Day Three

Instructions:

1. Use this page for **day three of a three-day diary**. The three days you choose do not have to be in a row; however, each day must be a full 24 hours during which it is convenient for you to measure every void.
2. Begin recording when you wake up in the morning and continue for 24 hours.
3. Make a separate entry each time you void, leak or have anything to drink.
4. Measure voids (mL measurements) using the hat. If you are not at home, use the following scale to measure the amount of urine voided: 1=small, 2=medium, 3=large.
5. Measure fluid intake in ounces.
6. When recording a leak, use the following scale: 1=drops/damp, 2=wet/soaked, 3=bladder emptied. Indicate your activity during the leak and if you had an urge to void (yes or no; strong or not)

Time	Fluid Intake (Type and amount in ounces)	Amount Voided (mL)	Involuntary Urine Leakage (scale 1-3)	Activity During Leak	Was there an urge?
Example					
7:05		350 mL			
7:40	Coffee 8 oz				
8:10			2	Walking from car	Strong urge

Example Diary

Day 3 **Date:**_____

Time	Fluid Intake (Type and amount in ounces)	Amount Voided (mL)	Involuntary Urine Leakage (scale 1-3)	Activity During Leak	Was there an urge?

Any other notations you care to make:_____

cut along this line for a one-day diary

Kegel Exercises

Kegel Exercises Strengthen Pelvic Muscles

If you need additional help identifying and exercising your pelvic muscles, we have a physical therapist who is trained to evaluate your muscle strength and help you learn how to perform Kegel exercises. Ask your provider for information.

Find Your Pelvic Muscles

- Try to stop your urinary stream. If you succeed, you have identified the right muscles to exercise.
- Exercising the muscles around the rectum will also strengthen those around the vagina and under the bladder. Squeeze the muscles that would prevent gas from escaping from your rectum.
- Do not tighten your stomach and back muscles or squeeze your legs together as you isolate and contract your pelvic muscles.

Kegel Exercise Routine

- Begin your routine lying down. As you get stronger, you can exercise while sitting or standing.
- Pull in and hold a pelvic muscle squeeze for five seconds; relax for five seconds.
- Do 10 sets of repetitions three times a day.
- Increase your hold by one second each week until you are contracting for 10 seconds.
- Rest and breathe between contractions.

Source: American Urogynecologic Society

Premier Health
Premier Physician Network

Lifestages Centers for Women
(937) 277-8988

Beavercreek
4235 Indian Ripple Rd.
Suite 210
Beavercreek, Ohio 45440

Centerville
6611 Clyo Road
Suite D
Centerville, Ohio 45459

Dayton
One Wyoming Street
Berry Women's Center
Suite 4130
Dayton, Ohio 45409

Englewood
9000 North Main Street
Suite 232
Englewood, Ohio 45415

Huber Heights
6251 Miami Valley Way
Suite 130
Huber Heights, Ohio 45424

Middletown
200 Medical Center Drive
Suite 160
Middletown, Ohio 45005

Springboro
630 N. Main Street
Suite 200
Springboro, Ohio 45066

S-C-WMN82178-7/2018

Bladder Diary

One- to Three-Days

Lifestages Centers for Women

Premier Health
Premier Physician Network

LifestagesCentersForWomen.com

Day One

Instructions:

1. If your provider has asked for a **one-day diary**, use this page. If your provider has asked for a three-day diary, begin with this page. The days you choose do not have to be in a row.
2. Choose a 24-hour period when it is convenient for you to measure every void.
3. Begin recording when you wake up in the morning and continue for a full 24 hours. (see example, below)
4. Make a separate entry each time you void, leak or have anything to drink.
5. Measure voids (mL measurements) using the hat you were given in our office. If you are not at home, use the following scale to measure the amount of urine voided: 1=small, 2=medium, 3=large.
6. Measure fluid intake in ounces.
7. When recording a leak, use the following scale: 1=drops/damp, 2=wet/soaked, 3=bladder emptied. Indicate your activity during the leak and if you had an urge to void (yes or no; strong or not)

Time	Fluid Intake (Type and amount in ounces)	Amount Voided (mL)	Involuntary Urine Leakage (scale 1-3)	Activity During Leak	Was there an urge?
Example					
7:05		350 mL			
7:40	Coffee 8 oz				
8:10			2	Walking from car	Strong urge

Example Diary

Day 1 **Date:**_____

Time	Fluid Intake (Type and amount in ounces)	Amount Voided (mL)	Involuntary Urine Leakage (scale 1-3)	Activity During Leak	Was there an urge?

Any other notations you care to make:_____

cut along this line for a one-day diary

Day Two

Instructions:

1. Use this page for **day two of a three-day diary**. The days you choose do not have to be in a row; however, each day must be a full 24 hours during which it is convenient for you to measure every void.
2. Begin recording when you wake up in the morning and continue for 24 hours.
3. Make a separate entry each time you void, leak or have anything to drink.
4. Measure voids (mL measurements) using the hat. If you are not at home, use the following scale to measure the amount of urine voided: 1=small, 2=medium, 3=large.
5. Measure fluid intake in ounces.
6. When recording a leak, use the following scale: 1=drops/damp, 2=wet/soaked, 3=bladder emptied. Indicate your activity during the leak and if you had an urge to void (yes or no; strong or not)

Time	Fluid Intake (Type and amount in ounces)	Amount Voided (mL)	Involuntary Urine Leakage (scale 1-3)	Activity During Leak	Was there an urge?
Example					
7:05		350 mL			
7:40	Coffee 8 oz				
8:10			2	Walking from car	Strong urge

Example Diary

Day 2 **Date:**_____

Time	Fluid Intake (Type and amount in ounces)	Amount Voided (mL)	Involuntary Urine Leakage (scale 1-3)	Activity During Leak	Was there an urge?

Any other notations you care to make:_____