



Yearly Weight Chart

Individual		Address		
Height:		Ideal Weight Range		lbs
MONTH	DATE	WEIGHT	CHANGE	INITIALS
JANUARY				
FEBRUARY				
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				

IDEAL WEIGHT CHART							
WOMEN				MEN			
Height	Small Frame	Medium Frame	Large Frame	Height	Small Frame	Medium Frame	Large Frame
4'10"	102-111	109-121	118-131	5'2"	128-134	131-141	138-150
4'11"	103-113	111-123	120-134	5'3"	130-136	133-143	140-153
5'0"	104-115	113-126	122-137	5'4"	132-138	135-145	142-156
5'1"	106-118	115-129	125-140	5'5"	134-140	137-148	144-160
5'2"	108-121	118-132	128-143	5'6"	136-142	139-151	146-164
5'3"	111-124	121-135	131-147	5'7"	138-145	142-154	149-168
5'4"	114-127	124-138	134-151	5'8"	140-148	145-157	152-172
5'5"	117-130	127-141	137-155	5'9"	142-151	148-160	155-176
5'6"	120-133	130-144	140-159	5'10"	144-154	151-163	158-180
5'7"	123-136	133-147	143-163	5'11"	146-157	154-166	161-184
5'8"	126-139	136-150	146-167	6'0"	149-160	157-170	164-188
5'9"	129-142	139-153	149-170	6'1"	152-164	160-174	168-192
5'10"	132-145	142-156	152-173	6'2"	155-168	164-178	172-197
5'11"	135-148	145-159	155-176	6'3"	158-172	167-182	176-202
6'0"	138-151	148-162	158-179	6'4"	162-176	171-187	181-207

All individuals must be weighed monthly and weight recorded on this form. If there is evidence of excessive weight loss or weight gain (5lbs in any month), the Delegating RN must be notified.