## Personal Daily Diary

Introduction	DESCRIPTIONS	EXAMPLES		
Use this <i>Personal Daily Diary</i> for 2–4 weeks to help you get the most out of your next doctor visit.	Stool Description	Loose; diarrhea; formed; hard, pellet-like; ribbon-shaped		
	Symptoms	Incomplete evacuation; strong urge; straining; incontinent; stain/smear		
For more information, please contact the International Foundation for	Gas	Belching; flatus		
Functional Gastrointestinal Disorders (IFFGD)	Pain	Abdominal cramping; lower intestinal cramping; pain on either side of abdomen; tenderness (tender when touched); rectal pain (sharp dull, burning; feels like a		
Toll Free at 1-888-964-2001 or visit www.aboutIBS.org		hard object is in rectum; cramping sensation in rectum)		
The objective of using this <b>Daily Diary</b> is to gain a better understanding of your bowel disorder.	Emotional Status How do you feel? Why?	Fine; happy; relaxed; anxious; nervous; sad; unhappy, depressed; fatigued; tired (wake up tired, wake up during the night) – mentally tired, physically tired		
By keeping a detailed record of stool consistency, frequency, continence, pain, diet, medication, emotional status and exercise, a clearer understanding may start to emerge for you and/or your physician to determine the best treatment options available to you.	Stressors	Daily obligations; employment; school; family; social; travel; shopping; medical appointments; illness; injury; trauma; surgery; personal/intimate		
	Medications	Prescription/over-the-counter including herbs or supplements; and Dosage		
	Women	Menstrual cycle; ovulation; menstruation		
	Food List everything, be detailed.	Fruits; vegetables; dairy products; meat; fish; poultry; breads (whole grain, etc); pasta; dessert; condiments (salt, pepper, sauces, spices, oils)		
	Beverages	Caffeine; decaffeinated; carbonated; diet/sugar free; alcohol; fruit juices		

The International Foundation for Functional Gastrointestinal Disorders (IFFGD) is a nonprofit education and research organization dedicated to informing, assisting, and supporting people affected by gastrointestinal disorders.

The complete paperback edition of the *Personal Daily Diary* is available by contacting IFFGD.

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PHOTOCOPY OR PRINT MULTIPLE COPIES OF THIS PAGE. Week Number; Day of the Week; Date;							te	
Tir	ne	Evacuated in Toilet Stool Description & Symptom	Gas	Stain/Smear	Incontinent Bowel Movement Stool Description & Symptom	<b>Pain</b> Description & Duration	Emotional Status	Medications Prescription/Over- the-Counter
DIET		List: Items & Times  Breakfast					Exercise  List examples: walk, run, bike, swim,  aerobic, other; and times	
	SO	Lunch						
	Dinner						Women  Menstrual cycle; ovulation; menstruation	
		Snacks					Number of daytime evacuations	
	_						Number of nighttime evacuations	
	ES	<u> </u>					Number of stains or smears	
	AG	<u> </u>					Number of incontinent bowel	
	BEVERAGES	<u></u>					movements, if any	
	BE\	<u> </u>					Number of protect undergarments	