Bladder Diary

UROLOGY SAN ANTONIO

Patient Name: **DOB:**

1. Begin your diary when you wake up each day and continue for three (3) days and nights.
2. On the first day only, use a measuring cup to catch your urine and record the amount each time. If you use a catheter to drain your bladder, record the amount as well.
3. On the second and third day, simply mark the time of each void, urgency, and leakage. (Whether or not you leaked before getting to the toilet).
4. Contact the OAB patient navigator when you finish the bladder diary at 210-614-4544 ext. 1634.

Date	Time	Leak (none, mild, moderate, soaked)	Urgency Rate 1-5 (5 is high)	Amount Voided (onces or cc)	Cather Amount (if using catheter)	Behavior / Activity (coughing, laughing, sneezing, walking)

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