



Rhode Island Department of Health WIC Program
Medical Documentation for WIC Nutritional and Approved WIC Foods
Infants 0 – 11 months old



Completion of this form is federally required to ensure that the patient under your care has a medical condition/diagnosis that requires the use of WIC-eligible formula/nutritional and/or changes to their supplemental food package.

A. Patient Information (Complete All)		
Child's Name:	Date of Birth:	
Parent/Guardian Name:		
Medical Diagnosis/Qualifying Conditions(s):		
<p>Please Note:</p> <p>The following non-specific terms are NOT acceptable as qualifying conditions: gas, colic, fussiness, constipation, spitting up, feeding difficulty, non-specific intolerance. Formula requests received with these terms will not be approved.</p> <ul style="list-style-type: none">➤ A trial of Similac Sensitive, Similac Total Comfort, or Similac Advance is required at six months of age or within three months of prescribing Similac Alimentum, Enfamil Nutramigen, Nutricia Pepticate, Gerber Good Start Extensive HA and/or Parent's Choice Hypoallergenic.➤ <u>If a retrial is medical y contraindicated, please state reason:</u>		
B. WIC-Eligible Formula/Nutritional		
Name of formula/nutritional requested:		
Prescribed amount:	oz per day:	
Requested length of issuance (please circle): 1 2 3 4 5 6 Months		
Required Calories/Fluid ounce concentration:		
<input type="checkbox"/> Mix according to standard dilution per label instructions		
<input type="checkbox"/> Mix according to these instructions:		
C. WIC Food Restrictions/Requests Infants older than six months old (Please check all that apply)		D. Complete this section only if a healthcare provider (MD, DO< APRN, or PA) is not deferring to WIC Nutrition professional
<input type="checkbox"/> No food restrictions <input type="checkbox"/> Issue formula only (no foods and increased amount of formula past six months of age due to inability or delay in consuming solids) <input type="checkbox"/> Authorize WIC Nutritionist to determine food restrictions or <input type="checkbox"/> Healthcare provider (MD< DO< APRN, or PA) will determine food restrictions (Complete section D)		<u>Do not issue the WIC foods below:</u> <input type="checkbox"/> Infant cereal <input type="checkbox"/> Baby food fruit and vegetable
E. Healthcare Provider Information		
Provider's Name (please print):		
Signature of healthcare provider:		
Address:		
Phone:	Fax:	Date:

Rhode Island WIC Program Formula Issuance Guide for Infants
Medical Documentation for WIC Nutritional and Approved WIC Foods
Infants 0 – 11 months

Participant Age/Category	Infants 0-3 months	Infants 4-5 months	Infants 6-11 months	Women and Children
Monthly Formula Amount (Reconstituted)	Up to 806 fl oz	Up to 884 fl oz	Up to 806 fl oz	Up to 806 fl oz

Standard Contract Infant Formulas (20 Calories/ounce):

- **Similac Advance**
- **Similac Soy Isomil**
- These formulas will be provided unless there is a diagnosed medical condition that warrants a Rhode Island WIC approved medical formula or nutritional.
- Issuance of these formulas does not require a prescription.
- A trial of at least **two** contract formulas must be completed before prescribing a non-contract formula such as Nutramigen, Alimentum, Nutricia Pepticate, Gerber Good Start Extensive HA and/or Parent's Choice Hypoallergenic.

Contract Infant Formulas (20 calories/ounce, as of October 2020):

- **Similac Sensitive**
 - **Similac Total Comfort**
- These formulas can be provided if there is a tolerance issue with Similac Advance or Soy Isomil

Medical Formula and Nutritionals

A healthcare provider (MD< DO< APRN, or PA) must complete their *RI WIC Medical Documentation for WIC Nutritionals and Approved WIC Foods* (WIC-23-A) in order for Rhode Island WIC to issue medical formula and nutritionals.

Some of the available infant medical formulas include:

- Similac Expert Care Neosure
- Enfamil EnfaCare
- EleCare for Infants
- PurAmino
- Similac Expert Care Alimentum
- Nutramigen with Enflora LGG
- Neocate Infant DHA/ARA
- Pregestimil
- Enfamil AR
- Nutricia Pepticate

*For a complete list of approved medical formulas and nutritionals, please contact the local WIC agency or the Health Information Line at 401-222-5960.

Ready-to-Feed Formula

Ready-to-feed formula can only be issued for the following reasons:

- Unsanitary, contaminated, or restricted water supply;
- Homeless family with no access to refrigeration, clean water, etc.;
- Special formula ordered by a healthcare provider is available only as a ready-to-feed formula;
- For tube feedings or other medical conditions; and/or
- The infant's care provider may have difficulty preparing liquid concentrate or powder formula

Non-Contract Standard Formulas

These formulas are not allowed for any reason:

- Any standard Mead Johnson product (Enfamil, ProSobee, Gentlease, Reguline & AR)
- Any Gerber Good Start product
- Any store brand formula (ex. Parent's Choice)