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BenzoTaper

80/20 SMART-TAPER

USER GUIDE

80/20 Smart-Taper

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* Zolpidem **(Ambien)** and Zopiclone **(Imovane)** are technically non-benzodiazepine sedative-hypnotics.

Please Read This First

NO MEDICAL, PHARMACEUTICAL OR DIAGNOSTIC ADVICE

BenzoTaper's **80/20 Smart-Taper** is a patient-driven medication tracking tool based on widely available public tapering information. It does not provide medical, pharmaceutical, diagnostic or similar information. It is not a substitute for care from a doctor, pharmacist, or other qualified healthcare professional. Always talk to your prescriber before starting, changing, or stopping any medication, such as beginning a taper. Any Diazepam amount it shows for another medication is an estimate only based on public information and must be confirmed with a healthcare professional. If during a taper you experience severe or worsening withdrawal symptoms, seizure-like symptoms, or thoughts of self-harm, contact a medical professional right away or emergency medical services.

What BenzoTaper Is

- A **tracker**. It turns the plan you and your prescriber agree on into a day-by-day schedule.
- It shows which tablets to take each day
- It helps you keep track of prescriptions, and to pause or change your pace when you need to according to your prescriber's directions

What BenzoTaper Is Not

- **It is not medical, pharmaceutical, or diagnostic advice. It does not tell you whether to taper, or how fast.**
- **It does not replace your doctor, nurse practitioner or pharmacist.**

In This Guide

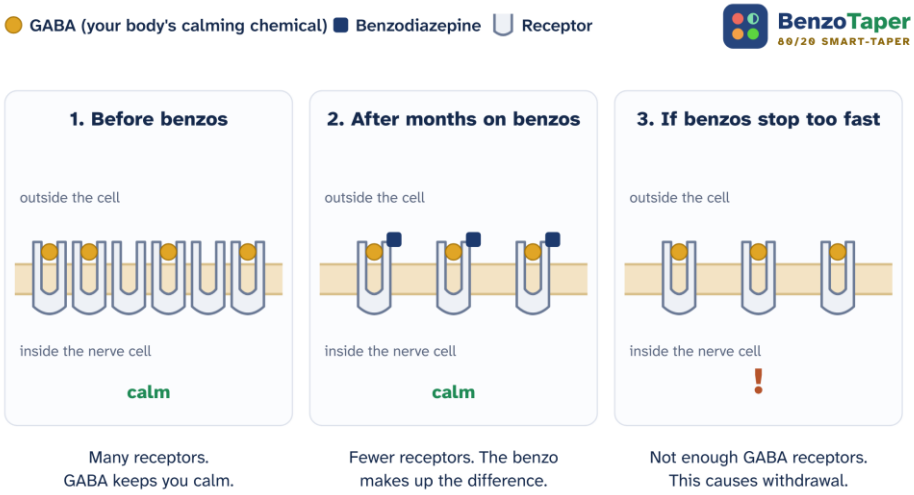
1. **Understanding your taper.** Why stopping is hard, and why many tapers use Diazepam.
2. **Getting ready.** Your tablets, the **80/20 Smart-Taper**, and saving your file.
3. **Bob's taper.** Follow Bob as he uses the sheet from start to finish.
4. **Mary's taper.** Switching one part of a dose at a time.
5. **Help.** Your taper at a glance, and common questions.

Part 1. Understanding Your Taper

Why Stopping Benzodiazepines Can Be Hard

GABA is your body's own calming chemical. It works by fitting into **receptors** on your nerve cells.

Benzodiazepines attach to a different spot on these receptors and make GABA's calming effect stronger. Over time, especially with a large dose or long-term use of a benzodiazepine, your nerve cells adjust by reducing the number of working GABA receptors.



If you stop taking your benzodiazepine too quickly, there are fewer working GABA receptors than before, so GABA's calming effect is weaker at first. A slow reduction gives your nerve cells time to build up more GABA receptors again.

THE GOOD NEWS

Your brain can adjust back. It just needs time. A slow taper gives it that time, one small step at a time. Physical dependence is not the same as addiction. Your body got used to a calming medicine - it just needs time to get used to less of it via new GABA receptors being built up.



A proper taper gives your nerve cells time to increase the number of GABA receptors.

What "Half-Life" Means

A medicine's **half-life** is how long it takes for half of it to leave your body.

For example, if a medicine's half-life is 12 hours:

Time after one dose	How much is left
12 hours	Half (50%)
24 hours	Half of the above half, or a quarter (25%)
36 hours	Half of the above, or an eighth (12.5%)
48 hours	Half of the above, or about 6%

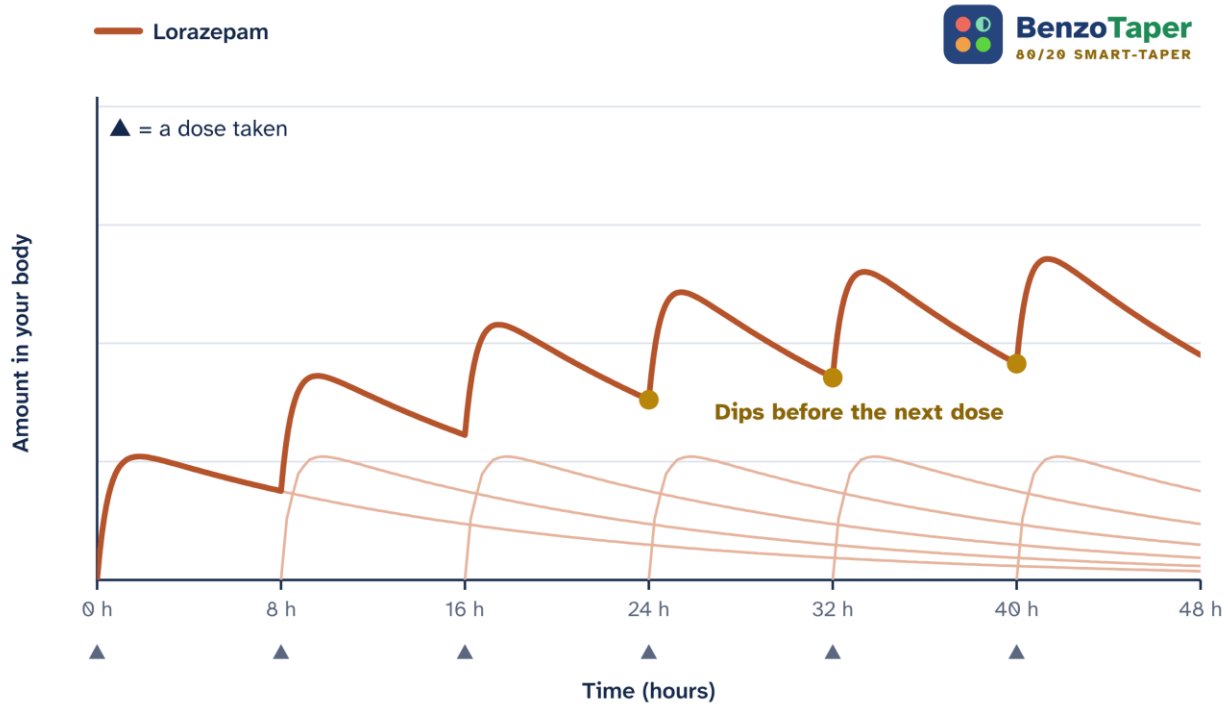
After each half-life period, half of what is **left** goes away. So, the amount drops fast at first, then more slowly.

Lorazepam's half-life is about **12 hours**.

Diazepam's is about **48 hours**, and it breaks down into another calming substance that lasts even longer.

That difference matters a lot during a taper. The next pages show why with a comparison between the short half-life benzodiazepine **Lorazepam** and the long half-life benzodiazepine **Diazepam**, which is the one the **80/20 Smart-Taper uses.**

Lorazepam: Quick Ups and Downs



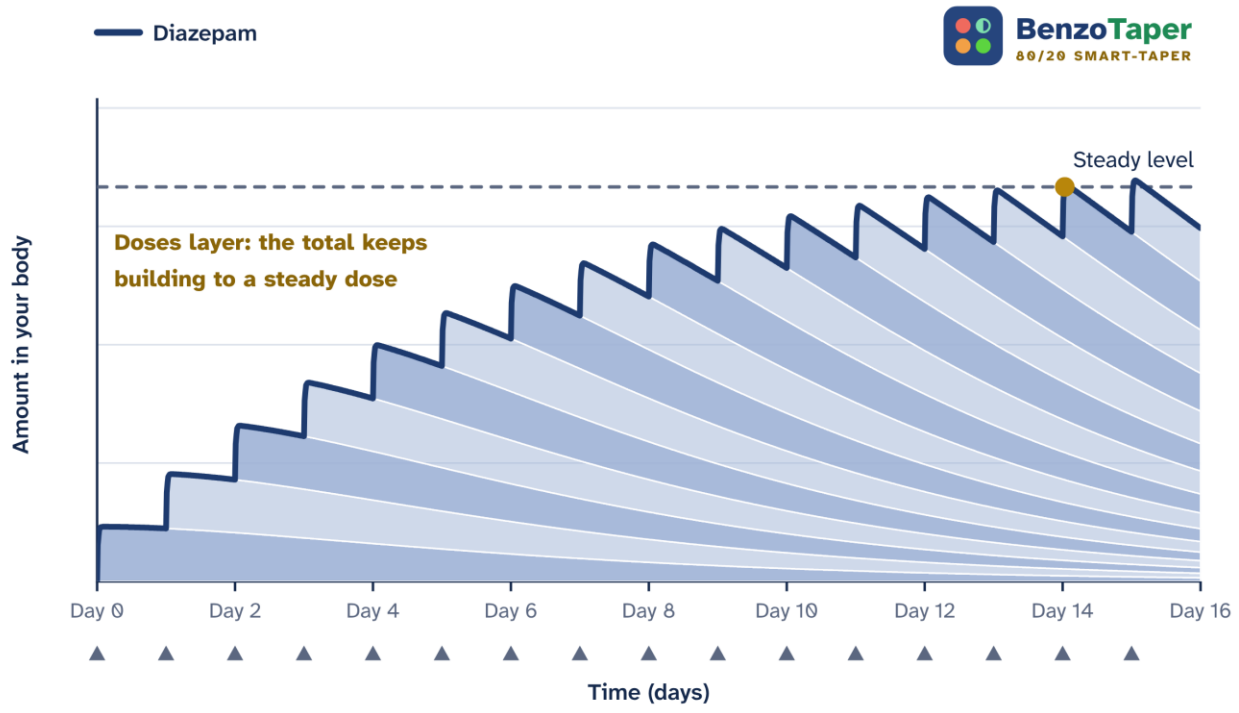
Thin lines are single doses. The thick line is the total in your body. A simplified example.

Lorazepam leaves your body fairly fast. Many people take it 2 or 3 or more times a day.

The amount in your body goes up after each dose, then **quickly drops due to its short half-life**. It can dip before your next dose which can cause irritable symptoms, causing you to want to take more.

With long-lasting Diazepam, the amount in your body stays much steadier, so there is much less of a decrease between doses.

Diazepam: Doses Layer on Top of One Another – Getting to a Stable Dose



Each shaded band is one day's dose. The thick line is the total. A simplified example.

Diazepam stays in your body for days. Each dose is still working when you take the next one, so the amount in your body is smoother. That can make each taper step easier.

The doses layer on top of each other. The amount in your body rises slowly over about the first two weeks, then stays steady.

Diazepam: Often Just One Dose a Day

Lorazepam leaves your body quickly, so some people take it **2, 3 or even 4 times a day.** Each dose **wears off in a few hours**, and the day gets planned and **ritualized** around the next tablet.

Diazepam lasts much longer. People who switch to Diazepam are often surprised - **and relieved** - to find they can often take their whole Diazepam dose **just once a day** at **bedtime.**

One dose a day makes things easier: fewer tablets to remember, fewer ups and downs during the day, and no need to plan your day around your next dose and **no ritualization.**

Lorazepam



A short half-life means taking multiple doses a day.

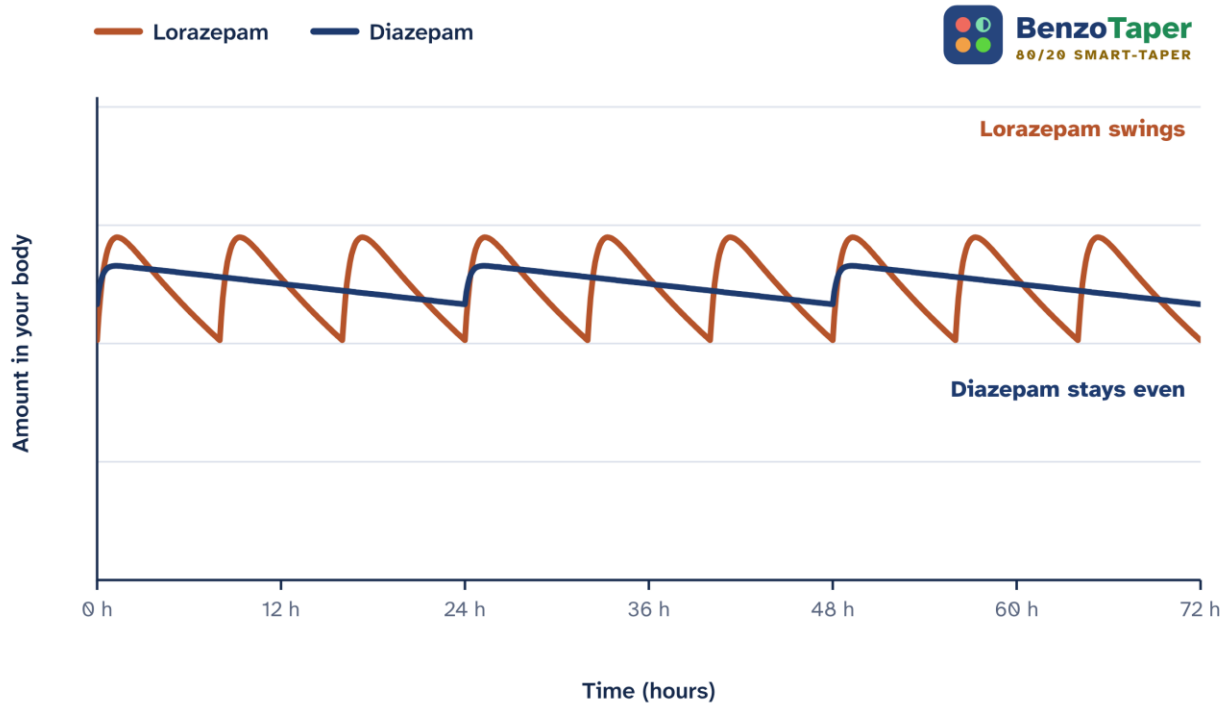
Diazepam



Often, just one dose at bedtime.

How many doses you take, and when, is up to your prescriber.

Side by Side: Diazepam Equals Fewer Dips Between Doses



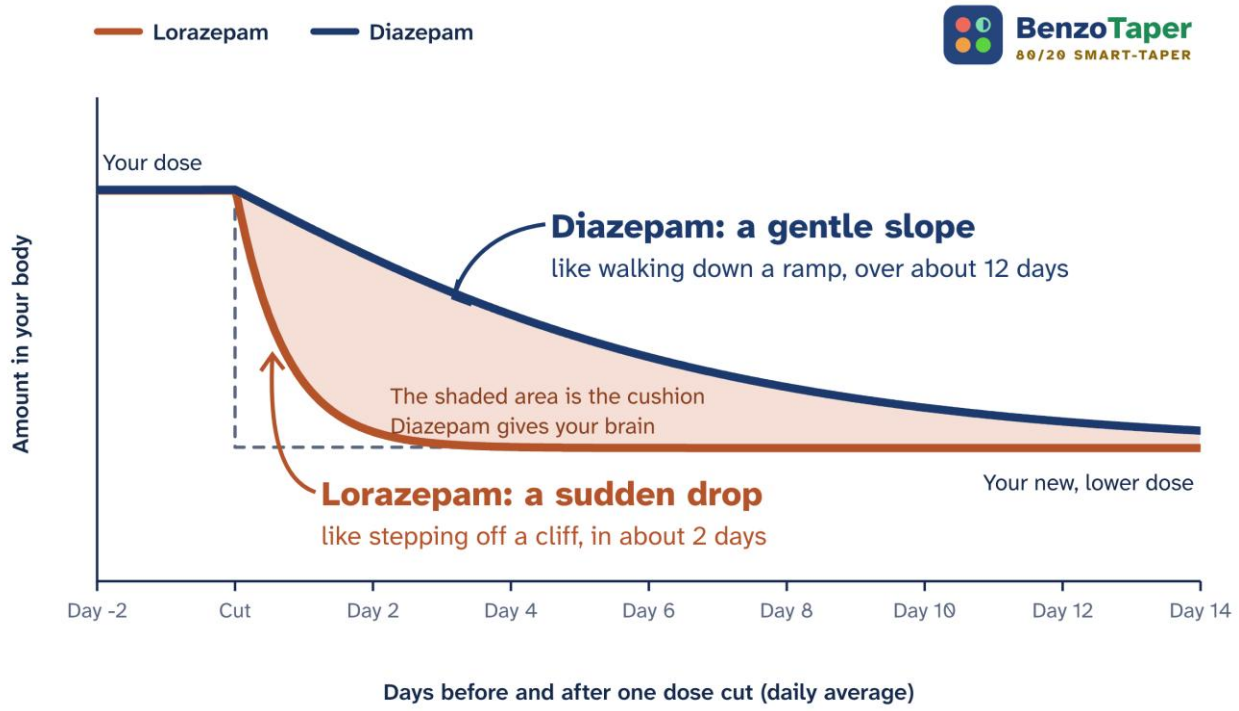
Both are scaled to the same average strength, so the chart compares the swings, not the milligrams. A simplified example.

Here are both medicines at the same strength. Lorazepam swings up and down all day which can cause irritable symptoms. Diazepam lasts much longer and stays much more even with fewer dips between doses, which can make each step of a taper smoother.

The BenzoTaper **80/20 Smart-Taper** is based on switching all or some of your benzodiazepine to Diazepam.

Already on Diazepam? After speaking with your doctor, you can start tapering right away. You can go to **page 23** if you want.

What Happens When the Dose Goes Down

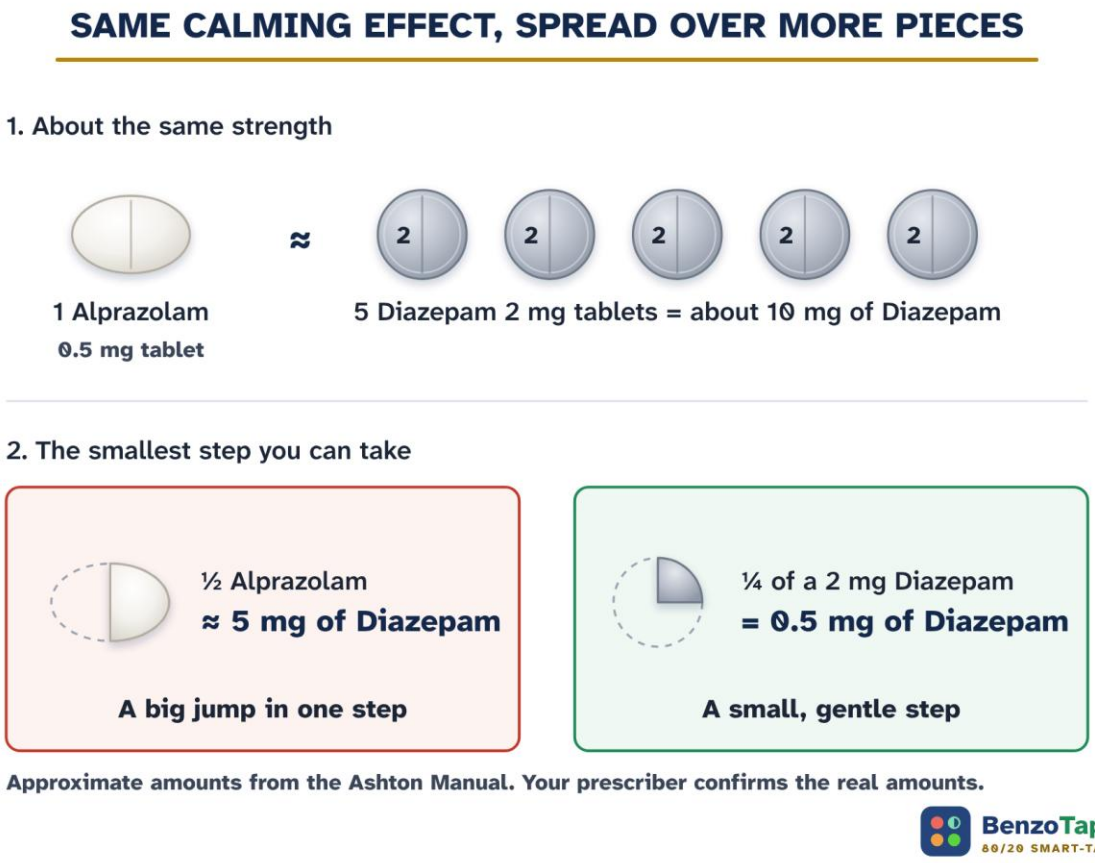


The lines show the daily average. A simplified example.

When your dose goes down, **Lorazepam** drops to the new level **in about 2 days.** It is like stepping off a cliff: your brain feels the whole change at once.

Diazepam slopes down gently over **about 2 weeks**, like walking down a ramp. The shaded area is the cushion this gives your brain, at every step of your taper.

Small Steps Need Small Physical Pieces
Example: Alprazolam v. Diazepam



A slow taper means many small reductions. That only works if you can take a small enough piece of a tablet.

One 0.5 mg Alprazolam tablet is about as strong as **10 mg of Diazepam**. Cutting the Alprazolam tablet in half is a 5 mg downward step all in one go, which is far too much for most people.

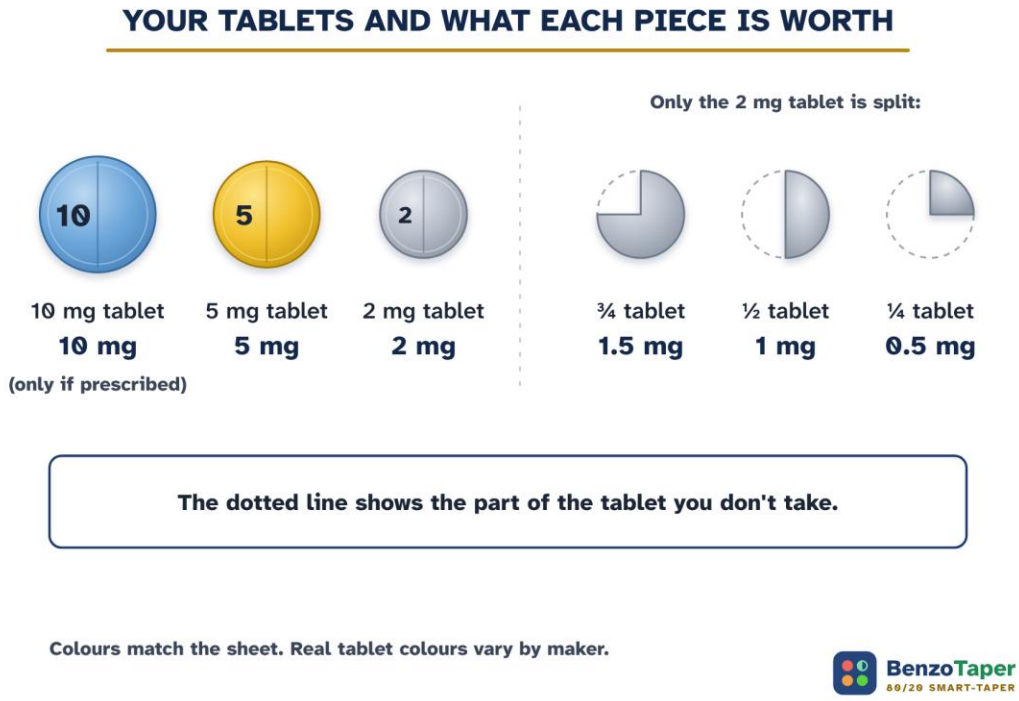
Diazepam spreads the same strength over many more pieces, so each downward dose step can be as small as 0.5 mg **by simply breaking a 2 mg tablet into quarters.**

SWITCHING MEDICINES IS YOUR PRESCRIBER'S DECISION

If you and your prescriber decide to switch to Diazepam, BenzoTaper can track it. Bob's story in Part 3 shows how.

