



Medically Supervised Weight Management Program:

Full and Modified Meal Replacement Plans

POSITIVE CHOICE
INTEGRATIVE
WELLNESS CENTER



Welcome to Positive Choice Medical Weight Management: Full/Modified Meal Replacement Program

Important Contact Information

Positive Choice mainline: 858-616-5600

Medical Team: 858-616-5789

Your Counselor: _____

Counselor Phone Number: _____

Only KP members can use KP.org app/portal

Group # _____

Day & Time: _____

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Program Syllabus

Date:	Topic:	Reminder
_____	1. Welcome and Program Overview	Virtual Programs no clinic-check-in this week
_____	2. Medical Review & Meal Replacement Plans	Virtual Program Clinic Medical Check-in & Product Pick-up at GARFIELD In-Person Programs check-in at class location
_____	3. A New Approach	\$125 Maintenance fee due – 1 st of 4
_____	4. Coping Strategies	
_____	5. Exercise	\$125 Maintenance fee due – 2 nd of 4
_____	6. Stress and Stress Management	
_____	7. Introduction to Mindfulness	\$125 Maintenance fee due – 3 rd of 4
_____	8. Choices and Taking Responsibility	
_____	9. Thoughts and Changing Self-Talk	\$125 Maintenance fee due – 4 th and final
_____	10. Emotions	
_____	11. Needs	
_____	12. Understanding Habits	
_____	13. Relationship with Food	
_____	14. Family Rules and Messages	
_____	15. Preparing for Eating (PFEs)	
_____	16. Changing Self-Identity	Participants transition to the Modified MR Plan
_____	17. Body Image	
_____	18. Values	
_____	19. Reassessing Motivation	
_____	20. Goodbyes and New Beginnings	

PREPAID MAINTENANCE FEE REMINDER

- The Maintenance fee is **\$500**.
- The payment of the \$500 Maintenance fee can be paid in full or split into four payments (\$125 each) due at weeks three, five, seven, and nine.

Program Agreement and Consent Form

Medical Agreements for Program Participation

As a medically supervised weight management program participant using meal replacements:

- I understand that while every effort will be made to accommodate my preferred program and/or meal replacement choice, the Positive Choice medical staff will make the final decision based upon review of my medical history.
- I agree to follow the Medical Instruction Letter I receive from the Positive Choice medical team at session #2 of my program.
- I agree to complete weekly medical check-ins at my assigned clinic location on the same day as my scheduled class.
- I agree to complete lab work every other week or as ordered by the Positive Choice medical staff.
- I understand if I miss session #3 lab work or any two consecutive lab appointments, I will call the medical team at 858-616-5789 within 48 hours of the missed lab appointment or I will be withdrawn from the program.
- I agree to notify the Positive Choice medical team of changes in medical status, medications, and any medical or surgical procedures.
- I am aware that if I am placed on a Medical Leave of Absence (MLOA) from the program, I will need a medical clearance if I choose to return.
- I understand that I may not remain on meal replacements if I need to travel outside of the U.S. - No Exceptions! If I must travel outside of the U.S., I will contact my counselor for instructions on how to completely transition off the meal replacements.
- I understand that I will be encouraged to increase my physical activity.
- I agree to abstain from alcohol and non-prescription drugs while on meal replacements. Use of these substances can result in automatic withdrawal from the program (Note: Please notify Positive Choice medical team if you are using medicinal cannabis).
- I am aware that common conditions associated with this program, although temporary in nature, are sensitivity to cold, dry skin, lightheadedness, hair loss, fatigue, increased urination, constipation, and muscle cramps. Although infrequent, there is a risk for gout and gallbladder attacks. Whether I am on a weight loss program or not, obesity increases my risk for morbidity and mortality.
- I am aware that significant psychological, emotional, and social problems sometimes surface in response to major weight loss. I agree to consider additional support options which may be beneficial as I deal with my weight and overeating issues. Although we will discuss many personal and emotional life issues, this is not group therapy.

Group Agreements for Program Participation

As a group member:

- I agree to participate! It is always up to me how much and what I share about myself. I will be a considerate contributor and be sensitive to the needs of others in my group.
- I understand I am making a commitment to myself to get the very most out of this process. It is in my best interest to bring my full attention to class participation during each session. When I am in class I agree to be in class and not doing other things.
- I agree to mute myself, so I do not distract others with background sounds if I am in a virtual group. If I am in a in-person group, I will not use my telephone or tablet while in group.
- I will respect the group's confidentiality. If I am in a virtual group, I understand I must be in a room or area by myself to ensure group member voices are not heard and/or faces are not seen by non-group members.
- I will be respectful of fellow group members. Disrespectful behavior will not be tolerated and may result in withdrawal from the program.
- I may withdraw from this program at any time, or I may be withdrawn from the program for non-compliance with program policies.
- I am aware that family members, friends, or coworkers must enroll in a separate full/modified meal replacement group.

- I agree to communicate with my counselor any needs or concerns I have about my group. My input and feedback are important.
- I agree to contact my counselor if I will be absent, or if I decide to withdraw from the program.
- I understand that missed classes cannot be made up as all groups are closed and confidential.
- I agree to notify a Positive Choice service representative of any telephone, email, or address changes.
- I understand that sessions #1, #2, and #3 are mandatory, they contain important medical and program information. If I miss any of these first three sessions, I will contact my counselor within 48 hours, or I may be withdrawn from the program. If I am withdrawn and would like to return, within a week of my withdrawal date, I am required to pay a \$150 re-enrollment fee.

Financial Agreements for Program Participation

As a medical weight management program participant:

- I understand this program is not covered by my Kaiser Permanente Health Plan and I agree to pay all program fees.
- I understand I am financially responsible for paying all weekly fees. If I miss my weekly payment and meal replacement order, I will pay for my missed payment the following week plus pay the upcoming weeks fees.
NOTE: Fees are still required for missed weekly classes and meal replacements.
- Meal replacements cannot be returned nor exchanged.
- I agree to pay my \$500 Maintenance Program fee in four (4) \$125 payments at sessions #3, #5, #7, and #9 of the weight loss phase. This non-refundable fee must be paid by in full by session #9.
- I understand that the following are reasons for withdrawal:
 - If I miss three consecutive sessions.
 - If I miss three consecutive weeks of payments.
 - If I miss session #3 lab work or any two consecutive lab appointments.
- I understand in withdrawing, I will not be refunded any pre-paid fees. Pre-paid Maintenance Program fees may be applied to one re-enrollment.
- If I am withdrawn for any reason and choose to re-enroll, I am responsible completing all pre-program assessment appointments and pay associated fees:
 - \$150 re-enrollment fee if medical clearance was completed within 12 months.
 - Full program start-up fees if medical clearance has expired (greater than 12 months).
 - Start-up fees for KP members = \$300 + copays

Getting Ready for Your Meal Replacement Plan

What to know about Session #2

- **Remember Session #2 Medical Check-in & Product Pick-up must be completed at the Garfield Positive Choice location on the same day as your class and before your class meets so that you have your medical Instruction letter to review in class.**

When you enter the building, go to the 4th floor to make your payment, then take the elevator (stairs are for staff only) to the 6th floor. Weigh in on the scales and ring the doorbell outside the lab/medical door. The medical team will come get you. If you are in an In-Person Group, do check-ins at your class location.

- Virtual Groups: At your medical check-in you will receive medical instructions and program materials. Once your medical check-in is complete, go to the Meal Replacement storage room (past the scales and turn right). Look for the doorbell and ring to have your product order filled. You may bring your own bags.
- Check-in will go more smoothly for you if you know which flavors of meal replacements you want before your session #2 check-in. Think about whether you want to purchase extra meal

- replacements, or fiber, or bouillon. NUTRIMED flavors include vanilla, chocolate, mocha, and wild berry shakes, and creamy tomato and creamy chicken soups (you also may purchase 1-2 boxes of the NUMETRA bars.)

NUMETRA flavors include vanilla, chocolate, and strawberry shakes, creamy chicken and tortilla soups, and bar flavors caramel cocoa, cinnamon, and fudge graham.

- Each week you will receive five boxes (1 weeks' worth) of meal replacements (seven packets in each box.)
- We highly recommend you purchase an extra box of meal replacements at your Session #2 and/or Session #3 Medical Check-in & Product Pick-up, so you can have extras on hand in case of an emergency.
- When purchasing a week of meal replacements, three of the five boxes must be shakes, the remaining two boxes can be any combination of shakes, soups or bars (NUMETRA bars are permitted while on the NUTRIMED plan.)
- Make sure you check your product order for accuracy **before** you leave the clinic for any possible errors. Please be aware that once the product leaves Positive Choice, it **cannot** be returned.

BOUILLON:

You may purchase up to two boxes per week of chicken flavored bouillon. This will be used in addition to your meal replacements (it is not a substitute for shakes, soups, or bars). Some medical conditions may require you to have the bouillon as an essential part of your program. The medical team will let you know if you will need to purchase and consume the bouillon in addition to the meal replacements. Due to strict sodium guidelines, you may ONLY consume up to two servings of **any type** of soups per day. This includes the bouillon as well as the NUTRIMED or NUMETRA meal replacement soups. You may have a maximum of **two servings of soups a day** and purchase the bouillon in any of the following combinations:

Meal Replacements	Bouillon	Product Total
5 boxes shakes	1 or 2 boxes of bouillon	Total of 6 or 7 boxes purchased
4 boxes shakes + 1 meal replacement soup or bar	Can buy 1 bouillon	Total of 6 boxes purchased
3 boxes shakes + 2 meal replacement soups	CANNOT buy bouillon	Total of 5 boxes purchased

FIBER: We recommend that you purchase at least one source of fiber before your Session #2 class, so you have it ready when you begin meal replacements. During the program we recommend using at least two types of fiber while on meal replacements. Here are the recommended options for fiber, we will review the amounts of each fiber and how to add them to your meal replacements in your Session #2 class.

- Bran
 - Flax seeds
 - Chia seeds
 - Psyllium husks: Brand names include Metamucil [™], Citrucel [™], and other generic versions. Choose a sugar free option.
 - Fiber tablets: Brand names include Fibercon [™] or Fiber Tabs [™].
 - Positive Choice Fiber Supplement (available when you purchase your meal replacements): This fiber is formulated to be added to your meal replacements without changing the taste or texture. It provides 3 grams of fiber per tablespoon.
- **POTASSIUM SUPPLEMENT:** The medical team may require a potassium supplement as part of your daily plan. If you are required to take a potassium supplement:
 - KP members may fill their prescription at any KP pharmacy.
 - Non-members will receive a paper prescription at the Session #2 Medical Check-in, which they may fill at a pharmacy of preference.

TO DO LIST BEFORE Session #2

- ✓ Pick up your Potassium supplement if the medical team prescribed this for you.
- ✓ Purchase fiber. You can purchase from a store or at Positive Choice when you purchase your meal replacements next week. See the above section on fiber for recommended options.
- ✓ Make sure you have shaker bottles, water bottles, or blenders ready to use to prepare your meal replacements.
- ✓ Visit positivechoice.org/exercise-videos and do one strength-training video and one cardio video sometime this week.
- ✓ Complete your Medical Check-In & Product Pick-up BEFORE your Session #2 class meeting.

Preparing Your Meal Replacements

- Mix using a shaker or blender for best results.
- Mix with at least 6 ounces or more of liquid.
- Water is preferred, but you may use low-calorie fluids such as diet soda, black coffee, sugar free beverages and ice.
- You may flavor your shakes with calorie free syrups (less than 5 Cal/serving use sparingly) or spices like cinnamon, nutmeg, or pumpkin pie blends
- When mixing with carbonated or hot beverages, use a lid, vent the container every few seconds, and open carefully. Carbonated or hot liquids can explode if not vented.
- To make soups or a warm shake, place a meal replacement into a preferred container. Slowly add a hot liquid into the meal replacement and stir to make a paste. Then continue to stir well as you add the rest of your liquid.
- To warm up mixed supplement, do so slowly. Excessive heat will cause coagulation.
- You may add spices, herbs, lemon or lime juice, and small amounts of hot sauce to your soups.
- You must consume all five meal replacements every day. You jeopardize your health by using less.
- If you miss a meal replacement, double your next serving.
- Space your meal replacements at 3-4-hour intervals to minimize hunger and fatigue.

- Drink a total of 120-150 ounces of liquid daily. This includes the liquid you use to make your meal replacements. You can drink water, black coffee, tea, or other low-calorie liquids as part of this total. One gallon is 128 ounces; you may find it helpful to pre-measure your required water at the beginning of the day and use that to prepare meal replacements, fill water bottles to meet your daily goal.
- Limit your intake of caffeinated beverages to 16 ounces per day or less. Caffeine stimulates insulin, may irritate the stomach, and cause feelings of nervousness which may feel like hunger to some people. If you are used to consuming a lot of caffeine, consult our medical team before you limit to 16 ounces.
- Always carry a few extra packets with you in case you get stuck somewhere without your regular supply. It's a good idea to carry liquid and a bottle to mix with as well.
- Refer to your Medical Identification Card for a list of substitute foods If you find yourself in a situation where don't have your meal replacement with you. Avoid these situations whenever possible.
- Store meal replacements at room temperature or colder. Overheating (i.e. being in a car) will change consistency and taste.



- You may pre-mix your meal replacements if you consume them within 24 hours. Store pre-mixed meal replacements in a Thermos™, refrigerator, or ice cooler. Give it a good shake before consuming.
- You may use artificial sweeteners, but keep in mind that artificial sweeteners may cause sweet cravings, stimulate appetite and possibly disrupt the balance of healthy bacteria in your gut making weight maintenance more difficult. If you choose to use artificial sweeteners, use as little as possible.
- You may have sugar-free gum and mints. Keep in mind that the sugar alcohols in these products (i.e. xylitol, sorbitol, maltitol) can cause severe gas and diarrhea. Limit to no more than 4 pieces per day or less if you have a sensitive stomach.

Bouillon: You may have up to two servings per day of the chicken flavored bouillon. This should not be counted as one of your five meal replacements and should be taken in addition to your meal replacements.

Fiber: Adding fiber to your daily plan will help prevent constipation and maintain a healthy gut microbiome.

- Do not take your fiber and your potassium supplement at the same time.

You may use any of the fibers listed below. It is a good idea to alternate different sources of fibers on different days, for example bran one day, flax seeds another, or flax seeds in the morning and bran in a meal replacement in the evening. Take 2-4 Tbsp of total fiber a day in any combination. Here are the appropriate amounts of each fiber.

- Bran: Add one tablespoon to a meal replacement twice a day
- Flaxseeds: Add one tablespoon to a meal replacement twice a day, gradually adding more if needed up to a total of 4 tablespoons per day.
- Chia seeds: Add one tablespoon to a meal replacement twice a day, gradually adding more if needed up to a total of 4 tablespoons per day.
- Psyllium husks: Brand names include Metamucil™, Citrucel™, and other generic versions. Choose a sugar free option, mix 1-2 teaspoons in water or another sugar free beverage and drink twice a day.
- Fiber tablets: Brand names include Fibercon™ or Fiber Tabs™. Take 1-2 tablets twice a day with fluids.
- NutriSource Fiber (may be purchased at Positive Choice): This fiber is formulated to be added to your meal replacements without changing the taste or texture. Mix 1 scoop into your meal replacements 2-5 times a day.

If you are doing the modified plan...

Modified Meal Replacement Plan

Everyday you will have 5 meal replacements
plus protein, vegetables, and a green salad.



Protein

Choose one:

- 3 ounces of cooked meat: skinless poultry, fish, shellfish, sirloin, flank or round beef or pork tenderloin
- 3/4 cup of non-fat cottage cheese
- 8 ounces of non-fat, plain Greek yogurt
- 2 eggs
- 6 egg whites
- ¾ cup egg substitute
- 1/2 cup of cooked beans: black, garbanzo, kidney, lima, navy, pinto, soy, white, lentils, etc.
- 1/2 cup cooked quinoa
- 4 ounces plain seitan
- 9 ounces tofu
- 2 ounces (1/3 cup) cooked tempeh
- 3 ounces vegan alternatives: veggie burger, soy protein, etc.



Vegetables

Choose 1/2 cup cooked or 1 cup raw:

- Artichoke
- Asparagus
- Bamboo shoots
- Beans (wax, green)
- Beets
- Bell pepper, all colors
- Broccoli*
- Brussels Sprouts*
- Cabbage*
- Cauliflower*
- Carrot
- Celery
- Cucumber
- Eggplant
- Iceberg lettuce
- Jicama
- Kohlrabi
- Leeks
- Mung bean sprouts
- Mushrooms
- Okra
- Onions
- Pea Pods
- Peppers, all kinds
- Radishes
- Seaweed, cooked
- Spinach
- Summer squash
- Zucchini
- Yellow squash
- Tomatoes
- Turnips
- Water chestnuts



Green Salad

Choose 2 cups of greens
plus 1/2 cup of raw vegetables:

- Arugula
- Beet greens
- Bibb
- Bok choy
- Boston leaf
- Butter head
- Cabbage
- Collard greens
- Kale
- Loose leaf
- Mixed spring greens
- Mixed power greens
- Romaine
- Spinach
- Watercress

Iceberg lettuce is a vegetable, not a leafy green

1 Tbsp of a dressing: lemon juice, lime juice, balsamic vinegar, unseasoned rice vinegar, or other vinegars, mixed with olive oil, mustard, salsa, pico de gallo, etc. If you buy salad dressing, choose one with few ingredients.

If you have uncomfortable gas, try limiting or avoiding vegetables with a *. Cooked vegetables may cause less gas than raw vegetables.

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Everyday you will have 5 meal replacements plus protein, vegetables, and a green salad.
You can choose the schedule that works best for you. Never skip a meal replacement.



Important:

Fruit, grains, or starchy vegetables, that are not listed, are not recommended on the Modified Plan.
Avoid oil, butter, or fat when cooking. Try cooking sprays.

Be sure to drink 120-150 ounces of fluid every single day. This fluid amount includes what is used to make your meal replacements.

Medical Instructions & Overview

****BE SURE TO REVIEW YOUR PERSONAL MEDICATION INSTRUCTION LETTER
that you will receive at your session #2 Medical Check-in****

- The medical team may be reached at: 858-616-5789
- Contact the medical team anytime you experience symptoms that might be related to your meal replacement program or if there are any changes in your medical status.
- If your symptoms are not related to the meal replacement program, contact your personal doctor.
- If you have medical questions that need to be addressed privately, schedule an individual appointment with the medical team or contact them at the number above. If it is not urgent, you can speak with our medical team when you come for your Medical Check-in. Ask the service representative to schedule a walk-in appointment.

Lab Work

You are required to complete lab work every two weeks (or more if the medical team feels it is necessary) while you are on the meal replacement program.

Medical monitoring is mandatory, if you miss two lab appointments in a row or miss your session #3 lab appointment without making prior arrangements with the medical staff, you will be automatically withdrawn from the program and will incur a \$150 rebooking fee to be re-enrolled.

Virtual Programs: Beginning Session #3 your labs will be completed at your Medical Check-in & Product Pick-up at your designated location on the same day as your class. We require your check-in on the same day as your class because this allows us to provide you with the best quality care and service as we have the appropriate staffing and spacing of service to keep you safe and provide services efficiently.

On the occasion you have a schedule conflict and cannot complete your Medical Check-in & Product Pick-up on your designated day, call the medical team.

Sometimes KP members feel it is more convenient to complete their lab work at another KP lab. If you are a member you can do so by making an appointment on the day of their class day. Keep in mind you will still

need to visit a Positive Choice location for Medical Check-in & Product Pick-up.

If you are not a KP member you must have lab work done at a Positive Choice Clinic during business hours. Locations are Garfield 6th floor, San Marcos, Otay Mesa, or Bostonia. See website for current days/times PositiveChoice.org/clinic-hours-and-locations

Potassium Supplement

Take your prescribed potassium with one of your meal replacements. Potassium on an empty stomach can cause nausea.



Do not take potassium supplement with a meal replacement that you added fiber, as it may prevent absorption.

Swallow the tablet, do not chew it. Potassium is bitter and the capsule has a coating to make sure it is released in the small intestine for better absorption.

Do not be alarmed if you see your potassium tablet in your stools. The coating of your potassium supplement is designed to release the potassium from the tablet and then the tablet is passed in your stool.

Failure to take the potassium supplement or taking a diuretic may cause low blood potassium levels or

deficiencies in other key nutrients which can result in serious heart irregularities.

Dizziness & Fatigue

The first weeks on meal replacements you release stored water from your body. You will maintain a mild state of dehydration as you lose weight. This can cause occasional dizziness, a lightheaded feeling, or fatigue because of salt and fluid loss.

To minimize the dehydration, avoid whirlpools, saunas, steam baths, hot yoga, and prolonged baths or showers while on meal replacements.

The occasional lightheadedness makes certain activities dangerous. These activities include, but are not restricted to swimming alone, piloting a plane (flying in a plane is fine), motorcycle or bicycle riding, regular or scuba diving, and hang-gliding.

If you do experience dizziness, lightheadedness, or fatigue, make sure you are getting at least 120 ounces of fluids a day. Adding in one to two servings of bouillon a day in addition to your five meal replacements will help.

Symptoms that are severe, particularly if you fall or faint, suggest problems other than the side effects of meal replacements. Kaiser Permanente members should seek immediate medical attention from their medical provider, the Urgent Care clinic, or the Emergency Room by calling 1(800) 290-5000, 24-hours a day, seven days a week.

Non-members should contact their medical provider or an Emergency Room.

Dental Health/Breath

Losing weight means you are using your fat stores as energy. When stored fat is metabolized for energy it travels in your blood in the form of ketones. Sometimes you can breathe out ketones through your lungs. You have experienced this when you have had “morning breath”.

While losing weight you can minimize “morning breath” by frequent and adequate water intake.

Other suggestions to minimize morning breath include:

- Frequent brushing of teeth, tongue, and gums.

- Consuming a glass of water after each meal replacement.
- Use mouthwash, breath spray, or a product called Breath Assure™.
- Have 1 to 4 pieces of sugar-free gum or 1-4 sugar-free breath mints daily, being careful not to use the gum or mints as a food substitute.
Note: too many artificially sweetened products in a day can cause stomach upset, gas, and diarrhea.

Dry Skin

The low-fat content of the meal replacements may cause some people to experience dry skin.

We suggest:

- Avoid prolonged showers or baths.
- Apply lotion to affected areas once or twice a day; doing this while still damp from your shower or bath is best.
- Use perfume and dye free laundry detergent and fabric softeners,
- Use **mild** body soaps
- Keep a humidifier running in your home and/or bedroom.

Pain/Headaches

You may use aspirin or non-steroidal anti-inflammatories (Ibuprofen, Motrin™, Naprosyn™, Advil™, Nuprin™, etc.), acetaminophen (Tylenol™),

If you are prescribed pain killers, or headache and migraine medicine, use as directed.

Colds/Sore Throat

Treat symptoms with pain medications listed above, over-the-counter cold preparations, antihistamines, or decongestants, as your medical history allows.

Saltwater gargles and sugar-free cough drops are often helpful.

Avoid syrups (e.g., Nyquil™) as they often have significant amounts of alcohol and sugar and will take you out of ketosis.

Indigestion/Heartburn

Try liquid antacids including Maalox™, Mylanta™, other brand names, or generic versions: two tablespoons up to four times a day.

You may also add over-the-counter products such as Tagamet™, Axid™, or Pepcid AC™, taken according to the instructions on the package.

Nausea/Vomiting

Contact the medical staff at Positive Choice, your own medical provider, the Urgent Care clinic, or the Emergency Room. You may try the medications listed under **Indigestion**, but this is a symptom that should be further evaluated.

Constipation

You will pass fewer stools and your stools will probably be smaller and darker than normal while on meal replacements. Black, shiny, tar-like stools should be reported to the medical staff.

It is very important to supplement your meal replacements daily with fiber to avoid constipation.

If you experience constipation, meaning you do not have a bowel movement every 3 days, use a laxative (Ex-Lax™, Milk of Magnesia™, Correctol™.) Do not wait to use these options if you are constipated.

If you need a laxative more than twice a month or if you are having other problems, contact our medical staff.

Diarrhea

If you are experiencing blood in your stool, severe cramping, wake from a deep sleep with cramping, or if you have a fever, contact our medical staff or your primary medical provider immediately.

If none of these are present, treat diarrhea with an over-the-counter product (Imodium™) following the package instructions.

If you have not already done so, add fiber to your daily plan. Your bowels should be normal within 3 days, if not, contact our medical staff.

Please note that sugar alcohols can cause diarrhea or stomach upset, reduce or stop your intake if this occurs (this includes sugar free gums, syrups, breath fresheners).

Bathroom Visits

You will have to urinate more often while on meal replacements because we ask you to drink 120-150 ounces of fluid a day and because the meal replacements have a high protein content relative to carbohydrate content which creates a diuretic effect. If you struggle with nighttime waking to go to the bathroom, we suggest:

- Finish your meal replacements 2.5 hours before bedtime or make your evening meal replacement with less water (pudding is a good option).
- Drink most of your fluid before 4 pm.
- Do not consume less than 120 ounces of fluids/day, it puts your health at risk and will affect your results on this program.
- If you are struggling and these suggestions are not working for you, talk with our medical team.

REMEMBER: The medications and suggestions listed in this packet are provided to ease or resolve common, mild symptoms.

Problems that persist or are severe should be evaluated by the medical staff at Positive Choice, your medical provider, the Urgent Care Clinic, or the Emergency Room.

Kaiser Permanente members can call 1-800-290-5000, from 7 A.M. to 7 P.M., seven days a week for appointments.

Non-Kaiser Permanente members should follow the medical protocol of their medical provider.

Travel

You may not travel out of the country while on meal replacements —No exceptions!

We need lab work completed from a U.S. laboratory and we need to be able to have you treated in a U.S. emergency room if needed.

If travel outside the U.S. becomes a necessity for you, speak with your counselor about how to transition back to food.

Travel within the United States is permitted.

Hunger

Most people will feel some hunger and fatigue the first several days on meal replacements. Some will feel mild fatigue and hunger for a week to two weeks. As you start burning predominately fat as your energy source you have a higher concentration of ketones in your blood stream which acts like a natural appetite suppressant.

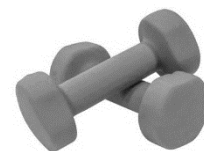
Speak with our medical team if hunger or fatigue continue. Tips for minimizing hunger:

- Consume all 5 of your meal replacements every day. If you miss one, double the next one.
- Space them out evenly. Have your first meal replacement within 1-2 hours upon waking and then every 3-4 hours. Do not go longer than 4 hours without one unless you are sleeping.
- Skipping meal replacements will slow weight loss and risk causing your body to metabolize muscle mass for fuel (which can damage your heart muscle and jeopardize your health).
- Eating foods that are not a part of your program can make you feel hungrier and affect ketosis (a metabolic process where the body burns fat for fuel and that keeps you from feeling hungry). It can then take several days to return to this state after eating.
- Too many artificial sweeteners, flavorings or caffeine can make you feel hungrier.

If you are following these recommendations and continue to feel hungry, please speak with your counselor or the medical team.

Exercise

Physical activity will help increase energy level, improve sleep, and



maintain muscle mass while you lose weight. Mild to moderate aerobic exercise and muscle strengthening with light weights are recommended. Helpful tips include:

- Go easy your first week and then gradually increase the intensity and/or duration of your exercise routine for the first several days on meal replacements as you may feel lightheaded or tired.
- Warm-up and cool-down periods that include stretching help avoid muscle cramping.
- A meal replacement taken 30 minutes prior to exercise helps avoid fatigue.
- If you are doing moderate to high amounts of exercise you may take a 6th meal replacement.
- Try the online exercise videos at [PositiveChoice.org/nutrition-and-fitness/exercise-videos](https://www.PositiveChoice.org/nutrition-and-fitness/exercise-videos), or visit the Positive Choice Integrative Wellness Center YOUTUBE channel. There are videos on cardio, yoga, simple, yoga, strength training you can do at home, exercise for seniors, etc. Videos are 5 minutes, 10-15 minutes, or up to 45 minutes. There is something there for every fitness level.
- If you want to increase your exercise level but feel tired or lightheaded, please talk with our medical staff so we can adjust your program.

Weight Loss

You may experience a significant weight loss the first week on meal replacements. Some of this weight is water loss (diuresis). This will normalize within the first month and you will notice patterns in your weight loss.

Weight loss varies day to day and depending on hydration it can vary by the hour. Choose one day/time of the week to weigh yourself or just weigh in at clinic visits. Avoid weighing often.

Skipping meal replacements, significant changes to your exercise, consuming less than recommended fluids, or eating foods that are not part of the program will slow or stop weight loss.

Hair loss

Some people (about 10%) experience temporary, mild to moderate hair loss as their body adjusts to the new, lower calorie intake and burning stored fat as a main fuel.

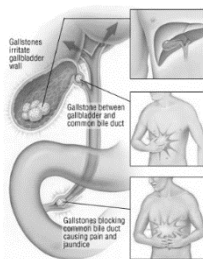
This phenomenon is called telogen effluvium and usually peaks around the third month after beginning meal replacements. If you experience hair loss during your weight loss phase, ask the medical team about adding another meal replacement to your daily routine. The added protein may stop the hair loss.

A healthy, balanced diet during the maintenance phase and beyond will help ensure regrowth of any hair lost during the weight loss phase.

Gallbladder Problems

Gallstones are correlated with a higher percentage of body fat, so there is a high likelihood that people enter our Medical Weight Programs with pre-existing gallstones. While a gallbladder attack is common during weight loss, in our programs it is uncommon while following our meal replacement plan. However, if you suddenly eat food that is not on the plan and the food contains a high amount of fat, it can cause a pre-existing gallstone to lodge in the ducts of your gallbladder and trigger a gallbladder attack.

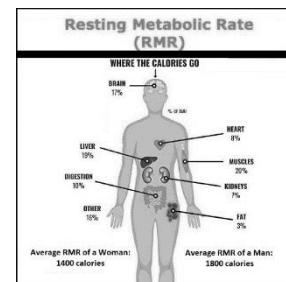
If you notice fever, nausea, and a pain in the upper right left abdominal area, contact your primary care physician to check for the presence of gallstones.



Metabolic Rate

Your body requires energy to carry out metabolic functions, i.e., breathing, heartbeat, digestion, functioning of the major organs, etc.

Metabolic rate is a measure of the amount of energy needed for this and is usually measured as calories/day. Two factors will affect metabolic rate in this program: calorie level and muscle mass.



When you begin meal replacements you will be dropping your caloric intake significantly. To a small degree your body will compensate by lowering your metabolic rate.

During the Preparing for Food (PFE) phases we gently increase your caloric intake which stimulates your metabolic rate to recover to normal levels (which are based on muscle mass.) Your metabolic rate will continue to adjust upwards for several months after you finish your meal replacements. It is for this reason we require a very structured 10 session Maintenance Program after you achieve your goal.

Metabolic rate is influenced by your muscle mass. Muscle is metabolically highly active tissue and requires more calories to maintain. As you lose weight it is natural to lose some muscle mass (because you are carrying around much less weight and do not need the muscle you once did.)

The SECA Body Composition test you had during your pre-program assessment provides a measure of your muscle mass. It is important to minimize how much muscle you lose during the weight loss phase by including some mild strengthening exercise each week. This will help keep your metabolic rate high and make weight maintenance easier. If you begin your weight loss with a below normal amount of muscle, you may want to consider working with a personal trainer to help increase muscle mass.

Our Weekly Group Goals

1. To assist you with significant weight loss in a safe, medically supervised program.
2. To explore the reasons why you overeat and to help you understand the role food plays in your life.
3. To develop skills and practice changes to your lifestyle that will support a healthy you.
4. To connect you to long-term support options.

This Program will assist you in the process of ... **Awareness and the Initiation of Action.**

Group Expectations

1. Our groups are highly interactive...you will be strongly encouraged to participate.
2. In the virtual group, we recommend you be seated in a private and quiet place, with your full attention and engagement to the group, and not doing other things.
3. In an in-person group, we recommend sitting in a different seat each week to give yourself the opportunity to get to know and work with all your group members.
4. Many meetings will include a roundtable discussion or smaller break-out groups.
5. Groups may include training in self-relaxation, mindfulness, gentle movement, or writing exercises.
6. All meetings will focus on helping you understand your relationship with food, eating, your health and your body.
7. Emotions are welcome ... it's o.k. to express sadness by crying or happiness by laughing, etc.
8. It is our intention to create a safe meeting place for you where you can express yourself freely, develop close bonds with your fellow group members, and be accepted.

Program Staff Responsibilities

1. Begin weekly groups on time.
2. Provide 30 minutes before group begins and 30 minutes after group ends for counselor consultations.
3. Offer a consistent day and time for weekly meetings (provided the group maintains at least 10 group members).
4. Provide product and medical supervision as indicated by individual program protocol.
5. Establish guidelines and teach methods for behavioral changes that will support a healthy lifestyle.
6. Provide informative educational materials.
7. Explain all assignments, answer questions, and offer positive feedback and encouragement for participants.
8. Offer weight maintenance groups after weight loss phase.
9. Provide information and literature on additional support opportunities.
10. Create and maintain a safe and supportive environment conducive to personal exploration, self-disclosure, and expression of feelings.
11. Facilitate and moderate group discussions, maintaining the best interests of the participants.

All information between you and your counselor is held to be strictly confidential unless:

1. You authorize a release of information by signed consent;
2. You present physical danger to yourself or others; or
3. Child or elderly person abuse is suspected.

Your counselor is required by law to inform potential victims and/or the authorities if he/she believes that you are in danger of hurting yourself or someone else and/or if there is reasonable suspicion that a child or an elderly person has been or is being abused or neglected.

Program History and Research —ACEs Study

The original Medical Director for the Positive Choice Weight Management Program, Dr. Vincent J. Felitti, was committed to finding out what the Program could do to enhance long-term success. He met with hundreds of weight program participants to identify root causes of chronic obesity. Below is a summary of what his research revealed:

What Does Not Appear to Cause Obesity

1. Being born overweight.
2. Poor metabolism.
3. Love of food.
4. Lack of nutrition-related knowledge.

What Appears to Cause Obesity

1. People's need to make themselves feel better with food.
2. People's need to feel safe: excess weight provides a protective benefit.

As a result of an extensive study comparing obese and slender middle-aged adults, Dr. Felitti found there were major differences in life experiences. People who have chronic problems with their weight were:

1. More likely to have experienced the loss of a parent in early childhood.
2. More likely to have grown up with an alcoholic parent.
3. More likely to have experienced sexual abuse.
4. More likely to have experienced physical abuse.
5. More likely to have suffered from chronic depression.
6. More likely to experience rage.
7. More likely to have sleep disturbances.
8. More likely to have experienced marital dysfunction,
9. More likely to feel fat is protective than someone who has always been thin.

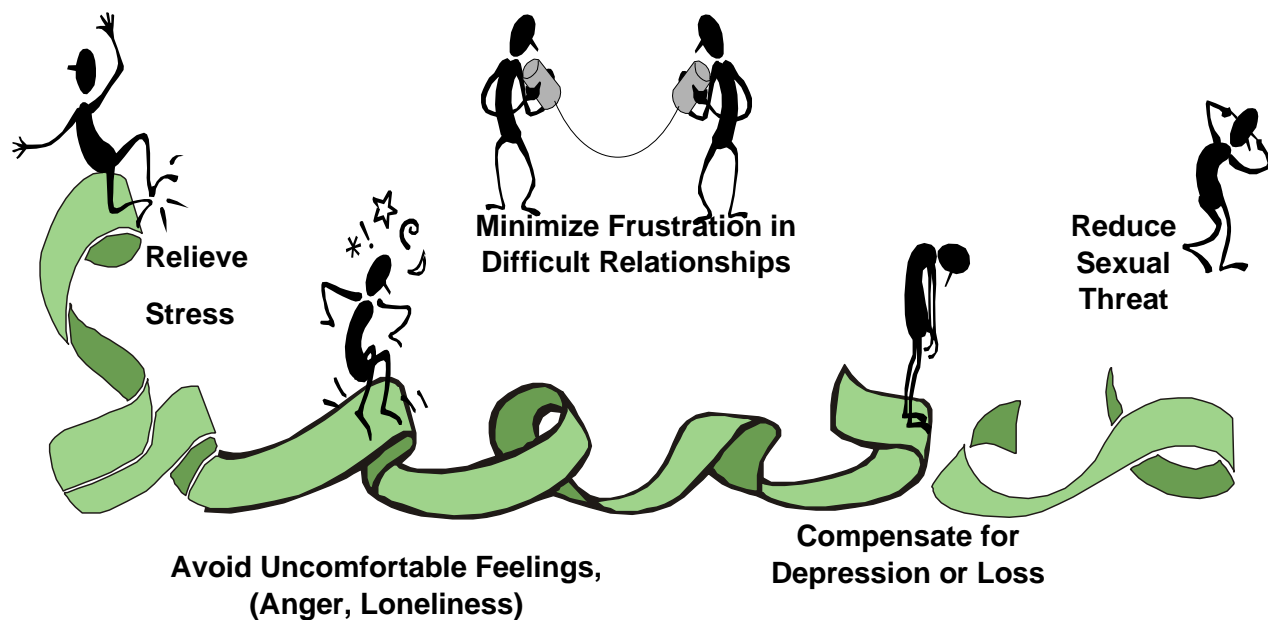
Overview of Statistics from Dr. Felitti's Comparison Study of Chronically Overweight Individuals

1. Early parental loss	48%
2. Parental alcohol use	40%
3. Sexual Abuse (mostly girls)	25%
4. Non-sexual Abuse (mostly boys)	29%
5. Chronic depression	57%
6. Rage reaction	12%
7. Sleep disturbance	46%
8. Fat is protective	25%
9. Marital dysfunction	54%

PEOPLE USE FOOD TO ...

Do you feel yourself turning to the refrigerator even when you are not hungry? Or, at times, eating completely out of control? Many people use food to relieve stress, to meet emotional needs, or to avoid uncomfortable feelings. The following continuum has been useful in helping people recognize some of their reasons for overeating.

Celebrate and Enhance Pleasure



The following books are recommended as good places to start to learn how to *make peace with food*: *When Food is Love* and *Feeding the Hungry Heart* by Geneen Roth, *Mothering Ourselves* by Evelyn S. Bassoff, and *The Family and Family Secrets* by John Bradshaw

Session 3: A New Approach

Weekly Check-In

In the spaces below, identify at least one example from the past week of the following experiences:

Success:

Challenge:

What I learned about myself from these experiences:

“For every positive change you make in your life, something else also changes for the better; it creates a chain reaction.”

-Leon Brown

Congratulations!

You’ve made it through the first week with the meal replacement plan.

Let’s review how things are going for you so far.

- What was the adjustment from food to the meal replacement plan like for you? How do you feel on the plan?
- Is there anything you learned about yourself from this past week that would be helpful to keep in mind for the weeks to come?

Reviewing Common Questions



What timing struggles would you like to troubleshoot?



How do you make the meal replacements taste better?



What did you do if you missed a meal replacement?



How did you deal with family or friends who pressured you to eat?

THE THREE D'S: DELAY, DISTRACT, DECIDE

Next week we will learn more about coping strategies. In the meantime, here is something to help you manage high urges to eat...

Delay 30 Minutes

This is the amount of time it takes for an urge to reduce in intensity so you can make decisions that are in your best interest and not out of habit or emotion.

The prefrontal cortex is the part of your brain that deals with decision-making and thinking. When we are experiencing high urges, our brain prioritizes energy towards our limbic system, which is the emotion center of the brain, and our thinking center goes "offline".

Distract

Make a list of 10 or more things that you could do to distract yourself.

- The activity needs to be engaging enough to hold your attention, but not be emotionally triggering.
- Avoid things that you used to do while eating (e.g. watching tv).
- Examples: gardening, walking the dog, doing a mindfulness activity, calling a close friend, going for a drive...

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

It is important to write out the list so that when urges are high, and the prefrontal cortex is "offline", you do not need to think. This will increase the likelihood of following through.

Decide

When the timer goes off, you get to decide what to do next.

- Maybe that means that the urge dissipated, and you can go about your day...
- Maybe that means that you were feeling true hunger (as opposed to psychological hunger) and need to have a meal replacement...
- Maybe that means the urge is still high and you need to try another distraction technique...

Something to think about...

What would you do differently this upcoming week considering what you learned during your first week on the program?

Session 4: Coping Strategies

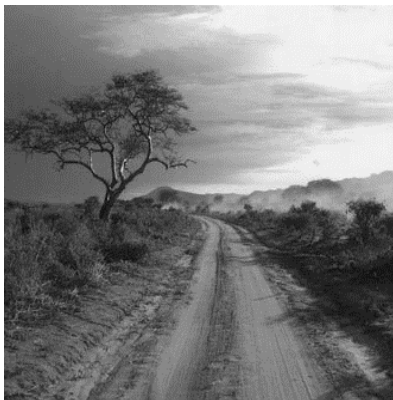
Weekly Check-In

In the spaces below, identify at least one example from the past week of the following experiences:

Success:

Challenge:

What I learned about myself from these experiences:



"We have two strategies for coping; the way of avoidance or the way of attention"

- Marilyn Ferguson

"Life is not the way it is supposed to be...it's the way it is.... the way we cope with it, is what makes the difference" – Anonymous

What is Coping?

