Daily Record of Food Intake | Your diet may be the key to better health.

Each day, record all the items you eat and drink. Be sure to include the approximate amount of each item. When you have completed this form, return it to your health care professional for evaluation.



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Day 1 - Date:	LUNOU ==	DINNER Time:
REAKFAST Time:	LUNCH Time:	DINNEIT TIME.
Meat & Dairy:		
egetables & Fruits:		
reads, Cereals, & Grains:		
ats (butter, margarine, oils, etc.):		
andy, Sweets, & Junk Food:		
Vater Intake (fl. oz.):		
Other Drinks:	AND DAY ONADY	NIGHTTIME SNACK Time:
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHT TIME SNACK Time:
Snack:		Quality of Sleep: (good) 1 2 3 4 5 (poor)
Bowel Movements (# and consistency):	Hours of Sleep:	Quanty of Steep. (good) 1 2 3 4 3 (poor)
Day 2 - Date:		DUMED or
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:		
Vegetables & Fruits:		
Breads, Cereals, & Grains:	100.00	
Fats (butter, margarine, oils, etc.):		
Candy, Sweets, & Junk Food:		
Water Intake (fl. oz.):		
Other Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
Snack:		
Bowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor
Day 3 - Date:		
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:		
Vegetables & Fruits:		
Breads, Cereals, & Grains:		
Fats (butter, margarine, oils, etc.):		
Candy, Sweets, & Junk Food:		
Water Intake (fl. oz.):		
Other Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
Snack:		
Bowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (po

Day 4 - Date:		
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:		
Vegetables & Fruits:		
Breads, Cereals, & Grains:		
Fats (butter, margarine, oils, etc.):		
Candy, Sweets, & Junk Food:		
Nater Intake (fl. oz.):		
Other Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
Snack:		
Bowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor)
Day 5 - Date:		
BREAKFAST Time:	LUNCH Time:	DINNER Time:
Meat & Dairy:		
egetables & Fruits:		
reads, Cereals, & Grains:		
ats (butter, margarine, oils, etc.):		
andy, Sweets, & Junk Food:		
Vater Intake (fl. oz.):		
ther Drinks:		
MID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
nack:		
Rowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor)
Day 6 - Date:		
REAKFAST Time:	LUNCH Time:	DINNER Time:
leat & Dairy:		
egetables & Fruits:		
reads, Cereals, & Grains:		
ats (butter, margarine, oils, etc.):		
andy, Sweets, & Junk Food:		
łater Intake (fl. oz.):		
ther Drinks:		
NID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time:
lowel Movements (# and consistency):	Hours of Sleep:	Quality of Sleep: (good) 1 2 3 4 5 (poor)
Day 7 - Date:		
REAKFAST Time:	LUNCH Time:	DINNER Time:
eat & Dairy:		
egetables & Fruits:		
eads, Cereals, & Grains:		
its (butter, margarine, oils, etc.):		
andy, Sweets, & Junk Food:		
ater Intake (fl. oz.):		
ther Drinks:		
	MID-DAY SNACK Time	NIGHTTIME SNACK Time
TID-MORNING SNACK Time:	MID-DAY SNACK Time:	NIGHTTIME SNACK Time: