

Sticker Here

Medical Assessment

SECTION 1: Cardiovascular System

Height:		Weight:		BMI:
Waist:		Hip:		WHR:
Blood Pressure	mmHg	Normal <input type="checkbox"/>	Abnormal <input type="checkbox"/>	BMI Classification: <input type="checkbox"/> Underweight (<18.5) <input type="checkbox"/> Normal (18.5-24.9) <input type="checkbox"/> Overweight (25.0-29.9) <input type="checkbox"/> Obese (>30)
Resting Heart rate	bpm	Normal <input type="checkbox"/>	Abnormal <input type="checkbox"/>	
Heart Sounds		Normal <input type="checkbox"/>	Abnormal <input type="checkbox"/>	
Peripheral Vessels		Normal <input type="checkbox"/>	Abnormal <input type="checkbox"/>	
Veins & other Vessels		Normal <input type="checkbox"/>	Abnormal <input type="checkbox"/>	

Examiner Comments

