Allina Health

Bravo™ Reflux Recorder Diary

Name _____ **Recorder Number** _____ **Date and Time Started** _____

Return Recorder to Allina Health _____ **Clinic on** _____

Day 1

Start Time	End Time	Meal	Lie down	Chest pain	Spit up food	Heart-burn	Cough	Belch	Other (medicines, other symptoms)

(over)

Day 2

Start Time	End Time	Meal	Lie down	Chest pain	Spit up food	Heart-burn	Cough	Belch	Other (medicines, other symptoms)

Diary instructions:

- Push any button on recorder. The recorder will beep and you should see a flashing blue light in the lower right corner.
- All events should be entered by pressing a button on the recorder and writing it on your diary.
- If you forget to push a button on your recorder, write it on your diary.
- Press the meal button at the start of the meal and at the end of your meal.

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