

# LOSING 50 AFTER 50

# WORKBOOK

MAKE THE DECISION  
CREATE YOUR PLAN  
GET YOUR BODY BACK

**BY KATIE OWEN**

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The reader is encouraged to seek health, medical or other professional advice prior to using any of the suggestions in this workbook or making conclusions from it.

For more information, email: [hello@losing50after50.com](mailto:hello@losing50after50.com).

For additional resources, please visit [Losing50After50.com](http://Losing50After50.com).

Before we get started, we want to remind you to always seek advice from a medical professional you trust before you begin any new plans or programs that can affect your health. Specifically, do not change or discontinue the use of any medications without the advice of your prescribing physician. The information shared in this book is for educational purposes only and is not a substitute for sound medical advice.

# CHAPTER INSIGHTS

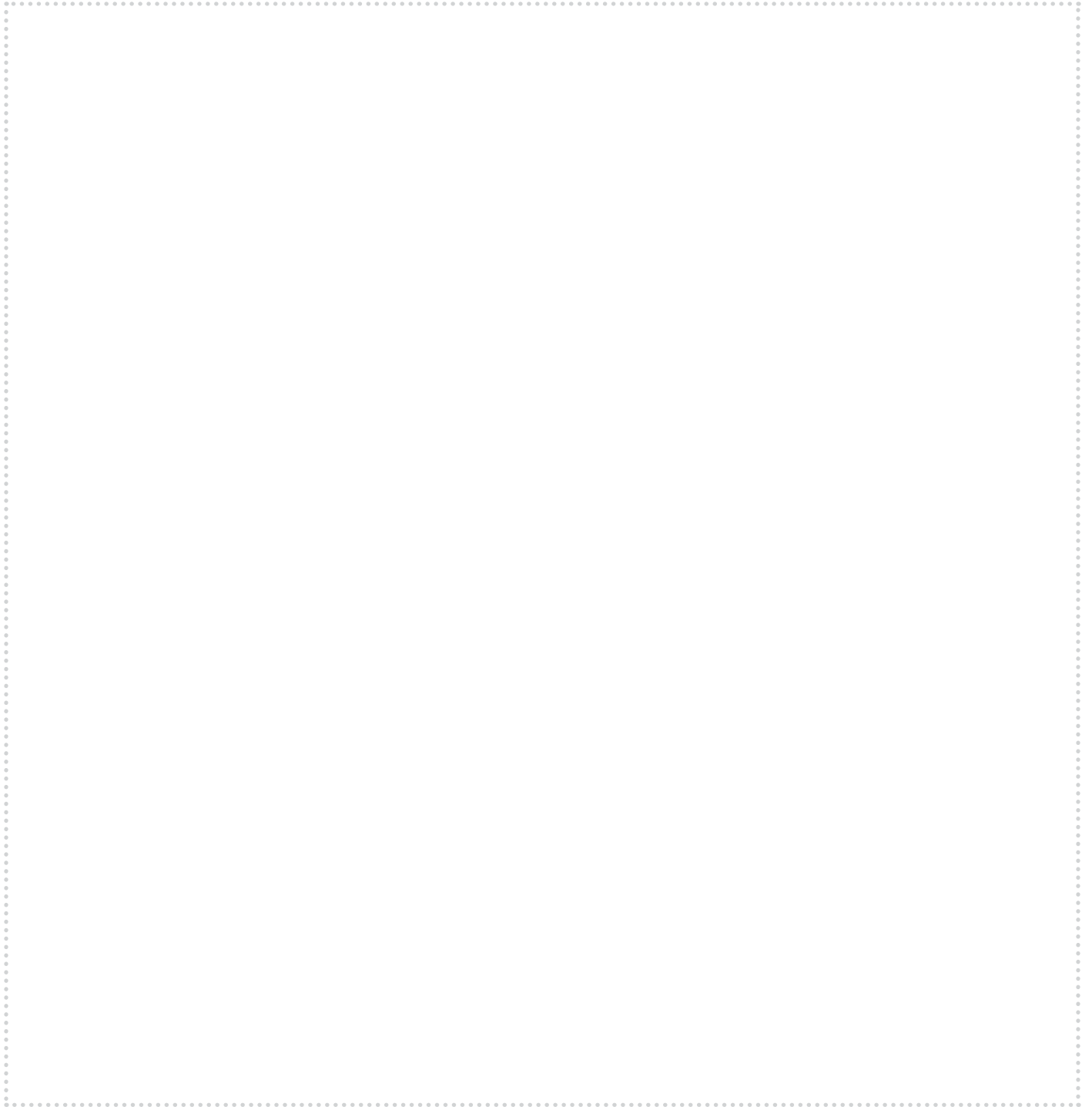
Use this workbook as a journal to record your personal thoughts and insights from each chapter.

You can print this workbook and write down your thoughts and insights. You can also save this workbook on your computer or device and record your thoughts and insights digitally within the document.

This PDF is fully editable. Enjoy!

# CHAPTER 1

## KATIE'S STORY



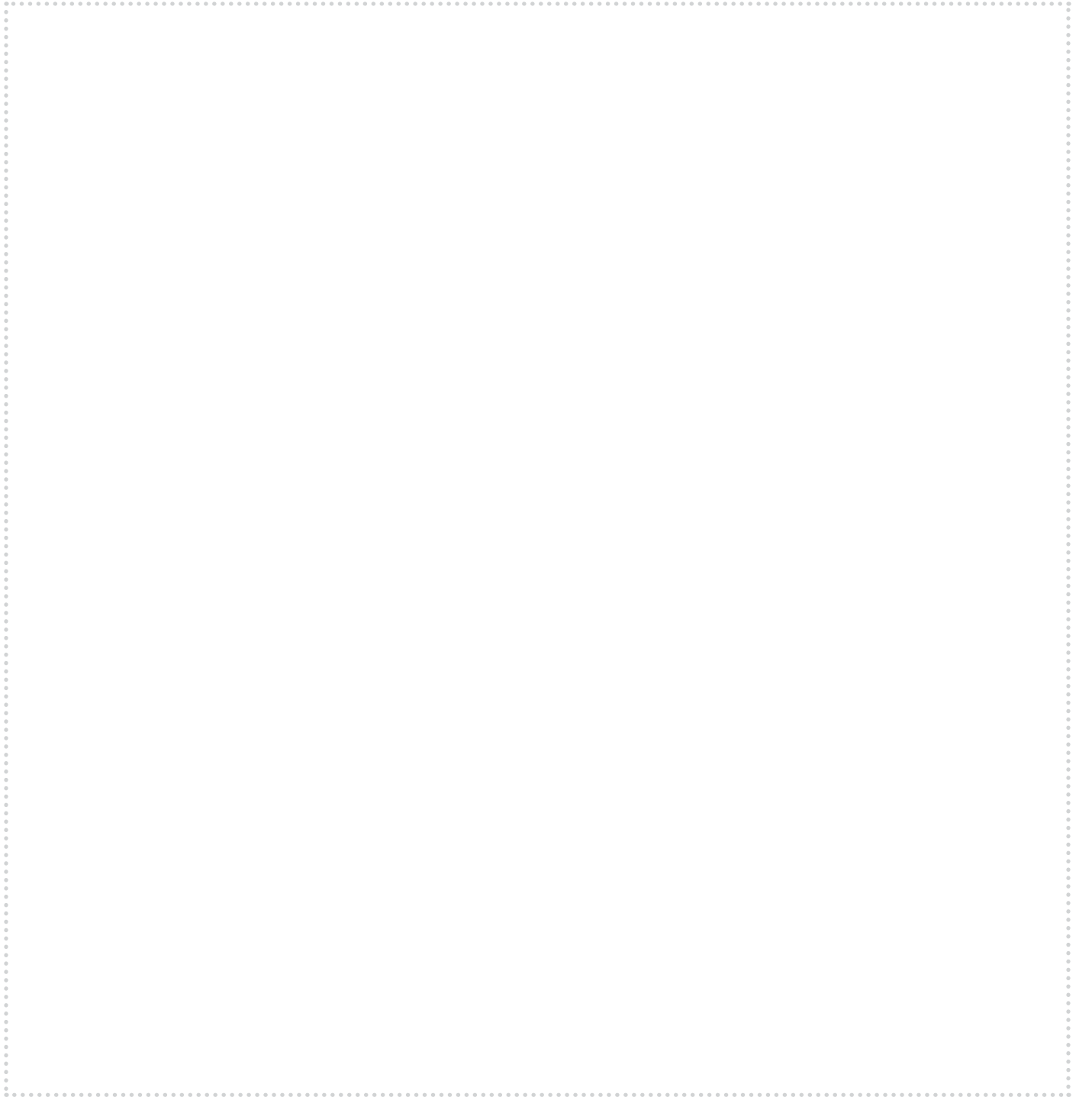
# **CHAPTER 2**

## **JEFFREY SCHAFFER, M.D.**



# **CHAPTER 3**

## **RUSS POWELL**



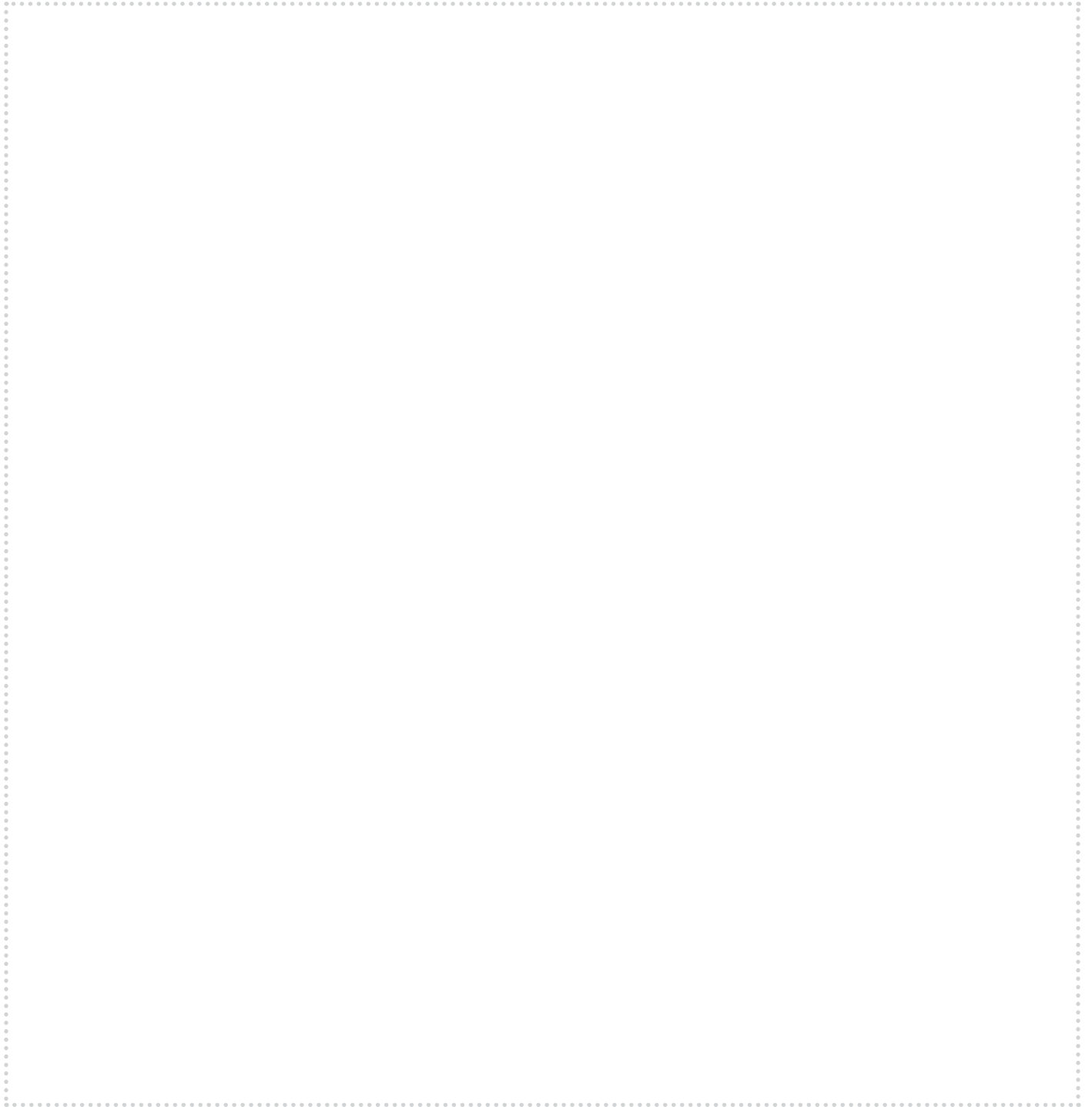
# CHAPTER 4

## CANDI'S STORY



# CHAPTER 5

## JAMES' STORY





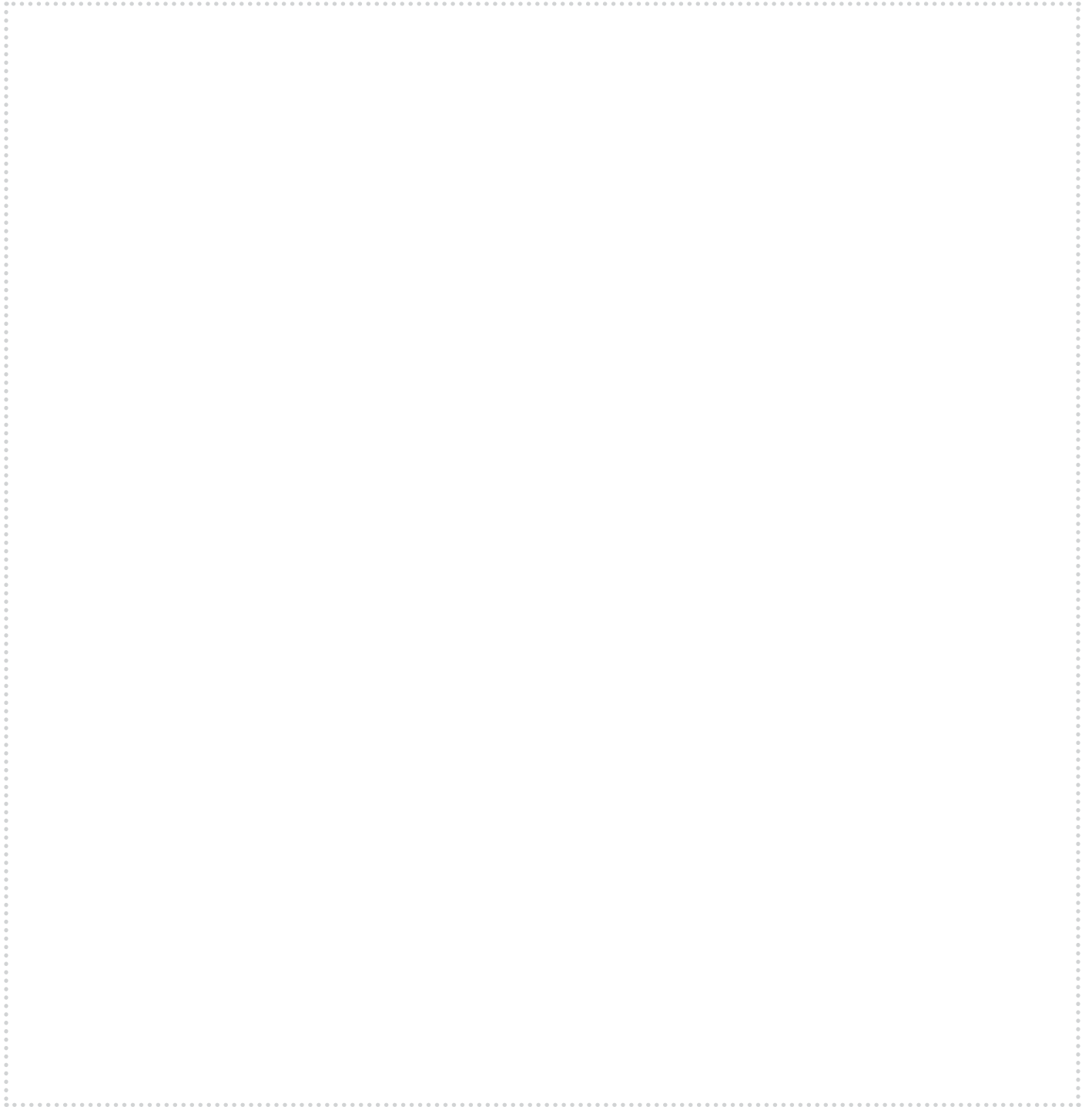
# CHAPTER 6

## JAYME'S STORY



# CHAPTER 7

## JOHN'S STORY



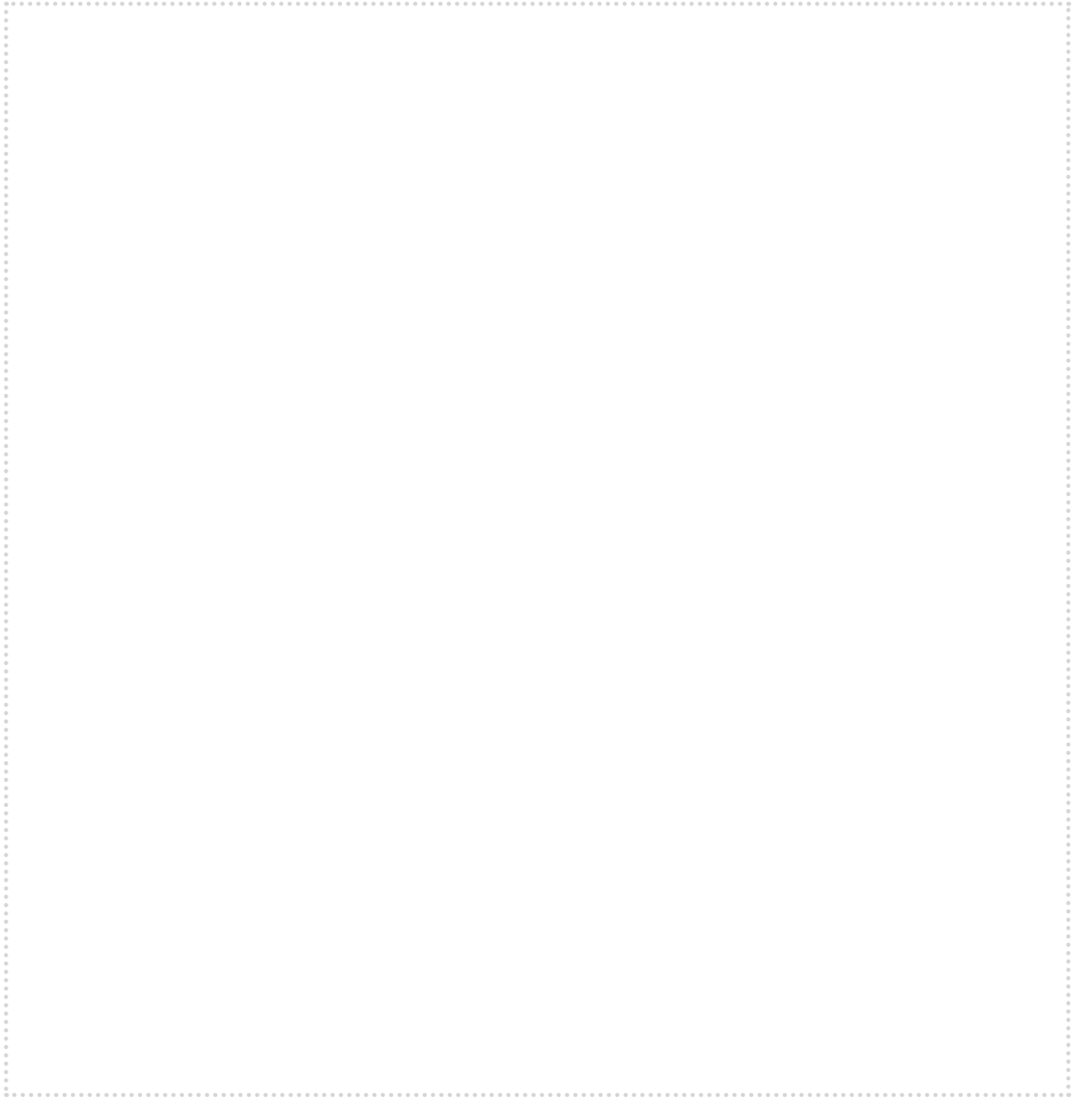
# CHAPTER 8

## DIANA'S STORY



# CHAPTER 9

## JOE'S STORY



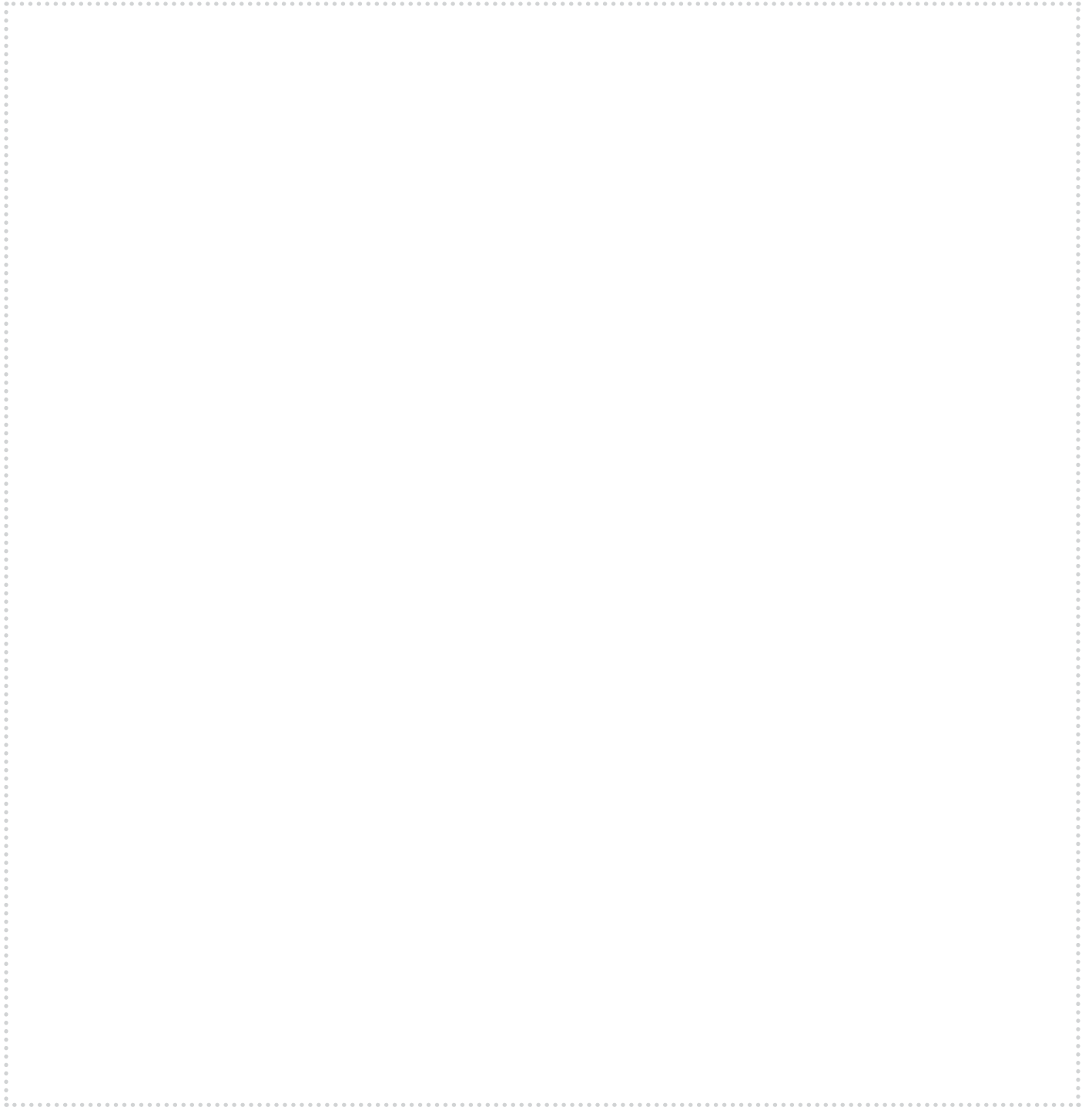
# CHAPTER 10

## PATTY'S STORY



# CHAPTER 11

## SHERRI'S STORY



# CHAPTER 12

## KATIE'S INSPIRATION



# ADDITIONAL THOUGHTS AND INSIGHTS

A large rectangular area defined by a dotted border, intended for additional thoughts and insights.



# SECTION ONE

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# MAKE THE DECISION

**Answer the following questions truthfully. This is for your eyes only!**

What is your current weight? (Don't guess, get on the scale and find out!)

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What is your ideal weight/size and why do you want to be this weight/size?

A large rectangular area enclosed by a dotted border, intended for writing the answer to the question about ideal weight/size.

What is at stake if you don't lower your weight?

A large rectangular area enclosed by a dotted border, intended for writing the answer to the question about what is at stake.

How will this time be different?

A large rectangular area enclosed by a dotted border, intended for writing the answer to the question about how this time will be different.

What commitments are you willing to make to yourself?



How will you commemorate making your decision? (See “Commitment to Myself” on the last page.)



**Document the following:**

Today’s Date (the date you are drawing your line in the sand)

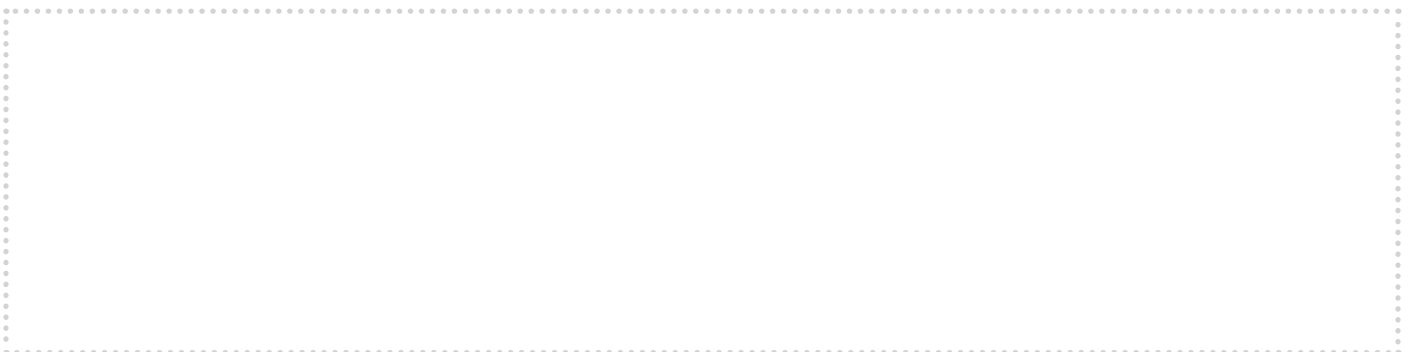
Your height

Your age

Your weight

Your current health status

Your list of current prescription medications (name of drug, dosage, frequency – use a separate piece of paper, if needed)



Your body measurements (If you're unsure of how to take your measurements, Google it!)

