

# Frequency volume chart

DAY 1					
Time	Drinks		Urine		Accidental Leaks Y / N
	What kind?	How much?	How urgent? 1-3 (3 = most urgent)	How much?	
Example	Coffee	2 Cups	1-3	25 mLs	YES
6-7 am					
7-8 am					
8-9 am					
9-10 am					
10-11 am					
11-12 midday					
12-1 pm					
1-2 pm					
2-3 pm					
3-4 pm					
4-5 pm					
5-6 pm					
6-7 pm					
7-8 pm					
8-9 pm					
9-10 pm					
10-11 pm					
11-12 midnight					
12-1 am					
1-2 am					
2-3 am					
3-4 am					
4-5 am					
5-6 am					
Total					

DAY 2					
Time	Drinks		Urine		Accidental Leaks Y / N
	What kind?	How much?	How urgent? 1-3 (3 = most urgent)	How much?	
Example	Coffee	2 Cups	1-3	25 mLs	YES
6-7 am					
7-8 am					
8-9 am					
9-10 am					
10-11 am					
11-12 midday					
12-1 pm					
1-2 pm					
2-3 pm					
3-4 pm					
4-5 pm					
5-6 pm					
6-7 pm					
7-8 pm					
8-9 pm					
9-10 pm					
10-11 pm					
11-12 midnight					
12-1 am					
1-2 am					
2-3 am					
3-4 am					
4-5 am					
5-6 am					
Total					

DAY 3					
Time	Drinks		Urine		Accidental Leaks Y / N
	What kind?	How much?	How urgent? 1-3 (3 = most urgent)	How much?	
Example	Coffee	2 Cups	1-3	25 mLs	YES
6-7 am					
7-8 am					
8-9 am					
9-10 am					
10-11 am					
11-12 midday					
12-1 pm					
1-2 pm					
2-3 pm					
3-4 pm					
4-5 pm					
5-6 pm					
6-7 pm					
7-8 pm					
8-9 pm					
9-10 pm					
10-11 pm					
11-12 midnight					
12-1 am					
1-2 am					
2-3 am					
3-4 am					
4-5 am					
5-6 am					
Total					

## How to complete the frequency volume chart

The frequency volume chart (FVC) is designed 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.

The FVC should be completed over 3 consecutive and fairly typical days (choose any 3 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 evaluate your progress.

It is essential that you 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

- o You will need a measuring jug to measure the urine you pass. This should be measured (calibrated) in millilitres (mL) and should hold at least 500 mL.

## How you should fill in the chart

- o Every time you have a drink, record what type of drink it is, for example coffee, and how much you have had, for example a cup, mug or can, as shown below
- o Each time you pass urine you will need to urinate into your jug. This is so that you can measure how much urine you have passed. Write down the appropriate amount, for example 150 mL, in the correct timeslot in the chart
- o 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 tolerate 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
- o 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.

## Note to healthcare professional:

Please use the measures below to estimate the total volume of liquid consumed by the patient, for example 2 cups of coffee would approximate to  $150 \text{ mL} \times 2 = 300 \text{ mL}$ s

