**PFM PHYSIO - Bladder Diary**

Fill in this diary for three days Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **DAY & TIME** | **DRINKS/FLUIDS INTAKE** | **URINE (WEE)** | **PADS/CLOTHING** | **WHAT HAPPENED & COMMENTS** | **BOWEL MOVEMENT** |
| **Day** | **Time** | **Type of drink/fluid** | **Amount of drink/fluid (ml)** | **Amount of urine passed (ml)** | **How urgent was your need to pass urine (wee)?****1 = no urge****3 = normal urge****5 = strong urge** | **Did you leak or wet yourself? (yes/no)** | **How much dd you leak? (spot, small, medium, large)** | **Did you change your pad or clothing? (yes/no)****What did your pad weigh?** | **Where were you and what were you doing at the time you leaked urine or felt urgent?** | **Did you pass a bowel motion (poo)?****What was the Bristol Stool Score?** |
| *Example:**Mon 3 Mar* | *7am\** |  |  | *250ml* | *5* | *Yes* | *Medium* | *Yes, my underwear and pyjama pants* | *Woke up and got out of bed* | *No* |
| *Example:**Mon 3 Mar* | *8am*  | *Coffee* | *200ml* |  |  |  |  |  |  |  |
| *Example:**Mon 3 Mar* | *12pm* |  |  | *100ml* | *5* | *Yes* | *Large* | *150g* | *Opening front door* |  |
| *Example:**Mon 3 Mar* | *10pm\** | *Water* | *50ml* | *150ml* | *1* |  |  | *0g* | *Going to bed, no pad used* |  |
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**Bladder Diary**

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