

**Subject: Eligibility Requirement****Item: Determining Nutritional Risk - Anthropometric**

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**PURPOSE:**

To provide local agencies (LA) standardized procedures for determining anthropometric nutritional risk(s) when certifying and recertifying applicants.

**POLICY:**

- I. A Competent Professional Authority (CPA) must assess whether an anthropometric nutritional risk exists at initial certification and recertification using the anthropometric assessment tools/methods stated below and the appropriate screens in the WIC Web Information System Exchange (WIC WISE).

**PROCEDURE(S):**

- I. General Requirements for Anthropometric Measurements
  - A. Height/length and weight measurements are required at each certification and recertification.
  - B. Measurements must be:
    1. Dated within 60 days prior to the date of the certification or recertification.
    2. Category specific.
    3. Obtained from the WIC site or an acceptable non-WIC source. Acceptable non-WIC sources are:
      - a. WIC referral form.
      - b. Medical or clinical record in physical form, displayed in-person via electronic format (e.g., emails, cell phones, tablets, pictures, etc.), or obtained remotely. For acceptable means of obtaining documents remotely, refer to WPPM 220-30.
      - c. Crib card (for infants less than 60 days old only).
      - d. Information relayed directly from a medical provider (e.g., phone conversation).
- II. Techniques for Weighing and Measuring at the WIC Site
  - A. Ensure that shoes and heavy outer clothing are removed.
  - B. Use techniques specified in the WIC Nutrition Assistant (WNA) Training Manual or use LA written procedures that are consistent with the WNA Training Manual.
  - C. Use the appropriate weight equipment based on age:
    1. Weigh participants under the age of two on a pediatric balance beam or pediatric electronic scale that is placed on a hard surface.

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2. Weigh participants over the age of two on an adult balance beam or electronic scale that is placed on a hard surface.
- D. Use the appropriate length/height equipment based on age:
1. Measure participants under the age of two years lying on a recumbent measuring board placed on a hard surface.
  2. Measure participants over the age of two in a standing position using a stadiometer placed on a hard surface.
- E. Some children between 24 months to 36 months may need to be measured or weighed lying down, depending on factors such as whether they can stand unassisted.
- III. Criteria and Maintenance of Weighing and Measuring Equipment
- A. LA staff must have convenient access to appropriate weighing and measuring equipment (scales and stadiometers for adults and older children, infant scales and recumbent measuring boards for infants and younger children).
- B. Equipment must meet minimum criteria and maintenance standards. Refer to WPPM 1000-90.
- C. The LA must ensure that scales are calibrated on an annual basis.
- IV. Documentation in WIC WISE
- A. LA staff must document the following anthropometric information in WIC WISE:
1. Length/height and weight measurements.
  2. Date the measurement was taken.
  3. Source of measurement (indicate WIC or non-WIC).
  4. Any factors that may affect accuracy (e.g., uncooperative individual).
  5. Anthropometric risk(s) as identified during assessment(s) throughout the certification period.
- V. Verbal Anthropometric Data
- A. Measurements verbally reported by the family representative/caretaker are not allowed except for the following:
1. Birth Weight/Length Measurements for Infants and Children
    - a. For infants under 8 weeks old who are not present at certification, LA staff are allowed to document verbal birth measurements but must obtain measurements at the WIC site or from an acceptable non-WIC source at the next appointment. See Exceptions Section on page 3 for details.

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- b. For all other infants/children (including infants under 8 weeks old who are present at certification), LA staff are allowed to accept verbal birth measurements only if current anthropometric measurements are available from either the WIC site or an acceptable non-WIC source.
  2. Pre-pregnancy Weight for Pregnant Applicants and Postpartum Applicants
    - a. LA staff must document pre-pregnancy weight for pregnant and postpartum applicants if the information is available.
    - b. Verbal pre-pregnancy weight from the applicant is allowed if no other source (e.g., medical record) is available. If the applicant is unable to provide an estimate of the pre-pregnancy weight, LA staff must check the “unknown” box.
- VI. Prenatal Weight Gain Goal for Applicants with Multi-Fetal Gestation
  - A. LA staff must attempt to obtain the recommended prenatal weight gain goal from the Health Care Provider (HCP) for all participants with a multi-fetal gestation. Communication with the HCP is essential because the weight gain goal may vary based on number of fetuses and health history.
  - B. LA staff must obtain the weight gain goal from an acceptable source (i.e., WIC referral form, medical record, verbal from HCP).
  - C. LA staff must record the weight gain goal in the Care Plan for future reference.
  - D. If, after making a reasonable effort, the LA is not successful in obtaining the information from the HCP, LA staff must document the specific efforts made to obtain the information in the Care Plan.
- VII. Reviewing the Anthropometric Findings
  - A. LA staff must review normal or abnormal anthropometric findings with the family representative/caretaker.

**EXCEPTION(S):**

- I. Infants under eight weeks of age
  - A. If LA staff are unable to obtain anthropometric data for an infant under eight weeks old because the infant is not present and measurements are unavailable, LA staff must do the following:
    1. Document the infant’s verbal birth measurements, as reported by the Family Representative, into the birth length and weight fields.
    2. Check the “?” boxes for height and weight in the anthropometric grid and select “infant, ≤8 weeks, not present” in the dropdown menu for “? Reasons”.

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3. Proceed with the certification and issue a single month of benefits.
  - B. The infant must be present at the next appointment to fulfill the presence requirement. Refer to WPPM 210-07. At that time, LA staff must obtain the infant anthropometric measurements and document in WIC WISE to complete the certification and issue food benefits.
- II. Disabled applicants/participants
- A. LA staff must excuse an applicant or participant from anthropometric assessment when obtaining the data would present an unreasonable barrier to current participation under circumstances defined by the Americans with Disabilities Act.
  - B. LA staff must make realistic efforts to obtain the data from another source (e.g., medical record). If unable to obtain this data, LA staff must do the following:
    1. Ask for an estimate of the participant's height and weight.
    2. Check the "?" boxes for height and weight in the anthropometric grid and select "Disability/Medical Condition" in the dropdown menu for "? Reasons".
    3. Document any relevant information in the comment box in the anthropometric grid.

**AUTHORITY:**

[7 CFR 246.7 \(e\)](#)

WRO Policy Memos 803-10

[USDA Policy Memorandum 2011-5, Nutrition Risk Criteria Value Enhanced Nutrition Assessment \(VENA\), Appendix A-1](#)

**RESOURCE:**

[USDA WIC Nutrition Risk Descriptions](#)

[CHDP Health Assessment Guidelines](#)

**CROSS REFERENCE:**

WPPM 1000-90 Equipment Guide for Measuring and Weighing

WPPM 220-30 Telehealth Privacy and Confidentiality