product.

Protocol source: Alpha BioMed GHK-Cu Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Nasal-specific dose and pump-delivery equivalence are not established by the underlying-compound reference.

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- Cell-culture results do not establish skin, wound, or other clinical outcomes in people, or effects of a particular formulation.

GLOW

Combination references

Research focus: Combination references

Product variants

GLOW 70 mg Vial vial	GLOW_CAP 2mg/500mcg/500mcg Capsules 60 count capsule
--------------------------	--

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Glow GHK-CU Dosing Guide (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 1-2mg daily High dose: 2-4mg daily
Route	Not stated in the compilation
Frequency	Evening
Duration	Ongoing or 8-12 weeks intensive
Context	Source-described proposal in an unreviewed compilation. BLEND/STACK PROTOCOLS
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Glow GHK-CU Dosing Guide (not publicly linked)

Reconstitution notes as sourced

60mg vial + 2mL BAC water = 30mg/mL

Source: Alpha BioMed Glow GHK-CU Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- The source blend composition and total mass must not be assumed to match this catalog blend. Ingredient doses, ratios and clinical combination benefit need separate evidence.

Glutathione

Cognitive & longevity research

Research focus: Cognitive & longevity research

Product variants

GLUTA_750 750 mg Vial vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 200-400mg daily High dose: 400-600mg daily
Route	Not stated in the compilation
Frequency	Morning or evening
Duration	Ongoing
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Dr. Alex Tatum Research (not publicly linked)

Reconstitution notes as sourced

750mg vial + 2mL BAC water = 375mg/mL

Source: Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

HCG

Specialty research

Research focus: Specialty research

Product variants

HCG_5000 5000 IU Vial vial	
--------------------------------	--

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed HCG Dosing Guide (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 500-1000IU 2-3x weekly High dose: 1000-2000IU 2-3x weekly
Route	Not stated in the compilation
Frequency	Morning or evening
Duration	4-8 weeks on, 2-4 weeks off
Context	Source-described proposal in an unreviewed compilation. SPECIALTY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed HCG Dosing Guide (not publicly linked)

Reconstitution notes as sourced

5000IU vial + 2mL BAC water = 2500IU/mL

Source: Alpha BioMed HCG Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

IGF-1 LR3

Endocrine research

Research focus: Endocrine research**Product variants**

IGF1LR3_1 | 1 mg Vial | vial

Evidence context**Selected-study label:** Unreviewed secondary compilation**Selected study:** Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed IGF-1 LR3 Dosing Guide (not publicly linked)

Source-described protocol records**Vendor / commentary reference · Unreviewed secondary compilation**

Dose as reported	Standard: 20-50mcg daily High dose: 50-100mcg daily
Route	Not stated in the compilation
Frequency	Post-workout or split doses
Duration	4-6 weeks on, 4 weeks off
Context	Source-described proposal in an unreviewed compilation. GROWTH HORMONE SECRETAGOGUES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed IGF-1 LR3 Dosing Guide (not publicly linked)

Reconstitution notes as sourced

1mg vial + 2mL BAC water = 500mcg/mL

Source: Alpha BioMed IGF-1 LR3 Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Ipamorelin

Endocrine research

Research focus: Endocrine research**Product variants**

IPA_10 | 10 mg Vial | vial

IPA_5 | 5 mg Vial | vial

Evidence context**Selected-study label:** Human study, defined trial population**Selected study:** Source-described doses and schedules are listed with their evidence type and formulation context.Source: [Prospective, randomized, controlled, proof-of-concept study of the Ghrelin mimetic ipamorelin for the management of postoperative ileus in bowel resection patients](#)

Source-described protocol records

Postoperative ileus phase 2 study intervention · Human study, defined trial population

Dose as reported	0.03 mg/kg per infusion
Route	intravenous infusion
Frequency	twice daily
Duration	Postoperative day 1 through day 7 or hospital discharge, whichever occurred first
Context	Phase 2 randomized placebo-controlled study in adult inpatients after small or large bowel resection; 117 enrolled. Key endpoint was time to tolerance of a standardized solid meal.
Source notes	Study endpoint difference was not statistically significant (median 25.3 vs 32.6 hours, p=0.15). Perioperative IV study evidence does not establish a subcutaneous wellness or performance regimen. PubMed abstract reviewed, not full paper.

Protocol source: [Prospective, randomized, controlled, proof-of-concept study of the Ghrelin mimetic Ipamorelin for the management of postoperative ileus in bowel resection patients](#)

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 200-300mcg 2-3x daily High dose: 500mcg 2-3x daily
Route	Not stated in the compilation
Frequency	Morning, pre-workout, and/or before bed
Duration	8-12 weeks on, 4 weeks off
Context	Source-described proposal in an unreviewed compilation. GROWTH HORMONE SECRETAGOGUES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: [Alpha BioMed Ipamorelin Dosing Guide](#) (not publicly linked)

Reconstitution notes as sourced

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

Source: [Alpha BioMed Ipamorelin Dosing Guide](#) (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Kisspeptin-10

Specialty research

Research focus: Specialty research

Product variants

KISS_10 10 mg Vial vial	KISS_5 5 mg Vial vial
-----------------------------	---------------------------

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: [Alpha BioMed Kisspeptin Dosing Guide](#) (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 100-200mcg daily High dose: 200-500mcg daily
Route	Not stated in the compilation
Frequency	Morning
Duration	4-8 weeks on, 2-4 weeks off
Context	Source-described proposal in an unreviewed compilation. SPECIALTY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Kisspeptin Dosing Guide (not publicly linked)

Reconstitution notes as sourced

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed Kisspeptin Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- The compilation says kisspeptin without resolving all peptide forms; do not assume every cited dose applies to kisspeptin-10.

KLOW

Combination references

Research focus: Combination references

Product variants

KLOW | 80 mg Vial | vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 1-2mg daily High dose: 2-4mg daily
Route	Not stated in the compilation
Frequency	Morning or split doses
Duration	4-8 weeks acute, maintenance cyclical
Context	Source-described proposal in an unreviewed compilation. BLEND/STACK PROTOCOLS
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Dr. Alex Tatum Research (not publicly linked)

Reconstitution notes as sourced

70mg vial + 2mL BAC water = 35mg/mL

Source: Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- The source blend composition and total mass must not be assumed to match this catalog blend. Ingredient doses, ratios and clinical combination benefit need separate evidence.

KPV

Repair biology

Research focus: Repair biology

Product variants

KPV_10 | 10 mg Vial | vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed KPV Dosing Guide (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 500mcg-1mg daily High dose: 1-2mg daily
Route	Not stated in the compilation
Frequency	Morning or split doses
Duration	4-8 weeks acute, maintenance cyclical
Context	Source-described proposal in an unreviewed compilation. RECOVERY & TISSUE REPAIR PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed KPV Dosing Guide (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed KPV Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Melanotan II

Specialty research

Research focus: Specialty research

Product variants

MT_2 | 10 mg Vial | vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Melanotan Dosing Guide (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 250-500mcg daily High dose: 500-1000mcg daily
Route	Not stated in the compilation
Frequency	Morning, before sun exposure
Duration	2-4 weeks loading, maintenance 1-2x weekly
Context	Source-described proposal in an unreviewed compilation. SPECIALTY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Melanotan Dosing Guide (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed Melanotan Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

MOTS-c

Metabolic research

Research focus: Mitochondrial signaling and metabolism

Product variants

MOTSC_10 10 mg Vial vial	MOTSC_40 40 mg Vial vial
------------------------------	------------------------------

Evidence context

Selected-study label: Cell + animal study

Selected study: The original study described MOTS-c signaling in cells and reported improved insulin sensitivity and less diet-related obesity in mice treated with it.

Source: [The mitochondrial-derived peptide MOTS-c promotes metabolic homeostasis and reduces obesity and insulin resistance](#) · 2015

Source-described protocol records

Animal-study dose only · preclinical primary study; animal dose only

Dose as reported	15 mg/kg twice daily
Route	intraperitoneal
Frequency	twice daily
Duration	Not established in the cited record
Context	C26 tumor-bearing mice (cachexia model)
Source notes	Do not present as human dosing. Human observational measurement of endogenous MOTS-c is not an administration study. CB4211 is a distinct analog and its dosing must not be attributed to MOTS-c.

Protocol source: [MOTS-c partially protects against skeletal muscle deterioration in C26 cachexia](#)

Limitations and evidence boundaries

- No exogenous human MOTS-c dose identified
- Duration of the cited animal regimen not established in this bounded record
- CB4211 is not interchangeable with MOTS-c

- These cell and mouse findings do not establish a human treatment effect, long-term safety, or outcomes for a particular product.

NAD+

Cognitive & longevity research | NAD+

Research focus: Cognitive & longevity research

Product variants

NAD_500 | 500 mg Vial | vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed NAD+ Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 100-200mg daily High dose: 200-500mg daily
Route	Not stated in the compilation
Frequency	Morning
Duration	Ongoing or 8-12 weeks intensive
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed NAD+ Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Reconstitution notes as sourced

500mg vial + 2mL BAC water = 250mg/mL

1000mg vial + 2mL BAC water = 500mg/mL

Source: Alpha BioMed NAD+ Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

NAD+ Nasal Spray

Cognitive & longevity research | nad-plus

Research focus: Cognitive & longevity research

Product variants

NAD_750_NS | 750 mg Nasal Spray | 15 mL | nasal spray

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed NAD+ Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records

Underlying-compound reference, not a nasal regimen · Unreviewed secondary compilation

Dose as reported	Standard: 100-200mg daily High dose: 200-500mg daily
Route	Not stated in the compilation
Frequency	Morning
Duration	Ongoing or 8-12 weeks intensive
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The source does not establish a dose, absorption equivalence or per-spray directions for this nasal product.

Protocol source: Alpha BioMed NAD+ Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Nasal-specific dose and pump-delivery equivalence are not established by the underlying-compound reference.
- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Neuro Triple Blend Nasal Spray

Combination references

Research focus: Combination references

Product variants

NEURO_TRIPLE_20_20_20_NS 20/20/20 mg Nasal Spray 15 mL nasal spray	
--	--

Evidence context

Selected-study label: no combination-specific human or animal protocol identified in bounded searches

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Product Catalog.pdf (not publicly linked)

Source-described protocol records

Dosing-source gap · no combination-specific human or animal protocol identified in bounded searches

Dose as reported	No numeric regimen established by the retrieved source
Route	Not established for this product/form
Frequency	Not established
Duration	Not established in the cited record
Context	Current catalog identity and retrieved references do not yet establish a formulation-matched protocol.
Source notes	Do not infer that component-alone studies validate this blend, the combination, its ratio, nasal route, safety, or effects. No route-matched human combination source found.

Protocol source: Product Catalog.pdf (not publicly linked)

Limitations and evidence boundaries

- No route-matched human combination study found
- No frequency or duration established
- Component evidence cannot validate the combination

Orforglipron

Non-peptide research compounds

Research focus: Non-peptide research compounds

Product variants

ORFOR_6_CAP | 6 mg Capsules | 60 count | capsule

Evidence context

Selected-study label: human randomized phase 3 clinical trial

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: [Orforglipron, an Oral Small-Molecule GLP-1 Receptor Agonist for Obesity Treatment](#)

Source-described protocol records

Source-described research intervention · human randomized phase 3 clinical trial

Dose as reported	6 mg, 12 mg, or 36 mg trial arms after dose escalation
Route	oral
Frequency	once daily
Duration	72 weeks
Context	adults with obesity and type 2 diabetes in ATAIN-2
Source notes	These are study arms, not personal instructions and not evidence that the public 6 mg capsule product matches the trial drug or protocol. Orforglipron is not a peptide.

Protocol source: [Orforglipron, an Oral Small-Molecule GLP-1 Receptor Agonist for Obesity Treatment](#)

Limitations and evidence boundaries

- Product-to-trial formulation equivalence not established
- Trial regimens must not be repackaged as customer dosing advice

PT-141

Specialty research

Research focus: Specialty research

Product variants

PT_141 | 10 mg Vial | vial

Evidence context

Selected-study label: Dated FDA label, formulation specific

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: [VYLEESI \(bremelanotide injection\) FDA Prescribing Information](#)

Source-described protocol records

VYLEESI FDA-labeled regimen · Dated FDA label, formulation specific

Dose as reported	1.75 mg/0.3 mL
Route	subcutaneous injection via the labeled autoinjector to abdomen or thigh
Frequency	As needed, at least 45 minutes before anticipated sexual activity; no more than one dose in 24 hours; more than 8 doses per month is not recommended
Duration	As-needed; no fixed treatment-course duration in dosage section
Context	FDA-labeled use is for premenopausal women with acquired, generalized HSDD meeting the label criteria; not indicated for men, postmenopausal women, or sexual-performance enhancement.
Source notes	Official label establishes the marketed autoinjector's regimen; it does not support other PT-141 products, routes, or formulations. The FDA PDF states that it may not be the latest label, so verify current official labeling before any current regulatory statement. This is a dated source document, not verification of current labeling or the generic catalog formulation.

