

Perimenopause Symptom Workup Checklist

A one-page reference for the workup your symptoms deserve.

Sandra Golaszewski, DNP, APRN, CNM

Symptoms to track

Note the symptoms you have experienced in the last 3 months.

Sleep ■ Trouble falling asleep ■ Waking at 2 to 4 a.m. unable to return to sleep ■ Night sweats ■ Restless sleep Mood ■ New anxiety ■ Irritability or rage ■ Depression that feels new ■ Mood swings Cognitive ■ Brain fog ■ Word retrieval difficulty ■ Memory lapses Vasomotor ■ Hot flashes ■ Night sweats ■ Sweating without exertion	Cycle ■ Shorter cycles ■ Longer cycles ■ Skipped months ■ Heavier or lighter bleeding ■ Bleeding between periods Genitourinary and Sexual ■ Vaginal dryness ■ Painful intercourse ■ Recurrent UTIs or BV ■ Low libido ■ Urinary urgency Other ■ Joint pain or stiffness ■ Weight redistribution ■ Skin or hair changes ■ Fatigue ■ Heart palpitations
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History points to review with your provider

■ Age at first period ■ Cycle pattern history ■ Pregnancy history ■ Surgical history (hysterectomy, oophorectomy)	■ Family history of menopause timing ■ Current medications and supplements ■ Prior hormone therapy use ■ Mental health history (PMDD, postpartum depression)
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Perimenopause is a clinical diagnosis

Major guidelines (Choosing Wisely, UK Menopause Practice Standards, JAMA 2023 review) recommend against routine FSH testing to diagnose perimenopause in women in their 40s with menopausal symptoms. FSH and estradiol levels fluctuate throughout perimenopause and a single value cannot confirm or rule out the diagnosis. The diagnosis is made by listening to symptoms, mapping the cycle pattern, and considering age.

My clinical position: There is value in checking FSH and estradiol when the patient wants the information and understands what the result will and will not tell her. I will order these labs with informed choice. The result is one data point in a larger picture, not a verdict.

Labs are most useful for:

- **Ruling out other diagnoses** when symptoms overlap (thyroid disease, anemia, vitamin D deficiency)
- **Investigating heavy or irregular bleeding** when present (CBC, iron studies, additional workup as indicated)
- **General midlife preventive screening** (lipid panel, fasting glucose or HbA1c, vitamin D)
- **Clarifying complex cases** such as women under 45 with menopausal symptoms, surgical menopause, or atypical presentations

Questions to ask your provider

- What stage of perimenopause do you think I am in based on my symptoms and history?
- What is your approach to hormone therapy in early perimenopause?
- What non-hormonal options are available if hormone therapy does not fit?
- What is the follow-up plan?

References

1. Crandall CJ, Mehta JM, Manson JE. Management of Menopausal Symptoms: A Review. *JAMA*. 2023;329(5):405-420.
2. Hamoda H, Moger S, Morris E, et al. Menopause Practice Standards. *Clin Endocrinol*. 2024.
3. American Board of Internal Medicine Foundation. Choosing Wisely: FSH testing recommendations.
4. Aras SG, Grant AD, Konhilas JP. Clustering of >145,000 Symptom Logs Reveals Distinct Pre, Peri, and Menopausal Phenotypes. *Sci Rep*. 2025.

This checklist is educational and is not a substitute for clinical evaluation.

Sandra Golaszewski, DNP, APRN, CNM | AVENORA Health | avenorahealth.com | info@avenorahealth.com