

## **Bladder Diary**

- Keeping a bladder diary to keep track of your daily urinary habits can help your healthcare professional better understand your symptoms of a sensitive bladder.
- It might find out the causes of your bladder control and help you get the right treatment to manage your condition.
- This three day diary will give a picture of how your bladder is working and an idea of your fluid intake, the amount of urine your bladder can hold and often you pee.

## **Completing the Diary**

Fill the bladder diary in for three days as carefully as possible. For each day record your

- How much you drink and when
- Urination
- Leakage



			DAY 1				
Time	Fluids In	Drinks	Urination		Leakage		
	How much did you drink (ml)?	What Kind?	Urine passed (ml)	Sudden strong urge to pee?	Did you leak? (please tick)	What were you doing at the time? Sneezing, lifting, arriving home, sleeping, etc.	
11.00am	150ml	Juice	100ml	Yes / No	✓	Running	
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
		7 4		Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
		N.		Yes / No			
				Yes / No			
				Yes / No			
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				Yes / No			



				DAY 2			
Time	Fluids In	Drinks What Kind?	Urination		Leakage		
	How much did you drink (ml)?		Urine passed (ml)	Sudden strong urge to pee?	Did you leak? (please tick)	What were you doing at the time? Sneezing, lifting, arriving home, sleeping, etc.	
11.00am	150ml	Juice	100ml	Yes / No	✓	Running	
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
		7 4		Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No	7		
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			
				Yes / No			



			DAY 3				
Time	Fluids In	Drinks	Urination		Leakage		
	How much did you drink (ml)?	What Kind?	Urine passed (ml)	Sudden strong urge to pee?	Did you leak? (please tick)	What were you doing at the time? Sneezing, lifting, arriving home, sleeping, etc.	
11.00am	150ml	Juice	100ml	Yes / No	✓	Running	
				Yes / No			
				Yes / No			
				Yes / No			
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