

1 Introduction to Nutrition Risk

1-1 Learning Activity



1. What are the five groups of nutrition risks?
A = Anthropometrics
B = Biochemical
C = Clinical/Medical
D = Dietary
E = Environmental
2. What are the two ways risks are assigned?
Data system assigned
Certifier assigned
3. What information is used to assign risks?
Information collected by WIC staff
Historical data
Information from a health care provider
Information self-reported by the participant
4. What type of information requires careful questioning by the certifier?
Information self-reported by the participant
5. Is it possible that one participant would have more than one risk?
Yes
Why or why not?
A participant's health status and dietary intake has many characteristics.
A complete assessment could identify more than one factor that would lead to the assignment of multiple risks.
6. Who must confirm that all correct risks have been assigned? **The certifier**

Learning activity 1-2 Risk Information Sheets



1. What category would a participant need to be in to qualify for this risk?
All WIC categories qualify for this risk
2. What criteria needs to be present for this risk to be assigned?
Diagnosis by a health care provider
3. What, if any, special documentation needs to be included in the data system?
Document the type of cancer and make a referral to the dietitian

2 Risks for All Participants

Risk Group:	Description:
Anthropometric	---
Biochemical	<input type="checkbox"/> 201 – Low Hemoglobin or Hematocrit <input type="checkbox"/> 211 – Elevated Blood Lead Levels
Clinical/Medical	<input type="checkbox"/> 341 – Nutrient Deficiency Diseases <input type="checkbox"/> 342 – Gastrointestinal Disorders <input type="checkbox"/> 343 – Diabetes Mellitus <input type="checkbox"/> 344 – Thyroid Disorders <input type="checkbox"/> 345 – Hypertension and Prehypertension <input type="checkbox"/> 346 – Renal Disease <input type="checkbox"/> 347 – Cancer <input type="checkbox"/> 348 – Central Nervous System Disorders <input type="checkbox"/> 349 – Genetic and Congenital Disorders <input type="checkbox"/> 351 – Inborn Errors of Metabolism <input type="checkbox"/> 352A –Infectious Diseases - Acute <input type="checkbox"/> 352 B –Infectious Diseases - Chronic <input type="checkbox"/> 353 – Food Allergies <input type="checkbox"/> 354 – Celiac Disease <input type="checkbox"/> 355 – Lactose Intolerance <input type="checkbox"/> 356 – Hypoglycemia <input type="checkbox"/> 357 – Drug Nutrient Interactions <input type="checkbox"/> 359 – Recent Major Surgery, Physical Trauma or Burns <input type="checkbox"/> 360 – Other Medical Conditions <input type="checkbox"/> 362 – Developmental, Sensory or Motor Delays Interfering with Eating <input type="checkbox"/> 381 – Oral Health Conditions
Dietary	---
Environmental	<input type="checkbox"/> 501 – Possibility of Regression <input type="checkbox"/> 502 – Transfer of Certification <input type="checkbox"/> 801 – Homelessness

	<input type="checkbox"/> 802 – Migrancy <input type="checkbox"/> 901 – Recipient of Abuse <input type="checkbox"/> 902 – Woman with Limited Ability to Make Feeding Decisions and/or Prepare Food <input type="checkbox"/> 903 – Foster Care <input type="checkbox"/> 904 – Environmental Tobacco Smoke Exposure
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1. What is the key information that you need to know if a parent is reporting that their child has one of these medical conditions?

That the condition has been diagnosed by a health care provider.

2. Which of these risks require additional documentation in the data system?

Risks 341, 342, 344, 346, 347, 352A, 352B, 360, 381

3. Which of these risks require a high-risk referral to a WIC nutritionist?

All except 344, 356, 381

4. Avery is a postpartum woman with a 6-week-old baby. She was just diagnosed with breast cancer. Would she qualify for a nutrition risk?

☒ YES – RISK # 347

5. Savannah is a 2-year-old. When she was a baby, she had an infection in her intestines which required removal of half of her small intestine. Would she qualify for a nutrition risk?

☒ YES – RISK # 342

6. Scarlett is a 4-year-old recently diagnosed with Type 1 diabetes. Would she qualify for a nutrition risk?

☒ YES – RISK # 343

7. Alexandra is a pregnant woman who has been taking medication for high blood pressure and hypothyroidism for the past 2 years. Would she qualify for a nutrition risk?

