

FREQUENCY AND VOLUME CHART

Name :

Date of Birth:

What you need to do

For 3 days and nights record how much you drink (intake) and how much urine you pass (output)

- They DO NOT have to be 3 days in a row.
Pick days which will be convenient for you to measure and record
- Please continue your normal daily eating / drinking patterns and daily activities
- Use a plastic jug which measures in millilitres (mls) or ounces (oz)
- If you pass urine but cannot measure the volume, then put a √ in the appropriate column
- In the first column, please mark **A** for the time you get up in the morning and
B for the time you go to bed
each day
- If you experience a leak or unintentional loss of urine, then please record the details in the 3 columns on the right
- Please deliver the completed chart to your doctor for analysis and eventual discussion of the results and treatment decisions arising.

Thank you

Day 1 - Date					
Time	intake	output	Amount leaked 1=drops/damp 2=wet/soaked 3=emptied bladder	Pad change Yes/No	Activity during leak
6.00 am					
7.00 am					
8.00 am					
9.00 am					
10.00 am					
11.00 am					
12.00 md					
1.00 pm					
2.00 pm					
3.00 pm					
4.00 pm					
5.00 pm					
6.00 pm					
7.00 pm					
8.00 pm					
9.00 pm					
10.00 pm					
11.00 pm					
12.00 mn					
1.00 am					
2.00 am					
3.00 am					
4.00 am					
5.00 am					
<i>total</i>					

Day 2 - Date					
Time	intake	output	Amount leaked 1=drops/damp 2=wet/soaked 3=emptied bladder	Pad change Yes/No	Activity during leak
6.00 am					
7.00 am					
8.00 am					
9.00 am					
10.00 am					
11.00 am					
12.00 md					
1.00 pm					
2.00 pm					
3.00 pm					
4.00 pm					
5.00 pm					
6.00 pm					
7.00 pm					
8.00 pm					
9.00 pm					
10.00 pm					
11.00 pm					
12.00 mn					
1.00 am					
2.00 am					
3.00 am					
4.00 am					
5.00 am					
<i>total</i>					

Day 3 - Date					
Time	intake	output	Amount leaked 1=drops/damp 2=wet/soaked 3=emptied bladder	Pad change Yes/No	Activity during leak
6.00 am					
7.00 am					
8.00 am					
9.00 am					
10.00 am					
11.00 am					
12.00 md					
1.00 pm					
2.00 pm					
3.00 pm					
4.00 pm					
5.00 pm					
6.00 pm					
7.00 pm					
8.00 pm					
9.00 pm					
10.00 pm					
11.00 pm					
12.00 mn					
1.00 am					
2.00 am					
3.00 am					
4.00 am					
5.00 am					
<i>total</i>					

Spare chart (if needed) Day - Date					
Time	input	output	Amount leaked 1=drops/damp 2=wet/soaked 3=emptied bladder	Pad change Yes/No	Activity during leak
6.00 am					
7.00 am					
8.00 am					
9.00 am					
10.00 am					
11.00 am					
12.00 md					
1.00 pm					
2.00 pm					
3.00 pm					
4.00 pm					
5.00 pm					
6.00 pm					
7.00 pm					
8.00 pm					
9.00 pm					
10.00 pm					
11.00 pm					
12.00 mn					
1.00 am					
2.00 am					
3.00 am					
4.00 am					
5.00 am					
<i>total</i>					

IPSS interpretation

Frequent findings include:

- **Normal voided volume and frequency**
- **Increased volume day and night**
Polyuria = 24 hr output > 3 litres
Managed by lifestyle intervention + decreased intake (never <1500ml/day)
- **Increased volume at night, normal during the day**
Nocturnal polyuria = > 33% of total output occurs at night
Suggestive of fluid retaining states, hormonal fluid balance abnormality or idiopathic in origin.
This is a commonly occurring bothersome symptom caused by physiological problems (i.e. renal, cardiac, CNS or endocrine)
- **Normal volume + increased frequency day and night**
Suggesting a high fluid intake.
This may be related to diabetes mellitus or diabetes insipidus, but is more usually habitual.
- **Normal volume and daytime frequency + increased night frequency**
Nocturia, suggesting storage LUTS
- **Reduced volume with variation in the volume voided**
Suggestive of underlying detrusor overactivity as the bladder contracts at variable degrees of distension before maximum capacity, erroneously informing the patient that it is full, resulting in urinary frequency and low and variable voided volumes.
- **Reduced volume with minimal variation in the volume voided**
Suggesting bladder wall pathology such as carcinoma in situ or painful bladder syndrome/interstitial cystitis or carcinoma in situ.