

Affix patient label here

Department of Urology

Date:

This questionnaire will help us to assess your bladder symptoms and decide on the best treatment for you. You may be asked to complete it at subsequent clinic visits in order to reassess your symptoms at that time. **Please answer these questions thinking about how you have been, on average over the PAST FOUR WEEKS.**

What is your main bladder symptom?

- Urinary leakage
 Urgency
 Frequency
 Catheter blockage, bypassing or leakage
 Bladder pain
 Autonomic dysreflexia

1. How often do you leak urine? (Tick one box)

- never 0
 About once a week or less often 1
 two or three times a week 2
 about once a day 3
 several times a day 4
 All the time 5

2. We would like to know how much urine you think leaks.

How much urine do you usually leak (whether you wear protection or not)? (Tick one box)

- none 0
 a small amount 2
 a moderate amount 4
 a large amount 6

3. Overall how much do your bladder symptoms interfere with your everyday life?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10
 Not at all a great deal

4. When does urine leak?

(please tick all that apply to you)

- never - urine does not leak
 leaks before you can get to the toilet
 leaks when you cough or sneeze
 leaks when you are asleep
 leaks when you are physically active/exercising
 leaks when you have finished urinating and are dressed
 leaks for no obvious reason
 leaks all the time

5. Do you use incontinence pads? Yes No

If yes, how many do you use per day?

1-2 3-4 5+

6. Have you had any complications that have required readmission to hospital?

Yes
 No

To be completed by clinician

Operating Surgeon:

- PJG
- GSM
- CAC
- MES
- MCD
- SpR

Treatment:

- High Dose Dysport
- High Dose Botox
- Low Dose Dysport
- Low Dose Botox

Timing of appointment:

- Pre First Treatment
- Follow-up First Treatment
- Pre Second Treatment
- Pre Third Treatment
- Pre Treatment

- Spinal injury patient
- Non-spinal injury patient

NB. Clinician - Please enter total scores in notes - then send form up in marked folder to the urology office for processing