

**E.2b**

**Standing and Holding Weight Form**



## Study of Nutrition and Activity in Child Care Settings (SNACS)

### Standing and Holding Weight Form

For use with children ages 1 to 2 years or children unable to stand unassisted

Child ID Label

Interviewer ID #: |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|

|\_|\_| / |\_|\_| / 2016  
Month Day

REMOVE SHOES, HATS, HEAVY CLOTHING, AND REMOVABLE HAIR PIECES AND EMPTY POCKETS.  
ENSURE THAT THE CHILD IS NOT HOLDING ANYTHING DURING THE MEASUREMENT.

If child is unable to stand on scale unassisted, use the following procedure:

1. Have adult care-giver step on scale.
2. Zero (tare) the scale so that it now reads 0 kg.
3. Place child into the arms of the care giver.
4. Obtain reading

#### 1. Weight

1 <sup>st</sup> measurement	_ _	.	_	Kilograms
2 <sup>nd</sup> measurement	_ _	.	_	Kilograms
3 <sup>rd</sup> measurement	_ _	.	_	Kilograms

IF DIFFERENCE BETWEEN 1<sup>ST</sup> & 2<sup>ND</sup> MEASUREMENT IS GREATER THAN 0.1 KG, TAKE 3<sup>RD</sup> MEASUREMENT.

2. Check all concerns you have regarding the measurement below. If none, check "no concerns".

- |   |   |
|---|---|
| 0 <input type="checkbox"/> No concerns            | 4 <input type="checkbox"/> Difficulty obtaining measurement ( <i>Describe in Comments</i> ) |
| 1 <input type="checkbox"/> Wearing heavy clothing | 5 <input type="checkbox"/> Refusal (no measurement or report)                               |
| 2 <input type="checkbox"/> Wearing shoes          | 6 <input type="checkbox"/> Other ( <i>Specify</i> ) _____                                   |
| 3 <input type="checkbox"/> Wearing cast or brace  |   |

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Adapted from the Student Height and Weight Measurement Form from the School Nutrition and Meal Cost Study and the Height and Weight Measurement Form from the Evaluation off the School Breakfast Pilot Project.