

# Bladder Symptom Diary

Track bathroom trips, pain, urgency, and daily context for one week. Fill in one row per trip as you go, or at the end of each day.

Week of: \_\_\_\_\_ Name: \_\_\_\_\_

<b>Pain &amp; Urgency scale:</b>	0	1	2	3	4	5	6	7	8	9	10
	none					moderate					severe

Time	✓	Pain (0-10)	Urgency (0-10)	Food / drink	Notes
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**Day 1** Date: \_\_\_\_\_ Day of week: \_\_\_\_\_ Stress: \_\_\_\_\_ Sleep: \_\_\_\_\_ Cycle day: \_\_\_\_\_


Bathroom trips: \_\_\_\_\_ Average pain: \_\_\_\_\_ Average urgency: \_\_\_\_\_

**Day 2** Date: \_\_\_\_\_ Day of week: \_\_\_\_\_ Stress: \_\_\_\_\_ Sleep: \_\_\_\_\_ Cycle day: \_\_\_\_\_


Bathroom trips: \_\_\_\_\_ Average pain: \_\_\_\_\_ Average urgency: \_\_\_\_\_

**Day 3** Date: \_\_\_\_\_ Day of week: \_\_\_\_\_ Stress: \_\_\_\_\_ Sleep: \_\_\_\_\_ Cycle day: \_\_\_\_\_


Bathroom trips: \_\_\_\_\_ Average pain: \_\_\_\_\_ Average urgency: \_\_\_\_\_

**Day 4** Date: \_\_\_\_\_ Day of week: \_\_\_\_\_ Stress: \_\_\_\_\_ Sleep: \_\_\_\_\_ Cycle day: \_\_\_\_\_




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**Bladder Symptom Diary – continued**

Time	✓	Pain (0–10)	Urgency (0–10)	Food / drink	Notes
<b>Day 5</b> Date: _____ Day of week: _____ Stress: _____ Sleep: _____ Cycle day: _____					
Bathroom trips: _____ Average pain: _____ Average urgency: _____					
<b>Day 6</b> Date: _____ Day of week: _____ Stress: _____ Sleep: _____ Cycle day: _____					
Bathroom trips: _____ Average pain: _____ Average urgency: _____					
<b>Day 7</b> Date: _____ Day of week: _____ Stress: _____ Sleep: _____ Cycle day: _____					
Bathroom trips: _____ Average pain: _____ Average urgency: _____					



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