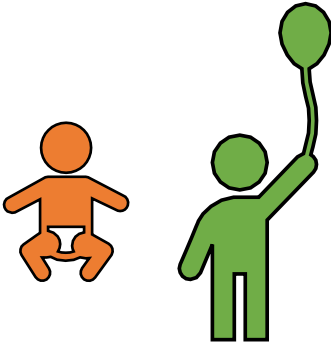


Level 2

Nutrition Risk Chapter 5

The Basics

Level 2	All CPA's must complete
Type	Paper module Ch. 5: Risks for Infants and Children
Completion time	1 hour
Complete	Within 6 months of hire
Certifiers Guide	Lesson 4-13
Posttest	Paper
Completion	Must complete all 6 chapters.



Course Objectives

This chapter of the **Nutrition Risk** module focuses on risks that apply to infant or child WIC participants. Certifiers must complete chapter 5 before they can certify any infant or child.

After completing this chapter, the learner will be able to:

- Assess and assign nutrition risks for infants and children.

Learning activities – Chapter 5



This table lists the risks that are covered in Chapter 5.

Risk Group:	Description:
Anthropometric	<input type="checkbox"/> 103 – Underweight Infant and Children <input type="checkbox"/> 113 – Overweight Children – 2 to 5 years <input type="checkbox"/> 114 – At Risk for Overweight Children -2 to 5 years <input type="checkbox"/> 115 – High Weight for Length Under Age 2 Years <input type="checkbox"/> 121 – Short Stature <input type="checkbox"/> 134 – Failure to Thrive <input type="checkbox"/> 135 – Infant Weight Loss Birth to 6 months <input type="checkbox"/> 141 – Low Birth Weight <input type="checkbox"/> 151 – Small for Gestational Age <input type="checkbox"/> 152 – Low Head Circumference

	<input type="checkbox"/> 153 – Large for Gestational Age Infants
Biochemical	
Clinical/Medical	<input type="checkbox"/> 142 – Preterm or Early Term Delivery <input type="checkbox"/> 382 – Fetal Alcohol Spectrum Disorders <input type="checkbox"/> 383 – Neonatal Abstinence Syndrome
Dietary	<input type="checkbox"/> 411– Inappropriate Nutrition Practices for Infants <ul style="list-style-type: none"> ➤ 411.1 – <i>Use of Substitutes for Breastmilk or Formula</i> ➤ 411.2 – <i>Inappropriate Use of Bottles or Cups</i> ➤ 411.3 – <i>Early Introduction of Beverages or Solid Foods</i> ➤ 411.4 – <i>Inappropriate Feeding Practices</i> ➤ 411.5 – <i>Feeding Potentially Harmful Foods</i> ➤ 411.6 – <i>Incorrect Dilution of Formula</i> ➤ 411.7 – <i>Infrequent Breastfeeding</i> ➤ 411.8 – <i>Feeding a Very Low Calorie or Nutrient Diet</i> ➤ 411.9 – <i>Improper Handling of Expressed Breast Milk or Formula</i> ➤ 411.10 – <i>Inappropriate Use of Dietary Supplements</i> ➤ 411.11 – <i>Inadequate Fluoride or Vitamin D Supplementation</i> <input type="checkbox"/> 425 – Inappropriate Nutrition Practices for Children <ul style="list-style-type: none"> ➤ 425.1 – Inappropriate Beverages as Milk Source ➤ 425.2 – Feeding Sweetened Beverages ➤ 425.3 – Inappropriate Use of Bottles, Cups or Pacifiers ➤ 425.4 – Inappropriate Feeding Practices ➤ 425.5 – Feeding Potentially Harmful Foods ➤ 425.6 – Feeding a Very Low Calorie or Nutrient Diet ➤ 425.7 – Inappropriate Use of Dietary Supplements ➤ 425.8 – Inadequate Fluoride or Vitamin D Supplementation ➤ 425.9 – Pica
Environmental	<input type="checkbox"/> 603 – Breastfeeding Complications or Potential Complications for Infants <input type="checkbox"/> 701 – Infant Up to 6 months old of WIC Mom or WIC Eligible Mom <input type="checkbox"/> 702 – Breastfeeding Infant of a Woman at Nutritional Risk <input type="checkbox"/> 703 – Infant of Woman with Alcohol or Drug Use or Mental Retardation