☒ YES – RISK # 344, 345

8. Sarah is currently being treated by her physician for a kidney infection. Would she qualify for a nutrition risk?

☒ YES – RISK # 346

9. Anna is a pregnant woman with asthma that requires occasional medication. Would she qualify for a nutrition risk?
☐ YES – RISK #
10. Clark is a 3-year-old child whose guardian reports that he has been diagnosed with rickets. Would he qualify for a nutrition risk?
☒ YES – RISK #
11. Darla is a pregnant woman who has two missing molars on one side of her mouth. She reports that it makes eating difficult. Would she qualify for a nutrition risk?
☒ YES – RISK #
12. Andrew is 19 months old. His mother tells you that he has had bronchitis 4 times in the past 6 months. Would he qualify for a nutrition risk?
☒ YES – RISK #
13. Clara is postpartum woman being treated for HIV. Would she qualify for a nutrition risk?
☒ YES – RISK #

Learning activity 2-2

1. For Risk 201, when will you have to manually change the risk level to high?



When the hemoglobin level is more than one point below the recommended levels for category or age. When the hematocrit is more than 3% below recommended levels for category or age.

2. Is a referral to the RD required for Risk 211? Why or why not?
Yes, a participant with this risk would be high risk and require a referral.

Learning activity 2-3



14. What is the key information that you need to know if a parent is reporting that their child has one of these medical conditions?
That the condition has been diagnosed by a health care provider.
15. Which of these risks require additional documentation in the data system?
Risks 341, 342, 344, 346, 347, 352A, 352B, 360, 381
16. Which of these risks require a high-risk referral to a WIC nutritionist?
All except 344, 356, 381
17. Avery is a postpartum woman with a 6-week-old baby. She was just diagnosed with breast cancer. Would she qualify for a nutrition risk?
☒ **YES – RISK # 347**
18. Savannah is a 2-year-old. When she was a baby, she had an infection in her intestines which required removal of half of her small intestine. Would she qualify for a nutrition risk?
☒ **YES – RISK # 342**
19. Scarlett is a 4-year-old recently diagnosed with Type 1 diabetes. Would she qualify for a nutrition risk?
☒ **YES – RISK # 343**
20. Alexandra is a pregnant woman who has been taking medication for high blood pressure and hypothyroidism for the past 2 years. Would she qualify for a nutrition risk?
☒ **YES – RISK # 344, 345**
21. Sarah is currently being treated by her physician for a kidney infection. Would she qualify for a nutrition risk?
☒ **YES – RISK # 346**
22. Anna is a pregnant woman with asthma that requires occasional medication. Would she qualify for a nutrition risk?
☒ **NO**
23. Clark is a 3-year-old child whose guardian reports that he has been diagnosed with rickets. Would he qualify for a nutrition risk?
☒ **YES – RISK # 341**

24. Darla is a pregnant woman who has two missing molars on one side of her mouth. She reports that it makes eating difficult. Would she qualify for a nutrition risk?

☒ YES – RISK # **381**

25. Andrew is 19 months old. His mother tells you that he has had bronchitis 4 times in the past 6 months. Would he qualify for a nutrition risk?

☒ YES – RISK # **352A**

26. Clara is postpartum woman being treated for HIV. Would she qualify for a nutrition risk?

☒ YES – RISK # **352B**

Learning activity 2-4



- ☐ 348 – Central Nervous System Disorders
- ☐ 349 – Genetic and Congenital Disorders
- ☐ 351 – Inborn Errors of Metabolism
- ☐ 362 – Developmental Delays, Sensory or Motor Delays Interfering with the Ability to Eat

Risk Number	Condition:
348	Spina bifida
362	Developmental Delays
349	Cleft Palate
351	PKU
362	Autism
348	Multiple Sclerosis
351	Galactosemia
349	Down Syndrome
348	Epilepsy
349	Sickle Cell Anemia
362	Brain Damage
349	Thalassemia major
348	Cerebral Palsy
348	Parkinson's

2-5 Clinical risks related to food



- ☐ 353 – Food Allergies
- ☐ 354 – Celiac Disease
- ☐ 355 – Lactose Intolerance

1. Jovana is pregnant. She tells you that she can't drink milk because it gives her stomach cramps and diarrhea. She can eat small amounts of cheese. Would she qualify for a nutrition risk?

☒ NO

2. Jordan is 3 years old. His mother tells you that he was diagnosed with gluten enteropathy last month. Would he qualify for a nutrition risk?

☒ YES – RISK # 354

3. Jose is 2 years old. His father tells you that last month he had a severe allergic reaction to peanuts. On the advice of their doctor, they are closely watching his diet to make sure he doesn't eat anything that contains peanuts. Would he qualify for a nutrition risk?

☒ YES – RISK # 353

2-6 Clinical risks for other conditions



- ☐ 357 – Drug Nutrient Interactions
- ☐ 359 – Recent Major Surgery, Physical Trauma or Burns

1. Which of these risks is a high-risk and requires referral to the RD?

Risk 357

2. Andres, a 5-month-old baby, had heart surgery last month. Would he qualify for a nutrition risk?

☒ YES – RISK # 359

3. Austin is 13 months old and is taking antibiotics for an ear infection. His mother tells you that he doesn't seem as hungry as usual but he is still eating. Would he qualify for a nutrition risk?
☒ NO
4. Kallie had a C-section when she delivered her baby three weeks ago. She is at WIC for her postpartum recertification appointment. Would she qualify for a nutrition risk?
☒ YES – RISK # ☐ NO

2-7 Environmental risks



- ☐ 501 – Possibility of Regression
 - ☐ 502 – Transfer of Certification
 - ☐ 801 – Homelessness
 - ☐ 802 – Migrancy
 - ☐ 901 – Recipient of Abuse
 - ☐ 902 – Woman with Limited Ability to Make Feeding Decisions and/or Prepare Food
 - ☐ 903 – Foster Care
 - ☐ 904 – Environmental Tobacco Smoke Exposure
1. Wilma is a pregnant woman who is transferring into your agency in the middle of her certification period. Her transfer information does not list any nutrition risks. Which risk code would you enter into the data system? **Risk 502**
2. Weston is a child who was recently taken into foster care because he was physically abused by his family. Which 2 risks would he qualify for? **Risks 901 and 903**
3. Zoe is an infant living in a home where the father reports that he only smokes outside. Would she qualify for a nutrition risk?
☒ NO
4. At his last certification, William was assigned Risk 201 for low hemoglobin. At this certification, everything appears to be normal. Would he qualify for a nutrition

risk?

☒ YES – RISK #

5. Abby is a pregnant woman enrolling in WIC. She reports that she does not have a physical address because she is living out of her car. Would she qualify for a nutrition risk?

☒ YES – RISK #

6. Michael is a 4-year-old child on WIC. He and his family live in the area and work on farms during the growing season. Would he qualify for a nutrition risk?

☒ NO

7. Heather is 14 years old and pregnant. She lives with her mom who shops and makes all of her meals because she has never cooked. Would she qualify for a nutrition risk?

☒ YES – RISK #

2 Chapter Test

1. Samuel:

He is 2 years old with numerous health problems.

He is being treated by his physician for a cancerous brain tumor.

The cancer treatment causes chronic high blood pressure.

What risks would be assigned?	Risk #s: 345, 347
Additional documentation required?	Yes
Referral to the RD required?	Yes

2. Tina:

- She is a postpartum woman with hyperthyroidism who is having gallbladder surgery next month.
- She also has a bladder infection treated with antibiotics.

What risks would be assigned?	Risk #s: 342, 344
Additional documentation required?	Yes
Referral to the RD required?	Yes

3. Beatriz:

She is a pregnant woman who was born with a cleft lip that was repaired when she was a child.

She reports that her doctor found out that her blood pressure is regularly going too low.

She also requires daily breathing treatment for asthma.

What risks would be assigned?	Risk #s: 349, 360
Additional documentation required?	Yes
Referral to the RD required?	Yes

4. Alexis:

She is a breastfeeding woman who has had Type 1 diabetes since she was 5 years old.

She is also being treated for tuberculosis.

Her baby is 5 weeks old.

What risks would be assigned?	Risk #s: 343, 352A
Additional documentation required?	Yes
Referral to the RD required?	Yes

5. Brian:

He is 3 years old and recently moved into a transitional shelter with his family while waiting for an apartment to become available.

He was born with cerebral palsy.

What risks would be assigned?	Risk #s: 349, 801
Additional documentation required?	Yes
Referral to the RD required?	Yes

6. Betty:

She recently immigrated to the United States.

She is 4 years old and her doctor has diagnosed her with vitamin A deficiency and gluten sensitive enteropathy.

What risks would be assigned?	Risk #s: 341, 354
Additional documentation required?	Yes
Referral to the RD required?	Yes

7. Maria

She was in a car accident last year that left her with minor brain damage.

She has difficulty chewing foods and uses a nutritional supplement drink three times a day.

She is 6 weeks postpartum.

What risks would be assigned?	Risk #s: 362
Additional documentation required?	Yes
Referral to the RD required?	Yes

8. Martina:

She is a pregnant 20-year-old woman with PKU.

Her husband works in seasonal agriculture and they are staying at a farm workers camp.

What risks would be assigned?	Risk #s: 351, 802
Additional documentation required?	Yes
Referral to the RD required?	Yes

9. Justin:

He is 4 weeks old and just went into foster care.

His foster mother is requesting a soy formula because he spits up when he drinks milk-based formula.

Mom reports that he frequently has gas, but he does not have diarrhea.

What risks would be assigned?	Risks #s: 903
Additional documentation required?	No
Referral to the RD required?	No

10. Camille:

She is being recertified as a non-breastfeeding postpartum woman.

She is taking a medication for ADHD that makes her not feel hungry.

She tells you that she gets a rash around her mouth when she eats bread or crackers and wonders if she is allergic to wheat.

What risks would be assigned?	Risk #s: 357
Additional documentation required?	Yes
Referral to the RD required?	Yes

11. Aidan:

He is 3 years old and his Mom reports that he has trouble eating hard foods.

He has been diagnosed with baby bottle tooth decay but not treated because the family does not have access to a dentist.

What risks would be assigned?	Risk #s: 381
Additional documentation required?	Yes
Referral to the RD required?	No

12. Katrina:

She is pregnant.

She was living with her boyfriend, but just moved out because he was physically abusive.

She is now living in a foster home.

What risks would be assigned?	Risk #s: 901, 903
Additional documentation required?	No
Referral to the RD required?	No

13. Shereen:
She is 4 years old.
Her hemoglobin is 9.0 and her blood lead level is 10.3.

What risks would be assigned?	Risk #s: 201, 211
Additional documentation required?	No
Referral to the RD required?	Yes

14. Jacquie:
She has not been on WIC before.
She is breastfeeding her 3-month-old baby.
She tells you that her doctor diagnosed her with lupus 2 months ago.

What risks would be assigned?	Risk #s: 360
Additional documentation required?	Yes
Referral to the RD required?	Yes

Chapter 3: Risks for all women

Risk Group:	Description:
Anthropometric	---
Biochemical	---
Clinical/ Medical	<input type="checkbox"/> 303 – History of Gestational Diabetes <input type="checkbox"/> 304 – History of Preeclampsia <input type="checkbox"/> 311 – History of Preterm or Early Term Delivery <input type="checkbox"/> 312 – History of Low Birth Weight <input type="checkbox"/> 321 – History of Fetal or Neonatal Loss <input type="checkbox"/> 331 – Pregnancy at a Young Age <input type="checkbox"/> 332 – Closely Spaced Pregnancy <input type="checkbox"/> 333 – High Parity and Young Age <input type="checkbox"/> 335 – Multiple Fetus Pregnancy <input type="checkbox"/> 337 – History of Large for Gestational Age Infant <input type="checkbox"/> 339 – History of Birth with a Congenital Birth Defect <input type="checkbox"/> 358 – Eating Disorders <input type="checkbox"/> 361 – Depression <input type="checkbox"/> 601 –Breastfeeding Mother of Infant at Nutrition Risk <input type="checkbox"/> 602 –Breastfeeding Complications or Potential Complications for Women
Dietary	<input type="checkbox"/> 401– Presumed Dietary Eligibility for Women and Children <input type="checkbox"/> 427–Inappropriate Nutrition Practices for Women <ul style="list-style-type: none"> ○ 427.1 Inappropriate use of Dietary Supplements ○ 427.2 Eating a Very Low Calorie or Nutrient Diet ○ 427.3 Pica ○ 427.4 Inadequate Iron, Iodine or Folic Acid Supplementation
Environmental	<input type="checkbox"/> 371 – Maternal Smoking <input type="checkbox"/> 372 – Alcohol and Illegal and/or Illicit Drug Use

Learning activity 3-1 Risks for all women



1. Many of the clinical risks address a woman's medical history. Why would this be important information?

Medical history helps predict an individual's future health.

Learning activity 3-2 Clinical risks for all women based on health history



- ☐ 303 – History of Gestational Diabetes
- ☐ 304 – History of Preeclampsia
- ☐ 311 – History of Preterm or Early Term Delivery
- ☐ 312 – History of Low Birth Weight
- ☐ 321 – History of Fetal or Neonatal Loss
- ☐ 337 – History of Large for Gestational Age Infant
- ☐ 339 – History of Birth with Congenital Birth Defect

1. What is the difference between assigning these risks for a pregnant woman vs. a postpartum woman? For a pregnant woman, these risks refer to any of her past pregnancies. For a postpartum woman, these risks refer to her most recent pregnancy only.
2. Molly is being recertified as a breastfeeding woman and was diagnosed with gestational diabetes during her pregnancy. Would she qualify for any of these nutrition risks?
☒ YES – RISK #
3. Mae is being recertified as a non-breastfeeding woman. Her baby was born 2 weeks ago and weighed 5 pounds 8 ounces. Would she qualify for any of these nutrition risks?
☒ YES – RISK #
4. Margaret is pregnant with her third child. Her first baby was born at 36 weeks due to preeclampsia. Would she qualify for any of these nutrition risks?

☒ YES – RISK # 304, 311

5. Marlena is being certified as a breastfeeding woman. She was pregnant with twins, but at 21 weeks miscarried one of the twins. The second baby survived and is now 2 weeks old and breastfeeding. Would she qualify for any of these nutrition risks?

☒ YES – RISK # 321

6. Lenore was pregnant but miscarried at 11 weeks gestation. Would she qualify for any of these nutrition risks?

☒ NO

7. Linnea just gave birth to a baby who weighed 9 pounds 0 ounces. Would she qualify for any of these nutrition risks?

☒ YES – RISK # 337

8. Laura is being enrolled as a prenatal woman. Her first child was born with spina bifida. Would she qualify for any of these nutrition risks?

☒ YES – RISK # 339

Learning Activity 3-3 Clinical Risks for all women related to pregnancy



- ☐ 331 – Pregnancy at a Young Age
- ☐ 332 – Closely Spaced Pregnancy
- ☐ 333 – High Parity and Young Age
- ☐ 335 – Multiple Fetus Pregnancy

1. Katie is 15 years old and pregnant. Would she qualify for any of these nutrition risks?

☒ YES – RISK # 331

2. Katrina is two months pregnant with her third child. Her other children are 13 months and 2 ½ years old. Would she qualify for any of these nutrition risks?

YES – RISK # 332

3. Kaylee is 19 years old and 7 months pregnant. This is her fourth pregnancy. She has a 30-month-old child and before his birth, she had 2 miscarriages (one at 18 weeks gestation and one at 21 weeks gestation). Would she qualify for any of these nutrition risks?

☒ YES – RISK # 333

4. Kiersten is pregnant with triplets. Would she qualify for any of these nutrition risks?

☒ YES – RISK # 335

Learning Activity 3-4 Clinical risks for all women based on other conditions



- ☐ 358 – Eating Disorders
- ☐ 361 – Depression
- ☐ 601 –Breastfeeding Mother of Infant at Nutrition Risk
- ☐ 602 –Breastfeeding Complications or Potential Complications for Women

1. While you are enrolling Misha for her pregnancy, she tells you that she was diagnosed with bulimia last year. She says that she has stopped bingeing and purging since she found out she was pregnant, but that she is concerned that she will start again after delivery. Would she qualify for any of these nutrition risks?

☒ YES – RISK # 358

2. Valentina is in the office for her first postpartum visit and shares that she has been diagnosed with postpartum depression. She is on medication and is being followed by her health care provider. Would she qualify for any of these nutrition risks?

☒ YES – RISK # 361

3. During her postpartum appointment, Amelia reports that she is breastfeeding her infant with cleft palate and struggling with severe engorgement. Would she qualify for any of these nutrition risk?
1. ☒ YES – RISK # 601, 602

3 Chapter Test

1. Brooke:

- She is a pregnant woman who is expecting twins.
- Her 3-year-old was born 5 weeks early and weighed 3 pounds 3 ounces at birth.
- She smokes about 5 cigarettes a day and is trying to quit. Sometimes she eats the cigarette butts to help control her craving for tobacco.

What risks would be assigned?	Risk #s: 311, 312, 335, 371, 427.3
Additional documentation required?	Yes
Referral to the RD required?	No

2. Janet:

- She is 16 years old and just delivered her first child 3 weeks ago.
- She is not breastfeeding.
- She tells you during her appointment that she was diagnosed with anorexia when she was 14 and hasn't been eating since she had the baby because she doesn't want to be fat anymore.
- She is not taking vitamins but has been taking amphetamines to help her lose weight.

What risks would be assigned?	Risk #s: 311, 358, 372, 427.4
Additional documentation required?	Yes
Referral to the RD required?	Yes

3. May:

- She is a pregnant woman taking prenatal vitamins.
- The child born from her last pregnancy had anencephaly and died when he was just 5 days old.
- She conceived this current pregnancy 3 months later.

What risks would be assigned?	Risk #s: 321, 332, 339
Additional documentation required?	Yes
Referral to the RD required?	No

4. Sydney:

- She is 19 years old.
- She has 3 children and is pregnant with her fourth.
- Sydney's last baby weighed 9 pounds 3 ounces and she is concerned that this baby will be big also.
- She had gestational diabetes during her last pregnancy.

What risks would be assigned?	Risk #s: 303, 333, 337
Additional documentation required?	Yes
Referral to the RD required?	No