YOUR <b>12</b> -WEEK PLAN	
WEEK 1 2 3 4 5	6 7 8 9 10 11 12
Date Day of Week	
Starting Weight Current Weight Goal Weight	
HORMONES (record daily)	
ESTROGEN AM PM	PROGESTERONE AM PM
Monthly cycle ☐ YES ☐ NO	
Current Medications	
What menopause symptoms are you experiencing?	
How do you feel emotionally today?	
EXERCISE	
CARDIO   Goal > 20-30 minutes a day, 5-6 days a week.	STRENGTH BUILDING   Goal > 2-3 times per week or daily.
Weekly goal:	What type of exercise:
What type of exercise:	Intensity:
Intensity: low medium high  For how long:  Heart-rate average: Did I succeed? yes no	For how long: Heart-rate average: Calories burned: Did I succeed? yes no Time of day:
Calories burned: Time of day:	Other Activity: Calories burned: