

STRONGER FOR LIFE

— 16-WEEK TRAINING + NUTRITION PROGRAM —

FIVE SCHEDULES. ONE CLEAR SYSTEM.

2-6 DAYS/WEEK

| GYM + HOME OPTIONS

| WORKOUT LOGS

EMIL UZELAC

BHRT-C | MHC

● YOUR TRAINING AND NUTRITION COMPANION

A plan you can make your own

Five weekly schedules. One clear progression method. Room for real life.



ABOUT THE AUTHOR

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Emil's experience spans working adults, stay-at-home parents, business owners, law-enforcement and military personnel, physicians, and athletes. He created these guides to make research on strength, nutrition, and healthy aging easier to understand and use in real life.

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HEALTH & FITNESS
EXPERIENCE

These self-guided resources are not an offer of coaching, healthcare, or individualized services.

This program is for generally healthy adults, especially those over 40, who want to become stronger, build or maintain muscle, return to training, or lose fat while protecting useful strength. Men and women use the same framework. You choose the schedule, starting weight, exercise versions, and amount of work that fit your situation. [S11, A4, A15]

How to use the set

This is the action guide. The companion *Muscle After 40* explains the research behind it. Start with the safety page and choose one weekly plan. The 13 workout cards are a library of alternatives, not 13 sessions to complete every week.

The workouts are a starting point, not a test

The listed sets are the standard dose after you have built up to it. New or returning readers begin with the getting-started phase. You do not need a maximum-strength test, a supplement stack, or six available days to begin.

IMPORTANT

This is education and coaching structure, not medical clearance, rehabilitation, or an individualized medical prescription. Pregnancy, postpartum recovery, significant illness, injury, frailty, and some disabilities require more specific assessment and adaptation. [A7, A10, A11]

Research labels [S#] retain the underlying review's numbering; [A#] marks additional studies or official guidance. The calendars, exact exercise combinations, and adjustment rules are practical applications, not a single protocol tested as best for everyone.

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Find what you need

Choose a plan, open its cards, and use the logs to decide what comes next.

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● [START HERE](#)

Build your version in six decisions

Make these choices before the first workout. You can revise them as you learn what works.

Decision	What to choose
1. Your main goal	Regain consistency, maintain strength, build muscle, or lose fat while preserving strength. Choose one main priority for this block.
2. Your schedule	Pick one 2-, 3-, 4-, 5-, or 6-day plan. More days are not automatically better.
3. Your starting dose	Use the getting-started phase when new or returning. Use the standard card sets only when you already tolerate comparable work.
4. Your exercise versions	Use the listed exercise or a stable, comfortable alternative. Keep it consistent long enough to track progress.
5. Your food plan	Choose a feasible protein target and adjust total food to the goal. Avoid a large diet change and a large training increase at the same time.
6. Your feedback	Record weight, repetitions, good reps left, and recovery. Judge patterns rather than one disappointing day.

YOUR MINIMUM COMMITMENT

Complete your chosen plan at a manageable dose, make the working sets count, and keep a usable record. During a difficult week, reduce the plan intelligently instead of trying to make up every missed set.

Three pages to open next

Check the safety guidance ([p. 5](#)) → Choose your weekly schedule ([p. 6](#)) → Apply the 16-week starting rules ([p. 9](#)). Then use the workout-card directory ([p. 14](#)) to find only the cards for your plan.

The complete calendars and exercise doses are coaching applications. Research supports progressive strength training and flexible scheduling; it does not prove this exact sequence is best for every reader.

[S11, A4, A15]

● BEFORE YOU BEGIN

Check the right starting point

A general training plan is not medical clearance. Use individual guidance when your health or situation calls for it.

Your situation	What to do
Generally healthy, with no concerning symptoms	Start conservatively and learn the movements. Age over 40 alone does not require maximum-strength testing before you begin. [A10]
Known heart, metabolic, or kidney disease; new exercise or a major rise in intensity	Discuss the starting intensity and any restrictions with your treating clinician. [A10]
Chest pressure, fainting, severe unexplained breathlessness, or sudden neurological symptoms	Stop. Seek urgent medical assessment. Call emergency services when symptoms are severe or ongoing.
New sharp pain, swelling, loss of function, or a suspected injury	Stop the provoking exercise. Obtain assessment instead of testing it repeatedly with more weight.
Osteoporosis, a fragility fracture, or recurrent falls	Get qualified guidance on loading, impact, balance, and spinal movements. [A11]
Pregnancy or postpartum recovery	Use obstetric and, when appropriate, pelvic-health guidance. These cards are not a full prenatal/postnatal program. [A7]

Kidney disease: the training-oriented protein targets do not override an existing renal plan. Your clinician or renal dietitian should individualize intake. [\[A3\]](#)

Medication: ask about precautions when a medicine affects exercise tolerance, glucose management, hydration, or symptoms. This manual does not change any medication dose or require hormone therapy.

CLEARANCE AND COACHING ARE DIFFERENT

Even after a clinician approves activity, you may need a qualified trainer or physical therapist to teach a movement, fit equipment, or adapt a disability. An exercise name on a page does not make it suitable for every person.

● CHOOSE ONE WEEKLY PLAN

The best schedule is one you can keep

Days	Who may prefer it	What it contains	Weekly sets
2	Few available days; simple planning.	Two longer full-body sessions.	38
3	A balanced routine with days between lifts.	Three medium full-body sessions.	48
4	Upper/lower training.	Upper, lower, upper, lower.	67
5	More, shorter upper-body visits.	Upper, lower, push, pull, lower.	67
6	Frequent access and a preference for split sessions.	Push, pull, legs, then repeat.	71

These are total working sets across all exercises for the standard plan, not sets for each muscle and not a first-week requirement. The four- and five-day plans deliberately have the same total. The six-day plan includes a little more chest and shoulder work. See the weekly totals (p. 28) for the full breakdown.

New or returning?

Start with two or three days, or divide the smaller plan into brief visits using the short-session option (p. 41). Frequent visits do not justify skipping the getting-started phase. Begin with work you can recover from, not the highest set total on the page.

Already training?

Choose a plan close to the amount of work you currently tolerate. A healthy, experienced 68-year-old may prefer four days; a 28-year-old with a demanding week may prefer two. Sex does not assign a schedule. [A4]

DO NOT COMBINE PLANS

Do not add F2-A and F2-B to an upper/lower plan. Do not add U-B to the five-day plan. The workout cards are alternatives, not a giant combined exercise list.

Flexible scheduling is supported by the smaller independent role of frequency when weekly work is matched and the lack of a clear split-versus-full-body advantage under matched volume. These plans are not all volume-matched. [S14, A15]

● WEEK 0 / SET YOURSELF UP

Your baseline and your warm-up

Pick three repeatable “marker” exercises: one lower-body movement, one press, and one pull. Record the exact exercise, equipment, and setup.

Track this	Keep it useful
Performance	Weight used, repetitions on every set, good reps left on the last set, and any technique changes.
Recovery	Sleep, unusual fatigue, soreness, symptoms, and how ready you feel. Simple words are enough.
Body weight, when useful	Use consistent morning conditions and a weekly average. Skip weighing when it worsens food or body-image concerns.
Optional body or daily-task measure	A repeatable waist measure or a comfortable everyday task can add context. One scale reading does not diagnose muscle loss.

Before each session

Begin with 5-8 minutes of comfortable movement. For the first major exercise, do 1-3 easy preparation sets that gradually increase in weight. Add a preparation set before a different major movement as needed. These do not count toward your working sets.

Choose the first weight

Try a light set within the card’s repetition range and stop with about 3-4 good repetitions left. Increase slightly only when control is good and the weight is clearly too easy. A true one-repetition maximum test is not needed.

Move and rest with control

Lower the weight under control, use a comfortable repeatable range, and avoid bouncing. Use a stable setup and appropriate safety equipment. Breathe through the work; avoid prolonged breath-holding or straining while learning, especially with medical restrictions.

THE TIMER IS A GUIDE

Start with the card’s rest period and extend it when needed. Do not start another set while lightheaded, poorly recovered, or unable to maintain technique. Session times include ordinary preparation and setup, but are only estimates.

Warm-up and session rules are practical applications of progressive resistance training and established progression guidance. [S11, S15]

● READ THIS BEFORE THE CARDS

What the numbers mean

EXAMPLE: 3 SETS OF 8-12 REPETITIONS

Do 8-12 controlled repetitions, rest, and repeat for three working sets. Use a weight that leaves about 2-3 good repetitions available after each set.

