

GROUP VISIT TOOLKIT

Protecting Your Heart: The Blood Sugar/Insulin Connection



Improve the health of your patients
with meaningful information

- *Easy to implement*
- *Cost-effective*
- *Time-efficient*
- *Insurance-friendly*

Your patients want to change... now you have the tools

This toolkit is designed to teach patients why and how a low-glycemic, anti-inflammatory diet is essential for protecting the heart and improving insulin sensitivity. Patients will learn how an emphasis on nutrition and physical activity helps treat many common diseases and even reverse their effects.

Use for patients with these issues:

- Diabetes/Prediabetes
- Hypertriglyceridemia
- Low HDL
- CAD/CVD/CHD
- Metabolic Syndrome
- Obesity/Overweight
- PCOS
- Fatty Liver Disease

THIS GROUP VISIT TOOLKIT INCLUDES:



Visit Forms:

Patient intake forms are designed to capture key information to create efficient, insurance-friendly patient encounters.



Patient Handout(s):

Patient-friendly handout(s) assist you and improve the implementation of key lifestyle tips necessary to correct underlying causes of illness.



Multi-Media Education:

Choose the format to best suit your presentation style

- Video + audio version
- Presentation slides for custom education

Ideal use for a Group Visit or one-on-one setting

Shilpa P. Saxena, MD is a Board-Certified Family Practice physician whose passion and purpose come to life through sharing her innovative patient education and practice management solutions in her classic 'keep it simple' style. She serves as Faculty with the Institute for Functional Medicine, the Arizona Center for Integrative Medicine, the University of Miami, Miller School of Medicine, and the Metabolic Medical Institute at George Washington University. Dr. Saxena is an expert in the Group Visit medical model, creator of Group Visit Toolkits, and co-author of *The Ingredients Matter: India*.



[Insert
Logo
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Protecting Your Heart: The Blood Sugar/Insulin Connection

Patient Name: _____ **Date of visit:** _____

_____ (initial) I understand as a participant in this Group Visit/Shared Medical Appointment, that I and other patients will discuss medical information in the presence of other patients, family members, staff, and the clinician. If I have medical concerns that are of a very private nature, I will request to discuss with the clinician in a private setting or will schedule an individual office visit. I will also respect the confidentiality of the other members of the group by not revealing medical, personal, or any other identifying information about others in attendance after the session is over.

CC: IDDM NIDDM Pre-Diabetes Insulin Resistance/CMS Other _____

History of Present Illness - Part I (please complete all sections that apply)

1. Date (or Year) of diagnosis: _____
or Unknown
2. Are you taking your diabetes medication(s) as prescribed?
 100% of the time
 Sometimes: _____ % of the time
 Never
 I do not take medication
3. Do you monitor your fasting/morning blood sugar at home?
 Yes, ranges from _____ to _____
 No
 I was not asked to do so
4. Do you monitor your blood sugar two hours _____
 Yes, ranges from _____ to _____
 No
 I was not asked to do so

Blood Glucose Log	
Fasting (avg):	_____
2 hrs after meals:	_____
Last Hgb A1C:	_____
Date:	_____

Current Lifestyle: History of Present Illness - Part II

1. Tobacco use? _____ cigarettes/cigars per day
2. Alcohol use? _____ drinks per week. Most nu
3. Caffeine intake? _____ caffeinated beverages pe
4. Water intake? _____ glasses per day
5. Exercise? Yes No

Type of Exercise	Length of Exercise
<input type="checkbox"/> Walk	> 45 min / 30-45m
<input type="checkbox"/> Run, Jog, Bike (brisk aerobic)	> 45 min / 30-45m
<input type="checkbox"/> Weight bearing/ lifting	> 45 min / 30-45m

6. Nutrition & Diet

How often do you eat these foods?	
Choose from: (4) Daily – (3) Several times per week – (2) Once per week – (1) Never	
Sugary drinks	
Sweets	
Processed carbs (bread, pasta, etc)	
Skip breakfast	
Skip lunch	
Skip dinner	

Review of Systems: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Fatigue | <input type="checkbox"/> Chest Pain |
| <input type="checkbox"/> Palpitations | <input type="checkbox"/> Swelling in ankles/legs |
| <input type="checkbox"/> Muscle aches | <input type="checkbox"/> Headaches |
| <input type="checkbox"/> Snoring | <input type="checkbox"/> Daytime sleepiness |
| <input type="checkbox"/> Weight gain (____ lbs last 3 months) | <input type="checkbox"/> Weight loss (____ lbs last 3 months) |

SOAP Note

- ✓ Insurance-friendly
- ✓ Can be scanned into EMR
- ✓ Patient completes all non-gray box sections

Past Medical History: (check all that apply)

- History of Stroke
- History of Heart Attack/Stent/Bypass Surgery
- History of Poor Circulation (peripheral vascular disease)
- None of the above

Exam:

- Vitals: Wt: _____ Ht: _____ BMI: _____ BP: _____ Pulse: _____ WC: _____
- CV: R R R; no M/G/R Abnl: _____ Edema: Yes / No JVD: Yes / No
- Respiratory: CTA B Abnl: _____ Respiratory Effort: NI Other:

Assessment:

Plan of Care:

<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Received education on blood sugar imbalance and inflammation relationship <input checked="" type="checkbox"/> Educated on low glycemic index, blood sugar, anti-inflammation, body composition goals <input checked="" type="checkbox"/> Recommend exercise or movement therapy as tolerated/as directed <input checked="" type="checkbox"/> Recommend daily stress management efforts 	<ul style="list-style-type: none"> <input type="checkbox"/> Provided deep breathing handout for stress management <input type="checkbox"/> Directed to keep blood sugar log (fasting and/or 2 hr after meals) <input type="checkbox"/> Directed to repeat diagnosis-specific labs every 3 months or as directed <input type="checkbox"/> Directed to continue medications as prescribed <input type="checkbox"/> Directed to keep blood pressure log <input type="checkbox"/> Return for follow up as directed below: <ul style="list-style-type: none"> <input type="checkbox"/> Labs first with provider visit after labs are back for review <input type="checkbox"/> Same day Provider visit + labs (O fasting O non-fasting) <input type="checkbox"/> Provider visit only
---	---

Setting and Managing Your Goals

There is so much wisdom in the old saying, "you can't change what you can't measure". Often the simple act of writing down your goals allows you to keep them in the forefront of your lifestyle. Use the chart below to determine the goals you wish to achieve and track your success as you make changes and improve your health. You may even wish to track your lifestyle changes on a weekly basis, moving items from one column to the next to achieve success!