Part 2. Getting Ready

Your Diazepam Tablets



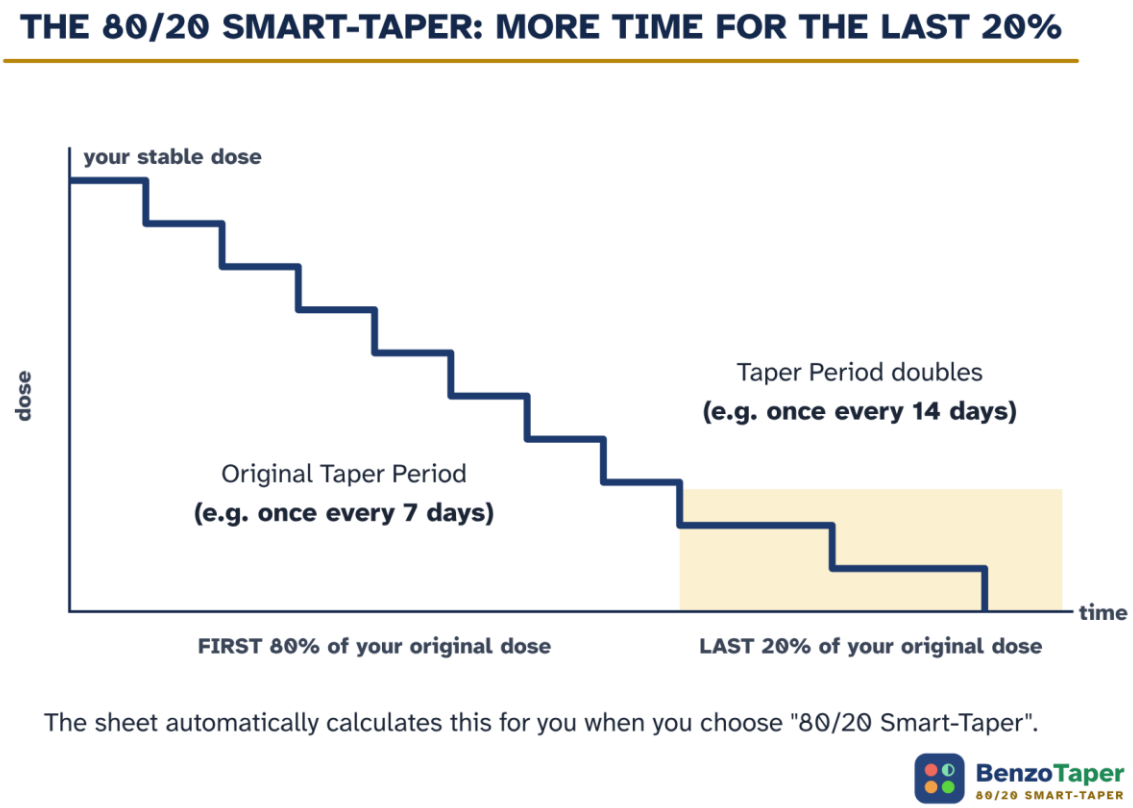
BenzoTaper uses Diazepam tablets of **5 mg** and **2 mg**. If your doctor also prescribes **10 mg** tablets, tick **My doctor prescribes 10 mg tablets too** in **Section 1** of the **Taper Sheet:**

- **Only a 2 mg tablet is ever split**, into ¼ (0.5 mg), ½ (1 mg) or ¾ (1.5 mg).
- **Every one of your Diazepam prescriptions should include 2 mg tablets,** because they make the small steps possible.
- Keep leftover pieces in your prescription bottle, and count them when you ask for a new prescription.

TIP: A PILL CUTTER

You don't need a pill cutter. A 2 mg tablet breaks in half easily along its score line. Some people find a pill cutter helpful for quarters, especially if their eyesight or hands make small pieces hard to split. Pharmacies sell them.

The 80/20 Smart-Taper



The sheet automatically calculates this for you when you choose "80/20 Smart-Taper".

Many people find the last part of a taper the hardest. The **80/20 Smart-Taper** gives that part more time.

- **First 80%:** You reduce once every **Taper Period** (for example, every 7 days).
- **Last 20%:** Once your dose is down to 20% of where you started, the **Taper Period** doubles (for example, every 14 days).
- Why? The last 20% of a dose is often more challenging to taper than the first 80%.
- It does not matter how often you might use the Pause / Restart / Change features of the **80/20 Smart-Taper**, the sheet automatically calculates all new values for you. No other tapering sheet does this.
- On the sheet, in **Section 1**, you can choose a **Regular Taper**, and the Taper Period stays the same to the end.

A Stable Diazepam Dose Before You Start

ALREADY TAKING DIAZEPAM?

If you are already on a stable dose, you don't need to worry about this page. Go to **page 23**, "Bob Sets Up His Taper", and fill in **Section 1** on the taper sheet. Set up your taper the same way.

If you are switching from another benzodiazepine, you first get to a stable dose on **Diazepam**.

This happens before you start your taper.

- In the sheet, go to **Section 2 - Or... I Am Currently Taking Another Medication** - to get an estimated Diazepam dose. You can also click **Use this for my Diazepam taper** to see a sample taper, and a sample prescription to show your doctor.
- The estimate is based on publicly available information and is just that – **a suggestion** - and nothing more.
- **Your doctor decides your starting dose, and how to adjust it while you get to a stable dose.**
- Getting to a stable dose often takes **about one or two weeks.** For some people it is shorter, for others longer. That is normal, and it is between you and your doctor.

When to Start Tapering

- When you have a stable dose, click **Clear All Fields**. Then fill in **Section 1 - Set Up Your Taper with your stable dose on the day you want to start.**
- Already know your stable Diazepam dose? You can also type it on its own in **The actual Diazepam dose confirmed by my prescriber** in Section 2, and click **Use this for my Diazepam taper**. A taper made this way is not marked as an estimate.

Opening and Saving Your File

BenzoTaper's 80/20 Smart-Taper is one .html file. It opens in any web browser, on a computer or a phone. It works without the internet.



- **Save my progress** saves a new copy of the sheet with everything you have entered.
- It saves to your Downloads folder or your default folder on your device, named **benzotaper-progress-yyyy-mm-dd-hhmm.html .**
- Next time, open your **newest** saved file. The sheet fills in your settings for you.

TWO TIPS

Save after every change. Each save is a new file. Always open your newest one.

Keep your saved file in a cloud folder (such as Google Drive, OneDrive or iCloud), or email it to yourself. Then **you can open it on any device**.

Part 3. Bob's Taper

ALREADY TAKING DIAZEPAM?

You don't need the switching steps at the start of Bob's story. Go to **page 23**, "Bob Sets Up His Taper", and fill in **Section 1 - Set Up Your Taper the same way**.

The easiest way to learn the sheet is to watch someone use it. Meet Bob.



> Bob takes **0.5 mg of Alprazolam** a day.
>
> He has taken it for a long time. He wants to stop, and his doctor agrees to help.
>
> They agree to **fully switch to Diazepam because its long half-life makes each step smoother**.

Here is how Bob uses the sheet, as an example. He takes Diazepam at one daily dose for about 7 to 14 days, as his doctor directs, **until he is on a stable dose** and feels settled. Then he starts his taper on Nov 16.

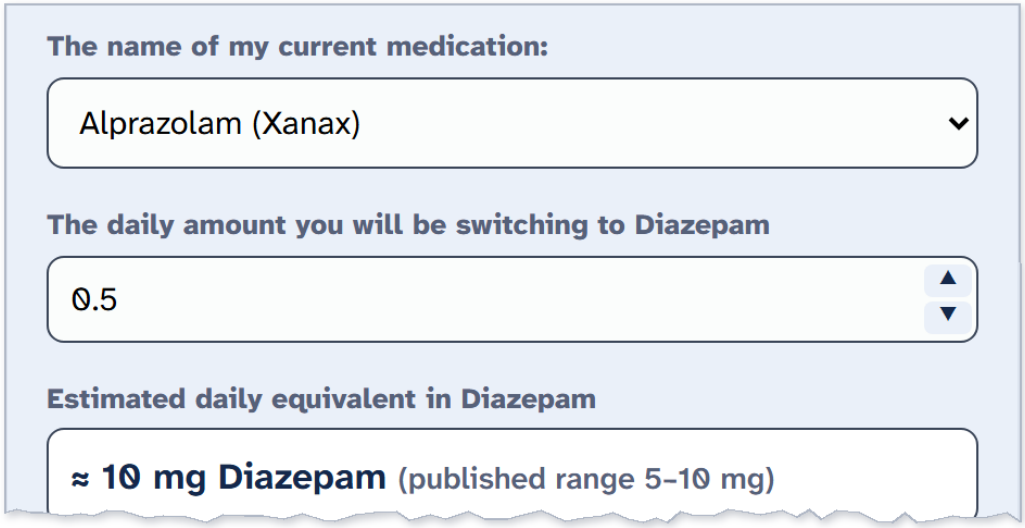
Bob's story shows every part of the sheet:

- Getting a Diazepam estimate, a sample taper and a sample prescription
- Getting to a stable dose, then setting up his real taper
- Reading his schedule
- Pausing, restarting, and slowing down
- The slower last 20%, and his later prescriptions

1. Bob Gets an Estimate and Looks at a Sample Taper

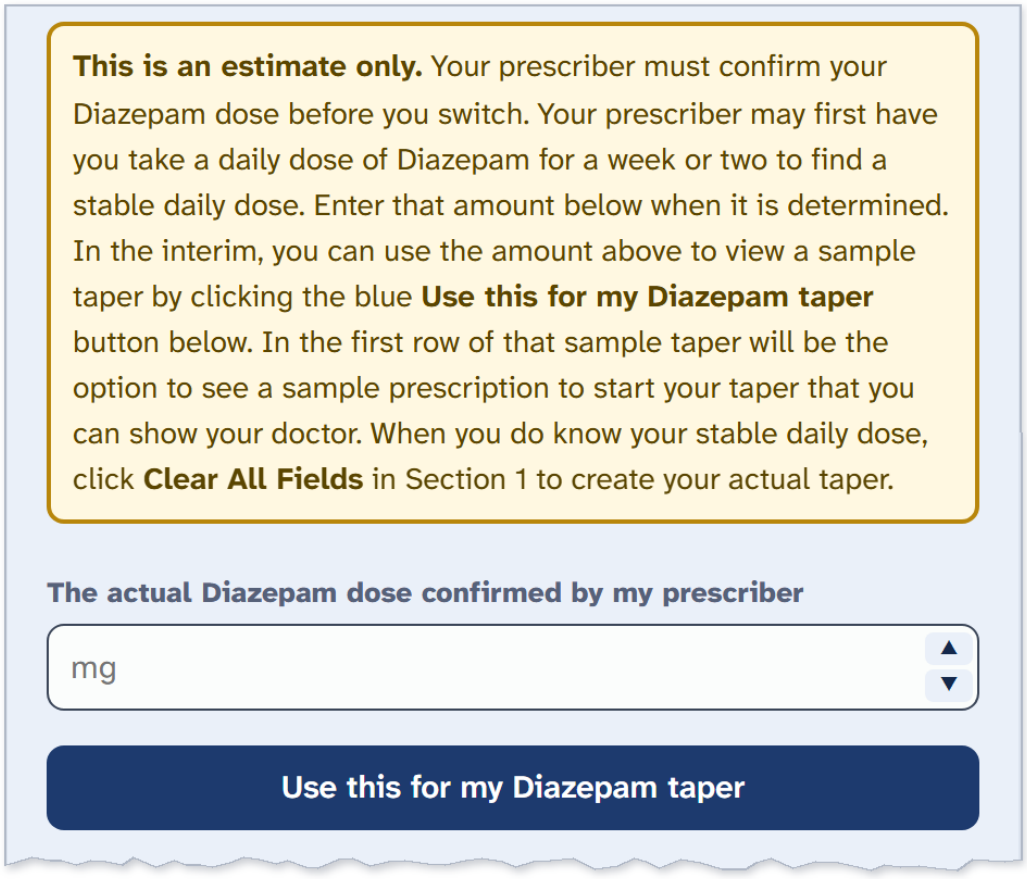
November 2. Before his appointment, Bob opens the BenzoTaper 80/20 Smart-Taper sheet. He uses **Section 2: OR... I AM CURRENTLY TAKING ANOTHER MEDICATION.**

1. He picks Alprazolam (Xanax) in **The name of my current medication**.
2. He enters 0.5 in **The daily amount you will be switching to Diazepam**. (Switching only part of your dose? Enter only that part. See Mary's story in Part 4.)
3. The sheet shows the **Estimated daily equivalent in Diazepam**: about 10 mg.



