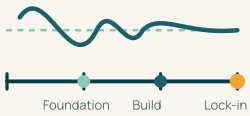
EvenKeel

12-WEEK PROGRAM



The 12-Week *Waistline* Reset

A step-by-step plan for belly fat and metabolic health: food, strength, sleep, weekly check-ins, plateau troubleshooting and the numbers to review with your doctor

GUIDE 04

EDITION 2026

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BEFORE YOU START

This program is educational. It is not medical advice and does not replace your doctor, dietitian or care team.

- **See a doctor for a checkup first.** Erectile problems can be an early warning sign of heart disease, diabetes or high blood pressure. Ask for a baseline checkup before or soon after you begin.
- **Get urgent care** for chest pain or pressure, fainting, sudden severe shortness of breath (call 911), or an erection lasting more than 4 hours.
- **Get medical clearance before new exercise** if you have heart disease, uncontrolled high blood pressure, a recent surgery or injury, joint or lung problems, or any other ongoing condition.
- **If you take medicine for diabetes** (especially insulin or a sulfonylurea such as glipizide, glyburide or glimepiride), changing what and when you eat, and moving more, can cause **low blood sugar**. Talk with your doctor *before* you start. Learn the signs of a low (shakiness, sweating, confusion, fast heartbeat), keep a fast-acting sugar with you, and **never change a dose yourself**. Some blood-pressure medicines may also need review as habits change; that is your doctor's call.
- **Not for** people with type 1 diabetes or an eating disorder (or a history of one) unless their care team agrees. **If you have kidney disease**, check the protein guidance in this book with your doctor before using it.
- **Never stop or change any medicine** without talking to your doctor. Doctor-prescribed treatments for erectile problems (such as PDE5 inhibitors) are a valid option; this program works alongside medical care, not instead of it.
- **No crash dieting.** This plan never asks you to eat very little, skip meals, fast or cut out whole food groups. If you ever count, do not go below about 1,500 calories a day without medical supervision.

How this program works

The 12-Week Waistline Reset brings the whole Plate · Pace · Pause Method together into one steady, structured plan. Each week has a single focus, a short explanation and a daily checklist. You add one new habit at a time on top of the ones you already have.

- **Time needed:** about 20–40 minutes a day, most of it walking you'd fit around meals.
- **Equipment:** a soft tape measure, a sturdy chair, a wall, a step. Light dumbbells or bands are optional.
- **Mindset:** this is about your metabolic health and your blood vessels, not your appearance. Bodies change at different speeds, and the habits matter even when the tape doesn't move much.

CHAPTER 1

Why waist size matters for your blood vessels

There are two main kinds of body fat. **Subcutaneous fat** sits just under the skin. **Visceral fat** sits deeper, around the organs in your belly. Visceral fat is more active: it releases substances that are linked with inflammation and with **insulin resistance**, a state in which the body needs more insulin to move sugar from the blood into the cells.

Research links extra belly fat, insulin resistance, prediabetes, diabetes and high blood pressure with erectile problems. They share a common thread: stress on the **endothelium**, the thin lining inside blood vessels that helps them relax and widen by releasing nitric oxide. Erections depend on that lining working well, which is one reason erectile problems can show up before other heart and vessel problems do.



Linked factors researchers study together (a simplified picture)

These factors tend to travel together. Everyday habits can work on several at once.

The hopeful part

Visceral fat tends to respond to the same everyday habits this program uses: regular walking, strength training, more protein and fiber, fewer sugary drinks, better sleep and less alcohol. A well-known Italian trial found that men with obesity who lost weight and exercised more often reported improved erectile function. Large US programs such as the CDC's National Diabetes Prevention Program show that steady, modest lifestyle change can lower the risk of developing type 2 diabetes in people with prediabetes.

i **No shame here.** Waist size is shaped by genes, age, stress, sleep, medicines, work hours and food environment, not just willpower. We use the tape only as one gentle signal of metabolic health. You can skip measuring entirely and still follow the whole plan.

