

## STAGE I Clinical Pathway

STAGE I

Element	Week 1
<p><b>Group Support</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> In first group, briefly review group rules: no judgment, no advice (unless solicited), etc.; and review the group process: talk about feelings, listen actively and with empathy, etc.</li> <li><input type="checkbox"/> Baseline assessment documented in IDP.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Demonstrates a willingness to participate in group  <b>Y N (IDP)</b> — GSRS <math>\geq</math> 3 score = _____</p>
<p><b>Stress Management (SM)</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess PAL form. Adherence formula is:                             <ul style="list-style-type: none"> <li>• Number of days practiced for the week and divide by 7.</li> <li>• Number of minutes practiced for the week and divide by 420.</li> <li>• Add the 2 percentages and divide by 2.</li> </ul> </li> <li><input type="checkbox"/> Baseline assessment documented in IDP.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Introduce the five components of SM both didactically and experientially.</li> <li><input type="checkbox"/> Discuss the expectation of adherence.</li> <li><input type="checkbox"/> Identify available SM resources.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Verbalizes understanding of the importance of SM in daily life  <b>Y N (IDP)</b> — Demonstrates the importance of being comfortable and properly adjusts  <b>Y N (IDP)</b> — Participates fully in SM class  <b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week</p>
<p><b>Exercise</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess exercise response to: HR, BP, RPE and symptoms; measure weight.</li> <li><input type="checkbox"/> Monitored/unmonitored exercise session onsite following current exercise progression protocols as per AACVPR, ACSM, AHA.</li> <li><input type="checkbox"/> Baseline assessment is documented in IDP.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Verbalizes understanding of use of RPE scale  <b>Y N (IDP)</b> — Verbalizes understanding of minimum level of exercise adherence  <b>Y N (IDP)</b> — Verbalizes plan for home exercise and how to modify home Program</p>
<p><b>Nutrition</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess weekly food diary and provide feedback.</li> <li><input type="checkbox"/> Deliver education per suggested Stage I teaching plan.</li> <li><input type="checkbox"/> Distribute appropriate handouts per nutrition resources.</li> <li><input type="checkbox"/> Review Ornish-friendly food display, which is displayed through Stage I.</li> <li><input type="checkbox"/> Baseline assessment documented in IDP.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Verbalizes understanding of Nutrition PAL form and Weekly Food Diary  <b>Y N (IDP)</b> — Verbalizes understanding of Nutrition Spectrum- Reversal Program guidelines  <b>Y N (IDP)</b> — Aware of supplements to include in daily regimen  <b>Y N (IDP)</b> — Achieves nutrition adherence of 75% or greater</p>

**Check all lectures and teaching activities delivered:**

*It is understood that the participant fully understands the material unless indicated in the IDP.*

New Hope, New Choices                       Introduction to Stress Management Spectrum/Meditation

Identifying Ornish-Friendly Foods       Introduction to Group Support Spectrum

How the Program Works                       Introduction to Nutrition Spectrum

Introduction to Exercise Spectrum

**Check if given to participant:**     Participant Manual     Stress Management CD     Ornish Reversal Book

<b>STAGE I- Clinical Pathway</b>	
<b>Element</b>	<b>Week 2</b>
<b>Group Support</b> PAL% _____  Initials/date _____	<b>ASSESSMENT/ EDUCATION:</b> <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Successfully participates in group as demonstrated by active listening and/or talking. <b>Y N (IDP)</b> — GSRS $\geq$ 3 score = _____
<b>Stress Management (SM)</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form. Adherence formula is: <ul style="list-style-type: none"> <li>• Number of days practiced for the week and divide by 7</li> <li>• Number of minutes practiced for the week and divide by 420</li> <li>• Add the 2 percentages and divide by 2</li> </ul> <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Introduce new poses and techniques per instructor manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates an understanding of comfort using props, if needed <b>Y N (IDP)</b> — Enters/exits quietly and demonstrates focus during SM class <b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week
<b>Exercise</b> PAL% _____  Initials/date _____	<b>ASSESSMENT/INTERVENTION:</b> <input type="checkbox"/> Assess exercise response: HR, BP, RPE, and symptoms; measure weight. <input type="checkbox"/> Assess PAL form. <input type="checkbox"/> Modify home exercise program if needed.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates a minimum of 180 min. exercise as logged on PAL
<b>Nutrition</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess weekly food diary/PAL form and provide feedback.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual. <input type="checkbox"/> Provide additional instruction on completing nutrition forms and diaries, if needed. <input type="checkbox"/> Review appropriate nutrition handouts in participant manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Adheres to major guidelines with overall score of 80% or higher <b>Y N (IDP)</b> — Verbalizes understanding adherence score and identifies areas to improve <b>Y N (IDP)</b> Verbalizes understanding of the Reversal Food Guide Pyramid <b>Y N (IDP)</b> — Able to identify both Ornish-friendly and non-friendly foods <b>Y N (IDP)</b> — Attempts to include foods from major food groups in eating plan (per weekly diary) i.e. whole grains, fruits, vegetables, protein and soy

**Check all lectures and education delivered:**

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| <input type="checkbox"/> Completing Your PAL Forms<br><input type="checkbox"/> Listening with Empathy and Compassion<br><input type="checkbox"/> Responsibility<br><input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program<br><input type="checkbox"/> Cooking Demonstration (circle one): 1 2<br><input type="checkbox"/> Eating Out, Traveling and Socializing<br><input type="checkbox"/> An Integrated Approach to Weight Management<br><input type="checkbox"/> Overcoming Barriers to Stress Management<br><input type="checkbox"/> Grocery Store Tour | <input type="checkbox"/> Transitions: What is Behind and Ahead<br><input type="checkbox"/> Potluck Meal (circle one): 1 2 3<br><input type="checkbox"/> Shopping and Meal Planning<br><input type="checkbox"/> Hitting the Wall<br><input type="checkbox"/> Advanced Exercise<br><input type="checkbox"/> Advanced Nutrition<br><input type="checkbox"/> Stress Management & Religion |
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Name: \_\_\_\_\_ Date: \_\_\_\_\_ Cohort: \_\_\_\_\_

**Team members present for weekly team meeting/review:**

- NCM    MD    RD    EP    GSF    SMS    AA    PD

Element	Week 3
<b>Group Support</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Successfully participates in group as demonstrated by active listening and/or talking. <b>Y N (IDP)</b> — Demonstrates/verbalizes an awareness of feelings. <b>Y N (IDP)</b> — GSRS $\geq 3$ score = _____
<b>Stress Management (SM)</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form. Adherence formula is: <ul style="list-style-type: none"> <li>• Number of days practiced for the week and divide by 7</li> <li>• Number of minutes practiced for the week and divide by 420</li> <li>• Add the 2 percentages and divide by 2</li> </ul> <input type="checkbox"/> Raise awareness of potential improper breathing patterns. <input type="checkbox"/> Raise awareness of possible tension in the body during poses.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Introduce of new poses and techniques per instructor manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates more comfort during and between poses using props, if needed <b>Y N (IDP)</b> — Enters/exits quietly and demonstrates focus during SM class <b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week
<b>Exercise</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess exercise response: HR, BP, RPE, and symptoms; measure weight. <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates a minimum of 180 min. exercise as logged in PAL <b>Y N (IDP)</b> — Demonstrates accuracy in taking own pulse without assistance
<b>Nutrition</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess weekly food diary/PAL form and provide feedback.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual. <input type="checkbox"/> Review appropriate nutrition handouts in participant manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Adheres to major guidelines with overall score of 85% or higher <b>Y N (IDP)</b> — Accurately records majority of foods in appropriate food groups <b>Y N (IDP)</b> — Accurately records serving sizes for majority of foods <b>Y N (IDP)</b> — Includes foods from major food groups in eating plan (per weekly diary) i.e. whole grains, fruits, vegetables, protein and soy

STAGE I

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| <input type="checkbox"/> Completing Your PAL Forms                          | <input type="checkbox"/> Eating Out, Traveling and Socializing       |
| <input type="checkbox"/> Listening with Empathy and Compassion              | <input type="checkbox"/> An Integrated Approach to Weight Management |
| <input type="checkbox"/> Responsibility                                     | <input type="checkbox"/> Overcoming Barriers to Stress Management    |
| <input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program | <input type="checkbox"/> Transitions: What is Behind and Ahead       |
| <input type="checkbox"/> Cooking Demonstration (circle one): 1   2          |  |

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Cohort: \_\_\_\_\_

- Potluck Meal (circle one): 1 2 3
- Shopping and Meal Planning
- Hitting the Wall
- Grocery Store Tour

- Advanced Exercise
- Advanced Nutrition
- Stress Management & Religion

**Team members present for weekly team meeting/review:**

- NCM    MD    RD    EP    GSF    SMS    AA    PD

Element	Week 4
<b>Group Support</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates/verbalizes an awareness of feelings <b>Y N (IDP)</b> — Demonstrates ability to listen attentively <b>Y N (IDP)</b> — GSRSS $\geq$ 3 score = _____
<b>Stress Management (SM)</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form. Adherence formula is: <ul style="list-style-type: none"> <li>• Number of days practiced for the week and divide by 7</li> <li>• Number of minutes practiced for the week and divide by 420</li> <li>• Add the 2 percentages and divide by 2</li> </ul> <input type="checkbox"/> Notice the ability to lie still during progressive relaxation.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Introduce concept of awareness and using practical application of SM techniques daily. <input type="checkbox"/> Emphasize conscious awareness and connection with inner feelings. <input type="checkbox"/> Continue to introduce new poses and techniques per instructor manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Verbalizes what effects the SM practice is having on him/her (i.e. physical, emotional or spiritual) <b>Y N (IDP)</b> — Demonstrates comfort with basic breathing practices <b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week
<b>Exercise</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess exercise response: HR, BP, RPE and symptoms; measure weight. <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates a minimum of 180 min. exercise as logged in PAL <b>Y N (IDP)</b> — Verbalizes difference between exercise and activity <b>Y N (IDP)</b> — Meets THR range consistently
<b>Nutrition</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess weekly food diary/PAL forms and provide feedback.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual. <input type="checkbox"/> Review appropriate nutrition handouts in participant manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Adheres to major guidelines with overall score of 90% or higher <b>Y N (IDP)</b> — Identifies areas for improvement and has a plan to achieve <b>Y N (IDP)</b> — Accurately records foods and serving sizes majority of the time <b>Y N (IDP)</b> — Selects foods from major food groups in eating plan <b>Y N (IDP)</b> — Includes MV with minerals and omega 3 FA supplements daily

