THE VICTORIAN CENTRE OF EXCELLENCE IN EATING DISORDERS

FAMILY BASED TREATMENT

Weight Progress Chart

Family Based Treatment					**Date Commenced:**			
Name:					DOB:			
Starting Weight (kg)		Starting Height (cm):			100% median BMI (100% EBW):			
Starting BMI		Starting %EBW:			100% mBMI/EBW (kg):		Initial HWR (kg):	
Height review date:					90% EBW (BMI):		90% EBW (kg):	
Session	**Date**	**Weight**	**+ / -**	**%mBMI / EBW**	**Binge episodes (last 7 days)**	**V / L (last 7 days)**	**Menstruation (y/n/NA)**	**Assessor**