



Anthropometry

Id#: IDNO

Acrostic: _____

Date: [] [] / [] [] / [] [] [] []
Month Day Year

1 Height

a. **HTCM1** . [] CM

b. Was there a modification in protocol?

YES NO

HTMODP1

2 Weight

a. **WTLB1** . [] lbs

b. Was there a modification in protocol?

YES NO

WTMODP1

3 Girths

a. Waist: **WAISTCM1** CM

b. Hip: **HIPCM1** . [] CM

c. Was there a modification in protocol? YES NO **HWMODP1**

4 Comments/modification to the protocol?

YES NO



Please specify:

[Empty text box for specifying comments/modification]

Technician ID#: [] [] []

Reviewer ID#: [] [] []

Data Entry ID#: [] [] []