Good reps left is the plain-language version of repetitions in reserve (RIR). A set of 10 with 2 RIR means you estimate you could have done about 12 good repetitions. You do not have to attempt the last two to prove it.

Good reps left	Effort score*	Use it for
4	6 out of 10	Learning, returning, or a lighter day.
3	7 out of 10	Most early working sets and conservative standard work.
2	8 out of 10	A common target once the movement is familiar.
1	9 out of 10	Optional on a stable smaller exercise for an experienced lifter.
0	10 out of 10	Failure. Not required by any card in this program.

*This is the reserve-based resistance-training RPE scale, not every scale called RPE. Estimates improve with practice.

When the card says “Control”

For core exercises, stop before your trunk position changes. Use a controlled movement rather than trying to reach failure. Make the exercise harder gradually through resistance, reach, or good repetitions.

When the card says “per side”

Complete the prescribed repetitions on each side. Three sets per side counts as three sets for each arm or leg, not six sets for that muscle. Rest between sides when needed, and take the listed full rest before the next pair.

TECHNIQUE TAKES PRIORITY

End the set before the next repetition needs a major change in posture, range, balance, or movement. Pain, dizziness, and unusual breathlessness are not effort targets.

Most work uses 2-3 good repetitions left, or 3-4 during the getting-started phase or a reduced day. No single exact stopping point is established as best for everyone. [\[S22, A16, A18\]](#)

● A FULL TRAINING BLOCK

Your 16-week plan

This is a flexible calendar. Move forward when your response supports it, not just because the week number changes.

Weeks	Working sets and effort	Main job
1	One working set per exercise. Leave 3-4 good reps.	Learn the setup and find comfortable versions. Do not chase soreness.
2	One or two sets per exercise. Leave 3-4 good reps.	Add a second set only when week 1 was well tolerated.
3-4	Gradually build toward the card's sets. Usually leave 2-3 good reps.	Add work a little at a time. Keep movements consistent.
5-7	Use the standard dose you recover from.	Build repetitions first. Add weight when the progression rule is met.
8	Review: normal training or a reduced dose if needed.	Compare your marker exercises. An easier week is optional, not automatic.
9-11	Continue; make one targeted change only when justified.	You may add up to two weekly sets for one priority muscle if recovery is good and progress has stalled.
12	Second review week.	Check attendance, effort, food, sleep, and symptoms before changing the plan.
13-15	Keep the dose, or adjust selectively.	Consolidate progress. No maximum testing is required.
16	Repeat comparable, non-maximal marker sets.	Decide to continue, reduce, specialize, or change the goal.

An experienced person already tolerating similar training can begin at the standard-dose stage. A new or deconditioned person may need longer in the first stages. The phase rules override the workout-card totals.

AN OPTIONAL EASIER WEEK

For about one week, reduce working sets by roughly 30-50%, use about 10-15% less weight when needed, and leave 4-5 good repetitions. Keep one easy set or deliberately skip an exercise if rounding would remove its only set. These are coaching rules, not medical thresholds.

Do not add work to a plan that is still working. Repeating an effective week is a valid decision.

● PROGRESS ONE THING AT A TIME

When to add reps or weight

- 1 Build repetitions.** For 3 sets of 8-12, increase controlled repetitions across the three sets while keeping the same exercise, range, and good-reps-left target.
- 2 Confirm the top.** When you reach 12 / 12 / 12 with consistent technique and the intended reserve on two sessions, try the smallest practical weight increase.
- 3 Build again.** With the new weight, you may return toward 8-10 repetitions. If you cannot reach the bottom of the range without losing technique, reduce the weight or choose a smaller increase.

Illustrative example	Your record	Next decision
20 per dumbbell	10 / 9 / 8; about 3 good reps left	Repeat the weight.
20 per dumbbell	12 / 12 / 12; about 2 left	Confirm next time.
20 per dumbbell again	12 / 12 / 12; about 2 left	Try the next small increase.
22.5 per dumbbell	9 / 9 / 8; about 2-3 left	Build repetitions again.

The example can be pounds or kilograms, as long as you record the unit consistently. The two-session confirmation is a conservative program rule, not a research-established requirement.

You can progress through repetitions or weight without adding sets. [\[A17\]](#)

Small increases are preferable. About 2-5% on upper-body work or 5-10% on lower-body work may be practical when equipment allows. The resulting technique and effort matter more than hitting an exact percentage. [\[S15\]](#)

Before adding more sets

Look for a plateau across several comparable sessions despite consistent attendance, appropriate effort, stable technique, and adequate recovery. Add one set on each of two weekly sessions for one priority muscle. Keep other work stable for at least two weeks before reviewing again.

DO NOT ADD SETS WHEN

Soreness interferes with the next workout, performance is falling, symptoms are new, or you are struggling to eat or sleep. Address that problem first.

● ADJUST TO TODAY

A lighter day can be the right day

Readiness	What you notice	Today's action
Ready	Usual energy, no concerning symptoms, normal preparation sets.	Use the planned dose and normal progression rules.
Reduced	Poor sleep, unusual stress, lingering soreness, or warm-up weights feel harder than usual.	Keep familiar movements. Remove one set per exercise, adjust weight as needed, and leave 3-4 good reps.
Not a day for hard training	Illness, major fatigue, repeated decline, or a concerning symptom.	Rest or use gentle activity as appropriate. Obtain advice for persistent or concerning symptoms.

When an exercise already has one set, keep one easy set or deliberately omit it. A reduced session is not permission to train through chest symptoms, faintness, or an injury. Use the safety guidance (p. 5) instead. [A10]

During a movement

Normal muscle effort is different from new sharp, radiating, or worsening pain. Stop the movement that causes concerning symptoms. Try a comfortable alternative only when the issue is minor and that alternative is clearly tolerated. Persistent symptoms need assessment.

After a session

Some soreness can occur, especially after unfamiliar work. It is not the goal. If soreness changes how you move in daily life or prevents the next session, reduce the upcoming dose. A universal pain-score cutoff cannot prove a symptom is safe.

When performance keeps falling

Two or more poor sessions are a reason to review sleep, food, illness, exercise choices, and total work. Consider an easier week instead of assuming every disappointing result means you did not try hard enough.

FINISH WITH ONE CLEAR NEXT STEP

Write: repeat the weight, add repetitions, use a smaller increase, remove a set, change an exercise, or seek advice. "Push harder" is not a complete adjustment plan.

● CHOOSE ONE / DAYS CAN MOVE

Your two- or three-day week

The weekdays are examples. Keep the session order and enough recovery between hard sessions; move the days to fit your real week.

Two-day full-body plan

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
F2-A	Easy aerobic activity	Rest / mobility	F2-B	Easy aerobic activity	Leisure / easy activity	Rest

Use F2-A and F2-B only. Together they include squat or split-squat work, hip and back-of-leg work, pressing, and pulling. Leave at least one non-lifting day between them when practical. Easy activity on other days is not an extra hard full-body workout.

Three-day full-body plan

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
F3-A	Easy aerobic activity	F3-B	Easy aerobic activity	F3-C	Leisure / easy activity	Rest

Use F3-A, F3-B, and F3-C in order. Each session has its own planned dose. Do not replace them with the larger F2 cards without recalculating the weekly work.

AN UNPREDICTABLE WEEK

Keep a rolling sequence. When F3-B moves from Wednesday to Thursday, continue with F3-C after adequate recovery. You have not failed the calendar. Do not cram all missed workouts into consecutive days.

One-week fallback: when only one lifting session is possible, choose one F2 card and use a manageable dose. Use the other next time. This keeps some training in the week; it is not a claim that one day maximizes muscle growth.

“Easy aerobic activity” can mean walking, cycling, or another comfortable activity at a dose you already tolerate. Apply the getting-started phase before using the full card sets.

● MORE OPTIONS / NOT A PROMOTION LADDER

Your four-, five-, or six-day week

Four-day upper/lower plan

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
U-A	L-A	Rest / easy activity	U-B	L-B	Leisure / easy activity	Rest

Two upper-body and two lower-body sessions. Reduce the listed sets when moving from a lower-volume routine.

