

# Complete Questions – Postpartum Woman

JULY 2014

## A: 100's Anthropometric

Height/weight, %tiles, anything related to weight gain, loss, growth

- What has your doctor said about your weight?
- What are your thoughts on your weight? PROBE for participant's feelings on weight change.

## B: 200's Biochemical

Blood tests, anything related to blood- anemia, lead

- (If low hgb) What has your doctor said about your iron?
- (If low hgb) What do you know about anemia?

## C: 300's Clinical

Health/medical conditions, anything related to medical history, medical conditions

- Do you have any concerns in regards to your health?
- Do you have any medical or nutrition conditions that you are currently being treated for such as food allergies, lactose intolerance, weight loss surgery, diabetes or hypertension? 342, 343, 345, 353, 358, 359, others
- What medications are you currently using? 357, others
- Are you experiencing depression? Has a health care provider suggested treatment for depression for you? 361
- Do you use any street drugs? (Asking this when asking about smoking/alcohol use seems to flow nicely) 372, 902

## D: 400's Diet and Nutrition

- What makes you the most happy about your eating? PROBE for eating pattern, milk intake & type, beverages/water
- How is your appetite?
- What vitamins or supplements are you taking? 427A, 427D

- Are you following a special diet or have any diet restrictions? 427B
- What are you doing to improve your health?
- What questions do you have about breastfeeding? 602

## **E: 900's Environmental/Other Factors**

- Are there times when anyone makes you feel unsafe? 901
- Do you feel your family could use support from other programs for housing or food at this time?
- What are some physical activities that you enjoy?

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