

Check-in worksheets

Printable pages for the self-check, the 7-day eating-and-mood log, your check-ins at 6, 12 and 24 months, and your setback plan.

About these pages

Written by PureBariatric from published research. This is education and ongoing support, not therapy. If you need more help, the Safety tab and Find Support list options in your country.

What's inside

Page	Worksheet	When to use it
2	Self-check	Before Session 1, at the booster, and at each check-in
3	7-day eating-and-mood log + goal card	Session 1, and any week you want a fresh look
4	Check-in	6, 12 and 24 months after the booster
5	My setback plan	Booster session; review at each check-in

How these pages work

Nothing here is scored, and nothing here gives you a result or a label. Your answers are yours. On paper, they stay with you. Keep these pages somewhere private.

If any page points you to extra support, use that support first. The program will still be here.

If you are in danger or thinking of ending your life: call your local emergency number now, or a crisis line. US 988. Canada call or text 9-8-8. UK and Ireland Samaritans 116 123. Australia Lifeline 13 11 14. Anywhere else: findahelpline.com. In the app, the Safety tab shows the numbers for your country.

Based on published research on CBT after bariatric surgery. A randomized trial of 306 adults one year after bypass or sleeve surgery used six weekly therapist-delivered phone sessions plus a booster (Sockalingam et al., JAMA Network Open 2023). This self-guided program follows similar topics. It is not the trial's program and has not been tested itself. The two-week warning sign follows NIMH; the once-a-week eating question follows DSM-5 criteria (via NCBI).

BEFORE SESSION 1 • BOOSTER • EACH CHECK-IN

Self-check

Five yes-or-no questions. No score. If you answer yes, read the box beside it before you go on.

#	Question	Your answer	If yes
1	In the past month, have you had thoughts of ending your life or hurting yourself?	☐ Yes ☐ No	Please talk to someone today. Use the crisis numbers at the bottom of this page. Pause the program; you can come back once you have support.
2	Are you making yourself vomit, using laxatives, or going long stretches without eating to control your weight?	☐ Yes ☐ No	This program isn't the right first step for this. Talk to your doctor or another clinician you can see, and ask about eating-disorder support. Continue only once you're getting, or arranging, that support.
3	Does eating often feel completely out of your control, once a week or more?	☐ Yes ☐ No	Same as question 2: talk to a clinician you can see first, and continue once support is in place or being arranged.
4	Is your drinking, or any drug use, worrying you or someone close to you?	☐ Yes ☐ No	Talk to a clinician you can see (see the contact list on page 5). You can continue.
5	Are you being treated for a mental-health condition right now?	☐ Yes ☐ No	Good. Check with the person treating you that this program fits alongside your care. You can continue.

Date: _____

If you answered no to everything, you're ready for the next page. If you answered yes to any question, follow the box beside it first.

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SESSION 1 • WHERE YOU ARE NOW

7-day eating-and-mood log

Notice, don't judge. For feeling, one word is enough. Write down what happened, not whether it was good or bad. One line per eating time is plenty.

Day	Time	What was happening	Hungry before?	Feeling	Notes
Mon			not / a little / very		
Tue			not / a little / very		
Wed			not / a little / very		
Thu			not / a little / very		
Fri			not / a little / very		
Sat			not / a little / very		
Sun			not / a little / very		

Looking back at the week: what showed up more than once?

My goal card

One small, specific goal for the next week (what, when, how often):

How sure am I that I can do this? not very / fairly / very. If "not very", make the goal smaller.

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6 • 12 • 24 MONTHS

Check-in

A short review to keep your plan current. Take about 15 minutes.

Which check-in is this? ☐ 6 months ☐ 12 months ☐ 24 months Date: _____

☐ I repeated the self-check (page 2) today. If any answer was yes, I followed the box beside it first.

Since my last check-in

What has gone well, even a little?

Have any of my early warning signs shown up? (Tick any.)

☐ Skipping planned eating times ☐ Grazing coming back ☐ Avoiding my Journal ☐ Other: _____

A slip or a pattern? A slip is one evening, one event or one hard week, and it needs your next planned meal. A pattern is the same thing most days for two weeks or more, and it needs your plan, and maybe a clinician.

Right now this feels like: ☐ nothing to report ☐ a slip ☐ a pattern

The skills I'm still using most:

One change I'll make to my setback plan (page 5):

Who I'd contact if I needed help, and how (name, clinic or line, phone or website):

My next check-in date: _____

Stop and get help if: you have any thoughts of ending your life or hurting yourself; you are making yourself vomit, using laxatives or going long stretches without eating; eating often feels completely out of your control; or low mood, worry or loss of interest lasts more than two weeks. Contact your family doctor or nurse practitioner. If you don't have one, a walk-in clinic, a virtual visit or your local health line can help, and Find Support lists options for your country.

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BOOSTER • REVIEW AT EACH CHECK-IN

My setback plan

Write it once at the booster. Update it at each check-in.

1. My early warning signs (for example, skipping planned times, grazing returning, avoiding my Journal):

2. My top three skills, the ones to go back to first:

3. Two people I'll tell:

4. Who I'll contact, and when. Contact them for a pattern lasting more than two weeks, or anything in the Stop and get help box.

Write the name of your doctor, nurse practitioner or clinic. If you don't have one, write the walk-in clinic or health line you'd use.

Who to contact when you don't have a care team

1	Danger now	Emergency number or crisis line for your country (above, or the Safety tab).
2	Family doctor or nurse practitioner	If you have one.
3	No family doctor	A walk-in or urgent care clinic, a virtual visit, or your local health advice line.
4	Self-referral	In some places you can book counselling yourself, without a referral. Find Support lists public options for your country.
5	Your bariatric program	If you're still seeing them, or they see past patients, they're a good place to start too.

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