

Original link: http://www.voicesforpfd.org/p/cm/ld/fid=60

Bladder Diary

This is a very helpful tool to keep track of your bladder's behavior. Many urinary issues develop slowly, over time. Many women aren't even aware of how often they are voiding, or how often they make changes to their activities because of fear of leakage, because the problem has been sneaking up on them for so long. Seeing these things "in writing" can be quite instructive and is also very useful for your doctor.

At the beginning of treatment, these diaries are helpful in establishing the nature and severity of the problem. Also, because many times the benefits of treatment may take a long time to become obvious, small changes in bladder diary information can help a woman's provider know whether or not a set of treatments is working.

See next page

Intake and Voiding Diary This chart is a record of your fluid intake, voiding and urine leakage. Please bring this diary to your next visit.

- 1. Choose 4 days (entire 24 hours) to complete this record they do not have to be in a row. Pick days in which will be convenient for you to measure every void.
- 2. Begin recording when you wake up in the morning-continue for a full 24 hours.
- 3. Make a separate record for each time you void, leak, or have anything to drink.
- 4. Measure voids (using cc measurements) using the hat.
- 5. Measure fluid intake in ounces.
- 6. When recording a leak please indicate the volume using a scale of 1-3 *(1=drops/damp, 2=wet-soaked, 3=bladder emptied), your activity during the leak, and if you had an urge ("yes" or "no").

Amount Voided (in				
ccs)	Leak Volume (scale of 1-3)	Activity during leak	Was there an urge	Fluid intake (Amount in ounces/type)
325 cc				
	2	Watching TV	Yes	
				8 oz coffee, 8 oz orange juice
Ja	1	Jogging	No	
	325 cc	2	2 Watching TV	2 Watching TV Yes

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DAY 1	Date:				
Time	Amount Voided (in ccs)	Leak Volume (scale of 1-3)	Activity during leak	Was there an urge	Fluid intake (Amount in ounces/type)
Example					
7:15a	325 cc				
7:45a		2	Watching TV	Yes	
8:15a					8 oz coffee, 8 oz orange juice
10:30a	·	1	Jogging	No	-

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DAY 3	Date:					
Time	Amount Voided (in ccs)	Leak Volume (scale of 1-3*)	Activity during leak	Was there an urge	Fluid intake (Amount in ounces/type)	
A	- 15 	*				
**	75	-				
72						

- Choose 4 days (entire 24 hours) to complete this record they do not have to be in a row. Pick days in which will be convenient for you to measure every void.
 Begin recording when you wake up in the morning–continue for a full 24 hours.
 Make a separate record for each time you void, leak, or have anything to drink.
 Measure voids (using cc measurements) using the hat.
 Measure fluid intake in ounces.

- 6. When recording a leak please indicate the volume using a scale of 1-3 *(1=drops/damp, 2=wet-soaked, 3=bladder emptied), your activity during the leak, and if you had an urge ("yes" or "no").

DAY 4	Date:					
Time	Amount Voided (in ccs)	Leak Volume (scale of 1-3*)	Activity during leak	Was there an urge	Fluide intake (Amount in ounces/type)	
					_	
-	25 26					
,	-			5		
- 10						