

# Bladder diary – Pre PNE / 1st stage



## Information for patients Urology

Name:

Date of Birth:

Hospital No:

NHS No:

*Patient details  
or sticker*

Please keep this diary as accurate as possible.

**Instructions:** to keep a chart of urine output for 4 days. Please measure and record all urine that you pass and any leakage you experience. Record on the chart when you went to bed and when you got up. If you wish you can record your fluid input but this isn't necessary.

Thank you

### Example

Time	Urine Output - Self	Urine Output - Catheter	Liquid Intake mls	Wet	Urgency / Pad Use / Comments
07:00AM	200mls			+++	*** prior to wetting Changed pad
08:00			150mls		
09:00					

### Key

#### Urgency:

- \* need / desire to go
- \* \* some urgency
- \* \* \* very urgent

#### Leakage:

- + few drops
- + + medium loss
- + + + soaked / bladder emptied

Day / date:

Time	Urine Output - Self	Urine Output - Catheter	Liquid Intake mls	Wet	Urgency / Pad Use / Comments
07:00AM					
08:00					
09:00					
10:00					
11:00					
12:00PM					
13:00					
14:00					
15:00					
16:00					
17:00					
18:00					
19:00					
20:00					
21:00					
22:00					
23:00					
00:00					
01:00					
02:00					
03:00					
04:00					
05:00					
06:00					

Day / date:

Time	Urine Output - Self	Urine Output - Catheter	Liquid Intake mls	Wet	Urgency / Pad Use / Comments
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08:00					
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15:00					
16:00					
17:00					
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19:00					
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00:00					
01:00					
02:00					
03:00					
04:00					
05:00					
06:00					

Day / date:

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11:00					
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01:00					
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04:00					
05:00					
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Day / date:

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