










STOOL DIARY

Please Record All Bowel Movements

Person's Name:

DATE	Time of Bowel Movement (BM)	Incontinence, Stool Seepage Use Comments	Stool Consistency (Type 1-7, see image)	Medication*	Comments	Stool Images
		YES/NO				Type 1  Separate hard lumps, like nuts (hard to pass)
		YES/NO				Type 2  Sausage-shaped but lumpy
		YES/NO				Type 3  Like a sausage but with cracks on its surface
		YES/NO				Type 4  Like a sausage or snake, smooth and soft
		YES/NO				Type 5  Soft blobs with clear-cut edges, (passed easily)
		YES/NO				Type 6  Fluffy pieces with ragged edges, a mushy stool
		YES/NO				Type 7  Watery, no solid pieces. Entirely Liquid
		YES/NO				Figure: Bristol Stool Form Scale Neurogastroenterol Motil. 2016 Mar; 28(3): 443–448. Published online 2015 Dec 21. doi: 10.1111/nmo.12738

*Medication: Any prescription Pain Medications (i.e. Morphine, Percocet, OxyContin), Medications used to promote a BM (i.e. Milk of Magnesia, Ducolax), Clozapine.