

Date: _____

Heavy Menstrual Bleeding (HMB) Questionnaire

Top Tip: We recommend filling out this questionnaire in line with the last month of the filled [3-Month Period Diary](#).

Period Cycle

1: When was the start of your last period, and how long did it last?

Start date: _____

- 1 - 2 Days
- 2 - 4 Days
- 5 - 7 Days
- 7+ Days

2: Do your periods occur at the same time each month?

- Yes
- No, it varies slightly each month
- No, it is never regular

3: Do you have any irregular bleeding between cycles?

- Yes
- Sometimes
- No
- Unsure

4: During your period, did you experience heavy bleeding?
If yes, how many days did you experience it?

- | | |
|---------------------------------|------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> 1-2 |
| <input type="checkbox"/> No | <input type="checkbox"/> 3-4 |
| <input type="checkbox"/> Unsure | <input type="checkbox"/> 5-6 |
| | <input type="checkbox"/> 7+ |

5: Have your periods changed over recent months? If so, how?

Period Products

6: How often do you change your period products (pads, tampons, cups) in a typical day?

7: Do you change your tampon or pad within two hours?

- Yes - always
- Yes - sometimes
- No

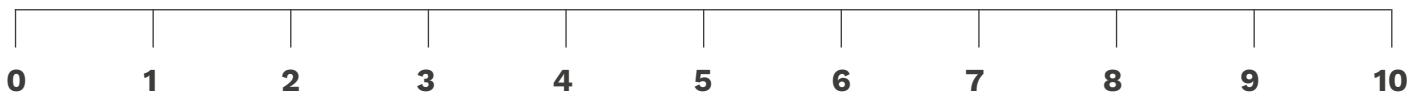
8: Do you use double protection? (e.g. Tampon/cup and a pad, 2 pads at once).

- Yes
- No

Comments:

Period Symptoms and Living with Periods

9: How much pain does your period cause?

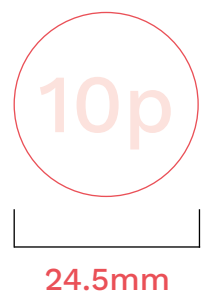


0
No Pain
(Life is as normal)

10
Extremely Painful
(I cannot leave the house)

10: Does your menstrual blood contain clots larger than a 10p coin?

- Yes - always
- Yes - sometimes
- No



Period Protection

11: Do heavy periods affect your social life, exercise routines or sex life? How?

12: Have you ever had to take sick leave from work because of heavy periods?

- Yes
- No

13: Do you ever have to change clothing because of your heavy periods?

- Yes - always
- Yes - sometimes
- No

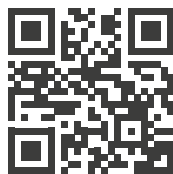
14: Do you have family members with blood disorders?

- Yes
- No

Take back control:

Print this questionnaire and the filled 3-month Period Diary to evidence your quality of life and trends in your period to take to your GP.

**Scan for
additional tools
& resources:**



**Don't suffer in silence.
Your period shouldn't be debilitating.**

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