

SWEET POTATO BURRITO BOWL

Ingredients:

- Cooking spray
- 2 small-to-medium sweet potatoes (final cooked weight of flesh is 12 oz)
- 1 cup instant brown rice such as Minute Instant
- 2 tsp olive oil
- 1 small onion, small dice (about ¾ cup)
- 2 cloves garlic, minced or grated
- 1 (15.5 oz) can black beans, drained and rinsed
- 1 cup salsa
- 1/2 cup shredded 2% Mexican-style cheese
- 2 cups shredded lettuce



- 1/4 cup nonfat, plain Greek yogurt
- 1 cup diced tomatoes

Preparation:

1. Preheat the oven to 400 degrees F. Coat a baking sheet with cooking spray. Scrub and dry the potatoes and place them on the baking sheet. Bake the potatoes 45 minutes-1 hour until very tender.
2. While the potatoes are cooking, cook the instant brown rice according to the package directions. Set the cooked rice aside but keep warm.
3. Add the olive oil to a nonstick pan over medium heat. Add the onions and garlic and sauté 5 minutes or until the onions start to soften.
4. Add the beans and salsa, and simmer to heat the beans through. Set the bean and salsa mixture aside but keep warm.
5. When the potatoes are done cooking, let them cool slightly, then peel and large dice the cooked potato.
6. To build one burrito bowl, add 1/2 cup cooked rice to the bottom of the bowl. Top with 1/4 of sweet potatoes. Top with 1/2 cup bean and salsa mixture, then top with 2 Tbsp cheese.
7. To serve, top with 1/2 cup shredded lettuce, 1 Tbsp Greek yogurt and 1/4 cup tomatoes.
8. Repeat the process for the remaining three bowls.

MAKE IT GLUTEN-FREE: Ensure all ingredients are gluten-free and this dish can be gluten-free.

Choices/Exchanges: 3 Starch, 2 Non-starchy Vegetable, 1 Lean Protein, 1/2 Fat

Serving Size: 1 bowl
Serves: 4

Nutrition: Calories 345, Carbohydrate 59 g, Protein 17 g, Fat 7.0 g, Saturated Fat 2.4 g, Sugars 13 g, Dietary Fiber 12 g, Cholesterol 10 mg, Sodium 590 mg, Potassium 1075 mg

<http://www.diabetes.org/mfa-recipes/recipes/2015-04-sweet-potato-burrito-bowl.html>



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Wim & Wiger

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Director's Note

Stacy Lane - JPA Director

Welcome to the 2017-2018 school year! With the onset of the new school year, we are all busy getting back into the swing of things. To help



TELADOC

you save time and money, make sure you register for Teladoc, which comes with a low co-pay and can be done from anywhere at anytime! I know people who have scheduled a doctor's appointment during their classroom lunch break or in their office between meetings.

It's quick to register....go to www.teladoc.com and create a profile. Information on how to register is also available from your district benefits contact.

Also coinciding with the start of school is the start of the annual flu season. As with prior years, NCSMIG offers you free flu shots at any pharmacy who accepts your CVS/Caremark card. You DO NOT have to go to a CVS/Caremark retail store. I strongly

recommend you have the pharmacy run the charges through their system BEFORE they give you the shot.

That way, if there are any problems, they have the opportunity to correct them before asking you to pay out of pocket.



If the pharmacy asks you to personally pay for your flu shot, please make sure they call the CVS/Caremark customer service number on the back of your ID card for assistance. You should not have to pay anything for your shot. If they have entered your billing codes incorrectly, CVS/Caremark Customer Service can help them fix the error and get you on your way. If you have the Pine plan, please contact Blue Shield of California directly for the nearest pharmacy that participates in their flu shot program.

If you have any problems registering for Teladoc, or obtaining a flu shot, please feel free to give our office a call at 707-445-7126.

■ Blue Shield 24/7 Nurse Line: 1-877-304-0504 ■ Teladoc 24/7 Physicians: 1-800-835-2362

CHOLESTEROL EDUCATION

What is cholesterol?

Cholesterol is a waxy, fat-like substance found in your body and many foods. Your body needs cholesterol to function normally and makes all that you need. Too much cholesterol can build up in your arteries. After a while, these deposits narrow your arteries, putting you at risk for heart disease and stroke

How often should you have your cholesterol checked?

