

# AlfredHealth

Alfred  Sandringham  Caulfield

Unit:.....

## BLADDER CHART MEASURE

### Day 1

Measure your urine and record your fluid intake for 2 days and 2 nights.  
 Start from midnight on a day that suits you.  
 If you have any urine leakage, record those too.

UR

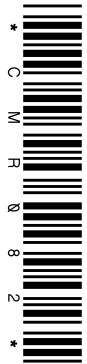
Last name

First name/s

Address

Date of birth  Sex at birth  Female  Male  Other

Date: <hr/>	How urgent was the need to pass urine? 0 = no urge 1 = very weak 2 = weak 3 = normal 4 = strong 5 = very strong	URINE PASSED			FLUID INTAKE		
		Record the amount of urine passed into the toilet	Indicate by ticking (✓) if your Pad/Pants are:			Amount	Type of drink / fluids e.g. Tea, Juice, Soup
Dry	Damp		Wet				
<b>Example</b>	<b>3</b>	<b>200 mL</b>		✓		<b>100 mL</b>	<b>Water</b>
12 Midnight							
1 AM							
2 AM							
3 AM							
4 AM							
5 AM							
6 AM							
7 AM							
8 AM							
9 AM							
10 AM							
11 AM							
12 Noon							
1 PM							
2 PM							
3 PM							
4 PM							
5 PM							
6 PM							
7 PM							
8 PM							
9 PM							
10 PM							
11 PM							



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Unit:.....

## BLADDER CHART MEASURE

### Day 2

UR

Last name

First name/s

Address

Date of birth  Sex at birth  Female  Male  Other

Measure your urine and record your fluid intake for 2 days and 2 nights.  
 Start from midnight on a day that suits you.  
 If you have any urine leakage, record those too.

Date: <hr/>	How urgent was the need to pass urine? 0 = no urge 1 = very weak 2 = weak 3 = normal 4 = strong 5 = very strong	URINE PASSED			FLUID INTAKE		
		Record the amount of urine passed into the toilet	Indicate by ticking (✓) if your Pad/Pants are:			Amount	Type of drink / fluids e.g. Tea, Juice, Soup
Dry	Damp		Wet				
<i>Example</i>	<b>3</b>	<b>200 mL</b>		✓		<b>100 mL</b>	<b>Water</b>
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