Urine Frequency Diary

Instructions:

- Write down every time you go to the bathroom to urinate – date and time;
- Check (✓) the box that describes the amount of urine you passed;
- Write down any symptoms you feel, like burning, pain, blood, smell, etc.;
- Use your diary when talking with your primary nurse or physician;
- Bring your diary with you to your clinic appointments.

Date/Time	Urge - but no urine	Dribble	Small Amount	Normal Amount	Symptoms "What did you feel, smell, or see?"

Reference: Capital Health, Cancer Care Nova Scotia (2004), Cystitis.