

Dear Parent/Carer

An appointment has been sent for your son / daughter to have a bladder assessment. This assessment is carried out to give the information about your child's specific bladder problems.

This information sheet explains what the assessment involves and will hopefully answer some questions you may have.

WHO CARRIES OUT THE ASSESSMENT?

A clinical nurse specialist will carry out the assessment, which will include a detailed history of your child's bladder problems and toileting habits.

WHAT DOES IT INVOLVE?

A number of tests will be carried out during the assessment (these are not painful), these help us to assess how well your son/daughter is able to empty their bladder.

PLEASE ATTEND THIS APPOINTMENT WITH A FULL BLADDER

Your child will be asked to pass urine into a special toilet that measures how fast and forcefully their urine comes out of their bladder. A bladder scan will then be carried out to see how well your child empties their bladder.

HOW LONG WILL IT TAKE?

The average assessment takes one hour.

To help with the assessment a frequency volume chart has been enclosed, it should be filled out over a two day period and then brought with you to your hospital appointment.

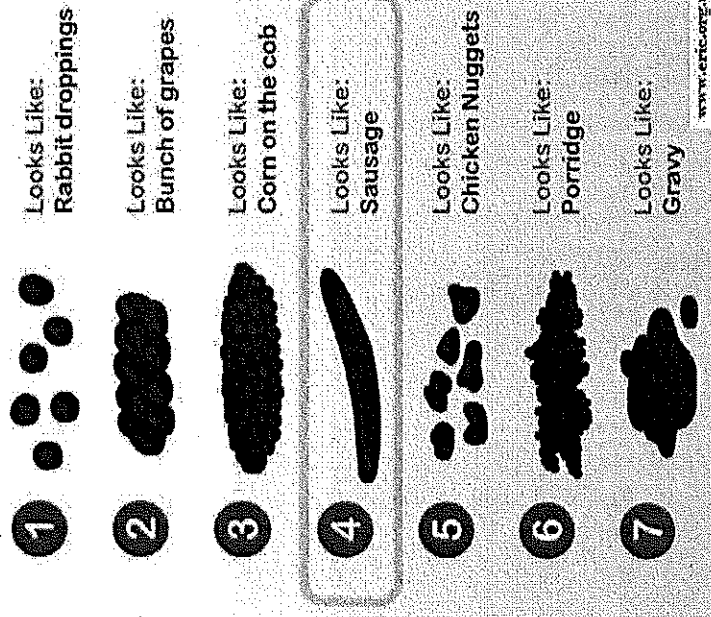
Thank you very much for completing the form and please do not forget to bring it with you to the hospital.

If you are unable or not intending to attend the appointment given please contact the appointments office where your appointment can be changed or offered to someone else. Thank you.

INTAKE/OUTPUT CHART

Instructions for parents completing intake/output charts

What does healthy poo look like?



1. Choose a day when your child is going to be home all day – not a school day!
2. Your doctor or nurse will tell you how many days they would like to be recorded.
The most important thing is accuracy – it doesn't matter if the days are not consecutive.
3. Write down *every* drink, *every* wee, including wetting, and *every* poo, including soiling. Write by the nearest hour – you don't have to record the exact time.
4. Please measure drinks and urine in mls.
5. If it is not possible to measure the occasional wee, please tick in the box to show the child has passed urine.
6. Do not *send* your child to the potty or toilet – try and record a normal day and let them go when they want to.
7. Some children will be able to wee straight into a measuring jug. If they can't, younger children can wee into a potty which you can then empty into a measuring jug. Older children might prefer to wee into a plastic bowl in the toilet – but make sure you catch *all* the wee! Tip into a measuring jug to measure.
8. In the **Stool Type** column, write down the number from the Bristol Stool Chart that best describes the poo – see image to the left.
9. If your child gets up at night for a wee, they can just use the toilet normally. Tick to say they have been. Tick if they wet the bed/nappy/pull-up.

Child's name _____ Date _____

INTAKE/OUTPUT CHART

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								