

# My Weight Journal



**TRUTH ABOUT WEIGHT®**  
The cycle can be broken

Actor  
portrayals

## Set yourself up for continued success

Remember that weight management is an investment in yourself and your well-being—one that has benefits now and later. Consider these practical tips to help you focus on your weight-management goals:

### Reward your progress

Focusing on the positives may help you build momentum in your weight-management plan. Plan an activity that you look forward to for the next time you accomplish a goal or reach a milestone.

### Keep a journal

By tracking your progress, you may recognize a need to change your habits at certain times of the day or year.

### Review your goals regularly

You might find that your goals change over time, and that's okay: unrealistic goals might actually discourage your progress.

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Actor portrayals

## Goal sheet

**One thing at a time, one step at a time, adding up over time**

Goal Setting can be a great way to make lifestyle changes. Goals should be realistic, sustainable, and measurable. Work with your health care provider to choose a SMART goal that's best for you.

**A SMART Goal is:**

**SPECIFIC**

**MEASURABLE**

**ATTAINABLE**

**REALISTIC**

**TIME-ORIENTED**



Actor portrayals

<b>Goal</b> (be as specific as possible)	I will reduce my fast food intake by half
<b>Details</b> (timeline, where, how)	Fast food trips from 10 a week to 5 and bring food from my meal plan to work
<b>Barriers</b> (anticipate challenges)	Getting prepared for the week's food - food prep.
<b>Steps I will take</b> (how will you address barriers, what can you do to help make this happen)	<p>I will make a grocery list on Friday</p> <p>I will shop on Sunday &amp; prepare my food</p> <p>I will ask my friend at work to stay in to eat</p>
<b>Confidence</b> (if less than 7, reassess your goal or the scale of your goal)	<p>How confident am I that I can reach this goal?</p> <p>0 1 2 3 4 5 6 7 8 9 10</p> <p>Not at all A Little Somewhat Very Totally</p>

## Food, activity, and behavior diary



	Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>FOOD/WATER</b>	Total calories: 1,363 Water intake (ounces): 90	Total calories: 1,391 Water intake (ounces): 100	Total calories: 1,516 Water intake (ounces): 80	Total calories: 1,367 Water intake (ounces): 100	Total calories: 1,511 Water intake (ounces): 90	Total calories: 1,850 Water intake (ounces): 100	Total calories: 1,375 Water intake (ounces): 80
<b>ACTIVITY</b>	Total minutes: 15 Exercise: walk	Total minutes: 15 Exercise: walk	Total minutes: 15 Exercise: walk	Total minutes: 60 Exercise: Zumba	Total minutes: 15 Exercise: walk	Total minutes: 40 Exercise: swim	Total minutes: 60 Exercise: walk
<b>BEHAVIOR</b>	Were you happy with your choices? (circle one) happy neutral could be better Challenges/Successes: Walked the track	Were you happy with your choices? (circle one) happy neutral could be better Challenges/Successes:	Were you happy with your choices? (circle one) happy neutral could be better Challenges/Successes:	Were you happy with your choices? (circle one) happy neutral could be better Challenges/Successes: I did half of what I set out to do	Were you happy with your choices? (circle one) happy neutral could be better Challenges/Successes:	Were you happy with your choices? (circle one) happy neutral could be better Challenges/Successes: Didn't eat breakfast	Were you happy with your choices? (circle one) happy neutral could be better Challenges/Successes:
	Describe your mood today? Satisfied How many hours did you sleep? 6	Describe your mood today? Mellow How many hours did you sleep? 8	Describe your mood today? Energetic How many hours did you sleep? 8	Describe your mood today? Satisfied How many hours did you sleep? 6	Describe your mood today? Content How many hours did you sleep? 9	Describe your mood today? Angry How many hours did you sleep? 7	Describe your mood today? Happy How many hours did you sleep? 6

# Week 1

<b>Goal</b> (be as specific as possible)											
<b>Details</b> (timeline, where, how)											
<b>Barriers</b> (anticipate challenges)											
<b>Steps I will take</b> (how will you address barriers, what can you do to help make this happen)											
<b>Confidence</b> (if less than 7, reassess your goal or the scale of your goal)	<p><b>How confident am I that I can reach this goal?</b></p> <p>0    1    2    3    4    5    6    7    8    9    10</p> <p>Not at all    A Little    Somewhat    Very    Totally</p>										

# Week 1

## Food, activity, and behavior diary



	Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>FOOD/WATER</b>	<p><i>Total calories:</i></p> <input type="text"/>						
	<p><i>Water intake (ounces):</i></p> <input type="text"/>						
<b>ACTIVITY</b>	<p><i>Total minutes:</i></p> <input type="text"/>						
	<p><i>Exercise:</i></p> <input type="text"/>						
<b>BEHAVIOR</b>	<p><i>Were you happy with your choices?</i> (circle one)</p> <p> <input type="radio"/>               <input type="radio"/>               <input type="radio"/> </p> <p><i>Challenges/Successes:</i></p> <input type="text"/>						
	<p><i>Describe your mood today?</i></p> <input type="text"/>						
	<p><i>How many hours did you sleep?)</i></p> <input type="text"/>						

