

Bladder Diary Instructions

The main purpose of a bladder log is to document how your bladder functions. A log can give your health care provider an excellent picture of your bladder functions, habits and patterns. At first, the log is used as an evaluation tool. Later, it will be used to measure your progress on bladder retraining or leakage episodes.

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.

INSTRUCTIONS:

Column 1 - Time of Day

The log begins with midnight and covers a 24 hour period. Select the hour block that corresponds with the time of day you are recording 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 Voided (Urinated): Two methods

Record the time of day and amount voided. Use the first method unless directed by your health care provider to directly measure or count urine amounts. Record a bowel movement with a BM at the appropriate time.

1. Place an S,M,L, in the box at the corresponding time interval each time you urinate.
S- SMALL= seemed like a small amount, or urinated “just in case”.
M- MEDIUM= seemed like an 8 ounce measuring cup would run over.
L- LARGE= seemed like the amount you urinate when you first wake up in the morning.
2. If you have difficulty gauging the amount of urine, you may record seconds by counting “one - one thousand” (this equals one second) while emptying your bladder. Record the total number of seconds it took you to void.

Column 4 - Amount of Leakage (Record the amount of urine loss at the time it occurred.)

- S- SMALL= drop or two of urine
- M- MEDIUM= wet underwear
- L- LARGE= wet outerwear or floor

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.



CENTERED ON EXCELLENCE

Bladder Diary

Name:

Date:

Time	Food/Drink Intake	Amount Voided (small, medium, large)	Leakage Amount (small, medium, large)	Urge Level (none, mild, medium, strong)	Activity with Leakage (cough, sneeze, exercise, rest)
Midnight					
1:00am					
2:00am					
3:00am					
4:00am					
5:00am					
6:00am					
7:00am					
8:00am					
9:00am					
10:00am					
11:00am					
Noon					
1:00pm					
2:00pm					
3:00pm					
4:00pm					
5:00pm					
6:00pm					
7:00pm					
8:00pm					
9:00pm					
10:00pm					
11:00pm					