

Day 1					
Time	Drink	Urine	Accidental Leak	What Kind	How much
		How Urgent	How Much	Yes or No	
Example	Coffee	2 cups	1-3 (3= most urgent)	25mls	Yes
6 - 7am					
7 - 8am					
8 - 9am					
9 - 10am					
10 - 11am					
11 - 12 midday					
1 - 2pm					
2 - 3pm					
3 - 4pm					
4 - 5pm					
5 - 6pm					
6 - 7pm					
7 - 8pm					
8 - 9pm					
9 - 10pm					
10 - 11pm					
11 - 12 midnight					
12 - 1am					
1 - 2am					
2 - 3am					
3 - 4am					
4 - 5am					
5 - 6am					

Day 2					
Time	Drink	Urine	Accidental Leak	What Kind	How much
		How Urgent	How Much	Yes or No	
Example	Coffee	2 cups	1-3 (3= most urgent)	25mls	Yes
6 - 7am					
7 - 8am					
8 - 9am					
9 - 10am					
10 - 11am					
11 - 12 midday					
1 - 2pm					
2 - 3pm					
3 - 4pm					
4 - 5pm					
5 - 6pm					
6 - 7pm					
7 - 8pm					
8 - 9pm					
9 - 10pm					
10 - 11pm					
11 - 12 midnight					
12 - 1am					
1 - 2am					
2 - 3am					
3 - 4am					
4 - 5am					
5 - 6am					

# Frequency Volume Chart

## How to complete the frequency volume chart (FVC)

We use the FVC to assess how often you pass urine during the day and night. It will help your healthcare professional to diagnose and treat the symptoms of your overactive bladder and monitor the effects of treatment.

Please complete the FVC for 3 days in a row and fairly typical days (choose any three days to suit you). Most people find that a Friday and a weekend are the best days for completing the chart. Every 2 weeks fill in a chart for 3 days to check your progress.

**You must complete the chart as fully as possible and bring it with you to your next review appointment with your healthcare professional.**

## What you will need to fill in the chart

You will need a measuring jug to measure the urine you pass. This should be able to measure in millilitres (ml) and should hold at least 500ml.

## How you should fill in the chart

- Every time you have a drink, record what type of drink it is, for example coffee, and how much you have had; a cup, mug or can as shown.
- Each time you pass urine you will need to urinate into your jug.  
This is so that you can measure how much urine you pass. Write down the appropriate amount, for example 150ml, in the correct timeslot in the chart.
- Please also record how urgently you needed to urinate using a scale of 1 to 3 where:
  - 1 = you felt urgency to urinate but you could easily cope with it
  - 2 = you needed to urinate so urgently it interfered with your ability to carry out everyday activities
  - 3 = you needed to urinate very urgently which caused you discomfort and abruptly stopped you from doing an everyday activity
- If you had an accidental urine leak before you could get to the toilet, please indicate Yes, as shown in the example line. If not please indicate No.

Day 3					
Time	Drink		Urine		Accidental Leak Yes or No
	What Kind	How much	How Urgent	How Much	
Example	Coffee	2 cups	1-3 (3= most urgent)	25mls	Yes
6 - 7am					
7 - 8am					
8 - 9am					
9 - 10am					
10 - 11am					
11-12 midday					
1 - 2pm					
2 - 3pm					
3 - 4pm					
4 - 5pm					
5 - 6pm					
6 - 7pm					
7 - 8pm					
8 - 9pm					
9 - 10pm					
10 - 11pm					
11-12 midnight					
12 - 1am					
1 - 2am					
2 - 3am					
3 - 4am					
4 - 5am					
5 - 6am					