# Week 2

<b>Goal</b> <small>(be as specific as possible)</small>											
<b>Details</b> <small>(timeline, where, how)</small>											
<b>Barriers</b> <small>(anticipate challenges)</small>											
<b>Steps I will take</b> <small>(how will you address barriers, what can you do to help make this happen)</small>											
<b>Confidence</b> <small>(if less than 7, reassess your goal or the scale of your goal)</small>	<p><b>How confident am I that I can reach this goal?</b></p> <p>0    1    2    3    4    5    6    7    8    9    10</p> <p>Not at all    A Little    Somewhat    Very    Totally</p>										

# Week 2

## Food, activity, and behavior diary



	Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>FOOD/WATER</b>	<p><i>Total calories:</i></p> <input type="text"/>						
	<p><i>Water intake (ounces):</i></p> <input type="text"/>						
<b>ACTIVITY</b>	<p><i>Total minutes:</i></p> <input type="text"/>						
	<p><i>Exercise:</i></p> <input type="text"/>						
<b>BEHAVIOR</b>	<p><i>Were you happy with your choices?</i> <small>(circle one)</small></p> <p> </p> <p><i>Challenges/Successes:</i></p> <input type="text"/>						
	<p><i>Describe your mood today?</i></p> <input type="text"/>						
	<p><i>How many hours did you sleep?)</i></p> <input type="text"/>						

# Week 3

<b>Goal</b> (be as specific as possible)	
<b>Details</b> (timeline, where, how)	
<b>Barriers</b> (anticipate challenges)	
<b>Steps I will take</b> (how will you address barriers, what can you do to help make this happen)	
<b>Confidence</b> (if less than 7, reassess your goal or the scale of your goal)	<p><b>How confident am I that I can reach this goal?</b></p> <p>0    1    2    3    4    5    6    7    8    9    10</p> <p>Not at all    A Little    Somewhat    Very    Totally</p>

# Week 3

## Food, activity, and behavior diary



	Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>FOOD/WATER</b>	<p><i>Total calories:</i></p> <input type="text"/>						
	<p><i>Water intake (ounces):</i></p> <input type="text"/>						
<b>ACTIVITY</b>	<p><i>Total minutes:</i></p> <input type="text"/>						
	<p><i>Exercise:</i></p> <input type="text"/>						
<b>BEHAVIOR</b>	<p><i>Were you happy with your choices?</i> (circle one)</p> <p> <input type="radio"/>                         <input type="radio"/>                         <input type="radio"/> </p> <p>happy    neutral    could be better</p>						
	<p><i>Challenges/Successes:</i></p> <input type="text"/>						
	<p><i>Describe your mood today?</i></p> <input type="text"/>						
	<p><i>How many hours did you sleep?)</i></p> <input type="text"/>						

# Week 4

<b>Goal</b> (be as specific as possible)	
<b>Details</b> (timeline, where, how)	
<b>Barriers</b> (anticipate challenges)	
<b>Steps I will take</b> (how will you address barriers, what can you do to help make this happen)	
<b>Confidence</b> (if less than 7, reassess your goal or the scale of your goal)	<p><b>How confident am I that I can reach this goal?</b></p> <p>0    1    2    3    4    5    6    7    8    9    10</p> <p>Not at all    A Little    Somewhat    Very    Totally</p>

# Week 4

## Food, activity, and behavior diary



	Mon	Tue	Wed	Thu	Fri	Sat	Sun
<b>FOOD/WATER</b>	<p><i>Total calories:</i></p> <input type="text"/>						
	<p><i>Water intake (ounces):</i></p> <input type="text"/>						
<b>ACTIVITY</b>	<p><i>Total minutes:</i></p> <input type="text"/>						
	<p><i>Exercise:</i></p> <input type="text"/>						
<b>BEHAVIOR</b>	<p><i>Were you happy with your choices?</i> (circle one)</p> <p> </p> <p>happy    neutral    could be better</p>						
	<p><i>Challenges/Successes:</i></p> <input type="text"/>						
	<p><i>Describe your mood today?</i></p> <input type="text"/>						
	<p><i>How many hours did you sleep?)</i></p> <input type="text"/>						

## Popular apps designed to support weight loss and weight maintenance efforts\*

**Lose It!**

**Fooducate**

**YAZIO**

These are some examples. Novo Nordisk does not endorse any representative apps.

\* Purchase or fees may apply.

## Add your family and friends to your support network

After all, you have a better chance of success if you include friends and family in the activities that make up your weight-management routine.



Be open with your family about your goals. They may want to join you in making lifestyle changes.



Share your progress with loved ones. Celebrating milestones along your journey could help you to strive for success.



Join an online community of people with similar goals to grow your support networks.



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## Sign up for updates from TruthAboutWeight.com



Novo Nordisk is committed to your success. That's why we give you resources, including emails with information to keep you up-to-date on cutting-edge weight-loss science and help you start the right kind of conversations with a health care provider.

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