Coping is what we do to manage responsibilities, problems, or difficulties that occur in our lives. Whether we use a helpful or harmful means to cope, our intention is always to try to take care of ourselves.

Eating as a means of Coping

As food and eating become a way to manage stressful emotions, deal with boredom, and fulfill needs, we are no longer exclusively eating when we are hungry.

How do you use food that is not based in hunger? I use food to...

Using eating to try to fix or “tape” or cover up what we are really feeling means that we aren’t truly taking care of our needs or the real problem we are experiencing.

Why learn new coping skills?

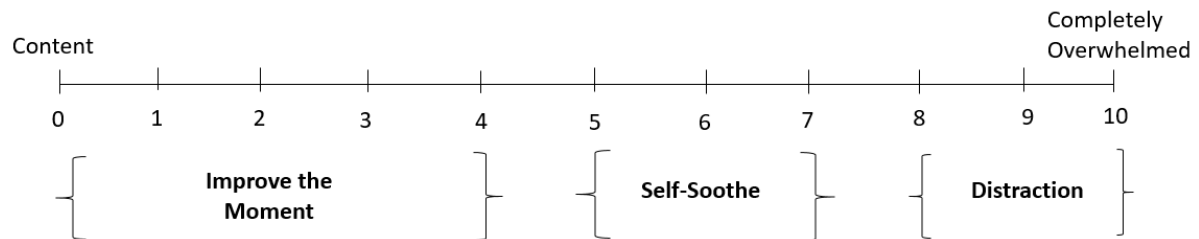
When we are in the habit of eating for reasons other than hunger, overeating becomes the primary coping skill we use to deal with uncomfortable situations. Over time our brain has learned that eating can make it easier to deal with stress, boredom, sadness, and more. So now, when we are stressed, our brain automatically sends a strong signal to eat and is soothing us when we do. Being on meal replacements takes away food and eating as a coping mechanism, which can create stress. We need to train the brain to find other ways to handle these situations that moves us toward our goal. It’s not easy since our brain likes to hold on to those old habits and patterns. Here are some tools that can help re-train our brain:

DISTRACTION	<p>Anything that occupies your attention to get your mind off the current moment.</p> <p>Think about the 3 Ds we discussed last week.</p> <ul style="list-style-type: none"> • Pros – Gives your mind a break, great for short term relief, great to get through a crisis. • Cons – can't do these for too long, they don't resolve underlying issues; unhealthy behaviors such as eating can also be distraction 	My Examples:
GROUNDING	<p>Mindfulness based activities.</p> <p>Using body and senses to focus on the current moment instead of stressful thoughts or feelings.</p> <ul style="list-style-type: none"> • Pros – helps slow or stop intense feelings or desire to escape. • Cons – sometimes it is uncomfortable to be in the present moment. 	My Examples:
THOUGHT CHALLENGE	<p>Replacing or challenging unhelpful thoughts.</p> <ul style="list-style-type: none"> • Pros – Can help shift long term, negative thinking patterns; helps put logic to emotions, promotes reality-based thinking that is helpful and positive. • Cons – The stronger the emotions, the harder this is to do. May need to do some distraction or grounding first. 	My Examples:
EMOTIONAL RELEASE	<p>Letting emotions out or expressing emotions.</p> <ul style="list-style-type: none"> • Pros – Great, we are not bottling up emotions to potentially unleash later. • Cons – Hard to do in every situation based on environment. May need to do distraction or grounding until an appropriate time. 	My Examples:
SELF-LOVE	<p>Showing ourselves care and love like we would another person.</p> <ul style="list-style-type: none"> • Pros – Become our own support and not use food to treat ourselves. • Cons – Sometimes this can be difficult to do and may require some practice. 	My Examples:
ACCESSING YOUR HIGHER SELF	<p>Doing things that get us out of our own problems and thinking about things that are bigger than ourselves.</p> <ul style="list-style-type: none"> • Pros – Reminds us that everyone struggles and that we can find purpose or meaning in other ways in our life, even during difficult times. • Cons – Focusing too much on others' problems can lead to avoiding focus on ourselves! 	My Examples:

How to choose which coping tool in the moment

Different coping tools are more effective than others depending on the situation and feelings. Learning when to choose certain coping tools is essential for an efficient use of our time, energy, and effort and to decrease additional anxiety, frustration, overwhelm, etc.

Use the following scale of emotional intensity to help you determine where to start with your coping choices!



When choosing a coping tool, ask yourself the following question: “How strong are my feelings right now?” This will tell you what category to start with.

Use as many coping tools from that category as you need until you shift down to the next category.

Keep using coping tools until you rate your feelings in the Improve the Moment category. This category helps us reduce or alleviate our issues, so we need to always be ending here on the scale!

Below are some ideas of coping tools for each category of the emotion scale:

- Distraction – focusing on something else, grounding, deep breathing, mindfulness practice
- Self-Soothe – finding activities that are soothing to the four senses of sight, smell, sound, and touch, thought challenges, self-love strategies, appropriate emotional release
- Improve the moment – skills or strategies that work towards alleviating or resolving your issues, including setting boundaries, assertive communication skills, planning, goal setting, creating a routine, gratitude practice, reaching out for support, journaling, etc.

Reminder!

Avoid overusing any one tool too often- anything done too often can eventually create new issues.

Something to think about...

What will help me use my coping skills toolbox this week?

Session 5: Exercise

Weekly Check-In

In the spaces below, identify at least one example from the past week of the following experiences:

Success:

Challenge:

What I learned about myself from these experiences:

"Exercise is a celebration of what your body can do. Not a punishment for what you ate." Anonymous

*"The difference between TRY and TRIUMPH...
is a little UMPH!" Marvin Phillips*



Myths and Facts of Exercise

Myth	Fact
You shouldn't exercise while on meal replacements.	Don't stop exercising to satisfy a diet! Instead, modify your diet to support your exercise.
Exercising will slow down weight loss.	Exercise accelerates fat loss and preserves muscle mass. You will see more results in inches lost rather than pounds on the scale.
You can't build muscle on a very low-calorie diet.	Numerous studies show that strength and resistance training can build muscle while in ketosis.



EXERCISE BENEFITS

- Sleep better
- Feel better
- Clothes fit better
- Better mood
- More energy
- Reduces stress and anxiety
- Improves memory
- Helps reduce risk for cardiovascular disease
- Reduces risk of osteoporosis
- Helps post-program weight maintenance
- Increases metabolism
- Builds muscle mass

Why Exercise?

Exercising on the Meal Replacements is good! It builds healthy habits and assists in weight maintenance after weight loss.

Muscle Tissue is a Very Beneficial Tissue

Resistance training builds muscle with exercise bands or weights. One pound of muscle burns 10 calories/day, while one pound of fat burns 3 calories/day. The more muscle you have, the more calories you burn!

Types of Exercise

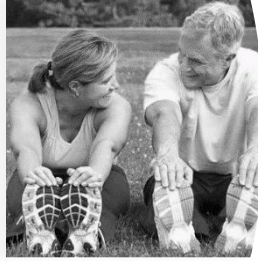
Cardiovascular/Aerobic

Rhythmic, continuous movement (walking, jogging, running, swimming, bike riding, stair-climbing, etc.)

- Ideally 3x per week or more.
- Intensity that challenges the heart and muscles.
- Working hard enough that you can talk, but not so hard that you can sing.
- Work up to maintaining intensity for 20 minutes. Then work on increasing time.
- Cardio Videos on positivechoice.org/exercise-videos
- Benefits of cardiovascular exercise:
 - Trains body to burn fat as fuel.
 - Increases heart's ability to transport oxygen and muscle's ability to use it.
 - Increases metabolic rate so more calories are burned both during and after the exercise.
 - Stress hormone cortisol is burned off, thereby reducing stress and reducing chances of responding to food triggers.

What are some different cardiovascular/aerobic exercises you can incorporate into your lifestyle?

Flexibility



- Increases range of motion of muscles and joints
- Decreases the risk of injury.
- Do after 5-10 minutes of a light warm-up or after a workout.
- Stretching on “cold” muscles can increase the risk for injury.
- Yoga/Stretching videos on positivechoice.org/exercise-videos

What are some different flexibility exercises you can incorporate into your lifestyle?

Strength/Resistance Training

- Muscle tissue is “calorically expensive” so the more you have the more calories you burn with every movement you make.
- Build muscle strength by progressively overloading your muscles with resistance.
- Effective forms of strength/resistance training include free weights, machines, stretch bands, and body weight exercises.
- Recommend 2 times per week on non-consecutive days for minimum of 20 minutes.
- Strength Training Videos on positivechoice.org/exercise-videos



What are some different strength/resistance exercises you can incorporate into your lifestyle?

Check Out the Free Exercise Videos on the Positive Choice Website!

There are a variety of different exercise videos available to you on the Positive Choice website at PositiveChoice.org.

Enjoy!

Exercising Safely While on Meal Replacements



Start slowly! If you are new to exercise, be sure to consult with a physician prior to engaging in physical activity.



Scale back your intensity by about half as a starting point, then increase in intensity as needed



Time your meal replacements! You can split your meal replacement both before or after a workout or take an extra meal replacement on vigorous workout days. Feeling sore after resistance training is normal. To build muscle you need to rest muscles for at least 48 hours before resistance training the same muscle group.



Feeling sore after resistance training is normal. To build muscle you need to **rest muscles for at least 48 hours** before resistance training the same muscle group.

Signs to Decrease Exercise Intensity or Frequency

- Persistent fatigue, feeling drained, lack of energy
- Inability to sleep despite fatigue
- Depression
- Decreased immunity (Increased number of colds)
- Recurring headaches
- Unexplained pain in muscles and joints
- Moodiness and irritability
- Extreme hunger- you may need to add a daily meal replacement to your plan. The medical staff can modify your program to support your exercise plan.

Tips for Starting a New Exercise Routine

- Choose activities you enjoy and have fun!
- Aim for variety in your exercise routine to prevent boredom.
- Start out slowly.
- Increase accountability and social enjoyment by joining an exercise class or group.
- Reinforce yourself each time you exercise (without food)

Questions:

What are your exercise goals?

What are your barriers to consistent exercise?

What strategies or small changes can help you manage these barriers?

How can you help yourself establish habits around exercise?

What types of movement activities do you enjoy? (alone/with others, gym/at home, solo/in a class)

What new activities can you try?

Something to think about....

What movement can you commit to for the next week? Be specific- how often/for how long.

Session 6: Stress and Stress Management

Weekly Check-In

In the spaces below, identify at least one example from the past week of the following experiences:

Success:

Challenge:

What I learned about myself from these experiences:

"It is not a daily increase, but a daily decrease. Hack away at the inessentials."
- Bruce Lee

"It's not stress that kills us; it is our reaction to it." - Hans Selye

"You cannot always control what goes on outside. But you can always control what goes on inside." - Wayne Dyer

What is Stress?

Stress is when something happens, and it feels too much for us to handle. How we view events determines the level of stress we experience about them.

External vs. Internal Stress

External stress is caused by things happening to us and around us:

- Examples: Traffic, work, pandemics, natural disasters

Name some of your external stressors:

Internal stress is caused by the thoughts and feelings we have about things happening.

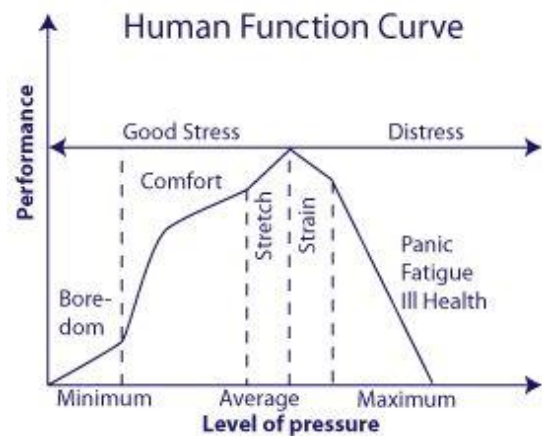
- Examples: Overthinking about something someone said

Name some of your internal stressors:

The Balance of Stress

Our ability to function in life depends on our level of stress. Some stress is helpful and provides the motivation to get us going. Please reference the Yerkes-Dodson Principle in the graph below. Your threshold is unique to you!

- Too little stress and we become bored
- Too much stress and we can experience panic, fatigue, or ill health



How Does Stress Affect Health?

When our stress reaction (fight/flight/freeze) becomes activated, changes are initiated in our sympathetic nervous system (pupils dilate, perspiration, lungs expand, blood flow increases to muscles, etc.)

Our body is only designed to physically endure this activated mode for a very brief amount of time (to fight off or flee from the threat). Nowadays, it's common to live a more stressful lifestyle and our body may be forced to remain in this mode far longer than it is physically able to endure. This is called chronic stress and can lead to eventual exhaustion and break down.

Cortisol, the body's main stress hormone, acts as a part of our body's alarm system. Excess cortisol can lead to anxiety, depression, headaches, heart disease, memory and concentration problems, digestion issues, rapid weight gain, increase in cravings, and sleep disturbance.

Personal Signs of Stress—Please circle those that you relate to most:

Changes in Behavior <ul style="list-style-type: none">• Problems sleeping• Overeating or bingeing• Excessive drinking or using drugs• Changes in sexual desire• A strong need to get away	Changes in Thoughts (difficulties with) <ul style="list-style-type: none">• Focusing or concentrating• Remembering things• Thinking positively• Obsessing over things
Changes in feelings (I feel...) <ul style="list-style-type: none">• Irritable• Anxious• Worried• Sad or melancholic• Tense• Angry• Helpless• Hopeless• Depressed	Changes in physical health/bodily functions <ul style="list-style-type: none">• Backaches or neckaches• Muscular tension• Nervous stomach• Other digestive problems• Breathing problems• Frequent urination or urge to urinate• Chronic tiredness or fatigue• Dizziness

What are your most common signs of personal stress?

Eating as a means of stress relief

There is a reason we may eat to relieve stress, because it works! Eating can be an escape from when we feel overwhelmed, and it can numb uncomfortable feelings we'd rather not feel.

If food is associated with pleasure, the pleasure centers in our brain are stimulated, creating a positive effect. The pleasure or relief from eating food is short-lived and eventually produces long-term discomfort. Finding other ways to manage stress without eating is important for long-term success.

How do we know what to stress over? (reference *Maximize Your Body Potential* for additional information)

- When the stress is aggravated or caused by your perception – use your toolbox of skills
- When stress is caused by life altering events like natural disasters, pandemics, loss of a loved one, etc., evaluate your options for coping...
 - The degree to which the event is potentially harmful, threatening, or challenging –then the more stress we feel
 - The more options you think you have for coping - then typically the less stressed you feel (reference your toolbox we created!)
 - The more adaptive coping strategies you use to deal with the event, the less stress you experience later. (i.e., using food may cause more stress later due to feeling guilty.)

Stress can accumulate

Think of your ability to handle stress like a big cup and the stressful events are like liquid that fills up the cup. If we keep pouring into the cup and do not pour anything out, the cup will eventually overflow.

You may not be able to solve everything that causes you stress. However, with your tools, you can pour out some of the liquid in your cup, so it doesn't overflow.

Two important questions for effective stress management...

- What small changes can you make to your lifestyle to produce less stress for yourself?
(Examples include setting boundaries, making schedules, improving sleep hygiene, ensuring adequate nutrition, incorporating more self-care activities, connecting with others, etc.)

- What coping skills can you use to help alleviate or reduce stress when it comes up?

Something to think about...

Choose one focus for the week:

One small change I can make to my lifestyle to produce less stress is...

One new coping skill I can use to manage my stress is...

Session 7: Mindfulness

Weekly Check-In

In the spaces below, identify at least one example from the past week of the following experiences:

Success:

Challenge:

What I learned about myself from these experiences:

"The mind is everything. What you think you become."

Buddha

"Few of us ever live in the present. We are forever anticipating what is to come or remembering what has gone."

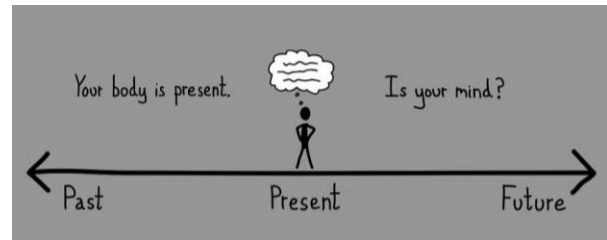
Louis L'Amour

"Between stimulus and response there is a space. In that space is our power to choose our response. In our response lies our growth and our freedom."

Victor Frankl

What is Mindfulness?

- Psychological state of awareness
- “Mindfulness means paying attention in a particular way...
 - on purpose,
 - in the present moment,
 - and nonjudgmentally.”
 – Jon Kabat-Zinn



What Mindfulness is not...

Mindfulness is...

Mind-FULL	Mindless	Mindful is
Over-analyzing Rumination Judgment Preoccupied Daydreaming Multi-tasking	Autopilot Unaware Distracted Forgetful Carelessness Clumsiness	Aware Present Neutral Flexible Conscious Curious

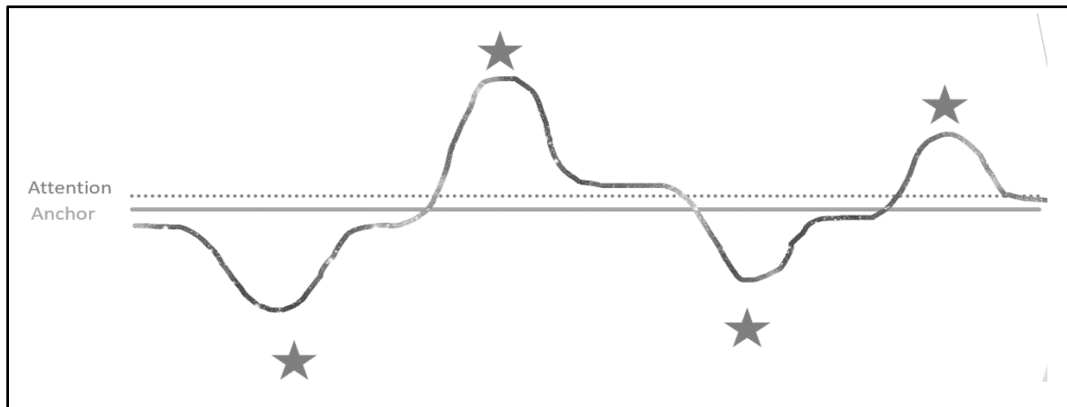
Why practice mindfulness?

- Be more present for your life
- Prevent living on autopilot
- Reduce the influence of unhelpful thoughts and beliefs
- Being more calm, focused, resilient
- Less physical stress on the body
- Reduce anxiety and depression
- Less acting out of habit / more out of choice
- Enhance sleep
- Improve communication with others

How to Practice Mindfulness

1. Choose an anchor in the present moment
2. Bring your attention to this anchor
3. Get distracted
4. Notice it
5. Bring attention back
6. Repeat

Watch for the Magic Moment!



- The expectation of your attention is represented by the dotted line.
- The wobbly line represents your actual attention pattern.
- The stars represent you bringing your attention back to the anchor. These are the Magic Moments!
- It is a good and expected thing to lose attention and bring your attention back to the anchor. This gives you the opportunity to practice starting over with grace and self-compassion!

Mindfulness practice can help if you suffer from:

- job, family, or personal stress
- excessive worry, anxiety, or panic
- headaches
- depression
- addiction issues
- disordered eating
- chronic pain or fatigue
- fibromyalgia
- irritable bowel syndrome
- heart disease, high blood pressure
- sleep disturbances
- grief and loss
- or if you simply feel your life is “out of control” or “not in balance”

Through Mindfulness you will learn to:

- recognize your signs of stress
- feel your feelings without having to change them
- communicate more effectively
- understand how thoughts can increase or decrease stress
- manage your stress in the moment
- build self-confidence

Open and Closed Attention

We can practice how we choose to pay attention to the current moment.

Open Attention – opening our awareness to whatever comes into focus.

- Things you can notice include: thoughts, emotions, body sensations, or things that come into your vision
- Anchor becomes noticing

Closed Attention – focusing on an anchor and working towards letting distractions go

Questions:

What are your initial thoughts about mindfulness?

What would keep you from practicing mindfulness?

How do you think practicing mindfulness can help you with weight maintenance?

Let's Practice!

Short Mindfulness Activities (use the space below the activity to describe the activity):

- 54321 Ground <https://theblissfulmind.com/grounding-technique/>
- 4x4 breath <https://blog.zencare.co/square-breathing/>
- Finger Tracing <https://www.youtube.com/watch?v=a41YoeCUDuw>
- Any additional short mindfulness activities?

Long Mindfulness Activities (use the space below the activity to describe the activity):

- Body Scan
- Mindful Eating
- Breath Awareness
- Guided Meditation
- Any additional long mindfulness activities?

Mindfulness Practice Questions:

What was the experience of practicing different mindfulness activities like for you?

Did you have any difficulty staying with any of the exercises?

What do you miss out on when you're trapped inside your mind?

Mindfulness Apps:

- Headspace
- OMM
- Calm
- Insight Timer
- Simple Habit
- Sanvello

Something to think about...

What amount of time and time of day could you commit to practicing mindfulness?

Session 8: Choices and Taking Responsibility

Weekly Check-In

In the spaces below, identify at least one example from the past week of the following experiences:

Success:

Challenge:

What I learned about myself from these experiences:

*"The only reality you have to stay stuck in is
the reality you choose to stay stuck in."*

-Unknown



Story Time!

Consider the following short stories and make a note about why the main character of each makes the choices that they do.

Polar Bear Story

At the San Diego Zoo an interesting phenomenon was noticed about a polar bear shortly after the animal was released into her spacious new enclosure. While the bear's quarters were easily the size of basketball court, the bear spent her days pacing back and forth in a 12-foot path.



When the zookeeper assigned to this animal investigated the possible causes of this atypical behavior, he discovered two probable answers, both startling. During the bear's transfer from her previous home to San Diego, she had spent a week or so in a train's boxcar confined in a 12x12 long cage. Upon her arrival in San Diego, the bear was placed in quarantine for 120 days. The quarantine enclosure measured 12x12 ft. It seems the bear had adapted to her boxcar and quarantine boundaries so completely that even when roaming more freely became possible, the bear continued to live her life within the constraints of a small cage that no longer existed.

The polar bear in this story provides an example of the following choices:

- Comfort zones
- Autopilot
- Continuing with behaviors because we are accustomed to them

Pot Roast Story

A young girl asked her mother why she cut the ends off roasts before cooking them. The mother replied, "Because that's the way my mother prepared her roasts, and they were always delicious."



The daughter persisted, "Why did grandma do it that way?" The mother answered honestly, "I don't know. Let's call grandma and ask her."

When the question was posed to the grandmother, she was puzzled, "Cut the end off a roast before cooking it? Oh my gosh, that's right. I did do that years ago because the pot I had was so small, a whole roast wouldn't fit."

The mother character in this story provides an example of the following choices:

- Hanging onto certain behaviors although they are no longer useful to us
- Never questioning behaviors as helpful or hurtful



Which story or character could you personally relate to most and why?

How do these stories relate to your eating habits?

What does it mean to take responsibility for my behaviors?

1. Learning what drives my choices (as the stories highlight).
2. Taking responsibility for my behaviors in a way that better supports my health.
3. Most of life is outside of my control, but I can always take control of how I respond to a situation.

Our past experiences play a large role in determining how we react in a situation. If we want to change our behavior to get a different outcome, we need to learn more about why we do what we do and take responsibility for things that may have become automatic.

Exercise

Step 1: List five things in my life that I enjoy:

1. _____
2. _____
3. _____
4. _____
5. _____

Step 2: List five things in my life that I dislike:

1. _____
2. _____
3. _____
4. _____
5. _____

Step 3: Circle the one thing from each list that creates the greatest challenge for me in terms of managing my weight.

Step 4: With the breakout group, share how the circled items from steps 1 and 2 impact my ability to manage my weight.

Write down ideas for alternatives to eating in response to the item circled in step 1.

1. _____
2. _____
3. _____
4. _____
5. _____

Write down ideas for ways of changing the item circled in step 2 so that my weight efforts are better supported.

1. _____
2. _____
3. _____
4. _____
5. _____

Step 5: Choose one idea from my alternatives listed above and write down one small change or step I am committed to making for myself this week. (Wait to fill this in until after completing Brainstorming Alternative Choices with the group.)

Reminder!

Making choices that create an identity that feels good will take practice. Don't give up on yourself!

Something to think about...

One small behavior change I will commit to making for myself this week is:

Session 9: Thoughts and Changing Self-Talk

Weekly Check-In

In the spaces below, identify at least one example from the past week of the following experiences:

Success:

Challenge:

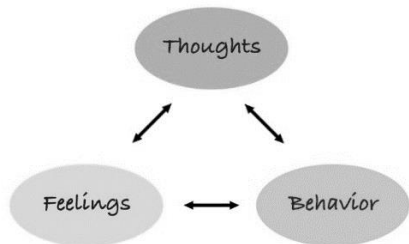
What I learned about myself from these experiences:

*"You have been criticizing yourself for years and it hasn't worked. Try approving of yourself and see what happens."
-Louise Hay*



Importance of Thoughts and Self-Talk

Self-talk is the way we talk to ourselves about ourselves, others, and the world. We develop patterns of thoughts that, over time, form our belief systems and experiences. These resulting belief systems influence how we experience future situations, as well as how we choose to react to them. This directly links our self-talk with our behaviors, so if we want to change our behaviors, we need to evaluate the thought patterns at their root! Self-talk becomes self-fulfilling prophecy.



Impact of Negative Self-Talk

Brain scans indicate that chronic negative self-talk causes brain structures (important for emotion regulation, motivation, and interpersonal relations) to atrophy. When brain structures decrease in size, they also decrease in their ability to function appropriately. After practicing reframing negative self-talk to more positive self-talk, these brain areas have shown to recover to normal functioning.

Thinking Traps

There are common irrational thinking patterns (thinking traps) that we all experience at times. However, when frequently experienced, they lead to negative self-esteem, an increase in uncomfortable emotions, and compulsive or habitual behaviors (eating, drinking, drugs, gambling, procrastination, etc.) Let's review some of these common thinking traps!

Common Thinking Traps

Magnification/Minimization

Exaggerating the importance of problems or minimizing desirable qualities.

"I've only lost 30 lbs., I thought I would have lost 40."

Emotional Reasoning

Assuming emotions reflect reality. *"I feel guilty, I must be an awful person."*

Should Statements

Telling yourself that things should or shouldn't be a certain way.

"I shouldn't have a negative body image now that I've lost weight."

Labeling

Labeling yourself or an event based on all or nothing thinking.

Instead of saying, *"I made a mistake"* you say, *"I am a loser."*

Personalization and Blame

Holding yourself personally responsible, or blaming others, for events that are out of your control.

"My boss seemed mad when she got into work, I must have done something wrong."



All-or-Nothing Thinking

Thinking in terms of absolutes, or extremes, black/white, success/failure, good/bad.

"I ended up eating a salad at dinner instead of my meal replacements, I completely failed this week."

Over-Generalization

Viewing a single event as a never-ending pattern

*"I ate a piece of cake; I will **never** lose weight."*

Mental Filter

Focusing on one single detail and dwelling on it.

"I didn't do well this week, I missed one of my workouts."

Discounting the Positive

Rejecting positive experiences because they don't count.

"I only lost a pound this week."

Jumping to Conclusions

Interpreting things as negative when there are little facts to support; Mind reading or fortune telling.

"My coworker complemented my weight loss; they must have thought I was so fat."

What are your most common thinking traps?

What feelings and behaviors are triggered by these traps?

Changing Self-Talk

Three key components to changing self-talk include:

- Be aware of your self-talk
- Purposefully choose more helpful thoughts
- Repeat, repeat, repeat; re-program yourself

According to Dr. Rick Hanson, Ph.D., neuropsychologist, and author of several books including *Hardwiring Happiness*, "our brains are like Velcro for negative experiences and Teflon for positive ones." Negative experiences get hardwired in our brains more easily than positive ones because of the many neurons that fire during negative events, "neurons that fire together, wire together" he says. He cites research showing it is possible to change our brains, or rewire our brains for greater happiness, peace, and well-being. For positive experiences to store in our long-term memory we can purposefully focus on them for a dozen or more seconds to help them move from short-term memory to long-term storage.

Exercise

One helpful or positive thing I say to myself regarding my health goals is:

One unhelpful or negative thing I say to myself regarding my health goals is:

Next, we're going to explore what influence our thoughts have on our feelings, behaviors, and results. Usually, negative thoughts lead to negative feelings and behaviors that result in detriments and negative consequences. Alternatively, neutral or positive thoughts lead to positive feelings and behaviors that typically align more with our goals, resulting in positive consequences for us! The following examples highlight the difference in outcomes for feelings, behaviors, and results for both negative and positive thoughts:

Negative Thought Example

Circumstance: Trying to eat healthier

Thought: "My nutrition plan is too restrictive."

Feeling: Deprived and frustrated.

Behavior: Eating a whole plate of cookies or other unhealthy coping strategy.

Result: Upset with yourself, stomachache, ashamed, disappointed.
(could be another thought, feeling, action, and/or body sensation)

Positive Thought Example

Circumstance: Trying to eat healthier

Thought: "I'm encouraged by the positive changes I've seen so far and I'm looking forward to even more."

Feeling: Inspired and hopeful.

Behavior: Reaching for a healthy snack (or meal replacement) instead of cookies, or engaging in a wellness activity.

Result: Empowered, proud about sticking to plan.
(could be another thought, feeling, action, and/or body sensation)

Exercise

Insert YOUR negative thought from your answer above to insert into the prompt below. Then, identify some of the feelings, behaviors, and results of that thought.

Circumstance: _____

Thought: _____

Feelings: _____

Behavior: _____

Results (could be another thought, feeling, action, and/or body sensation): _____

Next, consider your negative thought from above and change it to be a more positive version of that thought. Then, insert your positive thought into the same prompt and identify the feelings, behaviors, and results of your new thought!

Circumstance: _____

Thought: _____

Feelings: _____

Behavior: _____

Results (could be another thought, feeling, action, and/or body sensation): _____

What differences did you notice in your feelings, behaviors, and results between your negative and positive thoughts?

If you had more positive self-talk, what do you imagine would change in your life?

Remember to repeat, repeat, repeat your positive thoughts every day! This important step will help your positive thoughts eventually replace your negative self-talk and influence more positive feelings, behaviors, and results.

Something to think about...

My new positive thought I will tell myself this week is:

Session 10: Emotions

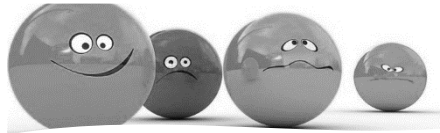
Weekly Check-In

In the spaces below, identify at least one example from the past week of the following experiences:

Success:

Challenge:

What I learned about myself from these experiences:



"One ought to hold on to one's heart; for if one lets it go, one soon loses control of the mind too."

- Friedrich Nietzsche

"Food is the most widely abused anti-anxiety drug in America, and exercise is the most potent and underutilized antidepressant."

-Bill Phillips

What are emotions?

Emotions are feelings and sensations that are triggered by thoughts or other things in our environment. They provide information about how we are experiencing things around us.

Emotions are part of a healthy, human experience.

“Emotions last 90 seconds. It is our stories about the events that can prolong the feelings,”
neuroscientist Jill Bolte Taylor, Ph.D.

Take this example... I stub my toe; I automatically feel pain. What happens next...?

- I could yell at those around me, trying to find someone to blame for putting that chair in my way.
- I could tell myself for the next hour how stupid I am for not looking out for the chair.
- Or I could look at the source of the pain and tend to any injuries that may be present.

It is your perception of events and your behaviors afterwards that influence your emotions moving forward.

How do feelings influence your eating behaviors?

- Eating to cope with emotions?
- Eating to celebrate?
- Eating to self-soothe when feeling low?
- Using feelings as an excuse to not take care of yourself?
- Eating to get rid of the physical discomfort of an emotion?

Common Emotions

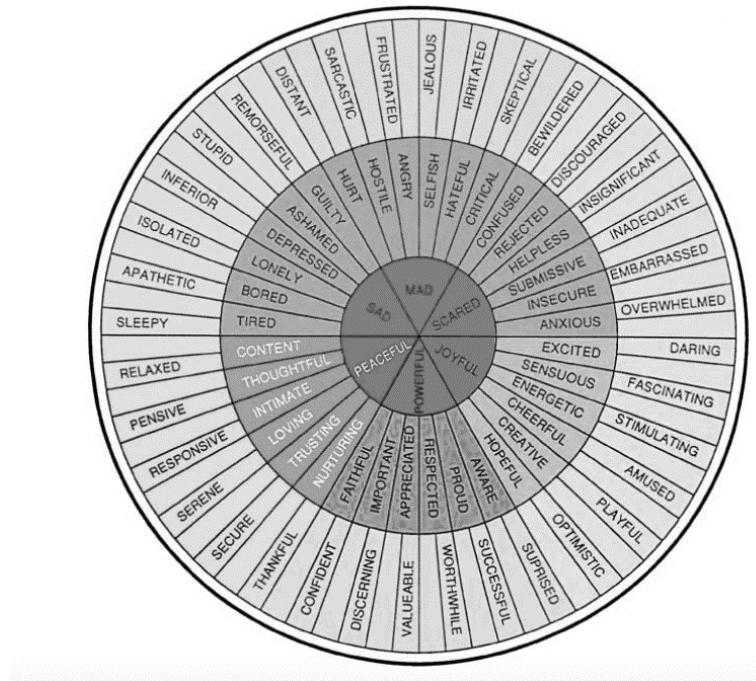
Write out next to each emotion what it feels like to experience feel that emotion (including body sensations, thoughts, and behaviors).

- Fear-
- Sadness-
- Happiness-
- Shame-
- Love-
- Anger-
- Joy-
- Loneliness-

There are many more emotions! You can use the feelings wheel as a tool to help identify your emotions.

The inner wheel = 6 core emotions – sad, mad, scared, joyful, peaceful, and powerful.

The outer wheels define more specific emotions. Concept by Dr Gloria Wilcox



Learning to Identify Emotions

- Notice the thoughts that occur when having the emotion. Example: "I am no good" when I feel shame.
- Notice body sensations that occur when having the emotion. Examples: Sweaty palms when nervous, or a pit in the stomach when guilty

What is the difference between thoughts and emotions and feelings?

When/what/from whom did I learn about emotions growing up?

What was I taught or modeled about expressing emotions growing up? Were certain emotions considered acceptable and others unacceptable?

Mindfulness Practice for Identifying Emotions:

- Get comfortable.
- Take a few deep breaths.
- Become aware of emotions in this moment.
- Label the emotion. (calm, angry, ...)
- Notice the feelings without judgement.
- Continue relaxed breathing.
- Pay attention to sensations in your body while becoming aware of the emotion.
- Imagine your breath going to those areas of the body. The tension may dissipate, or it may not, no right or wrong way to feel.
- Now pay attention to thoughts that are present with the feelings and sensations.
- Notice the thoughts without judgement and label them as just a thought.
- Take a few more deep breaths and come back to the room.

Reflection:

What was it like connecting with your emotions?

Did you have difficulty identifying your feelings or the body sensations the feelings created?

Emotion Regulation Skills (from *Maximize Your Body Potential*)

Emotion regulation is the ability to manage and influence your emotions.

- Such as rethinking a challenging situation to reduce anger or anxiety, hiding visible signs of sadness or fear, or focusing on reasons to feel happy or calm.

Distress Tolerance is a person's ability to tolerate and deal effectively with uncomfortable emotions as they arise.

- We discussed distress tolerance skills in our stress management lesson in week 6.

Both are necessary tools to manage emotions (pleasant and unpleasant) as they arise in our lives. Both tools also have mindfulness as a central tool.

Use these emotional regulation skills to help manage emotions when they come up:

1. Notice and label the emotion
2. Identify obstacles to emotional change, what is the advantage of not changing
3. Reduce vulnerability to stress
4. Change your circumstances or change your attitude
5. Increase positive emotional experiences
6. Increase mindfulness of current emotions
7. Take opposite action
8. Apply distress tolerance skills

Reflection:

Write about a time when you were able to utilize any of these emotion regulation skills. How did it go? What did you learn?

Something to think about...

How have your emotions influenced your health goals over the past week?

Session 11: Needs

Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

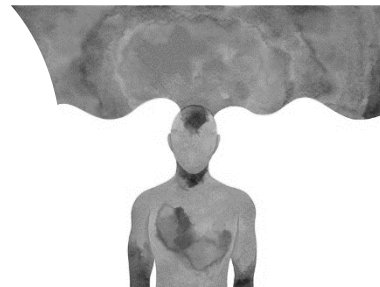
Challenge:

What I learned about myself from these experiences:

“You can never get enough of something you don’t truly need.”

Unknown

“You aren't alive if you aren't in need.” — Henry Cloud



What Are My Needs?

As living beings, we all have two general categories of needs - physical and emotional. All of our needs are necessary for health and wellness, and not knowing how to satisfy them appropriately leads to impaired health and, in extreme situations, death.

Physical needs consist of air, food, water, shelter, sleep, and physical movement and are necessary for physical health.

Emotional needs are much harder to list completely. Some examples include: understanding, acceptance, security, excitement, personal growth, achievement, meaning, purpose, challenge, control, belonging, respect, fun, joy, humor, self-expression, inspiration, and many more. They are necessary for mental health.

Physical needs are understood virtually by everyone; you satisfy them or you die. Emotional needs are identified explicitly far less and are often not successfully met or satisfied. This translates into a less fulfilling life, not living to our full potential, and often creates unwanted conflict and habits that damage health and wellness.

Why are emotional needs so much harder to identify and satisfy?

- There are many of them.
- They are subjective- we define our emotional needs uniquely from others.
- They are more emotionally vulnerable to recognize and express than physical needs.
- Might not have learned how to or weren't allowed to express them earlier on in life.

Meeting Needs Successfully vs. Unsuccessfully

When you use a physical means (like food) to satisfy an unmet emotional need (ex. connection), the need remains unmet and you can begin overindulging in the unsuccessful means. This becomes your compulsive eating habit!

To meet our needs successfully, one must consider:

- What is the unmet need (physical or emotional)?
- What physical or emotional strategy would be an appropriate means to satisfy the need?

We must match the means with the need for a true sense of fulfillment.

Examples:

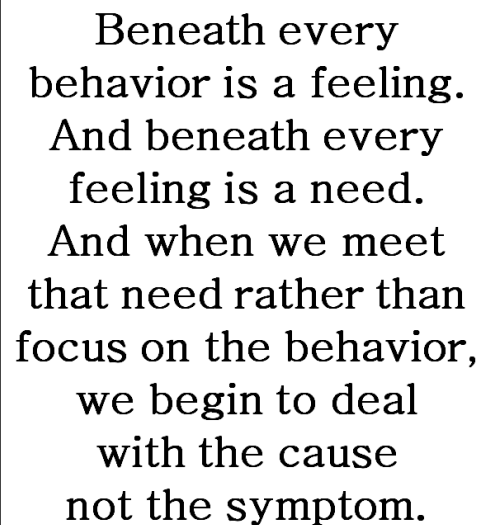
- Physical need of hunger specifically requires the physical means of food.
- Emotional need of connection specifically requires the emotional means of interaction.

Why is this Important?

When we focus on changing a behavior at the behavior level, we might experience temporary change, but not permanent change.

Needs are at the root of why we engage in our behaviors, so identifying our needs is key to knowing which behaviors to choose instead, resulting in permanent behavior change once the need is appropriately satisfied.

Tip: Our feelings are cues for unmet needs. Identifying an emotion/physical feeling can help you figure out which need/needs are unmet!



Beneath every
behavior is a feeling.
And beneath every
feeling is a need.
And when we meet
that need rather than
focus on the behavior,
we begin to deal
with the cause
not the symptom.

Exercise

Below is a list of common psychological needs that have been identified to be important for psychological health and happiness. Go through the list and read each need. Circle each need that you feel is important to you. There is no minimum or maximum number of needs that you have to identify, so circle as many that apply to you. If you feel a need has been missed, make sure to add it to the list!



acceptance	friendship	wisdom	safety
empowerment	power	appreciation	competence
to be noticed	trust	help	intimacy
stability	affection	recognition	satisfaction
to be accepting	freedom	to feel worthy	to be conscientious
family	privacy	approval	interests
openness	understanding	to be helpful	security
status	affiliation	relationships	confidence
accomplishment	free time	attention	knowledge
focus	to be productive	honesty	self-actualization
optimism	to be understood	relaxation	humor
success	aliveness	autonomy	to be listened to
achievement	fulfillment	to feel important	self-esteem
forgiveness	protection	reputation	to develop
order	to feel useful	belonging	love
support	amusement	to feel in control	significance
acknowledgement	happiness	respect	dominance
to be forgiving	to feel proud	to feel capable	to be loving
personal growth	to feel valued	to be included	spirituality
to be treated fairly	to be appreciated	responsibility	education
admiration	to be heard	challenge	to be needed
	reassurance	independence	spontaneity

Next, we need to define what our needs mean to us, as well as how we can work to satisfy them. It is important to define each need because people can vary in what a need means to them. Furthermore, once you have defined your needs, it will help you find new ways to satisfy those needs as you work toward your health goals.

