

DIET DIARY | INSTRUCTIONS FOR PATIENTS

- Please write down **everything eaten or drunk and the time** when consumed. This information will help your dental professional advise you on how to best your diet for you dental health.
- You should complete a diet sheet for **3 days**, one weekend day and two week days. Please delete on the grid below as appropriate. *
- Please remember to bring this with you to your next appointment.

DAY 1 WEEKEND/ WEEKDAY *		DAY 2 WEEKEND/ WEEKDAY *		DAY 3 WEEKEND/ WEEKDAY *	
TIME	FOOD OR DRINK	TIME	FOOD OR DRINK	TIME	FOOD OR DRINK