

<h3>Weight</h3> <p>Assess patient's Body Mass Index.* Patient is overweight if BMI&gt;25.</p> <table border="1"> <thead> <tr> <th>Height</th> <th>Body Weight lbs.</th> <th>Height</th> <th>Body Weight lbs.</th> </tr> </thead> <tbody> <tr> <td>4'10"</td> <td>≥119</td> <td>5'8"</td> <td>≥164</td> </tr> <tr> <td>4'11"</td> <td>≥124</td> <td>5'9"</td> <td>≥169</td> </tr> <tr> <td>5'0"</td> <td>≥128</td> <td>5'10"</td> <td>≥174</td> </tr> <tr> <td>5'1"</td> <td>≥132</td> <td>5'11"</td> <td>≥179</td> </tr> <tr> <td>5'2"</td> <td>≥136</td> <td>6'0"</td> <td>≥184</td> </tr> <tr> <td>5'3"</td> <td>≥141</td> <td>6'1"</td> <td>≥189</td> </tr> <tr> <td>5'4"</td> <td>≥145</td> <td>6'2"</td> <td>≥194</td> </tr> <tr> <td>5'5"</td> <td>≥150</td> <td>6'3"</td> <td>≥200</td> </tr> <tr> <td>5'6"</td> <td>≥155</td> <td>6'4"</td> <td>≥205</td> </tr> <tr> <td>5'7"</td> <td>≥159</td> <td></td> <td></td> </tr> </tbody> </table> <p>* Certain pts may require assessment for underweight and/or unintentional weight loss</p>	Height	Body Weight lbs.	Height	Body Weight lbs.	4'10"	≥119	5'8"	≥164	4'11"	≥124	5'9"	≥169	5'0"	≥128	5'10"	≥174	5'1"	≥132	5'11"	≥179	5'2"	≥136	6'0"	≥184	5'3"	≥141	6'1"	≥189	5'4"	≥145	6'2"	≥194	5'5"	≥150	6'3"	≥200	5'6"	≥155	6'4"	≥205	5'7"	≥159			<h3>Activity</h3> <p>Ask patient about any physical activity in the past week: walking briskly, jogging, gardening, swimming, biking, dancing, golf, etc.</p> <ol style="list-style-type: none"> <li>Does patient do <b>30 minutes of moderate activity on most days/wk.?</b></li> <li>Does pt do "lifestyle" activity like taking the <b>stairs</b> instead of elevators, etc.?</li> <li>Does patient usually watch less than <b>2 hours of TV or videos/day?</b></li> </ol> <p>If pt answers <b>NO</b> to above questions, assess whether pt is willing to increase physical activity.</p>
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<h3>Variety</h3> <p>Is patient eating a variety of foods from important sections of the food pyramid?</p> <p>Grains (6-11 servings) Fruits (2-4 servings) Vegetables (3-5 servings) Protein (2-3 servings) Dairy (2-3 servings)</p> <p>Determine <b>Variety</b> and <b>Excess</b> using one of the following methods:</p> <ul style="list-style-type: none"> <li>Do a quick one-day recall.</li> <li>Ask patient to complete a self-administered eating pattern questionnaire.             <ul style="list-style-type: none"> <li>What does pt think are pros/cons of his/her eating pattern?</li> <li>If pt needs to improve eating habits, assess willingness to make changes.</li> </ul> </li> </ul>	<h3>Excess</h3> <p>Is patient eating too much: Fat? Saturated fat? Calories? Salt? Sugar? Alcohol?</p> <ul style="list-style-type: none"> <li>Ask about serving/portion sizes, preparation methods and added fats like butter, mayonnaise, sour cream, salad dressing, etc.</li> <li>Does pt. eat 4 or more meals from sit-down or take-out restaurants per week?</li> <li>Does pt. indulge on the weekends?</li> </ul>																																												



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<h3>Weight</h3> <p><b>If pt is overweight:</b></p> <ol style="list-style-type: none"> <li><b>State concern</b> for the pt, e.g., "I am concerned that your weight is affecting your health."</li> <li>Give the pt <b>specific advice</b>, i.e.,             <ol style="list-style-type: none"> <li>Make 1 or 2 changes in eating habits to reduce calorie intake as identified by diet assessment.</li> <li>Gradually increase activity/decrease inactivity.</li> <li>Enroll in a weight management program and/or consult a dietitian.</li> </ol> </li> <li>If patient is ready to make behavior changes, jointly <b>set goals</b> for a plan of action and arrange for follow-up.</li> <li><b>Give pt education materials/resources.</b></li> </ol>	<h3>Activity</h3> <p><b>Examples of moderate amounts of physical activity:</b></p> <ul style="list-style-type: none"> <li>Walking 2 miles in 30 minutes</li> <li>Stair walking for 15 minutes</li> <li>Washing and waxing a car for 45-60 minutes</li> <li>Washing windows or floors for 45-60 minutes</li> <li>Gardening for 30-45 minutes</li> <li>Pushing a stroller 1 ½ miles in 30 minutes</li> <li>Raking leaves for 30 minutes</li> <li>Shoveling snow for 15 minutes</li> </ul> <ol style="list-style-type: none"> <li>If patient is ready to increase physical activity, jointly <b>set specific activity goals</b> and arrange for a follow-up</li> <li><b>Give pt education materials/resources.</b></li> </ol>
<h3>Variety</h3> <p><b>What is a serving?</b></p> <p><b>Grains</b> (6-11 servings) 1 slice bread or tortilla, ½ bagel, ½ roll, 1 oz. ready-to-eat cereal, ½ cup rice, pasta, or cooked cereal, 3-4 plain crackers <i>Is patient eating whole grains?</i></p> <p><b>Fruits</b> (2-4 servings) 1 medium fresh fruit, ½ cup chopped or canned fruit, ¾ cup fruit juice</p> <p><b>Vegetables</b> (3-5 servings) 1 cup raw leafy vegetables, ½ cup cooked or chopped raw vegetables, ¾ cup vegetable juice</p> <p><b>Protein</b> (2-3 servings) 2-3 oz. poultry, fish, or lean meat, 1-1 ½ cup cooked dry beans, 1 egg equals 1 oz. meat, 4 oz. or ½ cup tofu</p> <p><b>Dairy</b> (2-3 servings) 1 cup milk or yogurt, 1½ oz. cheese</p> <p><b>See instructions 1-4 under Excess.</b></p>	<h3>Excess</h3> <p><b>How much is too much?</b></p> <p><i>Too much fat, saturated fat, calories</i></p> <ul style="list-style-type: none"> <li>&gt; 6 oz/day of meat</li> <li>Ice cream, high fat dairy products</li> <li>Fried foods</li> <li>High fat snacks and desserts</li> <li>Eating out &gt; 4 meals/wk</li> </ul> <p><i>Too much sugar, calories</i></p> <ul style="list-style-type: none"> <li>High sugar beverages</li> <li>Sugary snacks/desserts</li> </ul> <p><i>Too much salt</i></p> <ul style="list-style-type: none"> <li>Processed meats, canned/frozen meals, salty snacks, added salt</li> </ul> <ol style="list-style-type: none"> <li><b>Discuss pros and cons</b> of pt's eating pattern keeping in mind Variety &amp; Excess.</li> <li>If patient is ready, jointly <b>set specific dietary goals</b> and arrange for follow-up.</li> <li><b>Give pt education materials/resources.</b></li> <li><b>Consider referral</b> to a dietitian for more extensive counseling and support.</li> </ol>

## **WAVE: A quick nutrition pocket guide for primary care**

The objectives of the WAVE tool are to:

1. Provide a quick 4-point tool for primary care providers to assess and discuss weight, physical activity and eating habits with their adult patients.
2. Present a 4-point acronym that is easy to remember and use in provider-patient interactions.
3. Identify weight, nutrition and physical activity issues that need to be addressed during the office visit or by referral to a dietitian.
4. Reinforce the importance of nutrition and physical activity in health promotion and disease prevention.

### **WAVE: Instructions for Use**

The **WAVE** is an acronym that health care providers can use to discuss nutrition and physical activity during patients' routine visits:

W	= Weight
A	= Activity
V	= Variety
E	= Excess

Providers can choose to discuss these issues in any order. The entire protocol should take approximately 5-10 minutes.

### **Assessment**

#### Weight:

1. Determine if the patient is overweight using the Body Mass Index ( $BMI > 25$ ). Visually assess fat distribution associated with higher health risk (abdominal fat) and body tone. If overweight, inquire briefly about weight history and weight-loss attempts.
2. Ask what weight the patient thinks is healthy for him or her.
3. Address underweight or recent unintentional weight loss in patients who are at risk for undernourishment: the elderly, young women (eating disorders), some low-income individuals, and disease-specific conditions affecting food intake.
4. Note responses to be used at completion of WAVE assessment.

#### Activity:

1. Ask if patient has any activity in his/her day. Share examples: brisk walking, jogging, swimming, aerobics, gardening, golf, biking, dancing, team sports, etc. How often?
2. Ask if patient's work includes physical activity.
3. Ask how many hours of television/videos the patient watches per day.
4. Note responses to be used at completion of WAVE assessment.

**Determine Variety and Excess (based on information from a 3-5 minute one-day recall):**

1. Find out what the patient usually eats by doing a quick one day recall: Ask patient to briefly

Describe everything (s)he had to eat or drink yesterday beginning with the first thing eaten

after waking up.

- Probe about portion sizes, preparation methods, and condiments, i.e., butter, margarine, sour cream, and salad dressing, gravies, etc.
2. Ask how many meals per week the patient eats out (or gets take-out). How often are these meals from fast food restaurants, i.e. McDonalds, KFC, etc.?
  3. Compare patient's intake from the one day recall with the recommended servings from the Food Guide Pyramid (meats, dairy, fruits and vegetables, grains).
  4. Look at patient's food choices to see if they appear to be eating too much fat, salt, sugar, calories, etc. Is patient eating red meat, high fat dairy products, fried foods, high fat/sugar snacks and desserts, butter, mayonnaise, cream cheese, salad dressing and other added fats, high sugar beverages, processed meats, salty snacks, canned/frozen meals, fast foods, and/or eating out >4 meals/week?
    - Determine if patient has problems with emotional eating.

**Recommendations/Plan**

**1. “W”—Weight**

**A.** Discuss the patient's BMI level with him/her.

**B.** If patient is at a healthy BMI, give him/her positive feedback, and discuss physical activity and dietary changes below that may help them to maintain their weight.

**C.** If BMI indicates patient is overweight, discuss specific concerns with the patient, e.g., “I am concerned that your weight may be affecting your overall health/diabetes, blood cholesterol, blood pressure, etc.”

- Determine patient's readiness to lose weight. If patient indicates readiness to lose weight, give general guidelines with educational handout and web site resources (see below).
- Encourage patient to set realistic goals for weight loss (5-10% of current weight to begin). Even a 10% weight loss can have huge health benefits.
- Affirm the importance of gradual weight loss (½ to 1 lb./week-- eating 500-1000 kcalories/day less than current intake) and making small changes.
- If patient is willing, discuss methods for weight loss (decrease calorie intake and increase physical activity). Common sources of caloric excess include large portions, sugary beverages, added fats, high fat/sugar desserts and snacks, fried foods, etc. *See suggestions below for activity increase and dietary change.*
- Ask patient to choose an area on which he or she would like to focus.
- Note that exercise and dietary changes may improve the health of overweight individuals even if they do not lose a lot of weight.
- Provide referrals to weight-loss programs and/or a dietitian if patient would like ongoing assistance.

## 2. “A”—Activity

- A. Discuss the patient’s activity/inactivity level with him/her.
- B. If patient is active and does not watch more than 2 hours television or videos a day, give patient positive feedback and encourage them to continue.
- C. If patient does not get enough physical activity and/or watches more than 2 hours television or videos a day, encourage a gradual increase in activity, if patient is ready to increase activity.
  - If the patient is totally sedentary, begin with 5-minute sessions and increase by 5 minutes weekly until patient is at 30 minutes, five days a week.
  - Decrease TV/video watching and/or include exercising during TV watching.
  - Provide handout on calories expended for different activities.

## 3. “V and E”----Variety and Excess in Eating

- A. Discuss patient’s eating habits with them. Is (s)he getting adequate variety according to the Food Pyramid? Could (s)he be eating too much fat, calories, sugar, etc.
  - B. Give positive feedback for patient’s eating habits that meet guidelines.
  - C. What does the patient think the pros and cons of his/her own eating habits are? Is the patient willing to make dietary changes?
  - D. Give suggestions/handouts on specific changes that patient can make to increase variety (i.e. fruits and vegetables, dairy products, etc.) and/or decrease fat, calories, saturated fat, sugar, salt, etc. (see attached lists).
    - Encourage gradual changes and set specific goals for changes the patient is willing to make.
4. If patient is ready to make behavior changes, jointly set goals for a plan of action. Be as specific as possible.
  5. Arrange for follow-up. Refer to a weight management program, dietitian or physical activity specialist if appropriate.
  6. Give helpful web site addresses and handout(s).

**Patients value what their providers say. When you introduce and stress the importance of nutrition and physical activity, patients are more likely to initiate behavior changes.**

The **WAVE** protocol can be reproduced on a laminated 5 X 7 card that can be carried conveniently in lab coat pockets, if desired.