1. Need:

Definition: What does this need mean to me?

What behavior can I engage in to satisfy this need?

2. Need:

Definition: What does this need mean to me?

What behavior can I engage in to satisfy this need?

3. Need:

Definition: What does this need mean to me?

What behavior can I engage in to satisfy this need?

Something to think about...

One new behavior I can use in place of food to satisfy my needs this week is:

Session 12: Habits

Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

Challenge:

What I learned about myself from these experiences:

*"You leave old habits behind by starting out with the thought,
'I release the need for this in my life.'"*

Wayne Dyer

*"I have learned that champions aren't just born; champions can be made
when they embrace and commit to life-changing positive habits."*

Lewis Howes

Why do brains build habits?

- Save energy and time
- Novel experiences create a lot of brain activity, so creating habits reduces brain activity to be able to focus on other things.
- To prevent us from having to re-examine, re-explore, and re-decide everything in our world.

Habits are things that we do or think automatically because they were repeated so many times. There are probably some habits you'd like to break and new ones you'd like to build. But this can be a challenge. Why? Your brain loves routine! The brain likes to have things stay the same so it can focus on new things that happen. Habits reduce the work and the number of decisions that need to be made all day long. This is why changing a habit can be extra challenging.

Why are habits important?

- They play a big role in what you think and do on a regular basis.
- In order to make changes and maintain them, you will need to develop habits that support that change.
- What you do regularly determines the results you are going to get. So...how do you build a habit?

How do habits work?

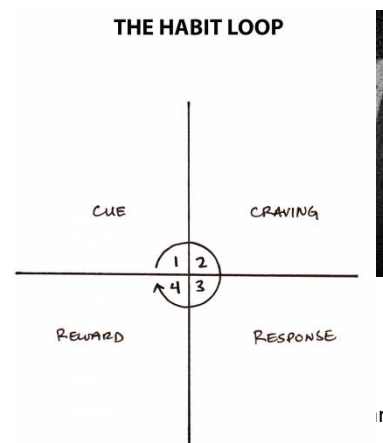
Habits are a feedback loop that drives motivation to engage in behaviors. Each time you go through this cycle, your brain evaluates if the behavior was helpful at solving a problem and will then adjust or continue doing the same thing.

1st Step – Cue

- Reminds the brain to initiate a behavior
- Can be a memory, feeling, thought, location, or one of your 5 senses (touch, taste, smell, sight, or sound)
- Often paired with a past experience
- Example – Coming home from a long, stressful day at work after the commute home

2nd Step – Cravings

- The reason or motivation to do the behavior
- It's about the feeling or change that you get from the habit, not the habit itself
- The brain releases dopamine, which is a neurochemical that drives our brain's reward circuit and drives us to seek out a means to give us a sense of pleasure (to feel good or to feel nothing)
- Example – You want to relax and relieve your stress.



3rd Step – Response

- Actual habit you perform
- Behavior or action is performed based on how motivated you are to perform the behavior and how much friction it causes to engage in the behavior
- Response drives reward
- Example – You eat a bag of chips while watching tv.

4th Step – Reward

- End goal of the habit loop
 - Rewards close the feedback loop
 - Can provide a satisfying or pleasant feeling or remove an unwanted feeling
 - There are short and long-term rewards for habits.
- Two purposes:
 - Satisfy us
 - Teach us what is worth remembering for the future
- If a behavior is insufficient in any area, then it won't become a habit.
 - If the first 3 are not present, a behavior will not happen.
 - If all 4 are not present, a behavior will not be repeated.
 - Example – You satisfy your craving to relieve stress and relax. Eating food while watching tv become associated with relieving stress and relaxing.

This feedback loop allows for an individual to create automatic habits that can save time and energy. Each habit is created to solve a problem.

For example – wanting to feel less stressed can lead to eating sweets

Therefore, the habit loop can be separated into the **problem phase** and the **solution phase**.

Problem Phase

Cue: You smell a doughnut shop as you walk down the street near your office.

Craving: You begin to crave a doughnut.

Solution Phase

Response: You buy a doughnut and eat it.

Reward: You satisfy your craving to eat a doughnut. Buying a doughnut becomes associated with walking down the street near your office.

The habit of buying a doughnut as you're walking to work is now created and enforced!

Fill out following problem and solution phase with a current habit:

- Cue:
- Craving:
- Response:
- Reward:

How Can Habits Lead to Addiction?

Addiction is defined as a compulsive psychological need for, and continued use of, a substance or a certain behavior despite negative consequences to multiple areas of life. A behavior changes from occasional use to an addiction by increasing the intensity and frequency of using the behavior more often and to a greater extent. We can have addictions to certain substances (e.g. alcohol, drugs) or process addictions to certain behaviors (e.g. eating, gambling, working, exercising). Any behavior done too often can become detrimental to your physical and mental health.

Certain behaviors (like eating foods that are sweet, salty, or fatty) can trigger a release of dopamine, the “pleasure neurotransmitter” which produces a powerful response in the brain. This response can code your brain as that behavior being the “only way to achieve relief.” Any behavior done too often can become detrimental to your physical and mental health.

We offer a 12-week program called **Solutions** that you can take as a continuing option in this program. The **Solutions** class specifically deals with the addiction cycle as it relates to food and eating behaviors.

If you are struggling with either type of addiction, please seek out help from a mental health therapist. Call KP Psychiatry/Addiction or speak to a member of the Positive Choice medical staff.

Creating and Breaking Habits

Let’s discuss the process of creating a helpful habit or breaking an unhelpful habit using tools we’ve learned. The goal is to start with a small habit and build from there.

How to Create a Good Habit

- Cue: Make it obvious.
- Craving: Make it attractive.
- Response: Make it easy.
- Reward: Make it satisfying.

For example: If you want to start a walking routine....

Cue: Make it obvious. Putting your shoes by the front door

Craving: Make it attractive. New exercise clothes, new route

Response: Make it easy. Only commit to 15 minutes to not overwhelm yourself.

Reward: Make it satisfying. Go with your partner or take your dog with you to make it fun.

How to Break a Bad Habit

- Cue: Make it invisible.
- Craving: Make it unattractive.
- Response: Make it difficult.
- Reward: Make it unsatisfying.

For example: If you want to stop eating while watching TV....

Cue: Make it invisible. Don't have the TV in line of sight while eating.

Craving: Make it unattractive. Remember the benefit of not zoning out while eating.

Response: Make it difficult. Don't buy foods easily eaten on the couch. Be accountable. Track eating.

Reward: Make it unsatisfying. Don't allow yourself to lounge on the sofa after eating. Clean up.

Try for yourself!

Choose one habit that you would either like to start or would like to stop. Go through the process of creating the good habit or breaking the bad habit using the previous listed steps.

What is the habit?

1. Cue (make it obvious/invisible)
2. Craving (make it attractive/unattractive)
3. Response (make it easy/difficult)
4. Reward (make it satisfying/unsatisfying)

If you start to wonder...

Why can I not follow through with what I say I will do?

Why do I say something is important, but never make time for it?"

Ask yourself these 4 questions:

How can I make my new habit obvious?

How can I make my new habit attractive?

How can I make my new habit easy?

How can I make my new habit satisfying?

Session 13: Relationship with Food

Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

Challenge:

What I learned about myself from these experiences:

“Emotional eating is an attempt to deal with a tough problem, feeling, or situation that we don’t know how to deal with and may not know that we have without a symptom to remind us.When we strip away the judgement of our emotional eating, and stop calling it a disease, a defect, or a problem... we can finally see it for what it is: **An alert that something in our life needs our attention.** Something completely unrelated to food or our weight. Be grateful for the reminder. It might be saving your life.”

Isabel Foxen Duke

“The longing for sweets is really a yearning for love or sweetness.”

Marion Woodman

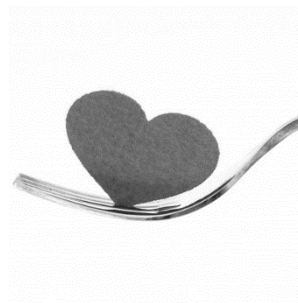
Relationship with Food

Have I been aware of the connection between my eating/obesity and other things in my life such as relationships, stress, anger, work, communication skills, etc.?

OR... Has food been working so well that I haven't had to deal with the difficulties in my relationships, my discomfort with expressing myself in conflict, or my uncomfortable emotions?

Was the food already in my mouth and soothing/numbing my emotions before I had to face them?

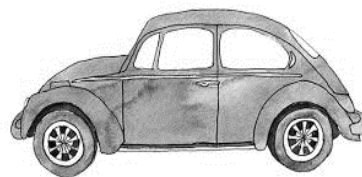
What are some words you would use to describe your current relationship with food?



What are some words you would use to describe your ideal relationship with food?

***"What if eating were as simple as fueling your car?
When you are hungry, you eat, when you're full, you stop."***

--Daryl Chen from TED



Food may have so many different meanings for you that depending on your day or mood it can be a challenge to see food as simply fuel. Some of these meanings can include comfort, celebration, a means for intimacy, an obligation, a way to fill time etc.

What does overeating mean for you?

How do you know that overeating has happened?

What does it feel like in your body?

How do you feel afterwards?

What are things you say about yourself or the food?

Identifying scenarios where we are more susceptible to overeating can help paint a picture of what type of relationship with food we have. Let's review some of the more common scenarios that tend to lead to overeating so you can better recognize the role that food has played in your life.

Hunger Overeating

- Triggered by physical deprivation
- Usually this occurs by waiting too long to eat and then the body becomes overly hungry.
- We tend to seek out more sugary, fatty, and calorically dense foods due to a strong urge to be satiated.
- People tend to eat quicker during this time.
- Fullness cue takes about 20 minutes to reach our brain telling us to stop eating. This often leads people who eat very quickly to overeat.

Deprivation Overeating

- This is typically triggered by making foods "forbidden" or "bad."
- Foods that are forbidden are then typically desired more once deprivation is triggered in the brain.
- Habitual dieters tend to restrict these foods and then can obsess about eating them.

Stress Overeating

- Using food to reduce anxiety
- People tend to detach when eating large quantities. It is an easy way to numb out uncomfortable or overwhelming feelings.

Opportunity Overeating

- Typically occurs when you have easy access to foods that are tempting or an opportunity to eat a lot of something
- Happens at parties and holidays where it is easy and "socially acceptable" to over-indulge, or eating large quantities at home alone where no one can see

Vengeful Overeating

- Using food to manage anger
- Could be a way to avoid an uncomfortable conversation, rebelling against a diet, or as a way to de-escalate intense anger

Pleasure Overeating

- Using food to elicit feelings of pleasure or joy
- Often triggered by the desire for stimulation and entertainment

Habit Overeating

- Eating on autopilot
- For instance, if you are used to having dessert every night after dinner then you are triggered to eat dessert whether you really want it or not.
- Eating while watching TV, driving, browsing social media. Doing these activities, you are cued to eat.

What type or types of overeating do you personally relate to?

Considering the overeating styles you relate to most, what does that say about your relationship with food?

Intervention of Overeating

You will have the greatest success if you act when you start noticing urges getting stronger and before you overeat.

- Remember the coping strategy of putting space between the urge and the behavior (discussed in Session 4).
- Success is most likely to occur when you identify cues for overeating. This will help to know what situations to avoid OR what plans need to be made to be most successful.
- Stress management will help reduce the buildup of the urge.

Exercise

Turn to PG. 363 in Maximize Your Body Potential to Rate Your Triggers for Binge Eating.

Take a few minutes to rate each item with a 1-5 rating (1 not likely and 5 highly likely to be a trigger).

What were some items that were a 5?

Principles for a More Positive Relationship with Food

- You, the person, are empowered; not the food.
- Eliminate confining rules about food.
- Release resentment surrounding food.
- Avoid deprivation, embrace moderation.
- View food as a teammate in wellness and not as a feared enemy.

Something to think about...

What behaviors can I do this week that will improve my current relationship with food?

Session 14: Family Rules and Messages

Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

Challenge:

What I learned about myself from these experiences:

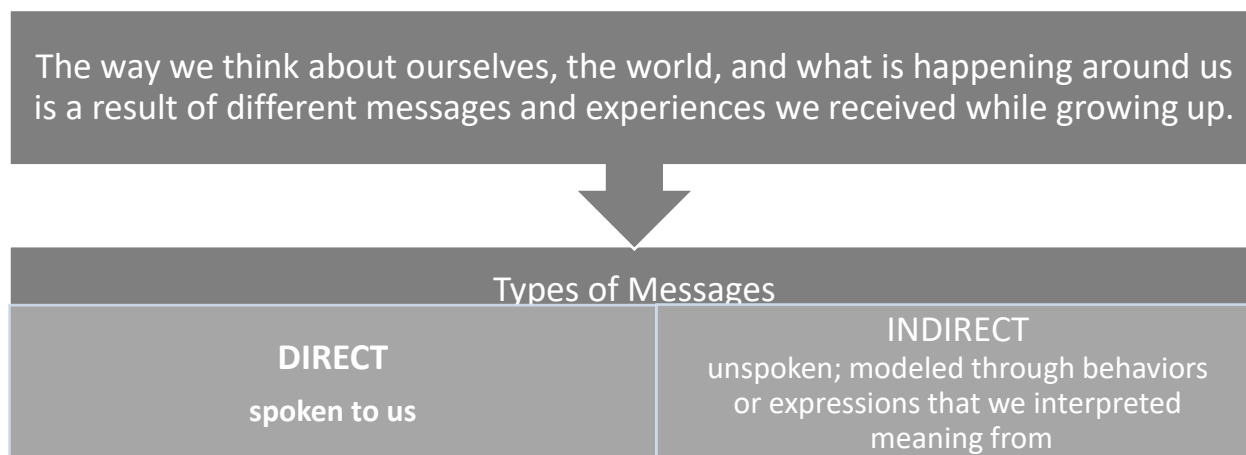
“Sticking to rules just because they're there does not make them right. You need to learn when the rules should be broken.”

Ilsa J. Bick

“The number one rule in life is to set and live up to your own standards.” —Clyde Lee Dennis

RULES

Family Rules and Messages

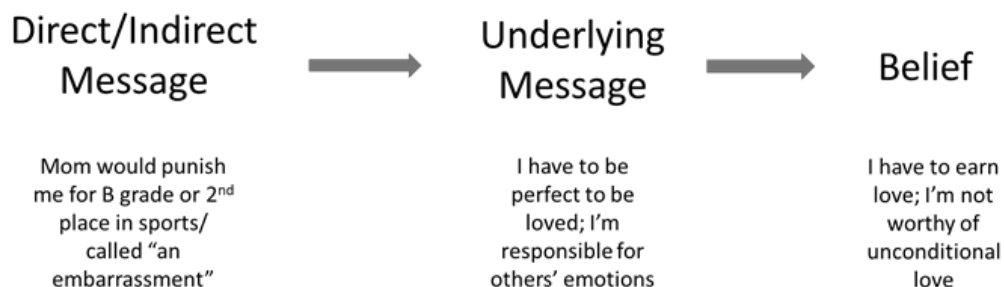


The way we think about ourselves, the world, and what is happening around us is a result of different messages and experiences we received while growing up. They came from things that were said to us (direct messages) or were modeled to us by our families, other influential people, religion, culture, etc. (indirect messages). From these direct and indirect messages, we interpret an underlying message about ourselves and how we relate to others. These underlying messages shaped our current core beliefs, the lens through which we view or interpret what we experience today, and directly influence our attitudes, choices, and behaviors throughout life.

Messages to Beliefs

Messages repeated over time begin to form our belief system. Our belief system is the lens through which we perceive our life experiences. These perceptions and interpretations directly influence our attitudes, choices, and behaviors throughout life.

Example:



Effects of this example belief in adulthood:

Pattern of dysfunctional relationships, codependency, low sense of self-worth, intense need to be in-control, etc.
(Food becomes coping mechanism for these effects/unmet needs)

Exercise- Complete the following prompts:

One positive message I received from the family I grew up with is:

One negative message I received from the family I grew up with is:

For the negative message you identified above, explore the underlying meaning it had for you and what belief it created.

- Your negative message:
- Your underlying meaning of that message:
- The resulting belief:

In what circumstances does your negative belief pop up for you currently? (In relationships, professionally, productivity, pursuance of goals, etc.)

How do these messages and beliefs affect your weight and eating behaviors today?

Rewiring Our Beliefs

The good news is that, as adults, we have the power and ability to create our own rules and messages that we would like to live our life by! Just as repetition of negative messages became negative beliefs, repetition of positive thoughts and messages can become positive beliefs!

Something to think about:

A new message I would like to live my life by is:



Session 15: Preparing for Modified Meal Plan & Transitioning Off Meal Replacements

Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

Challenge:

What I learned about myself from these experiences:

“If there is no struggle, there is no progress.”

Frederick Douglas

“Progress is not enhancing what is, but in advancing
towards what will be.”

Khalil Gibran

Our goals this session...

- Decide whether you need more weight loss time and if you want to continue in this class or are you ready to try a new class option.
- Talk about how we will be reintroducing food next week.

Continuing with the meal replacements or transitioning to food?

If you have more weight to lose and are on the full meal replacement plan...

- You will transition to the Modified Meal Replacement plan at session 16 and continue this until ready to transition to food (unless directed otherwise by medical staff).

If you have more weight to lose on the Modified Meal Replacement plan...

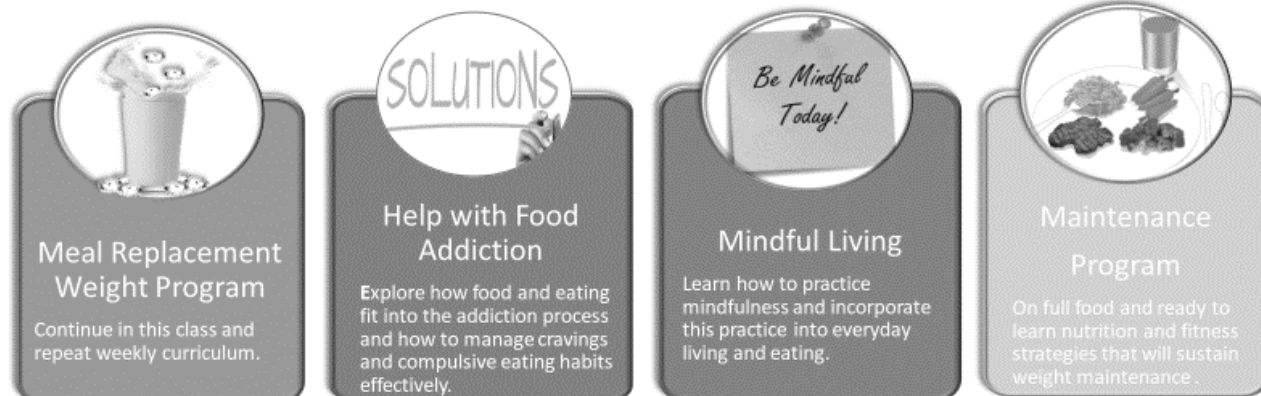
- You will continue this plan until ready to transition to food.

If you are close to your goal weight (5-10 lbs.) and/or ready for full food...

- You will begin PFEs. Once you complete the transition to full food, you are ready to transfer into the Maintenance Program.

Your options when this 20-week class ends...

- You may continue weight loss in **THIS CLASS** (let us know how many sessions: <5, <10, 11+)
- You may continue weight loss in **SOLUTIONS — Help with Food Addiction**
- You may continue weight loss in **MINDFUL LIVING**
- On full food and ready for **MAINTENANCE**



Transition to the Modified Full Meal Replacement Plan begins next week.

A medically supervised meal replacement program is safe and effective. However, continuing a restrictive eating plan that eliminates foods and choices for long periods of time can increase eating and weight related fears and disordered eating and thinking patterns.

We believe that adding food into your plan at or before week 16 benefits your health and allows us to support you in developing a healthy, balanced, and mindful relationship with food in a group setting with support from your peers and counselor.

Modified Full Meal Replacement Plan Guidelines

- Consume 5 meal replacements per day.
- Consume the following food daily in addition to your meal replacements:
 - 3 oz. of lean protein (see list of Food Groups and Serving Sizes.)
 - ½ cup of cooked or 1 cup raw, non-starchy vegetables
 - 2 cups leafy green salad, ½ cup raw veggies on top, and 1 tbsp of a salad dressing that is approximately 20 calories or less per tbsp.

Please refer to the Food Groups and Serving Sizes list in this workbook, and the pages on measuring tips.

Tips for success

- Continue the same eating schedule you followed while using meal replacements.
- Make food selections from the recommended Food Groups and Serving Sizes list.
- Measuring and/or weighing food are good tools for managing your daily nutrition intake.
- To minimize potential stomach upset and maintain lower caloric intake:
 - Trim visible fat or choose poultry without skin. Bake, barbecue, broil, or microwave your choices.
 - Avoid using salt or any seasoning with sodium, even while cooking, because it can cause you to retain excess water.
 - You can use small amount of non-stick vegetable spray when cooking.
- Consider keeping food and activity records. Recommended Apps: My Fitness Plan, Lose It, Calorie King.
- Consider purchasing measuring spoons, measuring cups, and a food scale.
- Use batch cooking to help have your needed foods ready and convenient.
- Eat your meal in a designated eating place and practice mindfulness while you eat.

Consider batch cooking and pre-measuring portions as a great way to stay on track.



Food Groups and Serving Sizes

Protein 1 serving is approx. 150 calories	Vegetable 1 serving is ½ cup cooked or 1 cup raw	Leafy Salad: 1 serving = 2 cups leafy greens plus ½ cup raw vegetable
<p>Meat 3 oz. cooked: poultry (skinless), fish, shellfish, lean beef (sirloin, flank or round) or pork tenderloin</p> <p>Cottage cheese non-fat ¾ c.</p> <p>Yogurt, Nonfat, plain, Greek, 8 oz.</p> <p>Eggs 2, 6 whites, or ¾ c. egg substitute</p> <p>Beans ½ c. cooked: black, garbanzo, kidney, lima, navy, pinto, soy, white, lentils, etc.</p> <p>Quinoa ½ c. cooked</p> <p>Seitan (plain) 4 oz.</p> <p>Tofu (lite, firm or extra firm) 9 oz.</p> <p>Tempeh 2 oz. or 1/3 c. cooked</p> <p><u>Vegan alternatives</u>: 3 oz. veggie <u>burger</u>, soy <u>protein</u>, etc.</p>	<p>Artichoke</p> <p>Asparagus</p> <p>Bamboo shoots</p> <p>Beans (wax, green)</p> <p>Beets</p> <p>Bell Pepper, all colors</p> <p>Broccoli*</p> <p>Brussels Sprouts*</p> <p>Cabbage*</p> <p>Cauliflower*</p> <p>Carrot</p> <p>Celery</p> <p>Cucumber</p> <p>Eggplant</p> <p>Jicama</p> <p>Kohlrabi</p> <p>Leeks</p> <p>Turnips</p> <p>Water chestnuts</p> <p>Mung bean sprouts</p> <p>Mushrooms</p> <p>Okra</p> <p>Onions</p> <p>Pea Pods</p> <p>Peppers, all kinds</p> <p>Radishes</p> <p>Seaweed, cooked</p> <p>Spinach</p> <p>Summer Squash (zucchini, yellow)</p> <p>Tomatoes</p> <p>*Adding in new types of fibers can cause excess flatulence until the GI tract adapts. If you have uncomfortable gas, try limiting or avoiding these vegetables. Switch to the other vegetable choices until your body adjusts. Also, cooked vegetables may be better tolerated than raw vegetables.</p>	<p>Salad Dressing: 1 Tbsp of a dressing with natural ingredients is recommended: <u>i.e.</u>, lemon juice, lime juice, balsamic vinegar, unseasoned rice vinegar, or other vinegars, mixed with olive oil, mustard, salsa, <u>pico de gallo</u>, etc. If you use a commercial salad dressing, choose one with minimal ingredients.</p> <p>Leafy Greens: arugula, beet greens, bibb, Bok choy, Boston leaf, butter head, cabbage, collard greens, kale, loose leaf, romaine, spinach, watercress, etc.</p> <p>*iceberg not recommended for leafy greens, but okay to count as a vegetable</p>

- ✓ Within minutes of eating, greens cause a release of nitric oxide into blood stream.
 - Nitric oxide widens blood vessels and relaxes arteries increasing blood flow, oxygen flow, lowering blood pressure, and preventing blockages
 - This leads to improved stamina, memory, brain function, increased energy levels, strengthening of your immune system, and increased stamina during exercise
- ✓ Increases restorative (REM) sleep
- ✓ Great source of vitamins/minerals
- ✓ Anti-inflammatory
- ✓ Greens contain a substance called thylakoids which inhibit the activity of hunger hormones like ghrelin, which are often elevated after weight loss.

LEAFY GREENS



If you use commercially made salad dressings, do so sparingly. They are full of additives, coloring agents, etc.

Choose dressings with natural ingredients and few additives.
Best to make your own. Here's a few simple, lower calorie ideas...



EASY PLANT-BASED DRESSINGS

Try some of these easy oil-free dressings. Start with...

½ cup plain cashews + 1 cup plant-based milk

Add below listed flavorings for type of dressing you want and blend in a blender.

Caesar Flavor

2 tbsp lemon juice
1 tbsp mustard
¾ tsp salt or to taste
½ tsp garlic powder
¼ tsp onion powder
1 tsp capers, jarred in brine
2 tsp caper brine
¼ tsp vegan Worcestershire
½ tsp pepper

Ranch Flavor

1½ tbsp white vinegar
½ tsp salt or to taste
½ tsp garlic powder
¼ tsp onion powder
1 tsp dried parsley
Pepper to taste
Pinch of dill (optional)

THREE, TWO, ONE DRESSING

3 tbsp any type vinegar
+ 2 tbsp mustard
+ 1 tbsp maple syrup
Mix and enjoy!

Transition off Meal Replacements

This plan gradually reintroduces six food groups, including their appropriate serving sizes and number of servings of each food group in each phase. The different phases slowly increase calorie levels, gently stimulating your metabolic rate to increase and provides your GI tract time to adjust to a wider variety of fibers. Each phase typically takes one week to complete. See **Food Groups and Serving Sizes** in this workbook for guidance of selecting foods.

NUTRIMED (500 cal/day) —Transitioning off meal replacements

Food Group	Phase 1	Phase 2	Phase 3	Full Food ready for Maintenance
Meal Replacements	3	2	1	0
Protein	2	2	3	4
Vegetable	2	4	5	5+
Leafy Salad	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing
Bean/Grain/Starchy Veggie	1	2	2	2-3
Fruit	0	1	2	2-3
Fat	1	2	3	4
Milk/Plant-Milk/Yogurt	0	0	1	1-2
Vitamin/Mineral		Recommended	Recommended	Recommended
Calories	745	880	1110	1230-1460

Phase 1:
Continue to drink 120-150 total oz of fluid a day counting the fluid you use in your MR

Beginning Phase 2:
Reduce fluids to 64 oz/day in addition to the fluids used in your MR

Beginning Phase 3: You may continue taking a fiber supplement; however, it is now optional.

STOP taking Potassium and doing bi-weekly lab work once you are on full food (or as directed by your physician)

NUMETRA (800 cal/day) —Transitioning off meal replacements

Food Group	Phase 1	Phase 2	Phase 3	Full Food ready for Maintenance
Meal Replacements	4	2	1	0
Protein	1	3	3	4
Vegetable	2	4	5	5+
Leafy Salad	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing
Beans/ Grain/Starchy Vegetables	1	1	2	2-3
Fruit	1	2	2	2-3
Fat	1	2	3	4
Milk/Plant-Milk/Yogurt	0	0	1	1-2
Vitamin/Mineral		Recommended	Recommended	Recommended
Calories	1010	1085	1170	1230-1460

Phase 1:
Continue to drink 120-150 total oz of fluid a day counting the fluid you use in your MR

Beginning Phase 2:
Reduce fluids to 64 oz/day in addition to the fluids used in your MR

Beginning Phase 3: You may continue taking a fiber supplement; however, it is now optional.

STOP taking Potassium and doing bi-weekly lab work once you are on full food (or as directed by your physician)

Do you feel confident about going on the modified meal replacement plan?

If not, what are your concerns?

What additional support will you need during your transition back to food?

What action items do you need to take to help yourself be successful?

Something to think about...

What can you do this week to make yourself successful in your food transition?

Session 16: Changing Self-Identity

Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

Challenge:

What I learned about myself from these experiences:

*"There is nothing either good or bad,
but thinking makes it so.*

Shakespeare

The number on the scale will not tell you:

- What a great person you are
- How much your family and friends love you
- That you are kind, smart, funny and amazing in ways numbers cannot define
- That you have the power to choose happiness
- Your own self worth



Changing Self-Identity

When we are unhappy with a part of ourselves or our life, it's common to fantasize about how life would be different if this one thing changed. This is common when it comes to body weight. It's also common to avoid doing things we want or like to do because we think that in the future it will be easier or better. This can lead to unhappiness and disappointments. For example: *"When I lose weight...I'll be healthy, I'll be attractive, people will treat me better, I'll find love, I'll have a better job, I'll be more active,"* etc.

What do you expect to improve as you lose weight?

The reality is that, while some things in your life will improve as you lose weight, some things will not. Sometimes as people lose weight, they find their depression worsens, some relationship dynamics become strained, and cross addictions develop.

If our expectations about what will change in our life are unrealistic, we set ourselves up for some difficult emotions, including disappointment, frustration, anger, guilt, shame, helplessness, and hopelessness.

Example: "When I lost weight, I realized I still had other issues in my life, still struggled with low self-esteem, and still felt judgement from others."

What do you expect might not improve for you as you lose weight?

Exercise: Let's explore what you tell yourself about your expectations of losing weight. To complete the prompts below, choose the label that fits best for you regarding your higher-weight and preferred-weight selves and fill your chosen labels into the blank lines for each worksheet.

THE OVERWEIGHT/ LESS HEALTHY/ HIGHER-WEIGHT ME IS:

Examples: Plodding, Awkward, Safe

THE _____ ME IS:

THE _____ ME WEARS CLOTHES THAT ARE:

WHEN I AM AT A PARTY, THE _____ ME:

WHEN I AM ALONE, THE _____ ME:

THE _____ ME LIKES:

THE _____ ME DESERVES:

THE PREFERRED-WEIGHT/ HEALTHY/ IDEAL-WEIGHT ME IS:

Examples: Outgoing, confident, sexy...

THE _____ ME IS:

THE _____ ME WEARS CLOTHES THAT ARE:

WHEN I AM AT A PARTY, THE _____ ME:

WHEN I AM ALONE, THE _____ ME:

THE _____ ME LIKES:

THE _____ ME DESERVES:

What labels did you choose for yourself?

What do you notice as you consider both of your identities? Were there any differences or similarities between your higher-weight and preferred-weight self?

Are your expectations for your preferred-weight self realistic? Scary? Exciting?

What things were you expecting weight loss to change for you, but now realize may stay the same?

What could you start doing now to make these changes happen?

Our self-esteem may fluctuate with our weight, age, experiences, and more. However, our self-worth is always stable. We are all inherently worthy of love, respect, and kindness. Therefore, what we deserve is consistent regardless of external factors, like our weight!

Often we put our lives on hold waiting to be a “perfect weight...” “if I weighed X, I’d be...”

Don’t wait to be “that weight” to live the life you want. Start now! The more you act like your imagined healthy self, the more likely you are to get and stay healthy. And the more focused you are on being the person you want to be, the less you’ll be focusing on food.

Something to think about...

How do you label yourself?

How do these labels limit you?

What do you deserve regardless of the size or shape of your body?

Session 17: Body Image

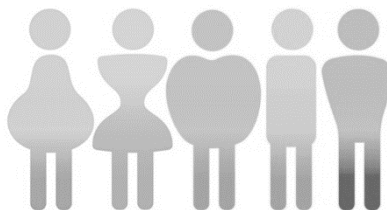
Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

Challenge:

What I learned about myself from these experiences:



"You can't hate yourself happy. You can't criticize yourself thin. You can't shame yourself worthy. Real change begins with self-love and self-care."

Jessica Ortner

Body Type vs. Body Image

Body image is different from your body type. Body type is the physical makeup of your body, and is determined by things like genetics, lifestyle behaviors, and level of fitness. There are three main body types: ectomorph, mesomorph, and endomorph, with endomorph being the most common body type. Your genes determine which of those body types you have (or combination of body types), meaning your body type is something that is set for you and does not change.

Body image is the thoughts, feelings, and beliefs you have about your physical body, its appearance, and how you feel in your body. Body image is influenced by what you say to yourself about your body and what others (like social media, culture, and even medical professionals) say about different body shapes. Your body image can change over time, sometimes you may feel confident and happy with your body and other times you might be dissatisfied. Feeling confident and satisfied with your body at any shape is important for overall happiness.

Body Image is Your Relationship with Your Body

What words would you use to describe your body and how you feel about it?

What has influenced your body image throughout your life?

What makes a healthy relationship with your body?

If you had a positive relationship with your body, what would that be like? What might be different?

Exercise

Part 1: Write a letter to your body telling it anything you'd like to say.

Dear Body,

Sincerely,

Today I asked my body what she needed,
Which is a big deal
Considering my journey of
Not Really Asking That Much.

I thought she might need more water.
Or protein.
Or greens.
Or yoga.
Or supplements.
Or movement.

But as I stood in the shower
Reflecting on her stretch marks,
Her roundness where I would like flatness,
Her softness where I would like firmness,
All those conditioned wishes
That form a bundle of
Never-Quite-Right-Ness,
She whispered very gently:

Could you just love me like this?

- *Hollie Holden*

Part 2: Write a letter from your body to you. Think about what your body would like to say to you if it had a voice.

Dear _____,

Sincerely,
Your Body

What was it like for you to give your body that voice? What was it like to listen to what your body had to say?

What did you hear your body needs from you?

Something to think about...

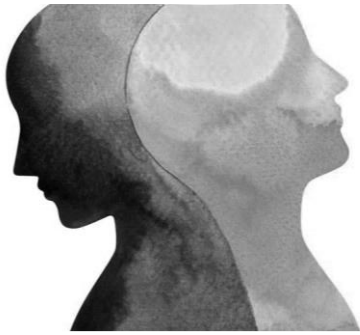
Choose a part of your body that you are most critical of:

Choose a reason to appreciate that body part (function, not aesthetic):

Insert your answers above to complete the statement below:

I appreciate my _____ because _____.

Use this new, positive self-statement to challenge the critical judgments about your body. Repeated over time, this can help move you towards a more positive body image!



TEN STEPS TO POSITIVE BODY IMAGE

1. Appreciate all your body can do.

Every day your body carries you closer to your dreams. Celebrate all of the amazing things your body does for you—running, dancing, breathing, laughing, dreaming, etc.

2. Keep a top-ten list of things you like about yourself.

List things that aren't related to how much you weigh or what you look like. Read your list often. Add to it as you become aware of more things to like about yourself.

3. Remind yourself that “true beauty” is not simply skin-deep.

When you feel good about yourself and who you are, you carry yourself with a sense of confidence, self-acceptance, and openness that makes you beautiful. Beauty is a state of mind, not a state of your body.

4. Look at yourself as a whole person.

When you see yourself in a mirror or in your mind, choose not to focus on specific body parts. See yourself as you want others to see you — as a whole person.

5. Surround yourself with positive people.

It is easier to feel good about yourself and your body when you are around others who are supportive and who recognize the importance of liking yourself just as you naturally are.

6. Shut down those voices in your head that tell you your body is not “right” or that you are a “bad” person.

You can overpower those negative thoughts with positive ones. The next time you start to tear yourself down, build yourself back up with a few quick affirmations that work for you.

7. Wear clothes that are comfortable and make you feel good about your body.

Work with your body, not against it.

8. Become a critical viewer of social and media messages.

Pay attention to images, slogans, or attitudes that make you feel bad about yourself or your body. Protest these messages: write a letter to the advertiser or talk back to the image or message.

9. Do something nice for yourself.

Let your body know you appreciate it. Take a bubble bath, make time for a nap, or find a peaceful place outside to relax.

10. Do something for others.

Sometimes reaching out to other people can help you feel better about yourself and can make a positive change in our world. Use the time and energy that you might have spent worrying about food, calories, or your weight and channel that energy into helping others.

Session 18: Values

Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

Challenge:

What I learned about myself from these experiences:

“When your values are clear to you, making decisions becomes easier.”

-Roy E. Disney

Why are Values Important?

Values reflect what is important to us in our life. They guide our behaviors toward our goals and therefore represent our chosen life directions. When we choose behaviors that are not in line with our values, this often leads to physical and emotional distress, such as when eating behaviors lead to weight gain that begins limiting involvement in relationships and activities that are important to us. Sharing values with others around us leads to stronger relationship bonds, acceptance, and support.

Exercise

What do you value most? Rank your five most important values (1=most important) using the list below. Use the potential loss of a value to help guide your assessment. Add any values that are important to you.

___ My health	___ My intelligence
___ My childhood family	___ My education
___ My chosen family	___ My spirituality
___ My life partner	___ My morals and ethics
___ My children	___ My integrity
___ My friends	___ My philanthropy
___ My self-respect	___ My successes in life
___ My appearance	___ My love and caring for others
___ My talents and abilities	___ The love and approval of others
___ My financial security	___ My love and caring for myself
___ My possessions	___ _____
___ My work/career	___ _____

Why did you choose your top five values?

What was it like for you to prioritize your top five values?

Historically, have your health-related behaviors been in alignment with your stated values?

In what ways does your overeating violate your values?

What are ways you can use your values to achieve your health goals?

Something to think about...

What tiny habit can you begin this week that will support your weight loss goals based on one of your values?

Session 19: Reassessing Motivation

Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

Challenge:

What I learned about myself from these experiences:



"You choose the future with your actions each day."

– James Clear

"Knowing is not enough; we must apply. Willing is not enough; we must do."

– Johann Wolfgang von Goethe

What are some things that you are proud of yourself for doing?

What are you grateful for during this weight loss journey?

Staying focused when we get bored of our goals

In James Clear's Book Atomic Habits, he recounts the conversation he had with an elite weightlifting coach about what separates the best athletes from everyone else:

“At some point it comes down to who can handle the boredom of training every day, doing the same lifts over and over and over. Whether it's business or sports or art, you hear people say things like, ‘It all comes down to passion,’ or ‘You just have to really want it.’ As a result, many of us get depressed when we lose focus or motivation because we think that successful people have a bottomless reserve of passion. But this coach was saying that **successful people *feel* the same lack of motivation as everyone else. The difference is they still find a way to show up despite the feelings of boredom.**”



The Secret to Staying Motivated

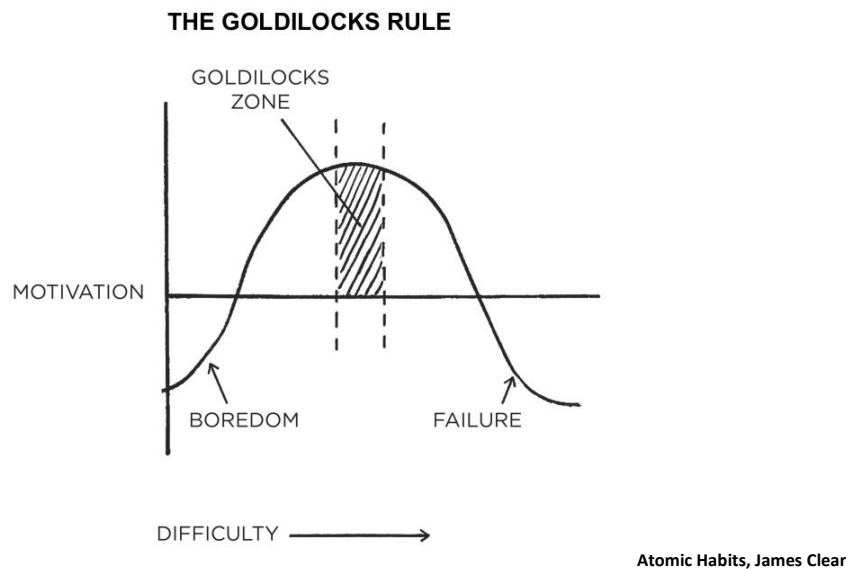
The more we do something, the more boring and routine it becomes (decreasing motivation) and we can rationalize going back to old behaviors.

If it's too difficult we can lose motivation (see the Goldilocks rule or Yerkes-Dodson Principle in the graph below).

The Goldilocks Rule



Example –after going completely back to old behaviors, it can feel like a challenge to start healthy behaviors again. It might feel overwhelming to know where to start.



“The greatest threat to success is not failure but boredom.”
– James Clear

How can you challenge yourself in way that keeps you motivated, but doesn't feel overwhelming?

Think about people you know that are living a lifestyle that you admire. What behaviors do they do that you think you would like to do as well?

The Big “WHY”

When you move your habits away from seeking results and instead towards the lifestyle you want, you can have far more success at staying committed. Example - the difference between “I want to lose weight” and “I want to live a healthy lifestyle.”

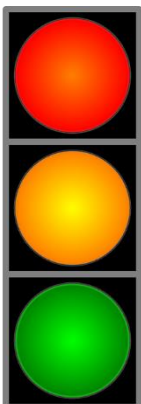
When you connect with the “WHY” you desire something, it brings you closer to your values (such as, I want to be able to play sports with my kids, hike a mountain, see my grandchildren, etc.). Writing out your WHY and having it be easily accessible can help you identify small things you can do every day that fit into the lifestyle that is important to you. For instance, if you see yourself as an individual with a healthy lifestyle, you will be more likely to choose a physical activity for a social event.

What is your WHY behind losing weight?

Signs you are returning to old behaviors

It is critical that you become aware of “slippery slope” behaviors before they become the old behavior patterns again. As hard as it would be to start a new behavior or return to a desired behavior now, it only gets harder the longer you wait (think about the Goldilocks principle from before).

The *traffic light* tool can be useful to help you identify slippery slope behaviors before you get off track.



RED

These are behaviors that are warning signs you have fallen off track.

Example – eating in private, one meal a day, “I am a failure.”

YELLOW

These are warning signs that you are slipping back into behaviors you want to avoid.

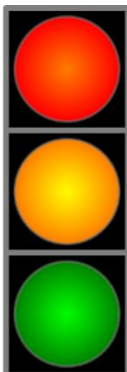
Example – picking up fast food instead of cooking, “it’s just this one time” multiple times a week, “I’ve been so good, I deserve a treat.”

GREEN

These are behaviors that you know you want to keep up because they make you feel good.

Example – sticking with an eating schedule, keeping food records, allowing foods you enjoy in moderation, “I overdid it at lunch, I will get back to my plan for dinner.”

Fill out your own traffic light below:



RED

YELLOW

GREEN

Allowing people you trust to point out when you're slipping into yellow or red-light behavior can be helpful. It's important to have a conversation about how you want to be made aware of yellow or red-light behaviors.

- If you give someone the words you want to hear, it can feel less critical.

What would you like someone to say to you that would make you feel supported?

- "Honey, you told me that eating out for lunch every day at work was a slippery behavior for you. Tell me what I can pick-up at the store so we have healthy lunch options at home."
- "I haven't seen you out walking as much; want to go for a fun hike this weekend?"

Something to think about...

Could you share your traffic light plan with a loved one for accountability?
Who would that be?

Session 20: Goodbyes and New Beginnings

Weekly Check-In

In the spaces below, identify at least one example of the following experiences for yourself from the past week.

Success:

Challenge:

What I learned about myself from these experiences:

"It's never too late to become who you want to be. I hope you live a life that you're proud of, and if you find that you're not, I hope you have the strength to start over." – F. Scott Fitzgerald

"Be willing to be a beginner every single morning." – Meister Eckhart

*"Your life cannot get better by chance. It gets better by change."
– Jim Rohn*

You all have been working hard at changing habits, learning new healthy behaviors, and learning about the psychology behind what makes it challenging to make the best choices for you.

Congratulations on completing this phase of your weight loss journey! Let's reflect on your progress so far before we look ahead at what's to come.

What are some goals you've accomplished since beginning in the program?

What helped you accomplish those goals?

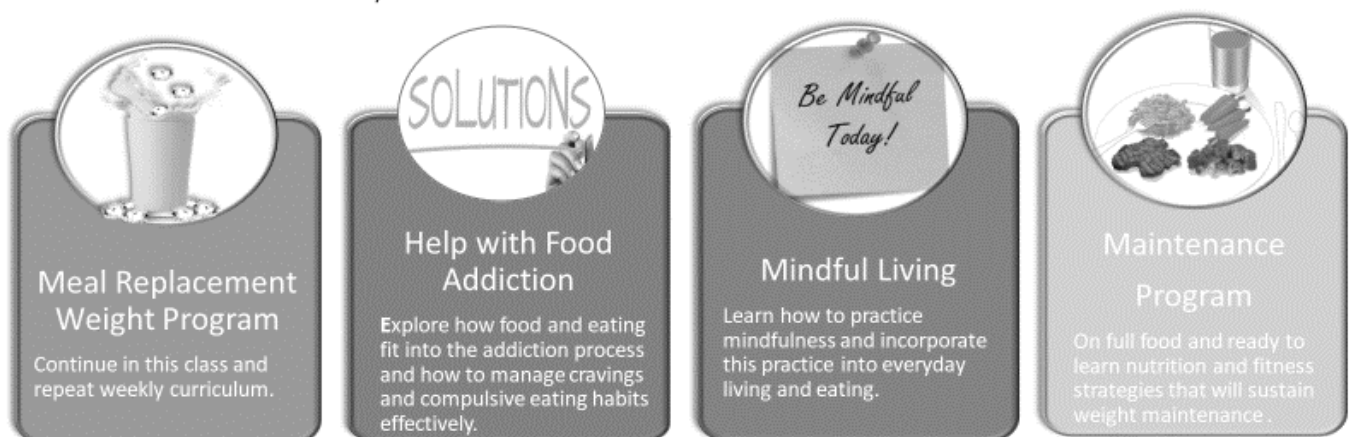
What goals would you like to accomplish in the next phase of your journey?

What will help you accomplish those goals?

Something to think about...

What are you most grateful for so far in your weight loss journey?

Next week I will be doing



Request for Support Letter

Dear _____,

I am participating in a medically supervised weight management program learning how to change my actions, thoughts, and feelings as they relate to food and eating. I would like to have your encouragement and support while I work towards reaching my goal of taking charge of my weight.

The best way you can support me through this process is by acknowledging whenever I make positive choices towards my goals, such as exercising, keeping records of my eating, using different strategies to manage my emotions, or drinking the meal replacement supplement.

You can also support me by not finding fault with or criticizing my program. While I appreciate your care and concern, judgement and criticism usually cause more harm than good. Please don't make negative comments such as *"You've been doing so good; you deserve to have a bite"* or *"That stuff must be terrible to drink,"* or *"A green salad can't hurt; just have a bite."* If you have any questions about what types of comments, I will find supportive or not, please ask me!

I need experience with using the new behaviors I am learning, so please include me in social activities while I am in a meal replacement.

Thank you for your support and encouragement!

Sincerely,

Weight Graph

Initial Wt. lbs.																					
-2 lbs.																					
-4 lbs.																					
-6 lbs.																					
-8 lbs.																					
-10 lbs.																					
-12 lbs.																					
-14 lbs.																					
-16 lbs.																					
-18 lbs.																					
-20 lbs.																					
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-48 lbs.																					
-50 lbs.																					
-52 lbs.																					
-54 lbs.																					
-56 lbs.																					
-58 lbs.																					
-60 lbs.																					
Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21

Meal Replacement Tracker

WEEK # _____		Supplement #1	Supplement #2	Supplement #3	Supplement #4	Supplement #5
Day _____ Date _____	When? Where?					
Fiber						
Day _____ Date _____	When? Where?					
Fiber						
Day _____ Date _____	When? Where?					
Fiber						
Day _____ Date _____	When? Where?					
Fiber						
Day _____ Date _____	When? Where?					
Fiber						
Day _____ Date _____	When? Where?					
Fiber						
Day _____ Date _____	When? Where?					
Fiber						
Day _____ Date _____	When? Where?					
Fiber						

[illegible]

Observations/ comments:

[illegible]

Modified Meal Replacement Plan

Everyday you will have 5 meal replacements
plus protein, vegetables, and a green salad.



Protein

Choose one:

- 3 ounces of cooked meat: skinless poultry, fish, shellfish, sirloin, flank or round beef or pork tenderloin
- 3/4 cup of non-fat cottage cheese
- 8 ounces of non-fat, plain Greek yogurt
- 2 eggs
- 6 egg whites
- ¾ cup egg substitute
- 1/2 cup of cooked beans: black, garbanzo, kidney, lima, navy, pinto, soy, white, lentils, etc.
- 1/2 cup cooked quinoa
- 4 ounces plain seitan
- 9 ounces tofu
- 2 ounces (1/3 cup) cooked tempeh
- 3 ounces vegan alternatives: veggie burger, soy protein, etc.



Vegetables

Choose 1/2 cup cooked or 1 cup raw:

- Artichoke
- Asparagus
- Bamboo shoots
- Beans (wax, green)
- Beets
- Bell pepper, all colors
- Broccoli*
- Brussels Sprouts*
- Cabbage*
- Cauliflower*
- Carrot
- Celery
- Cucumber
- Eggplant
- Iceberg lettuce
- Jicama
- Kohlrabi
- Leeks
- Mung bean sprouts
- Mushrooms
- Okra
- Onions
- Pea Pods
- Peppers, all kinds
- Radishes
- Seaweed, cooked
- Spinach
- Summer squash
- Zucchini
- Yellow squash
- Tomatoes
- Turnips
- Water chestnuts



Green Salad

Choose 2 cups of greens
plus 1/2 cup of raw vegetables:

- Arugula
- Beet greens
- Bibb
- Bok choy
- Boston leaf
- Butter head
- Cabbage
- Collard greens
- Kale
- Loose leaf
- Mixed spring greens
- Mixed power greens
- Romaine
- Spinach
- Watercress

Iceberg lettuce is a vegetable, not a leafy green

1 Tbsp of a dressing: lemon juice, lime juice, balsamic vinegar, unseasoned rice vinegar, or other vinegars, mixed with olive oil, mustard, salsa, pico de gallo, etc. If you buy salad dressing, choose one with few ingredients.

If you have uncomfortable gas, try limiting or avoiding vegetables with a *. Cooked vegetables may cause less gas than raw vegetables.

Sample Schedules

Everyday you will have 5 meal replacements plus protein, vegetables, and a green salad.
You can choose the schedule that works best for you. Never skip a meal replacement.



Important:

Fruit, grains, or starchy vegetables, that are not listed, are not recommended on the Modified Plan.
Avoid oil, butter, or fat when cooking. Try cooking sprays.

Be sure to drink 120-150 ounces of fluid every single day. This fluid amount includes what is used to make your meal replacements.

Transitioning Off Meal Replacements

You transition off meal replacements when you are close to your goal weight, or you decide you are finished with using meal replacements.

It's not uncommon to put on a small amount of weight the first week or two when reintroducing food. This happens as your muscles naturally rehydrate from the food you consume. **DON'T PANIC!** As your metabolism gradually increases in response to a higher calorie level and your body hydration stops fluctuating, you will begin to lose again. You can minimize body water fluctuation by avoiding added salt while cooking or in prepared foods.

Things to know:

- You will continue to attend your weekly group until you are on fully transitioned back to food.
- To complete PFE Phases 1-3 you will need approximately 42 NUTRIMED or 49 NUMETRA meal replacements.
- Speak with your counselor about PFE status when you have enough meal replacements to finish PFE's.
- Once you are on PFE status, you can purchase up to 8 boxes per month for as long as you are an active participant in a Positive Choice program (Healthy Balance, Maintenance, Boosters, Slim Down, etc.)
- When you have completed the transition to full food, notify your counselor. You are ready to transfer into the Maintenance Program!

Tips for success

- Continue the same timing of eating you followed while using meal replacements.
- Make food selections from the Food Groups and Servings list.
- Measuring and weighing portions are great tools for managing your daily nutrition intake.
- Beginning in Phase 2 reduce your daily fluid intake to 64 oz/day, in addition to the fluids used to make your meal replacements.
- Beginning in Phase 3, we recommend taking a multivitamin/mineral supplement.
- STOP taking Potassium and doing bi-weekly lab work when you are on full food (or as directed by physician.)
- Consider keeping food/activity records. Recommended APPS: My Fitness Plan, Lose It, Calorie King, etc.
- Consider purchasing measuring spoons, measuring cups, and a food scale.
- Use batch cooking to help have your needed foods ready and convenient.
- Eat your meal in a designated eating place and practice mindfulness while you eat.

Preparing for Eating Support Group

Be sure to look on the PositiveChoice.org Bookshelf for all the support resources available.

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Weight Program Details
and Free Download (PDF)
DOWNLOAD NOW

Home Weight Loss Integrative Medicine Nutrition & Fitness Center Healthy Living Calendar Blog Contact

Home > Full/Modified Meal Replacement Program >

Clinic Hours

Garfield
Mon. thru Thurs.
7:30 - 12:00 pm &
1:00 - 4:30 pm
Closed 12-1 pm
Fri. 8:30 - 3:45 pm
*No Meal
Replacement
purchase available
on Fridays at
Garfield.*

San Marcos
Tues. 7:30 - 12:30
& 1:30 - 4:30 pm
**closed 12:30 -
1:30 pm**

Full/Modified Meal Replacement Program

Contact my Counselor
or Medical Team
Click here

Tech Support

Program
Materials

Medical Instruction Video
for Beginning Meal replacements

Preparing for Eating
Phasing off Meal Replacements

Time	Instructor	Classroom
MONDAY		
4:00 PM	Heather G.	Room 1
4:00 PM	Lee S.	Room 6
6:00 PM	Kau D.	Room 7

Preparing for Eating Support Group

Adding food back into your life after losing weight using meal replacements can be a bit scary.

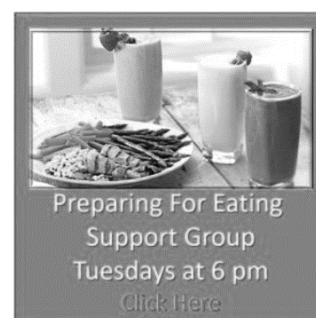
The transition off meal replacement plan is carefully designed to add food back in a way that maximizes weight loss and minimizes hunger while limiting for a short time your food choices to help avoid over-stimulation. **You can do this...and we are here to help!**

Virtual Preparing for Eating Support Group

Tuesdays at 6-6:30 pm

Katharine Klepin MS, RD answers questions and helps you through each phase. Simply click-in at 6 on any Tuesday (except holidays) using the below link (no scheduling need) you will find at...

POSITIVECHOICE.ORG/PFE



Transition off Meal Replacements Eating Plans

NUTRIMED (500 cal/day) –Transitioning off meal replacements

Food Group	Phase 1	Phase 2	Phase 3	Full Food ready for Maintenance
Meal Replacements	3	2	1	0
Protein	2	2	3	4
Vegetable	2	4	5	5+
Leafy Salad	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing
Bean/Grain/Starchy Veggie	1	2	2	2-3
Fruit	0	1	2	2-3
Fat	1	2	3	4
Milk/Plant-Milk/Yogurt	0	0	1	1-2
Vitamin/Mineral		Recommended	Recommended	Recommended
Calories	745	880	1110	1230-1460

Phase 1:
Continue to drink 120-150 total oz of fluid a day counting the fluid you use in your MR

Beginning Phase 2:
Reduce fluids to 64 oz/day in addition to the fluids used in your MR

Beginning Phase 3: You may continue taking a fiber supplement; however, it is now optional.

STOP taking Potassium and doing bi-weekly lab work once you are on full food (or as directed by your physician)

NUMETRA (800 cal/day) —Transitioning off meal replacements

Food Group	Phase 1	Phase 2	Phase 3	Full Food ready for Maintenance
Meal Replacements	4	2	1	0
Protein	1	3	3	4
Vegetable	2	4	5	5+
Leafy Salad	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 1 Tbsp. dressing
Beans/ Grain/ Starchy Vegetables	1	1	2	2-3
Fruit	1	2	2	2-3
Fat	1	2	3	4
Milk/Plant-Milk/Yogurt	0	0	1	1-2
Vitamin/Mineral		Recommended	Recommended	Recommended
Calories	1010	1085	1170	1230-1460

Phase 1:
Continue to drink 120-150 total oz of fluid a day counting the fluid you use in your MR

Beginning Phase 2:
Reduce fluids to 64 oz/day in addition to the fluids used in your MR

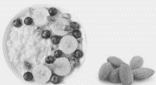
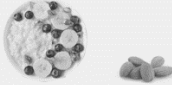


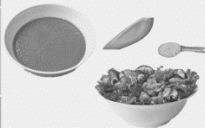





Beginning Phase 3: You may continue taking a fiber supplement; however, it is now optional.

STOP taking Potassium and doing bi-weekly lab work once you are on full food (or as directed by your physician)


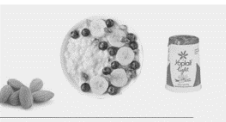








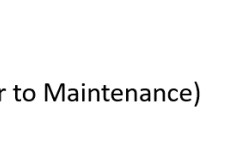

Phase 1

Food	NUTRIMED (500 cal)		7:30 am		NUMETRA (800 cal)	Food
Meal Replacements	3				4	Meal Replacements
Protein	2		10:30 am		1	Protein
Vegetable	2				2	Vegetable
Leafy Salad	1		1:30 pm		1	Leafy Salad
Beans/Grains/ Starchy Vegetables	1				1	Beans/Grains/ Starchy Vegetables
Fruit	0		4:30 pm		1	Fruit
Fat	1				1	Fat
Milk/Plant- Milk/Yogurt	0		7:30 pm		0	Milk/Plant- Milk/Yogurt
Vitamin/Mineral						Vitamin/Mineral
Calories	745				1010	Calories









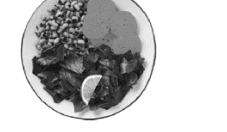



Phase 2

Food	NUTRIMED (500 cal)		7:30 am		NUMETRA (800 cal)	Food
Meal Replacements	2				2	Meal Replacements
Protein	2		10:30 am		3	Protein
Vegetable	4				4+	Vegetable
Leafy Salad	1		1:30 pm		1	Leafy Salad
Beans/Grains/ Starchy Vegetables	2				1	Beans/Grains/ Starchy Vegetables
Fruit	1		4:30 pm		2	Fruit
Fat	2				2	Fat
Milk/Plant- Milk/Yogurt	0		7:30 pm		0	Milk/Plant- Milk/Yogurt
Vitamin/Mineral	Recommended				Recommended	Vitamin/Mineral
Calories	880				1085	Calories

Phase 3

Food	NUTRIMED (500 Cal)				NUMETRA (800 Cal)	Food
Meal Replacements	1		7:30 am		1	Meal Replacements
Protein	3		10:30 am		3	Protein
Vegetable	5				5	Vegetable
Leafy Salad	1		1:30 pm		1	Leafy Salad
Beans/Grains/ Starchy Vegetables	2		4:30 pm		2	Beans/Grain/ Starchy Vegetables
Fruit	2				2	Fruit
Fat	3				3	Fat
Milk/Plant-Milk/ Yogurt	1		7:30 pm		1	Milk/Plant-Milk/ Yogurt
Vitamin/Mineral	Recommended				Recommended	Vitamin/Mineral
Calories	1110				1170	Calories

Full Food (Ready to transfer to Maintenance)

FOOD	NUTRIMED (500 Cal)				NUMETRA (800 Cal)	FOOD
Meal Replacements	0		7:30 am		0	Meal Replacements
Protein	4		10:30 am		4	Protein
Vegetable	5+				5+	Vegetable
Leafy Salad	1		1:30 pm		1	Leafy Salad
Beans/Grain/ Starchy Vegetables	2-3		4:30 pm		2-3	Beans/Grains/ Starchy Vegetables
Fruit	2-3				2-3	Fruit
Healthy Fat	4				4	Healthy Fat
Milk/Plant-Milk/ Yogurt	1		7:30 pm		1	Milk/Plant-Milk/ Yogurt
Vitamin/Mineral	Recommended				Recommended	Vitamin/Mineral
Calories	1230-1460				1230-1460	Calories

Food Groups and Serving Sizes

Protein: One serving is approximately 150 calories	
Meat 3 oz. cooked poultry (skinless), fish, shellfish, lean beef (sirloin, flank or round) or pork tenderloin Cottage cheese non-fat $\frac{3}{4}$ c. Nonfat, plain, Greek yogurt, 8 oz. Egg 2, or 6 whites, or $\frac{3}{4}$ c. egg substitute Beans – $\frac{1}{2}$ c. cooked: black, garbanzo, kidney, lima, navy, pinto, soy, white, lentils, etc. Quinoa $\frac{1}{2}$ c. cooked Seitan (plain), 4 oz. Tofu (lite , firm or extra firm) 9 oz. Tempeh 2 oz. or $\frac{1}{3}$ c. cooked Vegan alternatives: 3 oz. veggie burger, soy protein, etc.	
Vegetable (non-starchy): 1 serving is $\frac{1}{2}$ cup cooked or 1 cup raw	Leafy Salad: 1 serving = 2 cups leafy greens plus $\frac{1}{2}$ cup raw vegetable Salad Dressing: 1 Tbsp of a natural ingredients are recommended: i.e. lemon juice, lime juice, balsamic vinegar, unseasoned rice vinegar, or other vinegars, mustard, salsa, pico de gallo, olive oil/vinegar, or a commercial salad dressing with minimal ingredients.
Artichoke Asparagus Bamboo shoots Beans (wax, green) Beets Bell Pepper, all colors Broccoli* Brussels Sprouts* Cabbage* Cauliflower* Carrot Celery Cucumber Eggplant Lettuce, all varieties, (romaine, butter, etc.) Jicama Kohlrabi Leeks Turnips Water chestnuts Mung bean sprouts Mushrooms	Okra Onions Pea Pods Peppers, all kinds Radishes Seaweed, cooked Spinach Summer Squash (zucchini, yellow) Tomatoes Leafy Greens: arugula, beet greens, bibb, bok choy, Boston leaf, butter head, cabbage, collard greens, kale, loose leaf, romaine, spinach, watercress, etc. *iceberg not recommended for leafy greens, but okay to count as a vegetable *Adding in new types of fibers can cause excess flatulence until the GI tract adapts. If you have uncomfortable gas, try limiting or avoiding these vegetables. Switch to the other vegetable choices until your body adjusts. Also, cooked vegetables may be better tolerated than raw vegetables.

Grain/Legume/Starchy Vegetable 1 serving approximately 100 calories		
Barley ½ c. cooked Beans ½ c. cooked: black, garbanzo, kidney, lentil, lima, navy, pinto, great white, soy, etc. Bread, whole-grain 1 slice Cereal (Fiber >5 g. per serving), ½ c. Corn ½ c. raw or cooked Couscous ⅓ c. cooked Grits ⅓ c. cooked Millet ½ cooked Oats ½ c. cooked Pasta ½ c. cooked Pita ½ of 6-inch round Polenta ½ c. cooked Popcorn air popped, 3 c. Potato ½ c. cooked (Russet, golden, sweet, yam, etc.) Quinoa ½ c. cooked Rice ⅓ c. cooked Rice cakes, multi-grain, 2 peas, ½ c. cooked		Squash winter (acorn, butternut), ½ c. cooked Tempeh 4 oz. or ⅔ c. cooked Tortilla corn or whole grain 1, 6-inch round Wild rice ⅓ c. cooked Yam ½ c. cooked High fiber options help to maintain gut health and curb appetite. During PFE phases choose whole grain options and avoid processed starches like white bread, biscuits, crackers, etc. Try to choose options that have 3 or more grams of fiber per serving. Beans and Tempeh are slightly higher in calories (about 125 calories per half cup, but they are a great source of protein and contain fibers that help keep you feel full. Be sure to add in slowly to avoid excess gas.
Fruit: One serving approximately 60 calories	Fruits not on this list use portion equaling approximately 60 calories	
Apple 1 small (tennis ball) Apricots 3 Banana 1 small (4-6 in) Berries 1 c. Grapefruit ½ Grapes 15 Kiwi 3	Melon 1 c., (watermelon, cantaloupe, etc.) Orange 1 medium Nectarine 1 medium Peach 1 medium Pear 1 medium Pineapple 1 c. Plums 2	
Fat: One serving is approximately 45 calories		
Avocado ⅓ whole Nuts: 6 almonds, 2 Brazil nuts, 8 peanuts, 4-6 pecan halves, 1 tbsp. pignolias (pine nuts), 10 pistachios, or 4 walnut halves Oil 1 tsp. avocado, olive oil, or Canola (avoid vegetable oils) Olives 10 small Seeds 1 tbsp: pumpkin (pepitas), sesame, or sunflower		
Milk/Plant-Milk/Yogurt: One serving is approximately 100 calories		
Nonfat Milk, 1 c. Nonfat or Light Soymilk, 1 c. Oat Milk 1 c. Yogurt or plant-based yogurt (100 calories and about 10g. of protein or more and less than 10 g. sugar per serving)		Okay to substitute this food group. If you choose to eliminate milk/soymilk or yogurt, consume: 1 additional serving of Bean/Grains/Starchy Veg. instead.

PLANT BASED: Transition Off Meal Replacements

Plant-Based NUTRIMED (500 cal/day) –Transitioning off meal replacements

Food Group	Phase 1	Phase 2	Phase 3	Full Food ready for Maintenance
Meal Replacements	4	3	1	0
Plant-Based Protein	2	3	3	4
Vegetables	2	4	4	5
Leafy Salad	2 c. leafy greens ½ c raw veggies (non-starchy) + 20 Cal dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 20 Cal dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 20 Cal dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 20 Cal dressing
Grains/ Starchy Vegetable	0	0	1	2
Fruit	0	1	2	2-3
Fat	1	2	4	6
Plant Milk/Yogurt	0	0	1	1-2
Vitamin/Mineral		Recommended	Recommended	Recommended
Calories	755	895	1020	1205-1355

Phase 1:
Continue to drink 120-150 total oz of fluid a day counting the fluid you use in your MR

Beginning Phase 2:
Reduce fluids to 64 oz/day in addition to the fluids used in your MR

Beginning Phase 3: You may continue taking a fiber supplement; however, it is now optional.

STOP taking Potassium and doing bi-weekly lab work once you are on full food (or as directed by your physician)

Plant-Based NUMETRA (800 cal/d) –Transitioning off meal replacements

Food Group	Phase 1	Phase 2	Phase 3	Full Food ready for Maintenance
Meal Replacements	4	3	1	0
Plant-Based Protein	2	3	4	4
Vegetable	2	4	4	5
Leafy Salad	2 c. leafy greens ½ c raw veggies (non-starchy) + 20 Cal dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 20 Cal dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 20 Cal dressing	2 c. leafy greens ½ c raw veggies (non-starchy) + 20 Cal dressing
Grains/ Starchy Vegetable	0	0	1	2
Fruit	0	1	2	2-3
Fat	1	2	4	6
Plant Milk/Yogurt	0	0	1	1-2
Vitamin/Mineral		Recommended	Recommended	Recommended
Calories	1040	1075	1165	1205-1355







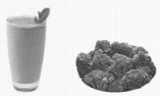



Phase 1:
Continue to drink 120-150 total oz of fluid a day counting the fluid you use in your MR

Beginning Phase 2:
Reduce fluids to 64 oz/day in addition to the fluids used in your MR











Beginning Phase 3: You may continue taking a fiber supplement; however, it is now optional.

STOP taking Potassium and doing bi-weekly lab work once you are on full food (or as directed by your physician)





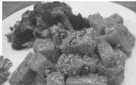







Phase 1 Plant-Based Plan, NUTRIMED and NUMETRA

FOOD	NUTRIMED				NUMETRA	FOOD
Meal Replacements	4		7:30 am		4	Meal Replacements
Plant-Based Protein	2				2	Plant-Based Protein
Vegetable	2		10:30 am		2	Vegetable
Leafy Salad	1				1	Leafy Salad
Grains, Starchy Vegetable	0		1:30 pm		0	Grains/Starchy Vegetable
Fruit	0				0	Fruit
Healthy Fat	1		4:30 pm		1	Fat
Plant Milk/Yogurt	0				0	Plant Milk/Yogurt
Vitamin/Mineral	-		7:30 pm		-	Vitamin/Mineral
Calories	755				1040	Calories


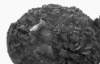


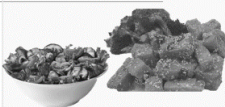



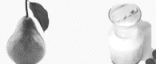
Phase 2 Plant-Based, NUTRIMED and NUMETRA

FOOD	NUTRIMED (500 cal)				NUMETRA (800 cal)	FOOD
Meal Replacements	3		7:30 am		3	Meal Replacements
Plant-Based Protein	3				3	Plant-Based Protein
Vegetable	4		10:30 am		4	Vegetable
Leafy Salad	1				1	Leafy Salad
Grains/ Starchy Vegetables	0		1:30 pm		0	Grains/ Starchy Vegetables
Fruit	1				1	Fruit
Fat	2		4:30 pm		2	Fat
Plant Milk/ Yogurt	0				0	Plant Milk/ Yogurt
Vitamin/Mineral	Recommended		7:30 pm		Recommended	Vitamin/Mineral
Calories	895				1075	Calories

Phase 3 Plant-Based Plan, NUTRIMED and NUMETRA

FOOD	NUTRIMED				NUMETRA	FOOD
Meal Replacements	1		7:30 am		1	Meal Replacements
Plant-Based Protein	3				4	Plant-based Protein
Vegetable	4				4	Vegetable
Leafy Salad	1		11:30 pm		1	Leafy Salad
Grains/ Starchy Vegetables	1		4:30 pm		1	Grains/ Starchy Vegetables
Fruit	2				2	Fruit
Fat	4				4	Fat
Plant Milk/Yogurt	1		7:30 pm		1	Plant Milk/Yogurt
Vitamin/Mineral	Recommended				Recommended	Vitamin/Mineral
Calories	1020				1165	Calories

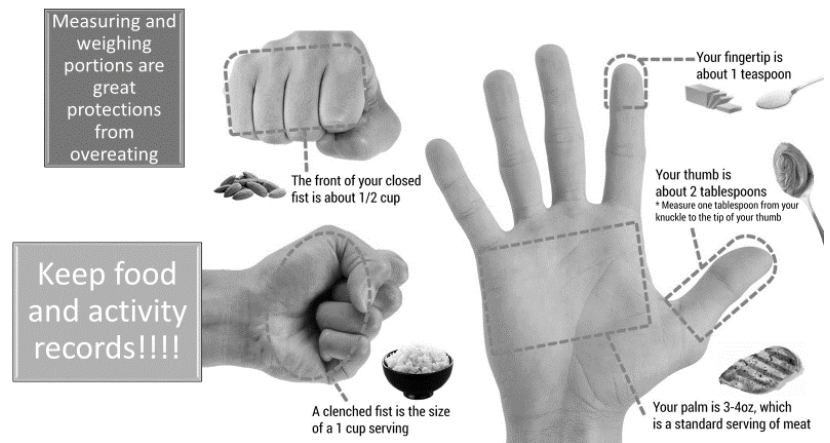
Plant-Based Full Food

Food	NUTRIMED (500 cal)				NUMETRA (800)	Food
Meal Replacements	0	Oatmeal, Fruit, Nuts and Milk Alternative	7:30 am		0	Meal Replacements
Plant-Based Proteins	4				4	Plant-based Protein
Vegetable	5				5	Vegetable
Leafy Salad	1	Lentils and Vegetables, with Fruit and Avocado	11:30 pm		1	Leafy Salad
Grains/Starchy Vegetables	2				2	Grains/Starchy Vegetables
Fruit	2-3				2-3	Fruit
Fat	6	Salad with Seitan, Vegetables and Seeds	4:30 pm		6	Fat
Plant-milk /Yogurt	1-2				1-2	Plant-milk /Yogurt
Vitamin/Mineral		Fruit with Milk Alternative	7:30 pm			Vitamin/Mineral
Calories	1205-1355				1205-1355	Calories

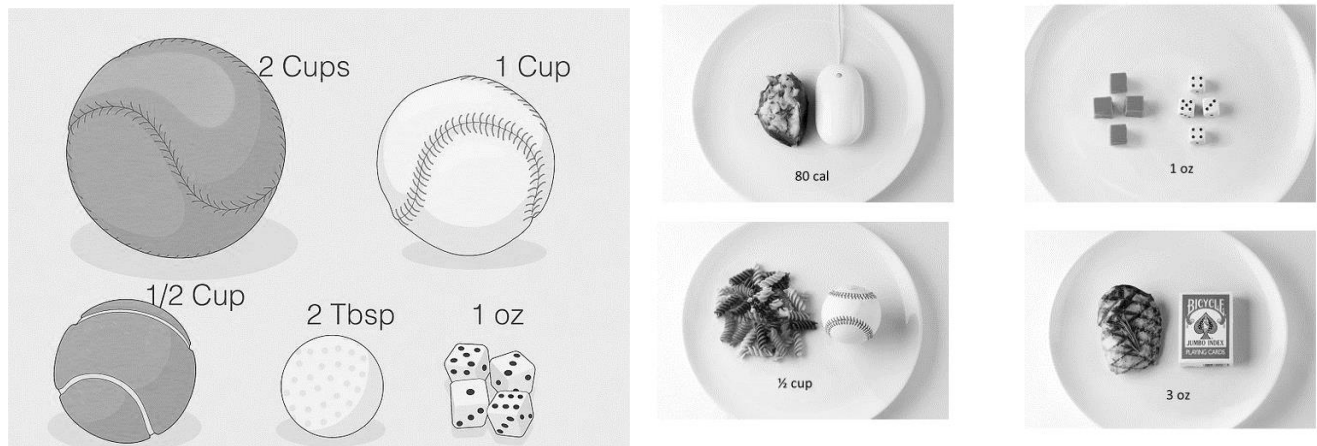
Estimating Serving Size

One way to estimate portion sizes of foods is by using your hands. Since you always have your hands with you, it's a very convenient measuring tool even if you're out at fancy restaurant. However, everyone's hands are different, so practice measuring out portions first and compare them to your hands to get an idea of what they should look like. Use these guidelines when trying to estimate a portion size:

- Typically, 2 cups will fit into your hands if they were cupped together.
- 1 cup or 8 oz is equivalent to your fist. If you have large hands, your fist might equal 10 oz or slightly more than a cup. Small hands might only equal 6 oz.
- 1/2 cup or about 4 oz is the size of one cupped palm.
- 3 oz is about the size of an average palm.
- 1 tablespoon is the size of the tip of your thumb.
- 1 teaspoon is the size of the tip of your pointer finger.



Another way to estimate serving sizes is to use objects to help give you a better visual of portion sizes, consider these...



The Plate Method



Sample Menus

Option A: You do not have to eat according to the sample times, or the specific foods listed. These are to give you an idea of what a day of eating could look like. Just be sure to eat every three to four hours.

Modified Plan 5 Meal Replacements (MR) 1 protein 1 vegetable, cooked or raw 2 ½ cups leafy greens	6 a.m. – Meal Replacement (MR) 9 a.m. – MR 12:30 p.m. – MR, ½ c. raw snow peas, ½ c. raw cauliflower 4 p.m. – 3 oz. chicken breast 7:30 p.m. – MR
PHASE 1 3 Meal Replacements (MR) 2 protein 2 vegetable, cooked or raw 2 ½ c. leafy greens 1 serving whole bean, grain, or starchy vegetables 1 serving fat	6 a.m. – Meal Replacement (MR) 9 a.m. – ¾ c. non-fat cottage cheese 12:30 p.m. – 3 oz. cooked tuna, 8 olives, 1 c. cooked broccoli 4 p.m. – MR, ½ c. cooked butternut squash 7:30 p.m. – MR
PHASE 2 2 Meal Replacements (MR) 2 proteins 4 vegetable, cooked or raw 2 ½ c. leafy greens 2 bean/grain/starchy vegetable 1 fruit 2 fat Begin multiple vitamin/mineral	6 a.m. – Meal Replacement (MR) 9 a.m. – 6 egg whites, ½ c. combo of sautéed onions, mushrooms and broccoli 12:30 p.m. – 1 cup uncooked spinach, ½ c shredded carrot, ½ c shredded beets, ⅛ avocado, fat-free dressing, apple, 100 cals whole grain crackers 4 p.m. – 3 oz chicken breast, ½ c potato, ½ c. cooked cabbage, 1 tsp. olive oil 7:30 p.m. – Meal Replacement
PHASE 3 1 Meal Replacement (MR) 3 protein 5 vegetable, cooked or raw 2 ½ c. leafy greens 2 bean/grain/starchy vegetable 2 fruit 3 fat 1 milk/Plant-milk or yogurt Multiple vitamin and mineral	6 a.m. – Meal Replacement (MR) 1 c. berries 9 a.m. – ¾ c. nonfat cottage cheese with 1 c. pineapple 12:30 p.m. – 2 c. romaine, 1 c. raw broccoli, ½ c. garbanzo beans, 1 tbsp. olive oil w/ balsamic vinegar 4 p.m. – ½ c. butternut squash, 1 c. cooked chard, 3 oz. salmon 7:30 p.m. – 1 c. nonfat Greek yogurt, 12 almonds Note: garbanzo beans count as a protein and a grain/starch/legume in this menu
FULL FOOD (1230-1460 calories) 4 protein 5 + vegetable, cooked or raw 2 ½ c. leafy greens 2 to 3 beans/grains/starchy vegetables 2 to 3 servings fruit 4 servings fat 1 to 2 servings milk/soy milk or yogurt Multiple vitamin and mineral	6 a.m. – ½ c. cooked quinoa w/ 1 c. nonfat milk, 1 small banana 9 a.m. – 6 egg whites, 1 c. combo of raw tomatoes, cucumber, pepperoncini's, 1 c. romaine, ⅛ avocado 12:30 p.m. – 3 oz. veggie burger, 1 medium apple 4 p.m. – 6 oz. tofu, 2 c. combo of sautéed onions, broccoli, purple cabbage and carrots 7:30 p.m. – 1 c. berries, 8 peanuts Note: quinoa and veggie burger each count as a protein and a grain/starch/legume in this menu

Sample Menu Option B

MODIFIED PLAN 5 Meal Replacements (MR) 1 protein 1 vegetables, cooked or raw 2 ½ c. leafy greens	8 a.m. – Meal replacement Noon – 2 Meal replacement 3:30 p.m. – Meal replacement 6:30 p.m. – 3 oz chicken breast, ½ c. cooked green beans 10 p.m. – Meal Replacement
PHASE 1 3 Meal Replacements (MR) 2 protein 2 vegetables, cooked or raw 2 ½ c. leafy greens 1 beans/grain/starchy vegetable 1 fat	8 a.m. – Meal Replacement Noon – 3 oz. turkey breast, 1 c. salad w/1 tsp. olive oil 3:30 p.m. — Meal Replacement 6:30 p.m. – 3 oz. veggie burger, ½ c. cooked winter squash, ½ c. cooked snowpeas 10 p.m. – Meal Replacement
PHASE 2 2 Meal Replacements (MR) 2 protein 4 vegetable, cooked or raw 2 ½ c. leafy greens 2 beans/grain/ starchy vegetables 1 fruit 2 fat Begin multiple vitamin and mineral	8 a.m. –Meal replacement, 1 c. berries Noon – 3 oz. veggie burger, 100 calorie whole wheat bun, 2 c. salad: leafy greens, cucumber, tomatoes, bell peppers w/fat-free dressing 3:30 p.m. – 1 c berries, 6 almonds 6:30: p.m. – 3 oz. grilled fish, 1 c. cooked zucchini, onions and mushrooms, ½ c. brown rice, ⅛ avocado 10 p.m. – Meal Replacement
PHASE 3 1 Meal Replacement (MR) 3 protein 5 vegetable, cooked or raw 2 ½ c. leafy greens 2 beans/grain/starchy vegetables 2 fruit 3 fat 1 milk/plant- milk or yogurt Multiple vitamin and mineral	8 a.m. – 6 egg white omelet w/ 1 c. sautéed mushrooms, onions, and spinach, 1 small whole wheat tortilla, 1 small banana Noon – 3 oz. tuna, 1 slice whole grain bread, 1 c. celery and carrots 3:30 p.m. – 1 orange, 12 almonds, 1 c. nonfat Greek yogurt 6:30 p.m. – 3 oz. grilled chicken, 1 c. steamed broccoli, 1 Tbsp. olive oil 10 p.m. — Meal Replacement
FULL FOOD (1230-1460 calories) 0 Meal Replacements (MR) 4 protein 5 + vegetable, cooked or raw 2 ½ c. leafy greens 2 to 3 beans/grain/starchy vegetables 2-3 fruit 4 fat 1-2 milk/plant-milk/yogurt Multiple vitamin and mineral	8 a.m. – 1 c. berries, ½ c. oatmeal, 1 c. light soymilk Noon – salad w/ ½ c. kidney beans, 2 c. leafy greens, 1 c. mixed raw veggies, ¼ avocado w/fat-free dressing 3:30 p.m. – 8 walnut halves, 1 medium apple, 1 c. nonfat Greek yogurt 6:30 p.m. – 3 oz. salmon, ½ c. cooked zucchini, ½ c. cooked cauliflower, ½ c. winter squash, 10 p.m. – ¾ c. nonfat cottage cheese with grilled tomatoes and/or peppers Note: kidney beans count as a protein and a grain/starch/legume in this menu