Award Number: DAMD17-03-2-0030

TITLE: Military Health Behaviors: Promotion of Healthy Weight and Fitness in Career Personnel

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REPORT DATE: May 2006

TYPE OF REPORT: Annual Report

PREPARED FOR:
U.S. Army Medical Research and Materiel Command
Fort Detrick, Maryland 21702-5012

DISTRIBUTION STATEMENT: (Check one)

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Military Health Behaviors: Promotion of Healthy Weight and Fitness in Career Personnel

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The primary aims of this research project are: 1) development of a computer-based data collection system for tracking body weight/body fat and fitness in career Soldiers, 2) development of an internet-based intervention for the promotion of healthy nutrition and physical fitness, and 3) testing the efficacy of this internet-based intervention for the prevention of weight gain and promotion of physical fitness in career Soldiers. The study is being conducted at Ft. Bragg in Fayetteville, NC in collaboration with Womack Medical Center at Ft. Bragg and the U.S. Army Research Institute of Environmental Medicine in Natick, MA. The results of this study will be used to formulate a national program for the promotion of healthy body weight and fitness in career soldiers.
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Introduction

The primary purpose of this study is to reduce the proportion of Soldiers at Ft. Bragg who fail to meet Army requirements for body fat defined by AR 600-9, the Army Weight Control Program (AWCP), and fitness standards defined by FM 21-20, Physical Fitness Training, Army Physical Fitness Test (APFT). The study has been designed to: 1) be a non-clinical, population-based intervention for military personnel, 2) analyze data that the military routinely collects during APFT and height/weight testing (AWCP) for purposes other than this research, 3) meet the standards of “no greater than minimal risk” research, and 4) be conducted with anonymity of participants.

To reduce the proportion of Soldiers who fail to meet body fat (AWCP) and fitness (APFT) standards, an environmental/internet-based intervention will be provided to Soldiers at Ft. Bragg. The Military Services Fitness Database (MSFD) was developed to be provided to Ft. Bragg to measure the effectiveness of the environmental/internet-based intervention. The original plans to install the current version of the MSFD base wide at Ft. Bragg have become implausible for reasons outside control of the research team. In response, an alternative plan of action was developed and is discussed in later sections.

It is hypothesized that over the two years of intervention, the percentage of Soldiers who fail to meet body fat and fitness standards will decrease significantly at Ft. Bragg. The development of both the MSFD and the environmental/internet-based intervention occurred in close collaboration with the military, particularly United States Army Research Institute of Environmental Medicine (USARIEM) and Womack Army Medical Center (WAMC).
**Body**

**Military Services Fitness Database (MSFD) and Data Collection**

The MSFD is an electronic database that records and stores body weight/body fat and APFT results of military personnel. Data for this population-based study are derived from the military’s standard operating procedures for the collection of APFT data. These data were to be analyzed to determine if a nonclinical, environmental/internet-based intervention reduces the proportion of Soldiers who fail to meet fat and fitness standards established by the U.S. Army. Through pilot testing, the MSFD was modified to incorporate the requests and suggestions of military personnel. The command of Ft. Bragg preferred to utilize an alternative database to collect the data and therefore, the MSFD was not allowed to be deployed across the entire Ft. Bragg base. In response, The Pennington Biomedical Research Center (PBRC) research team, USARIEM, and the G6, XVIII Airborne Corps formed a partnership with FusionNet, which is being developed by the XVIII Airborne Corps Knowledge Management Office to streamline data collection and storage in the military. Source-code from the MSFD was provided for inclusion in the FusionNet application to capture AWCP and APFT data and generate reports. Once FusionNet is implemented, the data collected would be provided to PBRC at scheduled intervals for statistical analysis to determine the efficacy of the H.E.A.L.T.H. (Healthy Eating, Activity, and Lifestyle Training Headquarters) web application. The fielding of FusionNet has been delayed due to the Global War on Terror and at this time there is no specified date as to when FusionNet will be released. A backup plan was implemented to collect data, by way of the Tasking Office, from PT Cards (DA Form 705) from units within the 82nd Airborne Corps and continued use of the MSFD within Womack Army Medical Center’s (WAMC) Alpha, Bravo, and Dentac companies. In July 2005, the PBRC research
team traveled to Ft. Bragg to input data from the 82nd Airborne Corps PT cards. Total number of records collected was 3,604 with PT test dates between July 2004 through June 2005. After statistical analysis, the data proved to be of poor quality with 8.4% of the records missing height and weight of Soldiers, and 41% of the records of overweight Soldiers missing estimates of body fat. Polling of the research team led to a consensus of opinion that the allowable amount of missing data should only be 5%. Based on this opinion, the team strived to collect higher quality data in Spring 2005, but this tasking yielded data from less than 1,500 Soldiers. After much deliberation, this approach was abandoned but we have continued to collect APFT data from Soldiers in WAMC’s Alpha, Bravo, and Dentac companies, and these data will be supplemented by collecting information about the Soldier’s height, weight, fatness, and PT scores through the internet based intervention that is described below. Some fields will be automatically collected as the Soldier goes through the internet intervention algorithms and uses the tools, while others will be self report collected by the Soldier opting to answer questions about him or herself. Appendix A lists the data that will be collected.