STAGE I

**Check all lectures and education delivered:**

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Name: \_\_\_\_\_ Date: \_\_\_\_\_ Cohort: \_\_\_\_\_

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| <input type="checkbox"/> Completing Your PAL Forms                          | <input type="checkbox"/> Transitions: What is Behind and Ahead |
| <input type="checkbox"/> Listening with Empathy and Compassion              | <input type="checkbox"/> Potluck Meal (circle one): 1 2 3      |
| <input type="checkbox"/> Responsibility                                     | <input type="checkbox"/> Shopping and Meal Planning            |
| <input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program | <input type="checkbox"/> Hitting the Wall                      |
| <input type="checkbox"/> Cooking Demonstration (circle one): 1 2            | <input type="checkbox"/> Advanced Exercise                     |
| <input type="checkbox"/> Eating Out, Traveling and Socializing              | <input type="checkbox"/> Advanced Nutrition                    |
| <input type="checkbox"/> An Integrated Approach to Weight Management        | <input type="checkbox"/> Stress Management & Religion          |
| <input type="checkbox"/> Overcoming Barriers to Stress Management           |  |
| <input type="checkbox"/> Grocery Store Tour                                 |  |

**Team members present for weekly team meeting/review:**

- NCM    MD    RD    EP    GSF    SMS    AA    PD

STAGE I

Element	Week 5
<b>Group Support</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates/verbalizes an awareness of feelings <b>Y N (IDP)</b> — Demonstrates willingness to share feelings with group <b>Y N (IDP)</b> — Demonstrates ability to listen attentively <b>Y N (IDP)</b> — GSRS $\geq$ 4 score = _____
<b>Stress Management (SM)</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form. Adherence formula is: <ul style="list-style-type: none"> <li>• Number of days practiced for the week and divide by 7</li> <li>• Number of minutes practiced for the week and divide by 420</li> <li>• Add the 2 percentages and divide by 2</li> </ul> <input type="checkbox"/> Assess ability to sit quietly and be still during meditation.  <b>INTERVENTION/ EDUCATION:</b> <input type="checkbox"/> Review physiological and psychological benefits of poses. <input type="checkbox"/> Lengthen the duration of poses and sitting. <input type="checkbox"/> Emphasize that internal peacefulness and relaxation come from within. <input type="checkbox"/> Continue to introduce new poses/techniques per instructor manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Verbalizes at least one change in physical comfort since Program began <b>Y N (IDP)</b> — Demonstrates increased comfort with physical practice since Program began <b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week
<b>Exercise</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess exercise response to: HR, BP, RPE and symptoms; measure weight. <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates at least 180 min. aerobic exercise as logged in PAL

<p><b>Nutrition PAL%</b> _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <p><input type="checkbox"/> Assess weekly food diary/PAL forms and provide feedback.</p> <p><b>INTERVENTION/EDUCATION:</b></p> <p><input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual.</p> <p><input type="checkbox"/> Review appropriate nutrition handouts in participant manual.</p> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Adheres to major guidelines with overall score of 90% or higher</p> <p><b>Y N (IDP)</b> — Limits refined grains, sweets and alcohol</p> <p><b>Y N (IDP)</b> — Selects foods from major food groups in eating plan</p> <p><b>Y N (IDP)</b> — Includes MV with minerals and omega 3 FA supplements daily</p> <p><b>Y N (IDP)</b> — Consumes no caffeine</p>
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| <input type="checkbox"/> Completing Your PAL Forms                          | <input type="checkbox"/> Transitions: What is Behind and Ahead |
| <input type="checkbox"/> Listening with Empathy and Compassion              | <input type="checkbox"/> Potluck Meal (circle one): 1 2 3      |
| <input type="checkbox"/> Responsibility                                     | <input type="checkbox"/> Shopping and Meal Planning            |
| <input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program | <input type="checkbox"/> Hitting the Wall                      |
| <input type="checkbox"/> Cooking Demonstration (circle one): 1 2            | <input type="checkbox"/> Advanced Exercise                     |
| <input type="checkbox"/> Eating Out, Traveling and Socializing              | <input type="checkbox"/> Advanced Nutrition                    |
| <input type="checkbox"/> An Integrated Approach to Weight Management        | <input type="checkbox"/> Stress Management & Religion          |
| <input type="checkbox"/> Overcoming Barriers to Stress Management           |  |
| <input type="checkbox"/> Grocery Store Tour                                 |  |

**Team members present for weekly team meeting/review:**

- NCM    MD    RD    EP    GSF    SMS    AA    PD

Element	Week 6
<p><b>Group Support</b></p> <p>PAL% _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <p><input type="checkbox"/> Assess PAL form.</p> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Demonstrates/verbalizes awareness of feelings</p> <p><b>Y N (IDP)</b> — Demonstrates willingness to share feelings with group</p> <p><b>Y N (IDP)</b> — Demonstrates ability to listen attentively</p> <p><b>Y N (IDP)</b> — Demonstrates ability to express empathy with others</p> <p><b>Y N (IDP)</b> — GSRS <math>\geq</math> 4 score = _____</p>
<p><b>Stress Management (SM) PAL%</b> _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <p><input type="checkbox"/> Assess PAL form; determine adherence using standard formula.</p> <p><b>INTERVENTION/EDUCATION:</b></p> <p><input type="checkbox"/> Continue to introduce and refine poses/techniques per instructor manual.</p> <p><input type="checkbox"/> Decrease time between poses.</p> <p><input type="checkbox"/> Emphasize awareness of how the body changes daily/weekly.</p> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Identifies problem areas in SM, if any</p> <p><b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week</p>

