

PATIENT **Beatrice Okonkwo-Hart** | DOB **19/04/1980** | INTERVIEW COMPLETED **7 September 2026** | EXPORTED **7 September 2026**
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Patient-reported data only — your clinical interpretation follows in the appointment.

AT A GLANCE			Generated 14:02 BST
Complaint	Heavy periods	Duration	“Getting worse over about two years”
Cycle	Every 24–28 days (patient-reported)	Bleeding days	8–9 days; “flooding” on days 2 and 3
Contraception	None hormonal; partner reports vasectomy	Last cervical screening	“Last year, normal as far as I know”
Safety status	Safety flags reported — see Safety flags below		

KEY POINTS

- Periods that have become “much heavier” over about two years, lasting 8–9 days.
- “flooding” and changing protection “every hour on the worst days”, with clots “bigger than a 50p”.
- “spotting between periods, a few times” in the last six months.
- Feels “dizzy when I stand up” and “tired all the time”; started iron tablets “last month” on GP advice.

SAFETY FLAGS

REPORTED PRESENT	REPORTED ABSENT
“spotting between periods, a few times” in the last six months.	Bleeding after sex; possibility of pregnancy (patient reports partner’s vasectomy and a negative home test “last month”); severe pelvic pain with fever.

QUESTIONNAIRE SCORES

EQ-5D-5L visual analogue scale	60/100	Patient-rated health today
Bleeding PROM	Not captured	No validated bleeding questionnaire configured; structured items recorded above

PROBLEM SUMMARY

Heavy menstrual bleeding that has “got worse over about two years”. Cycles are reported every 24–28 days with bleeding lasting 8–9 days, “flooding” on the second and third days, changing protection “every hour on the worst days” and passing clots “bigger than a 50p”. “spotting between periods, a few times” in the last six months, cramping pain on the first two days rated “7 out of 10”, and a feeling of “pressure” low in the abdomen.

BLEEDING PATTERN

- **Cycle length:** 24–28 days; “fairly regular”.
- **Duration:** 8–9 days; heaviest on days 2 and 3.
- **Volume:** “flooding”; changes protection “every hour on the worst days”; “double protection at night”; clots “bigger than a 50p”.

PAIN AND ASSOCIATED SYMPTOMS

- Cramping pain days 1–2, “7 out of 10”, eased by ibuprofen and heat.
- “Pressure” low in the abdomen; needing to pass urine “more often during my period”.
- Dizziness on standing and tiredness “all the time”.

MEDICATIONS AND LIFESTYLE

- **Medications:** tranexamic acid during periods (“helps a bit”); ibuprofen; iron tablets started “last month”.
- **Reported absent:** blood-thinning medication, hormonal treatment.
- Non-smoker; alcohol “occasionally”.

RELEVANT COMORBIDITIES

- Told by the GP that their “iron was low”.
- **Family:** “my mum had a hysterectomy at 45”.
- **Reported absent:** known bleeding disorder, easy bruising, heavy bleeding after dental work or childbirth.

OUTSTANDING CLINICAL QUESTIONS

- The result of the GP blood tests (beyond “iron was low”) is not known to the patient.
- Whether a pelvic ultrasound has been arranged is not established.

This summary was prepared from a patient-reported pre-consultation interview. All information is self-reported and unverified. Clinical findings, examination, and objective investigations are required before any clinical conclusions can be drawn.