

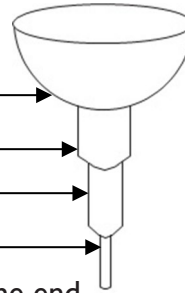
# PATIENT INSTRUCTION SHEET

## **PLEASE READ THESE INSTRUCTIONS CAREFULLY BEFORE USING THE UFLOW METER.**

The Uflow meter has four main parts:

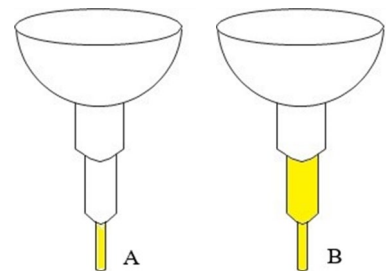
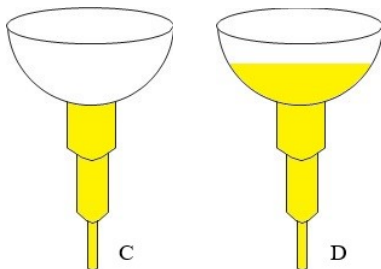
- The Cup section
- The Top section
- The Middle section
- The Bottom section

The bottom section has a small hole in the end.



To measure your urine flow

1. Hold the device upright (as shown in the picture above) over a measuring jug. You should place the jug on the closed toilet lid.
2. With the device held close to yourself pass your urine against the inside of the cup section of the device.
3. As you pass your urine you must lean forward a little so you can see the urine through the device. The urine will flow out of the small hole in the bottom but it will also rise up the device.
4. You must note the highest steady level that the urine reaches in the device. This will be either in the **BOTTOM** section, the **MIDDLE** section, the **TOP** section or in the **CUP**.
5. If you have difficulty leaning forward then you can look down the centre of the cup to judge the highest level.
6. When you have finished passing urine turn over the instruction sheet and record on the diary sheet provided whether the highest level was in the **BOTTOM**, **MIDDLE**, **TOP**, or **CUP**. Also note the Volume of urine passed in the jug in milliliters (ml).
7. Pour the urine from the jug into toilet bowl and flush the toilet. To clean your Uflow meter rinse thoroughly under **WARM** water.
8. If most of your measurements are in the bottom or middle sections of the device (Fig. A & B), you should seek advice from your doctor / nurse.



9. If most of your measurements are in the top or cup sections of the device (Fig. C & D) your urine flow is acceptable.

# The Uflow meter - for Gauging the Peak Flow Rate of Urine

## Patient Flow Rate Diary

### Using the Uflow meter to **assess** your flow rate.

Please take recordings of your flow rate of urine twice a day for 12 days, this should be within a 2 week period but does not have to be on consecutive days where personal circumstances make it difficult to do so.

Please enter this information in the table below as well as the volume of urine passed on each occasion.

Flow rate should be recorded as: bottom, middle, top, cup (see instruction sheet on front).

Volume passed should be recorded in milliliters (ml).

**Please record 1 morning void and 1 evening void with a minimum of 6 hours in between.**

### Using the Uflow meter to **monitor** your flow rate

You can use the Uflow meter at regular intervals i.e. if you have a urethral stricture. This frequency of checking your flow rate can be discussed with your clinician.

DAY	FIRST VOID		SECOND VOID	
	Flow Rate	Volume Passed	Flow Rate	Volume Passed
Example Day 1	Top	300ml	Middle	200ml
Day 1				
Day 2				
Day 3				
Day 4				
Day 5				
Day 6				
Day 7				
Day 8				
Day 9				
Day 10				
Day 11				
Day 12				

**Note: This product should not be shared between patients.**

Photocopy this diary sheet if you are going to measure your flow rate more than once. Additional copies are available to download from the MDTi website's Uflow meter product page.