

# test

Year of Birth: 1933

Ethnic Origin: test

Smoking: Yes

Height: 4'0" (121 cm)

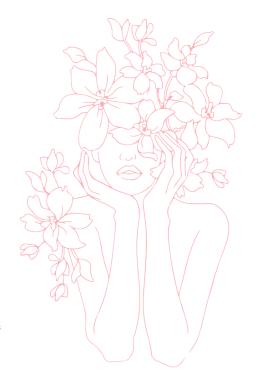
Weight: 30

Checklist completed: 16<sup>th</sup> August 2023

#### **Remember to mention:**

• Pre-existing health conditions you have

• Prescriptions you currently take



# **MY SYMPTOMS**

### Vasomotor:

- o Hot flashes Yes
- Night sweats Yes
- o Cold flashes Yes

### **Psychological:**

• Painful sex

## **Physical:**

• Burnings sensation

# **MY CYCLES**

- Last period January 1970
- 0

# **MY MANAGEMENT**

• Have had received a menopause diagnosis

### **HRT Routine:**

- o yes
- Oestrogengel
- Continuous Combined HRT
- 3 Monthly HRT