

Menstrual Cycle Calendar



INSTRUCTIONS FOR COMPLETING A MENSTRUAL CYCLE CALENDAR

1. **On the first day of menstruation prepare the calendar:** Considering the first day of bleeding as day 1 of your menstrual cycle enter the corresponding calendar date for each day in the space provided below

2. **Each Morning:** Take weight after emptying bladder and before breakfast Record WEIGHT CHANGE from baseline

3. **Each Evening:** At about the same time complete the column for that day as described below

BLEEDING: Indicate if you have had bleeding by shading the box above that days date; for spotting use an "X".

SYMPTOMS: If you do not experience any symptoms leave the corresponding square blank if present indicate severity

MILD: 1 (noticeable but not troublesome)

MODERATE: 2 (interferes with normal activity)

SEVERE: 3 (temporarily incapacitating)

LIFESTYLE IMPACT: If the listed phrase applies to you that day enter an "X".

LIFE EVENTS: If you experienced one of these events that day enter an "X".

Experiences. For positive (happy) or negative (sad or disappointing) experiences unrelated to your symptoms specify the nature of the events on the reverse side of this form

Social Activities imply events such as a special dinner, show or party etc. involving family or friends

Vigorous Exercise implies participation in a sporting event or exercise program lasting more than 30 minutes

MEDICATION: In the bottom 3 rows list medications if any and indicate days when taken by entering an "X".

continued >

BALTIMORE
The Mead Building
315 N. Calvert Street
Baltimore, MD 21202

BALTIMORE WEST
7001 Johnnycake Road
Suite 105
Windsor Mill, Maryland 21244

BALTIMORE EAST
3601 O'Donnell Street
Suite 150
Baltimore, Maryland 21224

CONTACT
office: 410-633-6300
fax: 410-633-6736
web: hoffmanobgyn.com