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VOIDING DIARY

PATIENT NAME:_____**PATIENT DATE OF BIRTH:** _____

Purpose: To measure the volume of the child's every urination over a 24-hour period, on two separate, consecutive days.

Directions: On the chosen day, as soon as the child wakes up, place a "hat" in the toilet, and have the child urinate into the "hat". Measure the volume in cc's and record that information on this sheet. Empty the "hat", wash it with water, and have it ready for the next urination. Repeat with every urination. Do not encourage the child to urinate, rather let him or her tell you when they feel the necessity. We are trying to measure their urge to urinate.

DAY 1	**DATE:**			**DAY 2**	**DATE:**		
Time	AMOUNT VOIDED IN CC's	WET	DRY	Time	AMOUNT VOIDED IN CC's	WET	DRY

Practice Limited to Genitourinary Problems of Infants, Children and Adolescents

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