Digestive Disease Center

Beth Israel Deaconess Medical Center

A teaching hospital of Harvard Medical School

Food and Activity Diary

Are you a regular heartburn sufferer? Do you find that there are triggers, such as certain foods or times of the day at which heartburn plagues you the most? Use this diary to record your daily food consumption and activities to help you identify which triggers are causing you the most discomfort. Print out multiple copies so you can track your heartburn on different days. Feel free to bring this completed form to your next doctor visit to discuss what you can do to relieve your frequent heartburn pain.

Foods consumed (***include all beverages***)	**Time of Day**	**Activities** ***(exercise, work, napllying down, smoking, etc)***	**Time of Day**

Rate your heartburn from 1-10 ***(10 being the worst)***	**Time of Day**	**Rate your heartburn from 1-10** ***(10 being the worst)***	**Time of Day**

Above content provided by Beth Israel Deaconess Medical Center. For advice about your medical care, consult your doctor. This should not be a substitute for medical care provided by a physician.