\bigcirc	Tags
_	What is your name?
	Carol Gu
	Have ald are you?
	How old are you? 29
A- B-	Which of the following best describes your ethnicity?
	Asian
=	What is your current height?
	5'10"
_	What is your current weight in lbs?
	155
Ø	Are you pregnant?
	No
A — B —	Are you currently trying to conceive?
В-	No No
A- B-	Do you smoke?
	No
A- B-	Do you utilize recreational marijuana?
	Occasionally

I don't drink

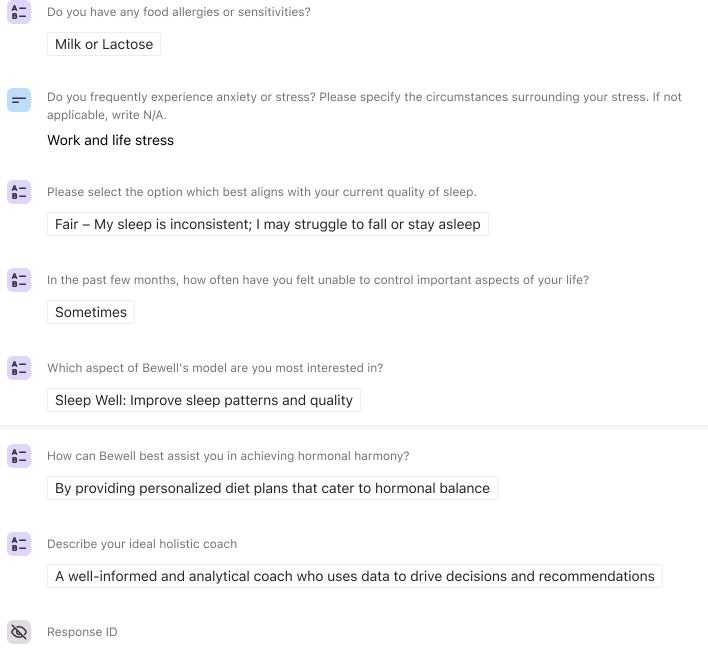
How often do you drink on average?

A-B-

	Please input the start of your last menstrual cycle.
	12/04/2024
	Please input the end of your last menstrual cycle.
	12/07/2024
A- B-	What is the average length of your menstrual cycle over the past 6 months?
	21-35 days
A- B-	How regular are your menstrual cycles?
	They are regular
A- B-	Do you currently track your cycle? If so, what do you use?
	Flo App
	ΤΙΟ ΑΡΡ
A — B —	What menstrual symptoms do you commonly experience?
В-	
	Cramps
	Bloating
	Constipation
A- B-	What symptoms do you experience?
	Menstrual cramping and PMS symptoms
	Constipation
	Bloating
A- B-	Do you have any diagnosed hormonal health conditions?
	None

	Estrogen (Estradiol) Test
	Progesterone Test
	Follicle-Stimulating Hormone (FSH) Test
	Luteinizing Hormone (LH) Test
	Testosterone Test
	Thyroid Function Test (T3, T4, TSH)
	Prolactin Test
	Cortisol Test
	Sex Hormone-Binding Globulin (SHBG) Test
	Insulin Test
A — B —	Are you currently on any form of hormonal birth control?
	Yes
_	What is your primary reason for being on hormonal birth control? Please be specific. If not applicable, write N/A.
	Regulate period
_	Is there a history of hormonal predispositions/disorders in your family? Please specify. If not applicable, write N/A.
	N/A
A- B-	Have you ever been diagnosed with high blood pressure?
	No
मी	On a scale from 1 to 10, how concerned are you about your hormonal health?
	5 / 10
A- B-	What does your daily activity level look like?
	Sedentary [Desk Job]
A- B-	What does your workout routine look like?
	I exercise everyday
	1 excitoise everyddy
A — B —	How would you describe your current eating habits?
B-	
	My eating habits are inconsistent

A-B- Have you ever had any of the following tests performed?



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