

Daily Eczema Tracking Sheet

Date:					
Breakfas	t				
Time:	_ Foods ea	ten:			
Lunch					
Time:	_ Foods ea	ten:			
Dinner					
Time:	_ Foods ea	ten:			
Snacks					
Time:	_ Foods ea	ten:			
Environn	nent				
Room tem	perature: _	Humidity lev	el (if known):		
Weather to	oday: □ Sur	nny □ Rainy □ Hu	mid 🏻 Dry		
Skin Sta	tus				
Itchiness	Level (ci	rcle)			
None 1-2-	-3-4-5 S	evere			
Skin App	earance				
□ Dry	□ Red	□ Weeping	☐ Crusty	□ Normal	
□ Other:					
Bowel A	Novemen	ets			
		d visible? □ Yes □		Colour: us present? 🗆 Yes 🗆 No	



2) Time: C	onsistency (see below):_	Colour:			
Undigested food vis	sible? □ Yes □ No Mu	cus present? □ Yes □ No			
	Foamy? □ Yes □ No				
3) Time: C	onsistency (see below) : _	Colour:			
Undigested food vis	sible? □ Yes □ No 💮 Mu	cus present? □ Yes □ No			
	Foamy? □ Yes □ No				
Bowel Movement Co	nsistency Types (cho	oose 1)			
Type 1 = Separate hard	Type 2 = Sausage-	Type 3 = Like a sausage but			
lumps (like nuts)	shaped but lumpy	with cracks			
Type 4 = Like a smooth,	Type 5 = Soft blobs with	Type 6 = Fluffy pieces with			
soft sausage - optimal	clear-cut edges	ragged edges			
Type 7: Entirely liquid					
Additional Notes					
New products used:					
Activities today:					
Other observations:					
Questions for next appointment:					
Weekly Review - Jus	st Complete this at the e	nd of each week			
sust complete this at the end of each week					
Best days this week:					
Dest days this week					
Challenging days:					
Challefighing days.					
Patterns noticed:					
accerns noticed.					
Remember: Every observation helps us understand your little one					
better!					
	Detter.				

Tips for Using This Tracker:

- Fill out as much as you can, but don't worry about completing every section
- Note anything unusual or different about the day
- Take photos of severe flare-ups to share at appointments
- Look for patterns over time rather than day-to-day changes
- Send this tracker to me before our next appointment