

# WEEKLY FOOD DIARY & BLOOD SUGAR RECORD

Name: \_\_\_\_\_ Date from: \_\_\_\_\_ to \_\_\_\_\_

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
BREAKFAST							
BGL (2 hrs after BF)							
SNACK							
LUNCH							
BGL (2 hrs after L)							
SNACK							
DINNER							
BGL (2 hrs after D)							
OTHER/ FLUIDS							
ACTIVITY							