

TIMECODE	VISUALS	AUDIO
	<b>dLife Intro</b>	<b>VO</b>  <b>dLife TV, the only show for your diabetes life. Packed with information, insights, cooking and real stories about real people. dLife brings it all together to help you live a healthy diabetes life.</b>
	<b>Pricking finger to check blood sugar while sitting on ski slopes</b>  <b>Man in green jacket snowboarding</b>	Nicole Johnson Voice Over  Today on dLife, diabetes shouldn't keep you from enjoying the unique challenge of winter sports. We've got the cold facts.
	<b>dLife logo</b>	
	<b>Therapist manipulating man's arm</b>	Also, the important role of physical therapy in treating common complications of diabetes.
	<b>dLife logo</b>	
	<b>Chef Nischan working in kitchen</b>	Plus, Chef Michel Nischan's in the dLife kitchen ready to prepare a low carb dish.
	<b>Nicole Johnson in studio</b>  <b>Lower third:</b>  <b>NICOLE JOHNSON</b> <b>Diabetes Since 1993, Miss America</b> <b>1999</b>	Nicole Johnson  Welcome to dLife, your source for a healthy diabetes life. I'm Nicole Johnson. As a professional snowboarder with diabetes, Sean Busby learned how to adjust his lifestyle and manage his diabetes while shredding down the mountain. Now, through his Riding on Insulin program, Sean is showing others with diabetes how to control blood sugar while enjoying all kinds of winter sports.
	<b>Shadow of chair lift in snow</b>  <b>View of snowy mountaintops</b>  <b>View from chair lift down mountain</b>	
	<b>People standing on mountain side</b>  <b>People learning to snowboard</b>	Sean Busby: Okay, so now we're slowly gonna turn so we're all facing uphill. Good, good, good toe side.



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	<p><b>Chairlift wires</b></p> <p><b>View from chairlift of people on ski slopes</b></p> <p><b>Interview with Sean on slopes</b></p>	<p>Sean Busby</p> <p>I'm still learning about managing my diabetes in this sort of environment. But as I was learning how I- I didn't have a set guidebook to follow, I didn't know of any other snowboarders at uhm..- you know, at a competitive level or professional level that had diabetes. So everything that I learned was from trial and error. And I tested my blood sugars constantly, saw what food did to my blood sugars and how I managed it with activity, as well as my insulin levels.</p>
	<p><b>Sean snowboarding</b></p> <p><b>Back to interview with Sean on slopes</b></p>	<p>During the time that I was going through all this trouble I came across the Juvenile Diabetes Research Foundation and I was able to read on their website stories of these 2 year olds, 5 year olds, 16 year olds that have juvenile diabetes and how they lived with it daily.</p>
	<p><b>Children sitting at tables at seminar</b></p>	<p>Jim Turner Voice Over</p> <p>Sean created the Riding on Insulin Camp as a way to give something back to those who inspired him to continue pursuing his passion</p>
	<p><b>Sean talking at conference</b></p> <p><b>Bus leaving building</b></p> <p><b>People snowboarding</b></p> <p><b>Girl in pink hat</b></p> <p><b>Back to Sean talking at seminar</b></p>	<p>Sean Busby: Tomorrow we will be getting on a charter bus and going on the windy road to Snow Summit. What we'll do when we get there is we'll discuss diabetes and some ways of keeping your- your blood glucose meter warm as well as keeping your insulin from freezing. I don't think that'll be too much of a case tomorrow but for any other times that you guys may be in a cold environment there'll be some good tips.</p>
	<p><b>Interview with Ally DeHaven at seminar</b></p> <p><b>Lower third:</b></p> <p><b>ALLY DeHAVEN, 13 Diabetes Since 2004</b></p>	<p>Ally DeHaven: This is my first time doing Riding on Insulin. I'm very excited to, you know, meet new people and meet Sean and go snowboarding with him and learn more about the diabetes and snowboarding.</p>
	<p><b>Sean talking to Ally on slopes</b></p>	<p>Sean Busby: What does your doctor like you to be around usually?</p> <p>Ally DeHaven: Uh.. about 100.</p>