CHAPTER 2

How to measure your waist

Health organizations such as the NIH use waist size as a simple, at-home sign of belly fat. For men, a waist over about 40 inches (102 cm) is linked with higher risk of type 2 diabetes and heart disease; your doctor may use different cut-offs depending on your background and health. That number is a risk marker, not a goal you must hit.

Step by step

1. Stand up straight, feet together, in light clothing or none.
2. Find the top of your hip bones on both sides.
3. Wrap a soft tape measure around your body just above the hip bones, level all the way around (use a mirror to check the back).
4. Keep the tape snug but not pressing into the skin.
5. Breathe out normally, then read the tape. Don't pull your belly in.
6. Measure twice and write down the average.

Rules that keep it fair

- [ ] Measure once a week, on the same day, at the same time (morning, before breakfast, works well).
- [ ] Don't measure daily; small changes from water and meals are normal noise.
- [ ] Look at the trend over four weeks, not a single reading.
- [ ] If measuring makes you anxious, measure once a month or not at all. Track your habits instead.

WORKSHEET

Starting date:

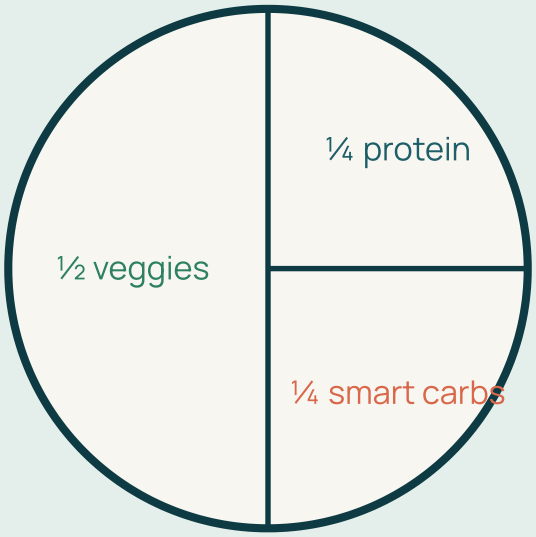
Starting waist (inches):

Why I'm doing this (in my own words):

CHAPTER 3

Food: protein and fiber, the hand-portion way

You will not count calories in this program. Instead you'll use your hand and your plate, which are always with you and scale with your body size.



HAND PORTIONS PER MAIN MEAL (MOST MEN)

FOOD GROUP	PORTION	EXAMPLES
Protein	1–2 palms (size and thickness of your palm)	Chicken, turkey, fish, eggs, lean beef or pork, beans and lentils, tofu, Greek yogurt, cottage cheese
Non-starchy vegetables	2 fists, or half the plate	Broccoli, green beans, salad, peppers, cabbage, zucchini, frozen mixed veg
Smart carbs	1 cupped hand to 1 fist	Beans, lentils, oats, brown rice, whole-grain bread, potatoes with skin, fruit
Healthy fats	1 thumb	Olive oil, nuts, seeds, avocado, peanut butter

Simple daily targets

- [ ] **Protein at every meal.** Aim for 1–2 palms at each main meal, including breakfast. Protein helps you feel full and supports muscle while you train.
- [ ] **Fiber, five ways.** Aim for about five fiber "hits" a day: a fist of vegetables, a piece of fruit, a cupped hand of beans or lentils, a whole grain, a small handful of nuts or seeds. Add fiber gradually and drink water, to avoid bloating.
- [ ] **Food order.** Eat the vegetables and protein first and the starchy carbs last. Small studies show this order can lower the after-meal rise in blood sugar.
- [ ] **Drinks.** Water, sparkling water, unsweetened tea or black coffee most of the time. Swap one sugary drink a day at a time.
- [ ] **Regular meals.** Three meals, plus a planned snack if you're hungry. No skipping meals; that often leads to bigger evening eating.

! **Safety floor.** Don't shrink portions until you feel weak, dizzy or constantly hungry. If you ever choose to count calories, do not go below about 1,500 a day without medical supervision. If you have kidney disease, ask your doctor what protein amount is right for you.

CHAPTER 4

Strength: the 12-week progression

Muscle is your body's largest store for blood sugar. Building and keeping it matters more with every decade. Twice a week (three times in Phase 3, if you like), do one of the sessions below. No gym needed.

Effort guide: end each set feeling you could do 2–3 more good reps. Rest 60–90 seconds between sets. Warm up for 3 minutes with marching and arm circles. Breathe out as you push; never hold your breath.

SESSION 1 · LOWER BODY AND PUSH

EXERCISE	WEEKS 1–4	WEEKS 5–8	WEEKS 9–12
Chair squat	2 × 10	3 × 12	3 × 12, slow lowering or holding a weight
Wall or counter push-up	2 × 8	3 × 10	3 × 10 at a lower surface
Step-ups (each leg)	2 × 8	3 × 8	3 × 10, optional light weight
Calf raises	2 × 15	3 × 15	3 × 12 single leg
Counter plank	2 × 20 sec	3 × 30 sec	3 × 40 sec

SESSION 2 · HIPS, BACK AND BALANCE

EXERCISE	WEEKS 1–4	WEEKS 5–8	WEEKS 9–12
Sit-to-stand (arms crossed)	2 × 10	3 × 10	3 × 12
Glute bridge	2 × 12	3 × 12 with 2-sec pause	3 × 10 single-leg or 3-sec pause
Hip hinge (hands on hips, or holding a weight)	2 × 10	3 × 10	3 × 12
Row (band, or a backpack held in one hand, other hand on a table)	2 × 10 each	3 × 10 each	3 × 12 each
Single-leg balance near a counter	2 × 20 sec each	3 × 30 sec each	3 × 30 sec, eyes on a far point, hand off the counter

Tip. When the top of a range feels easy for all sets two sessions in a row, move to the next step. If a step feels too hard, stay where you are for another week.

CHAPTER 5

Sleep and alcohol: the Pause steps

Sleep

Short sleep is linked with worse blood sugar control, more hunger the next day and more cravings for sweet and starchy foods. Most adults need 7–9 hours. The program adds sleep steps one at a time:

1. **A steady wake-up time**, even on weekends (within about an hour).
2. **"Kitchen closed"** 2–3 hours before bed: dinner done, kitchen tidied, a cup of herbal tea or water if you like. This is a wind-down ritual, not a fasting plan; if you're truly hungry, have a planned small snack such as yogurt or a piece of fruit with peanut butter.
3. **A 20-minute screen-light wind-down**: dim lights, a book, a shower, slow breathing.
4. **A cool, dark, quiet bedroom.**
5. **Caffeine before noon or early afternoon.**

> **Snoring and daytime sleepiness.** Loud snoring, pauses in breathing or feeling exhausted despite enough time in bed can be signs of sleep apnea, which is linked with both metabolic and erectile health. Ask your doctor about a sleep evaluation.

Alcohol

Alcohol adds energy with little fullness, can loosen food choices late in the evening, disturbs deep sleep, and can affect erections. US dietary guidance suggests men who drink limit themselves to two standard drinks or fewer in a day, and many health groups now say less is better. The program's steps:

- [ ] Count your current drinks for one week, honestly, without changing anything.
- [ ] Choose at least 3–4 alcohol-free days a week.
- [ ] On drinking days, alternate each drink with a glass of water and eat a Plate-style meal.
- [ ] Swap sugary mixers for soda water; pick smaller pours.
- [ ] If cutting down is hard, that's common and not a failing. Free help: talk to your doctor, or call the SAMHSA National Helpline (1-800-662-4357).

! **Alcohol and diabetes medicine.** Alcohol can increase the risk of low blood sugar, sometimes hours later, especially with insulin or sulfonylureas. Ask your doctor how it fits with your treatment.

