

Menopause Questionnaire

Clinician Use Only
Patient _____
Interview Date _____
WMDC

These questions relate to menopause and the time period prior to menopause (known as peri-menopause). We define menopause as beginning after you have had no menstrual cycles for ONE YEAR. Peri-menopause is recognized as the several years prior to menopause and generally lasts from 2-6 years. Most women recognize peri-menopause as the time at which they begin to have irregular periods. You have been given this questionnaire because you have indicated that you are in peri-menopause or are post-menopausal.

- 1. What was the approximate date of your last menstrual period?
2. What age did your menstrual cycles first become irregular?
3. What age do you think you entered peri-menopause?
4. Are you post-menopausal? (Answer YES, if your last menstrual period was over one year ago?) YES NO

5. If post-menopausal, what age did you consider yourself post-menopausal?
* write N/A if not applicable

- 6. What happened that made you think you were in peri-menopause? (Please check all that apply)
() Hot flashes () Night sweats
() Weight gain () Vaginal dryness
() Irregular periods () Phantom periods
() Shorter, lighter periods () Heavier periods or flooding
() Shorter cycles () Longer cycles
() Loss of interest in sex () Changes in hair growth
() Difficulty Sleeping () Mood swings
() Low mood or depression () Easy tearfulness
() Decreased ability to concentration () Memory problems
() Irritability () Incontinence
() My doctor informed me that I was menopausal
() I felt I was just at that age
() Other (please specify below)

7. Have you received any medical treatment, such as a hysterectomy or chemotherapy that caused or precipitated menopause? YES NO
If yes, what treatment did you receive?

8. Did you or do you currently take hormone replacement therapy (HRT)?
() YES, I am currently on HRT
() YES, I have taken HRT but do not currently
() NO, I do not and have never taken HRT

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If yes, has it alleviated any mood symptoms?

YES

NO

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Please fill out the following chart. It lists some mood descriptions. Please indicate the extent to which you felt these mood descriptions during the peri-menopause time period and, if applicable, after you became post-menopausal.

Symptom	During Peri-menopause				Post-Menopause (no menstrual cycles for one year)			
	Not at all	Mild	Moderate	Severe	Not at all	Mild	Moderate	Severe
1. Depressed mood or feelings of hopelessness								
2. Increased mood swings.								
3. Feelings of elation or agitation associated with symptoms like an exaggerated self-confidence; decreased need for sleep without a loss of energy; a sense that thoughts are racing; or increased activities or plans.								
4. Improved mood (specifically an <i>improvement</i> in the symptoms of your mood disorder)								
5. Feeling very anxious, more so than what you would consider normal								
6. Recurrent, unwanted, intrusive ideas, images, or impulses that seem silly or horrible								
7. Feeling the need to check things over and over, or repeat actions over and over, in order to prevent bad things from happening								
8. Having panic attacks. (Panic attacks are sudden unexpected episodes of anxiety often associated with physical symptoms such as rapid heartbeat, feeling faint, lightheaded, trembling, chest tightness, or shortness of breath; lasting approximately 10 minutes)								

**your
as listed
interfere**

	Not at all	Mild	Moderate	Severe
A. Your work efficiency				
B. Your relationships with coworkers				
C. Your relationships with your family				
D. Your social life activities				

**Have or did
symptoms,
above,
with:**

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E. Your home responsibilities				
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