





DATE:									
Time A.M. 	Fluid intake (in ml)	Urine passed (in ml)	Leakage? 1 = drops/ damp 2 = soaked	Catheter used? 1 = success 2 = no success 3 = not used	Time P.M. 	Fluid intake (in ml)	Urine passed (in ml)	Leakage? 1 = drops/damp 2 = soaked	Catheter used? 1 = successful 2 = no success 3 = not used

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NOTES _____



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