



## Input and Output Tracking

When tracking input and output, please use the following guide to ensure that you have included all of the necessary information.

### INPUT

- Type of liquids consumed – water, soda, coffee, Crystal Light
- Total amount of liquids consumed – bottles(include size of bottle), cups, ounces

### OUTPUT

- Urine – mL, how many times, what color was it
- Bowel Movement – how many times, which type according to Bristol Stool Scale below
- Vomit – how many times, color and/or consistency, time of day

### VERIFICATION OPTIONS

- Able to view in toilet
- Flushed before I could verify
- Refused assistance in the restroom








### COMMUNICATION

Please e-mail nurse and/or supervisor when you have concerns regarding the Input and Output for the day not meeting the criteria in the High Risk Plan. This communication should also be noted in ECP.

### EXAMPLES

- IN - 4-16oz bottles water  
Urine-4 trips to restroom, unable to verify  
BM – Type 3 brown, able to view
- IN - 1 cup of water  
Urine - 1 wet Depends, dark yellow  
BM – no BM in 3 days, e-mail sent to nurse
- IN - none  
Urine - none, 2 trips to restroom with no result  
BM – none  
Vomit – 1 time, clear, upon arrival  
E-mailed supervisor due to lack of liquid intake.

#### BRISTOL STOOL SCALE

Type 1		Small hard pellets like goat droppings (difficult to pass)
Type 2		Like a sausage but lumpy and hard to pass
Type 3		Like a sausage but smooth and easier to pass
Type 4		Like a smooth sausage or ice-cream from a machine
Type 5		Smooth but separated and lacking consistency
Type 6		Mushy with rough edges and lacking consistency
Type 7		Brown water, no solids, only liquid.

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