formulas. Parents often interpret GI symptoms such as spitting up and loose stools or fussiness as indications that the infant is allergic to cow's milk and switch the infant to a variety of formulas in an attempt to resolve the problem.

Parents need much reassurance regarding the needs of nonverbal infants with such an array of symptoms. Endless nights of lost sleep and a crying infant may promote feelings of parenting inadequacy and role conflict, thus aggravating the situation. Nurses can reassure parents that many of these symptoms are common and the reasons are often never found, yet the child does achieve appropriate growth and development. Report acute symptoms to the practitioner for further evaluation. Parents need reassurance that the infant will receive complete nutrition from the new formula and will have no ill effects from the absence of cow's milk.

When solid foods are started, parents need guidance in avoiding milk product. Carefully reading all food labels helps avoid exposure to prepared foods containing milk products. Although labeled as nondairy, milk, cream, and butter substitutes may contain cow's milk protein (Kattan, Cocco, and Järvinen, 2011).

## **Failure to Thrive**

Failure to thrive (FTT), or growth failure, is a sign of inadequate growth resulting from an inability to obtain or use calories required for growth. FTT has no universal definition, although one of the more common criteria is a weight (and sometimes height) that falls below the fifth percentile for the child's age. Another definition of FTT includes a weight for age (height) z value of less than -2.0 (a z value is a standard deviation value that represents anthropometric data normalizing for sex and age with greater precision than growth percentile curves [Atalay and McCord, 2012]). A third way to define FTT is a weight curve that crosses more than two percentile lines on a standardized growth chart after previous achievement of a stable growth pattern. Weight for length is reported to be a better indicator of acute undernutrition (Becker, Carney, Corkins, et al, 2015). Growth measurements alone are not used to diagnose children with FTT. Rather, the finding of a pattern of persistent deviation from established growth parameters is cause for concern. In addition to lack of consensus on the precise