

# Dr. Now Diet Plan Template

## Personal Information

- Name: \_\_\_\_\_
- Date: \_\_\_\_\_
- Starting Weight: \_\_\_\_\_
- Goal Weight: \_\_\_\_\_
- Healthcare Provider: \_\_\_\_\_

## Caloric Intake

- **Daily Limit:** Approximately 1,200 calories

## Meal Structure

- **Breakfast:**
  - Protein source (e.g., egg whites, Greek yogurt)
  - A serving of fruit (e.g., berries, apple)
- **Lunch:**
  - Lean protein (chicken, turkey, fish)
  - Non-starchy vegetables (e.g., broccoli, spinach)
- **Dinner:**
  - Lean protein (variation from lunch)
  - Non-starchy vegetables (different from lunch)
- **Snacks:** (if applicable)
  - Low-calorie options (e.g., cucumber, carrots)

## Weekly Meal Plan

Day	Breakfast	Lunch	Dinner
Monday			
Tuesday			

Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

## Grocery List

- **Proteins:** Chicken breast, salmon, turkey, tofu
- **Vegetables:** Broccoli, spinach, bell peppers, cauliflower
- **Fruits:** Berries, apples
- **Dairy:** Low-fat Greek yogurt, egg whites
- **Miscellaneous:** Herbs, spices, olive oil (in moderation)

## Foods to Include

- **Proteins:** Lean meats, poultry, fish, tofu.
- **Vegetables:** Non-starchy (e.g., leafy greens, bell peppers).
- **Fruits:** Low-calorie options (berries, small apples).
- **Whole Grains:** Very limited amounts.
- **Dairy:** Low-fat or fat-free options.

## Foods to Avoid

- **Sugary Foods:** Sweets, candy, cakes.
- **Starchy Vegetables:** Potatoes, corn.
- **High-Calorie Fruits:** Bananas, grapes.
- **Processed Foods:** Fast food, junk food.
- **High-Fat Foods:** Fatty meats, high-fat dairy.
- **Refined Carbs:** White bread, pasta.

## Hydration

- **Water:** At least 8 glasses per day
- **Avoid:** Sugary drinks, excessive caffeine

## Exercise (as advised by healthcare provider)

- **Type:** \_\_\_\_\_
- **Frequency:** \_\_\_\_\_
- **Duration:** \_\_\_\_\_

## Monitoring and Adjustments

- **Weekly Weight Check:** \_\_\_\_\_
- **Measurement Tracking:** \_\_\_\_\_
- **Diet Adjustments:** \_\_\_\_\_

## Consultation

- **Next Appointment:** \_\_\_\_\_
- **Notes from Healthcare Provider:**

## Additional Notes: