

Review everyday drinks

Use the spaces below for your own notes. Bring questions to the appropriate professional.

1. My usual drinks and serving sizes:

2. When or where I tend to choose them:

3. Label information I want to check:

4. My existing fluid or nutrition instructions:

5. One beverage change I want to try:

6. How I will make that option available:

7. Questions for my care team:

8. Review date and observations:

Follow any prescribed fluid, alcohol, caffeine, or nutrition instructions. This worksheet does not set a universal fluid target.

Read the guide:

<https://urolongevitypress.com/articles/drink-smarter.html>