Section 2: Bob's medication, the amount he is switching, and the estimate

Bob's doctor hasn't confirmed a dose yet, so he leaves **The actual Diazepam dose confirmed by my prescriber** empty. He clicks **Use this for my Diazepam taper**, and the sheet puts the estimate (10 mg) into Section 1.

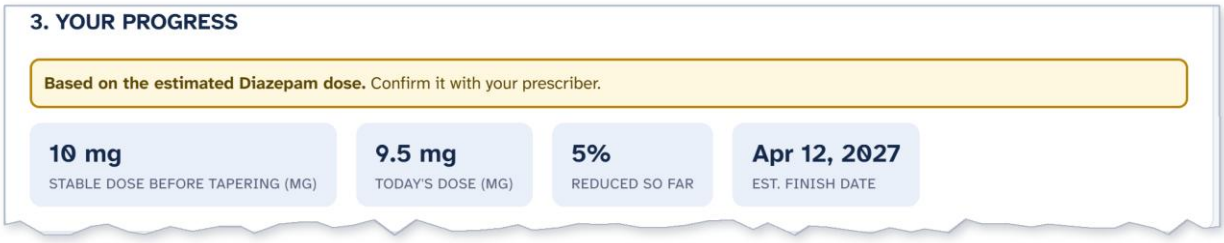


The gold note, the empty confirmed-dose box, and Use this for my Diazepam taper

THE ESTIMATE IS ONLY A STARTING POINT

It comes from published tables. Only your prescriber can decide your Diazepam dose. When they confirm a dose, type it in **The actual Diazepam dose confirmed by my prescriber**. It replaces the estimate, whether it is higher or lower.

Then he clicks **Generate my schedule** to see a sample taper. YOUR PROGRESS shows a gold note: this taper is based on the estimate.



YOUR PROGRESS for the sample taper, with the gold note

2. Bob's Sample Prescription for His Doctor

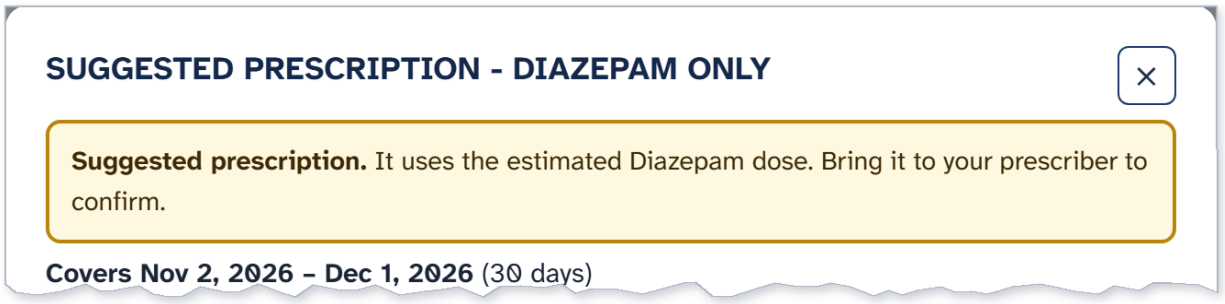
The first row of the sample schedule is a prescription. Bob clicks **View & print for my doctor** on that row.



DAY #	DATE	PAUSE / CHANGE	DAY	TODAY'S DOSE	TABLETS TO TAKE	REDUCTION AT START OF NEW PERIOD	TOTAL REDUCED SO FAR	% REDUCED SO FAR
Rx	View & print for my doctor				First prescription · Covers Nov 2, 2026 – Dec 1, 2026			
1	Nov 2, 2026 (today)	Pause / Change	Mon	9.5 mg	5 2 2 ¼	0.5 mg (¼ × 2 mg)	0.5 mg	5%
2	Nov 3, 2026		Tue	9.5 mg	5 2 2 ¼	(no extra reduction)	0.5 mg	5%
3	Nov 4, 2026		Wed	9.5 mg	5 2 2 ¼	(no extra reduction)	0.5 mg	5%

The first rows of the sample taper, starting with the prescription row

The **SUGGESTED PRESCRIPTION - DIAZEPAM ONLY** window opens. A gold note says it uses the estimated dose.



The window's title, the gold note, and the dates it covers



It works out the tablets for the first 30 days of the sample taper: 30 × 5 mg and 55 × 2 mg.

PRESCRIPTION TO REQUEST

	5 MG TABLETS	2 MG TABLETS
Needed for these 30 days	30	55
On hand, after setting aside what you'll take before Nov 2, 2026	0	0
Suggested request (rounded up to whole tablets)	**30**	**55**

PRESCRIPTION TO REQUEST for the sample taper

He clicks **Print for my doctor**. The printout is marked **SUGGESTED, for the prescriber to confirm**. This is the page he takes to his appointment:

BenzoTaper 80/20 SMART-TAPER www.benzotaper.com

Diazepam Taper - Suggested Prescription Request - Diazepam only

SUGGESTED, for the prescriber to confirm. The starting Diazepam dose (10 mg a day) is an estimate converted from another medication.

Prepared Nov 2, 2026

Covers: Nov 2, 2026 – Dec 1, 2026 (30 days)

Please dispense	Quantity
Diazepam 5 mg tablets	**30**
Diazepam 2 mg tablets	**55**

The sample prescription Bob shows his doctor

His doctor confirms 10 mg of Diazepam a day, and prescribes it for the days Bob needs to get to a stable dose. How and when Bob gets his prescriptions is between Bob and his doctor.

3. Bob Gets to a Stable Dose of Diazepam

Bob doesn't use his schedule while he gets to a stable dose. That part is between Bob and his doctor. For Bob it takes about 7 to 14 days on 10 mg a day. For other people it can be shorter or longer, and the dose may go up or down.

What the sheet does	What your prescriber decides
Gives an estimate, a sample taper and a sample prescription to talk about with your doctor.	Your starting dose, how you adjust it, and how long it takes to get to a stable dose.
Starts your real schedule when your dose is stable, on the day you choose.	When your dose is stable and you are ready to start your taper.

NOT SURE? ASK.

If you feel very sleepy, very restless, or unwell while getting to a stable dose, call your prescriber.

4. Bob Sets Up His Taper – He Has a Stable Diazepam Dose

November 16. Bob is on a stable dose of 10 mg, and he feels settled. He now takes Diazepam, so he uses Section 1 directly.

First he clicks **Clear All Fields**. This clears his sample taper, so nothing from it carries over.



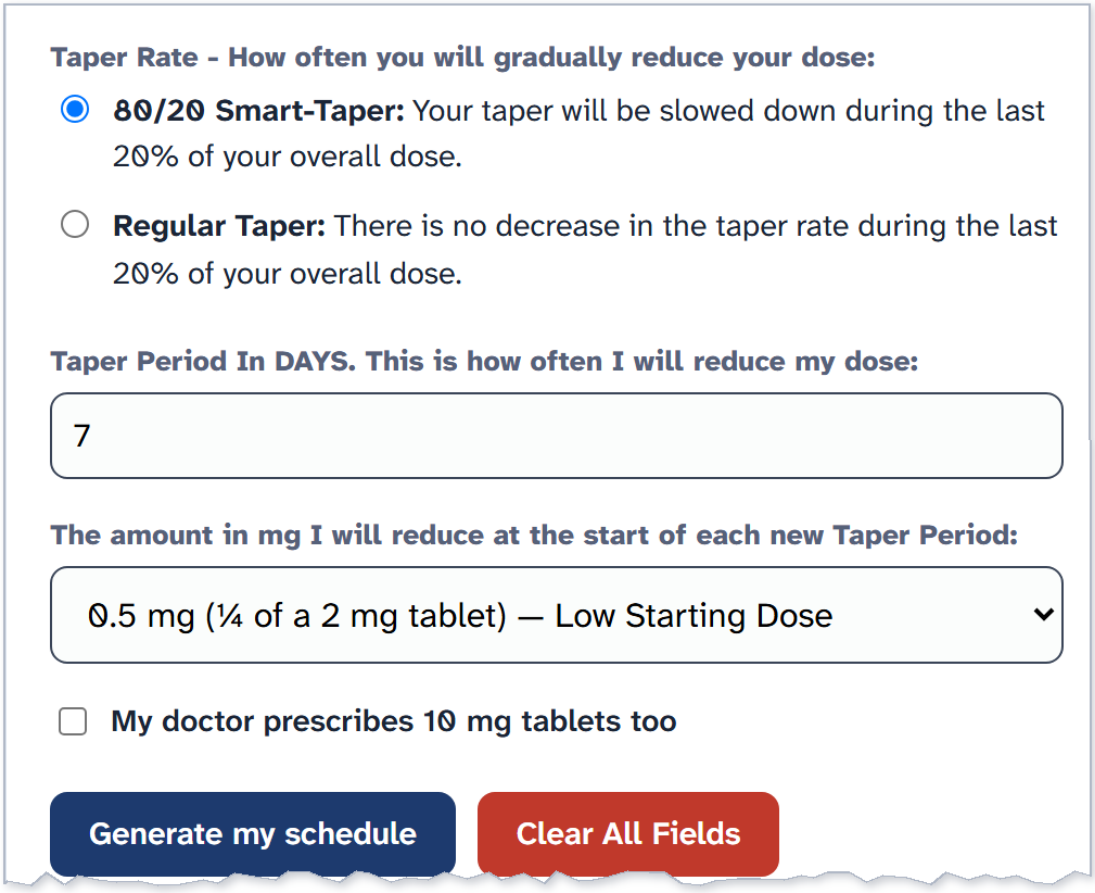
Generate my schedule and Clear All Fields, at the bottom of Section 1

1. In **My current daily Diazepam dose in mg is...**, he enters 10, his stable dose.
2. In **I want to start my taper on...**, he keeps today's date, Nov 16.



Bob's stable dose and his start date

3. He picks his Taper Rate (**80/20 Smart-Taper**), his Taper Period (7 days in this example, but it can be longer, such as 10 days) and the amount to reduce (0.5 mg, **Low Starting Dose**).



