

7-DAY FOOD JOURNAL

Vitamin / Herbal Supplements: Please write down any vitamin or herbal supplements you take.

Drug Name	Dose	Frequency
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

7-DAY FOOD JOURNAL

Please keep a journal for seven consecutive days, which includes **everything** you **eat and drink**, plus the estimated measurement of each item in each meal. Keep in mind that it is important to include condiments. Please be honest; the dietitian will use this information to better assist you before and after your surgery.

SAMPLE

EXAMPLE 01/01/2008
Date

Food/Beverage Est. Amount

Breakfast: Home Out - where: _____

Scrambled eggs	2 large
Bacon	4 pieces
Wheat Toast	2 pieces
Butter	2 tbsp
Strawberry jelly	4 tbsp
Coffee w/ sugar & French Vanilla creamer	16 oz

Lunch: Home Out - where: _____

Smothered Beef burrito w/ lettuce, tomato, jalapenos	
Sour cream	2 tbsp
Spanish rice	½ cup
Dr. Pepper	16 oz

Dinner: Home Out - where: _____

Oven Fried shrimp	6 pieces
Baked potato	Medium
Butter, sour cream & cheese	2 tbsp each
Peas w/ pearl onions	½ cup
Kool Aid w/ Splenda	16 oz

Snack(s):
100 cal bag of Pop Secret popcorn 1 bag

7-DAY FOOD JOURNAL

DAY 1 _____

Date

Food/Beverage

Est. Amount

Breakfast: Home Out - where: _____

Lunch: Home Out - where: _____

Dinner: Home Out - where: _____

Snack(s):

7-DAY FOOD JOURNAL

DAY 2 _____

Date

Food/Beverage

Est. Amount

Breakfast: Home Out - where: _____

Lunch: Home Out - where: _____

Dinner: Home Out - where: _____

Snack(s):

7-DAY FOOD JOURNAL

DAY 3 _____

Date

Food/Beverage

Est. Amount

Breakfast: Home Out - where: _____

Lunch: Home Out - where: _____

Dinner: Home Out - where: _____

Snack(s):

7-DAY FOOD JOURNAL

DAY 4 _____

Date

Food/Beverage

Est. Amount

Breakfast: Home Out - where: _____

Lunch: Home Out - where: _____

Dinner: Home Out - where: _____

Snack(s):

7-DAY FOOD JOURNAL

DAY 5 _____

Date

Food/Beverage

Est. Amount

Breakfast: Home Out - where: _____

Lunch: Home Out - where: _____

Dinner: Home Out - where: _____

Snack(s):

7-DAY FOOD JOURNAL

DAY 6 _____

Date

Food/Beverage

Est. Amount

Breakfast: Home Out - where: _____

Lunch: Home Out - where: _____

Dinner: Home Out - where: _____

Snack(s):

7-DAY FOOD JOURNAL

DAY 7 _____

Date

Food/Beverage

Est. Amount

Breakfast: Home Out - where: _____

Lunch: Home Out - where: _____

Dinner: Home Out - where: _____

Snack(s):