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		<p>Sean Busby: Yeah? What- has- have you- do you play any other sports?</p> <p>Ally DeHaven: Uhm.. I play soccer and softball.</p> <p>Sean Busby: And does he still want your sugars around that? Any higher or so?</p> <p>Ally DeHaven: Just about that. Yeah.</p> <p>Sean Busby: Just about that okay. Do you check it pretty often?</p> <p>Ally DeHaven: Hmm-hmm.</p> <p>Sean Busby: Okay, good.</p>
	<p><b>People on snow slopes, bright sun shining</b></p> <p><b>Sean talking to camera on slopes</b></p>	<p>Sean Busby</p> <p>Today, I would say it's probably in the high 40s, low 50's so uhm.. just gotta stay hydrated and make sure that the sugars are running in check. So...</p>
	<p><b>Boy in white cap and goggles</b></p>	<p>Sean Busby: Go ahead and take out your meters and we'll all check.</p>
	<p><b>On chairlift</b></p> <p><b>Looking at blood glucose meter</b></p>	<p>Sean Busby: Know before you go, know as you- right before you get on that trail if you don't wanna have a low blood sugar on the trail after it's- it can be scary. If you doubt, just check. It just take a few seconds of your time.</p>
		<p>Jim Turner VO</p> <p>In addition to frequent to blood glucose testing, Sean encourages everyone to come to the mountain fully prepared.</p>
	<p><b>Card:</b></p> <p><b>Winter Sports Essentials:</b>  <b>Test strips</b>  <b>Glucose meter</b>  <b>Extra lancets</b>  <b>Extra pump infusion sets</b></p>	<p>Sean Busby</p> <p>When doing any winter sports you wanna bring your test strips, your meter, some extra lancets. If you're on the pump bring extra infusion sets, extra insulin in case it goes bad, batteries for your pump 'cause,</p>

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	<p><b>Extra insulin</b>  <b>Extra pump batteries</b>  <b>Fast-acting glucose</b></p> <p><b>Interview with Sean on slopes</b></p>	<p>you know, cold weather can drop the battery life, uh.. some form of glucose. The key is being prepared so you can- if anything happens you can counter whatever happens and just be ready to take it on.</p>
	<p><b>Sean snowboarding down slope</b></p>	<p>Sean Busby: This is great right here dude.</p>
	<p><b>Getting on bus with snowboard</b></p> <p><b>Kids signing snowboard</b></p> <p><b>Back to interview with Sean Busby</b></p> <p><b>Signatures on snowboard</b></p>	<p>Sean Busby</p> <p>The board I have that I compete on is very special to me. At every camp I _____ around and have the participations sign it. It was because of these participants that inspired me to continue my snowboarding career. So when I'm in that start gate I wanna be able to look down at my board and see the names of all of the participants that have been to Riding on Insulin, all the kids, these teenagers, these young adults, that live with this disease so when I'm in that start gate I can look down, be inspired by them and know who I'm racing for.</p>
	<p><b>Camera on snowboard going downhill</b></p>	<p>Jim Turner VO</p> <p>Armed with the knowledge of how cold, humidity, and altitude affect his diabetes Sean continues riding on insulin towards the 2014 Winter Olympics in Russia. Until then...</p>
	<p><b>Sean standing with young boy for picture</b></p> <p><b>Back to interview with Sean Busby</b></p>	<p>Sean Busby</p> <p>I hope that participants will walk away with new friends, new support, and a basic understanding of how their body acts in this winter environment.</p>
	<p><b>Interview with Ally DeHaven by bus</b></p>	<p>Ally DeHaven</p> <p>I'm gonna definitely continue Riding on Insulin and I'm totally gonna come back next year and do the same thing.</p>
	<p><b>Sean high fiving young boy with Tigers sweatshirt</b></p>	<p>Sean Busby: Buddy, good job today.</p>

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	<b>Sean snowboarding down hill</b>	
	<b>dLife logo</b>	
	<p><b>Nicole Johnson in studio</b></p> <p><b>Lower third:</b></p> <p><a href="http://www.dLife.com/sports">www.dLife.com/sports</a></p> <p><b>Woman with pants leg rolled up walking by doctor</b></p> <p><b>Back to Nicole in studio</b></p>	<p>Nicole Johnson</p> <p>To read more about diabetes and rigorous sports, go to dLife.com/sports. Up next, treating diabetes complications with physical therapy. But first, another good eating, good living food idea from Kraft.</p>
	<b>dLife logo</b>	
	<p><b>Nicole Johnson in studio</b></p> <p><b>Lower third:</b></p> <p><b>NICOLE JOHNSON</b></p>	<p>Nicole Johnson</p> <p>Those of us living with diabetes have heard terms like frozen shoulder and trigger finger. They're both common complications. We visited Dr. Michael Mueller at Washington University Medical School in St. Louis, to learn about the role of physical therapy in treating some of these disorders.</p>
	<p><b>Dr. Michael Mueller lecturing around skeleton</b></p> <p><b>Dr. Miller working with patients</b></p>	<p>Dr. Mueller Voice Over</p> <p>We don't often think about the complications of diabetes as it relates uh.. to the muscular skeletal problems but diabetes also affects uh.. the skin, uh.. the joints, uh.. the collagen that uh.. makes up the joints in the skin. And uh.. physical therapists in a very board level do work with the movement problems of uh.. people with all kinds of uh.. disabilities, impairments, functional limitations.</p>
	<p><b>Card:</b></p> <p><b>People with diabetes are more Susceptible to problems such as:</b></p> <p><b>Frozen shoulder</b></p> <p><b>Trigger Finger</b></p> <p><b>Joint deformities and skin breakdown</b></p>	<p>But it seems to be a little more frequent in those with diabetes. Things like frozen shoulder or trigger finger or various kinds of joint deformities and to uh.. skin breakdown.</p>

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	<p><b>Interview with Dr. Michael Mueller</b></p> <p><b>Lower third:</b></p> <p><b>MICHAEL J. MUELLER, PT, PhD</b>  <b>Assoc. Prof. Of Physical Therapy</b>  <b>Washington University</b></p>	<p>Michael Mueller</p> <p>The underlying problem uh.. behind all of these specific muscular skeletal issues is uh.. this glycosalation [ph?] of collagen fibers.</p>
	<p><b>Graphic of shoulder bones</b></p> <p><b>Graphic of glucose molecules</b></p> <p><b>Graph of anatomy</b></p> <p><b>Doctor working on patients arm</b></p> <p><b>Doctor showing patient to raise arms overhead</b></p>	<p>The glucose gets sticky and it sticks to the collagen and creates a sticky uh.. larger molecule than it would otherwise. And if you're being referred for a shoulder problem, frozen shoulder, begins with some kind of a pain and then the individual tends not to move the shoulder as much and then it becomes frozen, it- it becomes immobile, uh.. the patient becomes unable to reach overhead.</p>
	<p><b>Working on patients arm</b></p>	<p>Uhm.. the first thing that a physical therapist would do uh.. would be to determine the range of motion, looking at the way they move the shoulder. And then the physical therapist would ta- target those specific impairments uh.. to try to help them increase uh.. the mobility and use of their shoulder.</p>
	<p><b>Anatomical graph, zooming into hand</b></p> <p><b>Interview with Dr. Mueller</b></p> <p><b>Doctor using model hand to demonstrate</b></p> <p><b>Graph of hand and finger moving</b></p>	<p>A trigger finger is a problem within the flexor uh.. tendon of the hand. The diabetes can cause a nodule on the tendon and then the nodule sticks within the pulley and- and so the reason they call it a trigger finger is that this nodule gets stuck, the patient will try to pull their finger down and uh.. then it'll snap like a trigger.</p>
	<p><b>Back to interview with Dr. Mueller</b></p> <p><b>Putting splinter on hand</b></p> <p><b>Back to interview with Dr. Mueller</b></p> <p><b>Lower third:</b></p> <p><b>WARNING: Cortisone and other steroids raise blood sugar levels. Talk with your doctor about what's</b></p>	<p>Sometimes uh.. conservative care will be uh.. tried uh.. with some kind of splinting. So a splint can be applied to the hand uh.. to try to reduce the inflammation, to let it cool down and- and see if it will resolve on its own. Uh.. quite frequently uh.. injections are- are needed. Uh.. cortisone kinds of injections uh.. or surgery. And uhm.- and that's probably a more typical uh.. process depending upon how uh.. severe the problem is.</p>

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	<b>right for you.</b>	
	<b>Anatomical graph zooming into foot</b>  <b>Interview with Dr. Mueller</b>  <b>Dr. checking patients feet</b>  <b>Back to interview with Dr. Mueller</b>  <b>Graph of bones of foot</b>	<p>People with diabetes uh.. are uh.. at increased risk for foot problems uh.. including skin breakdown and ulcers. And the primary reasons uh.. for having uh.. foot problems uh.. is uh.. peripheral neuropathy. Uh.. and the peripheral neuropathy leads to a- a weakness in the muscle that can often uh.. cause deformities, hammertoe deformities. And sharkco [ph?] deformity is- is a rather severe deformity within the foot. The bones of the joint actually begin to deteriorate and uh.. can lead to severe deformity.</p>
	<b>Back to interview with Dr. Mueller</b>   <b>Blood glucose monitor</b>  <b>Man swimming with weights</b>  <b>Older people taking aerobics class</b>	<p>As a physical therapist I'm just keenly uh.. impressed with how important it is for people to remain active. A sedentary lifestyle is clearly uh.. an increased risk for developing many of these uh.. problems. So uh.. it's very important then for patients to try to control their glucose levels. We like to see tight uh.. control and as a physical therapist we uh.. really encourage people to be active within their abilities.</p>
	<b>dLife logo</b>	
	<b>Nicole Johnson sitting in studio</b>   <b>Lower third:</b>  <b>www.dLife.com/locator</b>	<p>Nicole Johnson</p> <p>Some orthopedic complications of diabetes are not well known. When referred to a physical therapist, ask if he or she has experience treating people with diabetes. To find a PT or other healthcare professional in your area, visit <a href="http://dLife.com/locator">dLife.com/locator</a></p>
	<b>Chef in kitchen</b>	When we come back, Michel Nischan is in the dLife Kitchen.
	<b>dLife logo</b>	
	<b>Chef in kitchen</b>	<p>Chef Michel Nischan</p> <p>Hi, I'm Chef Michel Nischan and welcome to the</p>

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	<p><b>Lower third:</b></p> <p><b>Michel Nischan</b>  <b>dLife Chef</b></p> <p><b>Dish on counter</b></p>	<p>dLife kitchen. Today, we're gonna do a really great side and/or entree dish: Cheesy Spinach Bake. So let's get started.</p>
	<p><b>Chef pointing to pans on stove</b></p> <p><b>Adding butter to pan</b></p> <p><b>Putting eggs into bowl and beating with fork</b></p>	<p>Here I have a little bit of milk and cream that I've been heating. It's almost to a simmer but not quite. And now we're gonna take a little bit of butter and I have just a really slow pan that I've just barely heated and you can see it's bubbling just a little bit. Now, for the next step we're taking three whole eggs, and two egg yolks and we're gonna beat them together until they're well combined. And a fork works really well for this.</p>
	<p><b>Adding milk to egg and mixing</b></p>	<p>Once that's really nicely mixed what I do is I take my preheated mixture and I add it to the eggs. Now, some folks might ask, why don't I add the eggs to the milk. The milk is so hot that it would scramble the eggs, but the eggs because they're cooler if I take the larger volume and slowly add the hotter stuff into it, it'll temper it so that the eggs just begin warming up a little bit but they won't scramble or curdle.</p>
	<p><b>Adding melted butter to eggs and mixing with fork</b></p> <p><b>Adding spinach and mixing ingredients together</b></p>	<p>And now I'm gonna add the melted butter and we're just gonna slowly add it, a drizzle at a time to the eggs which are now nice and warm. And now I'm gonna take some freshly grated cheese and about three quarters of a cup. I'm gonna save some for the topping. And then I'm gonna add some spinach. I'm just gonna fold it really nicely and just keep scooping around and around and around, digging under and pulling to the top.</p>
	<p><b>Close up of spinach mixture in bowl on counter</b></p> <p><b>Spraying baking dish and adding spinach mixture</b></p>	<p>Now I'm gonna take a nice oven proof baking dish. I'm gonna coat it with my trusty Misto, in which I have put some uh.. grape seed oil and then go right into the casserole just like that. And then one last touch before we take it to the oven and that's gonna be to mix a little bit of breadcrumbs in with the</p>

