



THE MENOPAUSE ROADMAP

# WHERE AM I IN MENOPAUSE?

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A clear roadmap through perimenopause,  
menopause and the years beyond

**Martine Chin**

CNP, FMACC, IHP2, HPMC

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*Your guide to understanding where you are and what comes next.*

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# Welcome to Your Menopause Roadmap

Menopause has a way of handing us a collection of changes without an instruction manual. A period arrives early. Sleep becomes unpredictable. The jeans that fit last year suddenly have opinions. Then someone mentions perimenopause, and you are left wondering where you are and what comes next.

This guide was created to make the picture clearer. It walks you from early perimenopause through postmenopause, explains the changes that commonly appear along the way, and helps you decide what deserves your attention now.

Some women follow a fairly recognizable pattern. Others have had a hysterectomy, use hormones or medication that affects bleeding, or enter menopause after surgery or medical treatment. Your path may look different, and this roadmap leaves room for that.

As you read, notice what sounds familiar, write down your questions, and choose the next steps that feel most useful. You do not need to tackle everything at once. Clarity comes first.

*Warmly, Martine*

## How to Use This Guide

### 1 UNDERSTAND

Begin with the menopause continuum and see how each stage is defined.

### 2 NOTICE

Pay attention to patterns, symptoms and questions that feel familiar.

### 3 CHOOSE

Select two or three practical next steps for your personal roadmap.



*Your experience is personal. Your next step can be practical.*

# The Menopause Continuum at a Glance

Menopause unfolds in stages. The timing and experience vary, but the general pathway looks like this.

## STAGE 1

### Early Perimenopause

Cycles may become a little shorter, longer, heavier or lighter. Changes can be subtle, and periods are still occurring.

## STAGE 2

### Late Perimenopause

Gaps between periods become longer, sometimes 60 days or more. Hot flashes, sleep changes and other symptoms may become more noticeable.

## ONE DAY

### Menopause

Menopause is a single point in time. It is confirmed after 12 consecutive months without a menstrual period when there is no other explanation.

## THE YEARS BEYOND

### Postmenopause

Postmenopause begins after that milestone and continues for the rest of life. The focus expands to long-term bone, muscle, heart and metabolic health.

*You only know your menopause date after the full 12 months have passed.*





# Early Perimenopause

This stage can be easy to miss. Your periods are still arriving, but your usual pattern may be starting to shift.



## ✓ What makes it “early”?

The ovaries begin releasing eggs less predictably, and hormone levels can fluctuate. At first, the changes may be small rather than dramatic.

A difference of about seven days or more between cycle lengths is one recognized sign of the early menopause transition.

## ✓ Clues you may notice

- Periods coming a little sooner or later
- Heavier, lighter, longer or shorter flow
- PMS that feels new or more intense
- Sleep, mood or concentration changes
- Occasional hot flashes or night sweats

### YOUR ROADMAP MOVE

## Notice the pattern

A simple record can make a changing pattern much easier to see and explain.

### 1 Track your cycle

Note start dates, cycle length, flow and spotting.

### 2 Track symptoms

Record what happens and where it falls in your cycle.

### 3 Track the impact

Notice effects on sleep, energy, work and daily life.

*One unusual month does not tell the whole story. Patterns are more useful than snapshots.*



### Still having periods?

Pregnancy may still be possible until menopause is confirmed. Ask your healthcare professional about contraception and any bleeding changes that concern you.

# Late Perimenopause

Periods may become widely spaced, and symptoms can feel more noticeable or unpredictable. You are getting closer to menopause, but you are not there yet.

## ✓ What makes it “late”?

Ovulation becomes less frequent, and periods may disappear for longer stretches.

A gap of 60 days or more without a period is a recognized sign of the late menopause transition. A period can still return after a long gap.

## ✓ Clues you may notice

- Skipped periods or much longer gaps
- More frequent hot flashes or night sweats
- Sleep disruption and daytime fatigue
- Mood or concentration changes
- Vaginal dryness or urinary changes

### YOUR ROADMAP MOVE

## Build support around what is changing

You do not have to wait for your periods to stop before asking for help.

### 1 Name the priority

Identify the one or two changes affecting life most.

### 2 Discuss options

Ask about evidence-based hormonal and nonhormonal care.

