

## **INSTRUCTIONS**

## **Urine Frequency and Volume Chart**

## Instructions

Name: \_

Please complete this chart for 1-3 days and nights (Consecutive & home or work days?)

If you are out and cannot measure the volume, at least write the time you voided in the "Time" column and write "Out" in the "Volume" Column.

**Date:** write the date for each day you chart

**Time:** write the time, each time you empty your bladder

**Urine Volume:** measure the volume of urine you pass each time in a jug (in mis) and write the

number next to the time. Sit down on the toilet to empty your bladder.

**Leakage:** note each time you leak <u>any</u> urine.

If it is a damp spot (smaller than a \$2 coin) write "D" If it is a wet spot (larger than a \$2 coin) write "W"

If it runs down your leg, write "F" for Flood

**Comment:** comment on what you were doing when your bladder leaked, e.g. "cough",

"sneeze", "tennis", "getting out of bed" or urge. Urge is when you feel a very

strong urge to void, but you don't make it to the toilet in time.

**Drinks (What):** record every drink you have, e.g.: tea, coffee, decaf tea, water, coke and juice.

**Drinks (Amount):** record the amount you drink (in mis). Don't record the time you drink.

Bring this chart to your next appointment

## **Urine Frequency and Volume Chart**

Date	Time	Urine Volume	Leakage	Comment	Drinks (What)	Drinks (Amounts)

Tel: 250-940-6010

Date Received:



Date	Time	Urine Volume	Leakage	Comment	Drinks (What)	Drinks (Amounts)