## **Hormone Evaluation Follow-Up Questions**

What are her chief complaints?
How old is she/what stage of life is she in?
What is her height and weight?
Has she had a hysterectomy (full or partial)?
What are her current HRT medications (dosage form, strength, and route of administration, site and volume of topical application)?
How long has she been on above therapy?
Is she compliant with her current medication?
What has she previously taken (dosage forms, strengths, and routes of administration)?
Why did she change previous medications?
Has she had any hormone levels taken (saliva, blood, or urine)?
What non-HRT medications is she taking?

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