



Hormone Symptom Checklist For Women

(Courtesy of Bespoke Wellness) 941-402-5353

	Rating				
Hot Flashes		Evaluation of patient symptoms plays a critical role in determining whether or not to prescribe hormone therapy. Please rate the symptoms that you have experienced within the past 3 months as follows: 1. No symptoms - have never experienced 2. Mild - on occasion but it doesn't really affect me 3. Frequent - experience often but get myself through it 4. Severe - very uncomfortable - I can barely function or get through the day			
Headaches					
Night Sweats					
Vaginal Dryness					
Low Libido					
Anxiety					
Swollen Breast(s)					
Water Retention/Bloating					
Foggy Thinking					
Depression/Moodiness					
Food Cravings					
Irritability					Rating
Insomnia				Candida Infections	
Incontinence		Weight Gain In Hips			
Sleep Disturbances		Nervousness			
Cramps		Uterine Fibroids			
Tearful		Menstrual Bleeding Changes			
Emotional Swings		Mental Fatigue			
Painful Breast(s)		Allergies			
Heart Palpitations		Chemical Sensitivity			
Weight Gain		Stress			
Bone Loss		Cold Body Temperature			
Fibrocystic Breasts		Aches/Pains			
Memory Lapses		Arthritis			
Inability To Concentrate		Decreased Muscle Mass			
Shortness Of Breathe		Thinning Skin			
Dry Hair		Infertility			
Hair Loss		Excessive Facial Or Body Hair			
Short Term Memory Loss		Acne			
Frequent Urinary Tract Infections		Oily Skin			
Frequent Yeast Infections		Anger			
Vaginal Shrinking		Weight Gain In Waist			
Loss Of Pubic Hair		Morning Fatigue			
Painful Intercourse		Evening Fatigue			
Inability To Reach Orgasm		Dry Skin			
Breast Tenderness		ringing In The Ears			