



Cathy Laffan Coaching, LLC

Partnering to enrich lives

Your Perimenopause / Menopause Quiz

Score each symptom. For symptoms that do not apply, please mark 'none: 0'

Symptoms: NONE: 0 MILD: 1 MODERATE: 2 SEVERE: 3 VERY SEVERE: 5

Symptoms	Score
Changes in periods (irregular, length of cycle, amount of bleeding, frequency)	
Hot flashes, sweating (episodes of sweating)	
Heart discomfort (unusual awareness of heartbeat, heart skipping, heart racing, tightness)	
Sleep problems (difficulty in falling asleep, difficulty in sleeping through, waking up early)	
Depressive mood (feeling down, sad, on the verge of tears, lack of drive, mood swings)	
Irritability (feeling nervous, inner tension, feeling aggressive)	
Anxiety (inner restlessness, feeling panicky)	
Physical and mental exhaustion (general decrease in performance, impaired memory, decrease in concentration, forgetfulness)	
Sexual problems (change in sexual desire, in sexual activity and satisfaction)	



Cathy Laffan Coaching, LLC

Partnering to enrich lives

Symptoms	Score
Bladder problems (difficulty in urinating, increased need to urinate, incontinence)	
Dryness of vagina (sensation of dryness or burning in the vagina, difficulty with intercourse)	
Joint and muscular discomfort (pain in the joints, rheumatoid complaints)	

Choose what best describes your score:

- ☐ One or more of your symptoms are very severe, please contact your doctor. Follow-up with me if you don't get the support you need.
- ☐ Some of your symptoms are moderate or severe and you're looking for guidance on what to do.
- ☐ Most of your symptoms are mild and you'd like to learn more.
- ☐ You have no symptoms.

[Schedule a complimentary Perimenopause / Menopause coaching call with me today!](#)