

# EATING FOR VITALITY DIET™



## Success Planner



Become part of the rapidly growing *Eating for Vitality Diet* community! Visit us online at [www.eatingforvitalitydiet.com](http://www.eatingforvitalitydiet.com) to access fresh new recipes, success tips and other great resources. To support your success with the *Eating for Vitality Diet* program, go to [www.eatingforvitalitydiet.com/tools](http://www.eatingforvitalitydiet.com/tools) to download your FREE printable success tools.

## Eating for Vitality Diet Introduction

Today's Date: \_\_\_\_\_

Major Health Concerns: \_\_\_\_\_

Weight \_\_\_\_\_ Waist Measurement \_\_\_\_\_ Hip Measurement \_\_\_\_\_ WTH Ratio  $\frac{\text{Waist}}{\text{Hip}}$  \_\_\_\_\_

Your Waist-to-Hip Ratio can help you track your weight loss progress, while also serving as a warning about your estimated health risk for problems related to being overweight.

Calculate your WTH Ratio by dividing your waist measurement in inches by your hip measurement in inches.

Waist-to-Hip Ratio Results: Women should be 0.8 or below and men should be 0.9 or below.

### Action Items

1. Complete the *Health Profile Questionnaire* on the next page. Make a few blank copies because you will be using it to track your progress every three to four weeks. (There is another copy of the *Health Profile Questionnaire* at the end of this book.)
2. Identify your Success Outcomes for the program and why they are important. Write them down here.

### Success Outcomes

*List the success outcomes you would like as a result of completing this program.*

*Identify 1-3 reasons why each outcome is important to you and how it will affect your life.*

1. Success Outcome: \_\_\_\_\_

Why this is important:

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2. Success Outcome: \_\_\_\_\_

Why this is important:

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3. Success Outcome: \_\_\_\_\_

Why this is important:

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## Eating for Vitality Diet Assessment

Today's Date: \_\_\_\_\_

### Action Items

1. Complete the Gluten Sensitivity Self-Tests, Dairy Sensitivity Self-Test, Leaky Gut Syndrome Self-Test, and Candida Self-Test.
2. Record your assessment results on your *Success Planner*.
3. Writedown how you are feeling in your *Daily Symptom and Diet Journal* which is included at the end of this book.

### Assessment Results

Select the description that best fits your assessment results.

**Gluten Sensitivity Level 1** (1 condition or 2 or more symptoms checked on the Self-Test)

- Start the *Gluten-Free & Dairy/Casein-Free Lifestyle Path*.

**Gluten Sensitivity Level 2** (1 condition checked on the Self-Test)

- Start the *Grain-Free & Dairy/Casein-Free Lifestyle Path*.

**Note:** If you don't see major improvements in the next 30 to 90 days, then add the "Chronic Inflammation" Exclude & Include Foods of the *Discovery Diet*.

**Note:** If you have IBS (*irritable bowel syndrome*) or IBD (*irritable bowel disease*), then you should be on the *Grain-Free & Dairy/Casein-Free Lifestyle Path* and follow the "Chronic Inflammation" Exclude & Include Foods with the addition of the FODMAP (*Fermentable Oligo-Di-Monosaccharides and Polyols*) foods.

**Important! Gluten sensitivity and Lyme disease symptoms are very similar.**

*There are 300,000 cases of Lyme disease reported each year in the United States.*

If you checked symptoms in the *Gluten Sensitivity Self-Tests* and you've visited the Northeast and/or upper Midwest, seek medical advice to get the correct diagnosis and start the right treatment ASAP! Untreated complications of advanced Lyme disease commonly affect the joints, nervous system (including the brain and spinal cord), and heart. Doctors also commonly mistake lupus, Chronic fatigue syndrome, fibromyalgia, and multiple sclerosis for Lyme disease.

