

Pediatric Growth Record

PATIENT NAME [Full Name]

DATE OF BIRTH [MM/DD/YYYY]

SEX [Male / Female]

PHYSICIAN [Name]

AGE	WEIGHT (KG/LB)	HEIGHT (CM/IN)	HEAD CIRC.	PERCENTILE
Birth	-	-	-	-
1 Month	-	-	-	-
2 Months	-	-	-	-
4 Months	-	-	-	-
6 Months	-	-	-	-
9 Months	-	-	-	-
12 Months	-	-	-	-

Growth Curve Visualization Area