



# Live Well!

Your Daily  
**FOOD & FITNESS**  
T·R·A·C·K·E·R

MONDAY • TUESDAY • WEDNESDAY • THURSDAY • FRIDAY • SATURDAY • SUNDAY

# Personal Information



NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

{ IMPORTANT CONTACTS }

## IN CASE OF EMERGENCY

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

## HEALTH CARE PROVIDERS

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

## PHARMACY


NAME \_\_\_\_\_ PHONE \_\_\_\_\_

## HEALTH INSURANCE COMPANY

NAME \_\_\_\_\_

PHONE \_\_\_\_\_ POLICY NUMBER \_\_\_\_\_

**The Food & Fitness Tracker** will become your best tool for keeping good health on your agenda. Carry it wherever you go, and in just a few minutes you can record your daily health actions, learn from your ups and downs, see your progress, and gain motivation to stick with your goals. After recording your first day, you'll discover a new level of self-awareness and commitment - to you.

 **TIP:** For best results use a ball-point pen.

## How To Track Your Day

In your hands is a 6-week journal, a simple means of recording several actions that lead to healthy weight loss. People who track their habits in a daily journal have great success at reaching their personal goals, especially weight, exercise and eating well.

Use the journal pages to record your meals, moods, exercise and other health actions. There's a sample page showing you how to:

### Record your Weight \_\_\_\_\_

Record what and how much you eat and drink, and the calories for each item. The Calorie Guide in the back of the Tracker can help.

### Record your Physical Activity

Use the blanks on each journal page to note all extra chores and activities such as walks, bike rides, stretching and weight lifting; include the time for each.

## Count Your Fruits, Veggies and Water

Minimum daily needs are 2 cups of fruit and 2 1/2 cups of vegetables, depending on your total calorie intake. Water needs vary: Target 6-8 cups daily.

 **Vegetables (# cups)**

 **Fruit (# cups)**

 **Water**

## Mood and Eating **Mood**

Record your general mood or stress level to discover any patterns in your eating and emotions.

## Log Your Sleep of Sleep \_\_\_\_\_

A routine sleep time is essential to good health and doing your best, while frequent lack of sleep may lead to weight gain, fatigue and stress.

# Get Ready

# Calories Burned in 10 Minutes of Activity

The calories you burn in physical activity are affected by the activity and your weight – it takes more energy (calories) to move more weight.

## For best results:

Exercise to a point that slightly raises your heart rate and breathing and still allows you to talk.



ACTIVITY CALORIES/ MINUTES	100- 130 LBS	131- 160 LBS	161- 190 LBS	191- 220 LBS	221- 250 LBS	251- 280 LBS	281- 300 LBS
Bicycling	60-70	70-90	90-110	110-130	130-150	150-160	160-180
Bicycling (stationary)	50-60	60-80	80-100	100-110	110-130	130-140	140-150
Bowling	20	20-30	30-40	40	40-50	50-60	60
Dancing	30-40	40-50	50-60	60-70	70-80	80-90	90-100
Gardening	30-40	40-60	60-70	70-80	80-90	90-100	100-110
Golf	30-40	40-50	50-60	60-70	70-80	80-90	90-100
Hiking	30	40-60	60-70	70-80	80-90	90-100	100-110
House cleaning	20-30	30-40	40-50	50	50-60	60-70	70
Running (8.5 min/mile)	80-110	110-130	130-160	160-190	190-210	210-240	240-250
Lawn mowing (power)	30-40	40-50	50-60	60-70	70-80	80-90	90-100
Racquetball	50-60	60-80	80-100	100-110	110-130	130-140	140-150
Resistance training, circuit	60-70	70-90	90-110	110-130	130-150	150-160	160-180
Rollerblading	60-70	70-90	90-110	110-130	130-150	150-160	160-180
Rowing	50-60	60-80	80-100	100-110	110-130	130-140	140-150
Skiing, cross-country	60-70	70-90	90-110	110-130	130-150	150-160	160-180
Skiing, downhill	40-50	50-70	70-80	80-90	90-110	110-120	120-130
Stairclimbing	40-50	50-70	70-80	80-90	90-110	110-120	120-130
Swimming, easy crawl	60-70	70-90	90-110	110-130	130-150	150-160	160-180
Tennis, singles	60-70	70-90	90-110	110-130	130-150	150-160	160-180
Walking 3.5 mph	30	30-40	40-50	50-60	60-70	70-80	80-90
Walking 4.5 mph	30-40	40-50	50-60	60-70	70-80	80-90	90-100
Weightlifting	20	20-30	30-40	40	40-50	50-60	60
Wheelchair, fwd, 15 W	30-50	50-60	60-70	70-80	80-100	100-110	110
Yoga	30	30-40	40-50	50-60	60-70	70-80	80-90

## Calorie Activity Tool:

You can easily calculate many activities and exercises using your exact weight at Shape Up America! ([www.shapeup.org/interactive/phys1.php](http://www.shapeup.org/interactive/phys1.php)).

**Note:** The level of exertion for most activities listed is moderate unless otherwise noted. Please check with your health care provider before significantly increasing your physical activity level.

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# Best Food Plan



Trying to lose weight, eat better, or do both? Give yourself time to learn and enjoy new habits for eating better – at work, when dining out, or on the go. Make lifetime wellness your ultimate motivation.

Small changes over the months can yield big results. Here are some self-starters.

## No-Nonsense Ways to Cut Calories


- ✓ Proper portions!
- ✓ Fewer meals out.
- ✓ Fewer fatty meats.
- ✓ Less alcohol and fewer sweets.
- ✓ Nutritious snacks for energy.
- ✓ Low-fat or nonfat dairy foods.
- ✓ Eating slowly to savor the flavors.

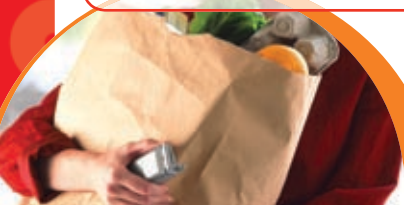
## Find Your Personal Calorie Needs At MyPyramid.gov:

You can quickly calculate what and how much you need to eat to help you lose extra weight – based on your gender, current weight, age and activity level.

### SAMPLE CALORIE NEEDS FOR AGES 30-50

Daily Activity	Average Daily Calorie Needs	
	MEN	WOMEN
< 30 minutes	2300	1800
30-60 minutes	2500	2100
> 60 minutes	2900	2300

To lose weight:   
Apply the 500 Rule



# My Basic Fitness Goals

If you're like many people, weight loss is a primary health goal – one that can help you live better and longer.

**How do you measure up?** One sign that you may be overweight is your **waist circumference**. To measure it:

- 1 Run a tape measure around your body just above your navel.
- 2 A measurement of more than 35 inches (for women) or 40 inches (for men) may increase your health risks.

Losing just **10%** of your current weight may significantly improve your health – provided you keep it off.

Current Weight:  Desirable Weight:

*Tip:* If losing 20 or 30 pounds seems hard, focus on losing just 1-2 pounds a week – that's 10 pounds in 5-10 weeks.

## 500 rule: Lose 1 pound a week by cutting 500 calories a day this way:

- ✓ Burn 250 calories in extra activity, such as a 30-minute bike ride or cleaning chore.
- ✓ Consume 250 fewer calories, such as smaller portions and one less beverage or snack.

## Turn up the intensity for cardio fitness and weight loss:

**Moderate activity** produces a little sweat – target 150 minutes each week.

**Vigorous activity** causes rapid breathing – target 75 minutes each week.

To lose weight, target 60-90 minutes of extra activity most days of the week. Get your provider's okay before raising your exercise target.

The best food & fitness plan is the one you can live with!

# Healthy Plate Portions



1/2 Plate = a colorful mix of vegetables.

1/4 Plate = low-fat protein-rich foods (broiled, grilled, roasted).

1/4 Plate = whole-grain starches (e.g., brown rice, or whole-wheat breads and pasta).

3 CUPS

## Food Group Basic DAILY Needs

(Based on 2,000 Calories/Day)

### Grains



**6 ounces**

1 ounce = about 1/2 cup of cooked rice, pasta or barley; one slice of bread; or roughly one cup of whole-grain cereal (uncooked); make at least half your grains whole grains.