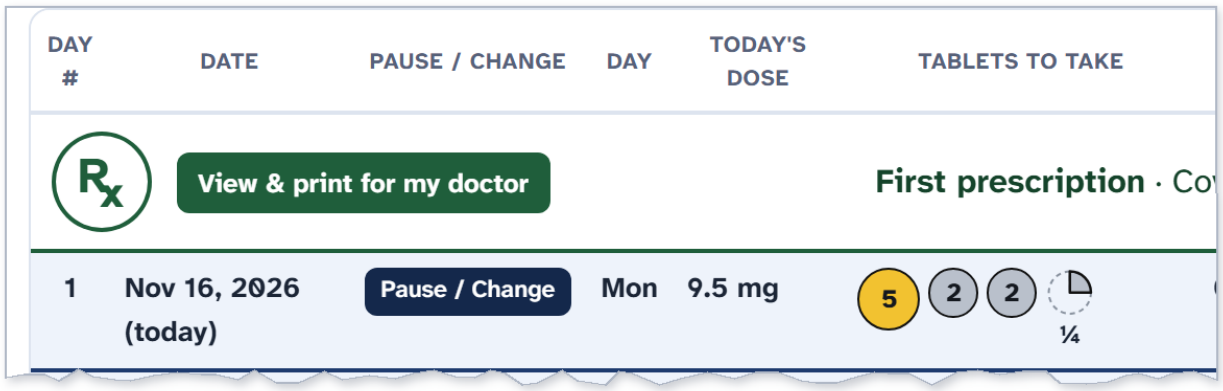
His Taper Rate, Taper Period and reduction amount, then Generate my schedule

Then he clicks **Generate my schedule**, and **Save my progress**. His schedule starts on Nov 16, Day 1: his first reduction, from 10 mg to 9.5 mg.

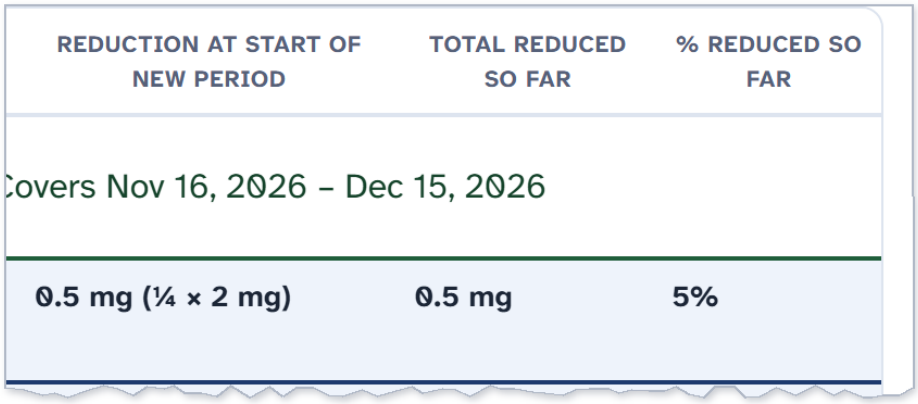
Box in Section 1	What it means
My current daily Diazepam dose in mg is...	Your stable Diazepam dose for one day. Use the ▲ ▼ arrows or type it.
I want to start my taper on...	The date of your first reduction.
Taper Rate	**80/20 Smart-Taper** or **Regular Taper**.
Taper Period (in days)	How many days between reductions.

Box in Section 1	What it means
The amount in mg I will reduce...	0.5, 1, 1.5 or 2 mg (Low, Moderate, High or Very High Starting Dose) at the start of each Taper Period.
My doctor prescribes 10 mg tablets too	Tick this only if you have 10 mg tablets.

5. Reading Bob's Schedule



The first prescription row, then Day 1 (left side of the schedule)



The same rows, right side of the schedule

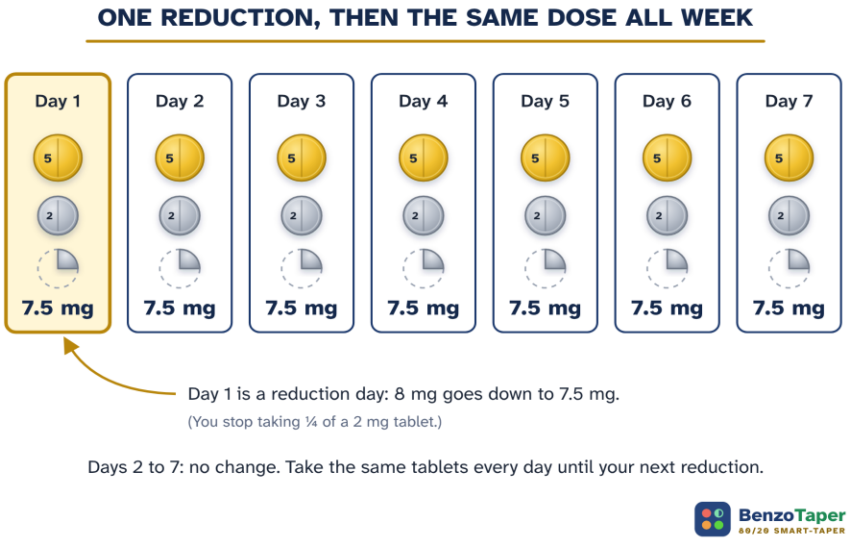
3. YOUR PROGRESS

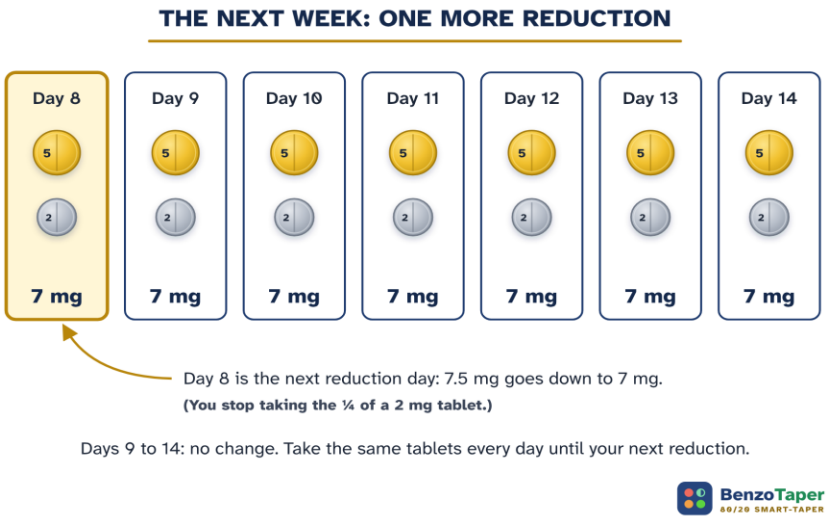
10 mg	9.5 mg	5%	Apr 26, 2027
STABLE DOSE BEFORE TAPERING (MG)	TODAY'S DOSE (MG)	REDUCED SO FAR	EST. FINISH DATE

YOUR PROGRESS now shows his stable dose (10 mg), today's dose (9.5 mg), how much he has reduced, and his estimated finish date: **Apr 26, 2027**.

Column	What it means
Day # and **Date**	The day of your taper, and the calendar date.
Pause / Change	The button to pause or change your taper (on today's row).

Column	What it means
Today's dose	Your total Diazepam for that day.
Tablets to take	Which tablets and pieces make up that dose.
Reduction at start of new period	How much your dose went down that day. **(no extra reduction)** means you stay on the same lower dose as the day before.
Total reduced so far / % reduced so far	How far you have come.

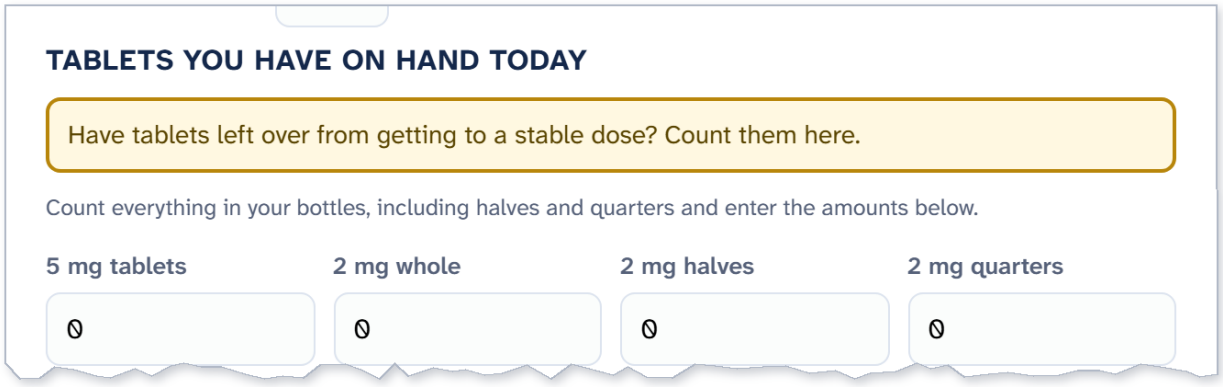




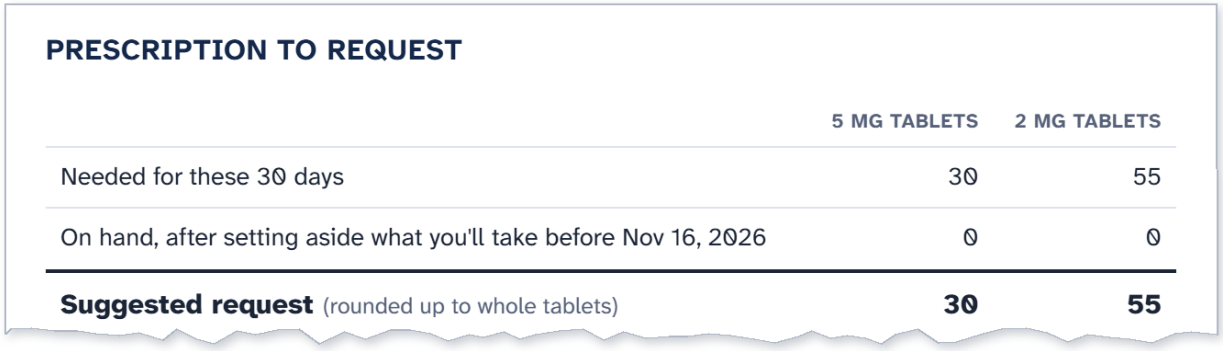
Click **Jump to today** to find today's row, and **See your chart** to see your whole taper as a picture.

6. Bob's First Prescription

The first row of Bob's schedule is his first prescription, for Nov 16 to Dec 15. He clicks **View & print for my doctor**.



TABLETS YOU HAVE ON HAND TODAY, with the gold reminder



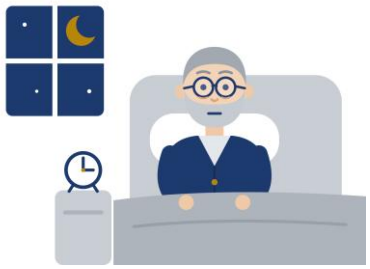
PRESCRIPTION TO REQUEST

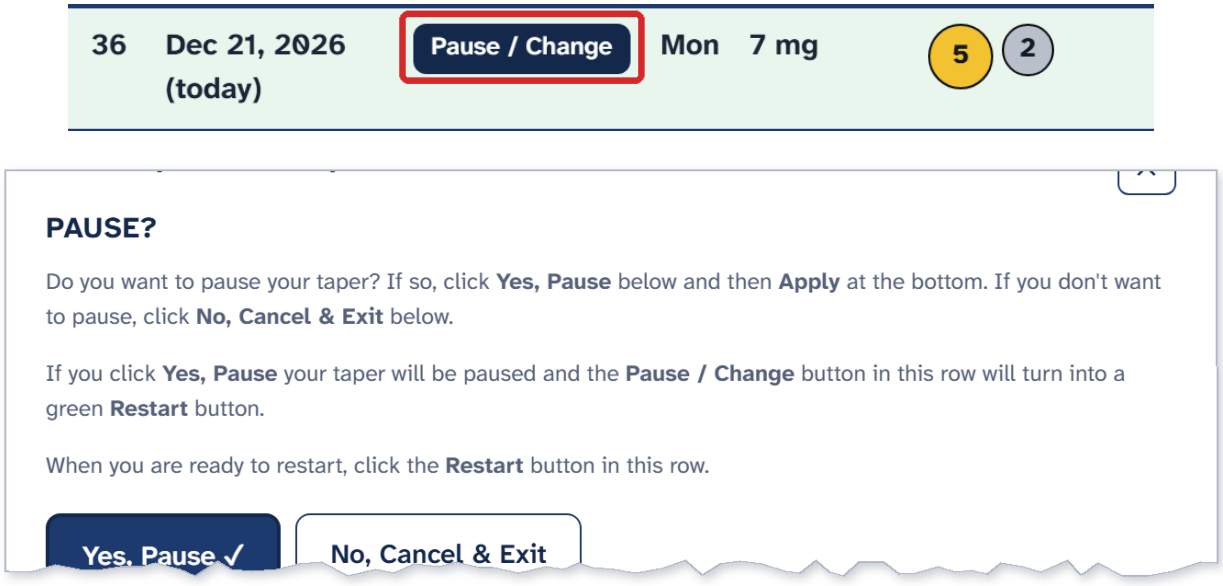
Bob used all his Diazepam while getting to a stable dose, so he has nothing left over, and he leaves TABLETS YOU HAVE ON HAND TODAY at 0. If you do have tablets left over, count them here, as the gold note says. The sheet subtracts them from your request.

He asks for **30 × 5 mg** and **55 × 2 mg** of Diazepam.

7. Bob Pauses

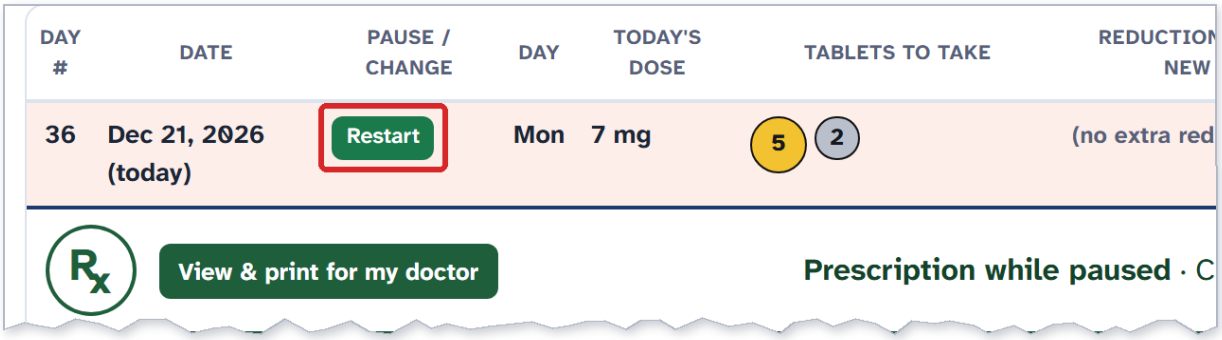
> **December 21.** Bob has had trouble sleeping for a few nights. He calls his doctor. They agree he should pause and stay on his current dose until he feels better.



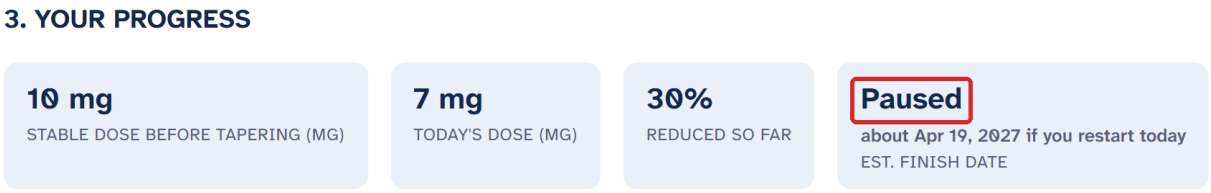


Yes, Pause, then Apply

1. On today's row, Bob clicks **Pause / Change**.
2. In the **PAUSE / RESTART / CHANGE TAPER** window, he clicks **Yes, Pause**, then **Apply**.
3. The button turns into a green **Restart** button – see the next page. He keeps taking 7 mg, the dose he paused on. The day shows **(no extra reduction)**.
4. He stays at this dose until he feels comfortable and wants to restart. There is no hurry.



The paused day, with the green Restart button



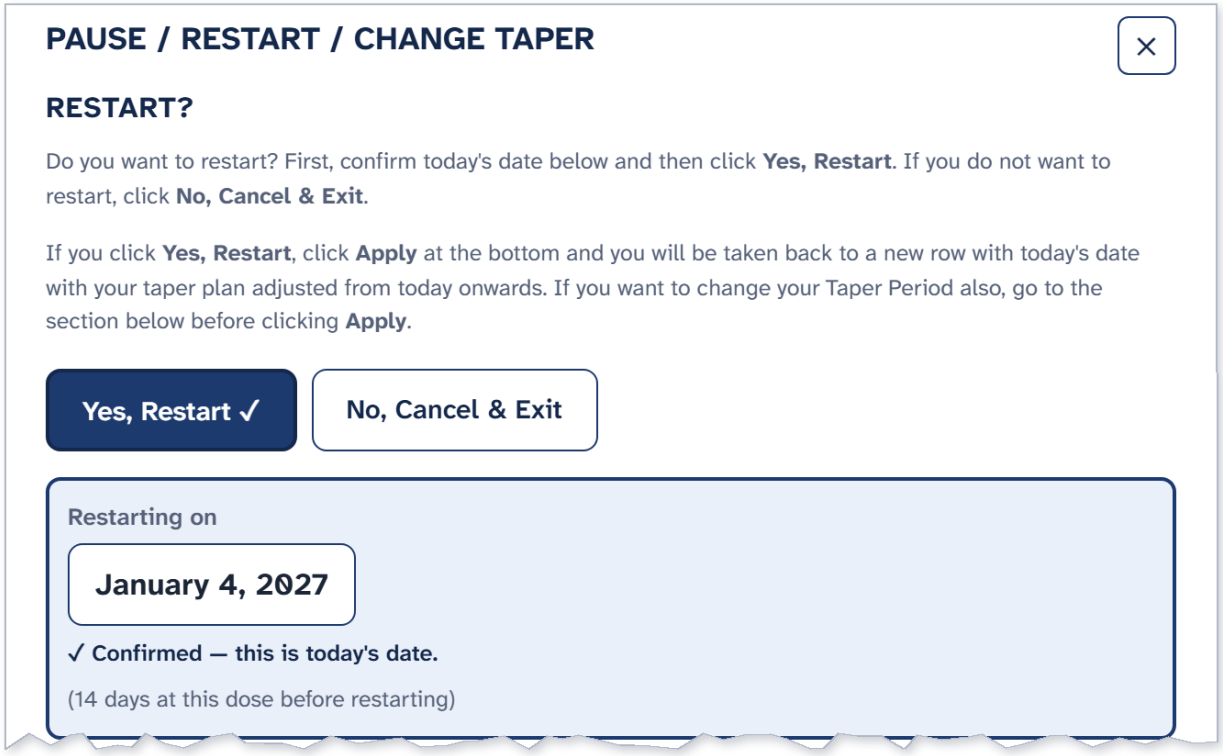
YOUR PROGRESS shows that he is paused, and when his taper would end if he restarted today.

8. Bob Restarts

> **January 4.** After two weeks, Bob is sleeping well again. He opens his file and clicks the green **Restart** button.

Bob has two choices. Both take one click of **Apply**, and **the sheet automatically calculates and rebuilds his whole plan from today.**

Choice A: Carry On at the Same Pace



Yes, Restart, with today's date confirmed

48	Jan 2, 2027		Sat	7 mg	5 2	(n
49	Jan 3, 2027		Sun	7 mg	5 2	(n
50	**Jan 4, 2027 (today)**	**Pause / Change**	**Mon**	**6.5 mg**	**5 ¾**	**0.**
51	Jan 5, 2027		Tue	6.5 mg	5 ¾	(n
52	Jan 6, 2027		Wed	6.5 mg	5 ¾	(n
53	Jan 7, 2027		Thu	6.5 mg	5 ¾	(n

His schedule from today: the next reduction happens on Jan 4

- Bob checks today's date, clicks **Yes, Restart**, then **Apply**.
- His next reduction (7 mg to 6.5 mg) happens today. Then he carries on every 7 days.
- His finish date moves from Apr 26 to May 3, 2027. His next reduction was due on Dec 28. It now happens on Jan 4, one week later, so his finish date moves by one week.



Choice B: Restart and Slow Down

> Bob and his doctor decide to give each step a little more time.

CHANGE TAPER PERIOD?

Do you want to slow down or speed up your taper? If yes, use the field below to increase or decrease the number of days for each reduction period – the **Taper Period** – and then click **Apply** below. You will then be taken back to a new row with today's date with your Taper Period changed and a new taper plan adjusted from today onwards. You can change the Taper Period without pausing too, by just changing the number of days below and clicking **Apply**.

Taper Period going forward (days)

- **Increase** if you are repeatedly having withdrawal symptoms
- **Decrease** only if you are not having withdrawal symptoms and want to try to speed up your taper. You can always change back to a longer Taper Period if withdrawal symptoms occur.

10

- Restarting always applies your next scheduled reduction (0.5 mg (¼ × 2 mg)) on today's date, then continues on the Taper Period you choose.

Taper Period going forward (days): changed to 10

48	Jan 2, 2027		Sat	7 mg	5 2	(n
49	Jan 3, 2027		Sun	7 mg	5 2	(n
50	**Jan 4, 2027 (today)**	**Pause / Change**	**Mon**	**6.5 mg**	5 ¾	**0**
51	Jan 5, 2027		Tue	6.5 mg	5 ¾	(n
52	Jan 6, 2027		Wed	6.5 mg	5 ¾	(n
53	Jan 7, 2027		Thu	6.5 mg	5 ¾	(n

His schedule from today, with reductions every 10 days

- Before clicking **Apply**, Bob also changes **Taper Period going forward (days)** from 7 to **10**.
- His reductions now come every 10 days. His finish date is **June 23, 2027**.
- **The sheet will automatically calculate all the changes including the correct slower reduction for the last 20% of his taper.**
- You can change the Taper Period any time, with or without pausing: a bigger number is slower, a smaller number is faster.

3. YOUR PROGRESS

10 mg	6.5 mg	35%	Jun 23, 2027
STABLE DOSE BEFORE TAPERING (MG)	TODAY'S DOSE (MG)	REDUCED SO FAR	EST. FINISH DATE

IF YOU HAVE WITHDRAWAL SYMPTOMS

Talk to your prescriber. Pausing and slowing down are things to decide together.

If symptoms are severe or getting worse, get medical help right away or call emergency services.

9. The Last 20% of Bob's Taper

Bob chose the **80/20 Smart-Taper**, so his steps slow down near the end.

