



Ladies Panel

Or do you not know that your body is a temple of the Holy Spirit who is in you, whom you have from God, and that you are not your own? For you have been bought with a price: therefore glorify God in your body.
 ~ 1 Corinthians 6:19-20

Age	Unique Characteristics	Recommendations
20s	Generally very fit until age 25 when bone mass is highest- exercise potential is maximal.	See general recommendations.
30s	Time of being overly busy and having no time to exercise; risk of weight gain; loss of 1/2 lb of muscle yearly.	See general recommendations.
40s	Beginning of changes associated w/ perimenopause, health problems, more easily injured during exercise. Normal aging changes and risk of yo-yo dieting.	Add strength training to replace muscle loss; include cardiovascular work outs to avoid health problems.
50s	More body changes in joints & muscles; less likely to exercise due to more soreness of joints and muscles "worsened w/ exercise."	Consider exercise that is non-weight bearing (biking (swimming, Pilates). Reward of exercising--to generally feel better, and to help any existing medical problems.
60s+	Experience mind and body slowing down.	If in poor health, try to be physically active daily even for short periods; otherwise, exercise as much as you feel comfortable w/o injury.

General Guidelines for Exercise

Consistency: Be consistent and disciplined in your exercise.

- Choose activities that you like to do.
- Exercise with a partner.
- Choose location (outside/inside) and times of day that you would be mostly likely to exercise.

Activity: Tailor an exercise plan that's right for you.

- Choice of activity:

Start slowly to avoid injury. Consider your general health and bodily composition; even with physical limitations, you can find something appropriate to do.

Utilize good fitness programs in various formats: DVDs, classes, internet, fitness magazines.

Vary what you do to avoid boredom and try to learn new exercises.

Yard work and physically vigorous household projects also count as exercise.

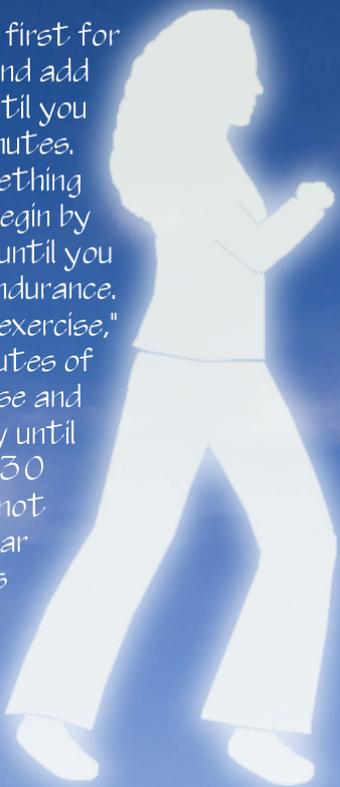
When you reach a plateau

- 1) switch activities
- 2) increase the intensity
- 3) add time to your workout

- Duration/frequency of activity:

Goal: 5-6 days weekly for 30-45 minutes

For example, walk first for 5-10 minutes and add 10 minutes weekly until you get to 30 minutes. If you want to do something more cardiovascular, begin by walking/running until you build up your endurance. If you just want to "exercise," start with 10 minutes of some sort of exercise and then do this twice daily until you have done about 30 minutes/day. This does not improve your cardiovascular status, but it does increase your muscle strength, improve your overall health and contributes to weight loss.



- ✓ For cardiovascular fitness, do 40-60 minutes of varied levels of exercise 6 days a week.
- ✓ Work at sustaining your heart rate during exercise to 60-70 % of maximal heart rate (maximal heart rate equals $225 - \text{age} \times 0.6$).

Reasons for exercise: (no particular order)

- To maintain a testimony of good stewardship of your gift of health
- To look and feel your best
- To maintain strong bones
- To avoid weight gain associated with “metabolic syndrome,” a condition which predisposes to diabetes, heart disease, osteoarthritis/joint replacement. Medication alone to treat metabolic syndrome is 9 billion dollars yearly.
- To avoid becoming unstable in elderly years; as single women, we may not have someone to care for us as we age.

Remember, avoid judging others who are overweight—they may have medical problems or be on medication that causes weight gain.

Helpful websites:

<http://www.mypyramid.gov>

<http://www.webmd.com>

<http://lindahaught.com>

Health Screening Recommendations

Based on National Standards

Adults age 18 to 40: Exams at least every 2 years

Physical Examination	
Measurements of height, weight, blood pressure	
General physical examination (head, neck, chest, heart, abdomen, limbs)	
Pelvic exam in women every 1-3 years (see Pap below)	
Physical breast exam by doctor	

Lab and X-Ray Tests	
Cholesterol	Lipid profile (total, HDL and LDL cholesterol) every 5 years over age 20
Fasting blood sugar	At doctor's discretion if family history of diabetes, history of gestational (pregnancy) diabetes, overweight, high blood pressure or high cholesterol, or Native American, Hispanic or African American descent
Pap in women	Annually for 3 years then at least every 3 years (start age 21 or 3 years after first intercourse).
Infectious disease screening	Rubella screening in women if not previously done
	Varicella (chicken pox) blood test if no history of the disease
	HIV screen offered to all adults
	If at high risk: TB, hepatitis B and C screening

Immunizations
Tetanus and diphtheria booster every 10 years. (Tetanus, diphtheria and pertussis booster once.)
Rubella or MMR (measles-mumps-rubella), varicella (chicken pox) if not immune
Hepatitis B if high-risk, series of 3 shots.
HPV vaccine (Gardasil) for women under age 26 to prevent cervical cancer.
Annual flu shot and one-time pneumonia shot for people with chronic illness

Other Screenings
Mouth, skin, breast, colon or other cancer screening depending on risk
Ultrafast heart scan or stress test if risk factors for heart disease; chest CT screen if risk for lung cancer

Health Screening Recommendations

Based on National Standards

Adults age 40-64: Exams every year

Update personal and family medical history

Assessment & advice: diet, exercise, dental health, sexuality, depression, domestic violence, injury prevention, cancer, cardiovascular (heart or stroke) disease risks, menopause, osteoporosis

Physical Examination	
Measurements of height, weight, blood pressure	
General physical examination (head, neck, chest, heart, abdomen, limbs)	
Breast exam in women every year; pelvic exam every 1-3 years	
Rectal Exam (with examiner's finger) every year starting at 40	

Lab, EKG and X-Ray Tests	
Cholesterol	Every 5 years if previously normal. Lipid profile (total, HDL and LDL)
Fasting blood sugar	Every 3 years; or every 1 year if family history of diabetes, history of gestational (pregnancy) diabetes, overweight, high blood pressure or high cholesterol, Native American, Hispanic or African American descent
Colonoscopy / Sigmoidoscopy:	Every 5-10 years after age 50. Colonoscopy preferred. If family history of colon cancer, start at 40, or 10 years before the youngest relative developed colon cancer.
Mammogram	Every 2 years for average-risk women aged 50 to 74. Evidence is insufficient to recommend for or against screening in women 75 or older
Bone Density	Women at menopause
EKG	One-time baseline at 40-50. Resting EKGs are not useful to detect heart disease.

Immunizations	
Tetanus and diphtheria booster every 10 years. (Tdap booster once.)	
Measles if born after 1956 and haven't received 2 measles immunizations	
Pneumococcal vaccine (one-time dose) if certain chronic illnesses	
Influenza vaccine (every fall) if chronic illness, over 50, or working in vital public role (police, fire, safety, teacher, health care) or a long-term-care facility for children or adults	
Zostavax (one-time shot age 60 to prevent shingles)	

Other Screenings	
Mouth, skin, breast, colon or other cancer screening depending on risk	
Infectious disease screening: HIV in all adults. If at high risk: TB, hepatitis B and C, sexually transmitted disease.	
Ultrafast heart scan (optional); Stress test if risk for heart disease (every 5 years in patients with diabetes over age 40). Chest CT screen if lung cancer risk	

Health Screening Recommendations

Based on National Standards

Adults age 65-80: Exams every year

Update personal and family medical history

Assessment and counseling: Diet, mobility, exercise, depression, advanced directives (living will and health care power of attorney), memory and mental difficulties, domestic violence, elder abuse, dental health, sexuality, activities of daily living, fall risks, home safety, CPR classes for household members.

Physical Examination	
Measure height, weight, blood pressure	
Vision screening, question about hearing difficulty and order hearing test if indicated	
General physical examination (head, neck, chest, heart, abdomen, limbs)	
Pelvic exam if symptoms from urinary, pelvic or rectal areas	

Lab, EKG and X-Ray Tests	
Cholesterol	Every 5 years to age 75. Lipid profile (total, HDL and LDL)
Fasting blood sugar	Every year if family history of diabetes, history of gestational (pregnancy) diabetes, overweight, high blood pressure or high cholesterol, Native American, Hispanic or African American descent
Pap	Pap may be stopped at age 65-70 if at least 3 previous Paps have been normal and patient is judged to be low risk. Option: HPV test
Colonoscopy / Sigmoidoscopy	Every 5-10 years
Mammogram	Every 2 years for average-risk women aged 50 to 74. Evidence is insufficient to recommend for or against screening in women 75 or older
Stool occult blood screening	(stool sample at home to detect hidden blood) Every year
Bone Density	Women at menopause
EKG	EKG: baseline once if otherwise healthy and not done before. Not useful for screening.
HIV, TB, hepatitis B and C testing	If in high risk group (institutional care, chronic illness, contact with others with TB, low income, immigrant, alcoholic, Native American, health care worker or volunteer)
Ultrafast heart scan or stress test	If at risk for heart disease (stress test every 5 years if diabetes).
Lung cancer screen	Chest CT if at risk.

Immunizations
Pneumococcal (pneumonia) vaccine once. May need booster every 5-10 years
Influenza (flu) vaccine: every fall between October and December
Tetanus and diphtheria vaccine every 10 years
Zostavax: One-time shot after age 60 to prevent shingles
Other Screenings
Mouth, skin, breast, colon or other cancer screening depending on risk
Infectious disease screening: HIV in all adults. If at high risk: TB, hepatitis B and C, sexually transmitted disease.
Ultrafast heart scan (optional); Stress test if risk factors for heart disease (every 5 years in patients with diabetes over age 40). Chest CT screen if risk for lung cancer

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