Perimenopause Symptom Checklist

Tick each week you notice it. Track for 4 to 8 weeks, then bring this page to your clinician.

Tick the weeks you notice it Write the start date under each week	Week 1 __/__	Week 2 __/__	Week 3 __/__	Week 4 __/__	Week 5 __/__	Week 6 __/__	Week 7 __/__	Week 8 __/__
Your cycle								
Cycle 7+ days longer or shorter than the last one	☐	☐	☐	☐	☐	☐	☐	☐
60 or more days between periods	☐	☐	☐	☐	☐	☐	☐	☐
Heavier bleeding than usual	☐	☐	☐	☐	☐	☐	☐	☐
Lighter bleeding than usual	☐	☐	☐	☐	☐	☐	☐	☐
Period start dates (these show your cycle length):	____/____	____/____	____/____	____/____	____/____	____/____	____/____	
Hot flashes, sleep and mood								
Hot flashes	☐	☐	☐	☐	☐	☐	☐	☐
Night sweats	☐	☐	☐	☐	☐	☐	☐	☐
Trouble falling or staying asleep	☐	☐	☐	☐	☐	☐	☐	☐
Mood changes: irritable, anxious or low	☐	☐	☐	☐	☐	☐	☐	☐
Brain fog: focus, memory or finding words	☐	☐	☐	☐	☐	☐	☐	☐
Body								
Joint or muscle aches	☐	☐	☐	☐	☐	☐	☐	☐
Headaches that are new or different	☐	☐	☐	☐	☐	☐	☐	☐
Heart racing or pounding (palpitations)	☐	☐	☐	☐	☐	☐	☐	☐
More weight around the middle	☐	☐	☐	☐	☐	☐	☐	☐
Bladder changes: urgency, leaks or more UTIs	☐	☐	☐	☐	☐	☐	☐	☐
Intimacy								
Vaginal dryness or painful sex	☐	☐	☐	☐	☐	☐	☐	☐
Lower interest in sex (libido)	☐	☐	☐	☐	☐	☐	☐	☐

Notes and questions for my visit

Also bring: your medicines and supplements, and the date of your last period.

Call sooner

Don't wait for your visit if you have:

- Very heavy bleeding
- Bleeding after sex
- Any bleeding 12 months or more after your last period
- Chest pain or fainting: call 911
- Thoughts of self-harm: call or text 988

Sources: The Menopause Society; ACOG; NIH (National Institute on Aging, MedlinePlus); STRAW+10 staging criteria (Harlow et al., 2012).

Education only, not medical advice or a diagnosis. Symptoms can have other causes.

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