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Bladder Diary

Name: _____ Date: _____

Time of Day	Type & Amount of Fluid Intake	Type & Amount of Food Eaten	Amount Voided (Ounces)	Amount of Leakage (Small, Med, Large)	What were you doing when leakage occurred?	Did you feel like you had to urinate?

Ounces can be calculated by counting “1 Mississippi, 2 Mississippi, 3 Mississippi, etc.…”
Leakage amount: Small = few drops, Medium = wet underwear, Large = wet outerware

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