

GROWTH INFORMATION

***** (ONLY IF PATIENT HAS NOT FINISHED GROWING)

Height: _____ Weight: _____

1. At what age did the most important changes of height occurred to:
The mother _____ the father _____ His/her sisters:

_____ His/her brothers:

2. Height of the father: _____ of the mother:

3. Patients (GIRLS ONLY)

When did the menarche or periods start?

Age: _____ Date: _____ Not yet: _____

At what age did the mother start her periods?

At what age did the older sisters start their periods?

4. Patients (BOYS ONLY)

Did the voice change?

If yes, at what age _____ Date:

Does the patient show any puberty signs? Yes _____ Not yet

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