

Rx to Live Well: Weight Management

MY GOALS



Lose _____ % of body weight or _____ pounds by _____ (date)

Who will encourage me: _____

Record weight at least once per week for _____ weeks

Record food intake every day for _____ days

Target calories per day: _____ Target carb grams per day: _____

Record daily physical activity for _____ weeks

Target minutes/week: 250 300 Other: _____

Other: _____

RESOURCES AND FOLLOW-UP

Recommended online resources:

- www.intermountainlivewell.org
- www.choosehealth.utah.gov
- www.intermountainhealthcare.org/wellness
- www.ChooseMyPlate.gov
- www.intermountainhealthcare.org/weight
- www.weightwatchers.com

Referral contact information, if needed:

Report or follow up: In _____ weeks / months with _____