### Fruits



**At least 2 cups**

Whole fruit is best, not juice.

### Vegetables



**At least 2 1/2 cups**

Subgroups: dark green, orange, starchy, dry beans and peas, other veggies.

### Dairy



**3 cups of dairy**

Include skim or low-fat milk, yogurt or other milk equivalent.

### Meat & Beans



**5-6 ounces**

1 ounce = 1 ounce of poultry, fish or lean meat; 1 egg; 1 tbsp peanut butter; 1/4 cup dried beans.

### Oils & Fats



**5 teaspoons**

Such as cooking oils, dressings and nuts.

# Serving Size & Visual Guide



= 1 cup



= 4 oz.



= 1 oz.



= 1/2 cup



= 3 oz.



= 1 oz.



**Grains** 1 cup dry cereal (1 oz.) = baseball

1/2 cup cooked pasta (1 oz.) = small computer mouse

1 slice bread (1 oz.) = CD



**Fruits** 1 small apple (1 cup) = baseball

1/2 cup juice (4 oz.) = 40-w light bulb

1/2 cup sliced fruit = small computer mouse



**Vegetables** 1 cup raw veggies = baseball

1/2 cup = small computer mouse

1 cup salad greens = baseball



**Dairy** 1 cup milk or yogurt = baseball

1 oz. cheese = 4 dice

1/2 cup frozen yogurt = small computer mouse



**Meat & Beans** 1 oz. peanut butter = 4 dice

1/2 cup beans (2 oz.) = small computer mouse

3 oz poultry, fish or meat = deck of cards



Learn your personal daily calorie needs at [MyPyramid.gov](http://MyPyramid.gov) based on your age, gender, weight, and activity level.

With a little practice, measuring healthy portions will be easy.

Date: \_\_\_\_\_

of Sleep  $\frac{1}{2}$  hrs  $\frac{1}{2}$ 

Weight 145

Mood     

## Food or Drink Item

Amount of item Food Group Calories or other

BREAKFAST: Time of Day 8:00 am

Boiled egg	1	M	78
Whole-wheat toast, slice	1	G	75
Cantaloupe	1 c	F	54
Skim milk	1 c	D	83
Tea	1 c		00

LUNCH: Time of Day 11:30 am

Chicken breast	3 oz	M	165
Vinaigrette dressing	2 tsp	fat	52
Salad: lettuce, tomato			
bell pepper, cucumber	2 1/2 c	V	33
Whole-wheat roll	1 oz	G	74

DINNER: Time of Day 7:00 pm

Olive oil	2 tsp	fat	80
Salmon, baked	3 oz	M	184
Brown rice	1/2 c	G	108
Asparagus	1 c	V	43
Mango	1/2 c	F	107

SNACK: Time of Day 3:30 pm

Tomato juice	1/2 c	V	86
Nonfat fruit yogurt	1 c	D	119
Almonds	10	fat	69
<b>Total</b>			<b>1410</b>

 Water 
 Vegetables 
 Fruit 


Physical Activity

Action: Minutes		Walk to bus	10min
	20min	& back home:	10min
Exercycle			
Lunchtime walk	30min		
Sweep garage	30min		
<b>Total Time</b>			

## Food or Drink Item

Amount of item Food Group Calories or other

BREAKFAST: Time of Day \_\_\_\_\_


LUNCH: Time of Day \_\_\_\_\_


DINNER: Time of Day \_\_\_\_\_


SNACK: Time of Day \_\_\_\_\_

<b>Total</b>			

 Water 
 Vegetables 
 Fruit 


Physical Activity

Action: Minutes			
<b>Total Time</b>			

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood     

Food or Drink Item

Amount of item

Food Group

Calories or other

BREAKFAST: Time of Day \_\_\_\_\_

Three yellow horizontal rows for breakfast entries.

LUNCH: Time of Day \_\_\_\_\_

Three light blue horizontal rows for lunch entries.

DINNER: Time of Day \_\_\_\_\_

Three light orange horizontal rows for dinner entries.

SNACK: Time of Day \_\_\_\_\_

Three light green horizontal rows for snack entries, ending with a 'Total' label.

Water  Vegetables  Fruit

Physical Activity \_\_\_\_\_

Table with 3 columns and 4 rows for recording physical activity.

Total Time

Food or Drink Item

Amount of item

Food Group

Calories or other

BREAKFAST: Time of Day \_\_\_\_\_

Three yellow horizontal rows for breakfast entries.

LUNCH: Time of Day \_\_\_\_\_

Three light blue horizontal rows for lunch entries.

DINNER: Time of Day \_\_\_\_\_

Three light orange horizontal rows for dinner entries.

SNACK: Time of Day \_\_\_\_\_

Three light green horizontal rows for snack entries, ending with a 'Total' label.

Water  Vegetables  Fruit

Physical Activity \_\_\_\_\_

Table with 3 columns and 4 rows for recording physical activity.

Total Time

Date: \_\_\_\_\_

Weight \_\_\_\_\_ of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

Date: \_\_\_\_\_

Weight \_\_\_\_\_ of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

## Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

## Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood



Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood



### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		

 Water   Vegetables   Fruit

 Physical Activity \_\_\_\_\_

Total Time		

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		

 Water   Vegetables   Fruit

 Physical Activity \_\_\_\_\_

Total Time		

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood



Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

### Food or Drink Item

Amount of item    Food Group    Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

		<b>Total</b>

Water     Vegetables     Fruit

Physical Activity \_\_\_\_\_

Action: Minutes		
		<b>Total Time</b>

### Food or Drink Item

Amount of item    Food Group    Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

		<b>Total</b>

Water     Vegetables     Fruit

Physical Activity \_\_\_\_\_

Action: Minutes		
		<b>Total Time</b>

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		

Water 
 Vegetables 
 Fruit

Physical Activity \_\_\_\_\_

Action: Minutes			
Total Time			

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		

Water 
 Vegetables 
 Fruit

Physical Activity \_\_\_\_\_

Action: Minutes			
Total Time			

Date: \_\_\_\_\_

of Sleep

Weight \_\_\_\_\_



Mood

Date: \_\_\_\_\_

of Sleep

Weight \_\_\_\_\_



Mood

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

Date: \_\_\_\_\_

Weight \_\_\_\_\_  
of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_  
☺ ☹ ☺ ☹ ☺ ☹

### Food or Drink Item

Amount of item | Food Group | Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

		<b>Total</b>

Water  Vegetables  Fruit

Physical Activity \_\_\_\_\_

Action: Minutes		
		<b>Total Time</b>

### Food or Drink Item

Amount of item | Food Group | Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

		<b>Total</b>

Water  Vegetables  Fruit

Physical Activity \_\_\_\_\_

Action: Minutes		
		<b>Total Time</b>

Date: \_\_\_\_\_

Weight \_\_\_\_\_  
of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_  
☺ ☹ ☺ ☹ ☺ ☹

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_  


Weight \_\_\_\_\_



Mood

## Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time		

## Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time		

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_  


Weight \_\_\_\_\_



Mood

## Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total

 Water   Vegetables   Fruit

 Physical Activity \_\_\_\_\_

Action: Minutes

Total Time

## Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total

 Water   Vegetables   Fruit

 Physical Activity \_\_\_\_\_

Action: Minutes

Total Time

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_



Mood

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_



Mood

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

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Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_



Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood



### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time		

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time		

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood



Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_



Mood

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_



Mood



## Food or Drink Item

Amount of item

Food Group

Calories or other

BREAKFAST: Time of Day \_\_\_\_\_


LUNCH: Time of Day \_\_\_\_\_


DINNER: Time of Day \_\_\_\_\_


SNACK: Time of Day \_\_\_\_\_

		Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

		Total Time

## Food or Drink Item

Amount of item

Food Group

Calories or other

BREAKFAST: Time of Day \_\_\_\_\_


LUNCH: Time of Day \_\_\_\_\_


DINNER: Time of Day \_\_\_\_\_


SNACK: Time of Day \_\_\_\_\_

		Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

		Total Time

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_



Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		



Water



Vegetables



Fruit



Physical Activity \_\_\_\_\_

Action: Minutes

Total Time		

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

Total		



Water



Vegetables



Fruit



Physical Activity \_\_\_\_\_

Action: Minutes

Total Time		

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

## Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

## Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes

Total Time

Date: \_\_\_\_\_

of Sleep

Weight \_\_\_\_\_

Mood

Date: \_\_\_\_\_

of Sleep

Weight \_\_\_\_\_

Mood

SAMPLE

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

### Food or Drink Item

Amount of item | Food Group | Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total

 Water   Vegetables   Fruit

 Physical Activity \_\_\_\_\_

Action: Minutes		

Total Time

### Food or Drink Item

Amount of item | Food Group | Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total

 Water   Vegetables   Fruit

 Physical Activity \_\_\_\_\_

Action: Minutes		

Total Time

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Mood \_\_\_\_\_

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_  


Weight \_\_\_\_\_

Mood \_\_\_\_\_  
  
  
  
  


### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

		<b>Total</b>



Water



Vegetables



Fruit



Physical Activity \_\_\_\_\_

Action: Minutes

		<b>Total Time</b>

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_


**LUNCH:** Time of Day \_\_\_\_\_


**DINNER:** Time of Day \_\_\_\_\_


**SNACK:** Time of Day \_\_\_\_\_

		<b>Total</b>



Water



Vegetables



Fruit



Physical Activity \_\_\_\_\_

Action: Minutes

		<b>Total Time</b>

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_  


Weight \_\_\_\_\_

Mood \_\_\_\_\_  
  
  
  
  






### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes



Mood

Total Time

### Food or Drink Item

Amount of item

Food Group

Calories or other

**BREAKFAST:** Time of Day \_\_\_\_\_

**LUNCH:** Time of Day \_\_\_\_\_

**DINNER:** Time of Day \_\_\_\_\_

**SNACK:** Time of Day \_\_\_\_\_

Total



Water



Vegetables



Fruit



Physical Activity

Action: Minutes



Mood

Total Time

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

Date: \_\_\_\_\_

of Sleep \_\_\_\_\_

Weight \_\_\_\_\_

SAMPLE



Food Group & Item Description	Common Measure	Calories
<b>BEVERAGES</b>		
Apple juice, canned/bottled, unsweetened	1 cup/8 oz	114
Beer, light	12 oz	103
Beer, regular	12 oz	153
Carbonated cola, sugar-free, no caffeine	16 oz	5
Carbonated ginger ale	12 oz	124
Carbonated orange drink	12 oz	179
Chocolate-flavored mix, with nonfat milk	1 serving	160
Coffee or Tea, brewed from grounds	1 cup	0
Cranberry juice, unsweetened	1 cup	116
Distilled alcohol (e.g., gin, vodka, whiskey)	1 jigger (1.5 oz)	97
Grape juice, canned/bottled, unsweetened	1 cup	152
Lemonade, from concentrate	1 cup	99
Orange juice, canned, unsweetened	1 cup	117
Orange juice, from concentrate, unsweetened	1 cup	110
Pineapple juice, canned, unsweetened	1 cup	133
Prune juice, canned/bottled	1 cup	182
Tea, instant powder, sugar-sweetened	1 tbsp	89
Tomato juice, no added salt	1 cup	172
Wine, assorted red or white	5 oz	125

Food Group & Item Description	Common Measure	Calories
<b>CONDIMENTS &amp; DRESSINGS</b>		
Caesar dressing, low-calorie	1 tbsp	17
Dijon-style mustard	1 tsp	2
Horseradish, prepared	1 tsp	10
Italian dressing, fat-free	1 tbsp	7
Italian dressing, low-fat	1 tbsp	28
Ketchup	1 tbsp	15
Mustard, prepared, yellow	1 tsp, or 1 packet	3
Ranch dressing, reduced fat	1 tbsp	29
Ranch dressing, regular	1 tbsp	73
Salsa, ready-to-serve	1 tbsp	4
Spray-style dressing, assorted flavors	about 10 sprays	13
Thousand Island dressing, fat-free	1 tbsp	21
Vinaigrette-style dressing, vinegar and oil	1 tbsp	72

Food Group & Item Description	Common Measure	Calories
<b>DAIRY &amp; CHEESE PRODUCTS</b>		
Milk, whole, 3.25% milkfat	1 cup/8 oz	146
Milk, 2% milkfat	1 cup	122
Milk, 1% milkfat	1 cup	102
Milk, nonfat	1 cup	83
Milk, dry, nonfat, instant	1/3 cup	80
Milk, chocolate, reduced-fat	1 cup	195
Buttermilk, cultured, low-fat	1 cup	98
Cream, fluid, half and half	1 tbsp	20
Cream, fluid, light whipping	1 tbsp	44
Sour cream, reduced fat	1 tbsp	20
Yogurt, fruit, low-fat, with low-cal sweetener	1 cup	238
Yogurt, fruit variety, nonfat	1 cup	119

Food Group & Item Description	Common Measure	Calories
Yogurt, plain, nonfat	8 oz	127
Cheese, American, processed, nonfat	1 slice	31
Cheese, cheddar or Colby, low-fat	1 oz	114
Cheese, gouda	1 oz	101
Cheese, mozzarella, part skim milk	1 oz	72
Cheese, Parmesan, dry grated, reduced-fat	1 tbsp	13
Cottage cheese, 1% milkfat	½ cup	81
Cottage cheese, 2% milkfat	½ cup	97
Cream cheese	1 tbsp	43
Cream cheese, fat-free	1 tbsp	16

Food Group & Item Description	Common Measure	Calories
<b>EGG PRODUCTS</b>		
Egg, white, raw	1 large	16
Egg, whole, raw	1 extra large	80
Egg, whole, hard-boiled/poached	1 large	78
Egg substitute, liquid	1 cup	211

Food Group & Item Description	Common Measure	Calories
<b>FATS &amp; OILS</b>		
Butter	1 tbsp	100
Butter, light, stick	1 tbsp	50
Cooking oil (e.g., olive, corn, canola, sesame)	1 tbsp	119
Mayonnaise, light	1 tbsp	49
Margarine, hard, soybean	1 tbsp	102
Margarine spread, light, canola (no trans fat)	1 tbsp	50

Food Group & Item Description	Common Measure	Calories
<b>FRUITS</b>		
Apple	1 medium	72
Applesauce, canned/unsweetened	1 cup	102
Apricot	1 medium	17
Asian pear	1 average	51
Avocado	1 oz	34
Banana, sliced	1 cup	134
Blackberries	1 cup	62
Blueberries	1 cup	84
Cantaloupe chunks	1 cup	54
Cherries, sour	1 cup	52
Cranberries, whole	1 cup	46
Fig	1 medium	37
Fruit cocktail, canned, water pack	1 cup	76
Grapefruit	½ large	53
Grapes, red or green, seedless	10	34
Guava	1 average	37
Honeydew melon chunks	1 cup	61
Kiwi	1 average	56
Lemon	1 average	17
Lime	1 average	20
Mandarin orange	1 small	40
Mango	1 average	135
Nectarine	1 small	57

Food Group & Item Description	Common Measure	Calories
Orange	1 average	65
Papaya chunks	1 cup	55
Peach	1 small	51
Pear	1 small	86
Pineapple chunks	1 cup	82
Plum	1 average	30
Plum, dried (prunes)	1 average	24
Raisins, seedless	½ cup, not packed	217
Raspberries	1 cup	64
Strawberries	1 cup, halves	49
Watermelon chunks	1 cup	46

### GRAIN PRODUCTS

Bagels, plain, enriched	1 (3" dia)	148
Biscuits, plain or buttermilk, refrigerated dough, lower fat, baked	1 (2 ¼" dia)	63
Bread, French or sourdough	1 average slice	92
Bread, whole-grain	1 average slice	75
Bread, pita, whole-wheat or white	1 (4" dia)	74
Bread, whole-wheat, commercial	1 average slice	69
Buns, hamburger or hotdog, plain	1	120
English muffins, plain, enriched	1	129
Crackers, saltine	4	51
Crackers, Melba toast, plain	4	78
Crackers, whole-wheat	4	71
Crackers, sesame rye, whole-grain	2	60
Crackers, table water	5	70
Rice, whole, brown, long-grain, cooked	1 cup	216
Rice, white, long-grain, cooked	1 cup	206
Wild rice, cooked	1 cup	166
Pasta, fresh/refrigerated, plain, cooked	2 oz	76
Pasta, assorted, enriched, cooked	1 cup	221
Pasta, whole-wheat, assorted, cooked	1 cup	174
Noodles, egg, enriched, cooked	1 cup	221
Spaghetti, enriched, cooked	1 cup	221
Spaghetti, whole-wheat, cooked	1 cup	174
Barley, pearled, cooked	1 cup	193
Buckwheat groats, roasted, cooked	1 cup	155
Bulgur (cracked wheat), cooked	1 cup	151
Couscous, cooked	1 cup	176
Quinoa, cooked	1 cup	222
Cereal, oat bran, cooked	1 cup	88
Cereal, whole-grain oats, cooked	6 oz	115
Cereal, cream of wheat, cooked	1 cup	129
Cereal, raisin bran	1 cup	196
Cereal, shredded wheat and bran	1 cup	157

### LEGUME PRODUCTS

Beans, baked, canned, plain or vegetarian	1 cup	239
Beans, black, cooked	1 cup	227
Beans, great northern, canned	1 cup	299

Food Group & Item Description	Common Measure	Calories
Beans, kidney, cooked	1 cup	219
Beans, navy, cooked	1 cup	255
Beans, pinto, cooked	1 cup	245
Chickpea/garbanzo beans, canned	1 cup	286
Lentils, cooked	1 cup	230
Peas, split, cooked	1 tbsps	27
Refried beans, canned, no added fat	1 cup	183

### LUNCHEON MEATS

Bologna, beef, low-fat	1 slice	57
Chicken breast, oven-roasted	2 slices (1 srv)	33
Ham, extra lean	2 slices	61
Ham, regular (approx 11% fat)	2 slices	62
Pastrami, beef, 98% fat-free	6 slices (1 srv)	54
Pastrami, turkey	2 slices	76
Turkey breast meat	1 slice (8 per 6-oz pkg)	22
Turkey, breast, rotisserie, deli cut	1.7 oz (1 srv)	54

### MEATS (All cuts cooked and fat-trimmed to 0-1/8" unless noted.)

Bacon	3 med slices	103
Beef, chuck, blade roast (all grades)	3 oz	215
Beef, cured, corned beef/brisket	3 oz	213
Beef, flank, choice, raw	3 oz	126
Beef, ground, 5% fat	3 oz	145
Beef, ground, 30% fat	3 oz	230
Beef, jerky, chopped, formed	1 oz	116
Beef, round, tip round, short loin, top loin, top sirloin, t-bone steak (all grades)	3 oz	161
Beef, skirt steak (all grades)	3 oz	198
Beef, tenderloin, choice	3 oz	174
Canadian-style bacon	2 oz (2 slices)	85
Pork, cured ham, boneless (approx 11% fat)	3 oz	151
Pork, loin, roasted	3 oz	178
Pork, loin, sirloin (chops), bone-in	3 oz	181
Pork, loin, tenderloin	3 oz	122
Veal, loin	3 oz	149

### NUTS & SEEDS (All roasted)

Note: Calorie count varies little between regular and dry roasting.

Almonds	1 oz	163
Cashew nuts, dry roasted	1 tbsps	163
Hazelnuts, dry roasted	1 oz	183
Macadamia nuts, dry roasted	1 oz	201
Mixed nuts, dry roasted, with peanuts	1 oz	166
Peanut butter, smooth style	1 tbsps	94
Peanuts, dry roasted	1 oz	165
Pecans, dry roasted	1 oz	201
Pistachio nuts, dry roasted	1 oz	160
Pumpkin seeds, roasted	1 oz	146
Sunflower seeds	1 oz	173
Walnuts	14 halves	185

Food Group & Item Description	Common Measure	Calories
<b>POULTRY</b> (All cooked.)		
Chicken, dark meat, skinless	3 oz	201
Chicken, broilers/fryers, skinless breast	½ med breast	142
Cornish game hen	½ bird	147
Duck, young, domesticated, skinless breast	1 cup	244
Turkey, breast, roasted	3 oz	132
Turkey, dark meat, roasted	3 oz	157
Turkey, ground	4 oz	150
Turkey, ground breast	4 oz	120

Food Group & Item Description	Common Measure	Calories
<b>SEAFOOD</b> (All cooked.)		
Atlantic cod	3 oz	89
Clams, canned, drained	3 oz	126
Crab, Alaska King	3 oz	82
Crab, blue, canned	1 cup	134
Flatfish (flounder, grouper, haddock, sole)	3 oz	99
Halibut, Atlantic/Pacific	3 oz	119
Lobster, northern	3 oz	83
Mackerel, Atlantic	3 oz	223
Oyster, eastern, farmed	6 med	47
Rainbow trout, wild	3 oz	128
Salmon, Chinook, smoked	3 oz	100
Salmon, pink, canned, bone and liquid	3 oz	118
Salmon, sockeye, cooked	3 oz	184
Shrimp, mixed species	3 oz	84
Surimi	3 oz	84
Tilapia	3 oz	71
Tuna, light, canned in water, drained	1 cup	179

Food Group & Item Description	Common Measure	Calories
<b>SOY-BASED PRODUCTS</b>		
Miso paste	¼ cup	157
Tempeh starter	¼ cup	80
Soy creamer	1 tbsp	15
Soy yogurt, plain, nonfat	1 cup	200
Soy milk, chocolate	1 cup	153
Soy milk, light, chocolate and other flavors	1 cup	114
Soy milk, light, original and vanilla	1 cup	73
Soybeans, dry roasted	¼ cup	194
Tofu, firm	½ cup	88
Tofu, raw, regular	½ cup	94
Tofu, soft, cubes	1 cup	151

Food Group & Item Description	Common Measure	Calories
<b>SNACKS</b>		
Popcorn, air-popped, plain	1 cup	31
Pretzels, hard, whole-wheat	1 oz	103
Corn tortilla chips, home-baked	6 triangles	52

Food Group & Item Description	Common Measure	Calories
<b>SWEETS</b>		
Brown sugar	1 tbsp, packed	52
Granulated sugar	1 tsp	15
Honey	1 tbsp	64

Food Group & Item Description	Common Measure	Calories
Jams and preserves	1 tbsp	58
Jellies	1 tbsp	55
Maple syrup	1 tbsp	52
Molasses	1 tbsp	58

Food Group & Item Description	Common Measure	Calories
<b>VEGETABLES</b>		
Alfalfa sprouts	1 cup	8
Artichokes, cooked	1 medium	64
Asparagus, cooked	4 spears (½" base)	13
Bamboo shoots, canned, drained solids	1 cup	25
Beans, snap, green	1 cup	34
Beets	1 cup	58
Bell peppers, sweet, chopped	1 cup	30
Broccoli, chopped	1 cup	31
Brussels sprouts, cooked	½ cup	28
Cabbage, shredded	1 cup	18
Carrots, chopped	1 cup	52
Cauliflower	1 cup	25
Celery, chopped	1 cup	16
Chinese cabbage, cooked	1 cup	20
Corn, whole kernel, canned, drained solids	1 cup	133
Corn, kernels on cob, frozen, cooked	1 ear	59
Cucumber, peeled, sliced	1 cup	14
Edamame (soybeans), frozen, prepared	1 cup	189
Eggplant, cubes	1 cup	20
Hearts of palm, canned	1 piece	9
Jicama, sliced	1 cup	46
Kale, chopped	1 cup	34
Lettuce, iceberg types, shredded	1 cup	10
Mushrooms, whole white	1 cup	21
Mustard greens, chopped, cooked	1 cup	29
Okra	1 cup	31
Onions, chopped	1 cup	64
Peas, green	1 cup	134
Potatoes, white or red, flesh and skin, raw	1 med	147
Pumpkin, canned	1 cup	83
Radishes, sliced	1 cup	19
Spinach, cooked	1 cup	41
Squash, summer, cooked	1 cup	36
Squash, winter, acorn, cooked	1 cup	115
Squash, winter, butternut	1 cup	62
Squash, winter, spaghetti, cooked	1 cup	42
Sweet potato, cooked	1 med	131
Tomatoes, red, ripe, cherry	1 cup	27
Tomatoes, red, ripe, chopped	1 cup	38
Tomatoes, canned, whole	1 cup	50
Turnip chunks	1 cup	37
Yam, boiled, no skin	1 med	119

For more options: Search the USDA nutrient database at <http://www.nal.usda.gov/fnic/foodcomp/search/>.



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