

# Your Food Diary

1. Write down everything you eat and drink for three typical days on your Food Diary sheets. Since weekend days are frequently different from weekdays, you may want to keep records for two weekdays and one weekend day.
2. Record the actual amount eaten, not how much was put on the dish.
3. Specify type of food used. For example:
  - 1 cup milk, skim
  - 1 pat margarine
  - 1 slice bread, white
4. Use measuring cups or spoons to describe the amount of most foods. For example:
  - 1 cup Wheaties
  - ½ cup low-fat milk
  - 1 teaspoon sugar
5. For pieces of food that do not fit into a cup or spoon, write down the size. For example:
  - 1 corn tortilla, 6 inches across
  - 1 piece of cheddar cheese, 3 x 3 x ¼ inches
6. Record approximate ounces of cooked beef, pork, chicken breast or thigh, fish, turkey or game by comparing your meat portion to a deck of cards. Three ounces of meat is about the size of a deck of cards.
7. Describe what is in mixed food. For example:
  - 1 cup stew (¼ cup meat, ¼ cup potato, ¼ cup carrots, ¼ cup gravy)
8. Describe the preparation method used. For example:
  - Chicken breast (fried in Crisco, no flour or batter)
9. Record butter, margarine, jelly, sugar, sauces and type of salad dressings added to food.
10. Include snacks and beverages taken between meals.
11. Include alcoholic beverages. For example:
  - 3 ½ ounces dry, white wine
  - 1 ounce scotch mixed with water
  - 12-ounce can Lite beer
12. If meals are eaten in a restaurant, please note the name of the restaurant.



Name: \_\_\_\_\_

Daytime phone: \_\_\_\_\_

Date of birth: \_\_\_\_\_

List any chronic conditions (i.e., diabetes, hypertension, etc.): \_\_\_\_\_

Do you have a history of an eating disorder? \_\_\_\_\_



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## Food Diary Day 1

<b>Time</b>	<b>Amount</b>	<b>Food/Beverage</b>	<b>Method of Preparation (where applicable)</b>

Name: \_\_\_\_\_

Daytime phone: \_\_\_\_\_

Date of birth: \_\_\_\_\_



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Food Diary  
Day 2

<b>Time</b>	<b>Amount</b>	<b>Food/Beverage</b>	<b>Method of Preparation (where applicable)</b>

Name: \_\_\_\_\_

Daytime phone: \_\_\_\_\_

Date of birth: \_\_\_\_\_



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Food Diary  
Day 3

<b>Time</b>	<b>Amount</b>	<b>Food/Beverage</b>	<b>Method of Preparation (where applicable)</b>