



KEEPING A RECORD OF YOUR BOWEL AND BLADDER FUNCTION

The main purpose of this diary log is to document how your bowel and bladder functions. At first, the log is used as an evaluation tool. Later, it may be used to measure your progress. Your log will be more accurate if you fill it out as you go through the day. It can be very difficult to remember at the end of the day exactly what happened in the morning.

*****Please complete this Bowel and Bladder diary every day for 2 days and bring it with you for your first appointment.*****

INSTRUCTIONS:

Column 1 – Time of Day

The log begins with midnight and covers a 24hour period. Select the hour block that corresponds with the time of day you are recording the information.

Column 2 – Type & Amount of Fluid & Food Intake

Record the type and amount of **fluid** you drank.

Record the type and amount of **food** you ate.

Record when you woke up for the day and the hour you went to sleep.

Column 3 – Amount Eliminated

Record a bowel movement with 'BM' at the appropriate time. Make comments on consistency of stool.

Record urination with 'U' and give an estimate of the amount.

S - small = seemed like a small amount or urinated "just in case"

M - medium = seemed like an 8oz measuring cup would run over

L – large = seemed like the amount you urinate when you first wake up in the morning

Column 4 – Amount of Leakage

Record the amount of leakage at the time it occurred.

For urination, use (U):

S - small = drop or two of urine

M - medium = wet underwear

L – large = wet outerwear or floor

For bowel, use (BM):

S - small = stain on underwear

M - medium = partial movement

L – large = complete loss

Column 5 – Was Urge Present

Describe the urge sensation you had as:

1 (MILD) = first sensation of need to go

2 (MODERATE) = stronger sensation or need

3 (STRONG) = need to get to toilet, move aside!

Column 6 – Activity with Leakage

Describe the activity associated with the leakage, i.e. – coughed, heard running water, sneezed, bent over, lifted something or had a strong urge

Notes – (at the bottom of the table) Special problems and new or changes in medication are recorded here. If a pad change was needed, record the number used during the day at the bottom of the page.

EXAMPLE OF VOIDING DIARY:

Time of Day	Type & Amount of Food & Fluid Intake	Amount Voided U: S/M/L BM: S/M/L	Amount of Leakage U: S/M/L BM: S/P/C	Was Urge Present 1/2/3	Activity with Leakage
12a					
1:00					
2:00					
3:00					
4:00					
5:00					
6:00	Woke up at 6:45a	U:L		3	
7:00	Coffee 8oz, bagel				
8:00			M		Fast walking
9:00	Apple	U:M		2	
10:00					
11:00		BM: S		1	key in the door
NOON	Tuna sandwich, milk 6oz, pear				
1:00					
2:00		U: M		2	
3:00	Tea 6oz, cookies		S		Running Water
4:00					
5:00					
6:00	Chicken, corn pudding, salad, apple juice 8oz	U: M		3	
7:00					
8:00			S	3	
9:00					
10:00	To bed 10:30p	U: M		3	
11:00					

Comments: week before period

Number of pads used: 3

Type of pad used: depends