



Pediatric Urology

Dysfunctional Elimination Scoring Sheet

Name: _____

DOB: _____

1. I pee in my underwear during day	Never	1 day a week	2-3 days a week	4-5 days a week	Every day
2. When I pee in my underwear, they are:	I don't pee in my underwear	Almost dry	Damp	Wet	Soaked
3. In a normal day I go to the bathroom to pee:	1-2 times <i>(score 4)</i>	3-4 times <i>(score 2)</i>	5-6 times <i>(score 0)</i>	7-8 times <i>(score 2)</i>	More than 8 times <i>(score 4)</i>
4. I feel that I have to rush to the bathroom to pee:	Never	Less than half the time	Half of the time	More than half of the time	Every day (all the time)
5. I hold my pee by crossing my legs or sitting down:	Never	Less than half the time	Half of the time	More than half of the time	Every day (all the time)
6. It hurts when I pee:	Never	Less than half the time	Half of the time	More than half of the time	Every day (all the time)
7. I wet my bed at night:	Never	3-4 nights per month	1-2 nights per week	4-5 nights per week	Every night
8. I wake up to pee at night:	Never	3-4 nights per month	1-2 nights per week	4-5 nights per week	Every night
9. When I pee, it stops and starts	Never	Less than half the time	Half of the time	More than half of the time	Every day (all the time)
10. I have to push or wait for my pee to start	Never	Less than half the time	Half of the time	More than half of the time	Every day (all the time)
11. I have bowel movements (poop):	More than once per day	Every day	Every other day	Every 3 days	More than every 3 days
12. My stool (poop) is hard:	Never	Less than half the time	Half of the time	More than half of the time	Every day (all the time)
13. I have bowel (poop) accidents in my underwear	Never	1-2 times per week	3 times per week	4-5 times per week	Every day (all the time)
Scoring (EXCEPT question 3)	0	1	2	3	4
Total Score for each column					

Total Score: _____ Scoring instructions (0-4 Except for question 3)