

Bladder & Bowel Diary

CHILD'S NAME		
DATE OF BIRTH		Male / Female
ADDRESS	
	
	POSTCODE:	
TELEPHONE		
GP & SURGERY DETAILS	
	
	

Paediatric Continence Service

Lowe House HCRC
 103 Crab Street
 St Helens
 WA10 2DJ

Tel: 01744 626701

Email: paediatric.continenceservice@nhs.net

This information will help assist the clinician with your child's assessment and aid with any interventions and, if necessary, any treatments. Please return as instructed.

It is best if you can fill this diary in when they are at home rather than school, i.e. weekends / holidays.

