

Weight Management Clinical Record

Name:	Id No:
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Age

Height cm

Date					
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Weight Kg					
BMI					
Waist cm * ≥94cm ♂ ≥80cm ♀					

Body Fat %					
Fat Mass Kg					

BP ≥130 sys ≥85 dia or med					
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Cholesterol					
LDL					
HDL <1.03♂ <1.29♀					
TGs ≥ 1.7					
TC/HDL					

FBG ≥5.6					
HbA1c					

ALT					
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TSH	
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