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Fill out the following information every day:

- How many times did your child poop?
- What type of poop? (From the Bristol poop chart) 
- Did your child take their medicine to help them poop? 

○ Your child's medicine: _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____
How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____
 Yes/No	 Yes/No	 Yes/No	 Yes/No	 Yes/No	 Yes/No	 Yes/No
Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____
How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____
 Yes/No	 Yes/No	 Yes/No	 Yes/No	 Yes/No	 Yes/No	 Yes/No
Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____
How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____	How many poops? _____  _____
 Yes/No	 Yes/No	 Yes/No	 Yes/No	 Yes/No	 Yes/No	 Yes/No

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____
How many poops? _____  _____  Yes/No	How many poops? _____  _____  Yes/No No	How many poops? _____  _____  Yes/No	How many poops? _____  _____  Yes/No	How many poops? _____  _____  Yes/No	How many poops? _____  _____  Yes/No	How many poops? _____  _____  Yes/No
Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____
How many poops? _____  _____  Yes/No /No	How many poops? _____  _____  Yes/No	How many poops? _____  _____  Yes/No /No	How many poops? _____  _____  Yes/No	How many poops? _____  _____  Yes/No	How many poops? _____  _____  Yes/No	How many poops? _____  _____  Yes/No



For questions or concerns, please call the Gastroenterology Clinic at 720-777-6669.