

# Your Treatment **Tracker**

**Tradjenta**<sup>®</sup>  
*(linagliptin) tablets 5 mg*

**Sticking to your treatment plan is important**—and the 3-month Treatment Tracker is here to help. You can watch your successes stack up and keep track of areas that still need work.

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**Here's a tip:** Put the tracker somewhere you will see it daily – like your fridge or desk – that way you can keep an eye on your progress!

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**WEEK 1****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**WEEK 2****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**WEEK 3****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**WEEK 4****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Talk with your doctor before starting or changing your diet or exercise plan.

# Month 1

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## Let's get tracking!

To fill out the tracker, give yourself a rating of how you think you've done on diet and exercise, and check the box for taking daily medication. This will help you keep track of your treatment plan.

Goals for next month:

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**WEEK 1****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**WEEK 2****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**WEEK 3****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**WEEK 4****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# Month 2

## Keep up the good work!

You've got one month under your belt. Congratulations! The first month can be tough when starting a new routine. Hopefully by now your treatment plan is starting to become second nature.

Goals for next month:

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**WEEK 1****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**WEEK 2****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**WEEK 3****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**WEEK 4****Diet****Exercise****Medication**

Su	Mo	Tu	We	Th	Fr	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# Month 3

## Time to check in with your doctor!

Soon, it will be time to check in with your doctor to see your progress. You can bring in your Treatment Tracker to discuss how the plan has worked for you on a week-to-week basis.

Goals moving forward:

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