

PMDD Symptom Log

based on the "Daily Record of Severity of Problems"

Patient Name: _____

Month/Year: _____

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Symptoms	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
1. Irritability or Anger																														
2. Anxiety/Tension/Feeling "on edge"																														
3. Depression/Hopelessness																														
4. Sudden mood swings																														
5. Low motivation/Lack of interest																														
6. Difficulty concentrating																														
7. Lethargy or easy fatigability																														
8. Sleep changes (more/less)																														
9. Bloating/breast tenderness																														
10. Impact/Interference with Work/Social Life																														
11. Period: Mark '6' for bleeding days																														

Instructions

Every evening, rate the symptoms listed below on a scale of 1 to 6.

1 - None: I feel like my "normal" self.

2-3 - Mild: I feel the symptom, but I can manage my day-to-day tasks.

4-5 - Moderate: This is affecting my productivity or how I interact with others.

6 - Severe: Extreme distress; I am unable to function or feel in crisis.