



CONNECT-HF

Partnering to improve cardiac care

www.connectheartfailure.org

Fluid and Sodium Tracker

*Daily Fluid Limit: _____ *Daily Sodium Limit: _____

Date _____

Meal	Food Eaten	Fluid (oz)	Sodium (mg)	Notes
Breakfast				
Lunch				
Dinner				
Snacks				
Daily Total		=	=	

Date _____

Meal	Food Eaten	Fluid (oz)	Sodium (mg)	Notes
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Lunch				
Dinner				
Snacks				
Daily Total		=	=	



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