

# INTERI® SYSTEM FLUID JOURNAL for \_\_\_\_\_

DATE	Therapy Unit #	Therapy Unit Size	Time Point	Record Fluid Level (Top of fluid)	Amount of INCREASE since last check	Decision to change unit?
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Morning			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Mid-day			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Evening			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Bedtime			NO <input type="checkbox"/> YES <input type="checkbox"/>
TOTAL output for this date:					mL	
DATE	Unit #	Unit Size	Time Point	Record Fluid Level	Increase since last check	Change unit?
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Morning			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Mid-day			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Evening			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Bedtime			NO <input type="checkbox"/> YES <input type="checkbox"/>
TOTAL output for this date:					mL	
DATE	Unit #	Unit Size	Time Point	Record Fluid Level	Increase since last check	Change unit?
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Morning			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Mid-day			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Evening			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Bedtime			NO <input type="checkbox"/> YES <input type="checkbox"/>
TOTAL output for this date:					mL	
DATE	Unit #	Unit Size	Time Point	Record Fluid Level	Increase since last check	Change unit?
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Morning			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Mid-day			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Evening			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Bedtime			NO <input type="checkbox"/> YES <input type="checkbox"/>
TOTAL output for this date:					mL	
DATE	Unit #	Unit Size	Time Point	Record Fluid Level	Increase since last check	Change unit?
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Morning			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Mid-day			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Evening			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Bedtime			NO <input type="checkbox"/> YES <input type="checkbox"/>
TOTAL output for this date:					mL	
DATE	Unit #	Unit Size	Time Point	Record Fluid Level	Increase since last check	Change unit?
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Morning			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Mid-day			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Evening			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Bedtime			NO <input type="checkbox"/> YES <input type="checkbox"/>
TOTAL output for this date:					mL	
DATE	Unit #	Unit Size	Time Point	Record Fluid Level	Increase since last check	Change unit?
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Morning			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Mid-day			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Evening			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Bedtime			NO <input type="checkbox"/> YES <input type="checkbox"/>
TOTAL output for this date:					mL	
DATE	Unit #	Unit Size	Time Point	Record Fluid Level	Increase since last check	Change unit?
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Morning			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Mid-day			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Evening			NO <input type="checkbox"/> YES <input type="checkbox"/>
		<input type="checkbox"/> 150 <input type="checkbox"/> 300 <input type="checkbox"/> 500	Bedtime			NO <input type="checkbox"/> YES <input type="checkbox"/>
TOTAL output for this date:					mL	