### 3 Protect foundations

Support sleep, nourishment, strength, movement and recovery.

*The right support can begin now. Menopause is not an admission ticket.*

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### The 12-month clock

If a period returns before 12 complete months have passed, the count begins again. Menopause can only be confirmed in hindsight.

# Menopause Really Is One Day

It is not a stage you remain in. It is a milestone confirmed only after 12 consecutive months without a menstrual period.

## HOW THE MILESTONE IS REACHED

### Final period



The last menstrual period occurs.



No menstrual period, with no other explanation.

### Menopause



The milestone is confirmed. Postmenopause follows.

*You can only identify the milestone by looking back.*

### ✓ What confirms it?

For natural menopause, menstrual history is usually the clearest guide:

- 12 complete months without a period
- No other cause for periods stopping
- Confirmation made in hindsight

### ✗ What does not confirm it?

None of these tells the full story alone:

- Hot flashes or other symptoms
- One long gap between periods
- A single FSH or estrogen result

### ! Bleeding after menopause deserves attention

Any bleeding after menopause has been confirmed should be discussed with a healthcare professional, even if it happens only once or seems very light.

**If periods cannot be used as a guide, your healthcare professional may use other clinical information.**



# Postmenopause: The Years Beyond

Postmenopause begins after the menopause milestone and continues for the rest of life. Symptoms may ease, continue or change, and health priorities expand.

## ✓ What defines this stage?

Natural menopause has been confirmed after 12 months without a period.

- Periods have permanently ended
- Ovarian hormone levels remain lower
- Natural pregnancy is no longer possible

## ✓ What may happen next?

There is no single postmenopause experience. You may notice:

- Some symptoms gradually easing
- Other symptoms continuing for years
- New vaginal or urinary concerns

### YOUR ROADMAP MOVE

## Care for today while protecting tomorrow

Your focus can hold symptom relief and long-term health at the same time.

### 1 Address symptoms

Seek support for concerns that affect comfort, sleep, mood or quality of life.

### 2 Protect your health

Prioritize bone, muscle, heart, brain and metabolic health for the years ahead.

### 3 Review regularly

Update screenings, health goals and care as your needs change over time.

*This stage is not an ending. It is the beginning of the years beyond.*



### Your next layer of support

This roadmap helps you locate yourself. The Postmenopause Survival Toolkit helps you turn that understanding into practical next steps.

## When the Stages Are Not So Straightforward

The 12-month rule works best when natural periods can be tracked. Sometimes the calendar cannot tell the whole story.

### WHY THE USUAL MAP MAY NOT FIT



#### Hormonal contraception

Birth control pills, injections, implants or hormonal IUDs can change or stop bleeding, making periods an unreliable stage marker.



#### Hysterectomy or ablation

Bleeding may stop even when the ovaries remain. The hormonal transition can still occur without a visible monthly clue.



#### Surgery or medical treatment

Removal of both ovaries causes immediate surgical menopause. Some cancer treatments may also temporarily or permanently affect ovarian function.



#### Periods stop unexpectedly

Pregnancy, thyroid conditions, elevated prolactin, illness, weight changes and some medications can affect periods and should not automatically be labeled menopause.

### YOUR ROADMAP MOVE

## Use a wider map

When periods cannot guide you, bring these four pieces to the conversation:

1

#### Your timeline

What changed, when and how quickly

3

#### Your history

Surgeries, treatments and medications

2

#### Your symptoms

Pattern, severity and daily impact

4

#### Your questions

What needs evaluation or support

*You do not need a perfect stage label before your symptoms and health concerns can be addressed.*

# Your Menopause Stage Decoder

Use what you know today. This page is a conversation starter, not a diagnosis.

