

How to Complete Your Bladder Diary

Please read carefully before you begin

Why This Diary Matters

Your bladder diary is a clinical tool that helps the urologist understand your bladder behaviour during your normal daily routine.

Completing it carefully helps us identify patterns, make an accurate diagnosis, and plan the best treatment for you.

It also helps you understand the link between fluid intake and bladder behaviour — often the first step towards improvement.

Recording Beverages

Write what you drink and how much in the Beverage column every time you have a drink:

Container	Volume
Small cup / espresso	100 ml
Standard tea cup	150 ml
Mug	250 ml
Standard glass	200 ml
Large glass / tumbler	300 ml

Recording Leakage

Note any leakage in the Leakage column using these codes:

- › P = Needed to change pants or underwear
- › C = Needed to change outer clothing
- › PAD = Needed to change a pad or liner

If leakage occurred but no change was needed, place a small tick.

What We Are Looking For

Your diary tells us how often you pass urine, how much each time, whether you wake at night (nocturia), your fluid intake patterns, and any pattern to leakage. This guides decisions about bladder retraining, medication, or further investigation. Thank you for completing this carefully.

When to Keep the Diary

- › Complete for at least 3 consecutive days
- › Include at least one typical working day
- › Include at least one weekend day if possible
- › Record events as they happen — not from memory later
- › Bring the completed diary to your next appointment

Recording Urine Output

Record the volume passed each time in the Urine (ml) column.

- › Use a measuring jug — available from most pharmacies
- › Record in millilitres (ml)
- › Record all voids including night-time trips

Daily Totals

At the end of each day add up your totals and enter them in the Total Volume row.

- › Normal urine output: approximately 1,500–2,500 ml per day
- › Normal fluid intake: approximately 1,500–2,000 ml per day

Bladder Diary

Day 1 of 3

Please complete and bring to your appointment

Name: _____

Date of Birth: _____

Date: _____

BEVERAGE: What & how much each hour (cup = 150 ml · mug = 250 ml)

URINE: Measure volume passed in ml using a measuring jug

LEAKAGE: P = changed pants C = changed clothing PAD = changed pad

	Time	Beverage	Urine (ml)	Leakage
Morning	6 AM			
	7 AM			
	8 AM			
	9 AM			
	10 AM			
	11 AM			
	12 Noon			
Afternoon	1 PM			
	2 PM			
	3 PM			
	4 PM			
	5 PM			
Evening	6 PM			
	7 PM			
	8 PM			
	9 PM			
Night	10 PM			
	11 PM			
	12 Night			
	1 AM			
	2 AM			
	3 AM			
	4 AM			
	5 AM			
Total Volume (ml)				

Bladder Diary

Day 2 of 3

Please complete and bring to your appointment

Name: _____

Date of Birth: _____

Date: _____

BEVERAGE: What & how much each hour (cup = 150 ml · mug = 250 ml)

URINE: Measure volume passed in ml using a measuring jug

LEAKAGE: P = changed pants C = changed clothing PAD = changed pad

	Time	Beverage	Urine (ml)	Leakage
Morning	6 AM			
	7 AM			
	8 AM			
	9 AM			
	10 AM			
	11 AM			
	12 Noon			
Afternoon	1 PM			
	2 PM			
	3 PM			
	4 PM			
	5 PM			
Evening	6 PM			
	7 PM			
	8 PM			
	9 PM			
Night	10 PM			
	11 PM			
	12 Night			
	1 AM			
	2 AM			
	3 AM			
	4 AM			
	5 AM			
Total Volume (ml)				

Bladder Diary

Day 3 of 3

Please complete and bring to your appointment

Name: _____

Date of Birth: _____

Date: _____

BEVERAGE: What & how much each hour (cup = 150 ml · mug = 250 ml)

URINE: Measure volume passed in ml using a measuring jug

LEAKAGE: P = changed pants C = changed clothing PAD = changed pad

	Time	Beverage	Urine (ml)	Leakage
Morning	6 AM			
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	7 PM			
	8 PM			
	9 PM			
Night	10 PM			
	11 PM			
	12 Night			
	1 AM			
	2 AM			
	3 AM			
	4 AM			
	5 AM			
Total Volume (ml)				