

jlvihcig

Year of Birth: 1946

Ethnic Origin: Any other Mixed or multiple ethnic background

Smoking: Yes

Height: 4'1" (124 cm)

Weight: 30kg

Drinking: Regularly

Exercise: RegularlyI excercise more than before

Checklist completed: 26th September 2023

Remember to mention:

• Pre-existing health conditions you have

• Prescriptions you currently take



MY SYMPTOMS

Vasomotor:

- Hot flashes 0-10 times a day
- o Night sweats 11-20 times a day
- o Cold flashes More Then 20 times a day

Psychological:

- Moodswings
- o Lossoffocus
- Lossofmemory
- Anxiety

Physical:

- Vaginal atrophy
- Low libidoPalpitations
- Skin changes
- Joint Pain
- Burnings sensation
- Fatigue

MY CYCLES

- Last period January-2023
- Yes Cycle lengths have changed
- Yes Heavier Bleeding

MY MANAGEMENT

• Have had received a menopause diagnosis

HRT Routine:

- HRTYes
- Tables, Skin patches, Oestrogengel, Implants, Vaginal, Testosterone, Progesterone
- Continuous Combined HRT
- o 3 Monthly HRT