

## Procedures for Weights and Heights by Clinicians

### MEASURING HEIGHT

- Measure height with the patient standing, using a wall mounted measure with headboard.
- Shoes should not be worn.
- Clothing that allows the patient's posture to be seen should be worn.
- The back and head should be straight and the patient's eyes looking forward.
- Feet, knees, buttocks, and shoulder blades should be in contact with the wall.
- Arms should be hanging loosely at the sides, with palms facing the thighs.
- The patient should take a deep breath and stand tall to help straighten the spine.
- The moveable headpiece should be lowered gently until it just touches the crown of the head.
- Read the height.

### MEASURING WEIGHT

- Use the same scale each time.
- Ensure the scale is calibrated accurately at zero before use.
- Weight should be taken after patient has voided and at the same time of day if possible. If the time of weight measure varies, document the time that it was taken in the chart.
- Document food or beverage taken before the weight.
- Lightweight clothing should be worn. Patient may be asked to wear the same clothing for each weight check.
- At the time of height or weight check, note any signs of self-injury.
- The scale should be placed on a hard, flat surface and zeroed before each weight. The patient should stand unassisted, as still as possible, in the middle of the scale, facing away from the scale to obtain a blind weight.
- In order to limit the temptation for the patient to listen and hear the movement of the weights, it is advised to move the large and small weight several times quickly back and forth and read it as quickly as possible when the weights stabilize.
- Occasionally some patients will try to make themselves appear heavier than they really are by strapping weights close to their body, or by carrying heavy objects in their pockets or by drinking excessive amounts of water and avoiding urinating before weighing.
- Do not discuss weight with the patient even if they question. Avoid sharing numbers as well as telling them if it went up or down. Assure them that this will be discussed with their dietitian during their private weekly session. If they continue to question, assure the patient that many factors affect weight and it will be discussed with evaluation of all influences.
- Avoid any comments such as "you are doing well," or "are you eating everything that you are supposed to?" Such comments often cause anxiety and may affect their willingness to accept the next meal.
- Note in the chart or communicate with the dietitian or therapist if patient is uncooperative during the weigh-in.