Learning activity 5-1

1. There many more dietary risks for infants and children than for women. Looking at the table above, why do you think that might be? **Infants and children are learning many new feeding skills and developing dietary habits that can impact their current and future health.**

5-2 Anthropometric risks for infants and children

- 103 – Underweight Infants and Children
- 113 – Overweight Children – 2 to 5 years
- 114 – At Risk for Overweight Children – 2 to 5 years
- 115 – High Weight for Length Under Age 2 Years
- 121 – Short Stature
- 134 – Failure to Thrive
- 135 – Infant Weight Loss Birth to 6 months
- 141 – Low Birth Weight
- 151 – Small for Gestational Age
- 152 – Low Head Circumference
- 153 – Large for Gestational Age Infants

1. Which of these risks is manually selected by the certifier rather than assigned by the data system? **Risks 134 and 151**
2. Which of these risks require a high-risk referral to the WIC nutritionist? Risks 103, **134 and 135**
3. Describe the difference between small for gestational age and low birth weight. **Low birth weight refers to an infant’s weight at delivery. Small for gestational age can describe an infant’s estimated size during the pregnancy as well as at delivery. Low birth weight applies to any infant born at or under 5# 8oz and does not consider gestational age. Small for gestational age infants can vary in weight as gestational age is the key factor in determining what the expected size of the infant should be at any point during a pregnancy.**
4. Timothy was born August 1 and weighed 8 pounds 14 ounces. Today is August 16 and he weighs 8 pounds 2 ounces. Would he qualify for any of these risks?
 YES – RISK #

5. Terence is a 3-year-old boy. His BMI is at the 10th percentile. Would he qualify for any of these risks?
 YES – RISK # 103
6. Tommy is 13 months old and weighed 4 pounds at birth. Tommy’s mom brings a **note** from the doctor that says, “Referred to WIC for FIT.” Would he qualify for any of these risks?
 YES – RISK # 141, 134
7. Todd weighed 9 pounds at birth. Would he qualify for any of these risks?
 YES – RISK # 153
8. Thad is 4 years old and has come to WIC for recertification. At his last appointment, his BMI was at the 90th percentile. At this certification, his BMI is at the 98th percentile. Would he qualify for any of these risks?
 YES – RISK # 113
9. Tyrone is 10 months old. His length is at the 5th percentile. Would he qualify for any of these risks?
 YES – RISK # 121
10. Taylor is 13 months old and her weight for length is at the 10th percentile. Would she qualify for any of these risks?
 NO
11. Tanner is 20 months old and his weight for length is at the 98th percentile. Would he qualify for any of these risks?
 YES – RISK # 115

5-3 Clinical risks for infants and children

- 142 – Preterm or Early Term Delivery
 - 382 – Fetal Alcohol Spectrum Disorders
 - 383 – Neonatal Abstinence Syndrome
1. Which of these risks require a high-risk referral to the WIC nutritionist? **Risks 382 and 383**
 2. What is the key information you need to know if a mother reports that her child has FAS or NAS? **Diagnosis by a health care provider**

3. William is a one-month old baby who was born at 37 weeks gestation. His mother reports that he is healthy and growing well. Would William qualify for a nutrition risk?

YES – RISK # 142

5-4 Dietary Risks for Infants

- 411 Inappropriate Nutrition Practices for Infants
 - 411.1 – *Use of Substitutes for Breast Milk or Formula*
 - 411.2 – *Inappropriate Use of Bottles or Cups*
 - 411.3 – *Early Introduction of Beverages or Solid Foods*
 - 411.4 – *Inappropriate Feeding Practices*
 - 411.5 – *Feeding Potentially Harmful Foods*
 - 411.6 – *Incorrect Dilution of Formula*
 - 411.7 – *Infrequent Breastfeeding*
 - 411.8 – *Feeding Very Low Calorie or Nutrient Diet*
 - 411.9 – *Improper Handling of Expressed Breast Milk or Formula*
 - 411.10 – *Inappropriate Use of Dietary Supplements*
 - 411.11 – *Inadequate Fluoride or Vitamin D Supplementation*
- 428 – Presumed Dietary Eligibility for Infants and Children (4 to 23 months)
 1. Which of these risks is only appropriate for exclusively breastfed infants? **Risk 411.7**
 2. What information, if any, should be documented if you assign the following risks?

