Bowel	Diary	Keep this diary accurately each day, for about 7 days Use with Bristol Stool Form Chart (available on the Continence Foundation website www.continence.org.au)				Nam	ne	Continence of Alstralia
							Date Week beginning	
Day/Time of every bowel movement Stool Chart Type 1-7)		Did you feel the urge to go? (Yes/No)	Accident/soiling? Record time in left hand column ◀ and note description of leakage in this column ▾	Fluid check (all drinks taken during the 24 hrs - types and quantities)	Laxatives, aperients, fibre supplements, etc (what taken and when)		Comments (include when bowel movement or leakage happened, eg "half hour after breakfast", "11 am, soiling when I was out walking")	
			nce nurse about a bowel probl					