**BLADDER RETRAINING WEEKLY PROGRESS NOTES**

**RESIDENT:** \_\_\_Amy Anybody\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Week:\_\_\_1\_\_\_\_\_\_ Summary:\_\_Resident is doing well with program and understands goals of\_

\_program. Have discussed resident with PT and resident is to be picked up by therapy for \_\_\_\_\_

\_Kegel exercises.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Week:\_\_2\_\_\_\_\_\_\_ Summary:\_\_Involvement with PT was initiated this week and resident has\_\_

\_reduced incontinent episodes to 2 times a day for 2 days this week. Will be started on \_\_\_\_\_\_\_

\_restorative program for transfers to improve safety with toilet transfers.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Week:\_\_3\_\_\_\_\_\_\_ Summary:\_Now receiving PT, restorative program for transfers and doing\_

\_very well with continence retraining. This week resident demonstrated continence throughout\_

\_1 entire day. Resident is wearing briefs at night and no problems indicated at this time.\_\_\_\_\_\_\_

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Week:\_\_4\_\_\_\_\_\_\_ Summary:\_Resident is progressing well and new orders will be obtained\_\_\_

\_\_to allow resident to continue for 2 more weeks in restorative program. She is improving \_\_\_\_

\_\_with transfers and still receiving PT for bladder strengthening muscles. Resident is \_\_\_\_\_\_\_\_

\_\_improving to the point where she has had only 1 episode of incontinence per day.\_\_\_\_\_\_\_\_\_\_

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**BLADDER RETRAINING WEEKLY PROGRESS NOTES**

**RESIDENT:** \_\_\_Amy Anybody\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Week:\_\_\_5\_\_\_\_\_\_ Summary:\_\_Resident has been discharged from PT and is now only\_\_\_\_\_\_\_

\_receiving restorative services only. Transfers are improving and last week resident had only\_\_\_

\_one episode of incontinence during a 7 day period.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Week:\_\_6\_\_\_\_\_\_\_ Summary:\_\_Resident has achieved complete control of bladder and has \_\_\_

\_had no episodes of incontinence. Her transfers have improved to requiring only standby\_\_\_\_\_

\_assistance. She will continue to use the elevated toilet seat with safety rails. D/C orders have\_\_

\_been written and all care plan documentation has been completed.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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