## BLADDER DIARY

Use this diary to record how much you drink and note down the volume of urine of each toilet visit. You can easily measure the volume of urine with the help of a measuring jug. Mention when you feel a strong urge to go or have any loss of urine. This information can help your doctor to understand your symptoms better.

The example shows you how to use the diary. Start a new sheet for each day.

| Date: | Time I woke up: |
| :--- | :--- |
|  |  |


| Time | Drinks <br> Type and amount | Amount of urine (ml) | Did you feel a strong urge to urinate? |  | Urine leakage? |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Example | Cup of tea - 200 ml | 500 ml | Yes | No | Yes | NO |
| 06:00 |  |  | Yes | No | Yes | No |
| 07:00 |  |  | Yes | No | Yes | No |
| 08:00 |  |  | Yes | No | Yes | No |
| 09:00 |  |  | Yes | No | Yes | No |
| 10:00 |  |  | Yes | No | Yes | No |
| 11:00 |  |  | Yes | No | Yes | No |
| 12:00 |  |  | Yes | No | Yes | No |
| 13:00 |  |  | Yes | No | Yes | No |
| 14:00 |  |  | Yes | No | Yes | No |
| 15:00 |  |  | Yes | No | Yes | No |
| 16:00 |  |  | Yes | No | Yes | No |
| 17:00 |  |  | Yes | No | Yes | No |
| 18:00 |  |  | Yes | No | Yes | No |
| 19:00 |  |  | Yes | No | Yes | No |
| 20:00 |  |  | Yes | No | Yes | No |
| 21:00 |  |  | Yes | No | Yes | No |
| 22:00 |  |  | Yes | No | Yes | No |
| 23:00 |  |  | Yes | No | Yes | No |
| 00:00 |  |  | Yes | No | Yes | No |
| 01:00 |  |  | Yes | No | Yes | No |
| 02:00 |  |  | Yes | No | Yes | No |
| 03:00 |  |  | Yes | No | Yes | No |
| 04:00 |  |  | Yes | No | Yes | No |
| 05:00 |  |  | Yes | No | Yes | No |

