

focus on fertility

Track your diet and lifestyle behaviours:



diet

Are you having:

5 serves of vegetables each day?

☐ Y ☐ N

2 serves of fruit each day?

☐ Y ☐ N

are you having [3 different colours of fruit or veg](#) at each of your main meals?

☐ Y ☐ N

are you incorporating wholegrains at each of your main meals?

☐ Y ☐ N

[did you have at least 2 of these sources of healthy fats today:](#) avocado, nuts, seeds, extra virgin olive oil, olives or oily fish like salmon?

☐ Y ☐ N

are you drinking enough water each day (around 2 L)?

☐ Y ☐ N

[did you take your pre-pregnancy supplement,](#) as directed by your healthcare professional?

☐ Y ☐ N

other notes

how many cups of [caffeinated tea or coffee](#) did you have today?

how many [alcoholic drinks](#) (if any) did you have today?

