Vegetables:

Every meal!

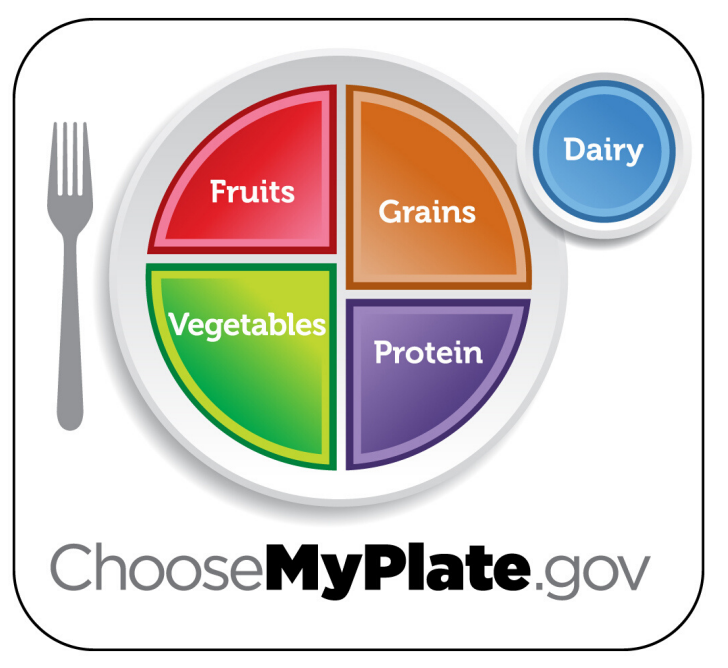
*Choose non-starchy vegetables more frequently

*Eat 2-3X more vegetables than fruit

Non-Starchy

- Asparagus
- Bell peppers
- Beets
- Broccoli
- Brussels sprouts
- Cabbage
- Carrots
- Cauliflower
- Cucumbers
- Eggplant
- Garlic
- Jicama
- Kale
- Lettuce
- Mushrooms
- Okra
- Radishes
- Spinach
- Tomatoes
- Turnips
- Winter squash

- *Starchy Vegetables*
- Acorn squash
- Beans
- Butternut squash
- Corn
- Lentils
- Parsnips
- Peas
- Potatoes
- Pumpkin
- Sweet potatoes
- Zucchini



Fruits:

- **2-3 servings/day**
- **Apples**
- **Bananas**
- **Berries**
- **Cherries**
- **Grapes**
- **Mango**
- **Melons**
- **Peaches**
- **Pineapples**
- ****Limit fruit juice!**

Grains

- ****Make half of your grains whole grains!**
- **Bread/wheat**
- **Cereal**
- **Pasta**
- **Oats**
- **Quinoa**
- **Barley**
- **Farro**
- **Brown/wild/black/purple rice**

Protein

- Chicken
- Turkey
- Fish/shellfish
- Beef
- Bison
- Deer
- Lamb
- Goat
- Pork
- Beans/peas (also a starch)
- Nuts/nut butter (also a fat)
- Soy/tofu/edamame

Dairy

- Milk
- Yogurt (Greek for high protein!)
- Cheese
- Dairy alternatives such as soy or almond milk

Healthy Fats

- Almonds
- Avocado
- Avocado oil
- Brazil nuts
- Cashews
- Olive oil
- Nut butters
- Seeds
- Walnuts

Snacks

- Limit processed/junk foods
- Try not to add salt to foods
- Limit soda, coffee, and energy drinks
- Sweets in moderation

Warren County Health District

Public Health

Prevent. Promote. Protect.

Protein

- Chicken
- Turkey
- Fish/shellfish
- Beef
- Bison
- Deer
- Lamb
- Goat
- Pork
- Beans/peas (also a starch)
- Nuts/nut butter (also a fat)
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Healthy Weight Loss

- 1-2 lbs/wk
- Focus on high protein foods and vegetables FIRST
- Ensure a minimum of 1200 calories daily to avoid underfeeding
- Estimated needs average 1600 calories for women 65 and older
- Intake averages 2000 calories for men 65 and older

Warren County Health District

Public Health
Prevent. Promote. Protect.

UNDERSTANING THE FOOD LABEL

Calories: This will tell you how many calories are in a serving size. It will also tell you how many of those calories are from fat. As a general rule, no more than 25 to 35 percent of the total calories should come from fat.

Total Fat: Measured in grams, total fat will list the types of fat found in a serving size of packaged food. Saturated fat and trans fats are associated with an increased risk of cardiovascular disease. Many unsaturated fats are good for you – in moderation.

Cholesterol: This number tells you how much cholesterol is included in one serving size of the product. It does not differentiate between cholesterol from saturated fats, or unsaturated fats.

Sodium: Like sugar, sodium (salt) is naturally found in a lot of foods. Most healthy adults should keep their sodium level to less than 2,300 mg per day.

Dietary Fiber: Dietary fiber is an important component of good nutrition. It aids in digestion and bowel function. A high fiber diet that is low in saturated fat and cholesterol can help reduce the risk for heart disease.

% Daily Value: The % of daily value is based on a 2,000 calorie per day diet. Your calorie requirements may differ, so these percentages may not be accurate for you.

Nutrition Facts

Serving Size 1 cup (228g)
Servings Per Container 2

Amount Per Serving

Calories 250 Calories from Fat 110

	% Daily Value*
Total Fat 12g	18%
Saturated Fat 3g	15%
Trans Fat 3g	
Cholesterol 30mg	10%
Sodium 470mg	20%
Total Carbohydrate 31g	10%
Dietary Fiber 0g	0%
Sugars 5g	
Protein 5g	
Vitamin A	4%
Vitamin C	2%
Calcium	20%
Iron	4%

* Percent Daily Values are based on a 2,000 calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.

	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

1. Start Here
2. Check Calories
3. Limit these Nutrients
4. Get Enough of these Nutrients
5. Quick Guide to % DV
   - → 5% or less is Low
   - → 20% or More is High
6. Footnote

TYPES OF ADDED FAT
Animal fat
Butter
Cocoa butter
Coconut oil
Cream
Lard
Margarine
Milk solids
Palm kernel oil
Palm oil
Partially hydrogenated and hydrogenated oils
Shortening
Suet
Tallow
Vegetable oils (including avocado, olive, canola, peanut, sesame, soybean and sunflower)

TYPES OF ADDED SUGAR
Agave nectar
Anhydrous dextrose
Barley malt syrup
Brown sugar
Brown rice sugar
Corn sweetener
Corn syrup
Dextrin
Dextrose
Evaporated cane juice
Fructose
Glucose
High-fructose corn syrup
Honey
Invert sugar
Lactose
Maltodextrin
Maltose
Maple syrup
Molasses
Rice syrup
Saccharose
Sorghum or sorghum syrup
Sugar alcohol
Sucrose
Treacle
Xylose

TYPES OF ADDED SODIUM
Baking powder
Disodium phosphate
Iodized salt
Kosher salt
Monosodium glutamate (MSG)
Rock salt
Sea salt
Sodium benzoate
Sodium bicarbonate (Baking soda)
Sodium caseinate
Sodium citrate
Sodium propionate
Sodium saccharin
Sodium nitrite/nitrate
Sodium sulfite
Sodium phosphates
Sodium lactate

SOURCES:
http://www.centerforfoodsafety.org
http://www.fda.gov/food/labelingnutrition/default.htm
http://www.who.int/foodsafety/publications/biotech/20questions/en/
http://www.scripps.org/news_items/4134-decoding-nutrition-labels
http://factoidz.com/the-facts-about-msg-and-your-health/

Infographic Presented By
ReuseThisBag.com

Introduction to the Dietary Reference Intakes

Dietary Reference Intakes (DRIs) are a set of nutrient intake standards in use in the United States and Canada. These standards are developed and published by the *Institute of Medicine* and are intended to be used in academic and research settings. They are primarily for professional use because they deal with quantities of nutrients rather than amounts of food. Each reference value is an average daily intake over a specified period, at least one week for most nutrients.The Dietary Reference Intakes apply to healthy people. They are generalized because the exact nutrient needs of an individual cannot be known.

The Dietary Reference Intakes differ for people of different ages and sex because people have different nutrient needs at different stages of their lives. For example, the needs of a female 19 year old college student are different from those of a 35 year old pregnant female. Dietary Reference Intakes are based on available scientific evidence and are revised as necessary in response to advances in scientific research.

Estimated Average Requirement: The nutrient intake value estimated to meet the requirement of half the healthy individuals in an age and sex group.

Recommended Dietary Allowance: The daily dietary intake level sufficient to meet the nutrient requirement of nearly all (97 to 98 percent) healthy individuals in an age/sex group. Statistical methods are used to determine the Recommended Dietary Allowance which set at a uniform level above the Estimated Average Requirement.

Adequate Intake: Sometimes there is not enough scientific evidence to set the Estimated Average Requirement and Recommended Dietary Allowance for a nutrient. In these cases, the available evidence is used to make the best scientific estimate of target intake for healthy people.

Tolerable Upper Intake Level: The highest level of daily nutrient intake likely to pose no risk of adverse health effects to almost all individuals in the general population. As intake increases above the Tolerable Upper Intake Level, the risk of adverse effects increases.

Acceptable Macronutrient Distribution Range:

1. Carbohydrates: 45-65% daily calories
2. Protein: 10-35% daily calories
3. Fat: 20-35% daily calories

Other Important Info:

- The goal of the Recommended Dietary Allowance is to set target intake to avoid nutritional deficiencies is groups of healthy people
- Laboratory tests are needed to diagnose nutrient deficiencies.
- As with deficiencies, biochemical assessment is required to diagnose 'overdose' of a nutrient.
    - It is unlikely that a healthy person would over consume most nutrients through diet alone (sodium is one exception to this).
    - Supplements can push intake above the Tolerable Upper Intake Level

Energy and nutrients	Males		Females	
	Aged 19–30 yrs	Aged 31–50 yrs	Aged 19–30 yrs	Aged 31–50 yrs
(1) Energy (kcal/d)	2,150	2,100	1,750	1,750
(2) Protein (g/d)	57	57	52	52
(3) Fiber (g/d)	25	25	25	25
(4) Calcium (mg/d)	800	800	800	800
(5) Phosphorus (mg/d)	700	700	700	700
(6) Sodium (mg/d)	500–1,475	475–1,450	400–1,200	400–1,200
(7) Potassium (mg/d)	2,450–4,100	2,450–4,100	2,050–3,400	2,050–3,400
(8) Iron (mg/d)	10.4	10.4	24.7	24.7
(9) Vitamin A (μg/d)	700	700	600	600
(10) Vitamin E (mg/d)	15	15	15	15
(11) Vitamin B_1 (mg/d)	1.2	1.2	1.1	1.1
(12) Vitamin B_2 (mg/d)	1.3	1.3	1.1	1.1
(13) Niacin (mg/d)	16	16	14	14
(14) Vitamin C (mg/d)	90	90	75	75
(15) Magnesium (mg/d)	310	320	250	260
(16) Selenium (μg/d)	55	55	55	55
(17) Zinc (mg/d)	13	13	7	7

ND = not determined due to lack of suitable data.

Source: Thai Dietary Reference Intakes for Energy and Selected Nutrients (2003). The report may be accessed via http:/
main/view.php?group=2&id=132