































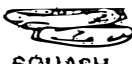













Mamáy'asnim Hitéemenwees Nutrition Assessment

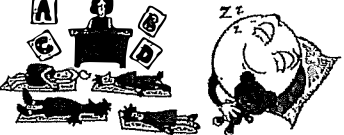
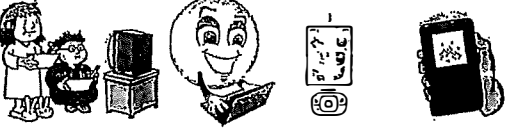
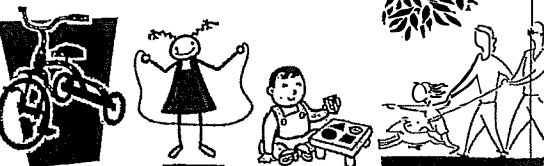
Child's Name:			Date:			
Choose from Drop Down Menus						
 MILK (any kind)		 CHEESE cream		 YOGURT		
1						
1. My child eats from this food group: a) less than 3 times a day b) 3 to 4 times a day c) 5 or more times a day						
 MEAT & POULTRY (any kind)		 EGGS		 COTTAGE CHEESE		
 FISH		 BEANS (not green)		 PEANUT BUTTER		
2						
2. My child eats from this food group: a) less than 2 times a day b) 2 or more times a day						
 CEREAL (any kind)		 RICE		 CRACKERS		
 BREAD (any kind)		 NOODLES, SPAGHETTI		 TORTILLA		
3						
3. My child eats from this food group: a) less than 3 times a day b) 3 to 4 times a day						
 ORANGE (or juice)		 TOMATO (or juice)		 GRAPEFRUIT (or juice)		
 BROCCOLI		 CABBAGE		4		
4. My child eats from this food group: a) less than once a day b) 1 or more times a day						
 DARK, LEAFY GREENS (spinach, romaine lettuce, mustard greens, etc.)		 CARROTS		 APRICOTS		
 YAMS (or sweet potatoes)		 SQUASH (dark yellow)		5		
5. My child eats from this food group: a) less than 3 times a week b) 3 or more times a week						
 APPLES		 PEACHES		 POTATOES (white)		
 BANANAS		 PEARS		 LETTUCE (iceberg)		
 GREEN BEANS		 SQUASH (zucchini)		6		
 CORN		 PEAS		 CANDY		
6. My child eats from this food group: a) less than 2 times a day b) 2 or more times a day						
 SODA POP		 DOUGHNUTS, CAKES, PIES, COOKIES		 TANG, HI-C, KOOLAI		
 JELLO		 POPSICLES		7		
 SUGARY CEREALS		 CANDY		 SUGARY CEREALS		
7. My child eats from this food group: a) 3 or more times a day b) less than 3 times a day						
Check (Section 3)		Yes	No		Yes	No
Is child allergic to any foods?				Does child live in a home that has running water and a stove and refrigerator which work?		
Does child drink caffeinated drinks?				Are you satisfied with what this child eats?		
				Check the food programs in which your family participates (Section 4)		
				Food Stamps		
				<div style="display: flex; justify-content: space-around;"> yes no </div>		
				WIC		
				<div style="display: flex; justify-content: space-around;"> yes no </div>		

Does child ever eat dirt, clay, paint chips, ice?		Does child take vitamins? Or iron?		Commodities	YES	NO
Does child have diarrhea or constipation often?		Is child a vegetarian?		Other:		
Do you ever run out of food to feed the child or family?		Is there foods child does not eat for religious reason?				
Does the child eat breakfast every day?						

Infants (Section 5)

How many times does your infant eat each day? _____ What formula? _____ Milk %? _____ Breast Milk? _____
 How many ounces? _____ First feeding method: Bottle fed _____ Nursed _____

Healthy Active Living (Section 6)

	<p>1. How many hours of sleep does your child get per day?</p>
	<p>2. My child gets "screen time" (TV, video games, computer, phone, etc.)</p> <ol style="list-style-type: none"> Less than one (<1) hour per day. More than one (1) hour per day. More than two (2+) hours per day.
	<p>3. How much physical activity does your child get per day?</p> <ol style="list-style-type: none"> Less than one (<1) hour per day. More than (1) hour per day. More than two (2+) hours per day.

Follow-up to nutrition assessment

If nutrition assessment finds inadequate diet (e.g., too little, too much, or unhealthy foods), growth problems (e.g., failure to thrive or overweight), or anemia, the child should be referred to a health care provider for evaluation and treatment.

Treatment may include:

- Referral to a nutritionist
- Counseling for parents and Head Start staff on the types and amounts of food the child should eat and recommended amount of physical activity
- Iron supplements or iron-enriched vitamins
- Treatment of medical conditions causing nutritional and growth problems

How a child eats can affect how she grows, develops, looks, and feels. Nutrition assessment and counseling can promote healthy growth and development. If you have questions or concerns about your child's nutrition please contact the Health & Safety Specialist or your local WIC Office.