Patient Name Date

Food Plan Type:

# Day 1

|  |  |  |
| --- | --- | --- |
| **Day Event** | **Food & Drink Intake** (include type, amount, brand) | **Macronutrients (PFC) and Phytonutrients** |
| Rising Time |  |  |
| Breakfast  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-AM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Lunch  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Dinner  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Bed Time |  |  |

**P**: Proteins; **F**: Fats; **C**: Carbohydrates; **R**: Red; **O**: Orange; **Y**: Yellow; **G**: Green; **B/P/BL**: Blue/Purple/Black; **W/T/BR**: White/Tan/Brown

|  |  |  |  |
| --- | --- | --- | --- |
| **Sleep & Relaxation** | **Exercise & Movement** | **Stress** | **Relationships** |
| **Sleep**  Quantity: (hours) Quality:  Poor Fair  Good | Type, Duration, & Intensity   Aerobic: | Stress Reduction Practices: | Supporting: |
| **Relaxation**  Yes No Type/Amount: |  Strength:   Flexibility: | Stressors: | Non-supporting: |

Patient Name Date

Food Plan Type:

# Day 2

|  |  |  |
| --- | --- | --- |
| **Day Event** | **Food & Drink Intake** (include type, amount, brand) | **Macronutrients (PFC) and Phytonutrients** |
| Rising Time |  |  |
| Breakfast  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-AM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Lunch  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Dinner  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Bed Time |  |  |

**P**: Proteins; **F**: Fats; **C**: Carbohydrates; **R**: Red; **O**: Orange; **Y**: Yellow; **G**: Green; **B/P/BL**: Blue/Purple/Black; **W/T/BR**: White/Tan/Brown

|  |  |  |  |
| --- | --- | --- | --- |
| **Sleep & Relaxation** | **Exercise & Movement** | **Stress** | **Relationships** |
| **Sleep**  Quantity: (hours) Quality:  Poor Fair  Good | Type, Duration, & Intensity   Aerobic: | Stress Reduction Practices: | Supporting: |
| **Relaxation**  Yes No Type/Amount: |  Strength:   Flexibility: | Stressors: | Non-supporting: |

Patient Name Date

Food Plan Type:

# Day 3

|  |  |  |
| --- | --- | --- |
| **Day Event** | **Food & Drink Intake** (include type, amount, brand) | **Macronutrients (PFC) and Phytonutrients** |
| Rising Time |  |  |
| Breakfast  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-AM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Lunch  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Dinner  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Bed Time |  |  |

**P**: Proteins; **F**: Fats; **C**: Carbohydrates; **R**: Red; **O**: Orange; **Y**: Yellow; **G**: Green; **B/P/BL**: Blue/Purple/Black; **W/T/BR**: White/Tan/Brown

|  |  |  |  |
| --- | --- | --- | --- |
| **Sleep & Relaxation** | **Exercise & Movement** | **Stress** | **Relationships** |
| **Sleep**  Quantity: (hours) Quality:  Poor Fair  Good | Type, Duration, & Intensity   Aerobic: | Stress Reduction Practices: | Supporting: |
| **Relaxation**  Yes No Type/Amount: |  Strength:   Flexibility: | Stressors: | Non-supporting: |

Patient Name Date

Food Plan Type:

# Day 4

|  |  |  |
| --- | --- | --- |
| **Day Event** | **Food & Drink Intake** (include type, amount, brand) | **Macronutrients (PFC) and Phytonutrients** |
| Rising Time |  |  |
| Breakfast  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-AM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Lunch  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Dinner  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Bed Time |  |  |

**P**: Proteins; **F**: Fats; **C**: Carbohydrates; **R**: Red; **O**: Orange; **Y**: Yellow; **G**: Green; **B/P/BL**: Blue/Purple/Black; **W/T/BR**: White/Tan/Brown

|  |  |  |  |
| --- | --- | --- | --- |
| **Sleep & Relaxation** | **Exercise & Movement** | **Stress** | **Relationships** |
| **Sleep**  Quantity: (hours) Quality:  Poor Fair  Good | Type, Duration, & Intensity   Aerobic: | Stress Reduction Practices: | Supporting: |
| **Relaxation**  Yes No Type/Amount: |  Strength:   Flexibility: | Stressors: | Non-supporting: |

Patient Name Date

Food Plan Type:

# Day 5

|  |  |  |
| --- | --- | --- |
| **Day Event** | **Food & Drink Intake** (include type, amount, brand) | **Macronutrients (PFC) and Phytonutrients** |
| Rising Time |  |  |
| Breakfast  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-AM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Lunch  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Dinner  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Bed Time |  |  |

**P**: Proteins; **F**: Fats; **C**: Carbohydrates; **R**: Red; **O**: Orange; **Y**: Yellow; **G**: Green; **B/P/BL**: Blue/Purple/Black; **W/T/BR**: White/Tan/Brown

|  |  |  |  |
| --- | --- | --- | --- |
| **Sleep & Relaxation** | **Exercise & Movement** | **Stress** | **Relationships** |
| **Sleep**  Quantity: (hours) Quality:  Poor Fair  Good | Type, Duration, & Intensity   Aerobic: | Stress Reduction Practices: | Supporting: |
| **Relaxation**  Yes No Type/Amount: |  Strength:   Flexibility: | Stressors: | Non-supporting: |

Patient Name Date

Food Plan Type:

# Day 6

|  |  |  |
| --- | --- | --- |
| **Day Event** | **Food & Drink Intake** (include type, amount, brand) | **Macronutrients (PFC) and Phytonutrients** |
| Rising Time |  |  |
| Breakfast  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-AM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Lunch  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Dinner  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Bed Time |  |  |

**P**: Proteins; **F**: Fats; **C**: Carbohydrates; **R**: Red; **O**: Orange; **Y**: Yellow; **G**: Green; **B/P/BL**: Blue/Purple/Black; **W/T/BR**: White/Tan/Brown

|  |  |  |  |
| --- | --- | --- | --- |
| **Sleep & Relaxation** | **Exercise & Movement** | **Stress** | **Relationships** |
| **Sleep**  Quantity: (hours) Quality:  Poor Fair  Good | Type, Duration, & Intensity   Aerobic: | Stress Reduction Practices: | Supporting: |
| **Relaxation**  Yes No Type/Amount: |  Strength:   Flexibility: | Stressors: | Non-supporting: |



Patient Name Date

Food Plan Type:

# Day 7

|  |  |  |
| --- | --- | --- |
| **Day Event** | **Food & Drink Intake** (include type, amount, brand) | **Macronutrients (PFC) and Phytonutrients** |
| Rising Time |  |  |
| Breakfast  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-AM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Lunch  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Mid-PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Dinner  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| PM Snack  **Time** |  | **P F C**   **R**  **O**  **Y**  **G**  **B/P/BL**  **W/T/BR** |
| Bed Time |  |  |

**P**: Proteins; **F**: Fats; **C**: Carbohydrates; **R**: Red; **O**: Orange; **Y**: Yellow; **G**: Green; **B/P/BL**: Blue/Purple/Black; **W/T/BR**: White/Tan/Brown

|  |  |  |  |
| --- | --- | --- | --- |
| **Sleep & Relaxation** | **Exercise & Movement** | **Stress** | **Relationships** |
| **Sleep**  Quantity: (hours) Quality:  Poor Fair  Good | Type, Duration, & Intensity   Aerobic: | Stress Reduction Practices: | Supporting: |
| **Relaxation**  Yes No Type/Amount: |  Strength:   Flexibility: | Stressors: | Non-supporting: |