



**FEMALE**  
**TRANSFORMATION**  
**TRACKER**



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# INTRODUCTION

One of THE most important things you can do when embarking on any health or exercise program is measuring your progress.

Why? Because getting positive feedback on your progress provides TREMENDOUS motivation to keep going for more—it gets addictive.

More to the point, it gives you an objective overview of the changes that will occur while you are on this program. You see, the human brain has an incredible capacity for delusion, which is why it's so important to have objective, reliable feedback and data.

I've seen this over and over again with myself and my clients. One day you can wake up and be like, "I look fat as hell." Then the next day you may wake up and say, "Wow! I look great." But in reality nothing has changed except how you feel about yourself.

Virtually everyone DOES see improvements, but how/where/when it manifests can and does differ, which is why we want to take psychology out of the equation and cover all our bases.

Another reason it's important to track your results is so you can become a metabolic detective and discover how your body reacts to changes in how you exercise and eat. Unless you track these changes it's very difficult to discover patterns so you can identify what works for you and what doesn't.

For example, if you are a normally menstruating woman, I typically recommend you eat an additional meal and exercise a little more during the follicular phase of your cycle. However, that doesn't mean that doing this works for *every* woman on the planet.

Most women will burn fat like crazy doing this. For some, it may slow their results down. There's just no way to know what will happen for you unless you track your results. If you're one of the women whose results slow down using this method, then you will know what to do—go back to the 3-2-1 diet and stick with that.

Tracking will also provide you the information you need to personalize the dietary approach to your needs using my AIM program outlined in the recipe guide.

For all of these reasons, I want you to take some initial measurements right before you get started with the program. In the tracking charts below, you will fill in this information under “Beginning.” Then, at the end of every week, track your progress and record it in the relevant area of your tracking charts so you can see the dramatic change that happens while you’re on the *Metabolic Renewal* program.

Here’s exactly what I recommend tracking and how you do it.

## PREFER TO TRACK YOUR RESULTS ONLINE?

I have developed a handy-dandy tracking spreadsheet you can use to track everything outlined below all in one place. If you prefer to track your results on your computer in Excel, just download the spreadsheet at the link below and review it along with the instructions that follow so you know EXACTLY how to measure your progress on this program.

**Download your tracking spreadsheet here:**

**<http://www.metabolicrenewal.com/tracking-spreadsheet>**

The great thing about the spreadsheet is that all of the calculations are done for you automatically. In fact, I have added some cool features to it that give you additional data on your progress. Enjoy!



# STEP #1

## METABOLIC SCORE

**Y**our metabolic score is an indicator for how healthy your metabolism is. It provides you with a quantitative assessment of the overall functioning of your metabolic processes. This is crucially important, because the key thing you want to do on this program is reprogram your metabolism to burn fat. To assess the health of your metabolism, we need to look at SHMEC.

What the heck is SHMEC?

Good question!

It's an acronym that stands for:

- S**leep
- H**unger
- M**ood
- E**nergy
- C**ravings

In other words, it's all of the things you care about the most—the things you feel on a day-to-day basis that can turn a good day bad or a bad day good, depending on whether your SHMEC is in check.

SHMEC is a set of crucial biofeedback signals that allow you to measure your hormonal and metabolic balance. But instead of an expensive lab test that gives you results that are confusing; measuring your SHMEC helps you pinpoint precisely how your metabolism is operating and where the problem areas may be.

When your SHMEC is in check, your body is functioning at its optimal capacity. When SHMEC is out of check, it is an important sign that you need to change something about the way you eat or the way you live.

Tracking your metabolic score using SHMEC allows you to become a metabolic detective. It provides a quantitative analysis of how well your entire biochemistry is operating. This is information you need if you are going to seek out and live a healthy lifestyle that works for you.

That's why I want you to ask yourself at the end of each day—and most importantly, at the end of each week—"Is my SHMEC in check?" You should record your weekly results below.

SHMEC is a subjective evaluation, but it works best when you rank it. Here's how to do that.