CHAPTER 6

The 12 weeks at a glance

WEEKS 1-4

Foundation

Learn the plate, the after-meal walk and the strength basics. Build the cues.

WEEKS 5-8

Build

More walking, more fiber, progressive strength, sleep and alcohol steps.

WEEKS 9-12

Lock-in

Handle real life: eating out, travel, stress. Make the habits automatic.

ONE NEW FOCUS PER WEEK

WEEK	FOCUS	DAILY WALKS	STRENGTH
1	Measure, plan, protein breakfast	10 min after 1 meal	Learn both sessions
2	The plate at dinner	10 min after 1 meal	2 sessions
3	Drinks swap	10 min after 2 meals	2 sessions
4	Food order + review	10 min after 2 meals	2 sessions
5	Fiber five	10 min after 2–3 meals	2 sessions (step up)
6	Steady wake time + kitchen closed	+ 1 longer walk	2 sessions
7	Alcohol steps	+ movement snacks	2 sessions
8	Stress and evening snacking + review	Toward ~150 min/week	2 sessions
9	Eating out and work lunches	~150 min/week	2–3 sessions (step up)
10	Weekends and social events	~150 min/week	2–3 sessions
11	Batch cooking and travel	~150 min/week	2–3 sessions
12	Review, doctor visit, maintenance plan	Your own routine	Your own routine

PHASE 1 · FOUNDATION

Week 1 · Measure, plan, protein breakfast

Focus: set your starting point and add protein to breakfast. Many men eat a light, starchy breakfast (a pastry, cereal, a sweet coffee drink) and then get very hungry later. A breakfast with a palm or two of protein, such as eggs, Greek yogurt or cottage cheese with fruit, tends to keep you fuller.

This week, book your baseline checkup if you don't have recent results (see chapter 13), measure your waist once, and learn both strength sessions slowly.

- [ ] Protein at breakfast (1–2 palms).
- [ ] 10-minute easy walk after your biggest meal (can-talk pace).
- [ ] Water with each meal.
- [ ] Strength: try session 1 on one day and session 2 on another, easy effort.
- [ ] Lights out at a reasonable time.

Quick protein breakfasts. Two or three scrambled eggs with spinach and whole-grain toast · Greek yogurt with berries and a spoon of nuts · cottage cheese with sliced peaches and oats · leftover chicken and veggies in a tortilla.

PHASE 1 · FOUNDATION

Week 2 · The plate at dinner

Focus: use the plate rule at dinner: half non-starchy vegetables, a quarter protein, a quarter smart carbs. You don't need new recipes. Take what you already cook and rebalance it: more vegetables on the side, a palm of protein, a fist of rice or potatoes instead of a heap.

Frozen vegetables count and save time. A bag of frozen broccoli or green beans microwaved with a little olive oil and garlic powder fills half a plate in five minutes.

- [ ] Protein breakfast (keep it going).
- [ ] Dinner plate: ½ veggies · ¼ protein · ¼ smart carbs.
- [ ] 10-minute walk after dinner.
- [ ] Two strength sessions this week.
- [ ] A movement snack if you sit for more than an hour.

PHASE 1 · FOUNDATION

Week 3 · The drinks swap

Focus: sugary drinks are one of the fastest ways to send blood sugar up, and they don't fill you up. This week, list every drink you have for two days: soda, juice, sweet tea, energy drinks, sweetened coffee drinks, sports drinks. Then swap *one* a day.

EASY SWAPS

INSTEAD OF	TRY
Regular soda	Sparkling water with lime, or a diet soda as a step on the way
Sweet tea	Half-sweet, then unsweetened iced tea with lemon
Large flavored coffee drink	Small coffee with milk; add cinnamon instead of syrup
Fruit juice	A whole piece of fruit and a glass of water
Sports drink at the desk	Water bottle you refill twice a day

- [ ] Protein breakfast · Dinner plate.
- [ ] One sugary drink swapped.
- [ ] 10-minute walks after **two** meals.
- [ ] Two strength sessions.

PHASE 1 · FOUNDATION

Week 4 · Food order and your first review

Focus: eat in order: vegetables first, then protein, then the starchy part of the meal. Small studies show this order can lower the after-meal rise in blood sugar compared with eating the starch first. It costs nothing and doesn't change what you eat, only the sequence.

At the end of the week, do your first four-week review with the check-in worksheet (chapter 11). Look at your habit ticks first, waist trend second. If you completed most of the checklist on most days, move on to Phase 2. If not, repeat Week 4. That's a smart choice, not a setback.

- [ ] Veggies first, protein second, starch last (at least at dinner).
- [ ] Protein breakfast · Dinner plate · Drink swap.
- [ ] 10-minute walks after two meals.
- [ ] Two strength sessions.
- [ ] Four-week review completed.

PHASE 2 · BUILD

Week 5 · Fiber five

Focus: fiber slows digestion, which can make the after-meal curve gentler, and it helps you feel full. Most US adults eat much less than recommended. Aim for five fiber hits a day (see chapter 3). Add one or two at a time and drink extra water.

Cheap, easy fiber: canned beans (rinsed), lentils, frozen berries, oats, apples and pears with the skin, popcorn, whole-grain bread, bagged salad, carrots, chia or ground flax seeds.

- [ ] Five fiber hits today.
- [ ] Protein at every main meal.
- [ ] Walks after two or three meals.
- [ ] Strength: move to the weeks 5–8 column.

PHASE 2 · BUILD

Week 6 · Steady wake time and kitchen closed

Focus: anchor your sleep. Pick a wake-up time you can keep seven days a week. Count back 7½–8 hours for your target bedtime. Then set a "kitchen closed" time 2–3 hours before bed. Clean up, turn off the kitchen light, and let that be a signal that the eating day is done.

Add one longer walk this week (20–30 minutes at an easy pace) on a day off.

- [ ] Same wake-up time (within an hour).
- [ ] Kitchen closed on time; a planned small snack only if truly hungry.
- [ ] Fiber five · Protein at meals.
- [ ] After-meal walks + one longer walk this week.
- [ ] Two strength sessions.

PHASE 2 · BUILD

Week 7 · Alcohol steps and movement snacks

Focus: first, count your drinks for this week without judging. Then choose your alcohol-free days and your swaps (chapter 5). Second, add movement snacks: every hour of sitting, stand up for 2–5 minutes of sit-to-stands, calf raises, stairs or marching.

> **"I'm taking it easy on drinks this month, I'll have a sparkling water with lime."**
>
> **"I'm good for now, thanks. I'll grab one later if I feel like it."**

- [ ] Alcohol-free day, or alternate drinks with water.
- [ ] Movement snack after each hour of sitting.
- [ ] Wake time · Kitchen closed.
- [ ] Plate · Fiber five · Walks.
- [ ] Two strength sessions.

PHASE 2 · BUILD

Week 8 · Stress, evening snacking and your second review

Focus: stressful days often end at the snack cupboard. That's a normal human pattern, not a lack of discipline. This week, try a 4-minute decompression when you get home: sit, breathe in through your nose for 4 counts, out slowly for 6 counts, for about 4 minutes. Then decide whether you're hungry or just tired. Keep a planned evening snack (a yogurt, a piece of fruit, a handful of nuts) instead of grazing.

Your weekly activity should now be approaching about 150 minutes, counting walks and other moderate activity. Do your second four-week review.

- [ ] 4-minute decompression after work.
- [ ] Planned evening snack, if any; kitchen closed.
- [ ] All Phase 1 and Phase 2 habits.
- [ ] Two strength sessions.
- [ ] Eight-week review completed.

PHASE 3 · LOCK-IN

Week 9 · Eating out and work lunches

Focus: take the plate rule anywhere. At restaurants, start with a salad or a vegetable side, choose a grilled or baked protein, and ask for a side of vegetables instead of a second starch. At fast-food places, pick grilled chicken, a bowl with beans and vegetables, or a burger without the large fries and soda. For work lunches, pack leftovers from a Plate-style dinner.

Strength: move to the weeks 9–12 column. Add a third session if you enjoy it and recover well.

- [ ] One meal out "plated" well.
- [ ] Packed lunch or a planned order.
- [ ] Walk after lunch, even 5 minutes.
- [ ] All earlier habits.
- [ ] Two or three strength sessions.

PHASE 3 · LOCK-IN

Week 10 · Weekends and social events

Focus: weekends are where many plans quietly slip, with later nights, bigger meals and more drinks. You don't need to be perfect. Choose your "two anchors" for every weekend: for example, a protein breakfast both days and a walk after the biggest meal. At parties and barbecues, fill your plate with protein and vegetables first, have one plate rather than grazing, and keep a glass of water in your hand.

- [ ] Two weekend anchors kept.
- [ ] Walk after the biggest social meal.
- [ ] Wake time within an hour on weekends.
- [ ] All earlier habits on weekdays.
- [ ] Two or three strength sessions.

PHASE 3 · LOCK-IN

Week 11 · Batch cooking and travel

Focus: make the healthy choice the easy one. Spend about an hour on one day cooking two proteins (for example, a tray of chicken thighs and a pot of chili with beans), one big tray of roasted vegetables and a pot of brown rice or potatoes. Mix and match through the week.

For travel: walk the airport or the hotel hallway after meals, pack nuts and fruit, choose a protein breakfast at the hotel, and use the movement snacks in your room.

- [ ] Batch-cook session done.
- [ ] Travel or busy-day backup plan written down.
- [ ] All earlier habits.
- [ ] Two or three strength sessions.

PHASE 3 · LOCK-IN

Week 12 · Review, doctor visit, your plan

Focus: look back over twelve weeks. Fill in the final check-in, review your habit ticks, your strength progress and your waist trend. Book your follow-up checkup and bring the worksheet from chapter 13. Then write your maintenance plan (chapter 14).

Whatever the tape says, you have built habits that research links with healthier blood sugar, blood pressure and blood vessels. Some men see their waist change steadily; others mainly notice more energy, better sleep or easier stairs. Both are worth keeping.

- [ ] Final check-in completed.
- [ ] Follow-up appointment booked.
- [ ] Maintenance plan written.
- [ ] All your habits, your way.

CHAPTER 11

Weekly check-in worksheet

Fill this in at the end of each week. It takes five minutes. Copy it into a notebook if you prefer.

WORKSHEET

Week:

Date:

HABIT	DAYS DONE (0–7)
Protein at breakfast	
Plate rule at dinner	
Fiber five	
No sugary drinks (or swapped)	
After-meal walks	
Movement snacks	
Strength sessions (count)	
Wake time kept / kitchen closed	
Alcohol-free days	

Waist (optional, inches):

Energy · Sleep · Mood · Confidence (1–5 each):

What went well:

What got in the way:

One adjustment for next week:

Tip. If most habits are done on 5 or more days, you're on track. If a habit is stuck below 3 days for two weeks, make it smaller (for example, a 5-minute walk instead of 10).

CHAPTER 12

When progress stalls: troubleshooting

Plateaus are normal. Bodies adapt, water shifts, and muscle gain can mask changes on the tape. Before changing anything, check that you've been consistent for at least three to four weeks. Then use this table.

PLATEAU TROUBLESHOOTING

WHAT YOU NOTICE	POSSIBLE REASON	WHAT TO TRY
Waist hasn't changed in 4 weeks, habits mostly done	Portions crept up; weekends undo weekdays	Check the plate size and smart-carb portion; pick two weekend anchors
Hungry all the time	Too little protein or fiber; skipped meals	1–2 palms protein per meal, fiber five, don't skip breakfast; eat more, not less
Evening snacking	Stress, tiredness, under-eating earlier	4-minute decompression, a planned snack, kitchen closed, earlier bedtime
Walks keep getting skipped	No cue, weather, timing	Shoes by the door; indoor options; two 5-minute walks
Strength stalled or sore joints	Progressing too fast, poor recovery	Repeat a week, use easier options, sleep more; ask a physical therapist
Tired and low on energy	Short sleep, under-eating, possible medical cause	Protect 7–9 h, eat regular meals; tell your doctor, especially if snoring
Drinks creeping back	Social habits, stress	Plan alcohol-free days ahead; scripts from week 7; ask for support
Shaky, sweaty or confused after walks or meals	Possible low blood sugar (especially on diabetes medicine)	Treat as your care team taught you and **call your doctor**; never adjust doses yourself

! **Not the answer:** cutting food drastically, skipping meals, long fasts or extreme exercise. These usually backfire and can be unsafe, especially with diabetes medicine. If you've been consistent for two months with little change, talk with your doctor or a registered dietitian. Some medicines and health conditions affect weight and appetite, and they can help.

CHAPTER 13

Numbers to review with your doctor

Only your doctor can order, interpret and act on these tests. This chapter helps you ask good questions and keep your results in one place. We don't give target numbers for you; your doctor will tell you what's right for your health.

A SIMPLE SCHEDULE TO DISCUSS WITH YOUR DOCTOR

MEASURE	WHAT IT SHOWS	WHEN TO ASK ABOUT IT
A1C	Average blood sugar over about the past 2–3 months	At your baseline visit and at the frequency your doctor recommends (often every 3–12 months, depending on your results)
Fasting glucose	Blood sugar after not eating overnight	Baseline, then as your doctor advises
Lipid panel	LDL, HDL, triglycerides, total cholesterol	Baseline, then as your doctor advises
Blood pressure	Pressure in your arteries	Every visit; ask whether home monitoring makes sense for you
Waist	A simple sign of belly fat	Weekly at home (optional); share the trend at visits
Other tests your doctor chooses	For example kidney function, liver tests, testosterone if symptoms suggest it	Your doctor decides

Questions to ask

- [ ] "Given my numbers, what is my risk for diabetes and heart disease?"
- [ ] "Which of my results would you like to see change, and when should we recheck?"
- [ ] "I'm walking after meals and doing strength training. Is that safe with my medicines? Do I need to watch for low blood sugar?"

- [ ] "Could any of my medicines affect erections, weight or blood sugar?" (Don't stop any of them on your own.)
- [ ] "What treatment options for erectile problems would be suitable for me?"
- [ ] "Am I eligible for a diabetes prevention program or a dietitian referral?"

WORKSHEET

DATE	A1C	FASTING GLUCOSE	LIPIDS	BLOOD PRESSURE	WAIST	DOCTOR'S NOTES

CHAPTER 14

Your maintenance plan

The goal after week 12 isn't to "finish". It's to keep the habits that worked, loosen the ones you don't need, and catch slips early. Think of it as staying on an even keel.

Your core five (keep these most days)

1. Protein at breakfast and the plate rule at dinner.
2. A 10-minute walk after your biggest meal.
3. Two strength sessions a week.
4. A steady wake time and kitchen closed.
5. Water as your main drink; alcohol within the limits you chose.

Your early-warning plan

If your waist trend creeps up for a month, or your habit ticks drop below half for two weeks, go back to the week that covers the habit that slipped and repeat it. No guilt, no restarting from zero.

WORKSHEET

My core habits:

My weekend anchors:

My early-warning sign:

What I'll do if it happens:

Next checkup date:

Check in monthly with the worksheet, keep regular checkups, and let your doctor guide any changes to your treatment.

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This product is for educational purposes only and is not medical advice. It does not diagnose, treat, cure or prevent any disease. ED can be a sign of a serious health condition — please see a doctor. If you take medicine for diabetes, talk with your doctor before changing your diet or activity. Results vary. © 2026 EvenKeel.