

# Food Journal

Date or Day of week:		
Food and Drink (include amount)		Carbohydrates
<b>Breakfast</b>		
Time:		
<b>Snack:</b>		
<b>Lunch</b>		
Time:		
<b>Snack:</b>		
<b>Dinner</b>		
Time:		
<b>Snack:</b>		

BLOOD SUGARS						
DATE	fasting	after breakfast	before lunch	after lunch	before dinner	after dinner

Talk to your doctor about how often, and when, to test your blood sugar levels.