Protocol source: [VYLEESI \(bremelanotide injection\) FDA Prescribing Information](#)

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 1-2mg as needed High dose: 2-4mg as needed
Route	Not stated in the compilation
Frequency	30-60 minutes before activity
Duration	As needed, not daily
Context	Source-described proposal in an unreviewed compilation. SPECIALTY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: [Alpha BioMed PT-141 Dosing Guide](#) (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL

Source: [Alpha BioMed PT-141 Dosing Guide](#) (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

PT-141 Nasal Spray

Specialty research | pt-141

Research focus: Specialty research

Product variants

PT_141_15_NS 15 mg Nasal Spray 15 mL nasal spray	
--	--

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: [Alpha BioMed PT-141 Dosing Guide](#) (not publicly linked)

Source-described protocol records

Underlying-compound reference, not a nasal regimen · Unreviewed secondary compilation

Dose as reported	Standard: 1-2mg as needed High dose: 2-4mg as needed
Route	Not stated in the compilation
Frequency	30-60 minutes before activity
Duration	As needed, not daily
Context	Source-described proposal in an unreviewed compilation. SPECIALTY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The source does not establish a dose, absorption equivalence or per-spray directions for this nasal product.

Protocol source: Alpha BioMed PT-141 Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Nasal-specific dose and pump-delivery equivalence are not established by the underlying-compound reference.
- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Retatrutide

Metabolic research

Research focus: Three-receptor metabolic signaling

Product variants

RETA_10 10 mg Vial vial	RETA_20 20 mg Vial vial
RETA_30 30 mg Vial vial	RETA_50 50 mg Vial vial

Evidence context

Selected-study label: Human RCT, phase 2

Selected study: A 48-week randomized phase 2 trial in 338 adults with obesity found dose-related average weight reduction versus placebo; gastrointestinal effects were common.

Source: [Triple-Hormone-Receptor Agonist Retatrutide for Obesity: A Phase 2 Trial](#) · 2023

Source-described protocol records

Phase 2 obesity-trial arms · Human study, defined trial population

Dose as reported	1 mg weekly; 4 mg weekly with either 2 mg or 4 mg initial dose; 8 mg weekly with either 2 mg or 4 mg initial dose; or 12 mg weekly with a 2 mg initial dose
Route	subcutaneous
Frequency	once weekly
Duration	48 weeks
Context	Phase 2 double-blind randomized placebo-controlled trial in 338 adults with BMI ≥ 30 , or BMI 27 to <30 with at least one weight-related condition.
Source notes	Abstract-supported investigational trial arms, including starting doses. This was a defined study, not an approved label or a clinical recommendation. PubMed abstract reviewed, not full paper.

Protocol source: [Triple-Hormone-Receptor Agonist Retatrutide for Obesity - A Phase 2 Trial](#)

Conflicting secondary schedule, unverified · Unreviewed secondary compilation

Dose as reported	Week 1-4: 2mg once weekly Week 5-8: 4mg once weekly Week 9-12: 9mg once weekly Week 13+: 12mg once weekly (maintenance)
Route	Not stated in the compilation
Frequency	Once weekly, same day each week
Duration	Ongoing
Context	Source-described proposal in an unreviewed compilation. GLP-1 RECEPTOR AGONISTS
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The 9 mg step at weeks 9-12 is not a dose arm in the cited phase-2 trial. It is retained only as a flagged source claim; do not substitute it for the trial arms.

Protocol source: Alpha BioMed Retatrutide Dosing Guide (not publicly linked)

Reconstitution notes as sourced

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

20mg vial + 2mL BAC water = 10mg/mL

30mg vial + 3mL BAC water = 10mg/mL

Source: Alpha BioMed Retatrutide Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- The 2023 phase 2 population, duration and study material limit generalization. Its findings do not establish long-term outcomes or validate a commercial material.
- The secondary 9 mg step conflicts with the trial-arm record. This guide does not reconcile it into a recommended escalation schedule.

Selank

Cognitive & longevity research

Research focus: Cognitive & longevity research

Product variants

SELANK_10 | 10 mg Vial | vial

SELANK_40_NS | 40 mg Nasal Spray | 30 mL | nasal spray

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Selank Dosing Guide (not publicly linked)

Source-described protocol records**Vendor / commentary reference · Unreviewed secondary compilation**

Dose as reported	Standard: 300-600mcg daily High dose: 600-1000mcg daily
Route	Not stated in the compilation
Frequency	Morning or split doses
Duration	2-4 weeks on, 1-2 weeks off
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Selank Dosing Guide (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed Selank Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Selank Nasal Spray

Cognitive & longevity research | selank

Research focus: Cognitive & longevity research

Product variants

SELANK_20_NS | 20 mg Nasal Spray | 15 mL | nasal spray

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Selank Dosing Guide (not publicly linked)

Source-described protocol records**Underlying-compound reference, not a nasal regimen · Unreviewed secondary compilation**

Dose as reported	Standard: 300-600mcg daily High dose: 600-1000mcg daily
Route	Not stated in the compilation
Frequency	Morning or split doses
Duration	2-4 weeks on, 1-2 weeks off
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The source does not establish a dose, absorption equivalence or per-spray directions for this nasal product.

Protocol source: Alpha BioMed Selank Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Nasal-specific dose and pump-delivery equivalence are not established by the underlying-compound reference.
- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.

- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Semaglutide

Metabolic research

Research focus: GLP-1 signaling and weight management

Product variants

SEMA_10 10 mg Vial vial	SEMA_20 20 mg Vial vial
SEMA_5 5 mg Vial vial	

Evidence context

Selected-study label: Human RCT

Selected study: STEP 1 studied 1,961 adults without diabetes over 68 weeks. Semaglutide plus lifestyle intervention reduced average weight more than placebo plus lifestyle intervention; gastrointestinal effects were common.

Source: [Once-Weekly Semaglutide in Adults with Overweight or Obesity](#) · 2021

Source-described protocol records

STEP 1 trial intervention · Human study, defined trial population

Dose as reported	2.4 mg
Route	subcutaneous
Frequency	once weekly
Duration	68 weeks
Context	Phase 3 double-blind randomized placebo-controlled trial; 1,961 adults with BMI ≥ 30 , or ≥ 27 with a weight-related comorbidity, without diabetes; both groups received lifestyle intervention.
Source notes	Abstract-supported maintenance dose and study duration; this describes the trial intervention, not a titration schedule or a compounded/RUO product. Do not generalize beyond this trial population. PubMed abstract reviewed, not full paper.

Protocol source: [Once-Weekly Semaglutide in Adults with Overweight or Obesity](#)

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Week 1-4: 0.25mg once weekly Week 5-8: 0.5mg once weekly Week 9-12: 1.0mg once weekly Week 13-16: 1.7mg once weekly Week 17+: 2.4mg once weekly (maintenance)
Route	Not stated in the compilation
Frequency	Once weekly, same day each week, any time of day, with or without food
Duration	Ongoing, no cycling required
Context	Source-described proposal in an unreviewed compilation. GLP-1 RECEPTOR AGONISTS
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Lyophilized Semaglutide Dosing Guide (not publicly linked)

Reconstitution notes as sourced

5mg vial + 2mL BAC water = 2.5mg/mL concentration

10mg vial + 2mL BAC water = 5mg/mL concentration

10mg vial + 4mL BAC water = 2.5mg/mL concentration

Source: Alpha BioMed Lyophilized Semaglutide Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- Results concern a defined population and study medicine, not any research material bearing the same compound name. Individual outcomes and risks vary.

Semax

Cognitive & longevity research

Research focus: Cognitive & longevity research

Product variants

SEMAX_10 | 10 mg Vial | vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Semax Dosing Guide (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 300-600mcg daily High dose: 600-1000mcg daily
Route	Not stated in the compilation
Frequency	Morning
Duration	2-4 weeks on, 1-2 weeks off
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Semax Dosing Guide (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL

30mg vial + 2mL BAC water = 15mg/mL

Source: Alpha BioMed Semax Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Semax Nasal Spray

Cognitive & longevity research | semax

Research focus: Cognitive & longevity research

Product variants

SEMAX_25_NS | 25 mg Nasal Spray | 15 mL | nasal spray

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Semax Dosing Guide (not publicly linked)

Source-described protocol records

Underlying-compound reference, not a nasal regimen · Unreviewed secondary compilation

Dose as reported	Standard: 300-600mcg daily High dose: 600-1000mcg daily
Route	Not stated in the compilation
Frequency	Morning
Duration	2-4 weeks on, 1-2 weeks off
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The source does not establish a dose, absorption equivalence or per-spray directions for this nasal product.

Protocol source: Alpha BioMed Semax Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Nasal-specific dose and pump-delivery equivalence are not established by the underlying-compound reference.
- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Sermorelin

Endocrine research

Research focus: Endocrine research

Product variants

SERM_10 | 10 mg Vial | vial

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Sermorelin Dosing Guide (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 200-500mcg daily High dose: 500-1000mcg daily
Route	Not stated in the compilation
Frequency	Evening, before bed
Duration	3-6 months on, 1-2 months off
Context	Source-described proposal in an unreviewed compilation. GROWTH HORMONE SECRETAGOGUES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Sermorelin Dosing Guide (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL

20mg vial + 2mL BAC water = 10mg/mL

Source: Alpha BioMed Sermorelin Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

SLU-PP-332

Non-peptide research compounds

Research focus: Non-peptide research compounds

Product variants

SLU_1000_CAP 1000 mcg Capsules 60 count capsule	SLU_250_CAP 250 mcg Capsules 60 count capsule
SLU_500_CAP 500 mcg Capsules 60 count capsule	

Evidence context

Selected-study label: preclinical primary research; animal dose only

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: [An exercise-inducing small molecule that targets the estrogen-related receptor pathway](#)

Source-described protocol records

Animal-study dose only · preclinical primary research; animal dose only

Dose as reported	50 mg/kg twice daily in mouse experiments; a separate 30 mg/kg intraperitoneal dose was used in pharmacokinetic work
Route	intraperitoneal
Frequency	twice daily for the cited treatment experiments
Duration	10 days in one cited experiment; varies by experiment
Context	mouse exercise-capacity / metabolic experiments
Source notes	The vendor application note calls this a recommended dose; that language is not adopted. Animal injectable studies do not substantiate the public oral capsule strengths.

Protocol source: [An exercise-inducing small molecule that targets the estrogen-related receptor pathway](#)

Limitations and evidence boundaries

- No human dose identified
- Exact dose details for PMID 37739806 require full-text verification
- Animal injection cannot substantiate oral capsule product instructions

SS-31

Cognitive & longevity research

Research focus: Cognitive & longevity research

Product variants

SS31_10 10 mg Vial vial	SS31_50 50 mg Vial vial
-----------------------------	-----------------------------

Evidence context

Selected-study label: Unreviewed secondary compilation

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed SS-31 Dosing Guide (not publicly linked)

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 1-5mg daily High dose: 5-10mg daily
Route	Not stated in the compilation
Frequency	Morning
Duration	8-12 weeks on, 4 weeks off
Context	Source-described proposal in an unreviewed compilation. COGNITIVE & LONGEVITY PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed SS-31 Dosing Guide (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL

50mg vial + 2mL BAC water = 25mg/mL

Source: Alpha BioMed SS-31 Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

TB-500

Repair biology | TB500

Research focus: Wound and corneal repair biology

Product variants

TB_10 10 mg Vial vial	TB_5 5 mg Vial vial
---------------------------	-------------------------

Evidence context

Selected-study label: Animal study

Selected study: In a mouse corneal chemical-injury model, topical full-length thymosin beta-4 was associated with faster re-epithelialization and lower inflammatory-cell infiltration.

Source: Thymosin beta 4 promotes corneal wound healing and decreases inflammation in vivo following alkali injury · 2002

Source-described protocol records

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 2-2.5mg twice weekly High dose: 5mg twice weekly Maintenance: 2mg once weekly
Route	Not stated in the compilation
Frequency	Evening, aligned with GH pulse
Duration	4-6 weeks acute, 8-12 weeks chronic, 4 weeks maintenance, 2-4 weeks off
Context	Source-described proposal in an unreviewed compilation. RECOVERY & TISSUE REPAIR PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Thymosin Beta-4 Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Reconstitution notes as sourced

2mg vial + 2mL BAC water = 1mg/mL

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed Thymosin Beta-4 Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- Full-length thymosin beta-4 studies do not verify the sequence or equivalence of material sold under a TB-500 label.
- Mouse injury findings do not establish human outcomes. This full-length TB-4 study does not verify that a vendor product labeled TB-500 has the same sequence.

Tesamorelin

Endocrine research

Research focus: Endocrine research

Product variants

TESA_10 | 10 mg Vial | vial

TESA_20 | 20 mg Vial | vial

Evidence context

Selected-study label: Human study, defined trial population

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: [Metabolic effects of a growth hormone-releasing factor in patients with HIV](#)

Source-described protocol records**HIV-associated abdominal fat RCT intervention · Human study, defined trial population**

Dose as reported	2 mg
Route	subcutaneous
Frequency	once daily
Duration	26 weeks
Context	Randomized trial of 412 adults with HIV and abdominal fat accumulation; intervention compared with placebo. Primary endpoint was CT-measured visceral adipose tissue.
Source notes	Specific trial population and formulation/context; not evidence for general fat loss or for a different formulation. Abstract reviewed, not full paper.

Protocol source: [Metabolic effects of a growth hormone-releasing factor in patients with HIV](#)

EGRIFTA SV FDA-labeled regimen (formulation-specific) · Dated FDA label, formulation specific

Dose as reported	1.4 mg (0.35 mL of reconstituted solution)
Route	subcutaneous
Frequency	once daily
Duration	No fixed course duration stated in cited dosage section
Context	FDA label indication: reduction of excess abdominal fat in HIV-infected adult patients with lipodystrophy. The label states its recommendations apply only to EGRIFTA SV 2 mg/vial; the 1 mg/vial EGRIFTA formulation differs in dose and preparation instructions.
Source notes	Official FDA label is formulation-specific and warns it may not be the latest approved label; confirm current labeling before any current-status claim. This record intentionally omits label reconstitution details. This is a dated source document, not verification of current labeling or the generic catalog formulation.

Protocol source: [EGRIFTA SV \(tesamorelin for injection\) FDA Prescribing Information](#)

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Standard: 1-2mg daily
Route	Not stated in the compilation
Frequency	Evening, 30-60 minutes before bed, fasted (2+ hours after eating)
Duration	3-6 months on, 1-2 months off
Context	Source-described proposal in an unreviewed compilation. GROWTH HORMONE SECRETAGOGUES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The compilation also uses an undifferentiated FDA-approved dose claim; that claim is excluded here because formulation-specific labels differ.

Protocol source: Alpha BioMed Tesamorelin Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Reconstitution notes as sourced

2mg vial + 2mL BAC water = 1mg/mL

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed Tesamorelin Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- The 2007 trial, dated EGRIFTA SV label and generic 10/20 mg catalog vials are separate formulations/contexts. Label reconstitution or dosing must not be carried across them.

Tesofensine

Non-peptide research compounds

Research focus: Non-peptide research compounds

Product variants

TESO_500_CAP 500 mcg Capsules 60 count capsule	
--	--

Evidence context

Selected-study label: human randomized phase II clinical trial

Selected study: Source-described doses and schedules are listed with their evidence type and formulation context.

Source: [A randomized, double-blind, placebo-controlled study of tesofensine in obese subjects](#)

Source-described protocol records

Source-described research intervention · human randomized phase II clinical trial

Dose as reported	0.25 mg, 0.5 mg, and 1.0 mg trial arms
Route	oral
Frequency	once daily
Duration	24 weeks
Context	adults with obesity
Source notes	Reported only as historic study arms. This is not an individual recommendation or evidence that the current public product is equivalent to the trial material.

Protocol source: [A randomized, double-blind, placebo-controlled study of tesofensine in obese subjects](#)

Limitations and evidence boundaries

- Trial findings do not establish a current product regimen
- Potential safety context should be reviewed from the primary paper before public presentation

Thymosin Alpha-1

Repair biology

Research focus: Repair biology**Product variants**

TA1_10 10 mg Vial vial	TA1_5 5 mg Vial vial
----------------------------	--------------------------

Evidence context**Selected-study label:** Unreviewed secondary compilation**Selected study:** Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Thymosin Alpha-1 Dosing Guide (not publicly linked)

Source-described protocol records**Vendor / commentary reference · Unreviewed secondary compilation**

Dose as reported	Standard: 2-5mg twice weekly High dose: 5mg daily
Route	Not stated in the compilation
Frequency	Morning or evening
Duration	4-8 weeks on, 2-4 weeks off
Context	Source-described proposal in an unreviewed compilation. RECOVERY & TISSUE REPAIR PEPTIDES
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Thymosin Alpha-1 Dosing Guide (not publicly linked)

Reconstitution notes as sourced

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

Source: Alpha BioMed Thymosin Alpha-1 Dosing Guide (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.

Tirzepatide

Metabolic research

Research focus: GIP and GLP-1 signaling**Product variants**

TRZ_10 10 mg Vial vial	TRZ_20 20 mg Vial vial
TRZ_30 30 mg Vial vial	TRZ_40 40 mg Vial vial
TRZ_60 60 mg Vial vial	

Evidence context**Selected-study label:** Human RCT, phase 3**Selected study:** SURMOUNT-1 studied 2,539 adults without diabetes over 72 weeks. Tirzepatide groups had greater average weight reduction than placebo; gastrointestinal adverse events were common.

Source: Tirzepatide Once Weekly for the Treatment of Obesity · 2022

Source-described protocol records

SURMOUNT-1 trial arms · Human study, defined trial population

Dose as reported	5 mg, 10 mg, or 15 mg
Route	subcutaneous
Frequency	once weekly
Duration	72 weeks total, including a 20-week dose-escalation period
Context	Phase 3 double-blind randomized controlled trial; 2,539 adults with BMI ≥ 30 , or ≥ 27 with a weight-related complication, excluding diabetes.
Source notes	Abstract explicitly reports dose arms, route, frequency, and duration. Doses are trial arms after dose escalation, not a patient-specific titration instruction. PubMed abstract reviewed, not full paper.

