

# Answer Key for Introduction to Medical & Diet Assessment



## Practice Activity - A

1. Observe another CPA doing a medical and diet assessment.
  - *Subjective*
2. Look at the Risk Code Criteria for Dietary Risk Codes (400s).
  - ◆ How many sub-risks are there for 411? 11
  - ◆ How many sub-risks are there for 425? 9
  - ◆ How many sub-risks are there for 427? 5
  - ◆ How many sub-risks are there for 401? 0
  - ◆ How many sub-risks are there for 428? 0



## Skill Check -#1

1. What are the 5 steps of a medical and diet assessment?
  - STEP 1: **Ask** the participant about their health status and feeding behaviors
  - STEP 2: Use **probing questions** to find out more information.
  - STEP 3: **Determine** medical & dietary risk codes, if applicable.
  - STEP 4: Use **critical thinking skills** to **review** all information to ensure risk codes are appropriately assigned and correct.
  - STEP 5: **Document** these risk codes in HuBERT.
2. What are the 4 groups of nutrition risk codes?
  - Anthropometric risks
  - Biochemical risks
  - Clinical/health/medical risks
  - Dietary risks
3. What are the 3 reasons to do a medical and diet assessment?
  - To collect data
  - To identify risk codes
  - To guide nutrition education

4. How is a dietary risk code different than other nutrition risk codes?
- Dietary risk codes are only a small portion of all of the nutrition risk codes. Dietary risk codes are based on the actions and behaviors of the participant, rather than on any physical or medical factors.



### **Practice Activity-B**

1. Ask your WIC Coordinator what your agency's procedure is for documenting medical and dietary risk codes. Write the location of the documentation here.
  - *Procedure and location of documentation is subjective to the local agency.*
2. Ask your WIC Coordinator who you would consult with if you had a question about a medical or dietary risk code or a referral for a medical or dietary risk code. Write the answer here.
  - *Information is subjective to the local agency.*



### **Skill Check-#2**

1. What is the difference between subjective and objective information? Give an example of each.
  - Subjective information is information that the participant tell you.
    - Example: "My baby wants to eat all the time."
  - Objective information is information you gather or observe.
    - Example: height, weight or blood
2. What are the five basic components to critical thinking?
  1. **Collect all pertinent information needed before drawing conclusions.**
  2. **Ask additional questions if needed for clarification.**
  3. **Recognize which factors contribute to the identified nutrition problem.**
  4. **Consider the participant's point of view about nutrition and health priorities.**
  5. **Check the accuracy of unusual or inconsistent measurements.**
3. Show an example of documentation for a medical and also a dietary risk code using the procedure at your local agency.
  - *Documentation procedures are subjective to the local agency.*



### **Skill Check-#3**

1. For each of the following scenarios, develop a probing question that will allow you to gather more information from the participant. You can use the Training Tools for ideas.
  - *Subjective*
2. Change these close-ended questions into open-ended questions.
  - *Subjective*



### **Practice Activity-C**

1. Review the Health Information Tab in HuBERT as well as the Training Tools for Diet Assessment found on the MN WIC website. Think about how you will ask the questions to get the information that you need.
  - *Subjective*
2. Ask a co-worker to role-play as the participant and practice asking open-ended and probing questions. Use the Training Tools for Diet Assessment as well as the Health Information tab in HuBERT. Repeat the exercise for each category of participant that WIC serves.
  - *Subjective*



### **Practice Activity -D**

Use the Risk Code Criteria for Infants (Risk Code 411) documents to answer the questions for the following scenarios. Discuss your answers with your supervisor.

1. Marcia is in your office today with her 6 month old, Ben. Marcia says, “I run out of formula by the end of the month, so I have to give Ben cow’s milk for about a week every month.”
  - What probing questions might you ask?
    - *Subjective*

- Would this be considered routine?
  - The definition of ‘routine’ is ‘something that happens on a regular basis.’ This feeding behavior would qualify as routine because it happens regularly each month.
  
- 2. Esmeralda has her 8-month-old son, Jaime, to see you today. Esmeralda says, “Jamie’s dad says that the baby cereal tastes pretty bad by itself, so when he feeds him, he puts in a little sugar to make it taste better. He watches Jaime when I work on the weekends and gives him cereal then.”
  - What probing questions might you ask?
    - *Subjective*
  - Would this be considered routine?
    - This behavior happens regularly each weekend, so it should be considered ‘routine’.



### **Practice Activity-E**

1. Review each of the Training Tools and determine which topic area – attitudes, actions and supplementation – each question addresses.
  - *Most of the questions address attitudes and/or actions, sometimes both. Question #3, “What do you give this child?” OR “Which of these do you take?(Women)” addresses supplementation.*
  
2. How do you know when you are done with the assessment phase of certification?
  - You hear the mother speak about the attitudes, actions, and supplementation behaviors.
  - You have assigned and documented dietary risk codes as appropriate.

## **Final Skill Check**

1. Risk Code 411, Inappropriate Nutrition Practices for Infants could be assigned to an infant who carries around a training cup filled with milk. **T**
2. Risk Code 425, Inappropriate Nutrition Practices for Children, could be assigned to a child who drinks untested well water. **T**
3. Risk Code 427, Inappropriate Nutrition Practices for Women, could be assigned to a breastfeeding woman who eats cold hot dogs. **F**
4. Risk Code 401, Failure to Meet Dietary Guidelines for Americans, has 3 sub units. **F**
5. The four groups of nutrition risk codes are: anthropometric, medical, dietary, and other. **F**
6. The ideal time to do the anthropometric assessment is following the medical and diet assessment. **F**
7. The only purpose for the assessments required in WIC is to identify and assign risk codes. **F**
8. Height, weight and blood work are examples of objective data **T**
9. An example of subjective data is when a pregnant woman tells you she is eating well and feels healthy. **T**
10. Critical thinking draws on a person's life experiences as well as his/her education. **T**
11. Asking additional questions not found on the VENA Tab is a vital component of critical thinking. **T**
12. "Do you plan to breastfeed?" is an example of a close-ended question. **T**
13. Questions that begin with the words, "what", "when", "why" and "how" are open-ended questions. **T**
14. Probing questions can help you determine if a dietary practice is routine or not. **T**
15. Counseling is the last step in the assessment process. **F**