

Bristol stool chart

The seven-point scale clinicians use to describe stool form. Recording a type takes two seconds and is far more useful to a doctor than "bad" or "normal".

Type is a measure of transit time, not of health. Types 3 and 4 are generally considered normal. What matters clinically is usually the pattern over weeks and any change from your own usual, which is why a dated record beats a single observation.

TYPE	WHAT IT LOOKS LIKE	WHAT IT USUALLY INDICATES
1	Separate hard lumps, like nuts, hard to pass	Marked constipation. Transit has been slow.
2	Sausage shaped but lumpy	Mild constipation.
3	Like a sausage with cracks on the surface	Normal.
4	Like a smooth, soft sausage or snake	Normal. Often described as the easiest to pass.
5	Soft blobs with clear-cut edges	Trending loose. Lacking fiber for some people.
6	Fluffy pieces with ragged edges, mushy	Mild diarrhea. Transit has been fast.
7	Watery, no solid pieces, entirely liquid	Diarrhea. Urgent, and worth noting alongside what preceded it.

What else to note alongside the type

ALSO RECORD	WHY IT MATTERS
Urgency	Whether you could wait. Urgency without a change in type is still a real symptom.
Complete or not	The feeling of not having finished is one of the more specific IBS symptoms and is easy to forget by evening.
Time of day	Clustering in the morning, or after specific meals, is a pattern worth showing a clinician.
Blood or black color	Not a tracking matter. Get it assessed.

Stop tracking and see a clinician for blood in the stool, black tarry stools, unintended weight loss, difficulty swallowing, persistent vomiting, fever alongside gut symptoms, or a persistent change in bowel habit that is new from around age 50.