<p><b>Exercise</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess exercise response to: HR, BP, RPE and symptoms; measure weight.</li> <li><input type="checkbox"/> Assess PAL form.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Introduce strength training.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Demonstrates at least 180 min. aerobic exercise as logged in PAL</p> <p><b>Y N (IDP)</b> — Adheres to minimum strength training requirements of 2 days/week</p>
<p><b>Nutrition</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess weekly food diary/PAL forms and provide feedback.</li> <li><input type="checkbox"/> Assess continued areas of focus (i.e. increased weight loss, servings and portions, variety, other: _____)</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual.</li> <li><input type="checkbox"/> Review appropriate nutrition handouts in participant manual.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Adheres to major guidelines with overall score of 95% or higher</p> <p><b>Y N (IDP)</b> — Meets/exceeds individual weight loss goals (1-2# per week)</p> <p><b>Y N (IDP)</b> — Does not exclude any major Reversal Program food groups</p> <p><b>Y N (IDP)</b> — Identifies progress, and updates areas of focus for next 6 weeks</p> <p><b>Y N (IDP)</b> — Takes supplements as recommended in Nutrition Guidelines</p>

Check all lectures and education delivered:

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| <ul style="list-style-type: none"> <li><input type="checkbox"/> Completing Your PAL Forms</li> <li><input type="checkbox"/> Listening with Empathy and Compassion</li> <li><input type="checkbox"/> Responsibility</li> <li><input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program</li> <li><input type="checkbox"/> Cooking Demonstration (circle one): 1 2</li> <li><input type="checkbox"/> Eating Out, Traveling and Socializing</li> <li><input type="checkbox"/> An Integrated Approach to Weight Management</li> <li><input type="checkbox"/> Overcoming Barriers to Stress Management</li> <li><input type="checkbox"/> Grocery Store Tour</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Transitions: What is Behind and Ahead</li> <li><input type="checkbox"/> Potluck Meal (circle one): 1 2 3</li> <li><input type="checkbox"/> Shopping and Meal Planning</li> <li><input type="checkbox"/> Hitting the Wall</li> <li><input type="checkbox"/> Advanced Exercise</li> <li><input type="checkbox"/> Advanced Nutrition</li> <li><input type="checkbox"/> Stress Management &amp; Religion</li> </ul> |
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**Team members present for weekly team meeting/review:**

- NCM     MD     RD     EP     GSF     SMS     AA     PD

Element	Week 7
<p><b>Group Support</b></p> <p>PAL% _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess PAL form.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Demonstrates/verbalizes awareness of feelings</p> <p><b>Y N (IDP)</b> — Demonstrates willingness to share feelings with group</p> <p><b>Y N (IDP)</b> — Demonstrates ability to listen attentively</p> <p><b>Y N (IDP)</b> — Demonstrates ability to express empathy with others</p> <p><b>Y N (IDP)</b> — GSRS ≥ 4 score = _____</p>

<b>Stress Management (SM) PAL%</b> _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form; determine adherence using standard formula.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Encourage the assimilation of new techniques into practice and daily life. <input type="checkbox"/> Encourage personalizing imagery techniques. <input type="checkbox"/> Introduce and refine poses/techniques per instructor manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Describes a personal imagery technique or experience with imagery <b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week
<b>Exercise PAL%</b> _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess exercise response to: HR, BP, RPE and symptoms; measure weight. <input type="checkbox"/> Assess PAL form.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Modify home exercise program, if needed.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates at least 180 min. exercise as logged in PAL <b>Y N (IDP)</b> — Adheres to minimum strength training requirements of 2 days/week
<b>Nutrition PAL%</b> _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess weekly food diary/PAL form and provide feedback.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual. <input type="checkbox"/> Review appropriate nutrition handouts in participant manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Adheres to major guidelines with overall score of 95% or higher

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| <input type="checkbox"/> Completing Your PAL Forms<br><input type="checkbox"/> Listening with Empathy and Compassion<br><input type="checkbox"/> Responsibility<br><input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program<br><input type="checkbox"/> Cooking Demonstration (circle one): 1 2<br><input type="checkbox"/> Eating Out, Traveling and Socializing<br><input type="checkbox"/> An Integrated Approach to Weight Management<br><input type="checkbox"/> Overcoming Barriers to Stress Management<br><input type="checkbox"/> Grocery Store Tour | <input type="checkbox"/> Transitions: What is Behind and Ahead<br><input type="checkbox"/> Potluck Meal (circle one): 1 2 3<br><input type="checkbox"/> Shopping and Meal Planning<br><input type="checkbox"/> Hitting the Wall<br><input type="checkbox"/> Advanced Exercise<br><input type="checkbox"/> Advanced Nutrition<br><input type="checkbox"/> Stress Management & Religion |
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**Team members present for weekly team meeting/review:**