- Dairy Sensitivity** (1 condition or 2 or more symptoms checked on the Self-Test)
  - Symptoms and conditions with the \* are related to gluten sensitivity as well.
  - Compare the \* items with your checked boxes on the *Gluten Sensitivity Self-Tests* to see whether you'll be following the *Gluten-Free & Dairy/Casein-Free Lifestyle Path* or the *Grain-Free & Dairy/Casein-Free Lifestyle Path*.
- Leaky Gut Syndrome** (any conditions or symptoms checked on the Self-Test)
  - Start the *Grain-Free & Dairy/Casein-Free Lifestyle Path*.
  - You may want to consider getting your blood tested for intestinal permeability / leaky gut syndrome.
- Candida** (4 or more conditions checked in first and second sections on the Self-Test)
  - Start by learning the *Grain-Free & Dairy/Casein-Free Lifestyle Path* and then add the *Candida Diet Plan*.

**Note:** Candida is associated with leaky gut syndrome and gluten sensitivity. You may want to consider getting tested for all three (Candida, leaky gut syndrome, and gluten sensitivity).

**Blood Testing:** If you've checked any of these boxes, it's a good idea to have your blood tested for gluten sensitivity and intestinal permeability /leaky gut (Array 2 & Array 3).  
*For more information, read the "Testing Information" in the Resources section.*



**Vitamin D:** It is extremely important to have your Vitamin D levels checked every 6 months and maintain 50 to 70 ng/ml year round. Also take 100 to 200 micrograms of Vitamin K2 for every 1,000 IUs of Vitamin D to prevent Vitamin D toxicity. *Read more about this in the Resources Section.*



**Which Dietary Lifestyle Path is Best for You?** Today's Date: 

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**Action Items**

1. Order your blood tests (if necessary). *See the "Testing Information" in the Resources section of this book.*
2. Based on your assessment results, identify the best **Discovery Diet** for you as listed below.
3. Read the "Testing Information" in the *Resources* section, and if you have been diagnosed with gluten sensitivity, read "Diagnosed with Gluten Sensitivity or Celiac Disease?" in the *Resources* section of this book.
4. Read the "Leaky Gut Syndrome" information in the *Resources* section.
5. Move on to Lesson 1: *The Discovery Diet* when you are ready.

**My Discovery Diet**

Select the *Eating for Vitality Discovery Diet* that best fits your assessment results.

- Gluten-Free & Dairy/Casein-Free Lifestyle Path Discovery Diet*
- Grain-Free & Dairy/Casein-Free Lifestyle Path Discovery Diet*
- Candida Diet*

**LOOKING FOR THE QUICKEST RESULTS?**

If you want to lose weight quicker and feel great faster, go straight to the *Grain-Free & Dairy/Casein-Free Lifestyle Path Discovery Diet*.

## Lesson 1: The Discovery Diet™

Today's Date: \_\_\_\_\_

Check the *Gluten-Free Vitality Discovery Diet* you are following:

- Gluten-Free & Dairy/Casein-Free Lifestyle Path Discovery Diet* (14 days)
- Grain-Free & Dairy/Casein-Free Lifestyle Path Discovery Diet* (30 days)
- Candida Diet Plan* (6 months)

*Discovery Diet* Start Date \_\_\_\_\_

*Discovery Diet* End Date \_\_\_\_\_

**Good luck with your *Discovery Diet*. You are ready and I know you can do it!**

### Action Items

1. Follow the appropriate *Discovery Diet Exclude & Include Foods, Forbidden Lists, Food and Beverage Guidelines, and Rotation Diet*.
2. Purge from your cupboards items on the *Exclude Foods* list and *Forbidden Lists*.
3. Go shopping for items on your *Include Foods* list. Use the balanced *Recipes/Meal Ideas* and *Natural Foods Shopping List* information included in this book.
4. Begin your *Discovery Diet*. Strictly follow the *Exclude & Include Foods* and the *Forbidden List* for your dietary path (*Gluten-Free & Dairy/Casein-Free, Grain-Free & Dairy/Casein-Free or Candida Diet*). Use the *Food & Beverage Guidelines* as your "Cheat Sheets"!
5. If you have chronic inflammation, then you should be on the *Grain-Free & Dairy/Casein-Free Lifestyle Path* and follow the "Chronic Inflammation" *Exclude & Include Foods*.
6. If you have IBS (*irritable bowel syndrome*) or IBD (*irritable bowel disease*), then you should be on the *Grain-Free & Dairy/Casein-Free Lifestyle Path* and follow the "Chronic Inflammation" *Exclude & Include Foods* with the addition of the FODMAP (*Fermentable Oligo-Di-Monosaccharides and Polyols*) foods list.
7. If you have *Candida*, you should follow the *Candida Diet* for 6 months. Retest for *Candida* every 3 months. If you test negative, move to the *Grain-Free Diet*.
8. Move on to Lesson 2: *Favorable Foods*. You do NOT have to finish your *Discovery Diet* before moving on to this lesson.

**Important:** If you tested positive to gluten-sensitivity or celiac disease, you can NEVER eat anything that contains gluten! Not even a bread crumb! Please read the section "Diagnosed with *Gluten Sensitivity or Celiac Disease?*" in the *Resources* section.

### After the *Discovery Diet* Test Period Ends:

1. Take the *Health Profile Questionnaire* again, record your new total, and compare your *Questionnaires* to identify any health symptoms that are improving.  
*Use the Health Profile Questionnaire at the end of this book to make extra copies.*
2. List your positive outcomes from the *Discovery Diet* on your *Success Planner*.
3. Begin the re-introduction phase and track results on your *Success Planner*.

**If you are feeling great, you DO NOT need to ever re-introduce the eliminated foods that you now realize have given you negative symptoms!**

Health Profile Questionnaire: Date \_\_\_\_\_ Total \_\_\_\_\_

**Positive Outcomes of the Discovery Diet**

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**How do they impact your next steps in the program?**

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

**Re-Introduction Phase**

This is when you'll find out which specific foods trigger your symptoms. You'll add back only one new food every 3 to 4 days in pure form, and eat that new food at least twice each day. Then remove it from your diet again for the next 3 to 4 days, so you can evaluate your results before you re-introduce another new food. Each week you'll test only one new food, keeping out all of the other previously eliminated foods. Food sensitivities are not always easy to detect. You may have symptoms immediately when re-introducing a food or it may take up to 7 days for you to notice a symptom. That's why it's so important to re-introduce only one new food at a time and to use your *Success Planner* to record any negative symptoms that may appear.

Food	Date Added	Results (negative symptoms)

## Lesson 2: The Favorable Foods

Today's Date: \_\_\_\_\_

### Action Items

1. Identify all high glycemic foods in your refrigerator and cupboards and do not eat them until you complete the next two lessons.
2. Make copies of the *Favorable Food List*. These better choices of foods are low on the *Glycemic Index*. Keep copies in your car, a briefcase, or purse.
3. Scan the *Favorable Food List* into your computer and download it to your mobile devices.
4. Use the balanced *Recipes/Meal Ideas* and *Natural Foods Shopping List* for meal planning ideas.
5. If you travel, be sure to read the *Travel Tips* section in this book.
6. Continue to keep up with how you are feeling in your *Daily Symptom and Diet Journal*.
7. Identify a family member who can support you in this program.
8. Move on to Lesson 3: *The Visually Balanced Meal*.

