Policy 628
Anthropometric Screening
April 2, 2021 (Revised)

POLICY
Appropriate procedures and equipment will be used to obtain participant weight, length or height, and head circumference measurements in WIC clinics.

PURPOSE
To ensure consistent and accurate measurements are utilized to determine program eligibility.

RELEVANT REGULATIONS
§246.7 ¶(e)(1)(i)(A) and (B)—Required nutritional risk data

§246.7 ¶(e)(1)(ii)(A)—Weight and height or length

§246.7 ¶(e)(2)(i)(A)—Nutritional risk criteria

OREGON WIC PPM REFERENCES
- 440—Staff Training Requirements
- 625—Risk Assessment
- 675—Risk Criteria Codes and Descriptions

DEFINITIONS
Anthropometrics: Measuring the size and proportions of the human body. Anthropometric data associated with WIC includes weight, height, length, and head circumference.

Stadiometer: Apparatus for measuring standing height.

Medical grade equipment: Equipment suitable for use in a physician's office, hospital, or other health care setting.

PROCEDURE

Allowable equipment

1.0 Using appropriate medical grade equipment to obtain anthropometric measurements is essential for accuracy. Accurate weight and height or length measurements are required for determining risk assignment associated with eligibility screening during each certification and for counseling that occurs during individual follow up appointments and mid-certification health assessments. Refer to ♦675—Risk Codes and Descriptions.

a. Weigh infants and children under the age of two years on pediatric balance beam or electronic scales.
b. Weigh children over the age of two years and adults on adult balance beam or electronic scales that are placed on a hard surface.

c. Measure infants and children under the age of two years lying on a recumbent measure board placed on a flat surface.
d. Measure children over the age of two years and adults in a standing position with a stadiometer attached to a smooth flat surface perpendicular to the floor.

Equipment maintenance

1.1. All scales used for weighing participants must be professionally tested one time per year. Date of the most recent testing must be affixed to the equipment. Scales found to be out of calibration, damaged or defective must be repaired or replaced by the local agency in a timely manner.

Appropriate measuring techniques

2.0 Refer to the "*Oregon Online Anthropometric Course*" for appropriate weighing and measurement techniques. Staff must complete this module prior to weighing and measuring participants. See ♦440—Staff Training Requirements. Clarifications regarding the weighing and measuring process:

- Weigh or measure infants and children up to 24 months of age completely undressed or with a dry diaper and lightweight underclothes.
    - It is not necessary to subtract the weight of the dry diaper or t-shirt.
- Weigh and measure adults and children over 2 years of age in lightweight clothing. Remove shoes and all heavy outer wear.
- Any participant being measured for length or height needs to remove hats, barrettes, headbands, and reposition ponytails, buns or anything in the hair which could prevent obtaining an accurate measurement.
- All local agency staff must consistently weigh infants and children in the same state of undress so weights obtained at each contact will accurately reflect rates of growth.
- Cover infant scales with table paper or paper liners that can be changed for each participant. It is not necessary to use liners for standing measurements.

Self-reported measurements

2.1. Pre-pregnancy weights may be self-reported. All other measurements must be obtained in the WIC clinic or from health care providers where the measurement was collected within 60 days before the current appointment. The source of the data must be documented in the WIC data system. Refer to ♦625—Risk Assessment.

2.2. Obtain a second measurement when staff feel that the first measurement was inaccurate for any reason, such as an equipment malfunction or uncooperative child. Any concerns about the accuracy of measurements entered into the WIC data system should be documented in notes on the Medical Data Screen.

Head Circumference

3.0 The American Academy of Pediatrics (AAP) recommends taking head circumference measurements to assess for risk of growth issues such as microcephaly and macrocephaly. Head circumference measurements for all infants and children under

2 years of age are highly recommended but are not a required anthropometric measurement.

3.1. Head circumference is the measurement around the largest part of the head on the brow above the eyes and ears around to the back of the head. When taking a head circumference, use flexible, non-stretchable measuring tapes developed for this purpose.

Documentation

4.0 All measurements will be documented on the participant's Medical Data Screen in the data system. The data system will utilize anthropometric data to generate growth graphs, prenatal weight gain graphs and assign medical risks. Refer to the "*Oregon Online Anthropometric Course*" and the 2020 "*Let's talk about growth*" in-service for information on interpreting graphs and measurements.

If you need this in large print or an alternate format, please call 971-673-0040.

This institution is an equal opportunity provider.

POLICY HISTORY

Date	* Revised, Reviewed, Released
4-5-2012	Date of Origin
1-7-2013	Released
1-7-2016	Reviewed
4-5-2019	Released
4-2-2021	Minor revisions

The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

***Released:** Significant changes made to policy. Release notes can be found in the corresponding document on the Policy and Procedure Manual page.*

***Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.*

***Revised:** Minor edits or formatting has occurred without need for release. USDA has accepted a policy and watermark is reviewed.*

***Date of Origin:** Date policy was initially released*