### ***SHMEC Tracker***

Go through this quiz once a week while you're on the program. Rate each of the symptoms as follows:

- ✓ 0 = Not True at All
- ✓ 1 = Not Very True
- ✓ 2 = Somewhat True
- ✓ 3 = Very True
- ✓ 4 = Extremely True

Then, subtotal your results in each category and add together the subtotals at the end to get a quantitative analysis for how much your metabolism improves over the program. For example, if your subtotal for sleep was 18, hunger was 14, mood was 12, energy was 16, and cravings was 18, your total would be 78. The highest possible score is 100, and the lowest is 0. 78—means you are doing okay, but certainly have room for improvement.

Remember, take this quiz right before you start the program using the column titled "Beginning." Then, at the end of every week, take the quiz again, rating each SHMEC statement in the relevant columns. While this is built out for 12 weeks, please feel free to keep tracking it well after that if you feel the need to. Just print multiple copies of the chart below when you need to start a new 12-week period.

	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
<b>Sleep</b>													
It's easy for me to fall asleep.													
I stay asleep through the night.													
I feel like I get enough quality sleep.													
Even when my sleep is not optimal, I still have plenty of energy to get through the day.													
When I wake up, I feel rested, alert, and energized.													
<b>SUBTOTAL</b>													
<b>Hunger</b>													
I easily last 5-6 hours without going hungry.													
I wake up feeling full and comfortably satisfied.													
My stomach feels comfortable and calm between meals.													
When I eat, I become full quickly and feel satisfied long after.													
My hunger is predictable and stable from hour-to-hour and day-to-day.													
<b>SUBTOTAL</b>													
<b>Mood</b>													
My mood is stable all day long and remains the same from morning, through afternoon and into the night.													



	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
I'm laid back and relaxed without worry or anxiety.													
I return to a happy feeling very quickly after stressful, depressing or hurtful events.													
From one day to the next, my mood is predictable and essentially the same.													
My mood remains calm and in control despite what's going on around me (sights, sounds, temperature, people, etc.)													
<b>SUBTOTAL</b>													
<b>Energy</b>													
My energy is stable throughout the day and from one day to the next.													
If I get exhausted, I rebound quickly and my energy returns to normal fast.													
I always have the energy I need to do what I want.													
I enjoy the energy I need without turning to food or caffeinated drinks.													
I'm easily motivated, stay focused and get things done.													
<b>SUBTOTAL</b>													

	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
<b>Cravings</b>													
I stop eating once I'm full (or have satisfied a craving) with no problems.													
I go all day without experiencing cravings.													
I handle stress without craving certain foods.													
My thoughts about food come and go and I don't obsess about anything in particular.													
I rarely feel the desire for sweets or alcohol after I have already eaten.													
<b>SUBTOTAL</b>													
<b>TOTAL</b>													



## STEP #2 VITALITY SCORE

**A**fter your metabolic score, this is probably THE most important test and the one I care about the most—it measures where you are from a health, wellness and vitality perspective. This test is the one that will show your dramatic transformation the clearest, so do NOT skip this one.

People often obsess about weight when changing their eating or exercise habits, which is precisely the OPPOSITE of what you should be doing.

Fat loss happens as a natural consequence of optimizing your underlying biology and health, so while weight tracking is a relevant data point (more on that in a bit), it's probably the LEAST important in my experience.

The vitality tracker below provides an excellent overview of how your underlying biology is changing.

So make sure you fill this out once a week along with your SHMEC to fully understand how this program is effecting you.

**DO NOT SKIP THIS**—the feedback you'll be getting weekly will be VERY powerful, again, do NOT skip this!!

### *Vitality Tracker*

Go through this test once a week while you're on the program. Rate each of the symptoms as follows:

- ✓ 0 = Never or almost never have the symptom
- ✓ 1 = Occasionally have it, effect is not severe
- ✓ 2 = Occasionally have it, effect is severe
- ✓ 3 = Frequently have it, effect is not severe
- ✓ 4 = Frequently have it, effect is severe

Then, subtotal your results in each category and add together the subtotals at the end to get a quantitative analysis for where your health is now, and how much it improves over the program. Remember, take this quiz right before you start the program using the column titled “Beginning”. Then, at the end of every week, take the quiz again rating your symptoms in the relevant columns.

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
<b>Bad Odors</b>													
Underarms													
Breathe													
Feet													
Crotch													
Gas													
<b>SUBTOTAL</b>													
<b>Body Heat/Sweating</b>													
Sweaty palms or feet													
Sweat easily/ excessive sweating													
Cold sweats, often													
Night sweats													
Easily chilled													
Low tolerance to cold weather													
Extremities get cold easily (especially hands and feet)													
Hot flashes													
<b>SUBTOTAL</b>													
<b>Face</b>													
Large pore size													
Wrinkles/fine lines													
Puffiness													
Oily													
Dry													
Rosacea/flushed													
<b>SUBTOTAL</b>													

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
<b>Skin</b>													
Discolored/purple													
Acne/pimples/eczema													
Itching													
Scaly/dryness/roughness/cracking/psoriasis													
Looseness/flappiness													
Bruise easily													
Skin tags/cysts													
Brown/sun spots													
Hives/rashes													
Sores													
Cellulite/dimples/saggy shadows													
Stretch marks													
Poor muscle tone													
Varicose veins													
Numbness													
Tingling													
Searing pain													
<b>SUBTOTAL</b>													
<b>Mental</b>													
Difficulty concentrating or focusing													
Trouble remembering things/forgetfulness													
Tend to procrastinate													
Brain fog/slow thinking													
Lack of attention to detail													

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Trouble delaying what you want/need instant gratification													
Trouble listening													
Problems getting organized													
Restless/hyperactive													
Difficulty making decisions													
Stuttering/stammering													
Slurred speech													
Confusion, poor comprehension													
Poor physical coordination													
<b>SUBTOTAL</b>													
<b>Mood</b>													
Anger/irritability													
Agitated/restless													
Anxiety/stress/worry													
Short tempered/short fuse													
Emotional outbursts													
Sadness/depression													
Negative thinking													
Low interest in things normally pleasurable													
Mood swings/unstable mood													
Low self-esteem/lack of confidence/worthlessness													

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Lack of desire to socialize													
Lack of feeling anything/apathy													
<b>SUBTOTAL</b>													
<b>Energy</b>													
Exhausted/fatigued/sluggish													
Apathy/lethargy													
Lack of motivation to exercise													
Energy crashes/drowsy in mid- to late afternoon													
Drawn to caffeine, sugar/sweets or carbs for energy													
Low energy or drowsy after meals													
<b>SUBTOTAL</b>													
<b>Sleep</b>													
Trouble getting to sleep													
Trouble staying asleep													
Don't get enough sleep													
Wake up feeling tired													
Sleep not restful													
Excessive snoring or sleep apnea													
Wake up between 2 - 4 a.m. for 15 minutes or longer													
<b>SUBTOTAL</b>													

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
<b>Joints and Muscles</b>													
Aches/pains/soreness													
Stiffness													
Mobility/flexibility													
Arthritis													
Limitation of movement													
General feeling of weakness/lack of strength													
<b>SUBTOTAL</b>													
<b>Cravings</b>													
Sugar/sweets													
Simple carbs such as bread, pasta													
Fatty foods													
Salty foods													
Dairy (milk, ice cream, yogurt, cheese, etc.)													
Alcohol													
Coffee													
Drugs													
<b>SUBTOTAL</b>													
<b>Hunger/Appetite</b>													
Get agitated or angry between meals													
Can't go more than 3 hours without eating													
Lightheaded if meals are missed													
Eating relieves fatigue													



Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Eat to relieve depression or sadness													
Skip meals often													
Eat late at night or before bed													
Wake up in middle of night hungry													
Frequently binge eat													
Trouble stopping eating even when full													
Need to snack often													
Compulsive eating													
<b>SUBTOTAL</b>													
<b>Digestion</b>													
Passing gas													
Burping													
Bloating													
Stomach/abdominal pain													
Acid reflux													
Heartburn/GERD													
Cramping													
Nausea/upset stomach													
IBS													
<b>SUBTOTAL</b>													
<b>Hair</b>													
Hair loss													
Dryness													
Thinning													
Dandruff/flaky scalp													
Dry scalp													

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Itchy scalp													
Red scalp													
<b>SUBTOTAL</b>													
<b>Head</b>													
Headaches/ migraines													
Faintness													
General dizziness													
Lightheaded, especially when getting up													
Shaky													
<b>SUBTOTAL</b>													
<b>Nose</b>													
Trouble breathing													
Runny nose													
Stuffy nose													
Post nasal drip													
Sinus problems													
Hay fever													
Sneezing attacks													
Excessive mucus formation													
<b>SUBTOTAL</b>													
<b>Ears</b>													
Itchy ears													
Earaches/ear infections													
Drainage													
Trouble hearing													

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Ear pressure													
Ringing/tinnitus													
<b>SUBTOTAL</b>													
<b>Eyes</b>													
Watery or itchy eyes													
Swollen, reddened, or sticky eyelids													
Burning sensation													
Muscle twitching around eyes													
Bags or dark circles under eyes													
Blurred or tunnel vision (does not include near-or far-sightedness)													
Sensitive to light													
Impaired night vision													
<b>SUBTOTAL</b>													
<b>Nails</b>													
Weak													
Cracked or split													
Ridged/rippled													
Puffy nail fold													
Gnawed nails													
Yellowish/whitish/ bluish/pale color													
<b>SUBTOTAL</b>													
<b>Mouth/Throat</b>													
Soreness													
Itchiness													
Chronic coughing													

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Difficulty swallowing													
Gagging reflex													
Frequent need to clear throat													
Hoarseness, or loss of voice													
Swollen or discolored tongue, gum, or lips													
Canker sores													
Reduction in overall sense of taste													
Dry mouth													
Frequent thirst													
<b>SUBTOTAL</b>													
<b>Lungs</b>													
Shortness of breath													
Labored/difficult breathing													
Asthma/bronchitis													
Sneezing attacks													
Wheezing when breathing													
Congestion													
<b>SUBTOTAL</b>													
<b>Heart</b>													
Irregular or skipped heartbeat													
Rapid or pounding heartbeat													
Heart palpitations/racing heart													
Chest pain													
Fast pulse rate at rest													

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Pulse increases after eating													
Rapid pulse before bed													
<b>SUBTOTAL</b>													
<b>Elimination</b>													
Frequent urination													
Pain urinating													
Urgent urination													
Wake frequently to urinate													
Stool unusual in color, shape or consistency													
Hard stool													
Foul-smelling stool													
Diarrhea													
Constipation													
<b>SUBTOTAL</b>													
<b>Other</b>													
Genital itching/discharge													
Tender lymph nodes													
Itchy or stinging anus													
Irregular periods													
Sore breasts													
Loss of breast fullness													
Vaginal dryness													
Bad PMS symptoms													
Recurring yeast infections													

Health Area	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Chronic fungus on nails, skin or athlete's foot													
Lack of sex drive													
Frequently ill or get colds, flu, viruses, etc.													
<b>SUBTOTAL</b>													
<b>GRAND TOTAL</b>													



## STEP #3 PMS SCORE

**M**ost normally menstruating women suffer from PMS at least some of the time. This is especially true when their metabolism is out of balance. This short quiz will provide you a quantitative assessment of your PMS symptoms. You will watch you score improve and your symptoms resolve over the course of the 12-week program.

Obviously, you should only track this if you are still menstruating. If you aren't, you can skip this step.

### *PMS Tracker*

Go through this test once a week while you're on the program. Rate each of the symptoms as follows:

- ✓ 0 = Never or almost never have the symptom
- ✓ 1 = Occasionally have it, effect is not severe
- ✓ 2 = Occasionally have it, effect is severe
- ✓ 3 = Frequently have it, effect is not severe
- ✓ 4 = Frequently have it, effect is severe

Symptoms	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Abdominal pain													
Abdominal bloating													
Sore breasts													
Acne													
Food cravings, especially for sweets													
Constipation													
Diarrhea													
Headaches													
Sensitivity to light or sound													
Fatigue													
Irritability													
Changes in sleep patterns													
Anxiety													
Depression													
Sadness													
Emotional outbursts													
<b>TOTAL</b>													



# STEP #4 MENOPAUSE SCORE

**P**erimenopause and menopause are a time of hormonal fluctuations and changes. These changes cause the body to react in specific, often unpredictable ways. However, there are a common set of symptoms many women suffer from during this time of life. The diet and lifestyle changes you make on this program will help reduce these symptoms. So if you are a woman in perimenopause, menopause, or post-menopause I encourage you to track the following weekly as well.