Risk	Documentation
411.1 – Use of Substitutes for Breast Milk or Formula	Specific substitute beverage offered
411.2 – Inappropriate Use of Bottles or Cups	Specific inappropriate use
411.3 – Early Introduction of Beverages or Solid Foods	None
411.4 – Inappropriate Feeding Practices	Specific inappropriate feeding practice
411.5 – Feeding Potentially Harmful Foods	Specific harmful food offered

Risk	Documentation
411.6 – Incorrect Dilution of Formula	Specific issue with formula dilution/preparation
411.7 – Infrequent Breastfeeding	None
411.8 – Feeding a Very Low Calorie or Nutrient Diet	Specific diet
411.9 – Improper Handling of Expressed Breast Milk or Formula	Specific issue
411.10 – Inappropriate Use of Dietary Supplements	Specific inappropriate use and type of supplement
411.11 – Inadequate Fluoride or Vitamin D Supplementation	None

3. Eric is 11 months old. Eric’s mom works full time so she pumps and freezes breast milk for Eric to have while she is working. Eric’s grandmother often thaws the frozen breastmilk in the microwave then refreezes any breastmilk that is left after a feeding. Would he qualify for a dietary risk?

YES – RISK # 411.9

4. Sonya is 4 months old. Sonya’s mom runs out of money at the end of the month to buy formula, so she mixes it with extra water and some cereal to make it go further. Would Sonya qualify for a dietary risk?

YES – RISK # 411.2, 411.3, 411.6

5. **Davy** is 8 months old. He is able to sit upright and turn his head. **Davy** enjoys eating dry pieces of cereal on his own. Would he qualify for a dietary risk?

NO

6. Scott is 3 months old and is very happy when he is drinking from his bottle. Scott’s foster mom wants him to be happy but doesn’t have enough time to hold the bottle for him all day so she has found a way to prop the bottle for Scott. Would he qualify for a dietary risk?

YES – RISK # 411.2

7. Kate is 3½ months old. She is exclusively breastfed and her mom offers her a 2-ounce bottle of water daily to make sure she's properly hydrated. Would she qualify for a dietary risk?

NO

8. Jimmy is an exclusively breastfeeding 4-month-old boy. His mom is very well organized and feeds him every 6 hours on the hour. Would he qualify for a dietary risk?

YES – RISK #

9. Peter is a 7-month-old formula fed infant. His father explains that he lost the manufacturer's scoop to prepare his formula, but that the one that came with his coffee is just about the same size. Would he qualify for a dietary risk?

YES – RISK #

10. Tai is 9 months old. Since both of her parents are vegan, they prefer to feed Tai rice milk. Would she qualify for a dietary risk?

YES – RISK #

11. Hakim is 4 months old. He lives in a community that does not have fluoridated water. Would he qualify for a dietary risk?

NO

12. Sakura is 11 months old. Sakura's parents are so proud that their daughter already seems to love eating sushi, especially raw tuna. Would she qualify for a dietary risk?

YES – RISK #

13. Ian is a 5-month-old, exclusively breastfed infant. He typically nurses six or seven times a day. Would he qualify for a dietary risk?

NO

14. Gina is 1 month old. Gina's mom tells you that she has been giving Gina extra calcium supplements because she wants to be sure that Gina's bones are strong. Would she qualify for a dietary risk?

YES – RISK #

15. Callyn is 8 months old and usually drinks 24 ounces of formula per day mixed with fluoridated water. She is eating a variety of baby foods and does not take any vitamin drops. Would she qualify for a dietary risk?

YES – RISK #

5-5 Dietary risks for children

- ❑ 401– Presumed Dietary Eligibility for Women and Children (2 to 5 years)
- ❑ 427 Inappropriate Nutrition Practices for Children
 - 425.1 – Inappropriate Beverages as Milk Source
 - 425.2 – Feeding Sweetened Beverages
 - 425.3 – Inappropriate Use of Bottles, Cups or Pacifiers
 - 425.4 – Inappropriate Feeding Practices
 - 425.5 – Feeding Potentially Harmful Foods
 - 425.6 – Feeding a Very Low Calorie or Nutrient Diet
 - 425.7 – Inappropriate Use of Dietary Supplements
 - 425.8 – Inadequate Fluoride or Vitamin D Supplementation
 - 425.9 – Pica - Children
- ❑ 428 –Presumed Dietary Eligibility for Infants and Children (4 to 23 months)

What information, if any, should be documented if you assign the following risks?

Risk	Documentation
425.1 – Inappropriate Beverages as Milk Source	Specific beverage
425.2 – Feeding Sweetened Beverages	Specific sweetened beverage
425.3 – Inappropriate Use of Bottles, Cups or Pacifiers	Specific inappropriate use
425.4 – Inappropriate Feeding Practices	Specific inappropriate feeding practice
425.5 – Feeding Potentially Harmful Foods	Specific food offered
425.6 – Feeding Very Low Calorie or Nutrient Diet	Specific diet
425.7 – Inappropriate Use of Dietary Supplements	Specific inappropriate use and type of supplement
425.8 – Inadequate Fluoride or Vitamin D Supplementation	None
425.9 – Pica - Children	Specific non-food item eaten

1. Timothy is 3 years old. He likes to drink a big glass of apple juice with his meals every day. Would he qualify for a dietary risk?
 YES – RISK # 425.2
2. Tara is 20 months old. Her parents are both vegetarians but offer Tara fish and poultry on a regular basis. She also frequently likes to drink unpasteurized milk with her parents. Would she qualify for a dietary risk?
 YES – RISK # 425.5
3. Faye is 2 ½ years old. Since Faye doesn't like the taste of regular milk, her grandmother gives her almond milk mixed with some non-dairy creamer instead. Would she qualify for a dietary risk?
 YES – RISK # 425.1
4. Terence is 4 ½ years old, active and very slender. He has been a vegetarian his whole life and enjoys eating eggs, low fat dairy products and lots of fresh fruits and vegetables. Would he qualify for a dietary risk?
 NO
5. Annalee is 15 months old. At naptime, she likes to be put to bed with a bottle of warm milk. Would she qualify for a dietary risk?
 YES – RISK # 425.3
6. José is 4 years old. José drinks a quart of milk every day and several glasses of water. He does not take vitamins or any fluoride supplements because he lives in a city with fluoridated water. Would he qualify for a dietary risk?
 NO
7. Nai is a 3-year-old boy. Nai's mother is a smoker and he enjoys eating her cigarette butts. Would he qualify for a dietary risk?
 YES – RISK # 425.9
8. Emily is a 3 ½-year-old girl with a major sweet tooth. Instead of giving her daughter candy all the time, Emily's mom allows her to eat as many of her orange flavored chewable multivitamins as she wants. Would she qualify for a dietary risk?
 YES – RISK # 425.7
9. Maria is a 2 ½-year-old girl who likes sweets and often throws tantrums when she doesn't get her way. Maria's dad gives her a pacifier dipped in honey to suck on and keep her happy. Would she qualify for a dietary risk?
 YES – RISK # 425.3
10. Michael is 23 months old. Even though it is a slow process, he likes to drink his milk out of a regular cup on his own. Would he qualify for a dietary risk?
 NO
11. Brianne is 3 years old and drinks 16 ounces of 2% milk from a cup every day. She does not take any vitamin supplements. Would she qualify for a dietary risk?

YES – RISK #

12. Kevin is 4 years old. After a complete nutrition assessment, no other health or dietary risks were identified. Would he qualify for a presumed eligibility risk?

YES – RISK #

5-6 Environmental risks for infants and children

- 603 – Breastfeeding Complications or Potential Complications for Infants
- 701 – Infant up to 6 months old of WIC Mom or WIC Eligible Mom
- 702 – Breastfeeding Infant of Woman at Nutritional Risk
- 703 – Infant of Woman with Alcohol or Drug Use or Mental Retardation

1. How will you know if an infant's mother had (or might have had) a nutrition risk during her pregnancy? **If she was a WIC participant during her pregnancy, she would have had identified risks which were documented in the data system. If she was not on WIC during her pregnancy, assess what her risk status might have been by asking the mother about her pregnancy.**
2. Alexis is a 4-day-old breastfeeding infant with jaundice. Her mother was on WIC during her pregnancy and is very anemic. Would Alexis qualify for any of these risks?
 YES – RISK #
3. Sawyer is a 5-month-old infant being cared for by his grandmother. Sawyer's mother used drugs during pregnancy and is in drug rehabilitation. Would Sawyer qualify for any of these risks?
 YES – RISK #

4. Wade is a 4-week-old baby. His mother, Wilma, is developmentally delayed. She lives with her family and Wilma's mother is the primary caregiver. Would Wade qualify for any of these risks?

YES – RISK # 701, 703

Posttest Questions and Answers for Chapter 5



When scoring this posttest, the learner will earn 1 point for correctly answering each question in the tables. Passing score is 16 out of a possible 18 points.

1. Seth:

- ◆ He is 5 months old and at the 3rd percentile weight for length.
- ◆ He has been drinking whole milk as there is often not enough money for formula.
- ◆ His father tells you he was diagnosed with NAS as his mother used drugs during pregnancy.

What risks would be assigned?	Risk #s: 103, 383, 411.1
Additional documentation required?	Yes
Referral to the RD required?	Yes

2. Wilson:

- ◆ He is 2 weeks old and is exclusively breastfeeding on a strict schedule.
- ◆ He weighed 10 pounds at birth.
- ◆ His mom was on WIC during her pregnancy and is currently following a low carbohydrate high protein diet to try and lose weight.

What risks would be assigned?	Risk #s: 153, 411.7, 701, 702
Additional documentation required?	No
Referral to the RD required?	No

3. Xavier:

- ◆ He is 8 weeks old, born at 38 weeks gestation and weighed 5 pounds 12 ounces.
- ◆ His mom tells you that the doctor said that he was small for his gestational age when he was born so she has been adding less water to his formula and propping the bottles on a regular basis to try and boost his intake.
- ◆ His weight for length is now at the 95th percentile.

What risks would be assigned?	Risk #s: 142, 151, 411.2, 411.6
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Additional documentation required?	Yes
Referral to the RD required?	No

4. Zeus:

- ◆ He is a 3-year-old child who recently immigrated to the US.
- ◆ His height is below the 5th percentile for his age.
- ◆ His BMI is at the 10th percentile.

What risks would be assigned?	Risk #s: 103, 121
Additional documentation required?	No
Referral to the RD required?	Yes

5. Nick:

- ◆ He is an exclusively breastfeeding infant who is 15 days old.
- ◆ He weighed 8 pounds 3 ounces at birth and now weighs 8 pounds 1 ounce.
- ◆ His mom was on WIC during her pregnancy and is still underweight. She tells you that he has trouble nursing, he doesn't latch on very well because she has flat nipples. He lost 8 ounces after he was born but has slowly been regaining the weight.

What risks would be assigned?	Risk #s: 603, 701, 702
Additional documentation required?	Yes
Referral to the RD required?	No

6. Zachary:

- ◆ He just turned 2 years old.
- ◆ His mother offers lots of squeeze packs to avoid messes during snack and meal times. She does not want to spend money on vitamin supplements.
- ◆ He drinks from a bottle at night and a cup during the day.
- ◆ His BMI falls on the 98th percentile.

What risks would be assigned?	Risk #s: 113, 425.3, 425.4
Additional documentation required?	Yes
Referral to the RD required?	No