### Glycemic Index Action Items

*Identify 2-3 additional things you can do to follow a diet of foods that are 50 or lower on the Glycemic Index.*

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_



**Lesson 3: The Visually Balanced Meal**

Today's Date: \_\_\_\_\_

**Action Items**

1. Make a copy of the *Visually Balanced Meal Guide*.
2. Make a few copies of the *Visually Balanced Meal Chart*.
3. Begin planning visually balanced meals. Put together menus using the *Visually Balanced Meal Chart* in conjunction with the *Favorable Food List*. Simply select items from the *Favorable Food List* and enter them into the *Meal Chart* using your *Visually Balanced Meal Guide* amounts.
4. If needed, order shakes/bars from the website ([www.eatingforvitalitydiet.com](http://www.eatingforvitalitydiet.com)) to replace 1 or 2 meals and snacks a day.
5. Continue to keep up with your *Daily Symptom and Diet Journal*.
6. Move on to Lesson 4: *The Balanced Block Chart*.

**Visually Balanced Meal Chart**

	PROTEIN	FAT	STARCHY CARBS	VEGGIE CARBS	FRUIT CARBS
<b>Meal 1</b>					
<b>Meal 2</b>					
<b>Meal 3</b>					
<b>Meal 4</b>					
<b>Meal 5</b>					
<b>Meal 6</b>					
<b>Meal 7</b>					

## Lesson 4: Balanced Block Chart

Today's Date: \_\_\_\_\_

### Action Items

1. Make a copy of the *Balanced Block Chart* so it is handy when you are planning meals.
2. Look in your cupboards and pull out your favorite foods. Read the labels and start using the *Balanced Block Chart* to balance your meals.
3. Review the Success Outcomes you identified at the beginning of the program. Evaluate how far you have come and what outcomes you are already experiencing.
4. Refine or set additional Success Outcomes and record them on your *Success Planner*.
5. Move on to Lesson 5: *The Daily Meal Planner*.

### Balanced Block Chart

Balanced Block Chart				
	BLOCK	PROTEIN Grams	FAT grams	CARB grams
SNACKS	1 Block	7	2	9
	1.5	10	3	13
	2 Blocks	14	4	18
	2.5	17	5	22
MEALS	3 Blocks	21	6	27
	3.5	24	7	31
	4 Blocks	28	8	36
	4.5	31	9	40
	5 Blocks	35	10	45
	5.5	38	11	49
	6 Blocks	42	12	54
	6.5	45	13	58
	7 Blocks	49	14	63
	7.5	52	15	67
	8 Blocks	56	16	72
	8.5	59	17	76
	9 Blocks	63	18	81
	9.5	66	19	85
	10 Blocks	70	20	90

Note: 1 Block / 7 grams Protein is equivalent to:

- 1 oz - Poultry/Meat
- 1.5 oz - Fresh Fish
- 1 Egg or 2 Egg Whites
- 1.5 oz - Shrimp
- 2 oz - Tofu
- 1 Tbsp - Protein Powder

Note: 4 oz. Poultry/Meat = 4 Blocks/28 grams Protein = Size of a Deck of Cards.

**Success Outcomes**

*Look back at your Success Outcomes and identify the progress you have made so far.*

Progress I've made:

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**New Success Outcomes**

*Identify any new Success Outcomes you would like to see and identify why the outcome is important.*

Why this is important:

1. 

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2. 

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# Success Planner

## Lesson 5: The Daily Meal Planner

Today's Date: \_\_\_\_\_

Weight \_\_\_\_\_ Waist measurement \_\_\_\_\_ Hip measurement \_\_\_\_\_ WTH ratio  $\frac{\text{Waist}}{\text{Hip}}$  \_\_\_\_\_

**Record your body measurements every 4 to 6 weeks during the Eating for Vitality Diet program.**

### Action Items

1. Make copies of the *Daily Meal Planner*. (Extra copies are located in the Resources section.)
2. Use the *Favorable Food List* and *Daily Meal Planner* to plan your meals. For more options, use the *Master Food Block List*, which is an extensive list of foods in 1 block amounts. Plan all your meals this way for the next 4 weeks until it becomes natural. This routine is the key to your success!
3. Continue to keep up with your *Daily Symptom and Diet Journal*.
4. Complete the *Health Profile Questionnaire* every few weeks and compare the results to your past Questionnaires to identify continued improvements.
5. Consider becoming a member of the *Eating for Vitality Diet* community. Visit my website ([www.eatingforvitalitydiet.com](http://www.eatingforvitalitydiet.com)) to learn more.
6. Share with a friend and family member what you are doing with your life. Encourage them to check out the *Eating for Vitality Diet* program. I am sure they will be happy you did!
7. Keep up the good work! You are well on your way to eating for vitality!

### Daily Meal Planner

Blocks of Proteins, Fats and Carbs = _____ Calories _____							
Name _____		Phone _____		Date _____			
	Protein 1 Block = 7g / 55 kcal	Fat (3tsp = 1 Tbsp) 1 Block = 2g / 22 kcal	Starchy Carbs 1 Block = 9g / 40 kcal	Veggie Carbs 1 Block = 9g / 25 kcal	Fruit Carbs 1 Block = 9g / 30 kcal	Drinks 1 Block Carb	Supplements
	1 oz Lean Protein (animal) 1.5 oz Fresh Fish / Shrimp 1 Egg / 2 Eggs Whites 2 Slices Turkey Bacon 1 Turkey Sausage Patty 1/2 <i>Bilinski</i> Sausage Link 1 <i>Beyond Meat</i> slider 1 T Protein Powder 1 scoop Medical Shake Mix	1/2 tsp EFA oil (flax or fish) 1/2 tsp Olive oil / 3 Olives 1/2 tsp Nut butter / 3 Nuts 1/4 Avocado / 1 T Guacamole 1 tsp Mayonnaise / Veganaise 1 tsp <i>EB</i> Mindful Mayo 1/2 tsp Clarified Butter / Coconut Oil 1 T Canned Coconut Milk 1 T Chia or Flax seeds	1/2 Medium Potato / Yam 1/4 cup Beans/Legumes/Peas 1/2 Slice Rice Bread* 1/4 cup Brown Rice/Pasta* 1/2 cup Brown Rice Cereal* 1/4 cup Granola/Muesli/Oats 6 Rice Crackers* 8 Terra Chips / 12 Lentil Chips 1 scoop Medical Shake Mix	2 cups Raw / Steamed Veggies 4 cups Lettuce / Spinach 1 cup Cooked Veggies 2 Tomatoes / 1/2 cup Salsa 1 cup Fresh Veggie Juice 12 Spears Asparagus 1 Artichoke 3 cups Bokchoy 1 cup Sea Vegetables	1 cup Fresh Berries / 1/2 cup if frozen 1/2 Medium Apple / Pear 1 Plum / Peach / Tangerine 9 Grapes / 7 Cherries 1/2 Small Banana / 1/2 cup Melon 1 T raisins / cranins / 2 prunes 2 tsp Jam / Jelly / Maple Syrup 1/4 cup 100% Juice 1/2 Grapefruit / Orange	8 oz Wine 8 oz Beer GF 8 oz DF Milk 8 oz Coconut Water	
<b>Breakfast Time:</b>	Protein	Fat	Carbs	Carbs	Carbs		
<b>Snack Time:</b>	Protein	Fat	Carbs	Carbs	Carbs		
<b>Lunch Time:</b>	Protein	Fat	Carbs	Carbs	Carbs		
<b>Snack Time:</b>	Protein	Fat	Carbs	Carbs	Carbs		
<b>Dinner Time:</b>	Protein	Fat	Carbs	Carbs	Carbs		
<b>Snack Time:</b>	Protein	Fat	Carbs	Carbs	Carbs		
<b>Totals:</b>						+	
Symptoms: _____							
Exercise Routine: Cardio Minutes _____ Weight Minutes _____							
Minimum Daily Water Intake: Weight x .075 = # of cups _____							

**Keep up the good work - You are well on your way to Eating for Vitality!**