## *Menopause Tracker*

Go through this test once a week while you're on the program. Rate each of the symptoms as follows:

- ✓ 0 = Never or almost never have the symptom
- ✓ 1 = Occasionally have it, effect is not severe
- ✓ 2 = Occasionally have it, effect is severe
- ✓ 3 = Frequently have it, effect is not severe
- ✓ 4 = Frequently have it, effect is severe

Symptoms	B	Wk 1	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Irregular periods												
Vaginal dryness												
Hot flashes												
Night sweats												
Sleep problems												
Mood changes												
Weight gain and slowed metabolism												
Thinning hair												
Dry skin												
Loss of breast fullness												
<b>TOTAL</b>												



## STEP #5

# THE BODY SHAPE TEST

**T**he body shape test is a powerful way to see how your body shape changes throughout the program. Everyone loses inches, but where precisely you lose the inches differs from person to person.

So, the simple thing to do here is to get a tape measure (a cloth kind, NOT a metal one!) and measure these different parts of your body on the same days you do your other assessments.

Or, if you don't have a tape measure, take a piece of string, see how far it goes around and then measure that string length with a ruler.

Here's a great tape measure made specifically for this purpose that you can get for less than 6 bucks at Amazon: <http://www.metabolicrenewal.com/myotape>

Make sure you do this **WITHOUT** clothes on with your muscles relaxed, and position the tape in the same spot every time for consistency.

You may need someone to help you with this. For the arms and thighs, you only need to measure one, so just choose **ONE** side only for each.

Here are the parts you measure:

- ✓ **Hips**—Start at one hip and wrap the tape measure around your rear, around the other hip, and back to where you started. Make sure the tape is over the largest part of your buttocks. Because making sure the tape is level back there can be hard, try to do it in front of a mirror.
- ✓ **Waist**—Place the measuring tape about a 1/2 inch **ABOVE** your bellybutton (at the narrowest part of your waist) to measure around your torso. Don't suck in your belly as that will throw things off. Make sure to exhale and then measure before inhaling again.
- ✓ **Chest/Bust**—Wrap the measuring tape around your chest across the nipples. Be sure to keep the tape parallel to the floor.
- ✓ **Thigh**—Choose just **ONE** side and measure around the largest part of the thigh and wrap the tape measure around your thigh from front to back and then around to the front.
- ✓ **Calve**—Choose just **ONE** side and measure around the largest part of the calf.

- ✓ **Upper Arm**—Choose just ONE side and measure around the largest part of the upper arm (ABOVE the elbow).
- ✓ **Forearm**—Choose just ONE side and measure around the largest part of the forearm (BELOW the elbow).
- ✓ **Neck**—Measure around the largest part of the neck.

***Body Shape Tracking Chart***

Record all of the results you get for each measurement in the chart below. Remember, take your initial measurements right before you start the program, and record that information under the column titled “Beginning”. Then, at the end of every week, take your measurements again and record them in the relevant columns.

	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Hips													
Waist													
Chest													
Bust													
Thigh													
Calve													
Upper Arm													
Forearm													
Neck													
<b>TOTAL</b>													



## STEP #6

# YOUR APPLE POINT AND PEAR POINT

**R**esearch tells us that both women and men prefer certain body shapes both in themselves and each other. These preferences actually hold across all cultures. They are the same whether you live in North America, South America, Asia, Europe, Africa, or Australia.

What shapes am I referring to? I am talking about the hourglass shape for women and the V-shape for men.

These shapes are not only shown to be preferred in research, but they have also been shown to be the healthiest body shapes as well.

Unfortunately, the weight loss industry completely ignores research on body shape, opting instead to focus on weight loss.

It is important to remember you can be losing weight but not necessarily losing just fat. Many people lose a substantial amount of lean body mass as well. The eat less, exercise more model of dieting, where low calorie foods are consumed and aerobic exercise dominates, can burn between 20 and 50% lean tissue.

This has consequences for the metabolism since basal metabolic rate, the amount of energy you burn at rest, is heavily influenced by muscle. Losing muscle during dieting is one of the best predictors of weight regain and overcompensation. It is also one of the reasons 66% of people following these programs end up fatter after the diet than before they started.

