

WEEKLY CARB & BLOOD SUGAR TRACKER

NAME: _____

DOB: _____













TARGET RANGES	
PRE-MEAL	POST-MEAL

OPTIONAL GOALS (Complete at beginning of week)
Daily carb intake: _____
Minutes of physical activity: _____
Daily blood sugar checks: _____

REFLECTIONS (Complete at end of week)					
This week my energy level was: (circle) <table style="display: inline-table; margin-left: 20px;"> <tr> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">1</td> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">2</td> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">3</td> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">4</td> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">5</td> </tr> </table> Low I felt very tired High I had lots of energy	1	2	3	4	5
1	2	3	4	5	
This week my food cravings were: (circle) <table style="display: inline-table; margin-left: 20px;"> <tr> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">1</td> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">2</td> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">3</td> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">4</td> <td style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; text-align: center;">5</td> </tr> </table> Low I had no cravings High I had lots of cravings	1	2	3	4	5
1	2	3	4	5	

NOTES: _____

MONDAY	DATE:	TUESDAY	DATE:	WEDNESDAY	DATE:
BREAKFAST		:	BREAKFAST		:
Blood sugar before meal: _____			Blood sugar before meal: _____		
FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS	
Blood sugar 2 hours after meal: _____			Blood sugar 2 hours after meal: _____		
LUNCH		:	LUNCH		:
Blood sugar before meal: _____			Blood sugar before meal: _____		
FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS	
Blood sugar 2 hours after meal: _____			Blood sugar 2 hours after meal: _____		
DINNER		:	DINNER		:
Blood sugar before meal: _____			Blood sugar before meal: _____		
FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS	
Blood sugar 2 hours after meal: _____			Blood sugar 2 hours after meal: _____		
SNACK		:	SNACK		:
FOOD / DRINK ITEM		CARBS	FOOD / DRINK ITEM		CARBS
Blood sugar before bed : _____			Blood sugar before bed : _____		
Total carbs for the day: _____			Total carbs for the day: _____		
PHYSICAL ACTIVITY	DURATION		PHYSICAL ACTIVITY	DURATION	
How do you feel about the meals you ate today?		 Good  Neutral  Needs work	How do you feel about the meals you ate today?		 Good  Neutral  Needs work
How do you feel about the meals you ate today?		 Good  Neutral  Needs work	How do you feel about the meals you ate today?		 Good  Neutral  Needs work

THURSDAY		DATE:	FRIDAY		DATE:	SATURDAY		DATE:	SUNDAY		DATE:				
BREAKFAST		:	BREAKFAST		:	BREAKFAST		:	BREAKFAST		:				
Blood sugar before meal:			Blood sugar before meal:			Blood sugar before meal:			Blood sugar before meal:						
FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS					
Blood sugar 2 hours after meal:			Blood sugar 2 hours after meal:			Blood sugar 2 hours after meal:			Blood sugar 2 hours after meal:						
LUNCH		:	LUNCH		:	LUNCH		:	LUNCH		:				
Blood sugar before meal:			Blood sugar before meal:			Blood sugar before meal:			Blood sugar before meal:						
FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS					
Blood sugar 2 hours after meal:			Blood sugar 2 hours after meal:			Blood sugar 2 hours after meal:			Blood sugar 2 hours after meal:						
DINNER		:	DINNER		:	DINNER		:	DINNER		:				
Blood sugar before meal:			Blood sugar before meal:			Blood sugar before meal:			Blood sugar before meal:						
FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS					
Blood sugar 2 hours after meal:			Blood sugar 2 hours after meal:			Blood sugar 2 hours after meal:			Blood sugar 2 hours after meal:						
SNACK		:	SNACK		:	SNACK		:	SNACK		:				
FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS		FOOD / DRINK ITEM	CARBS					
Blood sugar before bed :			Blood sugar before bed :			Blood sugar before bed :			Blood sugar before bed :						
Total carbs for the day:			Total carbs for the day:			Total carbs for the day:			Total carbs for the day:						
PHYSICAL ACTIVITY		DURATION	PHYSICAL ACTIVITY		DURATION	PHYSICAL ACTIVITY		DURATION	PHYSICAL ACTIVITY		DURATION				
How do you feel about the meals you ate today?				How do you feel about the meals you ate today?				How do you feel about the meals you ate today?				How do you feel about the meals you ate today?			
	Good	Neutral	Needs work		Good	Neutral	Needs work		Good	Neutral	Needs work		Good	Neutral	Needs work

**0g
CARB
FOODS**
(Per serving)



Meats
Beef, Lamb,
Pork, Veal (3 oz)



Poultry
Chicken, Turkey,
Duck (3 oz)



Fish / Shellfish
Salmon, Tuna, Sardines,
Shrimp, Lobster, Crab (3 oz)



Eggs
whole or whites
(1 egg)



**Lemon, Lime,
Vinegar, Herbs,
Spices** (1 tsp)



Fats: Oils
Avocado, Olive,
Sesame, Peanut,
Canola (1 tsp)



Fats: Other
Butter (1 tsp),
Mayo (1 tbsp),
Heavy cream (1 tbsp)



Beverages
Water, Black coffee,
Unsweetened tea,
sparkling water (8 oz)

**HIGH
CARB
FOODS**



Brown Rice
(50g per 1 cup
cooked)



Fruit Smoothie
(35g per 8 oz)



100% Juice
(26-30g per 8 oz)



**Whole Wheat
Bread**
(15-20g per slice)



Sugary Cereal
(30g per 1 cup
with no milk)



**Fruit Jam
or Jelly**
(30g per 2 tbsp)



10" Tortilla
(40g per wrap)

**1-5g
CARB
FOODS**
(Per serving)



Leafy Greens
Lettuce, Spinach, Arugula,
Kale, Collards, Turnip, Romaine
(1 cup raw or 1/2 cup cooked)



Non-starchy Vegetables
Asparagus, Bell peppers, Bok Choy,
Brussel Sprouts, Cucumbers, Cabbage,
Cauliflower, Eggplant, Onions
(1 cup raw or 1/2 cup cooked)



Avocado
(1 oz or 2 tbsp)



Deli Meat & Bacon
(1 oz or 2 slices)



Dairy
Cheese (1 oz or 1/4 cup shredded),
Cream cheese (1 tbsp)



Tofu
(3 oz)



Hummus
(1 tbsp)

**5-10g
CARB
FOODS**
(Per serving)



Edamame
(1/2 cup peeled)



Beets
(1/2 cup)



Raspberries
(1/2 cup or 2 oz)



Strawberries
(6 medium or 2 oz)



Carrots
(10 baby carrots or 3/4 cup)



Squash
butternut, Spaghetti,
Acorn, Pumpkin
(1 cup)



Nuts
Walnuts, Almonds,
Brazil Nuts, Cashews,
Pistachios, Peanuts (1 oz)



Seeds
Flaxseed (3 tbsp),
Sunflower (1 tbsp)
Chia Seeds (2 tbsp)



**Full-fat plain
Greek yogurt**
(1 cup)

**10-20g
CARB
FOODS**
(Per serving)



Cow's milk
(1 cup)



**Blueberries,
Blackberries**
(1/2 cup or 2.5 oz)



**Beans, Lentils,
Quinoa**
(1/2 cup cooked)



Sweet Potato
(1/2 cup mashed)



Kiwi, Peach
(1 whole)



Rolled Oats
(1/3 cup)



Melon / Watermelon
(1 cup diced)



Green Peas, Corn
(1/2 cup)