Anti-Aging Workbook

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I. Introduction

In the fields of nutrition, fitness, and anti-aging there are many misconceptions. This is why we have created an anti-aging course and workbook. My goal is to educate you in the basics of what influences aging and what we can do to affect it. It is my belief, that proper nutrition from diet and supplements, combined with an appropriate lifestyle, can help patients increase their odds of living a longer life.

What is health? Are we truly healthy? The attitude in America is that if you do not have a disease or illness, you are in good health. This type of thinking is wrong. Many illnesses are not apparent until the disease process has progressed to a certain point. Often times the person feels normal yet has an underlying, undetected disease process occurring. For example, cancer does not occur in a day from smoking. It takes many years to develop. Yet during the time it is developing, the person feels fine, not knowing what is happening to their body until the disease gets worse.

The goal of the Anti-Aging program and course is to educate you in ways that can positively affect healthy aging. Notice the word healthy. Aging will occur, but will it be healthy or sickly? Living long and being healthy is based on choices and decisions about our diet and lifestyle. It is our responsibility to help our patient’s age well, and focus on some controllable factors that can affect their longevity in a positive way.

The purpose of the anti-aging workbook is to provide an outline to follow when designing an anti-aging program for your patients. The workbook contains forms you will need for patients as well as information to use during your evaluation. I would suggest you make copies of the necessary forms so that they can be used over and over again. The workbook focuses on a few main areas important for health and longevity. Exercise, social interactions, stress, diet, and supplements are an integral part of the anti-aging program. It is your job to ensure that your patients follow the program. The patient must understand what the program entails and the importance of consistency and follow-up. The only way an anti-aging program can be effective is if it is done on a consistent basis, day after day, month after month, and year after year. Keep in mind that follow-ups are especially important as our lives can change from time to time. For example, in the North during the winter months, people tend to be less active. Therefore this has to be considered when working with a patient who lives in colder climates. Remember also that there is great variability between people. What one person can do another cannot or will not. You must always consider this when giving advice or instruction.

The Anti-Aging program consists of:
1. Exercise
2. Stress Reduction and Social Interactions
3. Weight Control
4. Diet Changes
5. Beneficial Individual Foods
6. Supplements
7. Education
All individual parts of the anti-aging program are equally important. It is the cumulative effect of all seven areas that give the benefit. Certainly doing one or two would be beneficial. However, doing all seven can truly help a person live a longer and healthier life. You must make sure that each and every person in the program is instructed in all areas and follows your recommendations.

Exercise, stress reduction, weight control, diet changes, and beneficial individual foods can all be addressed by the interaction between the Doctor and patient/client. The workbook provides forms and instruction that can assist in this process. Supplements must be purchased and then supplied to the patient/client by you directly. I have found over many years of practice that if you do not provide the patient with supplements and leave it to them to get them on their own, it does not happen. They often will forget or not want to spend the money. Therefore, you must include the supplements with the program. Finally, education of the patient is essential. You can achieve most of this through your work with the patient, and as they go through the program they will learn a great deal about health, diet and fitness. One resource that can help is my book, “The Ageless Advantage: Your Complete Resource for Living Longer Through Diet and Lifestyle.” I would suggest that each person who enrolls in the anti-aging program purchases a copy for his or her own home use. The book lists the foods that are essential for anti-aging and can serve as a reference for the patient. This will decrease the time that you need to spend with them.

Remember, for an anti-aging program to be effective, as many parts of the program as possible need to be followed. Please do not let your patient or client negotiate which parts they want to do and which parts they do not want to do. That type of a program will have minimal benefit. You must explain this to them so they fully understand what is involved, financially, emotionally, and time commitment.

I hope this workbook helps you in designing an anti-aging program for your patients. It is not possible to include all the different scenarios that may exist in real life. You will have to modify sections of this program to fit the patient’s individual needs. Please keep this in mind. Anti-aging is not one size fits all. However I am confident that with the course and workbook materials that we have presented, you should be knowledgeable enough to make these modifications.

Good Luck and Live Long!
II. Administrative

You will need the following forms for the Anti-Aging program

1. Initial Intake Form - basic information concerning the patient’s name, address, phone, birth date, gender, employer, email address, social security, emergency contact information, primary care Doctor, date of last physical, date of last blood test, x-rays, or other tests if known all need to be included.

2. Medical and Nutrition History Form - medical and nutritional information that includes medical issues, nutritional issues, allergies, medications and supplements.

3. Consent to Service Form - this form basically gives you permission from the patient to conduct the examination that is necessary for the anti-aging program.

4. Anti-Aging Program, Exercise and Diet Disclaimer Form - this form must state that you are not treating a disease. You must imply that you are helping the client to formulate an appropriate diet and lifestyle for their specific needs. You also need to mention that they assume responsibility for taking supplements. Both you and the patient need to sign the disclaimer.
Anti-Aging Patient Intake Information

Date________________________

First Name__________________________ Last Name______________________________________

Street Address ____________________________

City ____________________________ State_______ Zip_________________ 

Phone______________________________ Email Address ____________________________

Birth Date___________________ Age_______ Sex _______ Marital Status   S   M   D   W

Social Security #_________________________________ Children____________________________

**Employer Information:**

Employer ____________________________ Occupation__________________________________

Work Address ____________________________

Phone______________________________

**Emergency Contact:**

Emergency Contact Name _________________________ Phone _________________________ 

Relationship ________________________________

**Primary Care Doctor:**

Primary Care Doctor Name:________________________ Phone________________________ 

Date last Seen _______________________Date of last physical___________________________

List recent Blood work or other medical tests__________________________________________

SIGNATURE____________________________________________________________________
Medical and Nutrition History Form

What diseases or illnesses do you currently have or have had in the past? When did they occur?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Does anyone in your family have or had any diseases or illnesses? Which type and who has or had them?
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________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Have you had any surgeries or hospitalizations? If so, when and for what?
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________________________________________________________________________
________________________________________________________________________
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What medications or hormones are you taking? List all of them and for what medical condition you are taking them. Include over the counter medications as well.
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________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Do you have any allergies to food, medication, vitamins, animals, etc?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
What supplements are you taking?

________________________________________________________________________

Do you smoke? If so, how often, how much and are they cigarettes or cigars?

________________________________________________________________________

Do you consume alcohol? If so, how often, how much, and what type?

________________________________________________________________________

Do you take recreational drugs? If so, what and how often?

________________________________________________________________________
Consent to Service

I, _____________________________________________________, authorize the performance upon myself of the following procedures:

1. Examination procedures based upon clinical necessity. I understand that this is a nutritional and anti-aging evaluation and thus tests such as vital signs, body fat, anthropometric measurements, palpation and an overall physical examination are necessary. Any procedure will be described prior to its performance.

2. I also consent to the performance of other diagnostic and therapeutic procedures in addition to or different from those stated above, whether or not arising from presently unforeseen conditions, that might be considered necessary or advisable in the course of my health care.

3. The nature and purpose of the procedures, possible alternatives, and the risks involved, the possible consequences, and the possibility of complications will be explained to me.

4. I acknowledge that there is no guarantee or assurance as to the results that may be obtained from this anti-aging program.

Anti-Aging Program, Exercise and Diet Disclaimer

I understand that participating in this anti-aging program or any program that involves exercise, nutrition, and lifestyle changes has certain risks. I realize that the information I provide to determine my potential risk category and to provide a subsequent exercise, stress reduction, lifestyle changes and nutrition program is correct to the best of my knowledge.

In addition, I acknowledge that my participation in the anti-aging program involves changes in my lifestyle, nutritional habits, exercise habits, involves stress reduction procedures, and the taking of supplements. I take full responsibility for any claims for injuries or illness that may result from my participation in this program.
I also understand that I am not being treated for an illness or disease by participating in this program. Appropriate diet and lifestyle changes will be discussed and I take full responsibility for any injury or illness that results.

DATE__________________SIGNED________________________________________

STAFF_________________________________________________________________
Scheduling

The anti-aging consultation typically takes one hour and therefore you must schedule accordingly. This usually does not include the time necessary for the patient to complete the initial paperwork. You have to perform certain measurements and calculations on that first visit as well as review their lifestyle habits and stress levels. In addition, you need to go over their diet and supplements. Follow-up appointments should be scheduled for 30 minutes. Of course, depending upon what is to be done and whether the patient needs greater attention, longer time periods may be necessary.

Record Keeping

Good record keeping is a must. You must follow standard record keeping practices and HIPAA patient confidentiality standards. Records must be kept for a period of 7 years.

The SOAP note format should be used.
S = Subjective – This is the main complaint or issue. In the anti-aging program when a person initially presents to your office their Subjective would be that they wish to participate in an anti-aging program. During follow-up visits, examples of subjective statements would be “I am tired or sore with the exercises.” Or, “I am having trouble relaxing when performing my breathing exercises.” etc.
O = Objective – These findings include examination or test findings. Vital signs, body fat, weight, etc are examples of objective signs.
A = Assessment – What is happening with the patient. Examples would be “The patient is stable.” Or, “The patient is making progress as expected.” Or “The patient needs further workup.” etc.
P = Plan – What do we do now? Are follow-ups necessary? When will the patient be returning? Are changes needed in the program? etc.

All of this needs to be documented when you see the patient. In addition, anything that is different or has changed needs to be addressed. Whether it is a new family Doctor, phone number or new illness that has been diagnosed, this needs to be documented. Remember, it is not enough just to document something. You need to have it addressed by yourself and the chiropractic or medical physician you are working with.