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	<p><b>Mixing cheese in small bowl</b></p> <p><b>Left side:</b></p> <p style="text-align: center;"><b>CHEESY SPINACH BAKE</b>  <b>Makes 8 servings</b>  <b>Per serving--</b>  <b>Calories: 196</b>  <b>Carbs: 6g</b>  <b>Fiber 1g</b>  <b>Sodium: 296mg</b>  <b>Saturated fat: 8g</b></p> <p><b>Right side:</b></p> <p style="text-align: center;"><b>Chef Nischan sprinkling cheese over spinach</b></p>	<p>remaining cheese for a really nice crisp cheesy topping. So here we just have a nice little toss and very low carbs. I think I used maybe a tea-teaspoon and a half to two teaspoons of breadcrumbs for this entire dish. And, you know, just a little bit goes a long way. Sure it's a carbohydrate but it's a little more complex and we didn't use a whole lot, but what it's gonna do for crispness and flavor is really remarkable. So there you have it.</p>
	<p><b>Chef uses cloth to pick up dish and put it in oven</b></p>	<p>Now we're gonna transfer it to a preheated 350 degree oven. We're gonna let it bake for about 30 minutes and then it's gonna be perfect.</p>
	<p><b>Opening oven door and removing casserole</b></p> <p><b>Casserole on counter</b></p> <p><b>Garnishing plate with radish sprouts</b></p> <p><b>Lower third:</b></p> <p style="text-align: center;"><b>Sprinkle on chopped parsley for garnish if you prefer</b></p>	<p>And I think, oh yes, we have a beautiful cheesy spinach bake. Look at this. See what I mean about the breadcrumbs making for a nice crisp texture on the top. This is amazing. I have some really wonderful, wonderful uhm.. radish sprouts so I'm gonna garnish the bottom of the plate with the radish sprouts, just give like a sprinkle and this nice kind of peppery flavor.</p>
	<p><b>Chef cuts slice of casserole and places on dish</b></p>	<p>And if you take a look at this, it's almost like quiche. Look at that. Isn't that just gorgeous? I'm just gonna put that right on the plate. This is a low carb way to get lots and lots of beautiful nutrients.</p>
	<p><b>Chef Nischan standing at kitchen counter</b></p> <p><b>Lower third:</b></p> <p style="text-align: center;"><b><a href="http://www.dLife.com/recipebox">www.dLife.com/recipebox</a></b></p>	<p>For this recipe and a lot of other great tips on managing your diabetes, visit the website at <a href="http://dLife.com/recipebox">dLife.com/recipebox</a>. I'm Michel Nischan, thanks for joining me in the dLife kitchen</p>
	<p style="text-align: center;"><b>dLife logo</b></p>	

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	<p><b>Indian women standing in line</b></p> <p><b>Pricking finger with glucose monitor</b></p>	<p><b>Nicole Johnson VO</b></p> <p><b>Up next, the diabetes epidemic inside India.</b></p>
	<p><b>dLife logo</b></p>	
	<p><b>Nicole Johnson in studio</b></p>	<p>Nicole Johnson</p> <p>As the new number of diabetes cases spreads globally, the World Health Organization reports the biggest increases are in developing countries where more and more people are eating western diets. dLife traveled to Chennai, a large city in the South of India, for this report.</p>
	<p><b>dLife logo</b></p>	
	<p><b>Cars on city highway</b></p> <p><b>Different views of buildings and cars in city</b></p> <p><b>Lower third:</b></p> <p><b>There are between 35 and 40 million people with diabetes in India today.</b></p> <p><b>People sitting and walking in waiting room</b></p>	<p>V. Mohan Voice Over</p> <p>All over the world, the problems of diabetes is rising very rapidly. But nowhere is this more marked than in India, which has now the dubious distinction of being called the Diabetic Capital of the World.</p>
	<p><b>Map showing Chennai</b></p> <p><b>Clinic waiting room</b></p> <p><b>Billboard and city street</b></p> <p><b>Lower third:</b></p> <p><b>In 2025, there will be an expected 333 million people with diabetes in the world.</b></p>	<p>Jim Turner Voice Over</p> <p>Chennai is only one example of the many places in India that have seen a dramatic rise in diabetes rates in recent years. This increase is projected to go far beyond the borders of India. In the year 2025, there will be an expected 333 million people with diabetes in the world. What could explain this spiraling global epidemic? Chennai offers us some answers.</p>

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	<p><b>Busy street sidewalk</b></p> <p><b>Sign: Chennai Metropolitan Police</b></p>	
	<p><b>Interview with V. Mohan</b></p> <p><b>Lower third:</b></p> <p style="text-align: center;"><b>V. Mohan, MD, FRCP, PhD</b> <b>Diabetologist</b></p> <p><b>Street vendor selling western foods</b></p>	<p>V. Mohan.</p> <p>I have lived in Chennai almost all my life, and during the course of the last 20, 30 years I am able to visibly see the changes in the lifestyle of the people.</p>
	<p><b>Various of shots of people in Chennai</b></p> <p><b>Cars driving on road</b></p>	<p>Jim Turner Voice Over</p> <p>Economic development has driven many of these lifestyle changes including grater availability of motor vehicles.</p>
	<p><b>Interview with V. Mohan</b></p> <p><b>Scooters driving on road</b></p> <p><b>Yellow auto rickshaws</b></p> <p><b>Back to interview with V. Mohan</b></p>	<p>V. Mohan</p> <p>Today, the cars have become so much cheaper, the motorcycles and the scooters have become so much cheaper, there are auto rickshaws everywhere. People are not walking as they used to earlier.</p>
	<p><b>Video of people standing and eating</b></p> <p><b>Making ice-cream cone</b></p>	<p>Jim Turner Voice Over</p> <p>The more sedentary lifestyle has contributed to weight gain, which is a significant factor in causing Type 2 diabetes.</p>
	<p><b>Sign: Pizza Hut</b></p> <p><b>Signs showing fast food and hop chips</b></p> <p><b>Interview with V. Mohan</b></p> <p><b>Vegetables display</b></p>	<p>V. Mohan</p> <p>Twenty years ago you would not have had the pizza bars or the burger joints and the fast food joints. So eating out has become much more common. Where people used to eat a lot of vegetables and fruits and so on, today people are eating more and more rich foods, oily foods, so it's not just high carbohydrate but also high fat.</p>

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	<p><b>Foods being deep fat fried</b></p> <p><b>Interview with V. Mohan</b></p>	
	<p><b>Indian women working in fields</b></p>	<p>Jim Turner Voice Over</p> <p>To educate people outside the city, Dr. Mohan has a free outreach program, which goes into the villages.</p>
	<p><b>Hanging banner</b></p> <p><b>People in room standing by table with white tablecloth</b></p> <p><b>Interview with V. Mohan</b></p> <p><b>V. Mohan talking with villagers</b></p> <p><b>Interview with V. Mohan</b></p> <p><b>Gloved fingers pricking finger</b></p> <p><b>Women standing in line</b></p> <p><b>Pricking finger with glucose monitor</b></p>	<p>V. Mohan</p> <p>Where our people are, we go there and teach people about diabetes -- signs, symptoms -- tell them that you don't need to get these symptoms to actually have the disease. Fifty percent don't even know that they have it. Then we do opportunistic screening. We take these small meters and on the spot we do blood sugars and we detect literally thousands of people who didn't know that they had diabetes.</p>
	<p><b>Indian people standing around V. Mohan at table</b></p>	<p>Jim Turner Voice Over</p> <p>Diabetes is the most serious health threat of the 21<sup>st</sup> Century. Only by making major investments of resources, can developing countries like India stem the tide.</p>
	<p><b>dLife logo</b></p>	
	<p><b>Nicole Johnson in studio</b></p>	<p>Nicole Johnson</p> <p>We'll be right back.</p>
	<p><b>dLife logo</b></p>	
	<p><b>Nicole Johnson in studio</b></p>	<p>Nicole Johnson</p>

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	<p><b>Lower third:</b></p> <p><b>NICOLE JOHNSON</b>  <b>Diabetes Since 1993</b></p>	<p>Now, a few words from the life of Jim Turner</p>
	<p><b>Jim, in suit, sitting in front of fireplace reading</b></p> <p><b>Lower third:</b></p> <p><b>JIM TURNER</b>  <b>Film &amp; TV Actor, Type 1 Diabetes</b></p> <p><b>Close up of Jim</b></p> <p><b>Music starts</b></p> <p><b>Black and white video: Host standing at host stand, Jim running into restaurant</b></p>	<p>Jim Turner</p> <p>Oh hello. I'm James Turner and our film tonight is the silent movie classic, The Perilous Pitfalls of Restaurant Dining. Our hero, Jim, has diabetes and apparently dining out with this disease is quite a challenge. Who knew? The film is a non-stop drama of the perils of living with his condition. Well, let's watch and see what happens after our hero prematurely takes his shot before dinner.</p>
	<p><b>Jim holding bunch of flowers, pacing up and down</b></p> <p><b>Woman runs into restaurant, Jim kisses her and gives her the flowers</b></p>	<p>Jim Turner Voice Over</p> <p>Apparently in diabetes timing is everything. So Jim needs to eat soon but, of course, his date is late.</p>
	<p><b>Host holds up hands showing 10 fingers, Jim dabs at his forehead with handkerchief</b></p> <p><b>Jim and date sitting at table, waiter walks past, Jim tries to stop him</b></p>	
	<p><b>Jim grabs menus from passing waiter</b></p> <p><b>Wringing sweat from handkerchief</b></p>	<p>Confronted with the tortures of leisurely dining, he gets desperate.</p>
	<p><b>Waiter bending over talking to Jim's date, Jim grabs food from tray and takes a bite</b></p> <p><b>Date looks in horror as Jim eats</b></p>	<p>And eventually our hero takes matters into his own hands.</p>

