

This questionnaire is designed to help you prepare for your medical appointments.

Fill it out and take it with you to your appointment so you can answer the doctor's questions quickly and accurately and therefore use the limited time more effectively.

It may be very useful to make a copy of this questionnaire to give to your doctor. This will provide something to refer back to at future appointments, and will help you both to monitor your condition.

It is important to provide your doctor with as much accurate information as possible in order to work as a team in getting a diagnosis or managing your condition.

BASIC QUESTIONS	YOUR RESPONSES
Date of your first menstrual period ever:	
Date of your most recent period:	
Duration of your period (in days):	
Type of flow (heavy, medium, light):	
Do you have bleeding between periods?	
Do you menstruate every 28 to 30 days, or are your cycles irregular?	
Do you have any bleeding between periods or after sex?	
Date of your last smear and result:	
What medications, birth control pills, hormones, and/or supplements do you take on a regular basis?	
(Note the strength and how often these medications are taken).	
List any previous illnesses (including sexually- transmitted diseases) and operations you have had:	ILLNESS OR OPERATIONS:
	DATE:



List your immediate family's major illnesses and diseases:	
List all known allergies:	
Do you use tobacco? If yes, how much and how often?	
Do you drink alcohol? If yes, how much and how often?	
Do you or have you ever used illegal drugs? If yes, how much and how often?	
Do you have pain with your periods?	□ Yes
Try to recognise the pattern of your pain. It's important to tell the doctor if you have pain during your menstrual period, all the time, or if it comes and goes. These questions are often best answered by keeping a Daily Pain Journal (see below) that keeps track of the date, the day in your menstrual cycle, the amount of pain you're	□ No
having, and the duration of the pain (for example, did it last all day or just part of the day?).	

SPECIFIC PAIN QUESTIONS	YOUR RESPONSES
Do you have pain during or after sexual intercourse?	□ Yes □ No □ Sometimes
When talking with your doctor about pain with intercourse, be open and honest about the type of pain you have, whether it is with deep penetration or all the time, whether orgasm makes the pain worse, and what methods alleviate the pain.	 Pain is worse with deep penetration I have pain during orgasm I have pain after orgasm I have pain with certain sexual positions
Do you have painful bowel movements?	□ Yes □ No □ Sometimes



Many women with endometriosis report significant bowel pain, including painful bowel movements, rectal pain, constipation, or diarrhoea. The doctor will also want to know if you've ever experienced blood in your stool and if any of these symptoms occur during menstruation.	 I have rectal pain I have constipation and/or diarrhoea or alternating courses of both I have had blood in my stool My bowel symptoms are worse during menstruation
Do you have pelvic pain with physical exercise?	□ Yes □ No □ Sometimes
Some women with endometriosis report feeling more pain when they engage in strenuous physical exercise. The pain may be more severe during menstruation.	Pain with exercise is worse during menstruation
When did your pain start?	
Where is the pain? As you answer this question, point to or describe the area of your body that's affected. Some physicians will provide a printed diagram of the body so you can mark the areas where you have pain.	
Type of pain? When describing pain, consider which adjectives best describe what you experience. Women often describe endometriosis pain as burning, stabbing, gnawing, cramping, jabbing, throbbing, cold, sharp, aching, or pressure.	



Severity of pain?	Pain on a scale of 1-10:	
There are several ways you can describe the pain's severity. For example, you may choose to use an adjective, such as excruciating, severe, moderate, or mild. Or you may choose to use a pain scale, rating it on a scale of one (no pain) to ten (pain so severe, it makes you pass out). If it's helpful, you may want to refer to the Andrea Mankoski's Pain Scale (see below).	Adjective(s) that describe	e my pain:
How bad is your pain right now?		
How many days are you in pain each month?		
Is the pain getting worse? From the time the pain started until now, has	□ Pain is getting much w	vorse
it gotten worse? If so, by what degree?	□ Pain is getting somew	hat worse
	□ Pain is about the same	e as usual
	Pain is getting somew	hat better
How does the pain impact your life? Tell your physician if you're missing work or school or declining invitations due to your symptoms.	□ Pain is getting somew	hat better
Tell your physician if you're missing work or school or declining invitations due to your	Pain is getting somew	hat better
Tell your physician if you're missing work or school or declining invitations due to your symptoms. Have you ever been admitted to hospital	 Pain is getting somew Meds Taken: 	hat better
Tell your physician if you're missing work or school or declining invitations due to your symptoms. Have you ever been admitted to hospital with your pain? List the medications you have taken to try to alleviate your pain. Were they effective? Tell your doctor of any over-the-counter or prescription medications you have taken or are taking for pain, and whether they reduce		



Do you routinely experience nausea with menstruation?	□ Yes □ No
Do you vomit during menstruation?	□ Yes □ No
Do you have unusual vaginal bleeding at any time during your cycle?	□ Yes □ No
Do you experience painful urination or blood in urine at any time during your cycle?	□ Yes □ No
Do you experience bloating during menstruation or at other times?	□ Yes □ No
Do you have difficulty gaining or losing weight?	□ Yes □ No
Do you experience fatigue?	□ Yes □ No

Andrea Mankoski, an endometriosis sufferer, devised this pain scale to help describe the subjective experience of pain in more concrete terms to her doctors and family. You may



find it helpful to use the scale to describe your own pain.

	ANDREA MANKOSKI'S PAIN SCALE		
0	Pain free	No medication needed	
1	Very minor annoyance - occasional minor twinges	No medication needed	
2	Minor annoyance - occasional strong twinges	No medication needed	
3	Annoying enough to be distracting	Mild painkillers are effective (i.e., aspirin, ibuprofen)	
4	Can be ignored if you are really involved in your work, but still distracting	Mild painkillers relieve pain for 3-4 hours	
5	Can't be ignored for more than 30 minutes	Mild painkillers reduce pain for 3-4 hours	
6	Can't be ignored for any length of time, but you can still go to work and participate in social activities	Stronger painkillers (Codeine) reduce pain for 3-4 hours	
7	Makes it difficult to concentrate, interferes with sleep You can still function with effort. Stronger painkillers are only partially effective	Strongest painkillers relieve pain	
8	Physical activity severely limited. You can read and converse with effort. Nausea and dizziness set in as factors of pain	Stronger painkillers are minimally effective. Strongest painkillers reduce pain for 3-4 hours	
9	Unable to speak – crying out or moaning uncontrollably – near delirium	Strongest painkillers are only partially effective	
10	Unconscious. Pain makes you pass out	Strongest painkillers are only partially effective	

Thank you to <u>Endometriosis.org</u> who first developed the Consultant's Questionnaire which they have allowed us to adapt.

Helpline: 0808 808 2227

This document was last updated in 2021. It's currently being reviewed and updated to reflect recent changes in endometriosis care, with input from medical practitioners and patients. Please keep an eye on our website for an updated version soon.

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