

Self-Monitoring

| Height | Weight | Activity Level |
| :---: | :---: | :--- |
|  |  | $\square$ Not Active |
|  | $\square$ Moderately Active |  |
|  | $\square$ Very Active |  |


| Calories/Day | Short Term Goals | Long Term Goals |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |

## Physical ActivityGuidelines

- Adults should aim for 150 minutes ( 2 hours and 30 minutes) a week of moderate intensity, or 75 minutes ( 1 hour and 15 minutes) a week of vigorous intensity aerobic physical activity, or an equivalent combination of moderate and vigorous intensity aerobic activity.
- Adults should also do muscle-strengthening activities involving all major muscle groups at least two days perweek.

My Tracker

Date
Weight
Body Mass Index - BMI

Waist Circumference

Blood Pressure

## Servings I Need From Different Food Groups



## How to Record Your Intake <br> Write down everything you eat or drink every day.

" Meal/Time: What time of the day you ate. Example: Dinner at 6:15 p.m.
How much: Indicate the quantity of food or beverage that you ate or drank.
Example: 1 cup cereal, 1/2 cup 2\% milk.
" Food and drink: Writedownwhat type of foodyouate. Try tobeas specific as possible. Include sauces, gravies, and any extras such as soda, salad dressing, mayonnaise, butter, sour cream, sugar, and ketchup. Example: Cheeseburger, french fries with one packet ketchup andmayonnaise, and 16 ozsoda.
Mood: How did you feel when you finished your meal? Example:
Happy, sad, tired, hungry, bored, anxious, tense, and so on.

- Hunger scale: Rateyour level of hunger andfullnessonascale of one to 10 , with onebeing extremely hungry and 10 being uncomfortably stuffed. Try to stay between four to six and do not let yourself get too hungry.

| 1 | Weak and light-headed: Your stomach acid is churning. |
| :--- | :--- |
| 2 | Very uncomfortable: You feel irritable and unable to concentrate. |
| 3 | Uncomfortably hungry: Your stomach is rumbling. |
| 4 | Slightly uncomfortable: You're just beginning to feel the signs of hunger. |
| 5 | Comfortable: You're more or less satisfied, but could eat a little more. |
| 6 | Perfectly comfortable: You feel satisfied. |
| 7 | Full: A little bit uncomfortable. |
| 8 | Uncomfortably full: You feel bloated. |
| 9 | Very uncomfortably full: You need to loosen your clothes. |
| 10 | Stuffed: You are so full you feel nauseous. |

A rating of 4 to 6 is where you want to be.

Calories/Meal: Use the food label or the calorie counting guide to estimate the best you can. Tracking calories is the key to keeping you on goal with your weight.
Physical activity: Write down the type of activity you performed, where and how many minutes.
Check servings: Indicate how many servings you ate and in which food group.
Journal/Goal setting: Track your progress with your goals and identify any specific changes or steps that are needed.

## Sample Food and Exercise Diary Entry

My calorie intake: 1600/day
Number of servings/day
Vegetables. .............. 2 cups
Fruits. ................ 1 1/2 cups
Grains......................... 5 oz
Dairy...................... 3 cups
Protein foods. ............. 5 oz

| Meal/Time | How Much | Food/Drink | Mood/Hunger <br> Scale | Calories/ <br> Meal |
| :--- | :--- | :--- | :--- | :--- |
| 8:00 a.m. | 2 slices | White bread | Hungry | 160 |
| Breakfast | 2 strips | Bacon | Hunger scale: | 200 |
|  | 2 | Eggs scrambled | $(4$ to 6) | 150 |
|  | 16 oz | Orange juice |  | 240 |
|  |  | Butter |  | 45 |
|  |  |  |  | Total: 795 |

## $\checkmark$ Check Servings

Physical Activity

| Vegetables | -0 | cups | Type |
| :--- | :--- | :--- | :--- |
| Fruit | -2 | cups | Walked on treadmill |
| Grains | $-\frac{2}{2}$ | oz | Minutes |
| Dairy | cups | 20 |  |
| Protein foods $-\frac{3}{0}$ | oz |  |  |
| Water | $-\quad$ oz |  |  |

