

Week at a Glance

Week #

User ID -



Action	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Rise Time	7:00 AM	7:00 AM	7:00 AM	7:00 AM	7:00 AM		
Bed Time	11:30 PM	11:30 PM	11:30 PM	11:30 PM			11:30 PM
Before-Breakfast Snack Time	7:15 AM	7:15 AM	7:15 AM	7:15 AM	7:15 AM	7:15 AM	7:15 AM
Breakfast Time	7:30 AM	7:30 AM	7:30 AM	7:30 AM	7:30 AM	7:30 AM	7:30 AM
Mid-Morning Snack Time	10:00 AM	10:00 AM	10:00 AM	10:00 AM	10:00 AM	10:00 AM	10:00 AM
Lunch Time	12:00 PM	12:00 PM	12:00 PM	12:00 PM	12:00 PM	12:00 PM	12:00 PM
Mid-Afternoon Snack Time	3:00 PM	3:00 PM	3:00 PM	3:00 PM	3:00 PM	3:00 PM	3:00 PM
Dinner Time	6:00 PM	6:00 PM	6:00 PM	6:00 PM	6:00 PM	6:00 PM	6:00 PM
After-Dinner Snack Time	8:00 PM	8:00 PM	8:00 PM	8:00 PM	8:00 PM	8:00 PM	8:00 PM
Work Start-Up Routine	9:00 AM	9:00 AM	9:00 AM	9:00 AM	9:00 AM		
Work Close-Down Routine	5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM		
Management Areas	4:00 PM	4:00 PM	4:00 PM	4:00 PM	4:00 PM		
Housekeeping Routine		2:00 PM		2:00 PM		2:00 PM	
Power Food Routine	3:00 PM	3:00 PM	3:00 PM	3:00 PM	3:00 PM	3:00 PM	
Exercise Routine	2:00 PM		2:00 PM		2:00 PM	2:00 PM	
Training/Education: Time Minimum	4:00 PM	4:00 PM	4:00 PM	4:00 PM	4:00 PM		
Simplify/Organize: Time Minimum	11:00 AM		11:00 AM		11:00 AM		
Projects: Time Minimum	10:30 AM	10:30 AM	10:30 AM	10:30 AM	10:30 AM		
AM Break: Time Maximum	10:15 AM	10:15 AM	10:15 AM	10:15 AM	10:15 AM	10:15 AM	
PM Break: Time Maximum						7:00 PM	
Carried out the Leisure Plan for Today	10:30 PM	10:30 PM	10:30 PM	10:30 PM			10:30 PM

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Action	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Work Start-Up Routine	T	T	T	T	T		
Work Close-Down Routine	T	T	T	T	T		
Management Areas	T	T	T	T	T		
Housekeeping Routine	X	T	X	T	X	T	
Power Food Routine	T	T	T	T	T	T	
Exercise Routine	T	X	T	X	T	T	
Training/Education: Time Minimum	T	T	T	T	T		
Simplify/Organize: Time Minimum	T	X	T	X	T		
Projects: Time Minimum	T	T	T	T	T		
AM Break: Time Maximum	T	T	T	T	T	T	
PM Break: Time Maximum	X	X	X	X	X	T	
Carried out the Leisure Plan for Today	T	T	T	T			T
Created a Leisure Plan for Tomorrow	X	X	X	X	X	X	X
Created a To-Do List for Tomorrow	X	X	X	X	X	X	X
Carried out the To-Do List for Today	X	X	X	X	X	X	X
Stayed within my Reversal Diet Limits	X	X	X	X	X	X	X
Tracked my Eating Frequency	X	X	X	X	X	X	X
Stayed within my Meal Rations	X	X	X	X	X	X	X
Stayed within my Daily Wildcard Rations	X	X	X	X	X	X	X
Stayed within my Weekly Wildcard Rati	X	X	X	X	X	X	X
Basic Action							
Avoided Alcohol	X	X	X	X	X	X	X
Avoided Caffeine	X	X	X	X	X	X	X
Avoided Nicotine	X	X	X	X	X	X	X
Nonstarchy Vegetable Minimum	X	X	X	X	X	X	X

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Nonstarchy Fruit Minimum	X	X	X	X	X	X	X
Stopped Eating at Least 2 Hrs before Be	X	X	X	X	X	X	X
Measured and Logged Action							
Body Weight	X	X	X	X	X	X	X
Fasting Blood Glucose	X	X	X	X	X	X	X
Blood Pressure	X	X	X	X	X	X	X
Diabetic Neuropathy	X	X	X	X	X	X	X
Intermittent Claudication	X	X	X	X	X	X	X
Angina	X	X	X	X	X	X	X
Use of As-Needed Prescription Meds	X	X	X	X	X	X	X