Protocol source: [Tirzepatide Once Weekly for the Treatment of Obesity](#)

Vendor / commentary reference · Unreviewed secondary compilation

Dose as reported	Week 1-4: 2.5mg once weekly Week 5-8: 5mg once weekly Week 9-12: 7.5mg once weekly Week 13-16: 10mg once weekly Week 17-20: 12.5mg once weekly Week 21+: 15mg once weekly (maintenance)
Route	Not stated in the compilation
Frequency	Once weekly, same day each week
Duration	Ongoing
Context	Source-described proposal in an unreviewed compilation. GLP-1 RECEPTOR AGONISTS
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: [Alpha BioMed Lyophilized Tirzepatide Dosing Guide](#) (not publicly linked)

Reconstitution notes as sourced

5mg vial + 2mL BAC water = 2.5mg/mL

10mg vial + 2mL BAC water = 5mg/mL

20mg vial + 2mL BAC water = 10mg/mL

30mg vial + 3mL BAC water = 10mg/mL

Source: [Alpha BioMed Lyophilized Tirzepatide Dosing Guide](#) (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- Results concern the trial population and studied medicine. They do not establish an individual response or validate a commercial material.

Wolverine

Combination references

Research focus: Combination references

Product variants

BPC_TB_10 10/10 mg Vial vial	BPC_TB_150_NS 150/150 mcg per spray Nasal Spray 30 mL nasal spray
BPC_TB_5 5/5 mg Vial vial	BPC_TB_500_CAP 500/500 mcg Capsules 60 count capsule

Evidence context**Selected-study label:** Unreviewed secondary compilation**Selected study:** Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Wolverine Blend Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records**Vendor / commentary reference** · Unreviewed secondary compilation

Dose as reported	Standard: 1-2mg daily (0.5-1mg each) High dose: 2-4mg daily (1-2mg each)
Route	Not stated in the compilation
Frequency	Evening, aligned with GH pulse
Duration	2-4 weeks acute injury, 4-8 weeks recovery, 2-4 weeks off
Context	Source-described proposal in an unreviewed compilation. BLEND/STACK PROTOCOLS
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions.

Protocol source: Alpha BioMed Wolverine Blend Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Reconstitution notes as sourced

10mg vial + 2mL BAC water = 5mg/mL (2.5mg each)

Source: Alpha BioMed Wolverine Blend Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- The source blend composition and total mass must not be assumed to match this catalog blend. Ingredient doses, ratios and clinical combination benefit need separate evidence.

Wolverine Nasal Spray

Combination references | wolverine

Research focus: Combination references**Product variants**

BPC_TB_15_NS | 15/15 mg Nasal Spray | 15 mL | nasal spray

Evidence context**Selected-study label:** Unreviewed secondary compilation**Selected study:** Source-described doses and schedules are listed with their evidence type and formulation context.

Source: Alpha BioMed Wolverine Blend Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Source-described protocol records

Underlying-compound reference, not a nasal regimen · Unreviewed secondary compilation

Dose as reported	Standard: 1-2mg daily (0.5-1mg each) High dose: 2-4mg daily (1-2mg each)
Route	Not stated in the compilation
Frequency	Evening, aligned with GH pulse
Duration	2-4 weeks acute injury, 4-8 weeks recovery, 2-4 weeks off
Context	Source-described proposal in an unreviewed compilation. BLEND/STACK PROTOCOLS
Source notes	Attributed to the named guide/commentary through the ResearchGrade compendium. This is a source-described regimen, not independent trial validation or product instructions. The source does not establish a dose, absorption equivalence or per-spray directions for this nasal product.

Protocol source: Alpha BioMed Wolverine Blend Dosing Guide + Dr. Alex Tatum Research (not publicly linked)

Limitations and evidence boundaries

- Nasal-specific dose and pump-delivery equivalence are not established by the underlying-compound reference.
- Compiled vendor/video/podcast material, internally unreviewed. Original-guide attribution and human efficacy are not independently established by the compilation.
- Reconstitution examples refer to the source formulation and vial size, not automatically to the catalog variant.
- The source blend composition and total mass must not be assumed to match this catalog blend. Ingredient doses, ratios and clinical combination benefit need separate evidence.

Small glossary

Human study: A reported intervention in a defined trial population; its dose is not a universal recommendation.

Preclinical: Cell or animal experiments. Animal doses must not be treated as human doses.

Vendor / commentary reference: A regimen attributed to a guide, practitioner, video or podcast, not independent clinical validation.

Formulation match: Route, salt/sequence, concentration and delivery device must match before applying a source to a product.