



Having an open and honest dialogue with your healthcare professional is very important for your health. Asking questions and talking about your symptoms and concerns will help you and your healthcare professional decide what's best for you.

I am having the following symptoms:

- Hot flashes
- Night sweats
- Vaginal dryness
- Problems/pain urinating
- Less interest in sex
- Pain during sex
- Irritability
- Other (please explain.) _____

Possible questions for your healthcare professional:

- How can a hormone therapy treatment help me cope with the symptoms I'm having?
- If I'm a candidate for hormone therapy treatment, how soon after I start on hormone therapy will I begin to get relief?
- If I start a hormone therapy treatment, how long will I have to take it?
- Will a hormone therapy treatment interact with any of the medicines I'm now on?

I am presently taking the following medications:

(Please list all prescription and nonprescription medications that you are taking, and the dosage amount. Be sure to include if you are taking estrogen or any other hormone therapy treatment. Please include any herbal remedies or vitamins that you are also taking.)

If you are currently taking estrogen or any other hormone therapy, please indicate the name of the medication and the dosage amount.

Medication: _____ Dosage Amount: _____

If you ARE currently taking estrogen or any other hormone therapy, are you happy with what you are taking to relieve your symptoms of menopause?

- YES NO *If no, please explain why.* _____

If you are NOT currently taking estrogen or any other hormone therapy, please list any additional questions or concerns that you may have if, when you meet with your healthcare professional, he or she recommends that you begin treatment.

Before prescribing ANY medications, your healthcare professional needs to know about your current health and medical history. It is helpful to jot down some notes before your visit to make sure you don't forget important information.

I have the following medical conditions: _____

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- Unusual vaginal bleeding
 - Any cancers
 - A stroke or heart attack in the past year
 - Liver problems
 - Blood clots