Marketing

There are many ways to market your anti-aging program. Perhaps the easiest is to market the program to existing chiropractic patients. This can be included in a wellness program that you currently offer or combined with their monthly maintenance manipulation program. One of the things you can do is to have included on your normal chiropractic intake forms questions concerning all aspects of health, including nutrition and anti-aging. When a person presents for a typical chiropractic problem they should fill this questionnaire out. This is done so you can address their other health needs with a nutrition/anti-aging program. For
example, if the new patient states they have high cholesterol or high blood pressure, a brief consultation appointment should be made immediately to inform them of how an anti-aging program can help them.

An office brochure should also be created that describes your anti-aging program or other services you offer. For example, if you follow my anti-aging program you will see that body fat needs to be measured and weight calculations are necessary. These services can also be marketed to your patients individually separate from the anti-aging program.

You can also market your anti-aging services to fellow chiropractic physicians and other health care providers through meetings, direct marketing, presentations, etc. You can also market the general public informing them that you offer anti-aging services through newspapers, radio and local television. They can also be reached through presentations and lectures at banks, Chamber of Commerce, fitness centers, senior centers, libraries, schools, etc. One quick and inexpensive way to market is to inform your current and past patients of your new anti-aging services by accessing your internal office database. Simply create a letter explaining your services and mail it out.

With the baby boomers becoming older, they are looking for ways to stay young and healthy. Be creative in marketing and target the over 40-age group. They are the most interested and have the most money in general.
III. Exercise

Physical activity is considered a necessary component of good health, with many stating that it is the closest thing to an anti-aging pill. It is vital if someone wants to increase his or her life span, and decrease disease risk. Exercise has been shown to prevent high blood pressure, reduce the risk of diabetes, improve heart and lung efficiency, maintain proper body weight, increase muscle and bone strength, decrease anxiety and depression, enhance mood, diminish the risk of dying from heart disease, and lessen the risk of colon cancer. In a review of 67 articles, it was found that people who are more active have greater longevity and decreased risk of heart disease, cardiovascular disease, stroke, and colon cancer.

Exercise is the most important anti-aging technique we can use and is classified as either aerobic (exercises that use oxygen, such as jogging, walking, cycling, and swimming) or anaerobic (resistance weight training). Our program will use both forms of exercise. In addition, we will even address those patients who may want to participate in an exercise program but currently have “a bad back” or some other impairment that would limit their participation. Therefore, I have created different levels of exercise based upon the physical ability of the patient.

Each patient will begin at a level that is specific to his or her needs. You do not need to begin at level 1. However, the levels should be increased in order. For example, if a patient begins at level 3, then they should be progressed over time to level 4, 5 etc. You should not skip from level 3 to level 6. If you find that you started the patient at too low a level, then certainly skipping them up to higher levels is allowed.

Level I
Stretching – 10 minutes
Physioball – Seated and Prone exercises
Walking – 3 days per week – 15-30 minutes

Level II
Stretching – 10 minutes
Physioball – Seated, Prone, and Supine exercises
Walking – 4 days per week – 20-30 minutes
Theraband exercises – 1 exercise per body part

Level III
Stretching – 10 minutes
Beginner Isotonic Exercise – Whole body – 2-3 days per week – 1 exercise per body part – 10 repetitions – 2-3 sets
Beginner Cardio – 3-4 days per week – low to moderate intensity – 15-20 minutes
Level IV
Stretching – 10 minutes
Intermediate Isotonic Exercise – Whole body – 3-4 days per week – 2 exercises per body part – 10 repetitions – 3 sets
Intermediate Cardio – 3-4 days per week – moderate intensity – 20-30 minutes

Level V
Stretching – 10 minutes
Advanced Isotonic Exercise – Split body – 4-5 days per week – 2-3 exercises per body part – 10 repetitions – 3 sets
Advanced Cardio – 5-6 days per week – moderate intensity – 30-40 minutes

Split Body Routine consists of grouping similar muscle actions together such as push/pull. For example, one group consists of chest, shoulder, triceps muscles (push muscles) while the other group consists of back, biceps (pull muscles) and legs. On one day you exercise the push muscles and the next day you exercise the pull muscles. This routine can either be done on four days or five days per week. It is up to you and the patient to determine which is more appropriate for their specific needs and schedule.

The four-day a week program would be as follows – Monday and Thursday would be push days. Tuesday and Friday would be pull days. The other days of the week there is no strength training. Cardio can be done on any of the 5-6 days of the week. Abdominal muscles are exercised 5 days per week.

The five-day a week program (also called a 2:1 program) would be as follows – You exercise 2 days in a row and then take the next day off. For example, Monday would be push, Tuesday would be pull and Wednesday would be day off. The cycle would then repeat. Thursday would be push, Friday would be pull and Saturday would be off. The cycle would then continue to repeat itself over and over. This program gives a different day off each and every week, while the 4-day program gives the same days off during the week. Again, it is up to you and the patient to determine whether the 4 or 5 day a week program is best for them.
Exercise Intensity Calculations

Aerobic exercise should be done at moderate intensity. You can determine moderate intensity by two different ways:

1. The patient should reach a level of sweating and shortness of breath while exercising.
2. Calculate the intensity – moderate intensity is 65%-80% of maximum heart rate.
   – low intensity is 50%-60% of maximum heart rate.

Taking 220 and subtracting your age determine maximum heart rate. For example, if the patient is 40 years old, their maximum heart rate is 180 (220-40). The patient should never reach this number. If they get too close to this number they have a greater risk of suffering from a heart attack while exercising. Therefore we want to keep the intensity of aerobic exercise to a moderate intensity level. So therefore I take between 65%-80% of their maximum heart rate that we just previously calculated. In this example, 180 max heart rate x 65%-85% = 117-144 beats per minute. This is the range we want the patient’s heart rate to stay during their aerobic exercise. As they become more fit with time, you can move this number up to 85% and perhaps 90% with certain individuals, but certainly no higher.
Determining Exercise Heart Rate

There are many ways to calculate a person’s heart rate. The easiest for most patients is to feel their pulse at the carotid artery. This is located on both sides of the neck. However, when they feel for the pulse the patient must be told to use their index and middle finger and to apply pressure to only one side of the neck. It is dangerous to apply pressure to both carotid arteries at the same time. Once they feel the pulse, they simply count how many times it beats in 10 seconds. The chart below represents the heart rate in beats per minute when you count the pulse for 10 seconds. Once this number is determined the patient can monitor whether they are within the appropriate range of moderate intensity.

<table>
<thead>
<tr>
<th>The number you felt in 10 seconds</th>
<th>This is the heart rate in beats per minute</th>
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<tr>
<td>10</td>
<td>60</td>
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<td>11</td>
<td>66</td>
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<td>32</td>
<td>192</td>
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# Exercise Diary

Week of ___________________________

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<tr>
<th>Day</th>
<th>Activity</th>
<th>Distance/Duration</th>
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<td>Saturday</td>
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<td>Sunday</td>
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IV. Social Activities

How Socially Active Are You?

Social interactions, a strong family network, and appropriate loving relationships are necessary for a long and healthy life. Answer the following statements by circling either True or False.

I have many good friends that I can confide in. True False
I am very active in my community. True False
I participate in many social and religious activities. True False
I engage in activities that help other people. True False
I make new friends often. True False
I have many long-term loving relationships. True False
I do not live alone. True False
If I live with family, I don’t argue much with them. True False
I rarely feel depressed and lonely True False
I watch less than 6 hours of television a day. True False
If I work, I enjoy what I do. True False
I attend religious services on a weekly basis. True False
I say prayers on a daily basis. True False

You should have answered true to all the above statements. If you did not, you need to work on adjusting your social activities and behavior.

Review the false statements with your patient and discuss a strategy to make changes. All of the above statements are important to follow in an anti-aging program and even a few changes can have a positive effect.
V. Priorities

Identify Your Highest Priorities

Identifying priorities is very important in an anti-aging program. Focusing on trivial, unimportant aspects of your life can reduce your chances of living a long and healthy life. Therefore we want to identify what is important in the patient’s life. Once we determine what issues are of greatest importance, we can help the patient focus on those issues and make productive, positive changes.

Exercise:
Close your eyes, relax, get calm, and imagine it is many years from now. Think back on your life. What did you enjoy doing the most? What was of most value to you? Write all these feelings down in the following spaces.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Now imagine you have a serious illness or disease and you have only a limited time of life left. What would you do with that time? Use the space below to write down your thoughts.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Compare your answers from the first scenario to the second scenario. Are they different? Priorities can change when someone has a serious illness or medical condition.
Once you have determined which values are most important to you, rank them from the most important to the least important

1. _________________________________ 6.____________________________
2. _________________________________ 7.____________________________
3.______________________________ 8.____________________________
4.______________________________ 9.____________________________
5.______________________________ 10.____________________________

Discuss with your patient ways to focus on their most important priorities.
VI. Goals

Setting Goals

When attempting to modify or alter a patient’s behavior, goal setting is extremely important. Change is difficult and uncomfortable. Patients may resist change even though they desire something. In addition, goals help the patient stay consistent in the program. The greater the consistency, the greater the chance of success. It is also well known that people who have good time management skills spend more time on what is most important to them and minimize the time spent on those activities that they do not value. It is thought that 20% of what we do yields 80% of the results.

So therefore we need to set goals by asking the following questions:
Is the goal worth the time and energy?
Is the goal related to your priorities in life?
Is the goal reachable?
Is the goal positive?
Are your goals in balance with each other?

Balancing between short term, medium term, and long term goals is necessary to be successful. Short-term goals and medium-term goals need to be compatible with long-term goals. Reassessment of all types of goals is also necessary on a periodic basis. You also need to be flexible and open-minded. Not all goals will be attainable on the first attempt. Modification of a goal may be necessary. For example, if your short-term goal is to lose 10 pounds in a month and 30 pounds in six months, but you only lose 5 pounds within that first month you simply modify your goal. The new goal could state that the patient will lose 35 pounds in the next six months.

Long-term goals are goals that you want to reach over 5 years from now and longer.

Medium-term goals are goals that you want to reach from 1-5 years from now.

Short-term goals are goals that you want to reach within a year.

Examples of short-term goals:
Beginning this weekend, I will spend one hour reading.
Exercise at least 2 times per week.
Spend time with Mary on a monthly basis.

Examples of medium-term goals:
In one year I want to be promoted at work.
I want to buy a new car in two years.

Examples of long-term goals:
Save enough money to send my now 2-year-old boy to college.
When my child is grown I would like to have a home at the ocean.
Write down your goals based upon your priorities in life.

Short term goals (less than 1 year)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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Medium term goals (1-5 years)

________________________________________________________________________
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Long-term goals (over 5 years)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Discuss with your patient ways to achieve their goals.
VII. Stress

Stress is something everyone has and is trying to get rid of. Stress was vital for primitive man, but is it really necessary today? The stress mechanism stimulated the human to fight other men or wild animals or to run from them. This is known as the “fight or flight” mechanism. No matter what causes our stress, a reaction in the body or mind occurs. It is how we cope with the stress that is important for overall health and longevity.

Without the stress response, man would not have made it to where he is today. In our current society, the fight or flight instinct still exists. What is important is not whether we “get stressed” or are “under stress” but rather how we deal with stress. Everyone gets stressed, but not everyone can deal with it efficiently. Coping mechanisms are the key to good health and a long life. If you can handle stress, your chances of remaining disease-free are increased. If you cannot cope with stress, your chances of a long life are decreased.

Stress, along with anxiety, depression, anger, and other behavioral disorders, can affect an individual’s health in a negative way. This can include increasing a person’s susceptibility to illness, inducing compromised immunity, increasing lipid and cholesterol levels, and causing cardiovascular disease and perhaps even cancer. There even appears to be a link between severe stress and later physical diseases.

Since stress cannot be avoided you must be able to cope with daily stressors, not avoid them. Therefore, we first need to identify the client/patient’s particular stressors and then eliminate them or at the very least, reduce them. We then must incorporate relaxation and stress reduction techniques as well as coping skills to eliminate or reduce the stressors. We will achieve this by practicing the stress reduction exercises in this manual and working with our client/patient with the forms that are provided below.

Many of the forms and exercises in this section on stress is taken from an older yet excellent book called “The Relaxation and Stress Reduction Workbook” by Martha Davis, Ph.D. and fellow authors. MJF books New York, New York published it, in 1995. I am unsure if there are newer versions available, but if you would like further reading or descriptions on stress reduction, please obtain their book.
Stress Awareness Diary

This helps to identify a stressful event and the symptoms that are experienced with a stressful event. Identification of stressful events is necessary in order to avoid or cope with them more effectively.

Date__________________________ Day of the Week____________________________

<table>
<thead>
<tr>
<th>Time</th>
<th>Stressful Event</th>
<th>Symptom</th>
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Stress Event Hierarchy

Make a list of all your current life situations, which are causing stress and anxiety. Include the setting and persons involved. Rank them from the least to the most stressful. This exercise helps to focus on the events that are causing the greatest amount of stress.

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Stress Coping Thoughts

When a stressful event occurs a person will have an emotional response. A stimulus can be a variety of things such as a boss yelling at you because you did something wrong. You then will have some type of symptom, such as getting an upset stomach or feeling dizzy. You then have a behavior response that allows you to attempt to deal with the situation. An example would be that you apologize. And finally, thinking occurs. How did you interpret the situation? This creates the emotions associated with the situation. An example would be “I’ve had it with him.”

Exercise:

Make a list of stress coping thoughts. Examples are as follows:

There is nothing to worry about.
It is not that important in the scheme of things.
I know I am good at my job.
If I feel tension or physical symptoms, I will breathe and relax.
Relax!
I have seen worse than this situation.
I did it! I can do it!
Next time I won’t be so upset.
Etc.
Job Stress

Job stress can affect our overall health and well-being and negatively impact how long a person will live. Considering most people work a minimum of forty hours per week, we need to identify sources of job stress and how a person reacts to them. Once this is identified, you can work with the person on appropriate reactionary behavior. You are looking for patterns that are present that can lead to negative behavior.

List your specific stressors and how you respond to them.

<table>
<thead>
<tr>
<th>Job Stressor</th>
<th>Your Feelings</th>
<th>Your Thoughts</th>
<th>Your Behavior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exp</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equipment failed</td>
<td>frustration</td>
<td>Cant get job done</td>
<td>Eating or smoking</td>
</tr>
</tbody>
</table>

Need to develop a plan that responds to job stressors and negative behavior.

1. Change the external stressor (tell boss equipment needs updating, etc)
2. Change your thoughts (I can get the job done despite being frustrated, etc)
3. Change physical behavior (Walk around the office to relax instead of eating, etc)
Stress Reduction Exercises

Breathing

With every breath you take, you supply the body with oxygen and release the waste product carbon dioxide. Improper breathing can interfere with how well you are able to supply the body with oxygen. This can make it harder for you to cope with stressful situations and can be a contributing factor in anxiety, panic attacks, depression, muscle tension and fatigue. Breathing exercises have been shown to be effective in reducing all of these negative conditions. In order to breathe correctly and efficiently you need to have a healthy diaphragm, a set of healthy lungs, and a healthy cardiovascular system.

Breathing involves typically two types. One is called chest breathing and the other is called abdominal breathing. Chest breathing is often associated with anxiety and emotional disorders, is shallow, often rapid and irregular. This is not the breathing that will lead to stress reduction. Abdominal breathing is present when we are sleeping. This type of breathing is necessary to cause the relaxation response.

Before we begin a patient on breathing exercises, we first need to identify how a person is breathing.

Have them lie down on their back, close their eyes, and place their right hand on their abdomen at the waistline. Put the left hand in the center of the chest. Notice how they are breathing. When you take a breath in - If the hand on the chest is rising more than the hand on the abdomen – you are breathing mostly with the chest.

I. Breathing Exercises

Abdominal Breathing (Deep Breathing)
Lay on a rug on the floor – arms at your sides resting, palms up – shoes off – eyes closed. Focus on your breathing. Place your hand where your chest or abdomen rises and falls. Now place both hands on the abdomen and focus on having the hands rising and falling. Breathe in through your nose and out through your mouth. Inhale slowly. Focus on breathing deeply so that the air is forcing your hand on the abdomen to move up. The chest should move only slightly.

Do this for 5-10 minutes, one to two times per day for a few weeks. After this time period you can increase up to 20 minutes.

Once you become good at breathing with your abdomen, practice this at different times of the day in different postures. Whenever you feel tension or anxiety – begin to focus on your abdominal deep breathing. This will help you from getting tense and anxious. Breathe in deeply with your abdomen – Pause briefly before you exhale – When exhaling, say to yourself “One”. Continue this process until you count to ten. The exhalation should be longer in duration than the inhalation. Visualize tension leaving your body with each and every breath.
II. Progressive Relaxation

This technique identifies particular muscles that are tense and relaxes them. Get in a comfortable position either sitting or lying on your back. Begin by tightening the right toes and feet. Hold this for a few seconds and notice the tension. Then relax. Notice the difference with how the tightening sensation felt. Repeat. Then move up the right extremity to the calf and thigh/hamstring. Continue to focus on the tightness and how the muscles feel after the relaxation of the tension. Now do the opposite side beginning with the left toes and feet. Now move to the buttocks and abdominal areas. Contract and feel the tension. Hold for a few seconds and relax. Continue moving up the body to the back and chest repeating the same sequence. Then move to the upper extremities beginning with the right fingers and hand and moving up to the forearm and arm. Then do the left extremity. Move to the neck and face, tightening and holding the face muscles. Close the eyes tight, wrinkle the forehead tight, tense the jaw and press the lips together. Then focus on the relaxation – the tension leaving the body.

One to two weeks of two fifteen-minute sessions per day is necessary for results.

III. Meditation

Meditation is the ability to focus on one thing at a time and to eliminate all other thoughts and problems. A mantra is often used which is a word or syllable that is repeated over and over. Looking at a fixed object can also be used – such as the ocean or fire. Typically the mind will not want to stay focused on only one thing – it wants to digress and think about other things. When practicing meditation using a mantra, when you realize your mind has drifted, you focus back on the mantra.

Pick a word or syllable you like. Many use the word “OM” Find a comfortable posture and begin by taking several deep abdominal breaths. Begin chanting your mantra to yourself. Say it over and over again. If you stray, refocus on the mantra. Find a comfortable posture and begin by taking several deep abdominal breaths. Fix your eyes on a spot on the floor or wall or simply close your eyes. Take a deep breath in and focus on all aspects of the breath. Exhale and say one. Continue counting this way with each and every exhale. If you lose count start over with one. Be aware that you do not have to feel relaxed while you are meditating to become relaxed. You may feel that you are thinking of hundreds of different thoughts during the meditation. However when you open your eyes you will feel much more relaxed than when you started with the exercise.

Practice Meditation at least once a day and preferably twice a day.
IV. Visualization

It is thought that the power of imagination is stronger than the will. Visualization is a form of positive thinking to help treat physical symptoms such as stress and anxiety. It is important when practicing these techniques to make sure all clothing is loose and comfortable and that you lie down in a quiet environment closing your eyes. You need to find tension in your body that exists and relax it via the techniques we have already discussed. You will also need to chant positive affirmations. Examples would include – Tension flows from my body or I am letting go of tension, etc.

Lie down, close your eyes and relax. Create a vision for tension and replace it with a vision for relaxation. A vision of tension could include nails screeching on a chalkboard and a vision of relaxation could include the nails being cut so no feeling is felt. Or the color red (tension) is changed to the color pale blue (relaxation). As you scan the body for tension – think of these tension images and apply them to the tense muscle or muscle area. Allow this to develop into your relaxation image. Example – My back is tight – I visualize it being red – I change this to pale blue and use my affirmation of I am letting go of tension while imaging the red has turned to blue.

Practice Visualization two to three times per day

V. Autogenesis

Concentrate on verbal suggestions of warmth and heaviness in your limbs in order to reduce chronic stress. This technique should not be used with people who have severe emotional or mental disorders. Also, diabetics, cardiovascular patients, and hypoglycemic patients need to be supervised by a Doctor during these exercises. I have outlined a 10-week program. It is up to you and the patient to determine if the entire program is necessary. You can give the entire 10 week program to a patient or any part of it. Even just one week or one section would be of significant benefit to the patient.

10 week program
Heaviness Theme – weeks 1-3
Warmth Theme – weeks 4-7
Breathing Theme – weeks 8
Abdominal Theme – week 9
Forehead Theme – week 10

Heaviness Theme
Week 1 -
My right arm is heavy. (say this 3 times)
My left arm is heavy. (say this 3 times)
Both of my arms are heavy. (say this 3 times)
With all themes, take 5 seconds to say the phrases and pause for 3 seconds. Start with the dominant arm.

Week 2 -
My right arm is heavy. (say this 3 times)
My left arm is heavy. (say this 3 times)
Both of my arms are heavy. (say this 3 times)
My right leg is heavy (say this 3 times)
My left leg is heavy (say this 3 times)
Both of my legs are heavy (say this 3 times)
My arms and legs are heavy (say this 3 times)

Week 3 -
My right arm is heavy (say this 5 times)
Both of my arms are heavy. (say this 5 times)
Both of my legs are heavy (say this 5 times)
My arms and legs are heavy (say this 5 times)

Warmth Theme
Week 4 -
My right arm is heavy (say this 5 times)
My arms and legs are heavy (say this 5 times)
My right arm is warm (say this 5 times)
My left arm is warm (say this 5 times)
Both of my arms are warm (say this 5 times)

Week 5 -
My right arm is heavy (say this 5 times)
My arms and legs are heavy (say this 5 times)
My right arm is warm (say this 5 times)
My left arm is warm (say this 5 times)
Both of my arms are warm (say this 5 times)
Both of my legs are warm (say this 5 times)

Week 6 -
My right arm is heavy (say this 5 times)
My arms and legs are heavy (say this 5 times)
My right arm is warm (say this 5 times)
My left arm is warm (say this 5 times)
Both of my arms are warm (say this 5 times)
Both of my legs are warm (say this 5 times)
My arms and legs are warm (say this 5 times)

Week 7 -
My right arm is heavy (say this 5 times)
My arms and legs are heavy (say this 5 times)
My right arm is warm (say this 5 times)
My left arm is warm (say this 5 times)
Both of my arms are warm (say this 5 times)
Both of my legs are warm (say this 5 times)
My arms and legs are warm (say this 5 times)
My arms and legs are heavy and warm (say this 5 times)

Breathing Theme
Week 8 -
My right arm is heavy and warm (say this 4 times)
My arms and legs are heavy and warm (say this 4 times)
My heartbeat is calm and regular (say this 4 times)
I control my breath (say this 4 times)

Abdominal Theme
Week 9 -
My right arm is heavy and warm (say this 5 times)
My arms and legs are heavy and warm (say this 5 times)
My heartbeat is calm and regular (say this 5 times)
I control my breath (say this 5 times)
My abdominal area is warm (say this 5 times)

Forehead Theme
Week 10 -
My right arm is heavy and warm (say this 5 times)
My arms and legs are heavy and warm (say this 5 times)
My heartbeat is calm and regular (say this 5 times)
I control my breath (say this 5 times)
My abdominal area is warm (say this 5 times)
My forehead is cool (say this 5 times)

Helpful Hints:

In general - practice the various relaxation and stress reduction techniques described above most days of the week.

In addition, walking 30 minutes per day and the patient’s aerobic exercise program can help to reduce stress levels and depression.
**Record of General Tension**

This chart allows you to monitor how you are progressing in regards to tension. After doing the above exercises, you should have a lower tension level than you did prior to the exercises.

Rate yourself before and after doing your relaxation exercises.
1 – totally relaxed and no tension
2 – very relaxed
3 – moderately relaxed
4 – fairly relaxed
5 – slightly relaxed
6 – slightly tense
7 – fairly tense
8 – moderately tense
9 – very tense
10 – extremely tense (most uncomfortable you can be)

<table>
<thead>
<tr>
<th>Week of Session</th>
<th>Before Session</th>
<th>After Session</th>
<th>Comments</th>
</tr>
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<tbody>
<tr>
<td>Monday</td>
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<tr>
<td>Tuesday</td>
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<td>Sunday</td>
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The most popular and accepted theory of aging is the free radical theory. This was first introduced in 1954 but later developed by Dr. Denham Harman of the University of Nebraska School of Medicine. The theory states that aging results from an imbalance between the formation and presence of free radicals and the body’s ability to protect itself from the free radicals. The theory basically states that the body is unable to protect itself from destructive free radicals that are present. Typically, this is because there is either a low level of antioxidants or a high level of free radicals. The excess free radicals create an imbalance that can lead to eventual cell damage. This theory connects metabolism to aging and, therefore, supports a strategy of using nutrition and lifestyle factors, as protection against free radical induced damage.

A free radical is defined as any compound that has an unpaired electron in its outer shell. As a result, the compound is highly reactive and unstable. The extra electron charge that is present can either be donated to or accepted by other compounds. Our body creates free radicals each and every day from normal cell activities and from a variety of other influences. One reason why free radicals are produced is that they protect us by killing bacteria. In addition, normal cell functions that are necessary for life itself generate free radicals. The problem is not that free radicals are formed. Free radicals are constantly formed. This is a normal part of life. However, the problem is that there is an inappropriate balance between free radicals and antioxidants. When too many free radicals are produced and our body cannot fight them all, damage to cells occurs, leading to disease, illness, and premature death.

Free radicals can attack many parts of the body, including cell membranes, DNA, proteins, mitochondria, and other structures. Attacks on these cell structures can result in cell mutations and lead to certain diseases like cancer. It is generally accepted that free radicals contribute or cause over 100 current diseases.

Our Anti-Aging strategy is focused on two factors

1. Consume antioxidant rich foods and supplements
2. Reduce exposure to free radicals.

1. The consumption of antioxidant rich foods is discussed in forthcoming sections of this manual. The supplements Immune Power, Daily Dose and Healthy Heart contain vital and important antioxidants and are part of the anti-aging program. They are listed and described at the end of this manual.
2. The following list describes how and what to avoid in order to reduce exposure to free radicals. Please have the patient/client do as many as possible.

A. Avoid excessive exposure to the sun
B. Avoid exposure to direct and indirect cigarette smoke (including cigars)
C. Avoid excessive alcohol intake (greater than 3 drinks per week for a woman and greater than 2 drinks per day for a man)
D. Limit use of medications and avoid all recreational drugs.
E. Limit use of chemical products such as pesticides, fertilizers and cleaning products.
F. Avoid excessive exercise. (Please see the section on exercise in order to determine the appropriate amount and intensity. Too much or too intense exercise can lead to over-training and an increase in free radical production, which can lead to illness and injury.)
G. Limit Trauma and Injury. Getting an injury will lead to an increased production of free radicals and an increased risk of disease.
H. Avoid radiation (such as x-rays and flying in an airplane).
I. Avoid overeating. A concept called caloric restriction has been shown at least in animals to extend life. Maintaining appropriate body weight is essential to the anti-aging program.
J. Avoid overcooking foods, frying at high heat, and barbecuing.
IX. Nutritional Examination

I. Equipment

Most Chiropractic physicians have most of the equipment necessary to begin an anti-aging program with minimal additional cost. Some extra equipment may be necessary.

Computer (optional diet analysis and weight management software)
Standard chiropractic diagnostic equipment
Scale that can determine height and weight
Blood pressure cuff and stethoscope
Thermometer
Watch
Tape measure
Body fat analysis tool (skinfold calipers or electronic devices)
Supplements
Charts and Forms (supplied in workbook)
Anti-Aging Book

II. Vital signs

1. Age
2. Sex
3. Height
4. Weight
5. Temperature – A person’s temperature can range from 97 to 99.5 degrees Fahrenheit.
6. Pulse – Palpate the radial pulse (on the thumb side at the wrist. Use your index and middle finer and not your thumb) and count how many times you feel a beat in 30 seconds. Then multiply this number by two. Example - If you feel the beat 40 times in 30 seconds multiply by 2 and the persons heart rate is 80 beats per minute. Normal pulse can range between 60-100 beats per minute depending upon a persons fitness level. Athletes can be as low as 40 beats per minute.
7. Respirations – Look at the person’s chest for 30 seconds and count how many times it rises and falls. Multiply this number by two. Example - if the chest moves 6 times, multiply this number by 2 and respirations is 12. Normal range is between 6-12cpm (cycles per minute)
8. Blood Pressure – This number is divided into a top (called systolic) and a bottom (called diastolic) number. Systolic measurement should be between 90 and 130 mmHg and diastolic measurement between 50 and 90 mmHg. Be aware that the blood pressure readings may be 10 to 20 mm Hg different between your right arm and your left arm. For this reason, you may want to use the same arm for every reading.
III. Anthropometric measurements

1. Height – already calculated
2. Weight – already calculated
3. Body Circumferences -
   Measure the following body parts with a tape measure:
   - Neck
   - Mid-upper arm, forearm and wrist
   - Chest and abdomen (at belly button)
   - Hips and Buttocks
   - Upper thighs and calf
The patient needs to stand erect. The tape measure needs to be parallel to the floor and snug around the patient’s body part but not too tight. The same person should do the measurements whenever they are necessary. This helps to maintain a high degree of consistency and accuracy.

IV. Body Fat

Body fat is best way to ascertain a person’s body composition (% of the body that is fat and lean). Fat mass contains all lipids that are stored and does not include water. Fat free mass (lean mass) contains water, potassium and muscle issue. You can calculate body fat by using either skin calipers or bioelectrical impedance. The calipers are the least expensive way to measure body fat. Whether a person is normal weight, overweight, or obese, it should be made clear to them that this is used as a tracking system to monitor their progress assessment is used, there is a margin of error that exists.

Normal healthy body fat levels
12% - 20% in males
18% - 26% in females
Obese - > 25% in males and 30% in females

V. Body Mass Index (BMI)

This calculation is used to determine a person’s body fat weight.
Weight in pounds and multiply by 0.4536
Then divide by the height in inches times 0.0254 with this number being squared

Example – 180 lb person who is 5 feet 9 inches tall
12 inches are in a foot

Step 1 - Weight in pounds and multiply by 0.4536
180 lb person x 0.4536 = 81.648

Step 2 - Then divide by the height in inches times 0.0254 with this number being squared
5 feet 9 inches tall = 69 inches
69 x 0.0254 = 1.7526
1.7526 x 1.7526 = 3.07

Step 3 - \[ \frac{81.648}{3.07} = 26.595 \text{ BMI} \]

Normal BMI for males - 21.9 - 22.4
Normal for females - 21.3 - 22.1
Overweight - 25.1 - 30
Obese - greater than 30

People who are muscular or have long extremities tend to have a higher BMI. This gives the person a higher BMI giving a false impression that they are overweight or even obese.
VI. Calculating Daily Energy Expenditure  
(How Many Calories Do I Need A Day?)

We need to determine how many calories a person needs a day to maintain their weight. Maintaining appropriate body weight and avoiding obesity is extremely important in an anti-aging program. The following calculations will help control a person’s weight by allowing them to realize how many calories they can eat in a day.

Need to determine
1. Resting Energy Expenditure (REE) – (also called basal metabolic rate BMR)
2. Energy needed for Activities of Daily Living
3. Energy needed for Physical Exercise

1. REE
   For Males 10-17 years old REE = (17.5 x BW) + 651
   18-30 years old REE = (15.3 x BW) + 679
   30-60 years old REE = (11.6 x BW) + 879
   BW= Body weight in kg
   2.2 pounds = 1 kg
   For Females  10-17 years old REE = (12.2 x BW) + 746
   18-30 years old REE = (14.7 x BW) + 496
   30-60 years old REE = (8.7 x BW) + 829

2. Energy needed for Activities of Daily Living
   Sedentary job and lifestyle         20%-40% of REE
   Moderate job and lifestyle         40%-60% of REE
   Very Active job and lifestyle      60%-80% of REE

3. Energy Needed for Physical Exercise

   The number of calories needed for exercise is variable. This will depend upon how much and what type of exercises the person does. Most people can get this information from the cardio machines that they will use during your program. Exercise charts are also available in any text on exercise science or fitness.

Once you have derived how much energy (calories) is needed for each number listed above, total all three together. For example, if you calculated 2,000 calories from number 1, 1,000 calories from number 2, and 200 from number 3, simply add them all together, (in this example, 3,200 calories) and the result is the total of calories needed by the person in a day to maintain their current weight.

If you want them to reduce weight, you need to decrease their intake of calories (food). One pound is equal to 3,500 calories. If you want them to lose one pound a week, they must reduce their caloric intake by 3,500 calories a week or 500 calories a
day (3,500 divided by 7 days = amount of calories a day to be reduced). If you want
them to lose 2 pounds a week, they need to reduce their caloric intake by 7,000
calories a week or 1,000 calories a day (7,000 calories divided by 7 days in the week).

The goal is to ensure that the patient maintains proper body weight for their height
and frame size and not to overeat. Keeping track of how many calories they eat in a
day is an essential part of the anti aging program.

VII. Calculating Daily Grams of Fat, Protein and Carbohydrates

Fat

Lets say you have calculated that a person needs 2,000 calories per day to maintain their
weight. Lets also say that you have determined that the person needs to have 25% of their
caloric intake from fat. This will allow the person to consume a total of 500 calories from fat
(25% of 2,000 calories). We then divide this number by 9 since fat has 9 calories to a gram.
This allows the person to consume 55 grams of fat per day.

Carbohydrates

Using the same example as above, you have determined that the person needs 2,000 calories
per day to maintain their weight. You have also determined that you want the person to have
50% of their caloric intake from carbohydrates. This will allow the person to consume a total
of 1,000 calories from carbohydrate sources. We will then divide this number by 4 since
carbohydrates contain 4 calories per gram. This will allow the person to consume 250 grams
of carbohydrates per day.

Protein

Using the same example as above, you have determined that the person needs 2,000 calories
per day to maintain their weight. You have also determined that you want the person to have
25% of their caloric intake from protein. This will allow the person to consume a total of 500
calories from protein sources. We will then divide this number by 4 since proteins contain 4
calories per gram. This will allow the person to consume 125 grams of protein per day.
VIII. Calculating Daily Water Needs

You can live only a few days without water, yet weeks without food. The amount of water needed per day is based upon the amount that is lost per day whether its from excretion, elimination, perspiration or respiration. Many people are dehydrated, especially the elderly. This can affect biochemical reactions in the body that are involved with many important cell functions. If body water is low, the risk of living a longer life is decreased.

Signs of dehydration include fatigue, decreased appetite, dry mouth, headache, decreased urine output, dark urine, and elevated heart rate. If dehydration is severe, cold skin, tingling, numbness, collapse and possibly even death can occur.

The best way to determine if you are consuming enough water is to check the urine throughout the day.

If the urine is dark and concentrated, then your fluid level in your body is low. If it is a pale yellow color, then sufficient water balance is present. Please be aware that the color and consistency of urine will change throughout the day, based upon amount of food eaten per day, how much energy is used and fluid intake.

Another way to monitor water balance is to monitor how many times you urinate throughout the day. A person who is properly hydrated should urinate every 2-4 hours.

If you exercise you will lose water at a faster rate than if you did not exercise. Since exercise is important in anti-aging, weigh yourself before and after exercise. For every pound lost during exercise you need to drink at least two cups of fluid and then a little more (about 20 ounces).
There are many different types of food serving charts and even different philosophies regarding food servings. Some people still use the food servings listed immediately below. This is acceptable to use. There are new guidelines that were recently established in 2005 by the government. These are listed later in this text. If you use the food serving text immediately below try to eat foods from all five-food groups each and every day. Also eat different foods from each food group daily.

<table>
<thead>
<tr>
<th>Milk Group</th>
<th>Meat, Poultry and Fish Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-4 Servings</td>
<td>2-3 Servings</td>
</tr>
<tr>
<td>Serving size is -</td>
<td></td>
</tr>
<tr>
<td>Milk - 1 Cup</td>
<td>Lean Meat - 2-3 Ounces</td>
</tr>
<tr>
<td>Yogurt - 1 Cup</td>
<td>Poultry - Fish - 2-3 Ounces</td>
</tr>
<tr>
<td>Cheese - 1- 1 1/2ounces</td>
<td>Egg - 1</td>
</tr>
<tr>
<td>Cottage Cheese - 1/2 Cup</td>
<td>Peanut Butter - 2 tbsp</td>
</tr>
<tr>
<td>Ice Cream/Frozen Yogurt - 1/2 Cup</td>
<td>Dried Beans/Peas - 1/2 Cup</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Vegetable Group</th>
<th>Fruit Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-5 Servings</td>
<td>2-4 Servings</td>
</tr>
<tr>
<td>Juice - 3/4 Cup</td>
<td>Juice - 3/4 Cup</td>
</tr>
<tr>
<td>Raw Leafy Vegetable - 1/2 Cup</td>
<td>Raw - Canned - Cooked - 1/2 Cup</td>
</tr>
<tr>
<td>Raw Cooked Vegetable - 1 Cup</td>
<td>Apple, Banana - 1 Medium</td>
</tr>
<tr>
<td>Potato - 1 medium</td>
<td>Orange, Pear - 1 Medium</td>
</tr>
<tr>
<td></td>
<td>Grapefruit - 1/2, Cantaloupe - 1/4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Grain Group</th>
<th>Others:</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-11 Servings</td>
<td>Fats/Oils, Sweets, Snacks - 2-4 servings of fats and sweets</td>
</tr>
<tr>
<td>Bread - 1 Slice</td>
<td>2tbs salad dressing</td>
</tr>
<tr>
<td>Ready to Eat Cereal - 1 Cup</td>
<td>1tsp butter or margarine</td>
</tr>
<tr>
<td>Cooked Cereal - 1/2 Cup</td>
<td>1oz candy</td>
</tr>
<tr>
<td>English Muffin/Bun - 1/2</td>
<td>Alcohol 0-1 servings</td>
</tr>
<tr>
<td>Pasta, Rice, Grits - 1/2 Cup</td>
<td>12oz beer</td>
</tr>
<tr>
<td>Tortilla, Roll, Muffin - 1</td>
<td>4oz wine</td>
</tr>
<tr>
<td></td>
<td>1 bar drink</td>
</tr>
</tbody>
</table>

New Dietary Guidelines for Americans, 2005 concerning Food Groups
United States Department of Agriculture website: http://www.mypyramid.gov
Fruit Group
Serving size is two cups for both males and females per day
Any fruit or 100% fruit juice counts as part of the fruit group. Fruits may be fresh, canned, frozen, or dried, and may be whole, cut-up, or pureed. In general, 1 cup of fruit or 100% fruit juice, or 1/2 cup of dried fruit can be considered as 1 cup from the fruit group.

Grain Group
Most Americans consume enough grains, but few are whole grains. At least 1/2 of all the grains eaten should be whole grains.
Any food made from wheat, rice, oats, cornmeal, barley or another cereal grain is a grain product. Bread, pasta, oatmeal, breakfast cereals, tortillas, and grits are examples of grain products.

Grains are divided into 2 subgroups, whole grains and refined grains. Whole grains contain the entire grain kernel consisting of the bran, germ, and endosperm. Whole grains include whole-wheat flour, cracked wheat, oatmeal, whole cornmeal and brown rice.

Refined grains have been milled, a process that removes the bran and germ, which improves their shelf life. However, it also removes fiber, iron, and many B vitamins. Refined grains include, white flour, white bread, and white rice. Most refined grains are enriched which means that certain B vitamins and iron is added back after processing. Fiber however, is not added back.

Vegetable Group
Serving size is 2-2 1/2 cups for women and 2 1/2 -3 cups for men
Any vegetable or 100% vegetable juice counts as a member of the vegetable group. Vegetables may be raw or cooked; fresh, frozen, canned, or dried/dehydrated; and may be whole, cut-up, or mashed.
In general, 1 cup of raw or cooked vegetables or vegetable juice, or 2 cups of raw leafy greens can be considered as 1 cup from the vegetable group.

Milk, Yogurt and Cheese Group
Serving size is 3 cups for both men and women.
In general, 1 cup of milk or yogurt, 1 1/2 ounces of natural cheese, or 2 ounces of processed cheese can be considered as 1 cup.

Meat, Poultry, Beans and Fish
Serving size is 5- 5 1/2 ounce equivalents for women and 5 1/2 - 6 1/2 ounce equivalents for men.
This group consists of meat, poultry, fish, dry beans, peas, eggs, nuts and seeds.
In general, 1 ounce of meat, poultry or fish, 1/4 cup cooked dry beans, 1 egg, 1 tablespoon of peanut butter, or 1/2 ounce of nuts or seeds can be considered as 1 ounce equivalent.
Food Diary

Record how many servings you had in each food group for five consecutive days and then calculate the average. Of course, you should try to consume the recommended servings of each group each and every day.

<table>
<thead>
<tr>
<th>Food Group</th>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
<th>Day 4</th>
<th>Day 5</th>
<th>Avg Total Servings</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Milk Group</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3-4 Servings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Serving size is</td>
<td>Milk</td>
<td>Yogurt</td>
<td>Cheese</td>
<td>Cottage Cheese</td>
<td>Ice Cream</td>
<td></td>
</tr>
<tr>
<td>Milk 1 Cup</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yogurt 1 Cup</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cheese 1-1 1/2 oz</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cottage Cheese</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ice Cream 1/2 Cup</td>
<td></td>
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</tr>
<tr>
<td><strong>Meat Group</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2-3 Servings</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Meat Poultry</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Fish 2-3 oz</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Egg 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peanut Butter 2 tbsp</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legumes, Beans, Peas</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/2 - 1 1/2 cups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 cup nuts</td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>Vegetable Group</strong></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3-5 Servings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Juice 3/4 Cup</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Raw/Cooked 1/2 Cup</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leafy Veg 1 Cup</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Potato 1 medium</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>Fruit Group</strong></td>
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<td>2-4 Servings</td>
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<tr>
<td>Juice 3/4 Cup</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Raw/Canned 1/2 Cup</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Apple, Banana</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Orange, Pear</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>1 Medium</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grapefruit 1/2</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Food Group</td>
<td>Day 1</td>
<td>Day 2</td>
<td>Day 3</td>
<td>Day 4</td>
<td>Day 5</td>
<td>Avg Total Servings</td>
</tr>
<tr>
<td>------------------</td>
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<tr>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>6-11 Servings</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Bread 1 Slice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Box Cereal 1 oz</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooked Cereal 1/2 Cup</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pasta, Rice, Grits 1/2 Cup</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Roll, Muffin 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>Fats and Sweets</strong></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>2-4 servings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 tbs salad dressing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1tsp butter or margarine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1oz candy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Alcohol</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Servings 0-1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12oz beer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4oz wine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 bar drink</td>
<td></td>
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</tr>
</tbody>
</table>
Anti-Aging Diet Recommendations

1. Maintain proper body weight and an appropriate caloric intake. This can help reduce the risk of certain diseases and help you live a longer life.
2. Maintain body fat levels between 12%-20% for males and between 18%-26% for females.
3. Do not eat while watching television, and keep the hours of television viewing or video game playing to a minimum. These activities can increase your chances of being obese.
4. Eat breakfast daily.
5. Eat approximately 1,500-2,000 calories per day, consisting of multiple smaller meals more often during the day instead of fewer, larger meals – 4-5 small meals spread throughout the day appears best.
6. Do not eat red meat more than three times per week.
7. Eat one to two red meat meals per week, two chicken meals per week, two fish meals per week, and one to two vegetarian meals per week.
8. Use fruits for snacks and deserts.
9. Breakdown of the diet should be:
   - 50% Carbohydrates
   - 25% Fat
   - 25% Protein
   If extra carbohydrates are needed you can increase the carbohydrates to 55%, keep fat at 25% and decrease the protein to 20%.

Individual Anti-Aging Foods

Anti-aging foods are foods that provide significant quantities of nutrients and chemicals that have been shown to have a strong positive effect on health and disease risk prevention. Follow as many of the recommendations as possible. The more you can do, the greater chance of living a long and healthy life. If you can only do a few, then do a few. This would be better than not doing any of the recommendations. Try to add some new ones each and every week or month. Start slowly and never give up. Long-term beneficial changes are made slowly over time. Persistence and consistency are the keys.

Water

Drinking water has been shown to help reduce a person’s risk of dying from heart attacks and may help prevent certain types of cancer.

Recommendation: The simplest recommendation is to drink 6 or more glasses containing 8 ounces of water a day. Remember from our previous worksheet on water calculations, a more accurate way to assess if a person is getting enough water is to make sure they are urinating every 2-4 hours and that the urine is pale, clear and plenty of it. For those people that cannot drink enough water for whatever reason, consuming fruits (particularly grapes and watermelon), diluted fruit juices, soups can help to replace lost water.
Chocolate

Chocolate has been shown to be beneficial as an antioxidant, and as an aid in reducing the likelihood of acquiring heart disease, stroke and perhaps even cancer.

**Recommendation:** Consume chocolate and cocoa products a few times per week. Try to select the darker chocolates as they have greater benefit. Portion control is necessary and therefore small pieces are recommended.

Vegetables and Fruits

Vegetables and fruits provide many nutrients that help protect us from many diseases and illnesses.

**Recommendation - Vegetables:** Choose vegetables that are deep green, red, yellow, and orange in color. Eat garlic, spinach, alfalfa sprouts, beets, red bell peppers, broccoli, onions, and corn on a daily basis. In addition, eat at least one cruciferous vegetable daily. These include Brussels sprouts, broccoli, cabbage, cauliflower, chard, kale, mustard greens, rutabagas, and turnips. If you are a male, consume 10 servings of tomato-based food products per week.

**Recommendation - Fruits:** Eat citrus fruits at least twice per week. Eat plums, blueberries, and red grapes each and every day. After these, then eat prunes, raisins, blackberries, strawberries, raspberries, oranges, cherries, kiwi, pink grapefruit, white grapes, bananas, apples, tomatoes, pears, and honeydew melon.

**Juice -** Drink grape juice and/or orange juice at a minimum of 1 glass per day.

Fish

Fish has been shown to help reduce a person’s chance of getting heart disease, high blood pressure, strokes and certain types of cancers.

**Recommendation:** Eat fish 1-2 times per week. Choose tuna, mackerel, herring, kipper, pilchard, sardine, salmon, or trout. If you eat fish more than twice per week, if you are pregnant, nursing or are a child or have children, eat farm-raised fish to avoid mercury toxicity. If you do not like fish, attempt to eat it only 1-3 times per month.

Garlic and Onions

Garlic has been shown to help reduce a person’s chance of heart disease, high blood pressure, and certain types of cancers. It also helps to reduce cholesterol levels, and acts as an antiviral.

**Recommendation:** Consume garlic and onions at least 3 times per week. Eat them in their raw form or cooked very slightly.
Grains

Grains supply the diet with high amounts of fiber. Grains have been shown to help reduce the risk of colon cancer, help lower cholesterol levels, improve bowel movements, and improve the health of the intestinal tract in general.

Recommendation: Eat 6-11 servings of grains per day, such as pasta, rice, bread, and cereal. Do not consume white rice or white bread. Eat 1-3 servings of whole grains per day, such as whole wheat, brown rice, oats, and whole corn. Eat additional high fiber foods, such as beans/legumes, fruits and vegetables. Consume 25-30 grams of fiber per day.

Nuts and Seeds

Nuts and seeds have been shown to reduce cholesterol levels, lower a person’s risk of heart disease and increase the odds of living a long life.

Recommendation: Eat nuts at a minimum of once per week, and best if eaten 4-5 times per week. Each time, have approximately 1-2 servings. A serving consist of 1 ounce, about a handful. Eat them consistently. Eat a variety of different nuts and choose unsalted mixed nuts. Be careful, as some people are allergic to nuts.

Legumes and Soy

These foods can help reduce the risk of heart disease, lower cholesterol levels, decrease certain types of cancers, and improve your odds of living a long life.

Recommendation: Eat four or more servings of peas, beans, soybeans, lentils, peanuts, and others a week. Substitute soy protein for animal protein. Soy - eat up to 25 grams per day, a few times per week. Women with breast tumors need to avoid soy and soy products. If a person has thyroid disease, caution is advised.

Yogurt

Yogurt is created from the fermentation of milk. The balance in the intestine between “good” and “bad” bacteria is important. A proper balance can help prevent the absorption of potentially damaging toxins into the body.

Recommendation: Eat plain, unsweetened yogurt on most days of the week. Add fresh fruit to your yogurt and choose low fat brands.
Tea

Tea can help to maintain proper body weight, provide the body with antioxidants and help reduce the risk of certain types of cancers.

Recommendation: Drink Green tea, white tea and oolong tea. Black tea is also acceptable but its benefits are not as great as the ones previously mentioned. Drink 2-3 cups per day (1 cup=237ml) and up to 8-10 cups if possible. Do not add milk or sugar to the tea. Drink tea at a warm, not hot temperature.

Wine and Alcohol

Wine can help reduce the risk of heart disease, high blood pressure and lower cholesterol levels. Do not begin drinking wine unless you currently consume alcoholic beverages.

Recommendation: Drink wine with meals only. Drink more red wine than white wine, more white wine than beer, and more beer than distilled spirits. Women - Consume 1-2 glasses per week. Men - Consume 1-2 glasses per day (One glass equals 4 ounces)
Sample Anti-Aging Diet

**Breakfast:**
- Yogurt with fruit juice or green/black tea
- Grain cereal, skim milk (soy), fruit juice
- Eggs, fruit juice, whole wheat toast

**Snack:**
- Fruits, Nuts, Seeds, Protein Bar, Veggies, Yogurt

**Lunch:**
- Salad and Vegetables, Chicken or Fish or Soy, Yogurt
- Green/black Tea, Fruits

**Snack:**
- Fruits, Nuts, Seeds, Protein Bar, Veggies, Chocolate

**Dinner:**
- Chicken or Fish, Grains (rice, etc), Garlic/onions, Legumes/beans, Veggies, Fruit Pies (natural)

Specific foods are mentioned in the anti-aging food recommendations previously reviewed. The person should have two fish meals, one-two red meat meals, two chicken meals and one-two vegetarian meals per week. Water throughout the day. Limited use of alcohol, oils/butters, salt, and sweets.
XI. Supplements and Educational Material

Anti-Aging Supplement Program Consists of:
A. Multivitamin - Daily Dose
B. Heart Pill or Powder - Healthy Heart
C. Immune Pill - Immune Power
D. Stress Powder - XtraBoost

Daily Dose Multivitamin and mineral – A complete and balanced vitamin and mineral formula that contains 28 essential and required nutrients for overall health. Contains 100 capsules in a bottle with one being taken per day.

Healthy Heart – Available in tablet or powder form. Contains important B vitamins that help maintain normal homocysteine levels as well as antioxidants to help protect against attack from free radicals. CoQ10 and L-carnitine help support healthy heart function and Omega 3 fatty acids and plant sterols help to maintain normal cholesterol levels. In addition, the product contains specialized nutrients such as Garlic, Hawthorne, Arginine etc., which play a vital role in heart health. The powder form does not contain all of these ingredients. The powder is a one month supply. The pills are a one month supply with two tablets being taken per day.

Immune Power – Contains a variety of potent antioxidants such as vitamin C, vitamin E, selenium, zinc, green tea, bioflavinoids, elderberries and others to help fight free radicals and minimize possible cell damage, which can lead to sickness and disease. The carotenoid lutein been shown to decrease cancer growth while increasing the growth of normal white blood cells in animal studies. Lycopene, another carotenoid, is found in tomatoes, and high intakes of tomatoes have been shown to reduce cancer of the oral cavity, pharynx, esophagus, stomach, rectum, and of the colon. Immune Power also contains many herbs, mushrooms, and other nutrients that may increase the strength of the immune system and help prevent illness from viruses. A one month supply with two tablets being taken per day.

XtraBoost Powder – Nutrients can be depleted with stress. These nutrients need to be replaced with XtraBoost energy and stress formula. This powder contains the B vitamins, magnesium, zinc, and herbs to increase energy and replace those nutrients that are lost from stress.

Optional Supplements may be necessary depending upon a person’s individual need. If the person has joint aches and pain, FlexiJoint Joint formula should be given. If the person is overweight or obese, SlimRx weight loss formula will be necessary. In addition, protein bars can be used as snacks.
## Supplement Price List

<table>
<thead>
<tr>
<th>Product</th>
<th>Wholesale</th>
<th>Retail</th>
<th>Minimum Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cholesterol Bar – Chocolate</td>
<td>$1.39</td>
<td>$1.99</td>
<td>3 trays</td>
</tr>
<tr>
<td>Joint Bar – Chocolate Brownie</td>
<td>$1.39</td>
<td>$1.99</td>
<td>3 trays</td>
</tr>
<tr>
<td>Protein Bar – PeanutButter/Choc</td>
<td>$1.09</td>
<td>$1.50</td>
<td>3 trays</td>
</tr>
<tr>
<td>Protein Bar – Coconut/Choc</td>
<td>$1.09</td>
<td>$1.50</td>
<td>3 trays</td>
</tr>
<tr>
<td>XtraBoost Energy/Stress Powder – 2lb</td>
<td>$19.99</td>
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<td>XtraBoost Energy/Stress Powder – 1lb</td>
<td>$11.99</td>
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<tr>
<td>Healthy Heart Powder – 2lb</td>
<td>$19.99</td>
<td>$29.99</td>
<td>3 bottles</td>
</tr>
<tr>
<td>Healthy Heart Powder – 1lb</td>
<td>$11.99</td>
<td>$19.99</td>
<td>3 bottles</td>
</tr>
<tr>
<td>FlexiJoint - tablets</td>
<td>$14.99</td>
<td>$24.99</td>
<td>1/2 case</td>
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<tr>
<td>Healthy Heart tablets</td>
<td>$19.99</td>
<td>$32.99</td>
<td>1/2 case</td>
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<td>Daily Dose Multivitamin capsules</td>
<td>$6.99</td>
<td>$11.99</td>
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<tr>
<td>SlimRx Weight Loss capsules</td>
<td>$24.99</td>
<td>$39.99</td>
<td>1/2 case</td>
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<tr>
<td>(2 month supply)</td>
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</tr>
<tr>
<td>Immune Power tablets</td>
<td>$14.99</td>
<td>$24.99</td>
<td>1/2 case</td>
</tr>
</tbody>
</table>

Both Healthy Heart and XtraBoost powders come in vanilla.

All pills are a one month supply with the exception of SlimRx weight loss formula which is a two month supply.

Minimum Quantities are required
15 bars are in a tray
1 case = 12 bottles
1/2 case = 6 bottles

Shipping is $6.95 for all orders.

---

### Anti-Aging Education Program Consists of:


This book can serve as a reference for your patients and clients. It contains much of the information that will be covered by you in the anti-aging program. Therefore, you can refer to the book concerning a topic in order to save yourself time. The book is easy to read and understand, and is in a question and answer format. It was written with the non-science person in mind.

Retail: $29.99
Wholesale: $17.99
Shipping and Handling $2.00
APPENDIX AND EXERCISE FORMS
Stretching Exercises

The following stretching exercises should be done prior to and after exercise. When done prior to exercise they need to be performed slowly and carefully as the body needs to be warmed up. I would suggest having your patient/client perform an easy aerobic activity for a few minutes, such as bicycling or easy walking, to get the blood pumping. Jumping jacks are also good if the person is able to do them. Once the person has done a few minutes of these light cardio exercises, then they should perform the stretches described below.

**Neck Stretches**

Bend the neck forward until tension is experienced. Hold the position for 10 seconds. Then bend the neck backwards and hold for 10 seconds. Next, turn the head to one side hold for 10 seconds and then the other side and hold for 10 seconds. Finally bend the head toward the left shoulder and then the right shoulder holding each stretch for 10 seconds.
Neck Extension

Neck Lateral Bending
Neck Rotation

Arm Circles

Standing with your arms stretched out to the sides, make arm circles to the front and to the back. Feet should be shoulder width apart. Start the arm circles in small circles making them larger as you progress with the exercise. Do this for 10 seconds or so.
Alternate Toe Touches

Place your feet twice as wide as shoulder width. With your right hand try to touch your left foot by bending at the waist and at the same time have your left hand reach straight out toward the ceiling/sky. Hold the stretch for a second or two and then do the other side. Repeat this for 10 times.

Standing Hamstring Stretch

Stand straight up with your legs together and bend forward at the waist attempting to touch your toes. Hold this position for 10 seconds and repeat 3 times.
Standing Quadricep Stretch

Stand straight up with your legs together and grab one ankle pulling the heel toward the same side buttocks. You can use your other hand to brace against a wall or other object for balance. Hold for 10 seconds, do 3 times and then do the other side.

Standing Calf Stretch

Stand facing a wall or other object and place the toes against the wall. Then lean forward slightly and tension should be felt in the calf. Hold 10 seconds and repeat 3 times.
Seated Hamstring Stretch

While sitting on the floor, one leg is outstretched and the other is bent. With the arm on the same side as the outstretched leg, try to touch the toes with the fingertips. Hold this stretch for 10 seconds, and repeat 3 times. Then do the other hamstring.

Seated Groin Stretch

While sitting on the floor, grab your ankles or toes with your hands and pull them in towards your groin. Hold this position for 10 seconds and repeat 3 times.
Seated Forward Hamstring Stretch

While sitting on the floor, both legs are together, outstretched in front of you. Reach both of your arms straight out in front of you, bending at the waist and hold for 10 seconds. Repeat 3 times.
Physio-ball Exercises

Seated

1. **Anterior and Posterior Tilt of Pelvis**

Sit on the physioball with the hips at 90-degree angles. Your feet should be approximately width apart and flat on the ground. Place your hands on your hips and tilt your pelvis forwards and then backwards. Do 10 repetitions in each direction.

2. **Marching**

Seated on the ball as above, attain the pelvic neutral position and alternately lift one leg up and then the other as if you were marching in place. Do 10 repetitions each leg.
3. **Alternate arm and leg lift**

Seated on the ball as above, attain the pelvic neutral position and alternately lift one leg and the opposite arm and repeat with the other leg and opposite arm. Do 10 repetitions each arm and leg.

4. **Seated rotation of the spine**

Seated on the ball as above, attain the pelvic neutral position and rotate spine first to the right and then to the left. Do 10 repetitions in each direction.
1. **Alternate Arm Lifts**

   While lying face down with the physioball under your chest and abdomen, attain the pelvic neutral position and while maintaining this position alternately raise one arm and the other. Do 10 repetitions with each arm.

2. **Alternate Leg Lifts**

   Use the same position as above. Attain pelvic neutral position and alternately lift one leg and then the other. Do 10 repetitions with each leg.
3. **Alternate Arm and Leg Lifts**

Use the same position as above. Attain pelvic neutral position and alternately lift one arm and the opposite leg and repeat with the other arm and opposite leg. Do 10 repetitions with each arm and leg.

4. **Back Extension**

Use the same position as above. Put your hand together behind your neck and arch your back upward. Do 10 repetitions.
Supine

Pelvic Tilting and Pelvic Neutral Position
Lay face upwards on the ball and practice tilting your pelvis upward and downward. Find a point midway between the two. This is the neutral position, which is the position you want to maintain throughout all of the supine exercises.

1. Alternate Leg Extension

Use the neutral pelvic position as above. Straighten one knee and lift the straight leg and lower and repeat with the other leg. Do 10 repetitions.

2. Alternate Leg Lifts

Use the same position as above. Alternate raising and lowering one knee and then the other knee. Do 10 repetitions.
3. Alternate Arm Lifts

Use the neutral pelvic position as above. Lift one arm up and down and repeat with the other arm. Do 10 repetitions.

4. Alternate Arm and Leg Lifts

Use the neutral pelvic position as above. Alternately lift your right arm with your left leg and repeat with your left arm and right leg. Do 10 repetitions.
5. **Abdominal Crunches**

Use the neutral pelvic position as above. Support the back of your head with your hands. Focus your eyes on a point on the ceiling and slowly use your abdominal muscles to curl you up. Do 10 repetitions.

6. **Leg Lifts with Physioball**

Lay face up on a comfortable surface with the physioball gripped between your legs. Raise the legs upwards. Your back should be slightly rounded at the end of the motion. Repeat 10 times.
Wall Squats

Stand at a wall and place the physioball behind you with your back against it. Your legs and feet should be shoulder width apart. Slowly bend at the hips and knees as if sitting in a chair until your hips and knees are at about 90 degrees. Then push through your heels to rise back up. Do not look down but rather straight ahead. Do 10 repetitions.
## Physio-Ball Exercise

| Physio-Ball Core Exercises | Date | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
|----------------------------|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Seated                     |      | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Prone                      |      | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Supine                     |      | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 5 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                            |      | 6 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Wall Squats                |      | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

- **Seated** exercises involve sitting and maintaining balance on the physio-ball.
- **Prone** exercises are performed lying on the floor with the legs extended.
- **Supine** exercises are done lying on your back on the physio-ball.
- **Wall Squats** are a balance exercise involving moving the lower body while standing against a wall.
The following exercises are designed to improve strength, mobility, coordination, and endurance. It is recommended that you consult your healthcare provider prior to beginning any new exercise program.

NOTE: Discontinue exercise program if there is any increase in pain.

1. **Hip Flexion**
   - Standing, anchor one end of band around ankle. Secure opposite end to a stationary object or piece of furniture. Lift leg forward 45 degrees.

2. **Hip Abduction**
   - Standing, anchor one end of band around ankle. Secure opposite end to a stationary object or piece of furniture. Lift leg away from body.

3. **Hip Extension**
   - Standing, anchor one end of band around ankle. Secure opposite end of band to a stationary object or piece of furniture. Lift leg backward.

4. **Hip Adduction**
   - Anchor one end of band around ankle. Secure opposite end to a stationary object or piece of furniture. Move leg across your body.

5. **Knee Flexion**
   - Lying, anchor band around ankle. Secure opposite end to a stationary object or piece of furniture. Bend knee, raising foot toward buttock.

6. **Double Hips**
   - Begin long sitting with legs together, band wrapped around legs. Move legs apart, stretching band.

7. **Inward Hip Rotation**
   - Sitting, anchor one end of band around ankle. Secure the other end around opposite planted foot. Internally rotate hip, moving foot outward.

8. **Outward Hip Rotation**
   - Sitting, anchor one end of band around ankle. Secure other end around front leg of chair as shown. Externally rotate hip, moving foot inward.

9. **Leg Press**
   - Start in a standing position, band beneath both feet and held above shoulders. Move to a squatting position and then return to a standing position.

10. **Knee Extension**
    - Sitting, place pillow under leg. Secure band on rear leg of chair, extend foot toward ceiling.

11. **Ankle Plantarflexion**
    - Sit with leg straight, band wrapped around foot, and ends held in hands. Push foot downward, pointing toes.

12. **Toe Raises**
    - Anchor one end of band around foot. Secure other end beneath opposite foot. Hold knee as shown, lift foot toward ceiling.

13. **Ankle Eversion**
    - Sitting, start with band wrapped around both feet as shown. Move feet apart, stretching band.

14. **Ankle Inversion**
    - Sitting, start with ankles crossed and band wrapped around feet as shown. Move feet apart, stretching band.
The following exercises are designed to improve strength, mobility, coordination, and endurance. It is recommended that you consult your healthcare provider prior to beginning any new exercise program.

NOTE: Discontinue exercise program if there is any increase in pain.

**1. Shoulder Press**
Sitting, start with band under buttocks, with ends held at chest. Raise band toward ceiling.

**2. Rowing**
Begin long sitting, band wrapped around bottoms of feet and held in hands. Pull band toward chest.

**3. Lat Pull Down**
Start with arms held straight over head, shoulder width apart. Pull band down, stretching it behind head and shoulders.

**4. Scapular Retraction**
Start with arms extended in front of you, shoulder width apart. Pull band across chest, squeezing shoulder blades together.

**5. Chest Press**
Start with band wrapped around your back and held at chest. Push band forward away from chest.

**6. Lateral Raises**
Start with band anchored under foot and ends held at sides. Raise arms to shoulder height.

**7. Shoulder Flexion**
Standing, start with band anchored under foot and held at your side. Raise arm to shoulder height.

**8. Shoulder Extension**
Standing, start with band anchored under foot and held at side. Raise arm backward.

**9. Internal Rotation**
Start with one end of band secured, the other end held in hand away from body. Rotate arm inward, across stomach.

**10. External Rotation**
Start with band secured on opposite hip and held tight against stomach. Rotate arm away from body.

**11. Biceps Curls**
Standing, start with band anchored under foot and held in hand of lengthened arm. Bend elbow, raising hand to shoulder.

**12. Triceps Extension**
Standing, start with band anchored under foot, and opposite end held behind head. Straighten arm toward ceiling.

**13. Wrist Flexion**
Band held in resting hand over knee, with palm facing up. Opposite end anchored under foot. Raise upward.

**14. Wrist Extension**
Band held in resting hand over knee, palm facing down. Opposite end anchored under foot. Raise upward.
## Beginner Exercise Chart

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## Intermediate Exercise Chart

| Machine          | Date | Set | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 |
|------------------|------|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Chest Press      | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Pec Dec or Flys  | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Rowing           | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Lat Pulldown     | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Shoulder Press   | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Lateral Raise    | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Bicep Curl       | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Tricep Pushdown  | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Leg Extension    | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Leg Curl         | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |
| Toe Press        | Seat | Plates | Pad | Rep | | | | | | | | | | | | | | | | |

**Abdominal Crunches**

**Leg Raises**

**Obliques**

**Cardio 3-4x/week**

20-30 minutes, Moderate Intensity

**Stretching 10 minutes**
# Advanced Exercise Chart

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