

DAILY WELLNESS JOURNAL

VISUAL CUES FOR PORTION VISUALS:

- Thumb tip or small marble → 1 tsp (to measure: oils)
- Thumb tip to first knuckle or large marble → 1 TB (to measure: peanut butter)
- Thumb or 2 large marbles → 2 TB solid food (to measure: nuts) or 1 ounce liquid (to measure: salad dressing, sauces, etc.)
- Golf ball or cupped handful → ¼ cup (to measure: beans, rice, etc.)
- Hockey puck or palm → 3 ounces (to measure: cooked meat, poultry, or fish)
- Tennis ball → ½ C (to measure: fruit)
- Your fist, clenched, or a baseball → 1 C (to measure: vegetables)

MEALS: fill this out with descriptions, visuals, any portions you know, restaurant names/meal title, brands, feelings, time of day, etc.

BREAKFAST

Time eaten

- Protein
- Fat (sauce, dressings, oil, nuts/seeds, avocado, et al)
- Dairy
- Grains/Starches
- Vegetables
- Misc.

How did you feel before/after your meal? (common adjectives: ravenous, not wanting to eat, indifferent/full, overly full, content, stomach bloat, gas, et al.)

LUNCH

Time eaten

- Protein
- Fat (sauce, dressings, oil, nuts/seeds, avocado, et al)
- Dairy
- Grains/Starches
- Vegetables
- Misc.

How did you feel before/after your meal?

DINNER

Time eaten

- Protein
- Fat (sauce, dressings, oil, nuts/seeds, avocado, et al)
- Dairy
- Grains/Starches
- Vegetables
- Misc.

How did you feel before/after your meal?

WATER (in fluid ounces- each X represents 20 oz – you should be drinking half of your body weight per day, in between meals, starting right when you wake up. To limit bathroom breaks: take smaller sips and stick with 10 oz. per 30 minutes.)

X X X X X X X X X X

Any liquids other than water:

SLEEP (how many hours, rate the quality 1-10, 1 being the least restful)

FITNESS (list your workouts: type, duration, etc.)