

## Hormone Balance Inventory for Women

This inventory gives you and your health care provider a tool for assessing hormone imbalance.

Circle the answer that best describes you.

*During the past 3 months, how often have you experienced:*

1. Difficulty concentrating and remembering?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
2. Hot flashes and / or night sweats?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
3. Lack of sexual desire?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
4. Feeling anxious?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
5. Mood swings?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
6. Feeling depressed, sad or unhappy?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
7. Difficulties with sleep?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
8. Irritability or nervousness?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
9. Heart palpitations?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
10. Changes in the length of your menstrual cycle?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
11. Changes in the amount of menstrual bleeding?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
12. Breast tenderness?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
13. Bloating or fluid retention?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
14. Weight gain?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1
15. Vaginal dryness?	Always 5	Many times 4	Sometimes 3	A few times 2	Never 1

Now add up each answer. A high total score (between 75-45) indicates strong likelihood of hormone imbalance. However, pay attention to where you may have scored high on one, two, or three questions. This may also indicate a hormone imbalance.

**A low total score with low scores** on all items indicates a strong likelihood that there is no hormone imbalance.