

Child

100's Anthropometric = HT/WT, % tiles *(Anything related to weight gain, loss, growth)*

KWIC Screen: Anthro Measures

- How do you feel about your child's growth?
- (Ask only if concern) What has your doctor said about your child's growth?

PROBE for these topics depending on what participant shares: family's feelings on growth, weight change, prematurity/birth weight (if under 2 years)

200's Biochemical = Blood Tests *(Anything related to blood – anemia, lead, glucose)*

KWIC Screen: Blood Measures

- (If low Hgb) What has your doctor said about your child's iron? What do you know about low iron?

300's Clinical = Health/Medical Conditions *(Medical history, conditions, doctor access)*

KWIC Screen: Health Interview

- (First, ask all questions on KWIC Screen: Health Interview)
- What concerns might you have about your child's health?
- What has your doctor said about your child's health?
- Does your child have any medical or nutrition conditions such as food allergies 353, lactose intolerance 355, recent surgery 359? (or others)
- When was the last time your child had a checkup at the doctor?
- Has your child had a lead test? (refer)

PROBE for medical/health conditions, weight loss 134, oral/dental health 381

KWIC Screen: ATOD

- (Ask all questions on KWIC Screen: ATOD)

PROBE for vitamins/minerals 427; ATOD

400's Diet and Nutrition

KWIC Screens: Notes

- How is your child's appetite?
- What is mealtime like for your family?
- What do you like best about your child's eating?
- Does your child follow a special diet or have any restrictions? 425
- Does your child eat non-foods item? 425
- Does your child feed him/herself? 425
- How do you feel if your child doesn't finish his/her plate? 425
- Tell me about the beverages your child drinks?
 - Water–what kind? Milk–type? 425 Sugary beverages–how often? 425
- What does your child drink from? (bottle, sippy, open cup) 425
- What are some of your child's favorite foods/snacks? (look for choking hazards & appropriate textures; foods that could be contaminated) 425

900's Environmental/Other Factors

KWIC Screens: Notes

- What are some physical activities that your child enjoys?
- Are there times when anyone makes you feel unsafe for your child or yourself? 901

PROBE for safety/abuse 901, foster care 903

- Do you feel your family could use support from other programs for housing or food at this time?