Five-day upper/lower plus split plan

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
U-A	L-A	Rest / easy activity	Push-B	Pull-B	L-B	Rest

This replaces U-B with Push-B and Pull-B. It does not add them on top of U-B. The standard weekly set total matches the four-day plan.

Six-day push/pull/legs plan

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Push-A	Pull-A	L-A	Push-B	Pull-B	L-B	Rest

Each region has two main training days. Keep the work finite and the rest day in place. For frequent visits without this larger dose, use the short-session option (p. 41).

CHANGING PLANS

Keep the amount of work close to what you currently tolerate. Moving from two or three days to four, five, or six? Begin with about half to two-thirds of the listed sets, or the getting-started phase as needed. Build only while recovery remains good.

The four- and five-day plans are already matched at the standard set count. These schedules show different ways to organize training; they do not prove that one split is superior. [A15]

● THE WORKOUT LIBRARY

Open the cards for your plan

Each card is a complete session. Click the card name, or use the PDF bookmarks. Apply your current phase and readiness rules before using its standard sets.

Card	Session	Working sets	Typical time
F2-A	Full body A	19	60-80 minutes
F2-B	Full body B	19	60-80 minutes
F3-A	Full body A	15	45-60 minutes
F3-B	Full body B	16	50-65 minutes
F3-C	Full body C	17	50-65 minutes
U-A	Upper body A	17	50-70 minutes
U-B	Upper body B	19	55-75 minutes
L-A	Lower body A	15	50-70 minutes
L-B	Lower body B	16	50-70 minutes
Push-A	Push A	11	30-45 minutes
Pull-A	Pull A	10	30-45 minutes
Push-B	Push B	9	25-40 minutes
Pull-B	Pull B	10	30-45 minutes

READ THE CARD THIS WAY

"3 sets, 8-12 reps" means three groups of eight to twelve controlled movements. "2-3 good reps left" means stop with that estimated reserve. "Control" means stop before trunk position changes.

Warm-up sets are not included in the totals. Repetitions marked "per side" are completed on both sides. The lower-body guide ([p. 30](#)) and upper-body guide ([p. 31](#)) explain the movement names.

● [WORKOUT CARD / F2-A](#)

Full body A

F2-A

60-80 minutes

19 standard working sets

A complete session with squat, hinge, push and pull. This is one half of the two-day schedule, not a session to repeat six times.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Goblet squat	3	8-12	2-3	2-3 minutes
Dumbbell Romanian deadlift	2	8-12	2-3	2-3 minutes
Dumbbell bench press	3	8-12	2-3	2-3 minutes
Chest-supported row	3	8-12	2-3	2-3 minutes
Seated or lying leg curl	2	10-15	2-3	90 seconds
Dumbbell or cable lateral raise	2	12-20	2-3	60-90 seconds
Standing or seated calf raise	2	10-20	2-3	60-90 seconds
Dead bug	2	6-10 per side	Control	45-60 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

The lower-body exercises come first here. When upper-body progress is the main goal, the bench press may be moved first; keep that order consistent for the block.

Equipment or movement changes

No bench: use a floor press. No leg-curl machine: use a securely anchored band curl or a controlled sliding curl only when you can manage it.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD / F2-B](#)

Full body B

F2-B

60-80 minutes

19 standard working sets

The second full-body session. Allow at least one non-lifting day between F2-A and F2-B whenever practical.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Supported split squat	3	8-12 per side	2-3	2-3 minutes
Hip thrust or glute bridge	2	10-15	2-3	2-3 minutes
Incline dumbbell press	3	8-12	2-3	2-3 minutes
Lat pulldown	3	8-12	2-3	2-3 minutes
Seated or lying leg curl	2	10-15	2-3	90 seconds
Dumbbell or cable lateral raise	2	12-20	2-3	60-90 seconds
Standing or seated calf raise	2	10-20	2-3	60-90 seconds
Pallof press	2	8-12 per side	Control	45-60 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

The two-day base has no separate arm exercises. Presses and pulls already load the arms. Add a small amount of curls or pressdowns only when time, goals and recovery justify it.

Equipment or movement changes

Balance limits the split squat: hold a fixed support or use a leg press. No incline bench: repeat the flat or floor press. No safe vertical pull: use a supported row temporarily.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD / F3-A](#)

Full body A

F3-A

45-60 minutes

15 standard working sets

A balanced start to the three-day rotation. The next session is F3-B, not another copy of this workout.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Goblet squat	3	8-12	2-3	2-3 minutes
Dumbbell Romanian deadlift	2	8-12	2-3	2-3 minutes
Dumbbell bench press	3	8-12	2-3	2-3 minutes
Chest-supported row	3	8-12	2-3	2-3 minutes
Standing or seated calf raise	2	10-20	2-3	60-90 seconds
Dead bug	2	6-10 per side	Control	45-60 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

Do not add the exercises from the two-day plan. This rotation has its own weekly dose; combining templates can unintentionally double the work.

Equipment or movement changes

Use a leg press instead of the squat when that is the more comfortable stable option. A one-arm supported dumbbell row can replace the chest-supported row.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD / F3-B](#)

Full body B

F3-B

50-65 minutes

16 standard working sets

A lower-body and vertical-pull emphasis with modest overhead work. Use a supported stance where balance is the limiting factor.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Supported split squat	3	8-12 per side	2-3	2-3 minutes
Hip thrust or glute bridge	2	10-15	2-3	2-3 minutes
Lat pulldown	3	8-12	2-3	2-3 minutes
Seated dumbbell shoulder press	2	8-12	2-3	2-3 minutes
Seated or lying leg curl	2	10-15	2-3	90 seconds
Palloy press	2	8-12 per side	Control	45-60 seconds
Dumbbell or cable curl	2	10-15	2-3	60-90 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

Support is not cheating. Removing a balance limitation can let the intended muscles do the work without turning every set into a stability test.

Equipment or movement changes

An uncomfortable overhead press can be replaced by a tolerable high-incline press or omitted pending assessment. Change the weekly chest and shoulder set count when you change the movement.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD / F3-C](#)

Full body C

F3-C

50-65 minutes

17 standard working sets

Finish the three-day rotation without chasing exhaustion. Resume F3-A after the next rest interval.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Leg press	3	10-15	2-3	2-3 minutes
Seated or lying leg curl	2	10-15	2-3	90 seconds
Incline dumbbell press	3	8-12	2-3	2-3 minutes
Chest-supported row	3	8-12	2-3	2-3 minutes
Dumbbell or cable lateral raise	2	12-20	2-3	60-90 seconds
Standing or seated calf raise	2	10-20	2-3	60-90 seconds
Cable or band triceps pressdown	2	10-15	2-3	60-90 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

When the last session of the week is rushed, keep the main lower-body, press and pull work. Skip smaller exercises rather than reducing every rest period to a few seconds.

Equipment or movement changes

At home, a supported split squat or squat variation can replace the leg press. Use a secure band pressdown or a light dumbbell triceps movement that is comfortable.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD](#) / [U-A](#)

Upper body A

U-A

50-70 minutes

17 standard working sets

Use with L-A and L-B in the four- or five-day plan. This card already contains substantial pressing and pulling.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Dumbbell bench press	3	6-10	2-3	2-3 minutes
Chest-supported row	3	8-12	2-3	2-3 minutes
Seated dumbbell shoulder press	2	8-12	2-3	2-3 minutes
Lat pulldown	3	8-12	2-3	2-3 minutes
Dumbbell or cable lateral raise	2	12-20	2-3	60-90 seconds
Dumbbell or cable curl	2	10-15	2-3	60-90 seconds
Cable or band triceps pressdown	2	10-15	2-3	60-90 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

The 6-10 range is an option for a technically comfortable main press, not a demand for maximal lifting. Use 8-12 during learning or when that range feels better.

Equipment or movement changes

A machine chest press can replace dumbbells. Use a cable or band row with a safe anchor if a supported row station is unavailable.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD](#) / [U-B](#)

Upper body B

U-B

55-75 minutes

19 standard working sets

The second upper-body session in the four-day plan. Do not add it to the five-day plan, which splits this work across Push-B and Pull-B.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Incline dumbbell press	3	8-12	2-3	2-3 minutes
Chest-supported row	3	8-12	2-3	2-3 minutes
Lat pulldown	3	8-12	2-3	2-3 minutes
Cable or machine chest fly	2	10-15	2-3	90 seconds
Reverse fly / rear-delt machine	2	12-20	2-3	60-90 seconds
Dumbbell or cable lateral raise	2	12-20	2-3	60-90 seconds
Dumbbell or cable curl	2	10-15	2-3	60-90 seconds
Cable or band triceps pressdown	2	10-15	2-3	60-90 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

When time is short, curls and pressdowns can be alternated. Keep enough recovery before returning to the same exercise; a superset is not a race.

Equipment or movement changes

No chest-fly equipment: use two controlled push-up or press sets. That changes the additional work your triceps receive; record the substitution.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD](#) / [L - A](#)

Lower body A

L - A

50-70 minutes

15 standard working sets

The first lower-body card for the four-, five- and six-day plans. It contains the main hip hinge for those schedules.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Leg press	3	8-12	2-3	2-3 minutes
Dumbbell Romanian deadlift	3	8-12	2-3	2-3 minutes
Supported reverse lunge	2	8-12 per side	2-3	2-3 minutes
Seated or lying leg curl	2	10-15	2-3	90 seconds
Standing or seated calf raise	3	10-20	2-3	60-90 seconds
Pallof press	2	8-12 per side	Control	45-60 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

Do not pursue depth or a stretch at the expense of control during the hinge. Stop at the range you can manage, and choose the load from that range rather than from the floor distance.

Equipment or movement changes

Choose a supported split squat instead of the reverse lunge when stepping is awkward. At home, use a squat variation in place of the leg press.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD](#) / [L-B](#)

Lower body B

L-B

50-70 minutes

16 standard working sets

The second lower-body card. Choose one squat variation and keep it consistent while measuring progress.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Squat to a comfortable depth	3	8-12	2-3	2-3 minutes
Hip thrust or glute bridge	3	8-15	2-3	2-3 minutes
Leg extension	2	10-15	2-3	90 seconds
Seated or lying leg curl	3	10-15	2-3	90 seconds
Standing or seated calf raise	3	10-20	2-3	60-90 seconds
Dead bug	2	6-10 per side	Control	45-60 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan (p. 9) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

The squat and hip thrust are separate exercises, not interchangeable names for the same stimulus. A replacement should preserve the movement purpose as much as practical.

Equipment or movement changes

No leg-extension machine: use a tolerable quad-focused squat or split-squat variation. No hip-thrust bench: use a loaded floor bridge.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD / PUSH - A](#)

Push A

Push-A

30-45 minutes

11 standard working sets

First push session in the six-day plan. It is deliberately shorter than an upper-body day.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Dumbbell bench press	3	6-10	2-3	2-3 minutes
Incline dumbbell press	2	8-12	2-3	2-3 minutes
Seated dumbbell shoulder press	2	8-12	2-3	2-3 minutes
Dumbbell or cable lateral raise	2	12-20	2-3	60-90 seconds
Cable or band triceps pressdown	2	10-15	2-3	60-90 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

This is not a reason to add a third chest exercise. The second push session already supplies more weekly chest work.

Equipment or movement changes

Press with machines or dumbbells according to comfort and access. A comfortable grip and stable setup matter more than using a particular piece of equipment.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD](#) / [PULL - A](#)

Pull A

Pull-A

30-45 minutes

10 standard working sets

First pull session in the six-day plan. Chest support limits unnecessary lower-back fatigue before the next leg session.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Chest-supported row	3	8-12	2-3	2-3 minutes
Lat pulldown	3	8-12	2-3	2-3 minutes
Reverse fly / rear-delt machine	2	12-20	2-3	60-90 seconds
Dumbbell or cable curl	2	10-15	2-3	60-90 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

A pull is not complete when the torso has to swing to finish. End the set while the chosen movement remains recognizable.

Equipment or movement changes

Use a supported one-arm dumbbell row, machine row or properly anchored band row. Do not improvise load-bearing door or furniture anchors.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD / PUSH-B](#)

Push B

Push-B

25-40 minutes

9 standard working sets

Use after U-A in the five-day plan, or after Push-A in the six-day plan. It is not an extra session to attach to the four-day plan.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Incline dumbbell press	3	8-12	2-3	2-3 minutes
Cable or machine chest fly	2	10-15	2-3	90 seconds
Dumbbell or cable lateral raise	2	12-20	2-3	60-90 seconds
Cable or band triceps pressdown	2	10-15	2-3	60-90 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan (p. 9) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

Shorter sessions create room in the schedule; they do not need to be filled with extra work. Leave the gym when the planned dose is complete.

Equipment or movement changes

Replace the fly with controlled push-ups or another press when needed. Keep the number of working sets the same initially.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● [WORKOUT CARD](#) / [PULL - B](#)

Pull B

Pull-B

30-45 minutes

10 standard working sets

Use after U-A in the five-day plan, or after Pull-A in the six-day plan. The exercise order changes emphasis without changing the whole plan.

Exercise, in order	Sets	Repetitions	Good reps left	Rest
Lat pulldown	3	8-12	2-3	2-3 minutes
Chest-supported row	3	8-12	2-3	2-3 minutes
Reverse fly / rear-delt machine	2	12-20	2-3	60-90 seconds
Dumbbell or cable curl	2	10-15	2-3	60-90 seconds

Starting phase first: in weeks 1-2, use the reduced sets from the 16-week plan ([p. 9](#)) rather than automatically doing every listed set. Preparation sets are separate.

What to focus on

Keep the load, repetitions and reserve in the log. 'Back day felt hard' is useful context, but it is not enough information to guide the next progression.

Equipment or movement changes

No safe vertical-pulling setup: use a supported row and record the change. A rowing substitute covers pulling muscles but is not mechanically identical to a pulldown.

BEFORE ADDING WEIGHT

Reach the top of the range on every set with the same control and good reps left in two sessions. Then add the smallest practical amount. Core work stops before position changes.

Date / weights / last-set good reps left / next step:

[Card directory](#) · [Lower-body guide](#) · [Upper-body guide](#) · [Full workout log](#)

● KNOW THE AMOUNT OF WORK

Your weekly set totals

Calculated from the standard cards before changes. This is a tracking system, not a measurement of the exact stimulus each muscle receives.

Muscle / category	2 days	3 days	4 days	5 days	6 days
Quads / front of thighs	6	9	10	10	10
Hamstrings / back of thighs	6	6	8	8	8
Glutes / buttocks	7	7	8	8	8
Chest	6	6	8	8	10
Back	6	9	12	12	12
Delts / shoulders	4	4	8	8	10
Biceps / front of upper arms	0	2	4	4	4
Triceps / back of upper arms	0	2	4	4	4
Calves	4	4	6	6	6
Core / trunk	4	4	4	4	4
Total working sets	38	48	67	67	71

How the count works: presses and chest flies count for chest; rows and pulldowns for the combined back category; overhead presses and raises for shoulders; knee-dominant work for quads; Romanian deadlifts and leg curls for hamstrings. Split squats/lunges, Romanian deadlifts, and thrusts/bridges count for glutes. Some exercises count for more than one category, so the muscle rows do not add up to the total number of performed sets.

What is not fully counted: glute work during squats and leg presses, overlap among back muscles, and arm work during presses or pulls. Arm rows count separate arm exercises only. Zero direct arm sets does not mean zero arm training.

Optional partial credit: count a pull as about half an indirect biceps set and a press as about half an indirect triceps set. The two-day plan then provides about three indirect sets for each arm muscle. Choose one convention and stick to it.

[S12]

THE SMALLER DOSE IS INTENTIONAL

The standard plans are not all maximum-muscle-growth routines and do not give every muscle 10 or more direct sets. Use the smallest dose that is working, then add targeted work only when progress and recovery justify it.

● GYM, HOME, OR LIMITED EQUIPMENT

Swap the movement thoughtfully

Choose a comfortable version with a similar purpose. Keep the working-set count the same at first, and update the weekly totals when the main muscle emphasis changes.