- Bust (optional)

- Chest

- Upper Arm

- Waist

- Stomach

- Hips

- Thigh

## **SECTION TWO**

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# **CREATE YOUR PLAN**

You documented your beginning measurements, now create your goals for weight loss and health outcomes. Then decide what you are willing to do to reach your goals. Since we are supporting you to make a lifestyle change that you can do forever, we aren't going to encourage you to set a date by which to reach your goals. It's still important to have goals, just realize that you are beginning a weight loss journey which will transform into a sustainable lifestyle.

Goal weight

Goal health status

Goal list of prescription medications

Goal body measurements (Set your own goals, or Google “ideal body measurements calculator” to get an idea of what your goals should be in these categories.)

- Bust (optional)

.....

- Chest

.....

- Upper Arm

.....

- Waist

.....

- Stomach

.....

- Hips

.....

- Thigh

.....

**The following questions will help you formulate your plan.  
Give them serious consideration.**

What are your favorite healthy foods, snacks, and recipes (nothing processed)?

A large rectangular area enclosed by a dotted border, intended for writing answers to the question about favorite healthy foods, snacks, and recipes.

What will you do for exercise and resistance training?

A large rectangular area enclosed by a dotted border, intended for writing answers to the question about exercise and resistance training.

What times of the day will you eat your meals?

A large rectangular area enclosed by a dotted border, intended for writing answers to the question about meal times.

Will you use any calories or fitness trackers (if so, which ones)?

A large rectangular area enclosed by a dotted border, intended for writing answers to the question about using calories or fitness trackers.



How will you cook for your family, while maintaining your own healthy eating habits?

[Dotted-line response box]

How will you handle parties, special events, and holidays?

[Dotted-line response box]

How will you manage eating at restaurants?

[Dotted-line response box]

What positive phrases can you tell yourself in the following situations?

- After a day of poor eating

[Dotted-line response box]

- When the weight goes up

[Dotted-line response box]

- When you are tempted

[Empty dotted-line box for notes]

What weight loss hacks will you adopt or create? (Use a separate piece of paper, if needed.)

[Empty dotted-line box for notes]

Will you take advantage of the hair test ([allergytest.co](http://allergytest.co)) or gene test ([10Xhealthsystem.com](http://10Xhealthsystem.com))? (If so, by what date will you complete these tests?)

[Empty dotted-line box for notes]

Will you find an accountability partner, group, or online community to help keep you motivated and on track?

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## **SECTION THREE**

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**GET YOUR BODY BACK!**

What will be the best thing about getting your body back?

A large rectangular area with a dotted border, intended for writing an answer to the question above.

How will your health change for the better?

A large rectangular area with a dotted border, intended for writing an answer to the question above.

What new clothing will you purchase?

A large rectangular area with a dotted border, intended for writing an answer to the question above.

What old, but favorite, clothing from your closet will you be able to wear again?

A large rectangular area with a dotted border, intended for writing an answer to the question above.

What activities will you be capable of doing at your lower weight?



What bucket-list dreams will you be able to accomplish?



# COMMITMENT TO MYSELF

I hereby commit to beginning my weight loss journey. I promise to give my best effort and will never give up. I will reclaim my health and get my body back by:

- ❖ Eating healthy food ❖
- ❖ Being physically active ❖
- ❖ Having a positive mindset ❖
- ❖ Creating a sustainable lifestyle ❖

By signing below, I am pledging ...

Wait. Stop! Back up!!

I'm not going to write a commitment for you to make to yourself. *You* need to write your *own* commitment to yourself, in *your* words. There's plenty of blank space below...now start writing!

You got this!

