



Three-day Food Record

Name: _____

	Breakfast		Snack	Lunch		Snack	Dinner		Snack	Comments
	Before	After	Morning	Before	After	Afternoon	Before	After	Bedtime	
Time										
Blood Glucose										
Food and Amount										
Date: _____	Carbohydrate: ___ gram(s)			Carbohydrate: ___ gram(s)			Carbohydrate: ___ gram(s)			
Time										
Blood Glucose										
Food and Amount										
Date: _____	Carbohydrate: ___ gram(s)			Carbohydrate: ___ gram(s)			Carbohydrate: ___ gram(s)			
Time										
Blood Glucose										
Food and Amount										
Date: _____	Carbohydrate: ___ gram(s)			Carbohydrate: ___ gram(s)			Carbohydrate: ___ gram(s)			