Movement purpose	Gym options	Home or limited-equipment option
Squat / knee-dominant	Leg press, hack squat, goblet squat	Goblet squat, supported split squat, or chair sit-to-stand; add load when ready.
Hip hinge	Dumbbell Romanian deadlift, cable pull-through	Dumbbell or securely loaded bag Romanian deadlift. Learn the unloaded movement first.
Hip extension	Hip-thrust machine or barbell hip thrust	Loaded floor bridge.
Knee flexion / leg curl	Seated or lying leg-curl machine	Securely anchored band curl; sliding curl only when you can control it.
Horizontal push	Dumbbell or machine chest press	Floor press or incline push-up on a stable fixed surface.
Overhead / high-angle push	Machine or dumbbell shoulder press	Seated dumbbell press; a comfortable inclined press is useful but not identical.
Horizontal pull	Chest-supported or cable row	Supported one-arm dumbbell row or securely anchored band row.
Vertical pull	Pulldown or assisted pull-up	Band pulldown with a rated overhead anchor; use a row temporarily if no safe setup exists.
Shoulders and arms	Cables, machines, dumbbells	Dumbbell or safely anchored band variations.
Calves	Standing or seated calf machine	Supported calf raise, with body weight or a held load.
Trunk control	Cable Pallof press, dead bug	Safely anchored band Pallof press or dead bug.

SAFE EQUIPMENT COMES FIRST

Inspect bands and use anchors rated for the exercise. Do not attach resistance to unstable furniture or improvise a hanging setup. With no safe pulling resistance, unresisted arm motions cannot fully reproduce the back exercises.

● MOVEMENT INSTRUCTIONS / LOWER BODY

Learn the movement before loading it

Exercise	How to do it	Make it easier or progress it
Squat / sit-to-stand	Use a stable foot position and a comfortable depth. Bend your knees while keeping the torso controlled. A stable chair can provide a target.	Begin with support or a higher chair. Lower the target or add a little weight only after control is consistent.
Romanian deadlift	Soften the knees and move the hips backward. Keep the weights close. Stop when going deeper would change your back position or balance.	Practice without weight, then add light dumbbells. Do not force depth.
Split squat / reverse lunge	Use a split stance, or step back. Hold a stable support when useful. Move through a comfortable knee and hip range on both sides.	Begin with support or a shorter range. Useful support does not have to be removed to make the exercise count.
Hip thrust / glute bridge	Place the feet securely. Use a stable, secured bench for an elevated version. Lift by extending the hips, not arching the lower back.	Start on the floor. Add a securely placed, padded load when ready.
Leg curl / leg extension	Align the machine as instructed. Keep the torso supported and move smoothly through a comfortable range.	Start light. Avoid momentum and forced end positions.
Calf raise	Use stable hand support. Raise and lower under control rather than bouncing.	Begin with both legs and a modest range. Increase weight or range as tolerated.

WRITTEN INSTRUCTIONS HAVE LIMITS

These cues do not diagnose knee, hip, or back pain. Persistent symptoms, fear of falling, or difficulty holding a stable position are reasons to seek coaching or clinical assessment before increasing the challenge.

Movement descriptions are coaching instructions. Fracture history, rehabilitation needs, or major mobility limitations require individually adapted guidance. [\[A10, A11\]](#)

● MOVEMENT INSTRUCTIONS / UPPER BODY AND CORE

Keep the movement controlled

Exercise	How to do it	Useful adaptation
Bench / incline / floor press	Stabilize your torso, use a comfortable grip, and lower the weight under control. Do not chase a deeper stretch by losing shoulder position.	Use a machine, neutral-grip dumbbells, or a floor press when more comfortable.
Supported row	Support your torso or one hand. Pull without swinging the body or thrusting the head forward.	Use a machine or chest support to reduce balance or lower-back demands.
Pulldown	Use a comfortable grip and pull in front of the body with control. Do not yank the resistance or force an extreme finish.	Use a secure band or assisted variation. A row is a temporary alternative, not the same movement.
Shoulder press / raises	Use a comfortable path and weight. Do not force an overhead position. Raises need much less weight than presses.	Change grip or shorten the arc. A suitable inclined press may help; persistent symptoms need assessment.
Curls / triceps pressdowns	Keep the intended joint movement controlled rather than swinging the whole body.	Use dumbbells or bands with smaller resistance increases.
Dead bug	Keep a comfortable trunk position while moving opposite arm/leg pairs, or an easier limb combination. Breathe normally.	Shorten the reach or move fewer limbs. Stop before your trunk loses control.
Pallof press	Stand or sit side-on to a secure band or cable anchor. Resist turning while pressing your hands away from the body.	Use less resistance, a shorter reach, or a supported stance.

SEATED OR WHEELCHAIR-BASED TRAINING

Some upper-body patterns can be adapted with suitable equipment. Transfers, positioning, pressure care, and the lower-body plan still need individual assessment. These cards are not a complete disability-specific program.

● THE SAME FRAMEWORK, ADAPTED TO YOU

Men, women, and life stage

Your ability and response determine the dose, not a rule that women need light weights or men need six days. Both can respond meaningfully to progressive training. [\[A4, A5\]](#)

Person or circumstance	What stays	What may change
Healthy adults of any sex	Main movement patterns and gradual progression.	Starting weight, equipment fit, time, preferences, and recoverable workload.
Adults 40-64	Meaningful strength training.	The plan reflects your recent training, sleep, symptoms, and life demands, not age alone.
Healthy, capable adults 65+	A suitable version of the framework may still fit.	Use a conservative start where needed; emphasize balance and stable setups. [A9]
Menstrual symptoms	Normal training is available when tolerated.	Adjust to actual symptoms; no mandatory cycle-phase calendar. [A6]
Perimenopause / menopause	Strength and muscle remain useful goals.	Review sleep, symptoms, and bone-health needs. Reduce the dose temporarily when recovery is lower. [A11]
Pregnancy / postpartum	Activity may remain appropriate with guidance.	Use an individualized prenatal/postnatal plan rather than automatically adopting these cards. [A7]

Pelvic-floor symptoms: new or persistent leakage, heaviness, or pelvic pain deserves assessment. Reduce movements that provoke symptoms and seek pelvic-health guidance rather than relying on generic bracing advice.

Hormone treatment: this program does not require or adjust testosterone, menopausal hormone therapy, or another medicine. Treatment decisions stay with the appropriate clinician.

CHOOSE THE PERSON'S GOAL

A woman can prioritize strength-focused pressing. A man can prioritize glutes or balance. Choose the goal, count the work, and adjust to the actual response, not a stereotype.

● HEALTH, JOINTS, AND RECOVERY

Change the dose or setup when needed

Constraint	A practical change	When more help is needed
Low confidence or deconditioning	Start with one working set, stable equipment or support, and shorter sessions.	Get coaching when setup or balance is uncertain.
Joint discomfort	Reduce weight or range; try a comfortable stable variation and record symptoms.	Sharp, persistent, worsening, or swelling-related pain needs assessment.
Osteoporosis / fracture history	Use guided progression and stable movement. Adapt impact and spinal movement.	Do not add jumping or loaded end-range spinal movements from a generic template. [A11]
Chronic disease / medication effects	Coordinate intensity, monitoring, and precautions with the treating clinician.	An easy session is not clearance for an unsafe activity. [A10]
Limited sleep / major stress	Reduce sets, leave more good reps, and keep familiar exercises.	Do not dismiss persistent unexplained fatigue or severe sleep symptoms as poor motivation.
Frailty / recurrent falls / major mobility limits	Use supervised strength and balance work adapted to the person.	A high-frequency split is not a default rehabilitation plan. [A9, A11]

Example: returning after inactivity

Keep two training days, but choose a supported squat, light floor press, supported row, and tolerable hip and back-of-leg exercises. Begin with one working set each and increase only after you are recovering well. This is a planning example, not an injury treatment.

Example: an experienced lifter in a demanding week

Keep the same four-day order but remove one set from each exercise and skip optional additions. Keep control and an appropriate challenge. Resume the normal dose when your performance and recovery return to their usual pattern.

ADAPTABLE DOES NOT MEAN UNIVERSAL

Many starting points can fit this framework. A personal assessment is still needed for some conditions, disabilities, pregnancies, and injuries.

● CHOOSE ONE MAIN PRIORITY

Match the plan to your goal

Main goal	Training emphasis	Food direction
Regain consistency	Use a manageable schedule and simple, repeatable exercises.	Regular meals and a feasible protein target before detailed calculations.
Maintain strength and capacity	Keep meaningful resistance at the smallest dose that maintains your marker exercises.	Eat near observed maintenance; review function and recovery.
Build muscle	Progress the standard work; add targeted sets only when justified.	Begin near maintenance or add a small amount of food when appropriate.
Lose fat, preserve muscle	Keep useful resistance; reduce sets if recovery falls. Do not replace lifting with exhaustive circuits.	Use a modest monitored deficit, enough protein, and regular performance checks.
Emphasize one muscle	Add a small amount of work for one priority after a stable base block.	Keep total food and protein appropriate. No body-part supplement is needed.

