



# Information Sheet

FREQUENCY VOLUME CHART/CUP\_01\_11

Name:

## Frequency/volume chart

Please complete this chart for 3 days or as discussed with your doctor.

Use a jug to measure the amount of urine that you pass and enter the amount in a box at the appropriate time. If you are unable to measure the volume (e.g. if you are at work) then put a tick in the box instead. However, please try and perform the measurements on a typical day, and on a day when you are able to measure every time you void.

Here is an example:

Time	Day 1	Day 2	Day 3
	Volume	Volume	Volume
7am	400ml		500ml
8am		300ml	
9am		100ml	250ml

Time	Day 1	Day 2	Day 3
	Volume	Volume	Volume
6 am			
7 am			
8 am			
9 am			
10 am			
11 am			
12 noon			
1 pm			
2 pm			
3 pm			
4 pm			
5 pm			
6 pm			
7 pm			
8 pm			
9 pm			
10 pm			
11 pm			
12 midnight			
1 am			
2 am			
3 am			
4 am			
5 am			

Please remember to bring this sheet with you when you come for your appointment.