## 1. Start with your timeline

Age: \_\_\_\_\_ First day of your last period: \_\_\_\_\_

If you cannot use periods as a guide, briefly note why: \_\_\_\_\_

## 2. Check your period pattern

CHECK THE ONE THAT FITS BEST TODAY

- ☐ Mostly regular and predictable
- ☐ Cycles vary by about 7 days or more
- ☐ At least one gap of 60 days or more
- ☐ No period for 12 complete months
- ☐ Bleeding pattern is unavailable or altered
- ☐ I am not sure

## 3. Add important context

CHECK ALL THAT APPLY

- ☐ Using hormonal contraception
- ☐ Had a hysterectomy
- ☐ Had an endometrial ablation
- ☐ One or both ovaries removed
- ☐ Cancer treatment affected my cycles
- ☐ Another health or medication factor

## 4. What your pattern may suggest

USE THIS AS A GUIDE, NOT A FINAL LABEL

**Subtle cycle shifts**  
Early perimenopause may be beginning.

**Gaps of 60 days or more**  
Late perimenopause may fit.

**12 months without a period**  
Menopause is confirmed.

**No reliable bleeding pattern**  
Use a wider clinical picture.

The question I most want answered: \_\_\_\_\_

*Bring this page to a healthcare visit or use it as a starting point for your Menopause Audit.*

Your stage is one piece of the picture. Your symptoms, history and priorities matter too.



# Symptoms Can Overlap

The same symptom can appear before, during or after the menopause milestone. Symptoms matter, but they cannot identify your stage by themselves.

## ONE SYMPTOM, MORE THAN ONE STAGE



### Hot flashes and night sweats

May begin in perimenopause, become more noticeable later and continue into postmenopause.



### Sleep, mood and concentration

May fluctuate across the transition and may improve, change or persist after menopause.



### Vaginal and urinary changes

Can begin during perimenopause and may continue or become more noticeable after menopause.

*The stage clue comes from the pattern around the symptom, not the symptom alone.*

## YOUR ROADMAP MOVE

### Describe the burden, not just the symptom

For each concern, record four details that make the pattern more useful:

**1****Frequency**

How often it happens

**2****Severity**

How intense it feels

**3****Timing**

When it appears or changes

**4****Impact**

What it disrupts



### Do not automatically blame menopause

A new or changing symptom can have another cause. The next page shows which changes deserve a closer look rather than being dismissed as “just menopause.”

## What Shouldn't Be Dismissed as “Just Menopause”

Menopause can explain many changes, but it should not become a catch-all. Sudden, severe or rapidly worsening symptoms deserve attention at any stage.



### GET EMERGENCY HELP NOW

#### Do not wait to see whether it passes

- **Possible heart attack signs**  
Chest pressure or pain, severe shortness of breath, cold sweat, nausea, lightheadedness or fainting
- **Possible stroke signs**  
Sudden face drooping, arm weakness, speech or vision changes, loss of balance or severe headache
- **Heavy bleeding with signs of blood loss**  
Very heavy bleeding with chest pain, shortness of breath, dizziness or fainting



### ARRANGE A TIMELY APPOINTMENT

#### Ask for a closer look

- Any bleeding or spotting after menopause has been confirmed
- Bleeding between periods, after sex, much heavier than usual or lasting over 7 days
- Persistent pelvic pain or bloating, a new breast lump or unexplained weight loss
- New or persistent palpitations, recurring severe headaches or unusual sensory changes
- Mood, anxiety or sleep changes that are significantly affecting daily life
- Periods stopping before age 45, especially before age 40

### YOUR ROADMAP MOVE

#### Describe it clearly and ask for evaluation

*"This is new for me. It began \_\_\_\_\_. It happens \_\_\_\_\_.  
It affects \_\_\_\_\_. I would like to rule out causes beyond menopause."*

If you feel something is being overlooked, it is reasonable to ask what else has been considered.

# How Your Health Priorities Shift

Your health needs do not suddenly change on one date. The emphasis gradually moves from recognizing the transition to protecting the years ahead.

## EARLY PERIMENOPAUSE

### Recognize & establish

Bring the changing pattern into view.

- Track cycle and symptom changes over time
- Address symptoms affecting quality of life
- Review blood pressure, metabolic and bone risks
- Discuss contraception and pregnancy plans if relevant

#### MAIN QUESTION

*What is changing, and what support would help now?*

## LATE PERIMENOPAUSE

### Support & preserve

Protect function while symptoms fluctuate.

- Treat symptoms that disrupt sleep, mood or daily life
- Protect nourishment, strength, movement and recovery
- Discuss hormonal and nonhormonal treatment options
- Update your personal health and family risk picture

#### MAIN QUESTION

*What is most disruptive, and what could protect function?*

## POSTMENOPAUSE

### Protect & maintain

Build health for the years beyond.

- Continue symptom, vaginal and urinary care as needed
- Prioritize bone, muscle, heart, brain and metabolic health
- Keep preventive screenings and risk reviews current
- Revisit goals and care as health needs change

#### MAIN QUESTION

*What do I want to protect for the years ahead?*

## WHAT STAYS THE SAME

### Notice. Support. Prevent. Review.

The emphasis shifts, but the foundations of midlife health remain important at every stage.

*Next: the five foundations that support the entire roadmap.*

## Five Foundations That Matter at Every Stage

Your needs may change, but these five foundations continue to support health through perimenopause, menopause and the years beyond.

1

### Nourishment & blood sugar stability

☐ MY FOCUS

Build meals around adequate protein, fiber, colorful plants and nourishing fats. Regular, balanced meals can support steadier energy, appetite and metabolic health.

2

### Muscle, movement & bone-loading activity

☐ MY FOCUS

Combine regular movement with resistance training, balance work and weight-bearing or impact activity that is appropriate for your body, ability and bone health.

3

### Sleep & recovery

☐ MY FOCUS

Protect a consistent sleep window and make room for recovery. Persistent sleep problems deserve attention rather than being treated as an unavoidable part of midlife.

4

### Stress & nervous-system support

☐ MY FOCUS

Use realistic supports that help you recover from daily demands, such as boundaries, breathing, time outdoors, enjoyable movement, connection and genuine rest.

5

### Preventive care & appropriate testing

☐ MY FOCUS

Keep screenings and risk reviews current. Testing should be selected for your age, history, symptoms and goals, then interpreted within the wider health picture.

*You do not need to perfect all five. Begin where your body and health are asking for support.*

These same foundations continue through both the Perimenopause and Postmenopause Survival Toolkits.

Choose one “My Focus” box above as your starting point.



## Your Next Steps, Based on Your Stage

Choose the section that fits best today. You do not need to complete everything at once. One clear next step is enough to begin.

### EARLY PERIMENOPAUSE

#### Notice the change and establish your baseline

##### START NOW

- ☐ Track period dates, flow and symptoms
- ☐ Choose your main symptom or foundation

##### AT YOUR NEXT VISIT

- ☐ Ask whether your pattern fits perimenopause
- ☐ Review other causes, risks and treatment options

*Build toward: a clearer pattern, a personal baseline and support before symptoms escalate.*

### LATE PERIMENOPAUSE

#### Reduce disruption and protect your capacity

##### START NOW

- ☐ Record long gaps and your top three symptoms
- ☐ Protect sleep, nourishment, movement and recovery

##### AT YOUR NEXT VISIT

- ☐ Discuss hormonal and nonhormonal care
- ☐ Review bleeding changes and personal health risks

*Build toward: symptom relief, preserved strength and a supported transition into menopause.*

### POSTMENOPAUSE

#### Care for today while protecting tomorrow

##### START NOW

- ☐ Note persistent symptoms and menopause date
- ☐ Choose one long-term health priority to strengthen

##### AT YOUR NEXT VISIT

- ☐ Review bone, muscle, heart and metabolic risks
- ☐ Keep screenings and symptom care current

*Build toward: strength, prevention and a health plan that evolves with you.*

**Stage still unclear? Return to your Stage Decoder and use the wider map from Page 8.**

Your completed checkboxes can also become a starting point for your Menopause Audit.

# Prepare for a Better Healthcare Conversation

A short, organized summary makes it easier to explain what has changed, what is affecting your life and what you want from the appointment.

## 1. Bring the story, not a symptom pile

### CHECK WHAT YOU HAVE READY

- |                                                        |                                                       |                                                  |
|--------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Cycle or bleeding timeline    | <input type="checkbox"/> Medical and surgical history | <input type="checkbox"/> Relevant test results   |
| <input type="checkbox"/> Top symptoms and daily impact | <input type="checkbox"/> Medications and supplements  | <input type="checkbox"/> Your goal for the visit |

## 2. Lead with what matters most

### COMPLETE BEFORE THE VISIT

My main concern: \_\_\_\_\_

It began: \_\_\_\_\_

It happens: \_\_\_\_\_

It affects: \_\_\_\_\_

I have already tried: \_\_\_\_\_

\_\_\_\_\_

## 3. Questions worth asking

### CHECK THE ONES YOU WANT TO USE

- ☐ Does my pattern fit a menopause stage, and what else should be ruled out?
- ☐ What treatment options fit my symptoms, history, preferences and risks?
- ☐ Which screenings or tests are appropriate, and how would they change the plan?
- ☐ What should I track, and when should we review how the plan is working?

### A SIMPLE WAY TO OPEN THE CONVERSATION

*"My main concern is \_\_\_\_\_. It began \_\_\_\_\_.*

*It happens \_\_\_\_\_ and affects \_\_\_\_\_.*

*I would like help understanding the cause and choosing next steps that fit me."*

If the answer is "your labs are normal," ask what has been ruled out and what the next step will be if symptoms continue.

A Menopause Audit can help organize your stage, symptoms, health history and priorities before the visit.

Your goal is not to arrive with every answer. It is to arrive with a clearer story.

# Create Your Personal Menopause Roadmap

Bring the pieces together into one realistic plan. Choose what matters now, then review and adjust as your stage, symptoms and priorities change.

## 1. My starting point

### THE STAGE THAT FITS BEST TODAY

☐ Early perimenopause ☐ Late perimenopause ☐ Postmenopause ☐ Unclear or a different path

## 2. What matters most now

### NAME THE PRIORITY BEFORE THE PLAN

The change affecting me most:

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---

What I want to feel, improve or protect:

---

---

## 3. My foundation to strengthen

### CHOOSE ONE STARTING POINT

- ☐ Nourishment and blood sugar stability
- ☐ Muscle, movement and bone loading
- ☐ Sleep and recovery
- ☐ Stress and nervous-system support
- ☐ Preventive care and appropriate testing

## 4. My next 30 days

### KEEP THE PLAN SMALL ENOUGH TO USE

One action I will take: \_\_\_\_\_

One question I will ask: \_\_\_\_\_

One support or resource I will use: \_\_\_\_\_

## 5. How I will know it is helping

The change I will look for: \_\_\_\_\_ Review date: \_\_\_\_\_

*A roadmap is meant to be reviewed. Progress may mean adjusting the route, not abandoning the journey.*

# Your Next Stop in the Hub

This roadmap helped you locate yourself. Now choose the kind of support that fits where you are, what you need and how deeply you want to go next.

IF YOU WANT PRACTICAL TOOLS

## Choose your Survival Toolkit

Use the Perimenopause or Postmenopause Survival Toolkit for stage-specific check-ins, wellness priorities and practical next steps.

[BROWSE THE TOOL LIBRARY](#)

1

IF YOU WANT PERSONALIZED CLARITY

## Explore the Menopause Audit

Connect your stage, symptoms, nutrition, habits and health priorities, then identify clearer, more personalized next steps.

[LEARN ABOUT THE AUDIT](#)

2

IF YOU WANT TO KEEP LEARNING

## Visit Midlife Insights

Explore practical articles, trusted resources and real answers about menopause, nutrition, metabolism, sleep, mood and healthy aging.

[KEEP EXPLORING](#)

3

*You do not need every resource.  
Choose the next stop that fits.*

Everything begins at

**MCWellnessHub.com**

Understanding where you are was the first step. Choosing what supports you next is the second.

The buttons on this page will be clickable in the digital guide.



# A Final Note From Me to You

*A little clarity can change the way you move through the entire journey.*

*Dear Reader,*

Menopause can feel confusing partly because the language is often used so loosely. One woman says she is “in menopause” when her symptoms begin. Another uses the same phrase years after her final period. Both may be describing something real, but they may need very different kinds of support.

Once you understand where you are, the next questions become easier to ask. What is changing? What is affecting your daily life? What deserves attention now? What do you want to protect for the years ahead?

You do not need to overhaul everything at once. Pay attention to your patterns. Choose one foundation to strengthen. Ask for support when symptoms interfere with your life. Keep preventive care in the picture, even when you are feeling well.

My hope is that this guide helps you walk into your next appointment, decision or season feeling more prepared and less overwhelmed. Your roadmap can change as you do. Keep reviewing it, adjusting it and choosing the next step that fits.

*Wishing you health and happiness,*  
*Martine*

## ABOUT YOUR GUIDE

### Martine Chin

Martine helps midlife women connect the dots between menopause symptoms, nutrition, metabolism, lifestyle and their wider health picture. Through MC Wellness Hub, she offers practical education, functional wellness tools and personalized guidance.

Certified Nutritional Practitioner (CNP)  
Functional Medicine Academy Certified Coach (FMACC)

Integrative Health Practitioner Level 2 (IHP2)  
Holistic Perimenopause & Menopause Coach (HPMC)

[Learn more at MCWellnessHub.com](https://www.MCWellnessHub.com)

# References & Trusted Resources

*Reliable places to continue learning and prepare for informed conversations.*

## STAGING & DEFINITIONS

- 1 **Harlow SD, et al.**  
Executive summary of STRAW+10:  
Addressing the unfinished agenda of  
staging reproductive aging. Menopause.  
2012;19(4):387-395.  
[pubmed.ncbi.nlm.nih.gov/22343510](https://pubmed.ncbi.nlm.nih.gov/22343510)
- 2 **National Institute on Aging**  
What Is Menopause?  
Overview of the transition, timing and  
common symptoms.  
[nia.nih.gov/health/menopause/what-menopause](https://nia.nih.gov/health/menopause/what-menopause)
- 3 **The Menopause Society**  
Perimenopause.  
Patient education on cycle changes,  
symptoms and the menopause transition.  
[menopause.org/patient-education](https://menopause.org/patient-education)
- 4 **World Health Organization**  
Menopause.  
Global fact sheet covering natural and  
induced menopause and health support.  
[who.int/news-room/fact-sheets/menopause](https://who.int/news-room/fact-sheets/menopause)

**STRAW+10 is the clinical staging framework**  
that informed the stage descriptions in this guide.

## SYMPTOMS & SAFETY

- 5 **American College of Obstetricians and Gynecologists**  
The Menopause Years.  
Symptoms, treatment options and health  
considerations during the transition.  
[acog.org/womens-health/faqs/the-menopause-years](https://acog.org/womens-health/faqs/the-menopause-years)
- 6 **American College of Obstetricians and Gynecologists**  
Perimenopausal Bleeding and Bleeding  
After Menopause.  
[acog.org/womens-health/faqs](https://acog.org/womens-health/faqs)
- 7 **American College of Obstetricians and Gynecologists**  
Do I Need Hormone Testing During  
Perimenopause?  
[acog.org/womens-health/experts-and-stories](https://acog.org/womens-health/experts-and-stories)
- 8 **American Heart Association**  
Heart Attack, Stroke and Cardiac Arrest  
Symptoms.  
[heart.org/heart-attack-and-stroke-symptoms](https://heart.org/heart-attack-and-stroke-symptoms)

**Symptoms that are new, severe, persistent or**  
worrying deserve appropriate medical attention.

## TRUSTED PLACES TO LEARN MORE

**The Menopause Society**  
[menopause.org/patient-education](https://menopause.org/patient-education)

**National Institute on Aging**  
[nia.nih.gov/health/menopause](https://nia.nih.gov/health/menopause)

**ACOG Women's Health**  
[acog.org/womens-health](https://acog.org/womens-health)

**Office on Women's Health**  
[womenshealth.gov/menopause](https://womenshealth.gov/menopause)

# Important Information

*Please read before using this guide.*



## HEALTH & MEDICAL DISCLAIMER

This guide is for educational and informational purposes only. It is not intended to diagnose, treat, cure or prevent any disease, and it does not replace personalized medical advice, diagnosis or treatment from a qualified healthcare professional.

Menopause experiences, health histories and care needs vary. Information in this guide may not apply to your individual circumstances. Always consult an appropriately qualified healthcare professional about symptoms, medications, supplements, testing and treatment decisions. Do not delay seeking medical care because of information in this guide.

Seek urgent medical attention for symptoms that may indicate a medical emergency.

**When something feels severe, sudden or concerning, please seek appropriate care.**



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**Thank you for respecting the work that went into creating this resource.**

Questions, patterns and ideas I want to remember.







**Clarity for every stage of midlife.**

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