To Whom It May Concern

Dear Sir/Madam,

I am a registered medical practitioner, and a qualified (insert title and professional qualifications). I am currently employed as (position) in (service/hospital).

(Patient) was referred to (clinic) by (person referring) for assessment of their age.

**Information sources:**

* History and physical examination, (name, date of assessment)
* History from carer, (name and date, if interpreter assisted)
* (Letters of support – e.g. school, other family)
* (Other documentation
* Radiology report from (radiology service, location)

**Paperwork DOB**

**Assessed year of birth**

**History:**

(Name) arrived in Australia from (country) on (date arrival) on (visa), and (outline family circumstances) (Name’s) migration paperwork records his/her date of birth as (date), which would make his/her current age (age in years and months).  (Name) states this date is incorrect, and wishes to submit an application to change his/her date of birth to (insert proposed change).

(name) states they believe his/her current age to be approximately (years). (Name) is not aware of their exact year or date of birth. There are no records from (his/her) birth or childhood.

**Outline**

country of birth,

family situation, parent marriage, siblings and reported/recorded ages and location

migration pathway

years of education overseas and any milestones (e.g. started school at expected age)

recall significant world events that would place age

who completed visa paperwork

**Educational assessment**

In Australia, (name) is attending the (name of) school.  I have contacted (name, position) at school, they provided an opinion based on their educational assessment that (name) “displays academic and social skills consistent with a (x) year old student”.  They also noted he/she has formed peer relationships with students aged (x) years of age.

In summary, there is no definite documentation of (name’s) birth date, and minimal information to estimate his/her age based on the narrative from his/her country of origin. The history of his/her relationship to his/her siblings, school attendance overseas, and reported education assessment and peer relationships in Australia are consistent with a reported age of (x) years.

**Examination:**

I performed a directed physical examination with (name’s) consent. I have compared (name’s) growth and pubertal parameters to population charts endorsed by the Australasian Paediatric Endocrine group.

(Name’s) height was (x) cm which is above/below the average (median, 50th percentile) male/female height of (x) cm. The median height of a (paperwork age) male/female is x cm. Clinical experience suggests that persons from (racial background) extraction are often above/below average height. Reported parent height was xx. A height of x cm plots on the xth percentile for the reported age of x years.

(Name’s) weight was x kg. He/she was of (type) build and did/not have significant body fat.

The median weight of a (male/female) of (paperwork age) is x kg. A weight of x kg corresponds to the (x) percentile for a (reported age) year old male/female, and the 50th percentile for a male/female aged x years.

(Name) did/not have secondary body or axillary hair. Assessment of his/her pubertal status placed him/her at Tanner stage x for both breast/penile development and pubic hair. Although pubertal development is significantly influenced by personal and racial variation, the median age for a male/female to reach stage x penile/breast development is x years, and stage x pubic hair is x years,

In summary, although the physical examination is unable to determine age, (name’s) pubertal development is highly inconsistent with the visa age of (x), and could be consistent with the stated age of approximately (x) years.

**Investigations:**

Assessment of bone age is based on the Greulich and Pyle method, and is intended to assess skeletal age when knowing the chronological age, and not the reverse.  This method is based on data from white American children from the 1930's, and there is significant racial variation found.  The method is not precise with a typical margin of error of three to four years throughout childhood and adolescence.  Skeletal maturity is affected by additional factors such as constitutional delay in maturation, and malnutrition.  However, bone age x-rays can be helpful in a child who is clearly many years younger or older than their paperwork birth date.

An x-ray was performed of (name’s) left wrist on (date), and reported by Consultant Radiologist (name) using comparison Gruelich and Pyle bone age imaging. The reported bone age is (x) years of age, with two standard deviations corresponding to (x) months. This means that based on bone age, there is a 95% probability that (name’s) age lies in the range of x years, x month to x years, x months.

**CONCLUSION**

It is not possible to determine age, only to assess age.

Based on the history, examination, investigations and educational assessment I it is my professional opinion that (name) is significantly older/younger than his/her visa recorded age of x years, x months. I have no reason to disbelieve (name’s) stated age of approximately x years age. A year of birth of xxxx would suggest an age of above x years and would be consistent with my assessment.

Yours sincerely