- NCM     MD     RD     EP     GSF     SMS     AA     PD

Element	Week 8
<b>Group Support PAL%</b> _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> <b>Y N (IDP)</b> — Demonstrates/verbalizes awareness of feelings <b>Y N (IDP)</b> — Demonstrates willingness to share feelings with group <b>Y N (IDP)</b> — Demonstrates ability to listen attentively <b>Y N (IDP)</b> — Demonstrates ability to express empathy with others <b>Y N (IDP)</b> — Demonstrates ability to connect socially with group members <b>Y N (IDP)</b> — GSRS ≥ 4 score = _____



<p><b>Stress Management (SM) PAL%</b> _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess PAL form; determine adherence using standard formula.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Continue to introduce and refine poses/ techniques per instructor manual.</li> <li><input type="checkbox"/> Recognize the relationship between group support and SM.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Settles into the stress management practice with ease and comfort</p> <p><b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week</p>
<p><b>Exercise PAL%</b> _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess exercise response to: HR, BP, RPE and symptoms; measure weight.</li> <li><input type="checkbox"/> Assess PAL form.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Modify home exercise program, if needed.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Demonstrates at least 180 min. exercise as logged in PAL</p> <p><b>Y N (IDP)</b> — Adheres to minimum strength training requirements of 2 days/week</p> <p><b>Y N (IDP)</b> — Verbalizes understanding of the importance of the long-term exercise plan for home program as demonstrated by a verbal plan</p>
<p><b>Nutrition PAL%</b> _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess weekly food diary/PAL form and provide feedback.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual</li> <li><input type="checkbox"/> Review appropriate nutrition handouts in participant manual.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Adheres to major guidelines with overall score of 95% or higher</p>

**Check all lectures and education delivered:**

*It is understood that the participant fully understands the material unless indicated in the IDP.*

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| <ul style="list-style-type: none"> <li><input type="checkbox"/> Completing Your PAL Forms</li> <li><input type="checkbox"/> Listening with Empathy and Compassion</li> <li><input type="checkbox"/> Responsibility</li> <li><input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program</li> <li><input type="checkbox"/> Cooking Demonstration (circle one): 1 2</li> <li><input type="checkbox"/> Eating Out, Traveling and Socializing</li> <li><input type="checkbox"/> An Integrated Approach to Weight Management</li> <li><input type="checkbox"/> Overcoming Barriers to Stress Management</li> <li><input type="checkbox"/> Grocery Store Tour</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Transitions: What is Behind and Ahead</li> <li><input type="checkbox"/> Potluck Meal (circle one): 1 2 3</li> <li><input type="checkbox"/> Shopping and Meal Planning</li> <li><input type="checkbox"/> Hitting the Wall</li> <li><input type="checkbox"/> Advanced Exercise</li> <li><input type="checkbox"/> Advanced Nutrition</li> <li><input type="checkbox"/> Stress Management &amp; Religion</li> </ul> |
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**Team members present for weekly team meeting/review:**

- NCM    MD    RD    EP    GSF    SMS    AA    PD

Element	Week 9
<p><b>Group Support PAL%</b> _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess PAL form.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Demonstrates/verbalizes awareness of feelings</p> <p><b>Y N (IDP)</b> — Demonstrates willingness to share feelings with group</p> <p><b>Y N (IDP)</b> — Demonstrates ability to listen attentively</p> <p><b>Y N (IDP)</b> — Demonstrates ability to express empathy with others</p> <p><b>Y N (IDP)</b> — Demonstrates ability to connect socially with group members</p> <p><b>Y N (IDP)</b> — GSRS ≥ 5 score = _____</p>

<p><b>Stress Management (SM) PAL%</b> _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess PAL form; determine adherence using standard formula.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Emphasize a deeper awareness during the poses.</li> <li><input type="checkbox"/> Continue to introduce and refine poses/techniques per instructor manual.</li> <li><input type="checkbox"/> Focus more attention on breathing, meditation and imagery.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Verbalizes recommitment to home practice</p> <p><b>Y N (IDP)</b> — Identifies barriers to adherence; plans strategies to overcome them</p> <p><b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week</p>
<p><b>Exercise PAL%</b> _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess exercise response to: HR, BP, RPE, and symptoms; measure weight.</li> <li><input type="checkbox"/> Assess PAL form.</li> </ul> <p><b>INTERVENTION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Modify home exercise program, if needed.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Demonstrates at least 180 min. exercise as logged in PAL</p> <p><b>Y N (IDP)</b> — Adheres to minimum strength training requirements of 2 days/week</p> <p><b>Y N (IDP)</b> — Identifies potential barriers to the long-term exercise plan</p>
<p><b>Nutrition PAL%</b> _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess weekly food diary/PAL form and provide feedback.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual</li> <li><input type="checkbox"/> Review appropriate nutrition handouts in participant manual.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Adheres to major guidelines with overall score of 95% or higher</p> <p><b>Y N (IDP)</b> — Includes a variety of foods in the Reversal Program or verbalizes the benefits of eating a variety of foods</p>

**Check all lectures and education delivered:**

*It is understood that the participant fully understands the material unless indicated in the IDP.*

