



# Workbook: High-Risk Guidebook for Children

A Workbook to Accompany the High-Risk Guidebook for Children  
Last Updated July 2021

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## Using This Workbook

This workbook was created to accompany the High-Risk Guidebook for Children. As you read through the Guidebook, keep this workbook nearby so that you can easily access it to answer the Critical Thinking Questions and Case Study questions. Take notes and talk with your trainer about these questions and anything else that comes to mind that might help you become a more successful WIC Registered Dietetic Nutritionist (RDN), Nutritionist, or CPA.

You will also have the chance to go through the case studies in a role play with your trainer or fellow RDN/Nutritionist/CPA peers. This is great practice to incorporate PCS skills into your counseling and assessment of participants. Try to make these role-playing exercises as real as possible, and discuss questions and concerns you have with your trainer when the role play is over.

If you and your trainer still have questions after discussing the situations, please contact your State Nutrition Coordinator or the State Training Coordinator.

## Module 1: Introduction

### Doctor Recommendations

1. A mom and her 4-year-old daughter Vanessa are meeting with you for code 134 Failure to Thrive (FTT). Mom has also brought a prescription from Vanessa's pediatrician for Pediasure at three cans per day with the diagnosis of FTT. When you go into WISH and enter the weight and height, you can see that she is at the 25<sup>th</sup> percentile and has been for about two years. Discuss with your trainer what you would do in this situation.

### Programs for Children in Nevada

1. You are seeing 3-year-old Justine for FTT. Her mom says that her doctor just wrote them a prescription for Pediasure to help her gain weight and grow. She also mentions that she is worried about Justine's development because she doesn't seem to talk as much as her friends and when they are at the park, Justine doesn't like to run around as much as the other kids. How can you find out if Justine has been seen by Early Childhood Special Education (ECSE) or make a referral to that program?

### Using Your PCS Skills

What are your thoughts about using PCS tools? Do you think they can help you to collect important and useful information from your client?

## Module 2: Anthropometrics - The 100s Codes

### **H** 113: Overweight

Talk to your trainer about what referrals are available locally for you to share with your WIC families and write them below.

### 115: Overweight

1. You are seeing a client for this code and her mom asks if she should start offering fat-free milk instead of whole milk. What advice do you offer her?

### **H 134: Failure to Thrive**

1. The mom you are meeting with says that her son with FTT who is 2 years old refuses to eat all day, but during the night he wakes up two to three times for an 8-ounce bottle of milk. What helpful recommendations would you offer this family?

### **H 142 A: Prematurity**

1. You are meeting with Sara and her son Jaxon who is 18 months old. After talking with Sara, you learn that Jaxon was born at 30 weeks gestation. What is his corrected age?

## Module 3: Biochemical and Clinical - The 200s and 300s Codes

### **H** 343: Diabetes Mellitus (DM)

1. You see a 4-year-old boy with type 2 DM. Mom doesn't seem concerned about his diagnosis. How can you probe for more information and explore potential for behavior change?

### **H** 354: Celiac Disease

1. A family comes to meet you with 3-year-old Sammy who has celiac disease. Mom states that she understands his diet well and has no questions or issues. After doing a complete assessment, you learn that mom is actually feeding Sammy some foods that do, in fact, have gluten in them. How do you explain this to Sammy's mom?

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## Case Studies

Work with your trainer and any other newly hired RDNs to go through this case study as a role play. Have the trainer be the participant and the new RDNs go through a full high-risk assessment, including writing the note. Prompts will be given for the trainer to use, as they are playing the participant.

### 113: Overweight/Obese Case Study

#### General information

You are meeting with Maria and her 3-year-old son Miguel for code 113. Maria also brings along her mother Antonia and her new 3-month-old baby girl Marissa.

Miguel's measurements:

Weight at 30 months: 34 lbs   Height: 36"   BMI: 18.4   Percentile: 92nd

Today's weight:      36 lbs   Height: 37"   BMI: 18.4   Percentile: 96th

#### Assessment

You decide to use the PCS tools and ask Maria what her feelings are about Miguel's nutrition and eating habits. Maria explains that she feels that Miguel is a good eater and has a really good appetite like his father. She has no concerns today but was a bit worried at the last appointment when the WIC worker told her that Miguel's weight was high. She says that Miguel's doctor also mentioned this at his last appointment so she is worried, but she also thinks he looks just fine the way he is.

Maria tells you more about the way Miguel eats. Most meals are eaten as a family and include tortillas, chicken or beef, and rice and beans. For snacks he has chips, crackers, and apples and drinks mostly milk or juice. She says that he doesn't like to eat vegetables or drink water. After his last health check with the doctor, she has tried to get him to eat more vegetables, but he refuses.

1. Is there anything that Maria has mentioned that concerns you?



2. What other information would you want to collect at this point?
3. How can you approach the topic of Miguel's weight with sensitivity for his mother?
4. On what topics would you like to offer tips for his mother? Write down several possible ideas that may be helpful to this family.

5. How can you move this conversation towards behavior change talk?

6. How would you like to follow-up with Maria and Miguel?

When you have finished, write your SOAP note below.

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Discussion Notes:

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## 134: Failure to Thrive Case Study

### General information

Chelsea and her 3-year-old son Matthew come to you for the high-risk code 134 FTT. The weights and heights on record for Matthew are:

2-year-old weight: 24 lbs      length: 34"      percentile: <5th

3-year-old weight: 26 ½ lbs      length: 37"      percentile: <3rd

### Assessment

Chelsea is very concerned with Matthew's weight trend. Chelsea tells you that Matthew's doctor is concerned as well. He suggested feeding Matthew higher fat food, like adding cheese and peanut butter to foods. The doctor also recommended starting Pediasure two to three times per day and Chelsea has brought a prescription today.

Matthew is a picky eater. He usually eats cereal in the morning, snacks until lunch time, won't eat much for lunch (sometimes crackers or apples), and is unpredictable on whether he eats dinner. Chelsea tells you that Matthew loves milk and will usually have four to five cups of milk throughout the day. The family is pretty busy in the evenings, so they don't usually have dinner together throughout the week. Matthew's dad works nights, so the whole family is never together for meals.

1. Do you agree with the doctor's diagnosis of FTT? Does Matthew meet WIC criteria to receive Pediasure?
  
  
  
  
  
  
  
  
  
  
2. What other questions would you want to ask to find out about Matthew's typical eating habits?

3. What nutrition education do you want to provide for Chelsea? How can you approach the nutrition education and behavior change portion of your appointment?
4. What suggestions will you provide regarding Pediasure?

When you have finished, write your SOAP note below.

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Discussion Notes:

### 353: Food Allergies Case Study

#### General information

Noah, a 2-year-old, and his mother Emily come to see you for help with food allergies. Noah's weight and height measurements are:

18-month weight: 24 lbs 8 oz	Length: 32 6/8"	Percentile: 50th
Today's weight: 26 lbs	Height: 34 4/8"	Percentile: 45th

#### Assessment

Noah has recently been diagnosed with food allergies. Emily tells you that whenever he eats or comes in contact with peanuts, he gets hives and becomes short of breath. Emily mentions that the doctor told them to avoid foods with peanuts. Emily is worried about Noah's reaction to peanuts and how his growth could be affected.

1. What information about Noah's current and previous diet would you need to know?
2. How can you reassure Emily regarding Noah's growth and his new diagnosis?
3. There is so much information that can be helpful for children with food allergies. How can you decide what information to share with Emily that will be relevant to her situation with Noah?

4. What topics would you expect a parent in Emily's situation to be concerned with?
  
  
  
  
  
  
  
  
  
  
5. To what resources can you refer Emily for support? List all possible resources below.

When you have finished, write your SOAP note below.

Discussion Notes:



### 362: Developmental Delays Case Study

#### Assessment

Molly and her son Jaxon are meeting with you to day for code 362. After reviewing the previous notes, you learn that Jaxon has autism spectrum disorder (ASD) and mom has been trying out a new diet for him, gluten free (GF), which she believes is really helping him. You also learn that Jaxon is extremely picky with foods, and drinks about 36 ounces of milk each day. He is within normal limits for his height and weight.

You ask mom how she feels about mealtimes with Jaxon. Mom tells you that it is mealtimes and Jaxon's nutrition is rough. She says she is so worried about his nutrition, but she isn't sure what to do. She cooks regular meals for the family, but he won't eat it so she ends up cooking him GF hot dogs, GF fish sticks or GF chicken tenders. He will eat some fruits and vegetables but his preference changes from week to week. You tell her that you read that Jaxon has autism spectrum disorder and ask if his diagnosis makes eating a challenge. She tells you that his autism definitely makes it hard to eat. She says he is picky because he has autism and that is why they are trying the gluten-free diet that she heard about. She's heard, mainly online, of other parents of kids with ASD that have tried this diet and seen great improvement in their children's development. As of two weeks ago, they have been gluten free, but Molly is overwhelmed by the changes.

1. Do you have any concerns about Jaxon's diagnosis and eating habits?
  
  
  
  
  
  
  
  
  
  
2. What other information would you want to collect about Jaxon's nutrition?

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3. Are there any other questions regarding Jaxon's diagnosis you would want to ask?
  4. How can you help Molly with understanding the gluten-free diet and gluten intolerance?
  5. What topics would you offer to talk to Molly about?
  6. What referrals would you want to offer her or check to make sure she has accessed already?

When you have finished, write your SOAP note below.

Discussion Notes: