

Women's Health Basics — Workbook

This workbook accompanies the Women's Health Basics course and gives you structured exercises, worksheets, and checklists to translate course concepts into personal action. Work through each section after completing the corresponding module, and bring your completed worksheets to healthcare appointments as a reference. All content is general education — your healthcare provider is your partner for personalised guidance.

The Menstrual Cycle and Hormonal Health

Use these activities to build a cycle-awareness habit, identify your personal hormonal patterns, and prepare for productive healthcare conversations.

Exercise: Cycle Phase Energy Mapping

Choose a 4-week period you remember well (or the current month if you are tracking live). Plot your energy, mood, and physical performance level across each phase on a 1–10 scale. Look for the patterns described in the course — then answer the reflection prompts below.

- Which phase consistently gave you the highest energy and clearest thinking? Does this match the follicular/ovulatory pattern described in the course — or is yours different?

- Where in your cycle do you notice the biggest dip in motivation or mood? What environmental or nutritional factors might be amplifying or buffering that dip?

- Identify one training session or demanding work task you could intentionally schedule in your next follicular or ovulatory phase to take advantage of peak performance.

- Write one specific food or nutrient change you will make during your next luteal phase based on the course guidance.

Worksheet: Hormonal Symptom Tracker for GP Visits

Log any symptoms you notice across your cycle for the next 2–3 months. Bring the completed sheet to your next GP or gynaecology appointment. Be as specific as possible — cycle day, severity (1–5), and any context (sleep, stress, diet).

Month and cycle length (days from first day of period to next period)

Cycle day when symptom occurs

Symptom description (e.g., heavy bleeding, fatigue, acne, mood change, cramps)

Severity rating (1 = mild, 5 = severe)

Duration (hours or days)

Possible trigger or context (stress, poor sleep, certain food)

Impact on daily function (none / mild disruption / major disruption)

Checklist: Cycle-Syncing Starter Checklist

- Download a cycle-tracking app (Clue, Natural Cycles, or similar) and log your next period start date
- Set a daily reminder to record energy, mood, and sleep quality for 30 consecutive days
- Identify and note your average cycle length using the last 3 periods
- Schedule one resistance training session in the first 5 days after your period ends (early follicular window)
- Stock one magnesium-rich snack (almonds, dark chocolate, or pumpkin seeds) to have ready for the late luteal phase
- Add iron-rich foods to your grocery list for use during and immediately after menstruation
- Write down the date of your last Pap smear or HPV test and calculate when the next one is due

Bone Density and Musculoskeletal Health

These activities help you audit your current calcium and vitamin D intake, build a bone-strengthening movement habit, and understand your personal osteoporosis risk.

Exercise: Calcium Intake Audit

Use Cronometer (free at cronometer.com) or a similar food diary tool to log everything you ate and drank over the past 3 days. Then answer the prompts below to assess your calcium baseline and identify gaps.

- What was your average daily calcium intake across the 3 days? How does it compare to the 1,000–1,200 mg target for your age group?

- Which meals or snacks contributed the most calcium? Which meals had almost none?

- If your intake is below target, list 2–3 specific food swaps or additions (from the course list) that would realistically fit your current eating pattern.

- Do you know your last serum vitamin D (25(OH)D) result? If not, write a note to request it at your next GP visit.

Worksheet: Osteoporosis Risk Factor Assessment

Work through the risk factor list from the course and honestly assess your personal profile. Use this as a discussion starting point with your GP, not as a self-diagnosis tool.

Current age

Menopausal status (pre / peri / post / not applicable)

Age at menopause (if applicable)

Body weight and height (calculate BMI if possible)

Family history of hip fracture or osteoporosis (list who and their age at diagnosis)

Smoking history (current / former / never; pack-years if applicable)

Alcohol consumption (drinks per week on average)

Current or recent corticosteroid use (medication name, dose, duration)

History of amenorrhoea or eating disorder

Date and result of last DEXA scan (or 'not yet had one')

Current weekly resistance training and weight-bearing exercise (describe)

GP conversation needed? (yes / no / unsure)

Checklist: Weekly Bone Health Action Checklist

- Complete at least 2 resistance training sessions targeting the lower body (squats, deadlifts, lunges) this week
- Include at least one weight-bearing impact activity (brisk walk, jog, jump rope, tennis, dancing)
- Hit calcium target from food sources on at least 5 of 7 days
- Take vitamin D supplement if your level is deficient or you are in a low-sun season (October–April in Canada)
- Eat a magnesium-rich food daily (dark leafy greens, almonds, avocado, pumpkin seeds)
- Avoid smoking and keep alcohol to 2 or fewer drinks on any single day
- If you are 50 or older and have not had a DEXA scan, raise it at your next GP visit and write it on your screening calendar

Exercise: Bone-Loading Exercise Progression Plan

Based on your current fitness level, map out a 4-week progression for your bone-loading exercise routine. Use the course's weekly template as your starting framework and adapt it to your schedule and preferences.

- What resistance training exercises do you currently perform, and at what frequency? Are you progressively increasing load every 1–2 weeks?
- Which weight-bearing activities do you genuinely enjoy and would do consistently? List your top 2.
- Write a specific Week 1 and Week 4 resistance training session for your lower body — including exercises, sets, and target reps — showing a clear progression in load or volume.

Pelvic Floor Health

Build a Kegel habit, assess whether you should see a pelvic health physiotherapist, and design a daily pelvic floor routine that fits your life stage.

Exercise: Pelvic Floor Function Self-Observation

Answer the following prompts honestly. Note: this is a general awareness exercise, not a clinical assessment. If any prompts reveal concerning symptoms, please see your GP or a pelvic health physiotherapist rather than attempting to self-treat.

- Do you experience any leakage of urine when coughing, sneezing, jumping, or laughing? Describe the frequency and amount (occasional drops / moderate leakage / significant leakage).
- Do you experience any pelvic pain, pain with intercourse, or difficulty inserting a tampon? These may indicate a hypertonic (overactive) pelvic floor — Kegel exercises are NOT recommended without physiotherapy assessment if yes.
- Have you had any pregnancies or births in the last 3 years? Have you had a postpartum pelvic floor

assessment?

- Based on your answers, do you think your pelvic floor is underactive (needs strengthening), overactive (needs relaxation and therapy), or generally healthy (maintenance Kegels appropriate)?

Worksheet: Kegel Habit Tracker — 8 Weeks

Use this sheet to log your Kegel sessions over 8 weeks. Record each session with the date, number of sets and reps, hold duration, and any observations. At 4 weeks, assess progress and adjust if needed.

Date

Sets completed (target: 3)

Reps per set (target: 10)

Hold duration per rep (seconds)

Quick flicks completed (yes / no)

Position (lying / sitting / standing)

Self-assessment: did you feel a clear contraction and full release? (yes / unsure / no)

Symptom notes (any leakage episodes today, any discomfort, any improvement noticed)

Checklist: Pelvic Floor Care Checklist

If you have pelvic pain, painful intercourse, or difficulty relaxing pelvic muscles: book a pelvic health physiotherapy assessment before starting Kegels

If no contraindications: begin Kegel routine this week — 3 sets of 10, hold 3 seconds, release fully, 3x daily

Practise the Knack technique before your next coughing or sneezing episode: contract pelvic floor just before and during the pressure moment

Identify 2 existing daily habits to anchor Kegel practice onto (e.g., morning coffee, car commute, brushing teeth)

At 6 weeks postpartum (if applicable): request a pelvic floor assessment from your GP or midwife

At perimenopause onset: discuss genitourinary syndrome of menopause (GSM) and topical oestrogen options with your GP

If doing heavy lifting: practise exhaling and gently engaging pelvic floor and core on exertion (the Valsalva-avoidance technique)

Log any leakage episodes for 2 weeks and bring the log to your next healthcare appointment

Preventive Screening and Lifestyle Strategies

Build a personalised screening calendar, audit your cardiovascular risk numbers, and write a 30-day implementation plan that makes your wellness habits stick.

Worksheet: Personal Preventive Screening Calendar

Using the course's age-based screening schedule and your own health history, complete the fields below to create your rolling screening calendar. Bring this to your next GP appointment and ask them to validate and personalise it.

Current age

Last Pap smear date and result

Next Pap smear / HPV test due date

Last mammogram date and result (if applicable by age or risk)

Next mammogram due date

Last DEXA bone density scan date and T-score (if applicable)

Next DEXA due date

Last colorectal screening (colonoscopy or stool test) date

Next colorectal screening due date

Last cholesterol (lipid panel) date and LDL result

Last fasting glucose or HbA1c date and result

Last blood pressure reading and date

Vaccine status (HPV series complete? Flu vaccine current year?)

Family history flags that may advance any screening timeline

Date of next GP appointment booked

Exercise: Cardiovascular Risk Number Audit

Gather your most recent lab and clinical results (from your patient portal, lab printout, or memory of the last visit). Fill in the table below and then answer the reflection prompts.

- Which numbers do you know, and which are you missing? Write a list of the results you need to request at your next GP appointment.

- If your blood pressure is above 120/80 mmHg, which two lifestyle changes from the course are you most willing to implement this month?

- If your LDL is above 3.0 mmol/L or you have a female-specific cardiovascular risk factor (early menopause, PCOS, preeclampsia history), have you discussed it with your GP? Plan when you will raise this.

Checklist: 30-Day Women's Wellness Launch Checklist

- Day 1: Download a cycle-tracking app and log today
- Day 1: Calculate your average daily calcium intake using Cronometer
- Day 2: Book a GP appointment if overdue for any screening or have unaddressed symptoms
- Day 3: Begin Kegel practice (3 sets of 10, 3x daily) — or book pelvic physio if you have pain
- Day 5: Schedule 2 resistance training sessions per week in your calendar for the next 4 weeks
- Day 7: Review your completed screening calendar and identify the most overdue item
- Day 14: Check in on calcium intake habit — are you hitting target on most days?
- Day 14: Confirm Kegel habit is in place — if not, troubleshoot the anchor habit
- Day 21: Request vitamin D and lipid panel blood tests at GP if not done in the past 12 months
- Day 30: Review cycle tracking data and note patterns — write 1 nutrition or training adjustment for next cycle

Your Action Plan

1. Start cycle tracking today — log your current cycle day and download a tracking app; commit to 90 days of consistent daily logging
2. Audit calcium intake this week using a free food diary tool; identify and close any gap with food-first strategies before considering supplements
3. Book a GP appointment within the next 30 days if any preventive screening is overdue or you have unaddressed hormonal, pelvic, or cardiovascular symptoms
4. Begin a bone-loading exercise routine: 2 resistance training sessions and 2 weight-bearing cardio sessions per week — schedule them now
5. Start daily Kegel practice if you have no pelvic pain: 3 sets of 10 reps, holding 3 seconds, fully releasing, linked to an existing daily habit
6. Request a vitamin D level test and fasting lipid panel at your next GP visit if you have not had them in the past 12 months
7. Build your personalised screening calendar using the Workbook Section 4 worksheet and bring it to your next healthcare appointment
8. Know your cardiovascular numbers: blood pressure, LDL, fasting glucose — write down the ones you know and flag the ones you need to find out

