

Nutrition Journal

Time	Food/Beverage	Location	Mood/Reaction
	Describe food, including method of preparation and amount consumed.	Where are you when you're eating (living room, kitchen, car, etc)?	How do you feel before, during and after eating? Pay attention to mental and physical reactions.
Breakfast			
Snack			
Lunch			
Snack			
Dinner			
Snack			

My Day in Review: _____