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| <ul style="list-style-type: none"> <li><input type="checkbox"/> Completing Your PAL Forms</li> <li><input type="checkbox"/> Listening with Empathy and Compassion</li> <li><input type="checkbox"/> Responsibility</li> <li><input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program</li> <li><input type="checkbox"/> Cooking Demonstration (circle one): 1 2</li> <li><input type="checkbox"/> Eating Out, Traveling and Socializing</li> <li><input type="checkbox"/> An Integrated Approach to Weight Management</li> <li><input type="checkbox"/> Overcoming Barriers to Stress Management</li> <li><input type="checkbox"/> Grocery Store Tour</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Transitions: What is Behind and Ahead</li> <li><input type="checkbox"/> Potluck Meal (circle one): 1 2 3</li> <li><input type="checkbox"/> Shopping and Meal Planning</li> <li><input type="checkbox"/> Hitting the Wall</li> <li><input type="checkbox"/> Advanced Exercise</li> <li><input type="checkbox"/> Advanced Nutrition</li> <li><input type="checkbox"/> Stress Management &amp; Religion</li> </ul> |
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**Team members present for weekly team meeting/review:**

- NCM     MD     RD     EP     GSF     SMS     AA     PD

Element	Week 10
<b>Group Support</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> Y N (IDP) — Demonstrates/verbalizes awareness of feelings Y N (IDP) — Demonstrates willingness to share feelings with group Y N (IDP) — Demonstrates ability to listen attentively Y N (IDP) — Demonstrates ability to express empathy with others Y N (IDP) — Demonstrates ability to connect socially with group members Y N (IDP) — GSRS $\geq$ 5 score = _____
<b>Stress Management (SM)</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form; determine adherence using standard formula.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Review home SM practice and discuss distractions of home practice. <input type="checkbox"/> Discuss methods of SM while traveling. <input type="checkbox"/> Refine poses/techniques per instructor manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> Y N (IDP) — Describes comfort with poses and a sense of enjoyment with SM practice Y N (IDP) — Adheres to a minimum of 93% (390 minutes) each week
<b>Exercise</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess exercise response to: HR, BP, RPE, and symptoms; measure weight. <input type="checkbox"/> Assess PAL form.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Modify home exercise program, if needed  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> Y N (IDP) — Demonstrates at least 180 min. exercise as logged in PAL Y N (IDP) — Adheres to minimum strength training requirements of 2 days/week Y N (IDP) — Scheduled appointment for GXT, if appropriate Y N (IDP) — Verbalizes long-term exercise plan for home
<b>Nutrition</b> PAL% _____  Initials/date _____	<b>ASSESSMENT</b> <input type="checkbox"/> Assess weekly food diary/PAL form and provide feedback.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual <input type="checkbox"/> Review appropriate nutrition handouts in participant manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> Y N (IDP) — Adheres to major guidelines with overall score of 95% or higher

**Check all lectures and education delivered:**

*It is understood that the participant fully understands the material unless indicated in the IDP.*

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| <input type="checkbox"/> Completing Your PAL Forms<br><input type="checkbox"/> Listening with Empathy and Compassion<br><input type="checkbox"/> Responsibility<br><input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program<br><input type="checkbox"/> Cooking Demonstration (circle one): 1 2<br><input type="checkbox"/> Eating Out, Traveling and Socializing<br><input type="checkbox"/> An Integrated Approach to Weight Management<br><input type="checkbox"/> Overcoming Barriers to Stress Management<br><input type="checkbox"/> Grocery Store Tour | <input type="checkbox"/> Transitions: What is Behind and Ahead<br><input type="checkbox"/> Potluck Meal (circle one): 1 2 3<br><input type="checkbox"/> Shopping and Meal Planning<br><input type="checkbox"/> Hitting the Wall<br><input type="checkbox"/> Advanced Exercise<br><input type="checkbox"/> Advanced Nutrition<br><input type="checkbox"/> Stress Management & Religion |
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**Team members present for weekly team meeting/review:**

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Cohort: \_\_\_\_\_

- NCM     MD     RD     EP     GSF     SMS     AA     PD

STAGE I

Element	Week 11
<b>Group Support</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> Y N (IDP) — Demonstrates/verbalizes awareness of feelings Y N (IDP) — Demonstrates willingness to share feelings with group Y N (IDP) — Demonstrates ability to listen attentively Y N (IDP) — Demonstrates ability to express empathy with others Y N (IDP) — Demonstrates ability to connect socially with group members Y N (IDP) — GSRS $\geq$ 5 score = _____
<b>Stress Management (SM)</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess PAL form; determine adherence using standard formula.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Discuss strategies for continued motivation with SM practice. <input type="checkbox"/> Discuss the differences between spirituality, religion and health.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> Y N (IDP) — Demonstrates and identifies mindfulness in daily activities Y N (IDP) — Identifies improved relationships Y N (IDP) — Adheres to a minimum of 93% (390 minutes) each week
<b>Exercise</b> PAL% _____  Initials/date _____	<b>ASSESSMENT:</b> <input type="checkbox"/> Assess exercise response to: HR, BP, RPE, and symptoms; measure weight. <input type="checkbox"/> Assess PAL form.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Modify home exercise program if needed  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> Y N (IDP) — Demonstrates at least 180 min. exercise as logged in PAL Y N (IDP) — Adheres to minimum strength training requirements of 2 days/week Y N (IDP) — Describes 2 benefits he/she has experienced from exercise
<b>Nutrition</b> PAL% _____  Initials/date _____	<b>ASSESSMENT</b> <input type="checkbox"/> Assess weekly food diary/PAL form and provide feedback.  <b>INTERVENTION/EDUCATION:</b> <input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual <input type="checkbox"/> Review appropriate nutrition handouts in participant manual.  <b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b> Y N (IDP) — Adheres to major guidelines with overall score of 95% or higher

**Check all lectures and education delivered:**

*It is understood that the participant fully understands the material unless indicated in the IDP.*

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| <input type="checkbox"/> Completing Your PAL Forms                          | <input type="checkbox"/> Transitions: What is Behind and Ahead |
| <input type="checkbox"/> Listening with Empathy and Compassion              | <input type="checkbox"/> Potluck Meal (circle one): 1 2 3      |
| <input type="checkbox"/> Responsibility                                     | <input type="checkbox"/> Shopping and Meal Planning            |
| <input type="checkbox"/> Evaluating the Nutrition Spectrum Reversal Program | <input type="checkbox"/> Hitting the Wall                      |
| <input type="checkbox"/> Cooking Demonstration (circle one): 1 2            | <input type="checkbox"/> Advanced Exercise                     |
| <input type="checkbox"/> Eating Out, Traveling and Socializing              | <input type="checkbox"/> Advanced Nutrition                    |
| <input type="checkbox"/> An Integrated Approach to Weight Management        | <input type="checkbox"/> Stress Management & Religion          |
| <input type="checkbox"/> Overcoming Barriers to Stress Management           |  |
| <input type="checkbox"/> Grocery Store Tour                                 |  |

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Cohort: \_\_\_\_\_

**Team members present for weekly team meeting/review:**

- NCM    MD    RD    EP    GSF    SMS    AA    PD

Element	Week 12
<p><b>Group Support</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess PAL form.</li> <li><input type="checkbox"/> Document 12 week assessment in IDP.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Demonstrates/verbalizes awareness of feelings</p> <p><b>Y N (IDP)</b> — Demonstrates willingness to share feelings with group</p> <p><b>Y N (IDP)</b> — Demonstrates ability to listen attentively</p> <p><b>Y N (IDP)</b> — Demonstrates ability to express empathy with others</p> <p><b>Y N (IDP)</b> — Demonstrates ability to connect socially with group members</p> <p><b>Y N (IDP)</b> — GSRS ≥ 5 score = _____</p>
<p><b>Stress Management (SM)</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess PAL form; determine adherence using prescribed formula.</li> <li><input type="checkbox"/> Document 12 week assessment in IDP.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Review community SM resources in the SDC and transition to SDC.</li> <li><input type="checkbox"/> Review questions and answers to SM practices.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Verbalizes plan for transition to Stage II or SDC</p> <p><b>Y N (IDP)</b> — Adheres to a minimum of 93% (390 minutes) each week</p>
<p><b>Exercise</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess exercise response to: HR, BP, RPE, and symptoms; measure weight.</li> <li><input type="checkbox"/> Assess PAL form.</li> <li><input type="checkbox"/> Document 12 week assessment in IDP.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Modify home exercise program, if needed.</li> <li><input type="checkbox"/> Recalculate exercise Rx based on GXT.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Demonstrates at least 180 min. exercise logged in PAL</p> <p><b>Y N (IDP)</b> — Adheres to minimum strength training requirements of 2 days/week</p> <p><b>Y N (IDP)</b> — Describes new exercise Rx, long-term plans and progression of home program</p> <p><b>Y N (IDP)</b> — Completes 12-week GXT, as appropriate.</p>
<p><b>Nutrition</b> PAL% _____</p> <p>Initials/date _____</p>	<p><b>ASSESSMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assess weekly food diary/PAL form and provide feedback.</li> <li><input type="checkbox"/> Evaluate and analyze 3-day food diary.</li> <li><input type="checkbox"/> Document 12 week assessment IDP.</li> </ul> <p><b>INTERVENTION/EDUCATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Deliver education per suggested Stage I teaching plan in instructor manual.</li> <li><input type="checkbox"/> Review appropriate nutrition handouts in participant manual.</li> <li><input type="checkbox"/> Provide Stage II FFQ/PAL forms and instruct how/when to complete.</li> </ul> <p><b>DESIRED OUTCOMES/LEARNING OBJECTIVES:</b></p> <p><b>Y N (IDP)</b> — Adheres to major guidelines with overall score of 95% or higher</p> <p><b>Y N (IDP)</b> — Meets requirements for protein, fat, cholesterol and calcium for age</p> <p><b>Y N (IDP)</b> — Meets calorie needs per weight history and PAL adherence</p>

STAGE I

<b>12 Week Lipids</b>	<p>The participant has met the following benchmarks for cholesterol:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Total Cholesterol <math>\leq</math> 150 mg/dL</li> <li><input type="checkbox"/> LDL-C <math>\leq</math> 100 mg/dL</li> <li><input type="checkbox"/> TG <math>\leq</math> 150mg/dL</li> </ul> <p><b>* If this benchmark is not met, the NCM will document in the IDP the plan of care to achieve this benchmark. Record lipids on Participant Outcome Summary</b></p>
<b>Psychosocial History</b>	<p>The participant has met the following benchmarks for depression:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> CES-D <math>\leq</math> 15</li> </ul> <p><b>* If this benchmark is not met, the GSF will document in the IDP the plan of care to achieve this benchmark. Record Psychosocial scores on Participant Outcome Summary.</b></p>
<b>Exercise 12 weeks</b>	<p>Exercise Prescription: THR = _____ bpm</p> <p>The participant has met the following benchmark for functional capacity improvement:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 17% improvement from baseline MET level</li> </ul> <p><b>* If this benchmark is not met, the EP will document in the IDP the plan of care to achieve this benchmark. Record stress test (if appropriate) and exercise adherence on the Participant Outcome Summary.</b></p>
<b>Weight</b>	<p>The participant has met the following benchmark for weight loss if necessary:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 5% reduction in body weight from baseline</li> </ul> <p><b>* If this benchmark is not met, the NCM/EP/RD will document in the IDP the plan of care to achieve this benchmark. Record weight, body composition, waist:hip ratio and BMI on Participant Outcome Summary.</b></p>
<b>Blood Pressure Heart Rate</b>	<p>Resting HR: _____ / _____ PB gnitseR    ralugerrl <input type="checkbox"/>    ralugeR <input type="checkbox"/></p> <p>The participant has met the following benchmark for blood pressure:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> SBP <math>\leq</math> 119mmHg</li> <li><input type="checkbox"/> DBP <math>\leq</math> 79mmHg</li> </ul> <p><b>If this benchmark is not met, the NCM will document in the IDP the plan of care to achieve this benchmark.</b></p>
<b>Diabetes</b>	<p>The participant has met the following benchmark for HbA1c:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <math>\leq</math> 7.0 HbA1c</li> </ul> <p><b>If this benchmark is not met, the NCM will document in the IDP the plan of care to achieve this benchmark.</b></p>
<b>Interview</b>	<p><b>Goals for Stage II of Program/Long-term plan:</b></p> <p><b>What has been the most difficult part of the Program?</b></p> <p><b>What has been the most rewarding part of the Program?</b></p>

12 Week Physical Assessment		
<b>Respiratory Status</b> Rest SOB    Y    N DOE    Y    N Aggravates _____? Alleviates _____ Cough    Y    N Auscultation findings: _____ _____ _____  Dyspnea score: _____ See scale below	<b>Cardiovascular Status</b> Rubs/gallops/thrills/clicks/ Murmurs/extra heart sounds _____ _____  Heart sounds are: <input type="checkbox"/> Normal <input type="checkbox"/> Abnormal Comments: _____	<b>Angina</b> In past 30 days    Y    N Controlled by meds    Y    N Freq. in last 7 days _____ times Average duration _____ min Severity (1-4) _____ Quality _____ Associated sx _____ Location _____ What aggravates: _____  What alleviates: _____ Occurs at rest    Y    N Occurs w/ exertion    Y    N
<b>Circulation Pulses</b> Radial _____ Apical _____ Peripheral Edema    Y    N Grade 1+ 2+ 3+ 4+ _____ Hx Thrombophlebitis    Y    N Varicose Veins    Y    N	<b>Neurological Status:</b> Numbness/Tingling    Y    N Location: _____ Dizziness/syncope    Y    N Tremor    Y    N Motor Dysfunction    Y    N Insomnia/restlessness/confusion Memory loss    Y    N	<b>Musculoskeletal Status</b> <b>ROM limitation</b> <input type="checkbox"/> Neck <input type="checkbox"/> Spine <input type="checkbox"/> Shoulder <input type="checkbox"/> Elbow <input type="checkbox"/> Wrist <input type="checkbox"/> Hip <input type="checkbox"/> Knee <input type="checkbox"/> Ankle <input type="checkbox"/> Kyphosis <input type="checkbox"/> Lordosis <input type="checkbox"/> Scoliosis <input type="checkbox"/> Alignment <b>ADL's</b>
<b>Update medications on Medication Flow Sheet if changes:</b>		
<b><u>DYSPNEA SCALE</u></b>	<b><u>ANGINA FREQUENCY</u></b>	<b><u>ANGINA SEVERITY</u></b>
<b><u>Class I</u></b> – No dyspnea with vigorous exercise.	0 = no incidence	<b><u>Level 1</u></b> – Ordinary physical activity does not cause angina, such as walking and climbing stairs. Angina with strenuous, rapid or prolonged exertion at work or recreation.  <b><u>Level 2</u></b> – Slight limitations of ordinary activity. Walking/climbing stairs rapidly, walking uphill, walking/ stair climbing after meals, in cold, in wind, under emotional stress, or only the few hours after awakening. Walking more than two blocks on the level and climbing more than one flight of ordinary stairs at a normal pace and in normal conditions.  <b><u>Level 3</u></b> – Marked limitation of ordinary activity. Walking 1-2 blocks on the level and climbing one flight of stairs in normal conditions and at normal pace.  <b><u>Level 4</u></b> – Inability to carry on any physical activity w/o discomfort, anginal syndrome may be present at rest.
<b><u>Class II</u></b> – Slight limitation of physical activity due to dyspnea. Ordinary activity results in dyspnea.	1= 1-5 times/week	
<b><u>Class III</u></b> - Marked limitation of physical activity due to dyspnea. Less than ordinary activity results in dyspnea.	2 = 6-10 times/week	
<b><u>Class IV</u></b> - Dyspnea at rest.	3 = 11-20 times/week	
	4 = > 20 times/week with exercise only	
	5 = >20 times/week with exercise and at rest	
	6 = constantly, at rest or with exercise	