

Relevant WIC Nutrition Assessment Information for a Pregnant Woman

DIETARY

What to Assess (Relevant Information)	What to Collect	What to Do	
		Assign risk	Suggestions for Further Assessment*
Ability to Meet Dietary Guidelines for Americans	Absence of any risk Note: A complete assessment including risk 427 must be completed prior to assigning risk 401.	401 Failure to meet Dietary Guidelines for Americans	Assess need for anticipatory guidance.
Nutrition Practices	Use of dietary supplements: • Excessive or inappropriate. • Iron supplement. • Prenatal Multivitamin with adequate folic acid.	427.1 Consuming dietary supplements with potentially harmful consequences 427.4 Inadequate vitamin/mineral supplementation N/A	Assess potential for toxicity or harm to mother or fetus. Assess factors that might inhibit iron absorption. Assess acceptability and tolerance of iron supplement (e.g., constipation, nausea, vertigo, gastric discomfort). Assess barriers to obtaining appropriate supplementation (e.g., health belief, religious or cultural practices, finances). Assess attitude towards dietary supplementation.
	Usual meal pattern. Consumption of a diet very low in calories and/or essential nutrients.	427.2 Consuming a diet very low in calories and/or essential nutrients; or impaired caloric intake or absorption of essential nutrients following bariatric surgery	Assess factors that might affect meal pattern (e.g., appetite, pregnancy discomforts, medical conditions and illnesses, culture, religion, knowledge and attitudes about eating practices consistent with good health outcomes, knowledge and skills about meal planning and food preparation).
	Craving for or eating nonfood substances (pica). Intake of potentially contaminated foods.	427.3 Compulsively ingesting non-food items 427.5 Inappropriate nutrition practices for women	Assess potential for toxicity or harm to mother or fetus. Assess impact on nutrient and calorie intake. Assess knowledge of safe food handling. Assess access to safe water and refrigeration.

*Further assessment and referral is based on agency protocol.

Relevant WIC Nutrition Assessment Information for a Pregnant Woman

DIETARY (continued)

What to Assess (Relevant Information)	What to Collect	What to Do	
		Assign risk	Suggestions for Further Assessment*
Breastfeeding Knowledge, Support, and Potential Contra-indications	Beliefs and knowledge about breastfeeding. Support network for breastfeeding. Potential contraindications to breastfeeding	N/A	Assess interest for more information/ participation in breastfeeding peer counseling and other breastfeeding support resources. Assess for contraindications to breastfeeding (e.g., HIV infection).

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ENVIRONMENTAL AND FAMILY FACTORS

What to Assess (Relevant Information)	What to Collect	What to Do	
		Assign risk	Suggestions for Further Assessment*
Environmental and Family Factors	Primary nighttime residence (homelessness).	801 Homelessness	Assess food preparation and food storage equipment. Assess level of access to safe and adequate water.
	Migrant status.	802 Migrancy	Assess food preparation and food storage equipment.
	Physical assault in past 6 months.	901 Recipient of abuse	Assess primary residence (shelter for victims of domestic violence) and food preparation and food storage equipment.
	Ability to make appropriate feeding decisions and/or prepare food.	902 Woman, or infant/child of primary caregiver with limited ability to make feeding decisions and/or prepare food	Assess her support system for feeding decisions and food preparation.
	Foster care status.	903 Foster care	Ask about teenager's adaptation to current foster care.

