

Module 6- KEEPING A RECORD OF BLADDER FUNCTION

Diet Does Make a Difference in Your Bladder Symptoms!

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. **Please complete a bladder log every day for 2 days (i.e. one work day and one weekend day)**

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.

Column 1 - Time of Day

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

Column 2 - Type & Amount of Fluid (EXCLUDING WATER) & Food Intake

- Record the type and amount of fluid (EXCLUDING WATER) you drank in ounces
- 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 of WATER Intake

- Record the amount of water you drank in ounces
- The recommended amount of water for a 24 hour period is 6-8 cups
- *If you find you are drinking less than the recommended amount, your bladder may be more irritated which can increase urgency, frequency and leaking!*

Column 4 - Amount Voided (Urinated)

- When voiding, count the number of seconds you void by using the counting nomenclature "One Mississippi, Two Mississippi, etc..."
- Record this number in the appropriate row corresponding to the correct time
- Record a bowel movement with a BM at the appropriate time
- You should be voiding > 8 Mississippi's per void!

Column 5 – Urgency Level/ Leakage

- Record the level of urgency just prior to voiding
 - Was the urge HIGH (H)? – Oh my God I almost didn't make it!
 - Was the urge MEDIUM (M)? – I really had to go but didn't necessarily need to rush
 - Was the urge LOW (L)? – I casually made my way to the bathroom without a bother.
- Did you leak urine? Record (Y) for Yes, and (N) for No
 - If yes, what activity were you doing? Coughing? Sneezing? Running? Post-urination dribble? Or was it just that the urge was so strong that you leaked?

Module 6- Sample Daily Voiding Log

<u>Time of Day</u>	<u>Food/Liquid (Excluding Water): Type of Food & Drink</u>	<u>Water Intake (ounces)</u>	<u>Amount Urinated (in Mississippis)</u>	<u>Urge Present? (L / M / H) Leaking? (Y / N) Activity with Leaking?</u>
Midnight				
1:00AM			5	Urge H- No
2:00AM				
3:00AM				
4:00AM				
5:00AM				
6:00AM	woke up @ 6:45	1 cup water	6	Low Y- Leaking
7:00AM	coffee, bagel			
8:00AM				Med Y- leaking getting to bathroom
9:00AM	apple	1 cup water	10	
10:00AM				
11:00AM			6	H-Y - leaked before getting to toilet
NOON	tuna sandwich, milk, pear			
1:00PM				
2:00PM			8	M
3:00PM	tea, cookies			
4:00PM		1 cup water		
5:00PM				
6:00PM	chicken, corn pudding, salad, apple juice		10	L
7:00PM	chocolate bar			
8:00PM	tea			
9:00PM				
10:00PM	to bed at 10:30		12	M
11:00PM				

Number of Pads and/or Panty Liners Used: _____

How would you describe your urinary stream? (check all that apply)

☐ Hesitant - Difficulty Starting ☐ Slow / Weak ☐ Angled to One Side - circle - Right or Left
☐ Stop /Start During Void ☐ Painful - Before (Y/N) : During (Y/N) : After (Y/N)