

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 fatiguability																														
8.	Sleep changes (more/less)																														
9.	Bloating/breat 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.