It may be difficult for you to describe your Vaginal Dryness symptoms, or to remember all the questions you have about the condition. This Symptoms Report will assist you to have a meaningful discussion with your doctor or pharmacist.

Complete the report below and take it along to your doctor or pharmacy visit.

My Overview:

1. My age is: 
2. I have regular, monthly periods / My periods are irregular / I am no longer menstruating
3. My last menstrual period was:  

My Vaginal Dryness Symptoms:

Tick the box next to the symptoms that apply to you.

☐ Vaginal dryness
☐ Vaginal irritation
☐ Vaginal soreness
☐ Painful urination
☐ Pain during intercourse
☐ Bleeding during intercourse
☐ Itching in and around the vagina

Medications that I am currently taking include:

__________________________________________________________________________
__________________________________________________________________________

Questions for my Healthcare Practitioner:

1. _______________________________________________________________________
2. _______________________________________________________________________
3. _______________________________________________________________________
4. _______________________________________________________________________
5. _______________________________________________________________________