



Prostate Cancer Radiotherapy Diary

Please bring this with you to
ALL appointments



**Northampton
General Hospital**
NHS Trust

To ensure that we can give you the most positive and effective radiotherapy experience, please complete this diary for three days before your next appointment

If you have any questions please call the Review Team on 01604 523840

Contents

Fluid Intake Diary

Bowel Movement Diary

Food Diary

Treatment Preparation Appointment

CT Scan

Treatment Preparation Appointment:	
CT Scan/Planning Appointment:	
Proposed Start Date:	
Number of Treatments:	
Consultant:	
Urology Nurse Specialist:	

Fluid Intake Diary

Please record the type of drink, volume and time.

Please make sure that you drink 2 litres (4 pints) of non caffeinated, non alcoholic and non carbonated fluid each day.

Make sure that you record all the fluid that you including caffeinated, alcoholic and carbonated.

Day 1		
Time	Type	Volume
<i>e.g 7am</i>	<i>Decaf Coffee</i>	<i>300ml/1 cup</i>

Day 2**Time****Type****Volume**

Day 3








Time	Type	Volume

Bowel Diary

Please record the time that you move your bowels and, using the information below, the type of bowel motion.

Day 1		Day 2		Day 3	
Time	Type	Time	Type	Time	Type
<i>e.g. 7am</i>	4				

Bristol Stool Chart

<p>Type 1</p> <p>Separate hard lumps, like nuts</p> 	<p>Type 2</p> <p>Sausage-like but lumpy</p> 	<p>Type 3</p> <p>Like a sausage but with cracks in the surface</p> 	<p>Type 4</p> <p>Like a sausage or a snake, smooth and soft</p> 
<p>Type 5</p> <p>Soft blobs with clear cut edges</p> 	<p>Type 6</p> <p>Fluffy pieces with ragged edges, a mushy stool</p> 	<p>Type 7</p> <p>Watery, no solid pieces</p> 	

Food Diary

Please record the food that you eat – include meals and snacks.

Day 1		
Time/Meal	Food	Comments

Day 2		
Time/Meal	Food	Comments

Day 3

Time/Meal	Food	Comments

Treatment Preparation Appointment

TO BE COMPLETED BY REVIEW TEAM

Radiographer:

Item	Details	Advice given
Urinary function		
Nocturia		
Bowels		
Fluid intake		
Diet		
Hormone treatment		
Other		

CT Scan

TO BE COMPLETED BY CT RADIOGRAPHER

Date of 1st Scan:

If unsuccessful, advice given:

Date of 2nd Scan (if required):

If unsuccessful, advice given:

Date of 3rd Scan (if required):

If unsuccessful, advice given:

Questions

If you have any questions regarding your treatment, make a note of them here:

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Useful website

www.nhs.uk

www.northamptongeneral.nhs.uk

Other information

Northampton General Hospital operates a smoke-free policy. This means that smoking is not allowed anywhere on the Trust site, this includes all buildings, grounds and car parks.

Leaflets, information, advice and support on giving up smoking and on nicotine replacement therapy are available from the local Stop Smoking helpline on 0845 6013116, the free national helpline on 0300 123 1044, email: smokefree@nhft.nhs.uk and pharmacies.

Car parking at Northampton General Hospital is extremely limited and it is essential to arrive early, allowing ample time for parking. You may find it more convenient to be dropped off and collected.

This information can be provided in other languages and formats upon request including Braille, audio cassette and CD. Please contact (01604) 523442 or the Patient Advice & Liaison Service (PALS) on (01604) 545784, email: pals@ngh.nhs.uk

Northampton General Hospital NHS Trust, Cliftonville, Northampton NN1 5BD.

www.northamptongeneral.nhs.uk

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