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Relevant WIC Nutrition Assessment Information for a Breastfeeding Woman

DIETARY

What to Assess (Relevant Information)	What to Collect	What to Do	
		Assign risk	Suggestions for Further Assessment*
Ability to Meet Dietary Guidelines for Americans	Absence of any risk. Note: A complete assessment including risk 427 must be completed prior to assigning risk 401.	401 Failure to meet Dietary Guidelines for Americans	Assess need for anticipatory guidance.
Nutrition Practices	Use of dietary supplements: • Excessive or inappropriate. • Folic acid intake from supplements or fortified foods.	427.1 Consuming dietary supplements with potentially harmful consequences	Assess potential for toxicity or harm to mother or infant. Assess barriers to obtaining appropriate supplementation (e.g., health belief, religious or cultural practices, finances).
		427.4 Inadequate vitamin/mineral supplementation	Assess attitude towards dietary supplementation.
	Usual meal pattern. Consumption of a diet very low in calories and/or essential nutrients.	427.2 Consuming a diet very low in calories and/or essential nutrients; or impaired caloric intake or absorption of essential nutrients following bariatric surgery	Assess factors that might affect meal pattern (e.g., appetite, pregnancy discomforts, medical conditions and illnesses, culture, religion, knowledge and attitudes about eating practices consistent with good health outcomes, knowledge and skills about meal planning and food preparation).
	Craving for or eating nonfood substances (pica).	427.3 Compulsively ingesting non-food items	Assess potential for toxicity or harm to mother or fetus. Assess impact on nutrient and calorie intake.
Infant and Maternal Factors Affecting Breastfeeding	Breastfed infant's nutritional risk.	601 Breastfeeding mother of infant at nutritional risk	Assess effectiveness of mother's management strategies. Assess mother's medical providers' recommendations.

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Relevant WIC Nutrition Assessment Information for a Non-Breastfeeding Postpartum Woman

DIETARY

What to Assess (Relevant Information)	What to Collect	What to Do	
		Assign risk	Suggestions for Further Assessment *
Ability to Meet Dietary Guidelines for Americans	Absence of any risk. Note: A complete assessment including risk 427 must be completed prior to assigning risk 401.	401 Failure to meet Dietary Guidelines for Americans	Assess need for anticipatory guidance.
Nutrition Practices	Use of dietary supplements: • Excessive or inappropriate. • Folic acid intake from supplements or fortified foods.	427.1 Consuming dietary supplements with potentially harmful consequences	Assess potential for toxicity or harm to mother or infant. Assess barriers to obtaining appropriate supplementation (e.g., health belief, religious or cultural practices, finances).
		427.4 Inadequate vitamin/mineral supplementation	Assess attitude towards dietary supplementation.
	Usual meal pattern. Consumption of a diet very low in calories and/or essential nutrients.	427.2 Consuming a diet very low in calories and/or essential nutrients; or impaired caloric intake or absorption of essential nutrients following bariatric surgery	Assess factors that might affect meal pattern (e.g., appetite, pregnancy discomforts, medical conditions and illnesses, culture, religion, knowledge and attitudes about eating practices consistent with good health outcomes, knowledge and skills about meal planning and food preparation).
Craving for or eating nonfood substances (pica).	427.3 Compulsively ingesting non-food items	Assess potential for toxicity or harm to mother or fetus. Assess impact on nutrient and calorie intake.	

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Relevant WIC Nutrition Assessment Information for a Non-Breastfeeding Postpartum Woman

DIETARY

What to Assess (Relevant Information)	What to Collect	What to Do	
		Assign risk	Suggestions for Further Assessment *
Ability to Meet Dietary Guidelines for Americans	Absence of any risk. Note: A complete assessment including risk 427 must be completed prior to assigning risk 401.	401 Failure to meet Dietary Guidelines for Americans	Assess need for anticipatory guidance.
Nutrition Practices	Use of dietary supplements: • Excessive or inappropriate. • Folic acid intake from supplements or fortified foods.	427.1 Consuming dietary supplements with potentially harmful consequences	Assess potential for toxicity or harm to mother or infant. Assess barriers to obtaining appropriate supplementation (e.g., health belief, religious or cultural practices, finances).
		427.4 Inadequate vitamin/mineral supplementation	Assess attitude towards dietary supplementation.
	Usual meal pattern. Consumption of a diet very low in calories and/or essential nutrients.	427.2 Consuming a diet very low in calories and/or essential nutrients; or impaired caloric intake or absorption of essential nutrients following bariatric surgery	Assess factors that might affect meal pattern (e.g., appetite, pregnancy discomforts, medical conditions and illnesses, culture, religion, knowledge and attitudes about eating practices consistent with good health outcomes, knowledge and skills about meal planning and food preparation).
Craving for or eating nonfood substances (pica).	427.3 Compulsively ingesting non-food items	Assess potential for toxicity or harm to mother or fetus. Assess impact on nutrient and calorie intake.	

