

Name: _____ Date of Birth: _____ Gyn. Age: _____ Note: _____

Temperature Method: _____ Time: _____ Cycle Range: _____ This Cycle: _____ Cycle Number: _____

Children - Male: _____ Female: _____ Miscarriage: _____ Earliest 6th Last Low: _____

Month																																									Month
Day																																									Day
Cycle Day	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	Cycle Day
Menses																																									Menses
99.8																																									99.8
99.6																																									99.6
99.4																																									99.4
99.2																																									99.2
99.0																																									99.0
98.8	Sensation																																								98.8
98.6																																									98.6
98.4																																									98.4
98.2	Tissue																																								98.2
98.0																																									98.0
97.8																																									97.8
97.6																																									97.6
97.4	Cervix																																								97.4
97.2																																									97.2
97.0																																									97.0
96.8																																									96.8
96.6																																									96.6
Cycle Day	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	Cycle Day
Descriptions	Breast Exam																																								Descriptions

1. Did you chart all - bleeding? ___ - tissue? ___ -sensation? ___ -cervix? ___ -disturbances (if any)? ___ -genital contact? ___
 2. Did you number the final 6 lows? ___ Draw pre-rise base? ___ Mark Peak (if any)? ___ Encircle readings for S-T Rule (if any)? ___
 What rules did you go by to assume fertility, and which days were infertile according to those rules?
 1. Relatively Infertile Time Rule: _____ Infertile Days: _____
 2. Completely Infertile Time Rule: _____ Infertile Days: _____