

NUTRITION QUESTIONNAIRE FOR INFANTS

The nutrition questionnaire for infants (*Bright Futures in Practice: Nutrition*) provides a useful starting point for identifying areas of nutrition concern and the need for additional screening. When reviewing the responses to the questionnaire, use the interpretive notes (included below) to identify areas of concern and determine follow-up questions or actions. Some of these questions are not applicable for young infants.

1. How would you describe feeding time with your baby? (Check all that apply)

- Always pleasant
- Usually pleasant
- Sometimes pleasant
- Never pleasant

Feeding is crucial for the development of a healthy relationship between parents and their infant. A parent's responsiveness to an infant's cues of hunger and satiation and the close physical contact during feeding facilitate healthy social and emotional development.

2. How do you know when your baby is hungry or has had enough to eat?

Signs of hunger include hand-to-mouth activity, rooting, pre-cry facial grimaces, fussing sounds, and crying. Signs of fullness are turning the head away from the nipple, showing interest in things other than eating, and closing the mouth.

3. What type of milk do you feed your baby? (Check all that apply)

- | | |
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| <input type="checkbox"/> Breastmilk | <input type="checkbox"/> Whole milk |
| <input type="checkbox"/> Iron-fortified infant formula | <input type="checkbox"/> Reduced-fat (2%) milk |
| <input type="checkbox"/> Low-iron infant formula | <input type="checkbox"/> Low-fat (1%) milk |
| <input type="checkbox"/> Goat's milk | <input type="checkbox"/> Fat-free (skim) |
| <input type="checkbox"/> Evaporated milk | |

Infants should be fed breastmilk or iron-fortified infant formula, even in infant cereal. If infants are weaned from breastmilk before 12 months, they should be fed iron-fortified infant formula rather than cow's milk. Cow's milk, goat's milk, and soy milk are not recommended during the first 12 months of life, and reduced-fat (2 percent), low-fat (1 percent), and fat-free (skim) milk are not recommended during the first 2 years of life.

4. What types of things can your baby do? (Check all that apply)

- Open mouth for breast or bottle
- Drink liquids
- Follow objects and sounds with eyes
- Put hand in mouth
- Sit with support
- Bring objects to mouth and bite them
- Hold bottle without support
- Drink from a cup that is held

Developmental readiness for eating different textures of food and the acquisition of self-feeding skills are important in establishing realistic feeding goals for infants.

5. Does your baby eat solid foods? If so, which ones?

By 4 to 6 months, infants need more nutrients than can be supplied by breastmilk or infant formula alone; they should gradually be introduced to solid foods when they are developmentally ready. After the infant has accepted iron-fortified infant cereal, then pureed or soft fruits, vegetables, and meats can be offered. Only one new food should be introduced at a time; parents should wait 7 or more days to see how the infant tolerates the food.

Between 6 and 12 months, infants master chewing, swallowing, and manipulation of finger foods. They begin to use cups and utensils, and while they are experimenting with new tastes and textures, their sensory and perceptual development are stimulated.

6. Does your baby drink juice? If so, how much?

A reasonable amount of juice is 4 to 6 oz per day when the infant is developmentally ready (6 months or older). Juice should be served in a cup, not a bottle. It should be offered in small amounts (more than 8 to 10 oz per day is excessive) because too much juice may reduce the infant's appetite for other foods and increases the risk of loose stools and diarrhea.

7. Does your baby take a bottle to bed at night or carry a bottle around during the day?

Infants permitted to suck on a bottle of any fluid that contains carbohydrates, including juice and milk, for prolonged periods are at risk for developing early childhood caries (baby bottle tooth decay). Infants should not be put to bed at night or at naptime with a bottle or allowed unlimited access to a bottle (i.e., permitting the infant to carry a bottle around whenever he wants).

8. Do you add honey to your baby's bottle or dip your baby's pacifier in honey?

Honey should not be added to food, water, or formula that is fed to infants because it can be a source of spores that cause botulism poisoning in infants. Processed foods containing honey should not be given.

9. What is the source of the water your baby drinks? Sources include public, well, commercially bottled, and home system–processed water.

Starting at 6 months, infants receiving breastmilk or infant formula prepared with water need fluoride supplementation if the water is severely deficient in fluoride. To assess fluoride levels, ask about all sources of water used by the family, including municipal, well, commercially bottled, and home system–processed water. In addition, find out whether any ready-to-feed infant formula used is manufactured with water that has little or no fluoride. Refer an infant who is not getting enough fluoride to a dentist or primary care health professional for follow-up.

10. Do you have a working stove, oven, and refrigerator where you live?

11. Were there any days last month when your family didn't have enough food to eat or enough money to buy food?

If inadequate cooking or food-storage facilities adversely affect a family's nutrient intake, refer the family to social services. If a family does not have adequate resources to obtain food, refer them to food assistance and nutrition programs such as WIC and the Food Stamp Program, or to a community food shelf or pantry. (See Tool K: Federal Food Assistance and Nutrition Programs.)

12. What concerns or questions do you have about feeding your baby?

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