The importance of healthy eating

Healthy eating is an important part of managing your diabetes. The food in your meal plan will provide the calories and nutrients you need each day to manage your blood sugar and give you the energy you need for healthy living. Speak with your health care professional about the calorie meal plan that's right for you.

To lose weight, you will need to eat fewer calories or use up more calories by being more active. To gain weight, you will need to eat more calories than you use up. Your diabetes care team can help you figure out how many calories you need to take in each day and the amount of physical activity you should get, depending on your goal. Once you know the number of calories, be sure to check the calorie counts of the foods you eat. You can look up calorie counts online. You can also find them on the Nutrition Facts labels on packaged foods.

You may want to ask your doctor to refer you to a registered dietitian. This person can help you come up with a meal plan tailored just for you. You want to have the right balance of food, medicine, and activity.

Choose your foods: Exchange lists for diabetes

The Exchange Lists offer a large selection of foods grouped together because they have about the same nutritional content. Each serving of a food has about the same carbohydrate, protein, fat, and calories as the other foods in that list. Any food within a list can be “exchanged” for another food in the same list.

Ask your diabetes care team for a copy of the Cornerstones4Care® booklet, Carb Counting and Meal Planning, from Novo Nordisk. It includes the Exchange Lists for Diabetes and other useful information on healthy eating. Use the Exchange Lists in Carb Counting and Meal Planning with this meal-planning information.

To learn more about healthy eating and menu planning, visit Cornerstones4Care.com.
The following sample menu for a 1500-calorie meal plan includes a total of 6 starch exchanges, 3 fruit exchanges, 3 milk exchanges, 4 nonstarchy vegetable exchanges, 6 meat exchanges, and 4 fat exchanges daily.

<table>
<thead>
<tr>
<th>Meal</th>
<th>Exchanges</th>
<th>Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast</td>
<td>1 starch</td>
<td>1 slice whole-grain toast</td>
</tr>
<tr>
<td></td>
<td>1 fat</td>
<td>1 teaspoon butter or margarine</td>
</tr>
<tr>
<td></td>
<td>1 meat, lean</td>
<td>¼ cup low-fat cottage cheese</td>
</tr>
<tr>
<td></td>
<td>1 fruit</td>
<td>1 small orange (6½ ounces)</td>
</tr>
<tr>
<td></td>
<td>1 milk</td>
<td>1 cup fat-free milk</td>
</tr>
<tr>
<td>Snack</td>
<td>1 fruit</td>
<td>1 extra-small banana (4 ounces)</td>
</tr>
<tr>
<td>Lunch</td>
<td>2 starch</td>
<td>2 slices rye bread</td>
</tr>
<tr>
<td></td>
<td>2 meat, lean</td>
<td>2 ounces chicken without skin</td>
</tr>
<tr>
<td></td>
<td>½ vegetable</td>
<td>½ cup chopped celery</td>
</tr>
<tr>
<td></td>
<td>1 fat</td>
<td>1 teaspoon mayonnaise</td>
</tr>
<tr>
<td></td>
<td>½ vegetable</td>
<td>½ cup sliced tomato for the sandwich</td>
</tr>
<tr>
<td>Snack</td>
<td>1 milk</td>
<td>2/3 cup (6 ounces) low-fat yogurt</td>
</tr>
<tr>
<td>Dinner</td>
<td>3 meat, lean</td>
<td>3 ounces roast beef</td>
</tr>
<tr>
<td></td>
<td>2 starch</td>
<td>½ large baked potato with skin</td>
</tr>
<tr>
<td></td>
<td>2 vegetable</td>
<td>1 cup steamed broccoli</td>
</tr>
<tr>
<td></td>
<td>1 fruit</td>
<td>1¼ cup strawberries</td>
</tr>
<tr>
<td></td>
<td>1 free food +</td>
<td>tossed salad greens plus 1 cup raw vegetables (for example, tomatoes,</td>
</tr>
<tr>
<td></td>
<td>1 vegetable</td>
<td>cucumbers, and carrots)</td>
</tr>
<tr>
<td></td>
<td>1 fat</td>
<td>1 teaspoon butter or margarine</td>
</tr>
<tr>
<td></td>
<td>1 fat</td>
<td>2 tablespoons reduced-fat salad dressing</td>
</tr>
<tr>
<td>Snack</td>
<td>1 starch</td>
<td>3 gingersnaps</td>
</tr>
<tr>
<td></td>
<td>1 milk</td>
<td>1 cup fat-free milk</td>
</tr>
</tbody>
</table>

For more information about meal planning, go to Cornerstones4Care.com and take advantage of our online Menu Planner to create a 7-day menu plan, including diabetes-friendly recipes and a customized grocery list.
### Your personal meal plan

<table>
<thead>
<tr>
<th>Time</th>
<th>Number of Exchanges</th>
<th>Menu Ideas</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Carbohydrate group</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Starch</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fruit</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Milk</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Meat and meat substitutes group</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fat group</td>
<td></td>
</tr>
</tbody>
</table>

#### Breakfast
- ______ Carbohydrate group
- ______ Starch
- ______ Fruit
- ______ Milk
- ______ Meat and meat substitutes group
- ______ Fat group

#### Snack
- ______ Carbohydrate group
- ______ Nonstarchy vegetables

#### Lunch
- ______ Carbohydrate group
- ______ Starch
- ______ Fruit
- ______ Milk
- ______ Nonstarchy vegetables
- ______ Meat and meat substitutes group
- ______ Fat group

#### Snack
- ______ Carbohydrate group

#### Dinner
- ______ Carbohydrate group
- ______ Starch
- ______ Fruit
- ______ Milk
- ______ Nonstarchy vegetables
- ______ Meat and meat substitutes group
- ______ Fat group

#### Snack
- ______ Carbohydrate group

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For more information, visit [Cornerstones4Care.com](http://Cornerstones4Care.com)

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Support and diabetes management tools built around you.

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Diabetes Health Coach
An online program that builds a customized action plan around your needs to help you learn healthy habits

Meal Planning Tools
Create tasty, diabetes-friendly meals

Interactive Trackers
Record A1C, weight, and blood sugar numbers

Enrolling is easy. Just complete this form.

All fields with asterisks (*) are REQUIRED.

* I have diabetes  or  I care for someone who has diabetes
* First name ______________ * Last name ______________  MI _____
* Address 1 _______________________________________________________
* Address 2 _______________________________________________________  
* City __________________ * State ________________________________
* ZIP ______________ * Email ______________________________________
* Birth date mm/dd/yyyy / / 

* What type of diabetes do you or the person you care for have? (Check one) 
  ❑ Type 2      ❑ Type 1       ❑ Don’t know

* What type of diabetes medicine has been prescribed? (Check all that apply)
  ❑ Insulin       ❑ GLP-1 medicine
  ❑ None          ❑ Other
  ❑ Diabetes pills (also called oral antidiabetic drugs, or OADs)

* If you checked “Insulin,” “GLP-1 medicine,” or “Other,” please fill in the following for each: 

Product 1: ______________________________________________________
  How long has this product been taken?
  ❑ Prescribed but not taken ❑ 7-12 months
  ❑ 0-3 months               ❑ 1-3 years
  ❑ 4-6 months               ❑ 3 or more years

Product 2: ______________________________________________________
  How long has this product been taken?
  ❑ Prescribed but not taken ❑ 7-12 months
  ❑ 0-3 months               ❑ 1-3 years
  ❑ 4-6 months               ❑ 3 or more years

Review and complete below.

* Phone number: ____________________ – ____________________

* Cell phone number: ____________________ – ____________________

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3 easy ways to enroll:
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2. Email the completed form to C4Csignup@hartehanks.com
3. Call 1-888-825-1518 and follow the voice prompts

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By providing my information to Novo Nordisk and signing and dating below, I certify I am at least eighteen (18) years of age and agree to the terms above.

* Signature (required) ___________________________________________

* Date (required) ____________________ mm/dd/yyyy