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	<b>pie</b>	
	<b>Jim sitting by fireplace</b>	<p>Jim Turner</p> <p>Even back then there was an embarrassment about needing to take care of your disease in a public setting. Testing your blood sugar with the world watching has never been easy.</p>
	<p><b>Back to black and white footage: Date watches in horror as Jim puts contraption on table</b></p> <p><b>Jim pricks finger with nail and squeezes blood into contraption, then sucks finger</b></p> <p><b>Date faints into waiters arms</b></p>	<p>Jim Turner Voice Over</p> <p>Jim tests often as one with diabetes should. But what is ordinary for the diabetes sufferer might seem less than romantic to those unused to the rituals of daily testing.</p>
	<p><b>Jim eating plate of spaghetti</b></p> <p><b>Jim pulls waiter over to table to talk</b></p> <p><b>Jim holds up fork to reveal string of spaghetti with packets of sugar attached to it</b></p>	<p>In this scene, our hero tries desperately to find out what exactly is in the mystery sauce on the spaghetti. He's calibrated his insulin carefully but a little hidden flour or possibly something worse could change his insulin needs dramatically. What is that flavor? Our hero realizes the stunning truth.</p>
	<p><b>Card:</b></p> <p style="text-align: center;"><b>Sugar?!</b></p>	
	<b>Close up of Jim in suit</b>	<p>Jim Turner</p> <p>Since the dawn of baking, the parade of bread and rolls and crackers and bread has never been an easy one for people with diabetes.</p>
	<p><b>Back to movie: Waiter brings out basket of bread</b></p> <p><b>Jim tries to remove it from table and fights with date</b></p>	<p>Jim Turner Voice Over</p> <p>This movie has it all, drama, tragedy, mystery, conflict, and lots of laughs. I'd recommend the perilous pitfalls of restaurant dining to anyone interested in diabetes. Well thanks for watching. Next week we'll be looking at the depiction of</p>

TIMECODE	VISUALS	AUDIO
	<p><b>Date throws pie in Jim's face</b></p> <p><b>Back to Jim by fireplace</b></p>	<p>diabetes in the films of Cary Grant and Catherine Hepburn.</p>
	<p><b>dLife logo</b></p>	
	<p><b>Nicole Johnson in studio</b></p> <p><b>Lower third:</b></p> <p><b>Watch dLifeTV on CNBC every Sunday evening.</b></p> <p><b>Nicole Johnson walks off set</b></p>	<p>Nicole Johnson</p> <p>That's all the time we have. We'll be back again next week with another edition of dLife TV to inform, inspire and connect for a healthy diabetes life.</p>
	<p><b>Card:</b></p> <p><b>dLife is produced by LifeMed Media and does not represent the views or opinions of CNBC, Inc.</b></p>	
	<p><b>Card:</b></p> <p><b>Creator</b></p> <p><b>HOWARD STEINBERG</b></p> <p><b>executive producer</b></p> <p><b>GARY COHEN</b></p> <p><b>senior story editor</b></p> <p><b>PAULA FORD-MARTIN</b></p> <p><b>supervising producer</b></p> <p><b>TOM KARLYA</b></p> <p><b>Senior producer</b></p> <p><b>WILLIAM SORENSEN</b></p>	
	<p><b>Left side:</b></p> <p><b>Closing credits</b></p> <p><b>Right Side:</b></p> <p><b>Nicole Johnson talking to camera</b></p>	<p>Nicole Johnson</p> <p>Remember, we're not role models, we're people living with diabetes just like you. What we do and how we manage may work for us but everyone is different and you have to work with your diabetes care team to find out what works best for you. Remember, it's your diabetes life and there's no</p>

TIMECODE	VISUALS	AUDIO
		substitute for getting control of it.
	<b>dLife logo</b>	