

Appointment Date:

Phone: 634-4882

Date:	Date:	Date:
Breakfast:	Breakfast:	Breakfast:
Snack:	Snack:	Snack:
Lunch:	Lunch:	Lunch:
Snack:	Snack:	Snack:
Supper:	Supper:	Supper:
Snack:	Snack:	Snack:
Activity:	Activity:	Activity:

<sup>\*</sup>To assist the Dieitian with your assessment write down what you eat & drink for meals & snacks for 3 days

<sup>\*</sup>Try to include portion sizes that you are using ie. 1 cup of carrots, 2 scoops of ice cream, 1 Tbsp dressing and any snacks or foods you may pick at during the day.