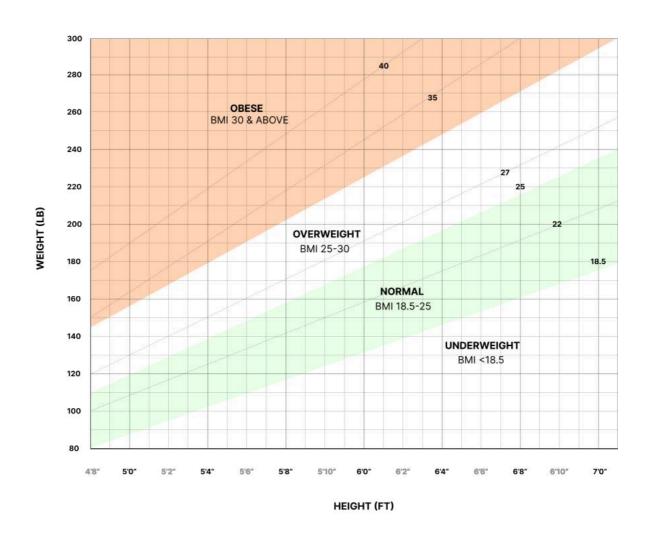
## **BMI Chart for Women by Age**

Patient Information				
Name:		Date:		
Date of Birth:		Age:	Gender:	
Weight:	Height:	BMI:		
Referring Physician:				



Notes