Standard calorie counting diets do not necessarily change the shape of the body. At least not in the right direction. Often an overweight apple or pear shaped person can end up a smaller more pronounced and mushier apple or pear shape.

The question is how do you know if you are heading in the right direction and achieving the shape you desire? How can you tell if the results you are achieving are A) burning mostly fat and B) changing your shape.

For women two points: The waist to chest ratio, or apple point, and the waist to hip ratio, or pear point.

A perfect hourglass shape has almost equal numbers. Research shows the ideal is between .6 and .8 for both points. .7 is optimal and the most desirable female look according to both male and female assessments of the female physique.

When the waist to chest ratio or waist to hip ratio starts moving closer to .8, this is a sign you are becoming more apple shaped. This occurs in many women after menopause even with no change in weight.

When the waist to hip ratio starts falling below .7, and moving closer to .6, you are becoming more pear shaped. This often occurs in young women who engage in low calorie eating and excessive cardiovascular exercise. I have seen pear shaped women join marathon running training programs and watch as they lost weight in their waist, breasts and arms while the hip area became more pronounced.

Of course, they were losing fat from this area as well, but at so much of a slower pace compared to the rest of the body that they appeared to have a more accentuated pear shape by the end. They started out as a pear shape and ended up a smaller, more pronounced and often more mushy pear shape in the end.

Obviously, these are not the kind of results you are after from this program. My goal here is to help you achieve that beautiful (not to mention healthy) hourglass figure, while you burn fat and get stronger at the same time.

To make sure you are moving in the right direction, you'll need to use your measurements from step #5 and assess your apple point and pear point. It's pretty easy to do, and it's one of the most important measurements you, as a woman, can take to assess the success of this program and your overall health.

### ***The Apple and Pear Point Tracker***

To calculate your apple point simply take the waist measurement you took in step #5 and divide it by your chest measurement. For example, if your waist was 32 inches and your chest was 36 inches, your apple point would be:

$$32/36 = 0.888$$

For your pear point, take your waist measurement and divide it by your hip measurement. So if your waist was 32 inches and your hips were 40 inches your pear point would be:

$$32/40 = 0.8$$

Then record your apple and pear point in the chart below. Remember, you are looking for both of these measurements to approach 0.8. That is the ideal hourglass shape.

Measurement	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Apple Point												
Pear Point												

# STEP #7 WEIGHT

Least, and DEFINITELY least, is tracking your weight. This is the least important measure of all, mostly because of how much psychological baggage people have endured obsessively focusing on this metric.

Weight can fluctuate wildly depending on hydration levels, stored carb levels (glycogen), time of day and many other factors, which cause people to freak out over nothing.

Unless you have extensive body composition testing done with a DEXA scan, it's impossible to know what's changing based on fat, muscle, bone, water and other body content. And that's particularly important for a program like *Metabolic Renewal*, which most likely will induce muscle gain from the resistance included in each exercise.

That's why on this program you measure weight only once a week, on the same days you are measuring everything else. Make sure you always weigh yourself first thing in the morning with no clothes on.

### ***Weight Tracking Chart***

Weigh yourself before the program starts and record that number in the space titled "Beginning". Then at the end of each week, weigh yourself again and record your results in the relevant area of the tracking chart.

	B	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11	Wk 12
Weight													



# BONUS MEASUREMENT: THE CLOTHES TEST

**T**his is certainly the funnest baseline measurement there is to take. Put on your favorite jeans, dress, shirt or bra... and also your favorite belt.

Take note of how each of them fit:

- ✓ For the pants, how much space is there between the pants and your belly? How snug are the pants?
- ✓ For the belt, track what notch you tighten it to.
- ✓ For the dress, evaluate how you feel in it. How tight or loose is it? Is it form-fitting?

Then use your mobile phone or some other digital camera and take a picture of how you look with your clothes on and keep that stored somewhere.

Yes, seems corny, but the difference you'll see will be striking and unforgettable.

Okay, that's it (ha!)—remember, do this once a week over the course of the program so you have a record of how much change you experience over the next 12 weeks.