## Food and ExerciseDiary

Day: $\qquad$ Calories/day: $\qquad$

| Meal/Time | How <br> Much | Food/Drink | Mood/Hunger <br> Scale | Calories/ <br> Meal |
| :--- | :--- | :--- | :--- | :--- |
| Breakfast |  |  |  |  |
| Lunch |  |  |  |  |
|  |  |  |  |  |
| Dinner |  |  |  |  |
| Snack |  |  |  |  |
| Snack |  |  |  |  |


| $\checkmark$ Check | ngs | Physical Activity | Journal/Goal Setting |
| :---: | :---: | :---: | :---: |
| Vegetables | cups | Type |  |
| Fruit | cups |  |  |
| Grains |  |  |  |
| Dairy | cups |  |  |
| Protein foods |  | Minutes |  |
| Water |  |  |  |

## Helpful Food Measurement Guide

## Abbreviations

| Teaspoon | tsp, also t |
| :--- | :--- |
| Tablespoon | Tbsp, also T |
| Cup | c |
| Ounce | oz |
| Fluid ounce | fl oz |
| Pound | lb, also \# |

Weight - Used to weigh cooked meats. To measure correctly, read scale at eye level.

| $4 \mathrm{oz}=1 / 4 \mathrm{lb}$ |
| :--- |
| $5 \mathrm{oz}=1 / 3 \mathrm{lb}$ |
| $8 \mathrm{oz}=1 / 2 \mathrm{lb}$ |
| $10 \mathrm{oz}=2 / 3 \mathrm{lb}$ |
| $12 \mathrm{oz}=3 / 4 \mathrm{lb}$ |
| $16 \mathrm{oz}=1 \mathrm{lb}$ |

Dry Measures - Used for measuring solid foods. To measure precisely, level off top with a flat edge. Dry equivalents of measure:

| 3 tsp $=1$ Tbsp |
| :--- |
| 4 Tbsp $=1 / 4$ cup |
| 5 Tbsp +1 tsp $=1 / 3$ cup |
| 8 Tbsp $=1 / 2$ cup |
| 10 Tbsp +2 tsp $=2 / 3$ cup |
| 12 Tbsp $=3 / 4$ cup |
| 16 Tbsp $=1$ cup |

Liquid Measures - Used for measuring fluids. To measure precisely, read at eye level.

| 2 Tbsp $=1 \mathrm{fl} \mathrm{oz}$ |
| :--- | :--- |
| 4 Tbsp $=2 \mathrm{fl}$ oz or $1 / 4$ fluid cup |
| 5 Tbsp $+1 \mathrm{tsp}=21 / 2 \mathrm{fl}$ oz or $1 / 3$ fluid cup |
| 8 Tbsp $=4 \mathrm{fl}$ oz or $1 / 2$ fluid cup |
| 10 Tbsp $+2 \mathrm{tsp}=51 / 2 \mathrm{fl}$ oz or $2 / 3$ fluid cup |
| $12 \mathrm{Tbsp}=6 \mathrm{fl}$ oz or $3 / 4$ fluid cup |
| 16 Tbsp $=8 \mathrm{fl}$ oz or 1 fluid cup or $1 / 2$ pint |

## Vegetables




## Grains

| Cereals, Beans, Grains and Pasta | Serving Size |
| :--- | :--- |
| Cooked cereal (oatmeal, rice, etc.) | $1 / 2$ cup |
| Shredded wheat | $1 / 2$ cup |
| Bran cereal (flaked) | $1 / 2$ cup |
| Dry cereal (check label) | $3 / 4$ cup |
| Beans, cooked or canned (all kinds) | $1 / 2$ cup |
| Baked beans | $1 / 3$ cup |
| Rice, cooked (all kinds, brown preferred) | $1 / 3$ cup |
| Pasta, cooked (all kinds) | $1 / 2$ cup |
| Quinoa, cooked | $1 / 3$ cup |
| Granola, low-fat or regular | $1 / 4$ cup |
| Barley, cooked | $1 / 3$ cup |
| Wild rice, cooked | $1 / 2$ cup |


| Starchy Vegetables | Serving Size |
| :--- | :--- |
| Corn, cooked or canned | $1 / 2$ cup |
| Corn meal, uncooked | 2 Tbsp |
| Corn on the cob (6" piece) | 1 piece |
| Green peas, cooked or canned | $1 / 2$ cup |
| Potato, baked, boiled or steamed | 3 oz (1 small) |
| Squash, winter, acorn, etc. | 1 cup |
| Yam or sweet potato | $1 / 2$ cup |

Per Serving:
15 grams carbohydrate
3 grams protein
1 gram fat
80 calories

## Grains

| Bread | Serving Size |
| :--- | :--- |
| Bread (whole wheat, rye, white) | 1 slice or 1oz |
| Bagel | $1 / 4$ or 1 oz |
| Sandwich bun or roll | $1 / 2$ |
| Roll, dinner or hard | 1 small |
| Pita pocket bread (6" across) | $1 / 2$ |
| Tortilla (6" corn or 8 " flour) | 1 |
| English muffin | $1 / 2$ |


| Crackers and Snacks | Serving Size |
| :--- | :--- |
| Graham crackers (squares) | 3 |
| Animal crackers | 8 |
| Crackers | $4-6$ |
| Pretzels (hard) | $3 / 4$ oz |
| Popcorn (plain, popped) | 3 cups |



## Starches and Breads with Fat Per Serving:

15 grams carbohydrate 3 grams protein 5 or more grams fat 125-150 calories

| Starches and Breads with Fat | Serving Size |
| :--- | :--- |
| Biscuit (2 1/2") | 1 |
| Corn, taco or tortilla chips | 1 oz |
| Potato chips | 10 |
| Refried beans | $1 / 3$ cup |
| Fried rice | $1 / 3$ cup |
| Pancakes (4" across) | 2 |
| Waffle (4 1/2" square) | 1 |



## Meats

| Lean Meats | Serving Size |
| :--- | :--- |
| Chicken or turkey, white meat, no skin | 1 oz |
| Fish, fresh, frozen or canned in water | 1 oz |
| Shellfish (clams, crab, shrimp) | 1 oz |
| Egg white/egg substitute | 2 whites or 1/4 cup |
| Canadian bacon/fresh ham | 1 oz |
| Lean beef select or choice grades (round, | 1 oz |
| flank, tenderloin, sirloin) | 1 oz |
| Pork (top loin, chops, cutlets, tenderloin) | 1 oz |
| Leal (loin chop/roast) | 1 oz |
| Lamb, leg or roast) |  |



## Plant-Based Proteins

| Proteins | Serving Size |
| :--- | :--- |
| Beans \& lentils, cooked | $1 / 4$ cup |
| Edamame | $1 / 4$ cup |
| Falafel patty (1 1/4", 4 oz) | 1 patty |
| Hummus | 2 Tbsp |
| Nut butters | 1 Tbsp |
| Nuts | $1 / 2$ oz (12almonds, <br> 24 pistachios, 7 walnut halves) |
| Peas, cooked | $1 / 2$ cup |
| Seeds, hulled, roasted | $1 / 2$ oz (pumpkin, sunflower or <br> squash $)$ |
| Tempeh, cooked | 1 oz |
| Tofu | 2 oz |

Note: Carbohydrate, fat, and calories will vary; read food labels.

## Fats



## Free Foods

| Examples | Peppers |
| :--- | :--- |
| Vinegar, lemon juice | Radishes |
| Coffee or tea | Salad greens |
| Soft drinks, calorie free(diet) | Mushrooms |
| Carbonated water | Dill pickles, unsweetened |
| Club soda/tonic water/Crystal Light | Gelatin, sugar-free |
| Celery | Horseradish, hot sauce, and |
| Cilantro |  |
| Cucumber |  |
| Onions |  |

Note: Serving sizes will vary. Be aware that fat-free and sugar-free products may contain artificial ingredients not beneficial to your health.

Per Serving:
0 grams carbohydrate Less than 20 calories

My Food and Exercise Diary - A Guide to Daily Food Choices has been developed by Health Education and Wellness.

If you are enrolled on the Health Plan of Nevada and would like more information, please call Health Education and Wellness at 702-877-5356 or toll-free at 1-800-720-7253, TTY 711, Monday through Friday, 8 a.m. to 5 p.m. local time.

Tiene derecho a recibir ayuda e información en su idioma sin costo. Para solicitar un intérprete, llame al número de teléfono gratuito para miembros que se encuentra en su tarjeta de identificación del plan o los documentos de su plan.

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