**Service**

**Perimenopause/Menopause Presentation in Pain Services Questionnaire**

**Do you routinely ask women about perimenopause/menopause during the assessment?**

Very often Often Sometimes Rarely Never

**If marked relevant, did perimenopause/menopause symptoms worsen existing problems, cause new ones or both?**

Worsening existing problems Cause new problems Both

**How relevant is perimenopause/menopause for pain symptoms in your service?**

Very irrelevant Irrelevant Neutral Relevant Very relevant

**Is perimenopause/menopause and existing conditions jointly managed with GP or other services?**

Yes No

**If yes, please detail below this pathway below.**

(how pathway is adapted, staffing, training etc)

**Does your service have a specialist perimenopause/menopause pathway?**

Yes No



No

Yes

**It is routine recorded on your record system if a patient is experiencing perimenopause/menopause?**

**If answer yes, below details below.**

*(hormone treatment, lifestyle changes, specific group intervention etc)*

**Do you give specific advice or guidance to patients regarding perimenopause/menopause?**

Yes  No 

**Would you like to be kept updated with the responses of this questionnaire?**

Yes  No 