

# MENSES (WOMEN'S PERIOD) – YEARLY MONITORING CHART – Year: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: (dd/mm/yyyy) \_\_\_\_\_

Put an **X** in the box for each day of the period, each month.

E.g.,

X
H, P

X
N, C

**PROTOCOL IN PLACE:**  NO  YES

If YES: refer to Protocol, mark P when used

If seen, also include the following:

**L** = Light (<3 pads a day or <3 tampons a day)    **N** = Normal (3-4 pads a day or 3-4 tampons a day)    **H** = Heavy (>4 pads a day or >4 tampons a day)

**C** = Clots (looks like jelly)

**B** = Please write a "B" if there are any behaviours that depart from the client's baseline on the days leading up to or during the period, since these may be due to hormonal changes (PMS). You can comment on them on the space for notes on the back of this page.

DATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Dec																															

*Adapted from Community Living Toronto – Scarborough Region and Down Syndrome Society, Canada*

**NOTES – USE OTHER SIDE →**

Please describe what you observe:

DATE	NOTES	INITIALS