A conservative muscle-gain starting point

As a coaching starting point, when more food is needed, try about 100-250 calories per day above observed maintenance, or one comparable portion addition. Review the trend for two to three weeks before changing it again. This is not an established optimum.

A conservative fat-loss starting point

As a coaching starting point, a reduction around 10-15% from observed maintenance may be manageable for many healthy adults. It is not appropriate for every person or medical situation. Keep strength and recovery in the review. Do not treat the research’s 500-calorie group-level estimate as an exact personal cutoff. [S65]

As a coaching starting point for intentional fat loss, about 0.25-0.5% of body weight per week is one initial monitoring range. Muscle-focused weight gain should generally be slower. These are program guides, not medical limits, and clinician-led care takes priority.

ONE PHASE, ONE MAIN PRIORITY

Maximal muscle gain and aggressive weight loss compete with one another. Decide what you want this block to achieve, then judge the plan against that goal.

● TOTAL FOOD BEFORE EXACT RATIOS

Adjust food without a false formula

Use your usual intake and your actual response as a starting point. A single scale reading cannot tell you your calorie needs.

Step	What to do
1. Establish a baseline	When weight has been stable and eating reasonably consistent, use that pattern as a starting point. A professional estimate helps when there is no reliable baseline.
2. Observe for 2-3 weeks	When weighing is appropriate, use consistent conditions and weekly averages. Record appetite, performance, and recovery.
3. Apply your goal	Keep portions steady, make a small addition for gain, or a modest reduction for fat loss. Avoid aggressively changing both diet and training at once.
4. Review the response	When the trend is off target and the plan is being followed, change about 100-200 calories per day or one comparable portion.
5. Give it time	Allow another 2-3 weeks when appropriate. Symptoms or rapid unintended loss need earlier review.

No calorie counting required

Use three or four consistent eating occasions. Include a protein-rich food, produce, a suitable carbohydrate source, and a moderate amount of fat. Adjust one repeatable portion at a time and watch the trend. This is less numerically precise, but can be easier to maintain.

The original draft's "45 kcal/kg fat-free mass for maintenance" is not a calorie prescription here. Energy availability subtracts exercise energy before dividing by fat-free mass; it is not the same as total daily energy use. [A2]

KEEP THE FOOD PLAN SAFE

Do not start a self-directed deficit when underweight, pregnant, recovering from illness, unintentionally losing weight, or experiencing disordered eating. A dietitian can build an approach that does not rely on weighing or calorie tracking.

● PROTEIN MADE PRACTICAL

Set a realistic daily target

For generally healthy adults lifting regularly, about 1.6 g/kg/day is the program’s practical starting target. A feasible 1.2-1.6 range may be the first step; some consistent trainees use about 1.6-2.0. Higher is not automatically better. [S28, S29, S31, S66]

Example body weight	At 1.2 g/kg	At 1.6 g/kg	At 2.0 g/kg	0.4 g/kg at a meal
60 kg / 132 lb	72 g	96 g	120 g	24 g
80 kg / 176 lb	96 g	128 g	160 g	32 g
100 kg / 220 lb	120 g	160 g	200 g	40 g

Convert pounds to kilograms: pounds ÷ 2.205. Significant obesity, underweight, fluid retention, or clinical disease may require a professionally chosen weight basis or a directly set target. Do not automatically use the highest number.

DAILY TOTAL AND MEAL TOTAL ARE DIFFERENT

Four meals at 0.4 g/kg give 1.6 g/kg for the day. Three give 1.2. With only three meals, use larger protein portions or a snack when needed. A smaller meal is not wasted. [S10, S35, S38]

Eating pattern	Possible protein anchors
Omnivorous	Fish, poultry, lean meat, eggs, dairy, and tolerated plant foods.
Vegetarian / vegan	Soy foods, beans, lentils and other legumes, suitable grains, and a tolerated protein blend when helpful.
Low appetite	Smaller meals or snacks, softer protein-rich foods, yogurt, or a shake when tolerated.
Allergy-aware	Use only tolerated foods. Read ingredients and avoid cross-contact; no food is safe for every reader.

Kidney exception: these training targets are not for automatic use in chronic kidney disease. Follow your clinician’s or renal dietitian’s plan. [A3]

● TURN A TARGET INTO FOOD

Build complete meals you enjoy

These are meal-building examples, not standardized nutrient analyses. Portions, brands, and preparation change the totals. Use food labels or a reliable food database for the protein portion.

Meal	Omnivorous example	Plant-based example
Breakfast	Greek yogurt or eggs, with oats or toast and fruit. Choose the protein portion first.	Tofu scramble or protein-containing soy yogurt, with oats and fruit. Add another tolerated protein source as needed.
Lunch	Chicken, fish, or lean meat with rice or potatoes and vegetables.	Tofu, tempeh, or a bean/lentil combination with a grain and vegetables.
Dinner	Fish, poultry, or another protein anchor, vegetables, and a carbohydrate source.	A legume- or soy-based meal, vegetables, and grain or potatoes. Use an adequate protein portion.
Optional snack	Cottage cheese, yogurt, milk, or a protein shake with fruit.	A tolerated soy food or plant-protein shake, with fruit or another needed energy source.

EXAMPLE: A 128-GRAM PROTEIN TARGET

Four eating occasions at about 32 grams each reach the daily target. The meals can change. The structure does not require animal foods, a powder, or a fixed eating window.

A fully vegan pattern also needs attention to overall nutrient adequacy, not protein alone. Choose an eating pattern that fits your allergies, culture, budget, preferences, and medical needs. [S45, S72]

Make busy days easier

Prepare two tolerated protein options, two carbohydrate options, and several vegetables. Keep one convenient backup meal available for days when work or family changes the schedule. This is a preparation strategy, not a required diet.

Around the workout

Place a normal protein-containing meal within a practical period before or after training. Add carbohydrate according to appetite and demands. There is no need to panic about missing a 30-minute window or force a large meal just before exercise. [S47, S52]

● CARBOHYDRATE, FAT, AND OPTIONAL SUPPORT

Fit the rest of the food to the plan

There is no established carbohydrate intake that every lifter must eat for muscle growth. More can support demanding training, but the evidence for independent extra growth is low-certainty. [S50, S51, S52]

Planning order: choose an appropriate calorie level, set protein, allow a reasonable amount of fat, often about 25-35% of calories here, and use carbohydrate for the remainder. Adjust to appetite, training quality, preference, and clinical guidance. [S58]

THE CALCULATION

Protein calories = grams × 4. Fat calories = grams × 9. Carbohydrate grams = (total calories - protein calories - fat calories) ÷ 4.

Calculation example only	Protein	Fat	Carbohydrate	Total
60-kg adult	96 g	60 g	219 g	1,800 kcal
80-kg adult	128 g	72 g	260 g	2,200 kcal
100-kg adult	160 g	88 g	292 g	2,600 kcal

These are arithmetic examples, not calorie prescriptions for those weights or either sex. Each total uses the 4/4/9 calculation. A person's actual maintenance needs may be very different.

Hydration

Arrive normally hydrated, drink according to thirst and conditions, and account for heavy sweating. A typical indoor lifting session often does not require a special sports drink. Prescribed fluid restrictions take priority. [S58]

Optional supplements

A protein powder can close a practical gap. Creatine monohydrate, commonly 3-5 grams daily, is optional; loading is not required, and early water-related weight gain can occur. Choose a quality-verified product and discuss relevant medical concerns with a clinician. [A13]

NOT REQUIRED

Isolated leucine tracking, branched-chain amino acids, “testosterone boosters,” fat burners, and pre-workout stimulants are not required. This program is complete without them. [A13]

● REDUCED APPETITE AND TREATMENT

Keep nutrition in the picture

This section adds practical context for reduced appetite and GLP-1 treatment. It does not select or change medications.

The additional clinical advisory emphasizes adequate nutrition, resistance training, and muscle and bone preservation during treatment. It does not prove the exact workout doses or calendar in this manual. [A12]

What is happening	A practical response
Meals feel too large	Use smaller protein-containing eating occasions. Choose tolerated foods and seek dietetic support instead of forcing oversized meals.
Nausea on training days	Train when symptoms are milder, use a smaller session, and avoid a large meal immediately beforehand. Persistent symptoms need review.
Rapid or unintended weight loss	Review food intake and the treatment plan with your clinician. Faster is not automatically better.
Strength and energy repeatedly fall	Review food, hydration, sleep, and training volume. You may need fewer sets while keeping a tolerable resistance.
Vomiting, marked dizziness, or inability to maintain intake	Do not push through a demanding session. Contact the treating clinician; seek urgent care when symptoms are severe.

Choosing a schedule: two or three days may be easier to recover from when intake is limited. An experienced person may retain more training days with fewer sets. Choose by tolerance, not the medication name.

Look beyond weight: compare marker exercises, daily function, food intake, and symptoms. A short-term “lean mass” reading is not a pure muscle measurement. [S73]

THE TREATING TEAM’S PLAN TAKES PRIORITY

Do not start, stop, or change a GLP-1 medicine from this manual. Do not apply a generic high-protein target over a kidney-specific or other medical nutrition plan.

● BUILD THE REST OF THE WEEK

Walking, balance, and recovery

Adult guidance includes at least 150 minutes of moderate aerobic activity weekly, 75 minutes vigorous, or an equivalent combination. Older adults should also include balance activity. Build from your current ability; these are not entry requirements. [A8, A9]

Starting point	First practical step	Build toward
Currently inactive	Comfortable 5-10-minute walks on several days.	Add a few minutes to selected days as tolerated.
Already walking regularly	20-30 minutes on most non-lifting days, or shorter walks around sessions.	A weekly total consistent with public-health guidance.
Lifting 4-6 days	Short walks or easy cycling around lifting; not every day needs hard conditioning.	Accumulate activity without repeatedly undermining the leg sessions.

Moderate effort: use the talk test: you can talk in phrases while breathing faster. Hard intervals are optional. When strength is the main goal and both activities must happen in one visit, put strength first.

Balance practice, when appropriate

Try a supported heel-to-toe stance or supported single-leg stance for 2-3 brief rounds per side on several days. Keep your eyes open and use a stable counter. This is not a substitute for supervised falls-prevention care. [A9, A11]

Optional controlled speed

Once basic technique is stable, try two sets of 3-5 brisk chair rises near the start of a session. Stand quickly within your ability and sit down under control. Stop if comfort or balance worsens. Jumping and ballistic lifting are not default additions. [S11]

Protect sleep

Aim for a regular sleep opportunity. Adult recommendations are generally at least seven hours, with age-specific ranges for older adults. Persistent insomnia, marked daytime sleepiness, or snoring with breathing interruptions deserves assessment. [A14]

A COMPLETE WEEK IS NOT A MAXIMAL WEEK

Lifting, walking, balance work, and rest have different jobs. Put them together in an amount you can recover from and keep doing.

● SHORT SESSIONS / SAME SMALLER DOSE

Busy weeks and travel still count

You can train more often without adopting the larger six-day plan. This example divides the two-day plan’s 38 sets into six shorter visits. Apply the starting-phase rules when new.

Day	Exercises from F2-A and F2-B	Standard sets
Monday	Goblet squat 3; dumbbell Romanian deadlift 2	5
Tuesday	Dumbbell bench press 3; supported row 3	6
Wednesday	Leg curl 2; lateral raise 2; calf raise 2; dead bug 2	8
Thursday	Supported split squat 3; hip thrust / bridge 2	5
Friday	Incline press 3; pulldown 3	6
Saturday	Leg curl 2; lateral raise 2; calf raise 2; Pallof press 2	8
Sunday	Rest or comfortable leisure activity	0

Use the parent cards’ repetitions, good-reps-left targets, and rest periods. Each visit still needs preparation. If adjacent sessions irritate the shoulders or other areas, combine smaller exercises with the main day or choose fewer visits.

Travel fallback

On two or three nonconsecutive days, choose a squat or split squat, a hip hinge or bridge, a push, and a supported pull. Do 1-2 controlled working sets of each, leaving 3-4 good repetitions. Add a leg curl when feasible. Use safe available equipment. This is a temporary reduced plan, not an equivalent muscle-growth replacement for every full schedule.

An adjustable dumbbell or securely loaded bag can provide pulling and hinging resistance; a suitable band adds options. Unloaded arm movements do not replace meaningful resistance for the back. Do not improvise unsafe anchors.

BUSY-WEEK SUCCESS

Keep a genuine but manageable amount of training. Do not attempt to recover an entire missed week in one marathon session before traveling.

● AFTER INTERRUPTIONS / AFTER WEEK 16

Keep the system working for you

Situation	What to do next
One missed session	Move to the next suitable day or continue the sequence. Do not double the next workout.
A few days away	Use the normal sequence, but make the first working set conservative and adjust to how it feels.
About 1-2 weeks away	Begin with fewer sets and slightly lighter weights. A 5-10% reduction is one useful trial, not a requirement.
Several weeks away, significant illness, or injury	Return through the starting phase and obtain clinical guidance when needed. Previous best numbers do not establish present readiness.
A persistent plateau	Check attendance, technique, effort, food, and sleep. Change one variable after identifying the likely obstacle.

After week 16, choose the next purpose

Continue: when the same exercises and dose still work, repeat another block. Maintain: remove optional work or try a smaller dose while watching the marker exercises. Specialize: add about two weekly sets for one priority muscle and review recovery. Change goals: adjust food and expectations when moving between gaining, maintaining, and losing weight.

Review rhythm: check readiness each session, progress each week, and the overall goal every four to eight weeks. These are useful management intervals, not biologically required phases.

Change an exercise when there is a reason: equipment, tolerance, motivation, or a clear goal. Start the new movement conservatively and establish a new baseline. Do not compare its weight directly with a different machine or exercise.

THE PLAN HAS THREE PARTS

The workout gives the starting instruction. The log shows your response. The review tells you what to do next. Keep all three, and the program can continue well beyond 16 weeks.

● PLAIN-LANGUAGE REFERENCE

The terms used in your program

Rep / repetition

One complete movement of an exercise.

Set

A group of repetitions before you rest.

Working set

The challenging planned set, not an easy warm-up.

Standard dose

The card's listed sets after you have built up to them.
The starting phase or a reduced day can override it.

Good reps left / RIR

The number of extra controlled repetitions you estimate you could complete.

RPE

An effort rating. Here, it is the resistance-training scale matched to good reps left.

Control

For core work: stop before your trunk position changes.

Per side

Do the listed repetitions on both sides. Three paired sets gives three sets to each limb.

Load

The amount of resistance. Record whether a dumbbell number is per hand.

Compound exercise

A movement that uses several joints and muscle groups, such as a squat or press.

Volume

The amount of training. Check whether the count is per muscle or for the whole workout.

Double progression

Add repetitions within a range, then add a little weight and rebuild repetitions.

Deload

A temporary easier period with less training demand.

RDL

Romanian deadlift: a hip-hinge movement described in the lower-body guide.

Marker exercise

An exercise you repeat with the same setup to track progress.

Maintenance / surplus / deficit

Eating about the energy you use, more than you use, or less than you use over time.

KEEP THE NAMES; UNDERSTAND THE ACTION

Exercise names help you identify the right movement. When the name is unfamiliar, read the movement guide or get coaching before adding resistance.

● WORKSHEET / COMPLETE BEFORE STARTING

Your personal setup

Keep private medical information out of shared copies. This is a planning worksheet, not a medical screening form.

Name / start date:

Main goal for this block:

Chosen plan / realistic training days:

Recent experience / current amount of weekly training:

Equipment available:

Exercise changes or professional restrictions:

Marker exercise 1 / exact setup:

Marker exercise 2 / exact setup:

Marker exercise 3 / exact setup:

Protein target / weight basis / professional advice when needed:

Food goal: maintenance / gain / loss / clinician-directed:

First review date / person supporting the plan:

Choose your minimum version now

During a difficult week, I will keep:

I will reduce or remove:

ONE AGREEMENT WITH YOURSELF

I will not make up missed work by doubling sessions. I will adjust the plan and return to the next manageable session.

● WORKSHEET / COPY FOR EACH SESSION

Your reusable workout log

Date: _____ Plan / card: _____ Unit: lb / kg

Readiness: usual / reduced / not appropriate Sleep: _____

[illegible]

Different repetitions on each side / added or omitted sets:

Exercise changes / what changed from the previous session:

Symptoms or unusual fatigue during or after training:

Next time: repeat / add reps / add weight / reduce work / seek advice:

Record per-dumbbell weights clearly. For one-sided movements, record reps per side and note any difference. Additional sets can go in the notes. Use as many copies of this page as needed.

● WORKSHEET / LOOK AT THE PATTERN

Your 16-week review log

A single bad day is not a declining trend. Use short notes. Body weight is optional and can be recorded separately when useful.

Week	Sessions done / planned	Performance trend	Recovery / symptoms	Next decision
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				

AT WEEKS 4, 8, 12, AND 16

Compare the same marker exercises at a similar effort. Review attendance, food intake, and recovery. Decide whether to keep the dose, add a small targeted amount, or reduce it. No maximum-strength test is required.

The main pattern I notice:

● WORKSHEET / FOOD AND CONTINUATION

Your food plan and next block

Protein planning

Appropriate weight basis in kg, or a professionally set target:

Chosen grams per kg × weight basis = daily protein grams:

Meal / snack opportunities and approximate protein at each:

Tolerated backup foods / ingredient and allergy checks:

Energy and recovery

Current food pattern / maintenance estimate / method:

Weight trend when relevant / appetite / training performance:

One food adjustment to test, if needed:

Sleep, hydration, or symptoms needing attention:

The next four to eight weeks

Keep	Change	Why

THE FINAL DECISION RULE

When progress and recovery are good, keep what is working. When they are not, change the smallest relevant part, observe the response, and get professional help for symptoms or medical needs.

● SOURCES / ORIGINAL REVIEW

Research sources

S labels retain the numbering of the original evidence review. The selected references below support the text in this edition.

- S10** Protein Requirements for Master Athletes: Just Older Versions of Their Younger Selves. Moore DR. Sports Medicine (Auckland, N.Z.). 2021;51(Suppl 1):13-30. doi:10.1007/s40279-021-01510-0. [Source link](#)
- S11** American College of Sports Medicine Position Stand. Resistance Training Prescription for Muscle Function, Hypertrophy, and Physical Performance in Healthy Adults: An Overview of Reviews. Currier BS, D'Souza AC, Fiatarone Singh MA, et al. Medicine and Science in Sports and Exercise. 2026;58(4):851-872. doi:10.1249/MSS.0000000000003897. [Source link](#)
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- S28** Evidence-Based Recommendations for Optimal Dietary Protein Intake in Older People: A Position Paper From the PROT-AGE Study Group. Bauer J, Biolo G, Cederholm T, et al. Journal of the American Medical Directors Association. 2013;14(8):542-59. doi:10.1016/j.jamda.2013.05.021. [Source link](#)

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- S31 A Systematic Review, Meta-Analysis and Meta-Regression of the Effect of Protein Supplementation on Resistance Training-Induced Gains in Muscle Mass and Strength in Healthy Adults. Morton RW, Murphy KT, McKellar SR, et al. *British Journal of Sports Medicine*. 2018;52(6):376-384. doi:10.1136/bjsports-2017-097608. [Source link](#)
- S35 Dose-Dependent Increases in Whole-Body Net Protein Balance and Dietary Protein-Derived Amino Acid Incorporation Into Myofibrillar Protein During Recovery From Resistance Exercise in Older Men. Holwerda AM, Paulussen KJM, Overkamp M, et al. *The Journal of Nutrition*. 2019;149(2):221-230. doi:10.1093/jn/nxy263. [Source link](#)
- S38 Even or Skewed Dietary Protein Distribution Is Reflected in the Whole-Body Protein Net-Balance in Healthy Older Adults: A Randomized Controlled Trial. Agergaard J, Justesen TEH, Jespersen SE, et al. *Clinical Nutrition* (Edinburgh, Scotland). 2023;42(6):899-908. doi:10.1016/j.clnu.2023.04.004. [Source link](#)
- S45 A Well-Balanced Vegan Diet Does Not Compromise Daily Mixed Muscle Protein Synthesis Rates When Compared With an Omnivorous Diet in Active Older Adults: A Randomized Controlled Cross-Over Trial. Domić J, Pinckaers PJ, Grootswagers P, et al. *The Journal of Nutrition*. 2025;155(4):1141-1150. doi:10.1016/j.tjnut.2024.12.019. [Source link](#)
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- S50 The Effect of Carbohydrate Intake on Muscle Hypertrophy: A Systematic Review and Meta-analysis. Henselmans M, Vårvik FT, Izquierdo M. *Sports Medicine* (Auckland, N.Z.). 2026;56(3):691-702. doi:10.1007/s40279-025-02341-z. [Source link](#)

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- S58 American College of Sports Medicine Joint Position Statement. Nutrition and Athletic Performance. Thomas DT, Erdman KA, Burke LM. Medicine and Science in Sports and Exercise. 2016;48(3):543-68. doi:10.1249/MSS.0000000000000852. [Source link](#)
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- S73 International Society of Sports Nutrition Position Stand: Diets and Body Composition. Aragon AA, Schoenfeld BJ, Wildman R, et al. Journal of the International Society of Sports Nutrition. 2017;14:16. doi:10.1186/s12970-017-0174-y. [Source link](#)

● SOURCES / ADDITIONAL CONTEXT

Additional guidance

A labels identify studies and official guidance added to the original review, including safety and adaptations for different needs.

- A2 Mountjoy M, Ackerman KE, Bailey DM, et al. 2023 IOC consensus statement on Relative Energy Deficiency in Sport (REDs). British Journal of Sports Medicine. 2023;57:1073-1097. doi:10.1136/bjsports-2023-106994. [Source link](#)
- A3 KDIGO. 2024 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. Kidney International. 2024;105(Suppl 4S):S117-S314. Protein recommendations 3.3.1. [Source link](#)
- A4 Roberts BM, Nuckols G, Krieger JW. Sex Differences in Resistance Training: A Systematic Review and Meta-Analysis. Journal of Strength and Conditioning Research. 2020. doi:10.1519/JSC.0000000000003521. [Source link](#)
- A5 Refalo MC, et al. Sex differences in absolute and relative changes in muscle size following resistance training: a systematic review with Bayesian meta-analysis. 2025. PMID:40028215. [Source link](#)
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Additional guidance / continued

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- A10** Riebe D, Franklin BA, Thompson PD, et al. Updating ACSM's Recommendations for Exercise Preparticipation Health Screening. *Medicine & Science in Sports & Exercise*. 2015;47:2473-2479. doi:10.1249/MSS.0000000000000664. [Source link](#)
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Additional guidance / continued

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- A15** Ramos-Campo DJ, et al. Efficacy of Split Versus Full-Body Resistance Training on Strength and Muscle Growth: A Systematic Review With Meta-Analysis. *Journal of Strength and Conditioning Research*. 2024. PMID:38595233. [Source link](#)
- A16** Robinson ZP, Pelland JC, Remmert JF, et al. Exploring the Dose-Response Relationship Between Estimated Resistance Training Proximity to Failure, Strength Gain, and Muscle Hypertrophy: A Series of Meta-Regressions. *Sports Medicine*. 2024;54:2209-2231. doi:10.1007/s40279-024-02069-2. [Source link](#)
- A17** Chaves TS, et al. Effects of Resistance Training Overload Progression Protocols on Strength and Muscle Mass. *International Journal of Sports Medicine*. 2024;45(7):504-510. doi:10.1055/a-2256-5857. [Source link](#)
- A18** Refalo MC, et al. Similar muscle hypertrophy following eight weeks of resistance training to momentary muscular failure or with repetitions-in-reserve. 2024. PMID:38393985. [Source link](#)

HEALTH, SAFETY, AND RESPONSIBILITY

This guide provides general education about strength training and nutrition. It is not personalized medical care, diagnosis, treatment, rehabilitation, or a substitute for advice from a qualified professional. If you have a medical condition or injury, are pregnant or postpartum, take medication, or are unsure whether these recommendations suit you, speak with a qualified healthcare professional before making changes.

Start gradually, use proper technique, and choose exercises and loads appropriate for your ability. Exercise and dietary changes carry risk, and individual results vary. Stop if you experience pain, dizziness, or unusual shortness of breath, and seek medical advice. Get urgent help for chest pain or other serious symptoms. Check with a healthcare professional before using supplements because they can interact with medicines. You are responsible for deciding whether and how to use this information in light of your circumstances.