Why measure intake and output?

As part of treatment, your child will receive medicines that might affect the way his kidneys or bladder work. For this reason, the staff needs a record of your child’s fluid balance. Sometimes the staff will need to know how many calories your child is receiving each day. For both purposes, you are asked to record all intake – everything your child eats and drinks. The staff also needs you to record all output – all urine, stool and emesis (vomit). A staff member will subtract the output from the intake to find your child’s fluid balance.

If your child is an infant, it is important that his diaper be checked or changed every 2 hours. If your child is older, he should be taken to the bathroom every 2 hours to void, even at night.

How do I measure intake?

You will write all intake on the Intake and Output (I and O) card. Most often, it will be kept in the box on the wall by the patient room door. On one side of this card, the title says “24-Hour Intake”. It has 3 sections: 7 a.m.–3 p.m., 3–11 p.m., and 11 p.m.–7 a.m. The left side of the card is for solid food intake. The right side of the card is for liquid intake.

Each time your child has a drink, record:

- The time,
- What kind of liquid your child drank,
- The amount offered, and
- The amount he actually drank. (You will find the amount of liquid listed on the drink container – can, drink box, bottle, etc.)
Measuring intake and output for inpatients

The clear cups offered in the Nutrition Center have measurements on them. If you transfer drinks into these cups, it will make it easier for you to measure intake.

The I and O card also lists measurements for such items as popsicles, ice cream, and Jell-O® on the right side of the card.

What do I measure for intake?

Everything your child takes by mouth must be measured and recorded. You will record solid foods such as cereal, chicken, and bread by amount. Example:

You will record liquids by number of ounces. Example:

Intake also includes any fluid your child receives through his central venous line (if he has one). The nurse will record these amounts.
**Measuring intake and output for inpatients**

**What do I measure for output?**

All urine, stool (bowel movements), and emesis (vomiting) must be measured each time they occur.

**How do I measure output?**

You will write all output on the I and O card. On one side of this card, the title says “24-Hour Output”. It has 3 sections: 7 a.m.–3 p.m., 3–11 p.m., and 11 p.m.–7 a.m. This side of the card has columns for recording urine output, emesis output, stool output, and mixed stool and urine output.

Each time your child urinates or vomits, you must record the time and amount.

The nurse will give you an open container (known as a “hat”) to measure urine. The hat fits on the rim of the toilet to collect the urine. The hat can also be used to measure emesis. You will record urine and emesis as ml (example: 500ml).

You may also collect and measure emesis in the smaller container known as an emesis basin. The staff will provide these for your child.

You will record the number of bowel movements, but not the amount. If your child has one (1) bowel movement, you will write X 1 on the card along with the time it occurred.

If your child wears diapers, a scale will be in the room to weigh the diapers. The staff will show you how to use the scale.

The staff will closely watch the Intake and Output cards throughout the day and night. A staff member will wake up your child and ask him to void if no output has been recorded for the past 2 hours.