

Date	Time	Drink (ml)	Voided Urine (ml)	Leakage Event	Urgency (1-4)
25.09.2025	08:00		350		
25.09.2025	10:00	250			
25.09.2025	10:30	150			
25.09.2025	11:00	50		Yes	4
25.09.2025	12:00		200		
25.09.2025	14:00	500	150		
25.09.2025	16:00		100		
25.09.2025	18:00				
25.09.2025	20:00				
25.09.2025	22:45	150	50		
25.09.2025	23:50				
25.09.2025	03:00		250		
25.09.2025	05:00	300			
25.09.2025	06:00		100		
25.09.2025	07:12		50		
26.09.2025	07:30	300	300		
26.09.2025	09:00		50		
26.09.2025	09:45		50		
26.09.2025	10:00	250	10		
26.09.2025	10:30		200		
26.09.2025	11:00	250	25		
26.09.2025	12:00			Yes	
26.09.2025	14:00				
26.09.2025	16:00		100		
26.09.2025	18:10				
26.09.2025	20:00	200	200		
26.09.2025	21:00				
26.09.2025	21:20	250	100		
26.09.2025	00:30		50		
26.09.2025	01:45		50	Yes	
26.09.2025	06:00		250		

Activity during Leakage	Pad weight dry (g)	Pad changed ( weight wet in g)	Comment
-------------------------	--------------------	--------------------------------	---------

Sneezing	100	150	
----------	-----	-----	--

Running	100		
---------	-----	--	--

Sneezing		200	
----------	--	-----	--