
COURSE RESOURCE

SCOPE OF PRACTICE & CONSENT LANGUAGE

Coach reference | Working With GLP-1 Clients: for Personal Trainers

This document defines the boundaries of your role when training clients who use GLP-1 medications (such as semaglutide or tirzepatide) and gives you copy-and-paste language for your intake forms, agreements, and referral conversations. Read it before you take on your first GLP-1 client, then keep it beside your onboarding paperwork.

SCOPE OF PRACTICE

You are a personal trainer, not a clinician. You may coach training, teach general nutrition habits, and track progress. You may NOT diagnose conditions, prescribe or recommend starting/stopping/changing medication or dose, or provide medical nutrition therapy for a diagnosed disease. Your mantra with every GLP-1 client is: recognise, document, refer.

WHAT YOU CAN DO

These activities sit squarely inside a certified trainer's scope and are where you deliver the most value to a GLP-1 client.

- Design and progress resistance-training programs — for example, 2-4 full-body or upper/lower sessions per week, working in the 6-12 rep range for major compound lifts, to help preserve lean mass during weight loss.
- Coach technique, tempo, and load progression, and regress exercises on days a client feels fatigued, nauseated, or lightheaded.
- Teach general, non-therapeutic nutrition habits: prioritising protein at each meal, staying hydrated, eating slowly, and choosing nutrient-dense foods.
- Track objective progress: body weight trend, circumference measurements, strength numbers, session RPE, step counts, and adherence.
- Ask about how the client is feeling, screen for warning signs, and document what you observe.
- Refer out to the client's prescriber, physician, or a registered dietitian when anything falls outside your lane.

WHAT YOU CANNOT DO

Crossing any of these lines puts your client at risk and exposes you to liability. When you hit one of these, refer.

- Diagnose any condition (e.g. deciding a symptom is or isn't 'just a side effect').
- Prescribe, recommend, source, or comment on whether a client should start, stop, pause, or change the dose of a GLP-1 or any other medication.
- Provide medical nutrition therapy — individualised eating plans to treat a diagnosed disease such as diabetes, kidney disease, or an eating disorder.
- Set or endorse a specific rate of weight loss, calorie floor, or fasting protocol as a clinical target.
- Interpret lab results, blood glucose readings, or medication timing.
- Advise a client to skip a medical appointment, downplay a symptom, or 'push through' a red-flag warning sign.

THE GREY ZONE: COMMON CLIENT QUESTIONS

Clients will ask you medical questions because they trust you. Use this table to stay in scope while still being helpful.

Client asks...	In scope (do this)	Out of scope (refer instead)
"Should I lower my dose — I feel awful?"	Acknowledge, document how they feel, adjust today's session	Any opinion on dosing — send to prescriber
"What should I eat on this med?"	General habits: protein, hydration, smaller frequent meals	A therapeutic meal plan for a diagnosed condition — refer to a dietitian
"Is it normal to feel this nauseous/dizzy?"	Note it, watch for red flags, encourage them to contact their prescriber	Judging whether it's 'normal' or safe
"Can I train fasted / very low calorie?"	Explain general fuelling and recovery principles	Endorsing a specific calorie floor or fasting protocol as safe for them

KEY SIGNAL

If answering a question requires you to know the client's diagnosis, labs, or medication plan, that is your cue to stop and refer. You can always say: "That's a great question for your prescriber — let's write it down so you don't forget to ask."

RECOGNISE, DOCUMENT, REFER

This three-step habit protects your client and you. Recognise the signal, document it in plain factual language, and refer to the right professional — then note that you did so.

- **RECOGNISE:** Watch for warning signs such as persistent vomiting, inability to keep fluids down, severe or ongoing abdominal pain, signs of dehydration, fainting or near-fainting, or any symptom the client says is new or worsening.
- **DOCUMENT:** Record the date, what the client reported or you observed, and the action you took — factually, without diagnosing. Example: "7 Aug — client reported nausea + skipped 2 meals over 2 days; advised to contact prescriber; deloaded session to bodyweight only."
- **REFER:** Direct the client to their prescriber, physician, urgent care, or a registered dietitian as appropriate. For anything that looks urgent, advise them to seek medical care promptly rather than waiting for the next session.

EVIDENCE NOTE

Resistance training and adequate protein are widely recommended to help preserve lean mass during rapid weight loss, which is a known concern with GLP-1-assisted loss. This is directional guidance for your programming rationale, not a clinical claim; the course team will attach verified citations in the final toolkit.

READY-TO-USE CONSENT & DISCLAIMER LANGUAGE

Adapt the following into your intake form and training agreement. Have a qualified professional or attorney review your final paperwork for your jurisdiction before use.

CONSENT

Scope acknowledgement (client signs): "I understand that **[Trainer Name]** is a certified personal trainer, not a physician, dietitian, or other licensed healthcare provider. Coaching provided is limited to exercise programming, general nutrition habits, and progress tracking. It does not include medical diagnosis, prescription or adjustment of any medication, or medical nutrition therapy. I will consult my prescriber or physician for all decisions about my GLP-1 medication and my medical care."

CONSENT

Medication & communication disclosure (client signs): "I confirm I am currently using a GLP-1 medication under the care of a licensed prescriber. I authorise my trainer to ask about how I am feeling and to note any symptoms I report for the purpose of adjusting my training and, when appropriate, encouraging me to contact my healthcare provider. I understand my trainer will not advise me on my medication or dose."

CONSENT

Assumption of risk & referral acknowledgement (client signs): "I understand exercise carries inherent risks and that GLP-1 medications may cause side effects such as nausea, reduced appetite, or dizziness. I agree to inform my trainer of any new or worsening symptoms, and I understand my trainer may pause our session and refer me to my healthcare provider. In a medical emergency I will seek immediate medical care."

REFERRAL SCRIPTS YOU CAN SAY OUT LOUD

Referring is a strength, not a failure. These scripts keep it warm and clear.

- Symptom referral: "That sounds like something your prescriber should know about. Let's message them today, and in the meantime I'll keep today's session light."
- Nutrition referral: "For an eating plan built around your specific health needs, a registered dietitian is the right person. I'm happy to keep coaching the habit side alongside them."
- Dosing question: "I can't weigh in on your medication — that's your prescriber's call. What I can do is adjust your training around how you're feeling."
- Urgent signal: "What you're describing isn't something to push through. Please contact your provider or seek care now — we can reschedule."

WHY IT MATTERS

Staying in scope is what makes you a safe, referable professional in the eyes of prescribers and dietitians. Trainers who recognise, document, and refer become trusted partners in a client's care team — which is where long-term referrals and reputation come from.