ATLANTA PHYSICAL THERAPY LLC

Bladder Diary:

Difficulty Getting Pee Out

3 Easy Steps!

1) Take 3 days to complete the diary on the pages listed below (Days do NOT have to be consecutive)

2) ***Schedule an appointment*** to review the results of your Bladder Diary

3) Create an action plan with your physical therapist to improve the quality of your life

Phone: (404)390-0255
Website: https://www.physicaltherapyatl.com/bookings-checkout/bladder-bowel-diary-review/

Day 1

Time	Food & Drink	Trips to the Bathroom	Time to Void	Did you feel a strong urge to go?	Activity leading up to void
	- What Kind? - How Much?	- # of Trips? - How much urine?	- How much time?	- Y/N	
Example: *2-3PM*	*Example:* - *Soda: 12 oz can* - *Apples: 3*	*Example:* - *1 trip, small amount*	*Example:* - *~10 min*	*Example:* - *Yes*	*Example:* - *Reading*

Day 2

Time	Food & Drink	Trips to the Bathroom	Time to Void	Did you feel a strong urge to go?	Activity leading up to void
	- What Kind? - How Much?	- # of Trips? - How much urine?	- How much time?	- Y/N	
Example: *2-3PM*	*Example:* - *Soda: 12 oz can* - *Apples: 3*	*Example:* - *1 trip, small amount*	*Example:* - *~10 min*	*Example:* - *Yes*	*Example:* - *Reading*

Day 3

Time	Food & Drink	Trips to the Bathroom	Time to Void	Did you feel a strong urge to go?	Activity leading up to void
	- What Kind? - How Much?	- # of Trips? - How much urine?	- How much time?	- Y/N	
Example: *2-3PM*	*Example:* - *Soda: 12 oz can* - *Apples: 3*	*Example:* - *1 trip, small amount*	*Example:* - *~10 min*	*Example:* - *Yes*	*Example:* - *Reading*