## MY DAILY FOOD DIARY AND PHYSICAL ACTIVITY RECORD

Name:	Record: (1) all food including portion size; (2) physical activity.
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Date	Breakfast/Time AM	Mid-Morning Snack/Time AM	Lunch/Time PM	Mid-Afternoon Snack/Time PM	Dinner/Time PM	Bedtime Snack/Time PM	Physical Activity Time Spent/ Minutes per day
Goals: 3 meals and 3 snacks every 2-1/2 to 3 hours apart. Count and record the number of carbs at each meal and each snack.  If you have any questions about your meal plan, please call your dietitian @ 513-862-4093.  Do: exercise 30 minutes a day (5-7 times a weel 15 grams of carbohydrate (for example, 1 bright prior to exercise if your blood sugar is about 20 not: begin exercise until your blood sugar is about 20 not: exercise by yourself.  ALWAYS: CHECK WITH YOUR DOCTOR BEFORE EVER ALWAYS: CHECK WITH YOUR DOCTOR BEFORE ALWAYS: CHECK WITH YOUR DOCTO					example, 1 bread or 1 fruit or ugar is between120-240. sugar is above 100 mg/dL.	exchange) if your blo	od sugar is less than 100.