

# Cutting Out Foods Plan

What foods or ingredients would you like to cut out of your diet?  
Why?

How would you describe your pain before cutting out this food?

Write a SMART Goal to assist in cutting out this food.

What are three steps you can take to reduce this food from your diet?

1.

2.

3.

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What are some of your favorite dishes that do not include the food you are trying to cut out?

Write three example meals that do not include the food you are trying to cut out in the following categories.

**Breakfast:**

**Lunch:**

**Dinner:**

**Snacks:**

After two weeks of cutting out this food how is your pain?