- 20% of his stable dose is 2 mg (20% of 10 mg). So, the last 20% starts at 2 mg, on **April 4, 2027**. Here is that day in his schedule:

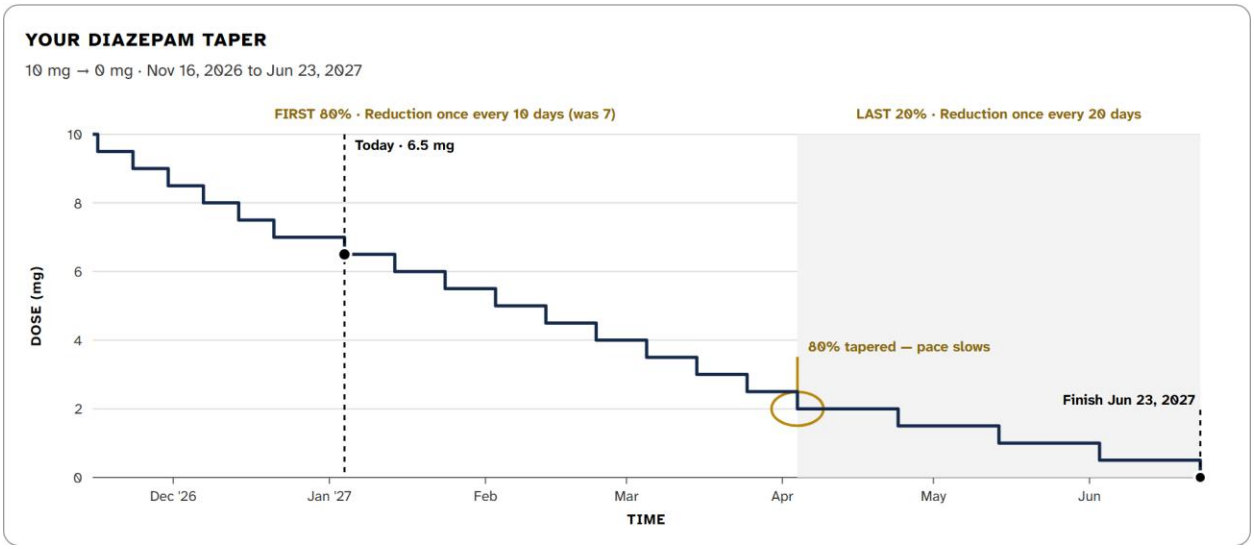
139	Apr 3, 2027	Sat	2.5 mg	2 + ¼	(no extra reduction)
140	Apr 4, 2027	Sun	2 mg	2	0.5 mg (¼ × 2 mg)
141	Apr 5, 2027	Mon	2 mg	2	(no extra reduction)
142	Apr 6, 2027	Tue	2 mg	2	(no extra reduction)
143	Apr 7, 2027	Wed	2 mg	2	(no extra reduction)
144	Apr 8, 2027	Thu	2 mg	2	(no extra reduction)

Apr 4: the last 20% begins at 2 mg, and each Taper Period is now 20 days

- From then on, each Taper Period is **20 days** instead of 10. **The sheet automatically calculates this for him** regardless of how many changes he might make, such as pausing. His next reduction comes 20 days later, on April 24:

159	Apr 23, 2027	Fri	2 mg	2	(no extra reduction)
160	Apr 24, 2027	Sat	1.5 mg	¾	0.5 mg (¼ × 2 mg)

Apr 24: the next reduction, 20 days later



Bob's chart (as it prints). Notice the longer flat step at 7 mg: that was his 2-week pause.

10. Bob's Next Prescriptions

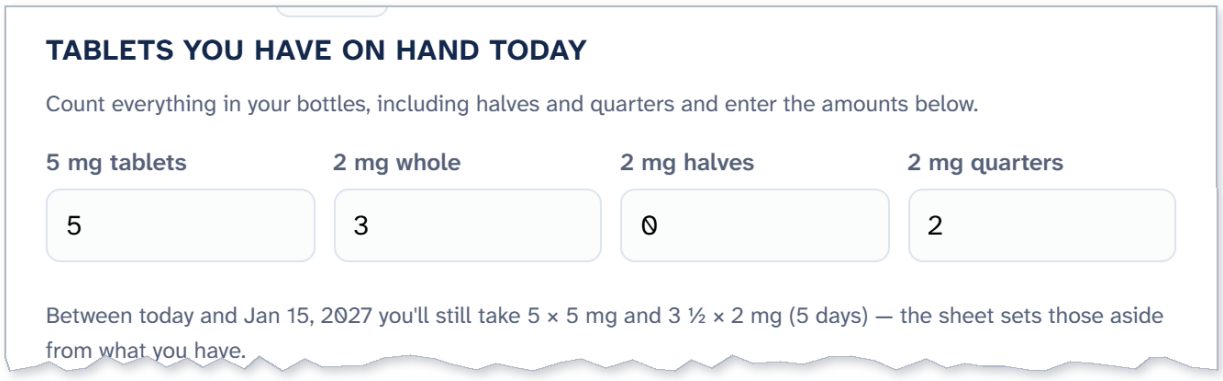
Before each new prescription period, a **Prescription reminder** row appears in the schedule. Bob clicks **View & print for my doctor** on that row.

His second prescription (Dec 16 to Jan 14) worked the same way, so this one covers Jan 15 to Feb 13. The **SUGGESTED PRESCRIPTION - DIAZEPAM ONLY** window opens:

He checks the **Prescription length** (1 to 90 days). A change applies to this prescription and the later ones.



1. He counts the tablets he has on hand, including halves and quarters, and enters them under **TABLETS YOU HAVE ON HAND TODAY**.

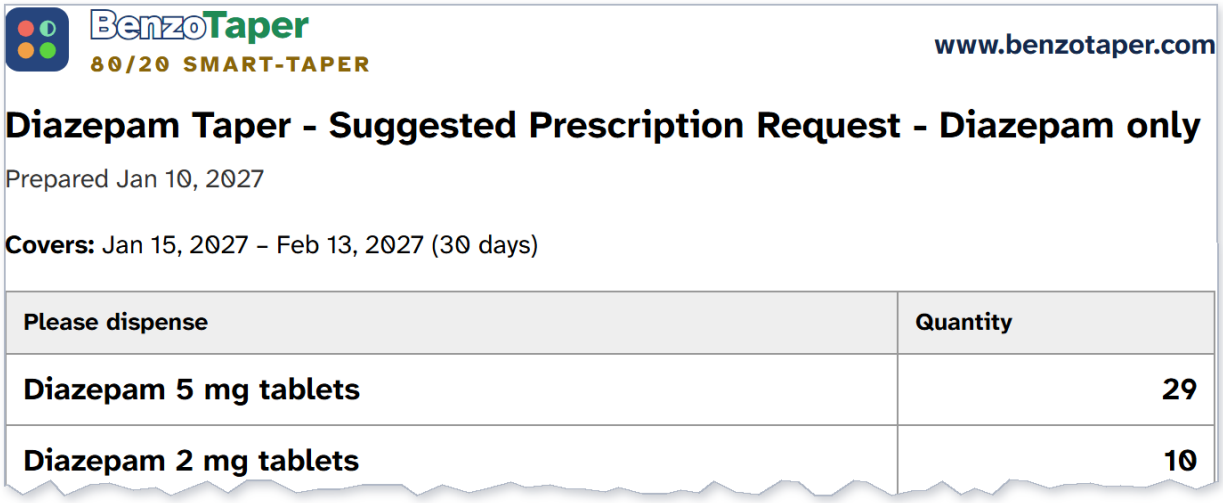


2. The sheet works out what to request. For Jan 15 to Feb 13: **29 × 5 mg** and **10 × 2 mg**. He can change these numbers, for example if his doctor rounds to a box size. **Reset to original values** undoes his changes.



PRESCRIPTION TO REQUEST, and the boxes you can change

3. He clicks **Print for my doctor**, or **Save & close**. This is the page he prints:



BenzoTaper
80/20 SMART-TAPER

www.benzotaper.com

Diazepam Taper - Suggested Prescription Request - Diazepam only

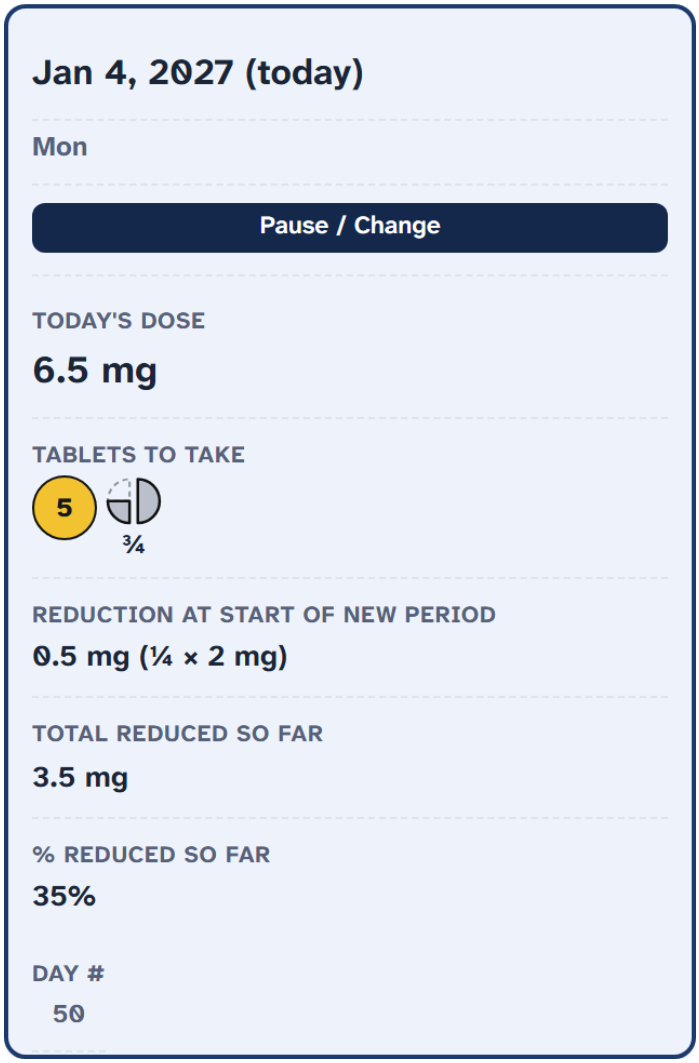
Prepared Jan 10, 2027

Covers: Jan 15, 2027 – Feb 13, 2027 (30 days)

Please dispense	Quantity
Diazepam 5 mg tablets	29
Diazepam 2 mg tablets	10

The page Bob prints for his doctor

11. Bob's Sheet on His Phone



On a phone, each day is a card instead of a table row. Everything else works the same way.

Bob keeps his saved file in his cloud folder, so he can check today's tablets on his phone.

Part 4. Mary's Taper: Switching Part of a Dose

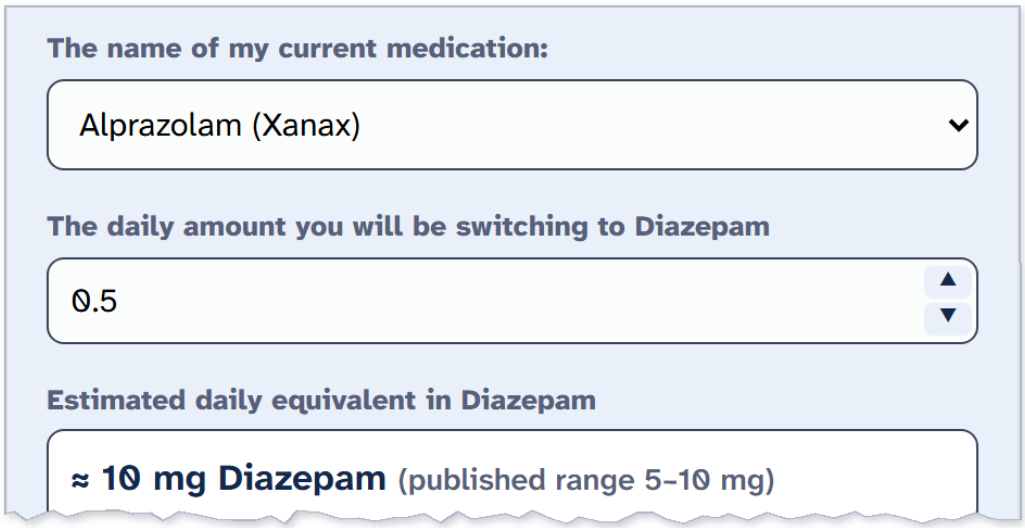
> Mary takes **1 mg of Alprazolam** a day: **2 x 0.5 mg tablets**. She and her doctor decide to switch **1** of her tablets to **Diazepam** first, taper off that part, and then after that taper is complete, do the same with the other Alprazolam tablet.



Mary uses the sheet the same way Bob does, with one big difference: **the sheet only deals with the part she switches to Diazepam.**

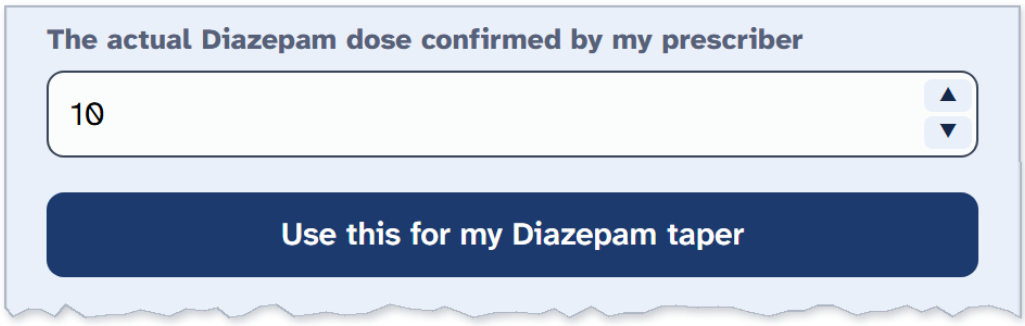
1. She Enters Only that Part of Her Dose that She Is Switching

1. In Section 2, she picks Alprazolam (Xanax) and enters **0.5** in **The daily amount you will be switching to Diazepam**: just the one tablet she is switching, not her whole 1 mg.



Mary enters only the 0.5 mg she is switching

2. Her doctor confirmed 10 mg of Diazepam, so she types 10 in **The actual Diazepam dose confirmed by my prescriber**, then clicks **Use this for my Diazepam taper**.



Her confirmed dose, then Use this for my Diazepam taper

THE SHEET IS FOR THE DIAZEPAM PART ONLY

Mary's schedule, her progress and her prescriptions are all for her Diazepam only. **The sheet does not track her other 0.5 mg of Alprazolam. She keeps taking it, and gets it on its usual prescription, as her prescriber directs.**

When Mary is on a stable 10 mg of Diazepam, she clicks **Clear All Fields** and sets up her taper in Section 1, just like Bob. Her taper starts on Nov 2.



Section 1 with her 10 mg and her start date

Her prescriptions are for Diazepam only. Her first one asks for 30 × 5 mg and 55 × 2 mg. She doesn't have 10 mg tablets, so that box is not ticked, and there is no 10 mg line.

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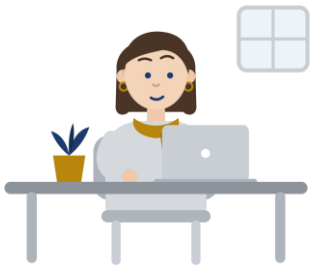
Diazepam Taper - Suggested Prescription Request - Diazepam only

Prepared Nov 2, 2026

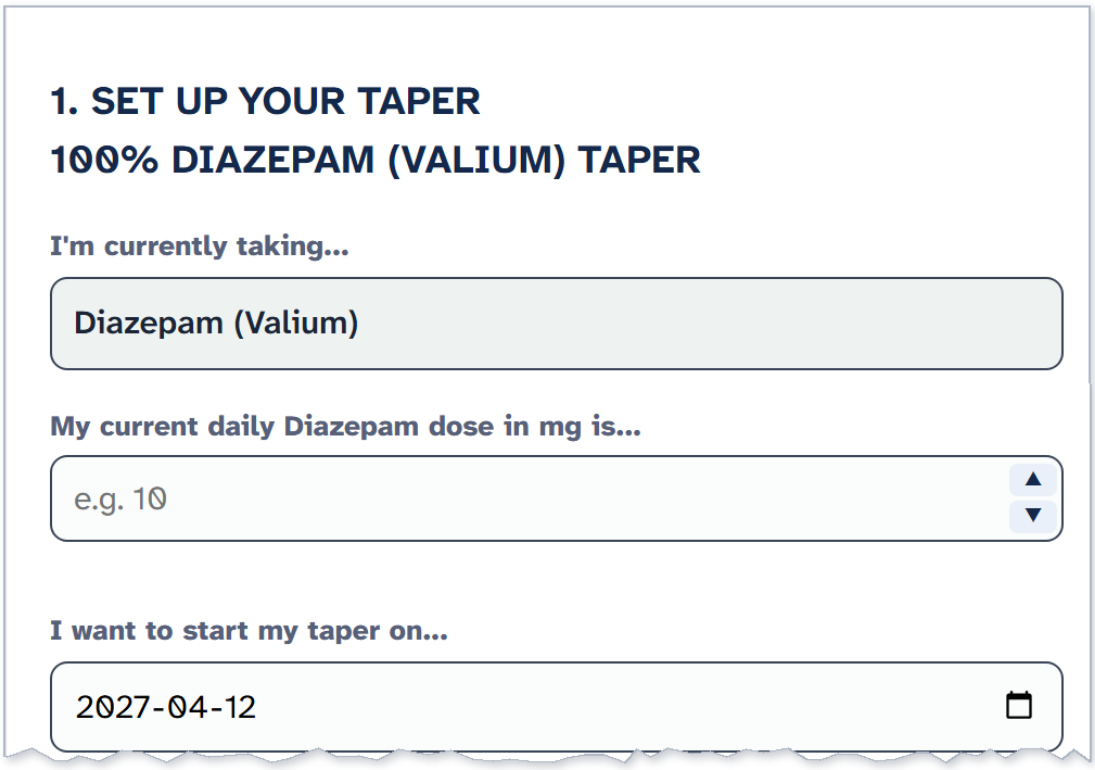
Covers: Nov 2, 2026 – Dec 1, 2026 (30 days)

Please dispense	Quantity
Diazepam 5 mg tablets	**30**
Diazepam 2 mg tablets	**55**

Mary's first prescription: Diazepam only



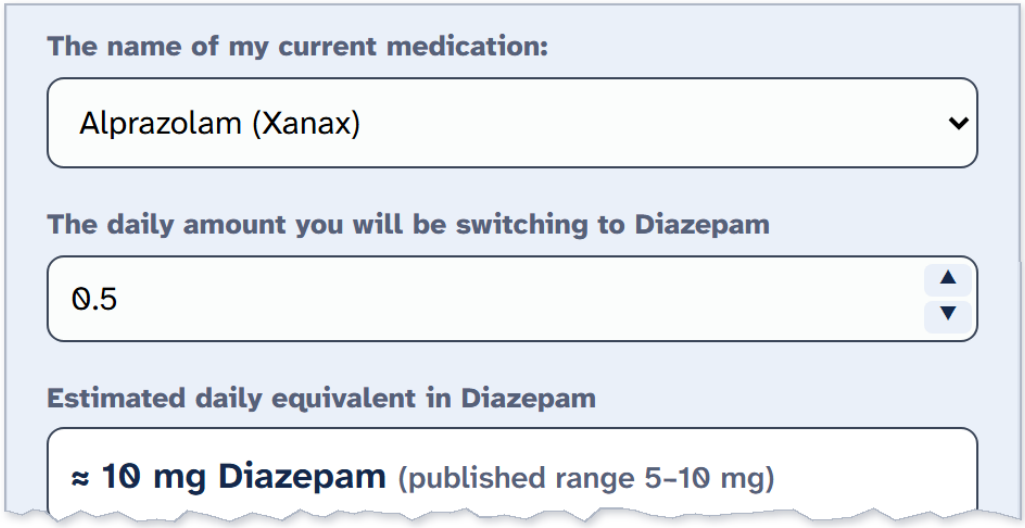
2. When the First Part Is Done, She Starts a New Diazepam Taper for the Rest of the Alprazolam



After Clear All Fields: a blank Section 1

- When Mary has tapered off the first part, she clicks **Save my progress** first, to keep a record of her first taper. Then she clicks **Clear All Fields**. The sheet starts fresh.

- She enters her remaining 0.5 mg of Alprazolam in Section 2, and starts a new taper, just like her first one.



Her second taper starts in Section 2 with her remaining 0.5 mg



TIP

Save after every change. Each save is a new file. Always open your newest one.

Keep your saved file in a cloud folder (such as Google Drive, OneDrive or iCloud), or email it to yourself. Then **you can open it on any device**.

Part 5. Help

Your Taper at a Glance

BenzoTaper keeps track of your taper. Your prescriber decides the plan.

What the sheet does	What your prescriber decides
Estimates a Diazepam amount if you are switching.	Whether to switch, and your Diazepam dose.
Shows a sample taper and a sample prescription from the estimate, to talk about with your doctor.	Your prescriptions, and how you adjust while getting to a stable dose.
Offers 0.5, 1, 1.5 or 2 mg reductions and any Taper Period, and works out every date and dose.	How much to reduce, and how often.
Slows down the last 20% if you choose **80/20 Smart-Taper**.	Which pace is right for you.
Lets you pause, restart or change your pace with **Pause / Change**.	What to do about withdrawal symptoms.

TAKE YOUR TIME

Going slowly is not failing. It is the plan.

Your body got used to the medicine over a long time. Your nerve cells simply need time to increase their number of GABA receptors.

What If I Lose Track, or Need to Start Over?

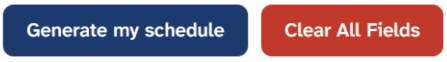


Life happens. You might forget to pause, take a different dose for a while, or change your mind about your plan. That's okay. Starting over is easy.

If you can, use Pause / Change. It keeps your plan, including the slower last 20%. See Bob's steps 7 and 8.

BUT, you can start a new taper at any time:

- Click **Save my progress** first, so you keep a record of your taper so far.
- Click **Clear All Fields**. The sheet is blank again.
- Enter the dose you take the day you want to start a fresh new taper schedule as your stable dose, pick your start date and settings, and click **Generate my schedule**. You can do this as many times as you want.



GOOD TO KNOW

A fresh start works out the **80/20 Smart-Taper** from your **new** starting dose. For example, if Bob started over at 6 mg, his slower last 20% would begin at about 1 mg instead of 2 mg. This is one of the big advantages of the **80/20 Smart-Taper – all calculations are automatically made and updated with any change.**

Want more slow steps near the end? You can always make your Taper Period longer with **Pause / Change**.



Common Questions

I opened the sheet and my progress is gone.
Open your newest saved file in your Downloads or similar folder (benzotaper-progress-yyyy-mm-dd-hhmm.html). The original file you bought opens empty, unless this browser already has a schedule saved from before.

I opened a new copy of BenzoTaper and my old schedule is there.
Your browser remembers your latest schedule on this computer, even in a fresh copy of the file. For a blank sheet, click **Clear All Fields**. Keep this in mind if other people use your computer.

I changed something. Do I need to save?
Yes. Click Save my progress after every change, then use the newest file next time.

Why does a day say "(no extra reduction)"?
You stay on the same lowered dose as the day before. Reductions only happen at the start of each Taper Period. While paused, every day says this.

Why is Day 1 lower than my stable dose?
Day 1 is your first reduction. Your stable dose is the dose you took the day before you start your taper.

What do the gold notes mean?
The sheet shows messages as gold notes on the page. For example, it tells you when a number is outside what the sheet allows.

What are the limits?
Up to 250 mg of Diazepam a day. Other medications: up to the label maximum plus 25% (Zolpidem 30 mg, Zopiclone 22.5 mg). The start date must be within a year of today. A new plan can be up to 3 years long. If you slow down later with **Pause / Change**, the rest of your taper can be up to 5 years long.

Where do the Diazepam estimates come from?
From published tables, mainly the Ashton Manual, checked against the 2021 VA/DoD guideline. They are estimates only. Your prescriber confirms your dose.

Can I use it on more than one device?
Yes. Keep your saved file in a cloud folder or email it to yourself, then open it on the other device.

General Sources

Diazepam-equivalent conversions are adapted from the Ashton Manual (C. Heather Ashton, 2002) and cross-referenced with the 2021 VA/DoD Clinical Practice Guideline for Substance Use Disorders. Tablet sizes are checked against Health Canada's Drug Product Database and the U.S. FDA National Drug Code Directory. Switching and taper steps are also based in part on the Oregon Health Authority's benzodiazepine tapering materials. Half-life figures are from the ASAM 2025 Joint Clinical Practice Guideline on Benzodiazepine Tapering and the Ashton Manual. Equivalents for the European medications and the Z-medications are also checked against the 2021 Swiss benzodiazepine equivalence table and European product information.

Questions or problems with your sheet? Email support@benzotaper.com

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October 23, 2026.