

Date: _____ # of pads used: _____ Type of day (work/home/etc): _____

Time	Fluid Intake	Food Intake	Void time	Leak Activity	Stool Type	Time	Fluid Intake	Food Intake	Void time	Leak Activity	Stool Type
12:00						12:00					
1:00						1:00					
2:00						2:00					
3:00						3:00					
4:00						4:00					
5:00						5:00					
6:00						6:00					
7:00						7:00					
8:00						8:00					
9:00						9:00					
10:00						10:00					
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BLADDER & BOWEL LOG

The purpose of the bladder and bowel log is to document your function. A log can give you and your therapist an excellent picture of your habits and patterns.

Please keep a record of 3 full days. Try to pick days that will be typical of your current function. Pick a variety of work/home days which accurately reflect your habits.

It can be difficult to remember what happened in the morning at the end of the day, so fill it out as you go through the day.

INSTRUCTIONS:

TIME:

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

FLUID INTAKE:

Record the type and amount of fluid you drink. For sodas/tea/coffee include whether caffeinated or not. Record the volume in ounces or approximate ounces.

FOOD INTAKE:

Record the type of foods you ate. If you need more space please use another page to write out in more detail.

VOID TIME:

Once your urine stream starts, count "one-one thousand" until your urine flow stops. The number of seconds is approximately equal to the number of ounces you voided

LEAK ACTIVITY AND TYPE:

- Record type of leakage (U- urine, B-bowel).
- Record size of leakage (S-small, M-medium, L-large).
- Record cause of leakage by what activity you were doing (cough, sneeze, strong urge)

STOOL TYPE:

- Type 1: Separate hard lumps
- Type 2: Sausage shaped but lumpy
- Type 3: Like a sausage with cracks on the surface
- Type 4: Like a sausage or snake, smooth and soft
- Type 5: Soft blobs with clear-cut edges (passes easily)
- Type 6: Fluffy pieces with ragged edges, a mushy stool
- Type 7: Diarrhea