WyN WELLNESS

THE WELLNESS PLAYBOOK • WE TEST IT. WE LIVE IT. WE SHARE IT.

My Wellness Journey

Client name: _____ **Start date:** _____

My personal wellness goal: _____

1. My Progress Snapshot

Record measurements over time. Use your preferred units consistently.

Date	Weight	Unit	Waist	Other measurement / notes

2. Treatment & Personal Notes Log

Record the date and plan/product label exactly as shown on your vial or box. This log does not provide dosing or treatment instructions.

Date	Plan / product label	Personal observations

3. Daily Wellness Check

Use the notes area to capture anything you want to remember.

Date	Energy	Sleep	Mood	Appetite / other notes

4. Reminders & Reorder Planning

These are personal organizational reminders only.

Reminder	Date	Time / notes	Done?

5. Weekly Check-In

Complete once a week to reflect patterns.

Week of: _____	Date completed: _____
Energy: ■ Low ■ Okay ■ Good ■ Excellent	**Sleep:** ■ Poor ■ Fair ■ Good ■ Great
Consistency with my personal plan:	■ Not very ■ Some days ■ Most days ■ Consistent
What went well this week?	
What changes or concerns did I notice?	
Questions for a clinician:	
My focus for next week:	

6. Progress Photo Journal

Note photo dates below.

Photo date: _____	Photo date: _____
Notes: _____	Notes: _____

A note about your tracker