

Dialysis Tracking Worksheet

Name: _____ Year: _____

Instructions for Patient: Use this worksheet to keep track of your important numbers. Take it with you whenever you visit a doctor.

	Dry Weight	KtV (goal of 1.2 or more)	24-Hour Urine Volume	BUN	Creatinine	Blood Pressure	Hemo-globin	Hematocrit	Ferritin	EPO Dose	Albumin	Calcium	Phos-phorus	Ca-Phos Product	iPTH
Jan															
Feb															
March															
April															
May															
June															
July															
Aug															
Sept															
Oct															
Nov															
Dec															