

Day Saturday

Date March 23

Time	Food and drink consumed	Place	*	V/L/E	Context and comments
6:30	2 glasses of water	Kitchen			I slept badly and woke up early.
1:00	1 cup of hot soup 1 medium portion of raw carrots	Kitchen			I feel in control.
3:00					I argued with Tom; he does not understand me. I feel fat and nervous.
3:45	20 chocolates 2 ice creams 1 packet of chips 40 nuts	Bedroom	* * * *	V	I'm disgusted with myself. I have no willpower.
8:00	1 cup of salad ½ apple 4 glasses of water	Kitchen			Mom told me off because I did not eat pasta. She doesn't understand me. I am very angry, and I feel fat. Dad encourages me to eat at normal speed, but he only wants me to eat more.

FIGURE 5.6. An example of a completed monitoring record. V, vomiting; L, laxative misuse; E, exercise. From Fairburn CG, *Cognitive Behavior Therapy and Eating Disorders*, Guilford Press, New York, 2008