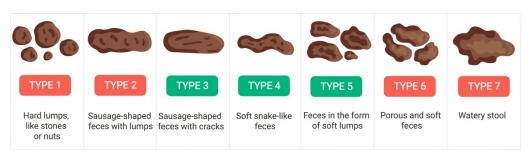
## **Bowel Symptom Checklist**



Circle the stool types that most resemble your child's

## **Bowel Movement Record Chart**

	Example	Day 1:	Day 2:	Day 3:	Day 4:	Day 5:	Day 6:	Day 7:
	w, 4/18							
Bowel Movement 1 Time?	8:15 AW S, 5, D							
Bowel Movement 2 Time?	11:45 AW L, 4, T, P							
Bowel Movement 3 Time?	7:00 PW L, 7, T, T							
Bowel Movement 4 Time?								
Smears/Leaks Y, 2 +imes Y/N & #	Y, 2 times							
Given? Y/N								

Size:	Consistency:	Toilet or Diaper/Underpants?	Toilet Independence
Small – S	See Bristol Stool Scale (#1-7)	Toilet – T	I – Independent (learner went to
Medium – M		Diaper/Underpants - D	toilet without being asked)
Large - L			P – Prompted (someone told the
			learner to go sit)