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FOOD INTAKE AND ACTIVITY RECORD INSTRUCTIONS

For **two days** please record everything that you eat at the time that you eat it with as much accuracy as possible. Only record the intake from **normal days**, not birthdays, or holidays such as Thanksgiving. Estimate as closely as you are able to the quantities of your foods using standard terms, e.g. **6 oz. glass** of 2% milk, **2 slices** of whole wheat bread, **1 tablespoon** of sugar, **8 oz.** of boneless chicken. Please be as specific as possible and include brand names if known. Include in the listing any sugar, salt, salad dressings, or condiments you put on your food.

If you take any food supplements, continue to take them normally and list them as well.

List any and all physical activities performed during the day and night and the time spent doing them. Everything should be listed including the time spent sitting and sleeping, as well as walking and exercising. List any symptoms or other information that you want us to be aware of throughout the day. Account for all twenty-four hours.

Date _____ Name _____

Date of Birth _____ Height _____ Weight _____

Food Intake Analysis

Time	Food	Amount	Physical Activity
6 am – 11 am			
11 am – 4 pm			
4 pm – 9 pm			
9 pm – 6 am			

Date _____ Name _____

Day 2

Food Intake Analysis

Time	Food	Amount	Physical Activity
6 am – 11 am			
11 am – 4 pm			
4 pm – 9 pm			
9 pm – 6 am			