GOALS I WISH TO ACHIEVE	WHAT I AM ACTIVELY CHANGING	WHAT I HAVE ACCOMPLISHED
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

Protecting Your Heart

The Blood Sugar/Insulin Connection



Did you know many people with diabetes, blood pressure, cholesterol and heart issues have the

Join us as we teach you how balancing these conditions and many more. You will receive information on how specific foods, exercise, and medicine strategies can help you regulate your weight issues for a lifetime of better

Event Flyer

- ✓ Market to office patients
- ✓ Market to the greater community
- ✓ Customizable Word format

LOGO AREA

**Regain blood sugar balance and restore your energy.
Register for our upcoming patient Group Visit:**

Date/Time/Location

GROUP VISIT

Protecting Your Heart: The Blood Sugar/Insulin Connection

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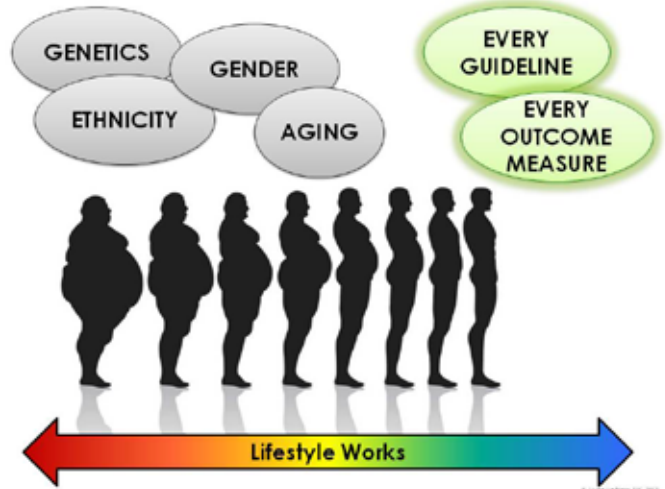
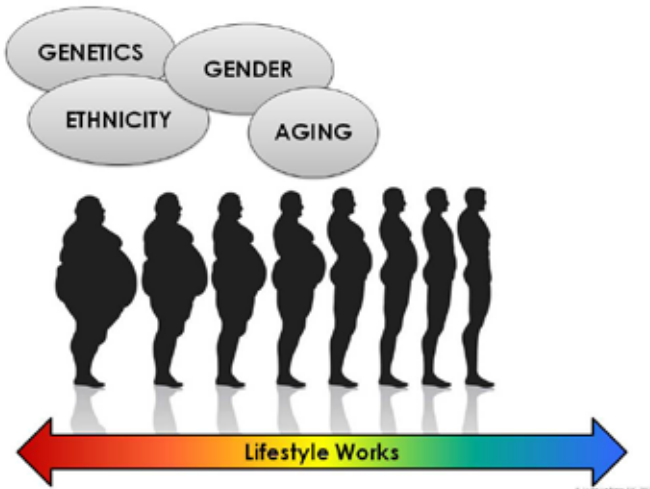
MIGRAINES
FATIGUE **OSTEOPOROSIS**
ARTHRITIS **OBESITY** **DEPRESSION**
HEART DISEASE **CANCER** **ACID REFLUX**
ANXIETY **USE**
ON
A

PowerPoint Slides

- ✓ Concepts reviewed in video
- ✓ PPT slide files for clinician to present and modify as needed
- ✓ Handouts for patients

Therapeutic Lifestyle Change

- National Institutes of Health
- Centers for Disease Control and Prevention
- American Heart Association
- American Cancer Society
- American Diabetes Association
- American Assoc. of Clinical Endocrinologists
- Arthritis Foundation
- North American Menopause Society
- National Institute on Aging



Trends for Obesity in the United States 1985 - 2009

BASED ON BODY MASS INDEX (BMI)

BODY MASS INDEX (BMI)

The higher your BMI, the higher your health risk.

Weight (lbs)	5'0"	5'1"	5'2"	5'3"	5'4"	5'5"	5'6"	5'7"	5'8"	5'9"	5'10"	5'11"	6'0"
110	19	20	21	22	23	24	25	26	27	28	29	30	31
120	20	21	22	23	24	25	26	27	28	29	30	31	32
130	21	22	23	24	25	26	27	28	29	30	31	32	33
140	22	23	24	25	26	27	28	29	30	31	32	33	34
150	23	24	25	26	27	28	29	30	31	32	33	34	35
160	24	25	26	27	28	29	30	31	32	33	34	35	36
170	25	26	27	28	29	30	31	32	33	34	35	36	37
180	26	27	28	29	30	31	32	33	34	35	36	37	38
190	27	28	29	30	31	32	33	34	35	36	37	38	39
200	28	29	30	31	32	33	34	35	36	37	38	39	40
210	29	30	31	32	33	34	35	36	37	38	39	40	41
220	30	31	32	33	34	35	36	37	38	39	40	41	42
230	31	32	33	34	35	36	37	38	39	40	41	42	43
240	32	33	34	35	36	37	38	39	40	41	42	43	44

Obesity Trends* Among U.S. Adults
BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs. overweight for 5' 4" person)



Legend: No Data, <10%, 10%-14%, 15%-19%, 20%-24%, 25%-29%, ≥30%

Obesity Trends* Among U.S. Adults
BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs. overweight for 5' 4" person)



Legend: No Data, <10%, 10%-14%, 15%-19%, 20%-24%, 25%-29%, ≥30%

Obesity Trends* Among U.S. Adults
BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs. overweight for 5' 4" person)



Legend: No Data, <10%, 10%-14%, 15%-19%, 20%-24%, 25%-29%, ≥30%

Obesity Trends* Among U.S. Adults
BRFSS, 1988
(*BMI ≥30, or ~ 30 lbs. overweight for 5' 4" person)



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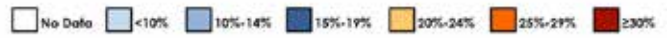
Obesity Trends* Among U.S. Adults
BRFSS, 1989

(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



Obesity Trends* Among U.S. Adults
BRFSS, 1990

(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



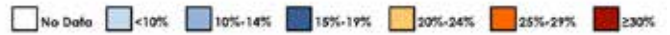
Obesity Trends* Among U.S. Adults
BRFSS, 1991

(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



Obesity Trends* Among U.S. Adults
BRFSS, 1992

(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



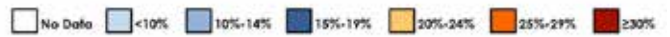
Obesity Trends* Among U.S. Adults
BRFSS, 1993

(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)

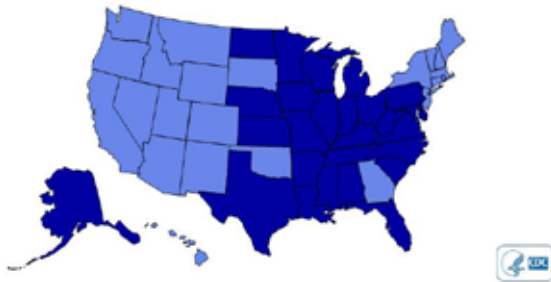


Obesity Trends* Among U.S. Adults
BRFSS, 1994

(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)

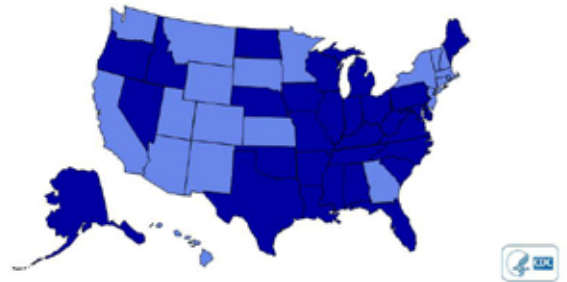


Obesity Trends* Among U.S. Adults
BRFSS, 1995
(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



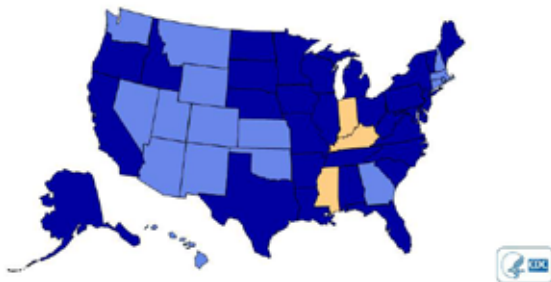
No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 1996



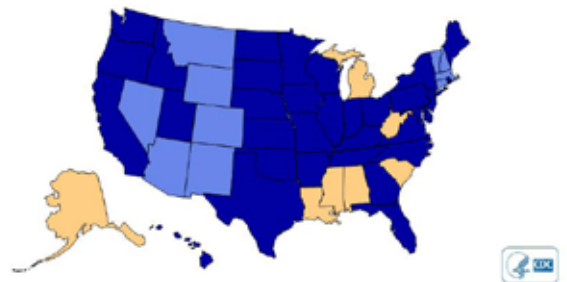
No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 1997



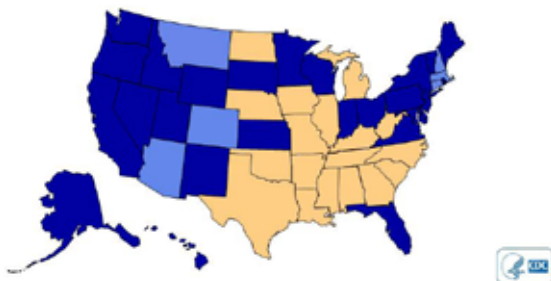
No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 1998



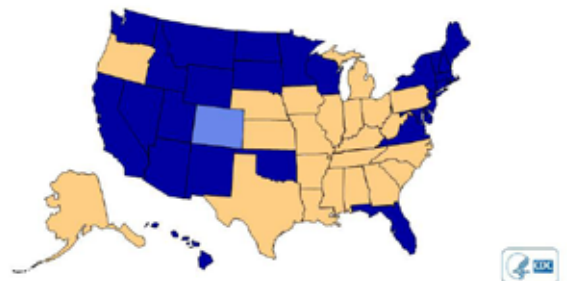
No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 1999



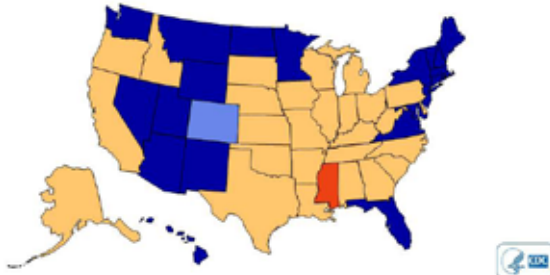
No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 2000



No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 2001
(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 2002
(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 2003
(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 2004
(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 2005
(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 2006
(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



No Data
 <10%
 10%-14%
 15%-19%
 20%-24%
 25%-29%
 $\geq 30\%$

Obesity Trends* Among U.S. Adults
BRFSS, 2007
(*BMI ≥30, or ~ 30 lbs. overweight for 5' 4" person)



Legend: No Data, <10%, 10%-14%, 15%-19%, 20%-24%, 25%-29%, ≥30%

Obesity Trends* Among U.S. Adults
BRFSS, 2008
(*BMI ≥30, or ~ 30 lbs. overweight for 5' 4" person)



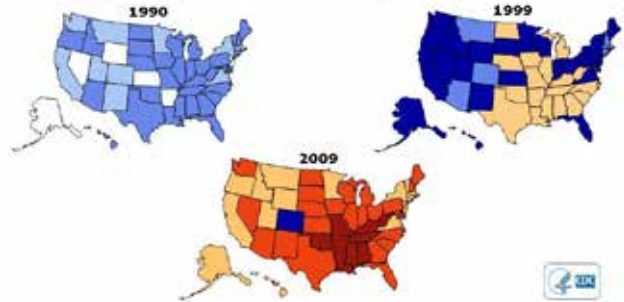
Legend: No Data, <10%, 10%-14%, 15%-19%, 20%-24%, 25%-29%, ≥30%

Obesity Trends* Among U.S. Adults
BRFSS, 2009
(*BMI ≥30, or ~ 30 lbs. overweight for 5' 4" person)



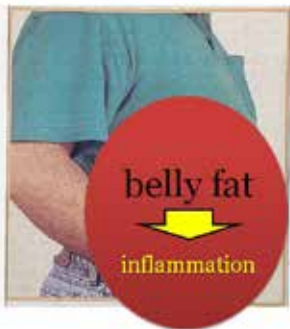
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Obesity Trends* Among U.S. Adults
BRFSS, 1990, 1999, 2009
(*BMI ≥30, or about 30 lbs. overweight for 5' 4" person)

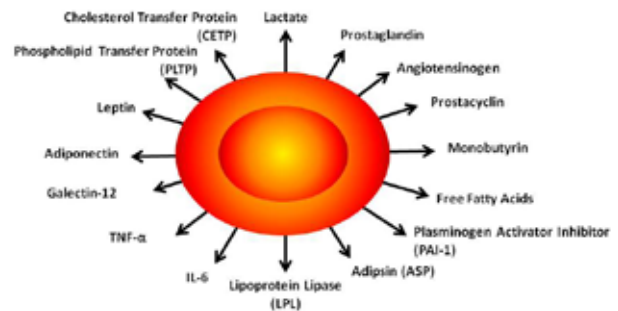


Legend: No Data, <10%, 10%-14%, 15%-19%, 20%-24%, 25%-29%, ≥30%

Fat Cells Cause Inflammation



Fat Cells Cause Inflammation



Today's patients are facing an epidemic of lifestyle-related health problems.

- ✓ Cardiovascular Disease
- ✓ Type 2 Diabetes
- ✓ Cancer
- ✓ Metabolic Syndrome

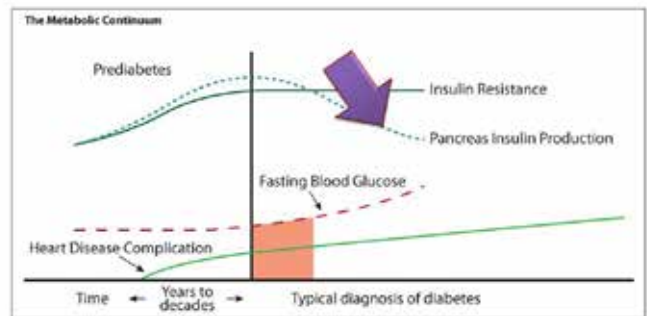
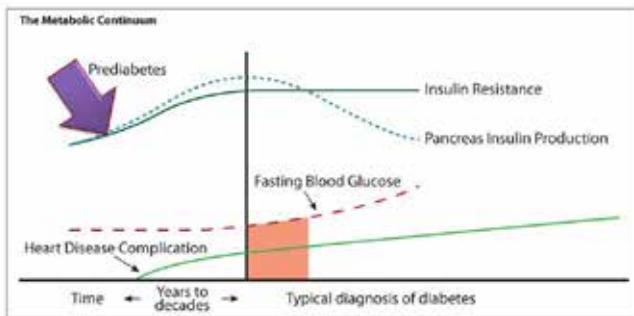
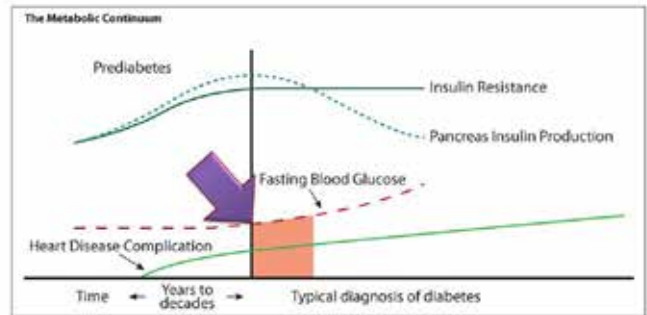
Today's patients are facing an epidemic of lifestyle-related health problems.

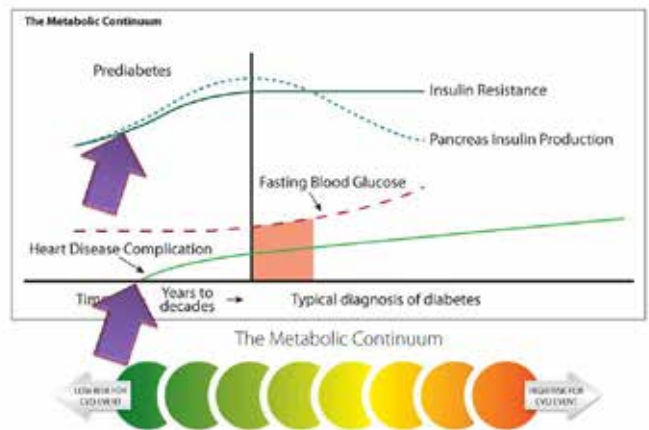
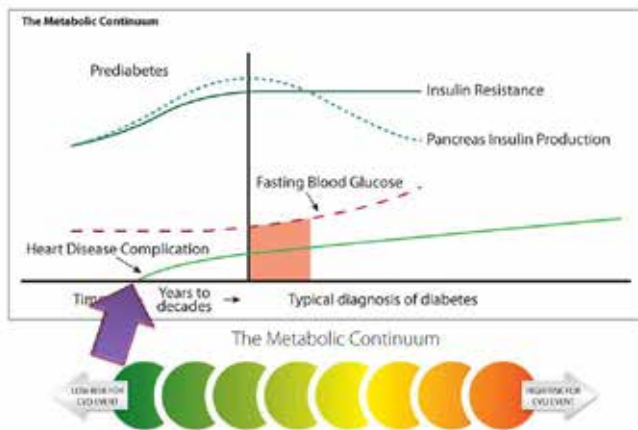


- ✓ Cardiovascular Disease
- ✓ Type 2 Diabetes
- ✓ Cancer
- ✓ Metabolic Syndrome

**Genes have not changed...
LIFESTYLE is the ROOT CAUSE.**

Path to Disease





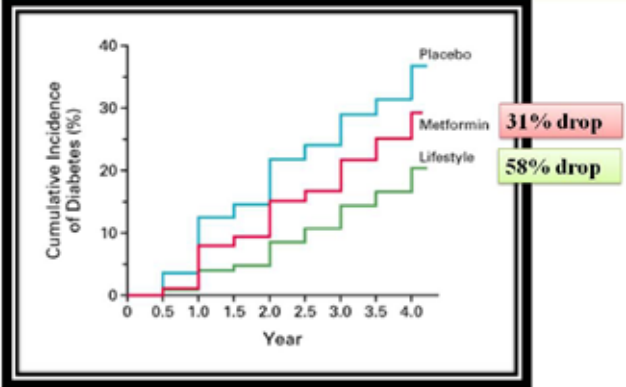
Protecting the Heart



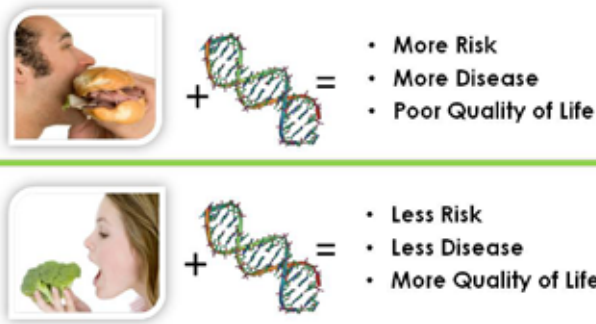
Science Supports Lifestyle Interventions



Lifestyle vs. Pharmaceutical



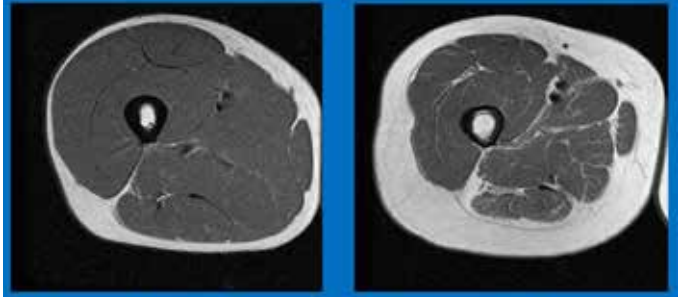
The POWER of Lifestyle Medicine





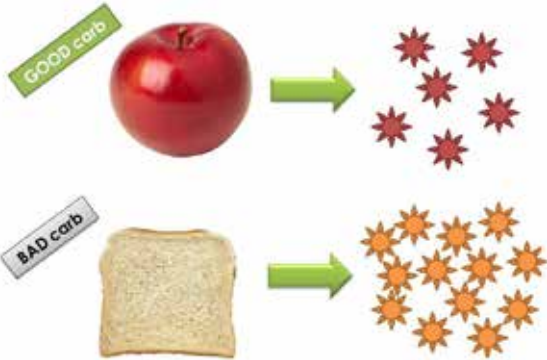
Ready for Change?

Belly Fat Causes Inflammation

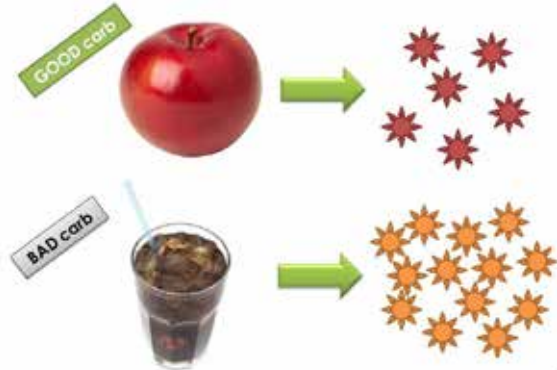


Chronic Inflammation = Disease

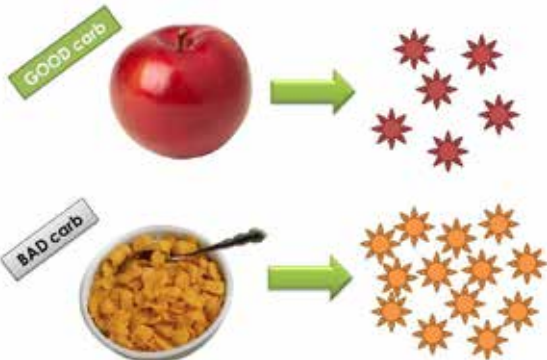
Bad Carbohydrates Cause Fat Gain



Bad Carbohydrates Cause Fat Gain

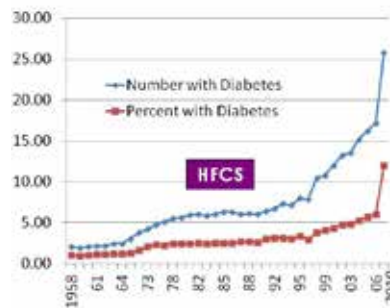


Bad Carbohydrates Cause Fat Gain



High Fructose Corn Syrup

Number and Percent of US Population Diagnosed with Diabetes



95% of Type 2 diabetes is due to...

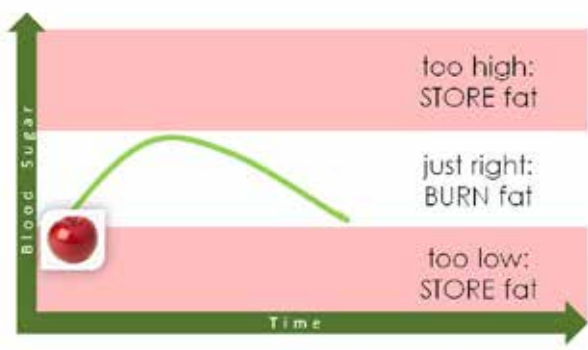
POOR LIFESTYLE

ELIMINATE sugary drinks and foods with HFCS

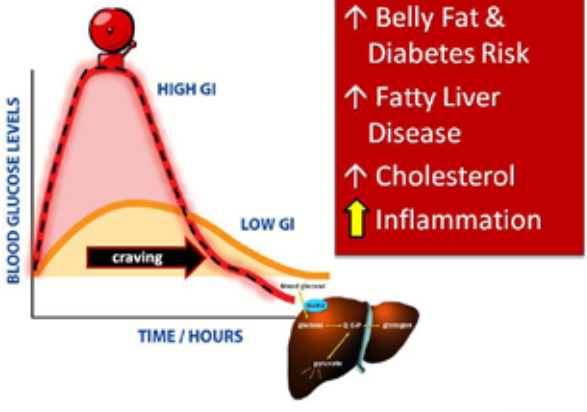
Glycemic Index

High GI (70 and above)	Idaho Potato	93
	Corn Flakes	84
	Pretzels	83
	Jelly Beans	80
	Waffles	76
Medium GI (56 to 69)	Bagel	72
	Beets	65
	Ryvita Crackers	69
	Pineapple	66
	Red Potato	62
Low GI (55 and under)	Ice Cream	51
	Sweet Potato	54
	Steel Cut Oats	49
	Carrots	49
	Apple	38
	Kidney Beans	27
	Walnuts	15
Red Peppers	10	

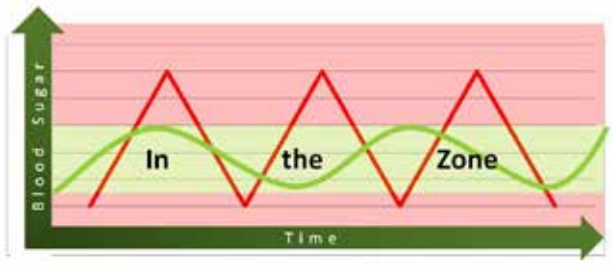
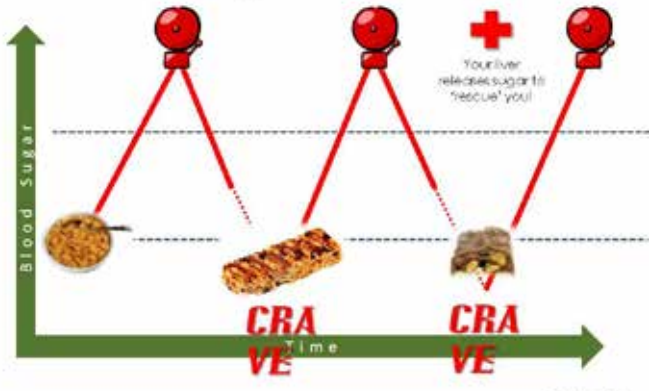
Managing Blood Sugar Reduces INFLAMMATION



High Glycemic Impact



The Dangerous & Inflammatory Blood Sugar Rollercoaster



- ### KEY POINTS
- High glycemic foods trigger Insulin Alarms
 - High Insulin leads to Fat Storage
 - Long-term High Insulin linked to Insulin Resistance
 - Insulin Resistance can lead to Type 2 Diabetes

- ### KEY POINTS
- ## BURN FAT

to Reduce Inflammation
- Fat Burning Zone is Healthy
 - LESS fat gain
 - MORE fat loss
 - Less Insulin Resistance, Diabetes & Inflammation

4 STEPS

for Blood Sugar & Insulin Balance

1. **Determine your risk**
2. **Set personalized targets**
 - Blood sugar & insulin
 - Weight
 - Lipids
3. **Implement lifestyle medicine**
4. **Track your progress**



STEP 1

Determine your risk:

- Measurements, blood samples and a complete health history
- Insulin resistance score calculation
- Diet and physical activity questionnaire/diary to help set reasonable goals for you



STEP 2

Set targets and goals for risk reduction

- Weight reduction goal
 - BMI
 - Fat Mass%
- Waist circumference
- Blood sugar
- Glycated hemoglobin (HbA1c)
- Fasting insulin
- Insulin Resistance Score



STEP 3

Plan & Implement a risk reduction strategy

- Dietary Pattern recommendations
 - Low Glycemic Impact
 - High Fiber
 - Smaller, more frequent meals
- Eat breakfast
- Eliminate soda and sugary beverages

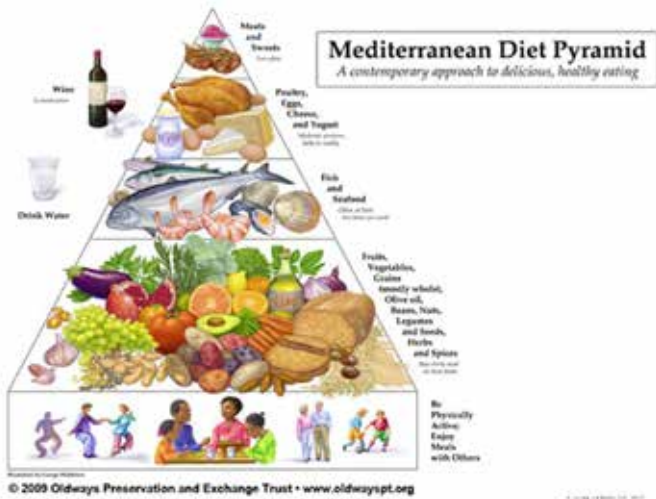


STEP 3

Plan & Implement a risk reduction strategy

- Physical activity recommendations
 - 150 minutes per week
 - Walking or other equivalent
- Additional recommendations
 - Stress management
 - Sleep hygiene





Nutrition Recommendations



Seven Spheres of Lifestyle Synergy



STEP 4

Track your progress with regular follow-up

- accountability
- adjustments
- success





GROUP VISIT

Protecting Your Heart: The Blood Sugar/Insulin Connection

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BODY MASS INDEX (BMI)

The higher your BMI, the higher your health risk

BMI	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44
4' 10" (58")	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167	172	177	181	186	191	196	201	205	210
4' 11" (59")	96	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173	178	183	188	193	198	203	208	212	217
5' 0" (60")	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179	184	189	194	199	204	209	215	220	225
5' 1" (61")	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185	190	195	201	206	211	217	222	227	232
5' 2" (62")	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191	196	202	207	213	218	224	229	235	240
5' 3" (63")	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197	203	208	214	220	225	231	237	242	248
5' 4" (64")	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	203	209	215	221	227	232	238	244	250	256
5' 5" (65")	114	120	126	132	138	144	150	156	162	169	174	180	186	192	198	204	210	216	222	228	234	240	246	252	258	264
5' 6" (66")	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216	222	228	234	240	246	252	258	264	270
5' 7" (67")	121	127	134	140	146	153	159	166	172	178	185	191	198	204	210	216	222	228	234	240	246	252	258	264	270	276
5' 8" (68")	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	222	228	234	240	246	252	258	264	270	276	282
5' 9" (69")	128	135	142	149	155	162	169	176	182	189	196	203	209	216	222	228	234	240	246	252	258	264	270	276	282	288
5' 10" (70")	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	235	242	248	255	261	268	274	281	287	294	300
5' 11" (71")	136	143	150	157	165	172	179	186	193	200	208	215	222	229	235	242	249	256	263	270	276	283	289	295	302	309
6' 0" (72")	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	249	256	264	271	278	285	292	299	306	313	320
6' 1" (73")	144	151	159	166	174	182	189	197	204	212	219	227	235	242	249	256	264	271	279	286	293	300	307	314	321	328
6' 2" (74")	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	271	279	287	295	303	311	318	326	333	341
6' 3" (75")	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	280	288	296	304	312	320	328	336	344	351
6' 4" (76")	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287	295	304	312	320	328	336	344	353	361

Patient Handouts

- ✓ Reference concepts learned from group session
- ✓ Reinforced plan of care
- ✓ Customizable with clinic name/logo

[Insert
Logo
Here]

Protecting Your Heart: The Blood Sugar/Insulin Connection *Tips for Success*

Foods that produce high levels of blood sugar are called high glycemic index (GI) foods. When your diet consists predominantly of these foods, your body responds by producing higher levels of insulin. When insulin levels are high, your body not only converts blood sugar into energy, but also stores extra energy as fat. Thus, when insulin levels are high, you store more fat; when insulin levels are normal, you burn fat more efficiently.

A diet that contains high GI foods can lead to cravings for carbohydrates and an overall increase in appetite, possibly resulting in unwanted weight gain. These foods can cause large fluctuations of both blood sugar and insulin levels, leading to a cycle of overeating and inflammation. Remember, if you eat low glycemic, you can keep your blood sugar "In The Zone." This helps your body burn fat, which ultimately reduces inflammation and lowers your risk of obesity, insulin resistance, and diabetes.



Tips for Success:

- Reduce or stop sugary or diet drinks
- Rid your home or office of unhealthy distractions
- Eat more healthy proteins and veggies
- EAT LOW GLYCEMIC FOODS
- DRINK WATER
- Don't overeat "good" calories (they are still calories that add up)
- Graze all day (6 small meals)
 - Don't starve
 - Don't eat too late
- Don't rush into this
 - Make a plan to change something
 - Make it challenging for YOU
 - Choose it wisely
 - Make it ATTAINABLE
- Mark your start date on the calendar
 - Start within 1 week
 - When the date comes, write down your goals
 - STICK TO IT!
- Know that this time, you can do it!

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Protecting Your Heart:
The Blood Sugar/Insulin Connection
Calculating Target Heart Rate and Exercise Planning

For many, the challenge to getting adequate cardiovascular exercise is just knowing how much is enough. In order to determine if your level of aerobic exercise is adequate, you must keep your heart rate (beats per minute) above 50% of your maximum heart rate for at least 30 minutes at a time. Doing so can achieve the same cardiovascular benefits as with vigorous aerobic exercise.

Calculate:

Maximum Heart Rate (220 – your age)bpm X .5 = Target Lower End

Maximum Heart Rate (220 – your age)bpm X .8 = Target Upper End

For example, the maximum heart rate for a 40 year old = 180 beats per minute (220 minus 40). Thus, this 40 year old has a cardiovascular exercise target range of 90 to 144 beats per minute (180 x .5) lower end and (180 x .8) upper end.

Your heart rate can be measured at the wrist or neck by placing your index and middle fingers along the inside of your wrist below your thumb or along the side of your neck about two centimeters in front of your jaw. Apply very mild pressure. The easiest way to determine your heart rate is to count the number of beats in 6 seconds and add a zero. For example, if you count 7 beats in 6 seconds, your heart rate would be 70 beats per minute (bpm).

Looking for ways to get that heart pumping? Look no further. Here is a list of common exercises and the number of calories burned when performing each exercise for 1 hour.

Activity	Weight of the Person & Calories Burned		
	160 lbs	200 lbs	240 lbs
Aerobics, high impact	533	664	796
Aerobics, low impact	365	455	545
Aerobics, water	402	501	600
Baseball or softball	365	455	545
Basketball game	584	728	872
Bicycling	292	364	436
Bowling	219	273	327
Canoeing	256	319	382
Football	584	728	872
Golfing (carrying clubs)	314	391	469
Hiking	438	546	654
Racquetball	511	637	763
Resistance (weight) training	365	455	545
Rollerblading	548	683	818
Rope jumping	861	1,074	1,286
Rowing	438	546	654
Running 5 mph	606	755	905
Running 8 mph	861	1,074	1,286
Skiing, water	438	546	654
Stair stepper	657	819	981
Swimming laps	423	528	632
Tai kwon do	752	937	1,123
Tennis, singles	584	728	872
Volleyball	292	364	436
Walking 2 mph	204	255	305
Walking 3.5 mph	314	391	469

**Adapted from: Ainsworth BE, et al. 2011 compendium of physical activities: A second update of codes and MET values. Medicine & Science in Sports & Exercise. 2011;43:1575.

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Protecting Your Heart:
The Blood Sugar/Insulin Connection
Glycemic Index Food List

Category	Low Glycemic <55	Medium Glycemic 56-69	High Glycemic >70
Meat, Fish, Poultry & Meat Alternatives	Beef Chicken Eggs & egg whites Fish Lamb Pork Tofu Turkey Veggie burger		
Dairy & Dairy Alternatives	Almond milk (unsweetened) Cheese (lowfat) Coconut milk (unsweetened) Cottage cheese (lowfat) Cow's milk (lowfat) Greek yogurt (plain) Ice cream (premium & lowfat) Oat milk (unsweetened) Soy milk (unsweetened) Yogurt (plain or sugar-free)		
Beans, Breads, Grains & Cereals	<p><u>Beans:</u> Baked beans (sugar-free) Beans (black, garbanzo, kidney, lentil, lima, mung, pinto, etc) Hummus Peas (green & black-eyed)</p> <p><u>Bread:</u> 100% whole wheat Pita, whole wheat Pumpernickel Sourdough Stone ground whole wheat</p> <p><u>Grains:</u> Barley (pearled or hulled) Bran (oat, rice, wheat) Buckwheat Bulgar wheat Egg noodles Pasta (plain, high protein, whole wheat) Brown rice Quinoa Rye Udon noodles</p> <p><u>Cereal:</u> All-Bran® Bran Buds® Kashi Go Lean® Steel cut oats</p>	<p><u>Grains:</u> Bean thread noodles Buckwheat noodles Cornmeal Couscous Rice, white Pancakes Taco shell</p> <p><u>Cereal:</u> This brand of Chex is discontinued Cream of Wheat®, original Granola, sugar-free Muesli, sugar-free Oats, quick or old fashioned Puffed wheat Raisin Bran® Shredded Wheat® Special K®</p>	<p><u>Grains:</u> Millet Rice, Japanese sticky Rice, wild Waffles</p> <p><u>Bread:</u> Bagel Baguette White bread White rolls</p> <p><u>Cereal:</u> Bran flakes Cheerios® Corn Flakes® Cream of Wheat®, instant Golden Grahams® Grape-Nuts® Oats, instant Rice Krispies® Weetabix®</p> <p>NOTE: All white flour products have higher GI, so try to avoid them.</p>

Category	Low Glycemic <55	Medium Glycemic 56-69	High Glycemic >70
Fruits	Apples (fresh or dried) Apricots (dried) Banana (less ripe, no spots) Berries (blueberries, strawberries, raspberries, blackberries, etc) Cherries Grapes Grapefruit Guava Honeydew Kiwi Kumquats Lemon Lychee Mandarin oranges Mango Nectarine Orange Peach Pear Plum Pomegranate	Apricots (fresh) Breadfruit Cantaloupe Currants Figs Papaya Pineapple Raisins	Dates Watermelon
Vegetables	Artichokes Arugula Asparagus Avocado Bok choy Broccoli Brussels sprouts Cabbage (red or green) Cauliflower Celery Cucumbers Eggplant Endive Green beans Greens (collard, kale, turnip, mustard) Herbs (parsley, basil, dill, oregano, etc) Jicama Lettuce (all types) Mushrooms Okra Onion/garlic/leek/shallot Peppers (bell, jalapeno, pablano, etc) Snow peas/snap peas Spinach Squash (zucchini, yellow, spaghetti) Tomato (incl. juice, paste, soup) Vegetable juice (low sodium) Water chestnuts Watercress	Acorn squash Beets Butternut squash Corn (fresh/frozen) Carrots (cooked) French fries* Mashed potato New potato Potato chips Sweet potato Taro	Baking potato Carrots (raw) Idaho potato Parsnip Pumpkin

***Not recommended as part of a healthy diet**

Category	Low Glycemic <55	Medium Glycemic 56-69	High Glycemic >70
Snacks, Nuts, Chips, etc.	Nuts/seeds: Cashews Dark chocolate (70% and higher) Hazelnuts Peanuts Pinenuts Pumpkin seeds Sesame seeds Sunflower seeds Walnuts	Popcorn	Corn chips Jelly beans Pretzels
Sweeteners	<p><u>Natural sweeteners:</u> Agave nectar (organic) Brown rice syrup Fructose (fruit sugar) Lactose (milk sugar) Maple syrup, 100% pure Stevia (Truvia™, PureVida™) Xylitol Erythritol</p> <p><u>Artificial sweeteners:</u> (not recommended) Sucralose (Splenda™) Aspartame (Equal™, NutriSweet™)</p>	Honey	Cane sugar Corn syrup High fructose corn syrup* Sucrose (table sugar)

***Not recommended as part of a healthy diet**



Protecting Your Heart:
The Blood Sugar/Insulin Connection
Making Exercise Part of Your New Lifestyle

Now that you're on the path to a new, healthier you, here are five simple steps to get moving!

Starting a fitness program may be one of the best things you can do for your health. Physical activity reduces your risk of chronic diseases like diabetes, heart disease, arthritis and more. Additionally, moderate and consistent exercise can improve your balance and coordination, help you sleep better, manage your weight and improve your self-esteem. You can get started in just five simple steps, but be sure your physician clears you to get going.

Step 1: Determine your level of fitness

You probably have some idea of how fit you are. But assessing and recording baseline fitness scores can give you benchmarks to measure your progress. To assess your aerobic and muscular fitness, flexibility and body composition, consider recording:

- Your pulse before and after you walk 1 mile
- How long it takes you to walk 1 mile
- How many push-ups you can do in one session
- How many sit-ups you can do at one sitting
- How far you can reach forward while seated on the floor with your legs extended in front

Step 2: Design your fitness program

It's easy to say that you'll exercise every day. But you'll need a plan. As you design your fitness program, keep these points in mind:

- **Know yourself** Are you starting a fitness program to help lose weight? Or do you have another motivation, such as preparing for a marathon? Having clear goals can help you gauge your progress. Also, know what type of environment you do best in. Some people love the gym or group fitness environment while others prefer to 'walk alone' or use video workouts.
- **Set your goal** Most adults should aim for at least 150 minutes of moderate-intensity aerobic activity — or 75 minutes of vigorous aerobic activity — a week. Adults also need two or more days of strength training a week.
- **Ease in** Work with your physician to gauge what level to start. Then, gradually increase your exercise intensity, strength and endurance. Then start cautiously and progress slowly. If you have an injury or a medical condition, consult your physician or a physical therapist for help designing a fitness program that best suits your needs.
- **Book it!** Finding time to exercise can be a challenge – it's the main reason people avoid exercise. Truth is, you just need to prioritize and schedule it. That's right, we suggest you schedule time to exercise as you would any other appointment. Other ideas include watching your favorite show while walking on the treadmill, reading while riding a stationary bike, or listening to books on your digital audio device while walking outdoors. A great song list can really help pass the time during a strength training workout.

- **Crosstrain** To keep you and your muscles from getting bored, change it up! (Cross-training also reduces your chances of injuring or overusing one specific muscle or joint). Plan to alternate among activities that emphasize different parts of your body, such as walking, swimming, strength training and yoga.
- **Pace yourself** Many people start an exercise program in a frenzy — working out too long or too intensely — and give up when their muscles and joints become sore or injured. Alternate cardio and strength training to build muscle mass, not injure it. Rest and recovery are essential.
- **Share it** Tell your exercise plan to friends and family. Ask them to assist with your motivation and keep you going. But this plan goes both ways—don't get upset with your loved ones when they try to motivate you. Also, a shared, written plan can also encourage you to stay on track. When you share any exercise goals, you're more likely to stick with it.

Step 3: Prepare your equipment

If you're planning to join a gym facility, this step is pretty easy. Visit more than one establishment and find your best fit. If you're interested in exercise classes, make sure their schedule works for you. Ask about their busy times and determine if it matches your schedule. Also, many gyms include one or two personal training sessions to get you acquainted with the machines or the types of exercises you should expect in a class.

Fitness videos are also another popular way to fit exercise into your daily life without leaving home. Choose videos that provide exercise at your level and not too far above, as injury may occur. Consider trying something new—who knows, you just might love Zumba™. You may also need new athletic shoes. Be sure to pick shoes designed for the activity you have in mind.

If you're planning to invest in exercise equipment, choose something that's practical, enjoyable and easy to use. Consider checking out certain types of equipment at a fitness center before investing in your own equipment. To stretch your exercise dollars, consider buying used equipment – most often you'll get very good quality for the money.

Step 4: Get started

Now you're ready for action. As you begin your fitness program, keep these tips in mind:

- **Easy does it** Give yourself plenty of time to warm up and cool down with easy walking or gentle stretching. Then speed up to a pace you can continue for five to 10 minutes without getting overly tired. As your stamina improves, gradually increase the amount of time you exercise. Work your way up to 30 to 60 minutes of exercise most days of the week.
- **Work out in small doses** You don't have to do all your exercise at one time. Shorter but more-frequent sessions have aerobic benefits, too. Fifteen minutes of exercise a couple of times a day may fit into your schedule better than a single 30-minute session.
- **Get your creative juices flowing** Maybe your workout routine includes various activities, such as walking, bicycling or rowing. But don't stop there. Take a weekend hike with your family or spend an evening ballroom dancing.
- **Honor your body** If you feel pain, shortness of breath, dizziness or nausea, you may be pushing yourself too hard. Be sure to notify your physician if any concerning symptoms occur.
- **Be flexible** If you're really overwhelmed or too sore, give yourself permission to take a day or two off. Just know that you'll start back right where you left off.

Step 5: Monitor your progress

Repeat your personal fitness assessment six weeks after you start your program and then again every three to six months. You may notice that you need to increase the amount of time you exercise or increase the amount of weight you work with in order to continue improving. Or you may be pleasantly surprised to find that you're exercising just the right amount to meet your fitness goals.

If you lose motivation, set new goals or try a new activity. Exercising with a friend or taking a class at a fitness center may be just what it takes.

Starting an exercise program is an important decision. But it doesn't have to be an overwhelming one. By planning carefully and pacing yourself, you can establish a healthy habit that lasts a lifetime.

Your patients want to change... now you have the tools

This toolkit is designed to teach patients why and how a low-glycemic, anti-inflammatory diet is essential for protecting the heart and improving insulin sensitivity. Patients will learn how an emphasis on nutrition and physical activity helps treat many common diseases and even reverse their effects.

Use for patients with these issues:

- Diabetes/Prediabetes
- Hypertriglyceridemia
- Low HDL
- CAD/CVD/CHD
- Metabolic Syndrome
- Obesity/Overweight
- PCOS
- Fatty Liver Disease

THIS GROUP VISIT TOOLKIT INCLUDES:



Visit Forms:

Patient intake forms are designed to capture key information to create efficient, insurance-friendly patient encounters.



Patient Handout(s):

Patient-friendly handout(s) assist you and improve the implementation of key lifestyle tips necessary to correct underlying causes of illness.



Multi-Media Education:

Choose the format to best suit your presentation style

- Video + audio version
- Presentation slides for custom education

Ideal use for a Group Visit or one-on-one setting

Shilpa P. Saxena, MD is a Board-Certified Family Practice physician whose passion and purpose come to life through sharing her innovative patient education and practice management solutions in her classic 'keep it simple' style. She serves as Faculty with the Institute for Functional Medicine, the Arizona Center for Integrative Medicine, the University of Miami, Miller School of Medicine, and the Metabolic Medical Institute at George Washington University. Dr. Saxena is an expert in the Group Visit medical model, creator of Group Visit Toolkits, and co-author of *The Ingredients Matter: India*.