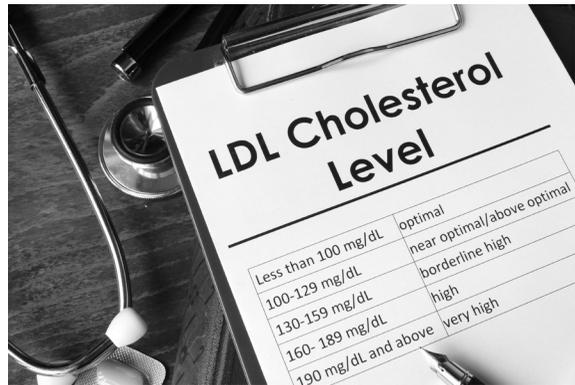
The National Cholesterol Education Program (NCEP) recommends that adults aged 20 years or older have their cholesterol checked every 5 years. Preventive guidelines for cholesterol screening among young adults differ, but experts agree on the need to screen young adults who have other risk factors for coronary heart disease: obesity, smoking, high blood pressure, diabetes, and family history. Less than half of young adults who have these risk factors don't get cholesterol screening even though up to a quarter of them have elevated cholesterol.

A simple blood test called a lipoprotein profile can measure your total cholesterol levels, including LDL (low-density lipoprotein, or "bad" cholesterol), HDL (high-density lipoprotein, or "good" cholesterol), and triglycerides.

The following chart shows optimal lipid levels for adults:

Desirable Cholesterol Levels

Total cholesterol	< 170 mg/dL
Low LDL ("bad") cholesterol	< 110 mg/dL
High HDL ("good") cholesterol	≥ 35 mg/dL
Triglycerides	< 150 mg/dL



More than 102 million American Adults (20 years or older) have total cholesterol levels at or above 200 mg/dL, which is above healthy levels. More than 35 million of these people have levels of 240 mg/dL or higher, which puts them at high risk for heart disease.

If you have high cholesterol, what can you do to lower it?

Your doctor may prescribe medications to treat your high cholesterol. In addition, you can lower your cholesterol levels through lifestyle changes:

- Low-fat and high-fiber food (Eat more fresh fruits, fresh vegetables, and whole grains)
- For adults, getting at least 2 hours and 30 minutes of moderate or 1 hour and 15 minutes of vigorous physical activity a week. For those aged 6-17, getting 1 hour or more of physical activity each day.
- Maintain a healthy weight.
- Don't smoke or quit if you smoke.

https://www.cdc.gov/cholesterol/cholesterol_education_month.htm

PROSTATE CANCER AWARENESS

Prostate Cancer is the most common non-skin cancer among American men. Prostate cancers usually grow slowly. Most men with prostate cancer are older than 65 years and do not die from the disease. Finding and treating prostate cancer before symptoms occur may not improve your health or help you live longer.

Symptoms

Men can have different symptoms for prostate cancer. Some men do not have symptoms at all. Some symptoms of prostate cancer are difficulty starting urination, frequent urination (especially at night), weak or interrupted flow of urine, and blood in the urine or semen.

Risk Factors

There is no way to know for sure if you will get prostate cancer. The older a man is, the greater his risk of getting prostate cancer. Men also have a greater chance of getting prostate cancer if they are African-American or have a father, brother, or son who has had prostate cancer.

Screening Tests

Two tests are commonly used to screen for prostate cancer:

Digital rectal exam (DRE): A doctor or nurse inserts a gloved, lubricated finger into the rectum to estimate the size of the prostate and feel for lumps or other abnormalities.

Prostate specific antigen (PSA) test: Measures the level of PSA in the blood. PSA is a substance made by the prostate.



Men: Talk to your doctor before you decide to get tested or treated for prostate cancer.

The levels of PSA in the blood can be higher in men who have prostate cancer. The PSA level may also be elevated in other conditions that affect the prostate.

Should You Get Screened?

CDC and other federal agencies follow the prostate cancer screening recommendations set forth by the U.S. Preventive Services Task Force, which recommends against prostate specific antigen (PSA)-based screening for men who do not have symptoms. Other organizations may have other recommendations.

A PSA test can find prostate cancer earlier than no screening at all. However, the PSA test may have false positive or false negative results. This can mean that men without cancer may have abnormal results and get tests that are not necessary. It could also mean that the test could miss cancer in men who may need to be treated. Talk to your doctor about the right decision for you.

<https://www.cdc.gov/cancer/dcpc/resources/features/prostatecancer/index.htm>