Environmental/Internet-Based Intervention

The intervention, consisting of an environmental component and an internet (website) component, is designed to promote healthy nutrition and physical fitness to every Soldier at Ft. Bragg. The intervention provides users with a safe and effective means to manage body weight, through use of established resources and a website called H.E.A.L.T.H., which provides credible information on nutrition, physical fitness, and weight management. The internet component of the intervention will be launched July 24, 2006. The environmental promotion program has continually been developed in close consultation with representatives from the Nutrition Care Division (NCD), WAMC Public Affairs Office, and Information Services Office, Ft. Bragg, NC. Furthermore, a
relationship has been formed with the Ft. Bragg Army Morale, Welfare, and Recreation (MWR) office to aid in promoting the internet intervention on base. MWR has multiple outlets, and a variety of media formats such as fitness and family events held on base, and distribution of flyers and brochures, to disseminate information to Soldiers. Appendix B describes the promotion and website launch plan.

In preparation for the launch, the website was pilot tested with collaborators including: The US Center for Health Promotion and Preventative (USACHPPM), USARIEM, WAMC NCD leaders, and Weigh to Stay participants. In response to the pilot testers’ critiques and suggestions, the H.E.A.L.T.H. website has undergone reorganization. In January 2006 a contract with a website design company was developed to aid in the website reorganization by improving its’ aesthetics, human interface quality, and merging of the nutrition and fitness plans to create a “one stop shopping” planner and calendar where the Soldier can find his/her personal information. Adding a site search, glossary, and a Frequently Asked Questions section are other improvements being made to the site.

A family section has also been added to the site that can be utilized by spouses or family members of a Soldier. The family member registers as a civilian, but will have access to the same nutrition and fitness tools as the Soldier. Including the family will foster additional support for the Soldier to lead a healthy lifestyle. An important component of the website is lifestyle modification. The health experts guiding the development of the H.E.A.L.T.H. website recognize that behavioral/lifestyle change is the most effective method of achieving long-term weight goals. These lifestyle modification goals will assist Soldiers in identifying and discontinuing unhealthy eating and exercise habits. Topics such as exercise/food monitoring and behavioral contracting were originally presented as modules, but are now imbedded throughout the site as a “natural” part
of the plan as a whole. The user will be able to track their weight, monitor their compliance of the nutrition and fitness plans, and lifestyle modification goals by visiting the “My H.E.A.L.T.H.” section of the site. In this section the Soldier is prompted to update their statistical information (weight, height etc.) every week or month depending on the information needed. Appendix C illustrates some of the screen shots from the website.

**Key Research Accomplishments**

- Developed the research team by recruiting and hiring the following new employee:
  - Kimberly Bowen M.Ed. – program coordinator; hired to replace the outgoing program coordinator

- Poster presented at NAASO’s 2005 Annual Scientific Meeting: “Military Services Fitness Database (MSFD): A computerized Tracking System for Body Weight, Fatness, and Fitness Data of Soldiers.

- Planned paper for submission to Military Medicine: “Military Services Fitness Database: Development of a Computerized Physical Fitness and Weight Management Database for the U.S. Army.”

- Beta and pilot tested the website. In June 2005, A group of 8 soldiers at USARIEM (including COL Gaston Bathalon and MAJ Lori Sigrist) Beta tested the site and provided detailed and valid comments regarding the usability of the site and the tools within.

- Conducted statistical analyses on APFT data collected, via the MSFD, from WAMC’s Alpha, Bravo, and Dentac companies. Time points are: October 2003 or “Time 1”, April 2004 or “Time 2”, October 2004 or “Time 3”, April 2005 or “Time 4”, and October 2005 or “Time 5”.

- 1 SGT (Ret) Robin Barnes (Health Promotion Specialist from PBRC), briefed the following groups regarding the website:
- Newly assigned WAMC NCD staff
- XVIII Airborne Corps Acting Command Sergeant Major
- WAMC Key Leaders Brief: 3 Hospital CSMs and 12 NCOs
- WAMC/USAREIM Unit Fitness Leader's Brief: Targeted Training NCOs and MFTs
- WAMC NCD Weigh to Stay Program Brief; approximately 500 total Soldiers
- Key Leaders Forum Brief: CSMs at Pre Primary Leadership Post Briefing and
  approximately 50 NCOs
- Key Leaders Forum Brief: CSM Allen host

• Meetings and travel details are highlighted in Appendix D

• Yearly continuing review report approved by PBRC IRB May 2006 and submitted to
  HSRRB.

**Reportable Outcomes**

Data from the APFT test were collected via the MSFD from WAMC’s Alpha, Bravo, and
Dentac companies. Dates covered in this pilot testing: October 2003 or “Time 1”, April 2004 or
“Time 2”, October 2004 or “Time 3”, April 2005 or “Time 4”, and October 2005 or “Time 5”. A
total of 1710 Soldier’s records were recorded by the MSFD. Of this number, 684 Soldier’s data
were collected for at least 3 time points (423 Male and 261 Female).

Figures 1–7 depict the findings from this two year longitudinal study of changes in Soldier’s
body weight, fatness estimates, and pass/fail status. Figure 1 summarizes mean body weight over
five time periods for the entire sample (n = 684), men (n = 423) and women (n = 261), separately.
It is evident that there is a general trend for gradual weight gain for the sample, and for men and
women over time. These changes are statistically significant (p < .05).
Figure 2 summarizes the same information, expressed as a deviation from the maximum allowable screening weight. This approach corrects for gender and changes in age. Over the course of two years, women averaged between 3.5 - 5.5 lbs over their screening table weight, while men averaged between 3 - 6 lbs under their screening table weight. Over time, males on average approached their screening table weight while women continue to exceed their weight by a greater number of pounds.

Figure 3 summarizes the same information, expressed as body mass index (BMI = kg/m²) on average increased over two years for both men and women. The women were approaching the “overweight” BMI (25 - 29.9) while the men could be classified as “overweight” by conventional
standards for civilians. As shown in Figures 2 and 3, the sample gradually increased body weight and BMI.

Figure 4 summarizes the proportion of men who: 1) were not taped because they did not exceed the maximum allowable screening weight and therefore passed 2) were taped, and failed 3) were taped and passed, and 4) those who should have been taped because they exceeded the maximum allowable table weight, but were not taped (possible fail). A steady trend of about 65% of males were not taped, while more men were taped over time but passing, and between 4% to 8% were taped and failed.

Fig4: Male body fat percent measurement percentage and pass/fail rate

Fig5: Female body fat percent measurement percentage and pass/fail rate
Figure 5 summarizes the same data for women. When compared to Figure 4, Figure 5 shows a higher percent of women than men were taped, but the percent of failures was similar to the men. The observation that more women than men are taped is consistent with the data shown in Figure 2 that indicates that on average women exceed their maximum allowable screening weight, but men, on average, are below that criterion. A positive finding from the findings, illustrated in Figures 4 and 5, is that the failure rate for body fatness is consistently below 10%, even when considering the “possible failure” category as failing.

Figure 6 summarizes mean body fat percent estimates for men categorized as those who passed versus failed, i.e., fatness exceeded criterion. Overall, the two groups differed and the overfat (fail) group had approximately 5% to 6% extra fat tissue in comparison to men who were taped but failed.

![Male body fat percent means over time.](image1)

![Female body fat percent means over time.](image2)

Figure 7 depicts the mean fatness estimates for women. Those who failed (exceeded the fatness criterion) had approximately 5% to 8% excess body fat in comparison to those who failed. A positive finding was that fatness estimated of male and female Soldiers who failed, were lower in Fall 2005 in comparison to Fall 2003. Collectively, these data illustrate the potential power of
computerized database for capturing and summarizing population trends of body weight, and
fatness. These data will be presented in the planned paper and served as the focus of the
presentation at NAASO in 2005.

Conclusions:

   After beta and pilot testing by both Soldiers and civilians, and making enhancements based
on the critiques, The H.E.A.L.T.H. website is nearing completion and will be launched July 24,
2006. The MSFD/FusionNet collaboration is still anticipated but due to uncertainty, the data from
Alpha, Bravo, and Dentac will continue to be collected via the MSFD with supplement self report
data coming from the website. The timeline what will guide the implementation of the
H.E.A.L.T.H. intervention is shown in Figure 8.

<table>
<thead>
<tr>
<th>Measurement Periods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline 1</td>
</tr>
<tr>
<td>Spring 05</td>
</tr>
</tbody>
</table>


   Data collection will continue for two years after implementation to test the efficacy of the
intervention. To complete the project, an extra 6 months will be needed from the original
timeframe. The data collection for the project should be concluded in the Spring of 2008. No
additional costs will be required to complete the project on this schedule.
References


Appendix A
Data Potentially Collected from H.E.A.L.T.H

**Collected by Algorithms and Tools**
- Gender
- Age
- Height
- Weight
- Body fat
- TEE
- Physical activity level
- Physical activity prescription
- Physical activity completed
- Meal plan
- Self-monitoring of food intake
- Self-monitoring of physical activity

**Tracking over Time**
- Weight
- BMI
- Body fat
- Meal plan
- Meal monitoring
- Physical activity monitoring

**Survey**
- User Satisfaction Survey

**Collect Throughout website**

**Personal**
- Heredity for overweight (weight status of parents, siblings, grandparents)
- Smoking history
- Drinking history
- Country of birth
- Country where raised
- Race- ethnicity

**Education**
- Education level

**Work**
- Combat, Combat Support, or Combat Service Support
- Rank
- Physical activity at work
**Lifestyles**
Leisure time
Number of hours of TV per week
Use of computer per week

**Weight History**
Weight measurement routines
Weight history- previous losses and gains
Number of times lost over 10lb, 20lb?

**Army and Weight information**
APFT pass/fail- a field for total score and or a field for pass/fail
If on army weight control program
Personal weight goal (and time they want to achieve it)
Number of years in army
Weight when joined army
Number of dieting attempts since joined the army

**In Special Interest or family section**
BMA- Body image interactive assessment- need to load application on site

**Utilization Collection**
Pages visited
Number of visits
Time spent on site per visit
Quiz results

**Relationships**
Logins correlated with BMI and/or weight over time
Number of weight updates correlated with weight loss over time
Self monitoring of food intake correlated with weight loss over time
Self-monitoring of physical activity correlated with weight loss over time
Preparing a meal plan correlated with weight loss over time
Preparing a physical activity plan correlated with weight loss over time
Setting behavioral goals correlated with weight loss over time
Compliance with behavioral goals correlated with weight loss over time
Data related to prompts

**Potential Prompts**
Group promotion emails
Site records birthdays
Site prompts update on weight once per week
Site prompts update on physical activity plan once per month
Site provides encouraging messages for weight loss
Site provides encouraging messages for compliance
Appendix B
Promotion and Website Launch Plan

Promotion Plan:

1) MWR events and media already occurring at Ft. Bragg:
   - Logo and website URL placed on three different Running Trails brochures totaling 90,000.
   - Logo and advertisement in Summer issue of quarterly publication, MWR “In Motion Magazine”; distributed to 40,000 Soldiers

2) MWR sponsored events on base; slated to begin July 2006:
   - Place banners in all 11 Ft. Bragg Fitness Facilities, and Sports USA restaurant.
   - Place brochures and flyers in Ft. Bragg New Comers Packet for new incoming Soldiers; approximately 200 Soldiers every two weeks
   - Post banner at Soldier Support Center
   - Place logo and URL on MWR website
   - Paraglide Newspaper Ads: ad will run every other week, Thursday through Sunday
   - Fayetteville.com and Paraglide website banner ad

3) Events and media occurring at WAMC slated to begin July - August 2006:
   - Post posters and flyers in various locations
   - WAMC Daily Bulletin: announcement of the launch; runs for 10 days
   - WAMC Bi-Monthly Flyer: Hospital Heartbeat Newsletter
   - POA Announcement: brief narrative announcing launch; heard while on hold when calling the hospital
   - Retiree Appreciation Day: Article in Paraglide (WAMC PAO)
   - WAMC NCD Unit Nutrition Educator’s Seminars: Quarterly briefings

Website Launch Plan:

1) July 24th: WAMC and Ft. Bragg “Media Blitz”
   - Interview with Paraglide, WAMC PAO
   - Photo-op with WAMC and Ft. Bragg VIPS
   - Live interaction with volunteer Soldiers as they logo into H.E.A.L.T.H
   - Meeting with MWR

2) July 25th: Army H.E.A.L.T.H. Executive Committee Meeting
Appendix C
Examples of Website Pages

HOME PAGE
Appendix C (continued)
“my Calendar”

\[\text{my Calendar}\]

my Calendar is a month at a glance view of your meal and workout planning. Select a link in the calendar to get a detailed view of your plans for any day you need to see.

<table>
<thead>
<tr>
<th>Sun</th>
<th>Mon</th>
<th>Tue</th>
<th>Wed</th>
<th>Thu</th>
<th>Fri</th>
<th>Sat</th>
</tr>
</thead>
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<tr>
<td>30</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>6</td>
</tr>
<tr>
<td>7</td>
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<td>9</td>
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<td>12</td>
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<td>14</td>
<td>15</td>
<td>16</td>
<td>17</td>
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<td>27</td>
</tr>
<tr>
<td>28</td>
<td>29</td>
<td>30</td>
<td>31</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

To reach your goal, it is recommended that you work out at least 5 days a week.
To lose 1 pound per week you should try to consume 1,400 kilocalories this day.
Appendix C (continued)
“my H.E.A.L.T.H.”

Quick View Meal Plan

**Breakfast**
- Cereal, ready-to-eat, NFS - 1 cup
- Milk, calcium fortified, cows, fluid, skim or nonfat - 1 fl oz
- Raisins - 1 miniature box (.5 oz)
- Orange juice, freshly squeezed - 1 fl oz

**Lunch**
- Spaghetti with tomato sauce and chicken or turkey - 1 cup
- Roll, whole wheat, NS as to 100% - 1 pan, dinner, or small roll (2” square, 2” high)
- Broccoli, cooked, from fresh, fat not added in cooking - 1 cup, fresh, cut stalks
- Margarine, whipped, tub, salted - 1 tablespoon

**Dinner**
- Tortellini, cheese-filled, no sauce - 1 cup
- Caesar salad (with romaine) - 1 cup
- Caesar dressing, low-calorie - 1 tablespoon
- Corn, yellow, cooked, from canned, fat not added in cooking - 1 cup

Lifestyle Goals:
- Drink 8 glasses of water per day
- Get a workout buddy
- Keep a food log
  Update your weight in 5 days.

Quick View Workout Plan
You have no workout activities scheduled for today.

Click here to see your full workout plan!
Appendix C (continued)
“my Meal Plan”

<table>
<thead>
<tr>
<th>Breakfast</th>
<th>Calories</th>
<th>Protein (g)</th>
<th>Fat (g)</th>
<th>Carbs (g)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cereal, ready-to-eat, MFS</td>
<td>1 cup</td>
<td>141</td>
<td>3.2</td>
<td>0.8</td>
</tr>
<tr>
<td>Milk, calcium fortified, cow’s, fluid skim or nonfat</td>
<td>8 fl oz</td>
<td>87</td>
<td>8.4</td>
<td>0.4</td>
</tr>
<tr>
<td>Raisins</td>
<td>1 miniature box (5 oz)</td>
<td>42</td>
<td>0.5</td>
<td>0.1</td>
</tr>
<tr>
<td>Orange juice, freshly squeezed</td>
<td>8 fl oz</td>
<td>84</td>
<td>1.3</td>
<td>0.4</td>
</tr>
</tbody>
</table>

**Breakfast Totals:** 353 calories, 13.3 protein, 1.7 fat, 75.3 carbs

<table>
<thead>
<tr>
<th>Lunch</th>
<th>Calories</th>
<th>Protein (g)</th>
<th>Fat (g)</th>
<th>Carbs (g)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spaghetti with tomato sauce and chicken or turkey</td>
<td>1 cup</td>
<td>267</td>
<td>18.5</td>
<td>5.9</td>
</tr>
<tr>
<td>Roll, whole wheat, N5 as to 100%</td>
<td>1 pan, dinner, or small roll (2&quot; square, 2&quot;)</td>
<td>76</td>
<td>2.4</td>
<td>1.8</td>
</tr>
<tr>
<td>Broccoli, cooked, from fresh, fat not added in cooking</td>
<td>0.5 fl oz</td>
<td>22</td>
<td>2.3</td>
<td>0.3</td>
</tr>
<tr>
<td>Margarine, whipped, tub, salted</td>
<td>0.5 fl oz</td>
<td>34</td>
<td>0.0</td>
<td>3.6</td>
</tr>
</tbody>
</table>

**Lunch Totals:** 399 calories, 23.3 protein, 11.7 fat, 50.6 carbs

<table>
<thead>
<tr>
<th>Dinner</th>
<th>Calories</th>
<th>Protein (g)</th>
<th>Fat (g)</th>
<th>Carbs (g)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tortellini, cheese-filled, no sauce</td>
<td>0.5 fl oz</td>
<td>177</td>
<td>7.8</td>
<td>4.2</td>
</tr>
<tr>
<td>Caesar salad (with romaine)</td>
<td>1 cup</td>
<td>167</td>
<td>5.4</td>
<td>13.9</td>
</tr>
<tr>
<td>Caesar dressing, low-calorie</td>
<td>1.5 fl oz</td>
<td>25</td>
<td>0.1</td>
<td>1.0</td>
</tr>
<tr>
<td>Corn, yellow, cooked from canned, fat not added in cooking</td>
<td>0.6 fl oz</td>
<td>89</td>
<td>2.9</td>
<td>1.1</td>
</tr>
</tbody>
</table>

**Dinner Totals:** 458 calories, 16.2 protein, 20.2 fat, 57.8 carbs

<table>
<thead>
<tr>
<th>Snack</th>
<th>Calories</th>
<th>Protein (g)</th>
<th>Fat (g)</th>
<th>Carbs (g)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Banana, raw</td>
<td>1 medium (7&quot; to 7.7/8&quot;)</td>
<td>109</td>
<td>1.2</td>
<td>0.6</td>
</tr>
<tr>
<td>Peanut butter</td>
<td>1 tablespoon</td>
<td>95</td>
<td>4.0</td>
<td>8.2</td>
</tr>
</tbody>
</table>

**Snack Totals:** 203 calories, 5.2 protein, 8.7 fat, 30.7 carbs

**Total Calories:** 1,414 calories, 58.0 protein, 42.3 fat, 214.4 carbs

To lose 1 pound per week you should try to consume 1,400 calories per day. You should consume 14 fewer kilocalories to reach your prescribed kilocalorie level.
Appendix C (continued)

“my Weight”

Keep track of your progress by entering your new weight each week.

Last recorded weight: 175 lbs on May 15

My weight: 175 lbs

My percent body fat:

I want to enter my circumference measurements to compute my % body fat.

I already know my % body fat & want to enter it.

Your current height is 5 feet 6.00 inches
Your current weight is 175 lbs
Your AR800-9 Screening Table Weight is 150 lbs
The AR800-9 recommended weight is 143 lbs
To maintain your current weight, you need to consume 1,900 kilocalories per day.
Your current weight is above your Screening Table Weight.

143 lbs
150 lbs
Your Weight
5/24/2006

Strength Workouts

Chest Press with Dumbbells on Stability Ball - Alternate Arm

Description:
Sit on the stability ball with dumbbells in your hands. Slowly roll onto the ball until your shoulder blades are on the middle of the ball. Raise your hips up with your feet shoulder width apart. Start with dumbbells in hands, elbows bent, at shoulder level. Extend one dumbbell straight up above your chest while keeping the other dumbbell at shoulder level. Slowly lower the extended arm while extending the opposite arm. Repeat for the desired number of repetitions. 1 repetition = performing the exercise once on the right and once on the left.

Reps: 8-12 reps with each arm

Benefits: Strengthening of pectorals
## Appendix D
### Summary of Travel

<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>Participants</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/05</td>
<td>Ft. Bragg, NC</td>
<td>Ray Allen</td>
<td>- Complete data entry software for July PT data entry trip.</td>
</tr>
</tbody>
</table>
| 7/05   | Ft. Bragg, NC| Ray Allen, Carolyn Brinkley, Danielle Bellotte, Sean Marshall | - Enter Army Physical Fitness Test Scorecard data obtained from XVIII Airborne Corps units into PBRC database (PTCard).  
- Discuss ability to link the PTCard database with XVIII Airborne Corps G6 FusionNet database using encrypted unique identifier (last 4 of SSN and initials of first and last name) with SGT Parris.  
- Meet with newly assigned WAMC NCD staff regarding H.E.A.L.T.H.  
- Briefing to the XVIII Airborne Corps Acting Command Sergeant Major by 1SG (RET) Robin Barnes, Health Promotion Specialist (PBRC). |
- Outline guidance for second XVIII Airborne Corps APFT card tasking (base line data point #3).  
- Determine status of FusionNet.  
- Finalize plans for dissemination of environmental promotional plan.  
- Prepare upcoming Army Executive Committee Meeting. |
| 10/05  | Boston, MA   | Executive Committee | Executive Committee Meeting- to update the Executive Committee of the progress made on H.E.A.L.T.H. |
- Finalize purchase order with MWR and develop additional concepts for advertisement of H.E.A.L.T.H.  
- Debrief NCD staff regarding the H.E.A.L.T.H. ‘Jumpstart’ pilot project.  
- Review NCD Beta test of H.E.A.L.T.H. |
| 12/05  | Ft. Bragg, NC| Ray Allen, Carolyn Brinkley, Tiffany Stewart | - Reviewed website and worked on iterations of it for launch  
- Met with COL Joanna Reagan, of NCD, and discussed website features/function and how we could integrate it into Weigh To Stay once study was launched. |