HOW TO USE THE WEEKLY TRACKER TEMPLATES

FOOD + POOP – This section allows you to track your meals and bowel movements, providing insight into how food and digestion are impacting your overall health.

How to Fill It Out:

- **Input**: Write down what you eat and drink for each meal. Be as detailed as possible—this will help identify patterns in your diet.
- **Output**: Note the time of day you have a bowel movement, the consistency of your stool (constipated, normal, or diarrhea) and color (brown, black, or red).
- **Notes**: This is for any additional comments. Did a certain food cause discomfort? Did you feel extra tired after meals? Did you develop a rash? Record these observations.

SLEEP – Tracking your sleep is essential for understanding how rest impacts your lupus symptoms and overall health.

How to Fill It Out:

- Total Sleep Hours: Write down the total number of hours you slept each night.
- Nighttime Wake-Ups: Tracking night wake-ups helps identify sleep patterns and potential health issues
- Sleep Quality (1-10): Rate how well you slept on a scale from 1 (poor sleep) to 10 (very restful sleep).
- **Notes**: Record any additional comments related to sleep such as any sleep aids used, waking from a nightmare, a change in routine such as travel, work schedule, etc.

STRESS MANAGEMENT – Stress can greatly impact your health, especially with lupus. This tracker helps you monitor your stress levels and the effectiveness of the methods you use to cope with stress.

How to Fill It Out:

- Stress Level (1-10): Rate your stress level each day on a scale of 1 (low stress) to 10 (very stressed).
- **Coping Techniques**: Write down the techniques you used to manage stress, such as meditation, deep breathing, exercise, or time with loved ones.
- **Notes**: Record any additional comments related to stress management such as how effective each method was in managing your stress on a scale from 1 (ineffective) to 10 (highly effective).

MOVEMENT – Physical activity is an important part of your health and lupus management. This section allows you to track your movement and its impact on how you feel.

How to Fill It Out:

- **Type of Movement**: Write down the activity you did, such as walking, yoga, swimming, or strength training.
- Session Length / Intensity (1-10): Record how long you engaged in each activity and the intensity of your activity on a scale from 1 (low intensity) to 10 (high intensity).
- How Did You Feel After?: Describe how you felt after the activity—energized, fatigued, or any other sensations.

FOOD + POOP					
DAY	INPUT (FOOD + LIQUIDS)	OUTPUT (POOP)	NOTES		
SUN					
MON					
TUES					
WED					
THURS					
FRI					
SAT					

SLEEP					
DAY	TOTAL SLEEP HOURS	NIGHTTIME WAKEUPS	SLEEP QUALITY (1-10)	NOTES	
SUN					
MON					
TUES					
WED					
THURS					
FRI					
SAT					

STRESS MANAGEMENT					
DAY	STRESS LEVEL (1-10)	COPING TECHNIQUE	NOTES		
SUN					
MON					
TUES					
WED					
THURS					
FRI					
SAT					

MOVEMENT					
DAY	TYPE OF MOVEMENT	SESSION LENGTH / INTENSITY (1-10)	HOW DID YOU FEEL AFTER?		
SUN					
MON					
TUES					
WED					
THURS					
FRI					
SAT					