WASHINGTON STATE WIC NUTRITION PROGRAM

Washington State WIC Manual
Notice of Revision

Date: __10/26/2012______  Notice Number: 2012-05

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Chapter: 9 – Anthropometrics

Section: See Table of Revisions

Policy/Recommendation/Description/Procedure:

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If you have questions about this revision or wish additional copies, call or write:

Department of Health
State WIC Nutrition Program
P.O. Box 47886
Olympia WA 98504-7886
Call: 1-800-841-1410

Explanation of Revisions:

- This revision includes the Institute of Medicine (IOM) prenatal BMI categories and references to the 2009 prenatal weight gain grids.
- This revision also includes the CDC-WHO growth chart information for infants and children age birth to 24 months.
- See the attached table of revisions for specific changes to the chapter.

Remove: Remove the chapter dated 1/2007 from the manual.

Insert: This current revision dated 10/2012 in Volume 1.

Attachments:

- ☒ Memo
- ☒ Manual Revision
- ☐ Other ________________________________
**Volume 1, Chapter 9 – Anthropometrics**

**Table of Revisions**

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<th>Policy/Page</th>
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<tr>
<td>Through-out chapter</td>
<td>We continue to make “plain talk” changes to each chapter.</td>
<td>The goal is to have policies more clear and easier to read.</td>
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| “Assess Pre-Pregnancy Weight and Prenatal Weight Gain” p. 2 - 4 | **Procedure:**
B, 1: Updated with the 2009 IOM pre-pregnancy BMI categories and the prenatal grids in Client Services. |
B, a: Changed to: Underweight – BMI < 18.5 (singleton – the multiples is the same grid). Was previously 19.8 |
B, b: Changed to: Normal weight – BMI 18.5 – 24.9 (singleton and multiples). Was previously 19.8 – 26.0. |
B, c: Changed to: Overweight – BMI 25.0 – 29.9 (singleton and multiples). Was previously > 26.1. |
B, d: Changed to: Obese – BMI > 30 (singleton and multiples). |
B, Note: Teenage clients (18 years and younger) are plotted on the prenatal grid based on their pre-pregnancy BMI using the adult cut-offs (not pediatric BMI-for-age charts). |
B, 2: Lists the items that print on the prenatal grids in Client Services. |
D, 1: Based on research from the IOM, staff don’t need to modify the prenatal weight gain recommendations for special populations such as pregnant teens, shorter women, and women of different ethnicities. |
E, b: All staff can weigh the pregnant woman, enter the weight in her file and share the prenatal weight gain grid with her. |

**Information:**
- Updated reference to the 2009 IOM *Weight Gain During Pregnancy: Reexamining the Guideline* report. |
- Listed Department of Health - WIC website address for printing blank copies of the prenatal grids. |
| “Assess the Weight Status of Breastfeeding and Postpartum Women” p. 5 | **Policy:**  
Added: The CPA must assess the weight status of breastfeeding and postpartum women at the mid-certification health assessment. | We sent this information out separately with the breastfeeding one year certification information. |
|---|---|---|
| “Assess Growth for Infants and Children” p. 6 - 7 | **Policy:**  
Updated time frame for the infant health assessment to between 4 and 8 months of age.  
Added: The CPA must weigh and measure children and assess growth at the child mid-certification health assessment.  
**Procedure:**  
B, 1, a: Measure all infants and children up to 24 months of age lying down (using a recumbent length board) and plot on the CDC Birth – 24 months growth charts. These growth charts are based on the World Health Organization (WHO) 2006 growth data.  
B, 1, b: Measure children 24 months of age and older standing (using a stadiometer) and plot on the BMI for Age 2 – 20 years growth grid.  
B, 1, c: Staff have the option to measure a child between the ages of 2 and 3 years lying down when the child is too short for the stadiometer or isn’t able to stand for the measurement.  
B, Note: Children measured lying down between 2 -3 years will plot on the CDC Birth – 36 months growth charts. The CPA can use this information for education purposes. These measurements aren’t used for risk assessment.  
B, 1, d: Client Services will plot and use head circumference measurements for risk assessment for infants and children up to 24 months of age.  
**Information:**  
1. Staff can print growth charts from Client Services.  
2. Staff can print blank paper copies of the CDC Birth – 24 month growth charts from the DOH WIC website.  
3. Staff can order blank copies of the CDC BMI for Age 2 – 20 year growth charts from the Department of Printing Fulfillment Center. | We sent this information out separately with the child one year certification information.  
WHO growth chart information and training was sent out previously. |
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<td><strong>Volume 1, Chapter 9 – Anthropometrics</strong></td>
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<tr>
<td><strong>Policy:</strong></td>
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<tr>
<td><strong>Adjusted Growth Charts for Premature Infants and Children up to 24 Months</strong></td>
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<td>p. 8</td>
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| Changed from “children < 2 years” to “children up to 24 months”.

**Procedures for Weighing and Measuring Clients** |
| p. 11 - 15 |
| B, 4, c: For balance beam scales – convert from quarter pounds to ounces. Use the table in the Appendix to convert from quarter pounds to ounces.

**Buy and Maintain Anthropometric Equipment** |
| p. 16 - 18 |
| Added the following:
Clinic staff must:
1. Buy and use medical-grade equipment
2. Make sure the equipment is set up correctly
3. Balance scales daily
4. Maintain and calibrate equipment
5. Document maintenance and calibration of the equipment

**Procedure:**
A: Added: Staff can use medical grade digital or balance beam scales.
A, 3: Use a recumbent board for infants and children under 24 months of age.
A, 4: Use a full length measuring board mounted to the wall, called a stadiometer, for adults and children 24 months and older.
D: Calibrate equipment and keep a calibration log.

**Appendix** |

- Moved “How to read Prenatal Weight Gain Grids” to the Appendix from the body of the chapter.
- Added sample Calibration Log.
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