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Relevant WIC Nutrition Assessment Information for a Child (1 Year to 5 Years of Age)

DIETARY

What to Assess (Relevant Information)	What to Collect	What to Do	
		Assign risk	Suggestions for Further Assessment*
Nutrition Practices	Primary milk source.	425.1 Routinely feeding inappropriate beverages as the primary milk source.	Assess caregiver's cultural, economic, or medical reasons for providing inappropriate beverages as primary milk source.
	Intake of sugar-containing beverages.	425.2 Routinely feeding a child any sugar- containing fluids	Assess for beverages common to a particular culture and/or region.
	Age and status of weaning from bottle. Bottle and cup feeding practices. Pacifier practices.	425.3 Routinely using nursing bottles, cups, or pacifiers improperly	Assess developmental skills related to feeding. Assess cultural, medical, and other influences on these feeding practices.
	Feeding practices related to developmental stage/needs: <ul style="list-style-type: none"> • Response to hunger and satiety cues. • Use of foods associated with choking. • Self-feeding skills. • Food textures. 	425.4 Routinely using feeding practices that disregard the developmental needs or stage of the child	Assess caregiver's knowledge of appropriate beverages feeding management skills (e.g., forcing a child to eat certain type/amount of foods/beverages). Assess the availability of developmentally appropriate foods and utensils. Assess family dynamics that affect feeding (e.g., number of caregivers, daily schedules, and other environmental factors). Assess the potential for choking. Assess caregiver's need for anticipatory guidance.

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Relevant WIC Nutrition Assessment Information for a Child (1 Year to 5 Years of Age)

DIETARY (continued)

What to Assess (Relevant Information)	What to Collect	What to Do	
		Assign risk	Suggestions for Further Assessment*
Nutrition Practices (continued)	Intake of potentially contaminated foods.	425.5 Feeding foods to child that could be contaminated with harmful microorganisms	Assess knowledge of safe food handling. Assess access to safe water and refrigeration.
	Usual meal pattern. Consumption of a diet very low in calories and/or essential nutrients.	425.6 Routinely feeding a diet very low in calories and/or essential nutrients	Assess for cultural, medical, family, religious, and other reasons affecting usual meal pattern.
	Use of dietary supplements: • Excessive or inappropriate. • Fluoride intake (age and fluoride content of drinking water supply.)	425.7 Feeding dietary supplements with potentially harmful consequences 425.8 Routinely not providing dietary supplements ... when an infant's diet cannot meet nutrient requirements	Assess potential for toxicity or harm to the child. Assess barriers to obtaining appropriate supplementation (e.g. health beliefs, religious or cultural practices, finances).
	Eating nonfood substances (pica).	425.9 Routine ingestion of nonfood items	Assess potential for toxicity or harm to child.
Ability to Transition to Complementary Feeding (Child 12 to 23 Months of Age)	Absence of any other risk. NOTE: A complete assessment including risk 425 must be completed prior to assigning risk 428.	428 Dietary risk associated with complementary feeding practices	Assess caregiver's need for anticipatory guidance.
Ability to Meet Dietary Guidelines for Americans (Children > 24 Months of Age)	Absence of any other risk. NOTE: A complete assessment including risk 425 must be completed prior to assigning risk 401.	401 Ability to meet Dietary Guidelines for Americans	

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