Child’s name

INTAKE/OUTPUT CHART Date

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Time | Drinks  volume | Drinks  type | Urine volume | Nappy/pad/  pants - damp/wet/ soaking | Stools quantity -  small/medium/ large | Stool type –  Bristol Stool number | Where were stools passed? | |
| Into  nappy/pad/ pants? | Into  toilet/potty? |
| 7 am |  |  |  |  |  |  |  |  |
| 8 am |  |  |  |  |  |  |  |  |
| 9 am |  |  |  |  |  |  |  |  |
| 10 am |  |  |  |  |  |  |  |  |
| 11 am |  |  |  |  |  |  |  |  |
| 12 pm |  |  |  |  |  |  |  |  |
| 1 pm |  |  |  |  |  |  |  |  |
| 2 pm |  |  |  |  |  |  |  |  |
| 3 pm |  |  |  |  |  |  |  |  |
| 4 pm |  |  |  |  |  |  |  |  |
| 5 pm |  |  |  |  |  |  |  |  |
| 6 pm |  |  |  |  |  |  |  |  |
| 7 pm |  |  |  |  |  |  |  |  |
| 8 pm |  |  |  |  |  |  |  |  |
| 9 pm |  |  |  |  |  |  |  |  |
| 10 pm |  |  |  |  |  |  |  |  |
| Night  Time (tick) |  |  | Passed urine? | Wet bed? |  |  |  |  |
| TOTALS |  |  |  |  |  |  |  |  |

Enuresis Team 15/02/2024