

Your guide to

living well

with an intermittent catheter

Making life easier

Ostomy Care, Continence Care, Wound & Skin Care and Interventional Urology



Coloplast

Keeping a diary can help you understand your bladder habits

Do you have to go more often than usual? Does urine leakage keep you from going out? Is your bladder management plan actually working?

Asking these questions may help you discover patterns concerning your bladder issues.

The bladder diary is a great tool to document your habits before discussing your bladder control with your nurse or doctor. Please, complete the diary for three days or the number of days directed by your nurse or doctor.

How to use the diary


Begin recording your bladder habits when you wake up in the morning and continue for a full 24 hours.

1. Remember to note the time of every entry.
2. Measure everything you drink – including coffee and tea.
3. Measure the amount of urine every time you void – also at night.
4. When you void, mark numbers 1, 2, 3 according to the specification of catheter use.
5. When you experience leakage, mark numbers 1, 2, 3 according to the specification of the amount in the diary.
6. Make a note of what activity you


were doing when the leakage occurred.




Bladder Diary Day 1

Time AM 	Fluid intake In ml	Voided amount In ml	Catheter usage 1=success 2=w/o success 3= none	Leakage	
				Amount 1: Drops 2: Wet 3: Soaked	Activity E.g. coughing, walking or Exercising


Bladder Diary Night 1

Time PM 	Fluid intake In ml	Voided amount In ml	Catheter usage 1=success 2=w/o success 3= none	Leakage	
				Amount 1: Drops 2: Wet 3: Soaked	Activity E.g. coughing, walking or Exercising


Bladder Diary Day 2

Time AM 	Fluid intake <i>In ml</i>	Voided amount <i>In ml</i>	Catheter usage 1=success 2=w/o success 3= none	Leakage	
				Amount 1: Drops 2: Wet 3: Soaked	Activity E.g. coughing, walking or Exercising


Bladder Diary Night 2

Time PM 	Fluid intake <i>In ml</i>	Voided amount <i>In ml</i>	Catheter usage 1=success 2=w/o success 3= none	Leakage	
				Amount 1: Drops 2: Wet 3: Soaked	Activity E.g. coughing, walking or Exercising

Bladder Diary Day 3

Time AM 	Fluid intake In ml	Voided amount In ml	Catheter usage 1=success 2=w/o success 3= none	Leakage	
				Amount 1: Drops 2: Wet 3: Soaked	Activity E.g. coughing, walking or Exercising

Bladder Diary Night 3

Time PM 	Fluid intake In ml	Voided amount In ml	Catheter usage 1=success 2=w/o success 3= none	Leakage	
				Amount 1: Drops 2: Wet 3: Soaked	Activity E.g. coughing, walking or Exercising

Our mission is to make life easier for people with intimate healthcare needs. This requires both an understanding of their medical challenges and the many other concerns that impact their lives. These can be related to social situations, travel, work, intimacy, exercise or just a trip to the shops.

We gain this understanding by listening to consumers, to nurses and specialists who care for them. It is what inspires us and enables us to deliver the products and services that can make a difference.



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