

Mercy Health

### 3 DAY BLADDER DIARY

UR No: .....

Surname: .....

First Name: .....

DOB: .....

OR Attach Patient Label

This diary will help you and your health care provider understand your bladder function. It is a 24-hour record of your intake and output as well as leakage episodes.

#### WHAT YOU NEED TO DO

Keep the bladder diary for 3 days. (This does not have to be 3 days in a row; e.g. it could be Monday, Thursday and Saturday if you wish.)

Start a new chart each morning when you get up and continue throughout the day and night. This 24-hour period is one day.

**Time:** In this column note the time you have a drink or go to the toilet.

#### **Drinks:**

- **What kind:** Each time you have a drink, record the kind of drink you have.
- **How much:** Record how much you drink in mLs.

#### **Urine:**

- **How much:** Measure the amount of urine passed in mLs.

#### **Accidental Leaks:**

- **How much:** Note how much urine you think you leak.  
E.g. size of 50c, more than 50c, need pad change.

**Urge to go:** Rate the degree of URGENCY you were experiencing

- 0 = No urge
- 1 = Mild urge
- 2 = Moderate - urgency discomfort interfering with daily activities
- 3 = Severe - extreme urgency, discomfort that stops activity

**Comments:** • A brief comment on anything related to bladder behaviour

- E.g. - I leaked before I got to the toilet
- Coughed and leaked
- Didn't feel I emptied properly

- **Pain** when bladder is full - Rate this pain 0-10 (10 being the worst pain)

\*OP00640817\*

V1  
08/17  
P2483

3 DAY BLADDER DIARY  
OP 0064

Label section 100.5mm in length

**Mercy Health**

### 3 DAY BLADDER DIARY

UR No: .....

Surname: .....

First Name: .....

DOB: .....

*OR Attach Patient Label*

DAY 1 - DATE: .....				ACCIDENTS				
Time	Drinks		Urine	Accidental Leaks			Urgency rating (0-3)	Comments
	What Kind?	How much? Use measuring cup (mLs)	How much? Use measuring cup (mLs)	How much?				
				Size of 50c	More than 50c	Need pad change		
7.00am			300mL	✓			2	Leaked on way to toilet
7.30am	Coffee	150mL						
		<b>FLUID TOTAL</b>	<b>URINE TOTAL</b>					

Mercy Health

## 3 DAY BLADDER DIARY

Label section 100.5mm in length

UR No: .....

Surname: .....

First Name: .....

DOB: .....

OR Attach Patient Label

DAY 2 - DATE			ACCIDENTS					
Time	Drinks		Urine	Accidental Leaks			Urgency rating (0-3)	Comments
	What Kind?	How much? Use measuring cup (mLs)	How much? Use measuring cup (mLs)	How much?				
				Size of 50c	More than 50c	Need pad change		
7.00am			300mL	✓			2	Leaked on way to toilet
7.30am	Coffee	150mL						
		FLUID TOTAL	URINE TOTAL					

<p>Mercy Health</p> <p style="text-align: center;"><b>3 DAY BLADDER DIARY</b></p>	<div style="border: 1px solid black; text-align: center; margin-bottom: 5px;">Label section 100.5mm in length</div> <p>UR No: .....</p> <p>Surname: .....</p> <p>First Name: .....</p> <p>DOB: .....</p> <p style="text-align: center;"><i>OR Attach Patient Label</i></p>
---	--

DAY 3 - DATE			ACCIDENTS					
Time	Drinks		Urine	Accidental Leaks			Urgency rating (0-3)	Comments
	What Kind?	How much? Use measuring cup (mLs)	How much? Use measuring cup (mLs)	How much?				
				Size of 50c	More than 50c	Need pad change		
7.00am			300mL	✓			2	Leaked on way to toilet
7.30am	Coffee	150mL						
		<b>FLUID TOTAL</b>	<b>URINE TOTAL</b>					

---

## File Summary

---

File Size	142 KB	Version	4
Owner	Scott Dillon	Proof State	Locked
Uploaded	30 Aug 2017 08:05 by Kieron Clarke	Proof Status	Approved
Proof Finish	-	Proof Comments	0
		Proof Pages	4

---

## Decisions

---

Stage 1	Scott Dillon		Reviewer	0 comments	-	-
Stage 1	Kieron Clarke	Graphics/Pre-press	Reviewer	0 comments	-	-
Stage 1	Mercy Health Werribee Medical Records (Primary Decision Maker)		Moderator	0 comments	Approved	30 Aug 2017 08:09