OLMSTED MEDICAL CENTER

Daily Food Log

Please write down everything you eat or drink for two days, including a weekday and weekend. Record amount taken and time of day (don't forget snacks and condiments). Focus your details in the shaded area.

Date:	Time	Foods	Amount			

Grains	Fruit	Vegetable	Dairy	Protein	Fat	Sweets	Non-Calorie Fluids
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6-11 Servings	2-4 Servings	3-5 Servings	2-3 Servings	2-3 Servings	Sparingly	Sparingly	

Exercise:

Comments: