WIC Medical Documentation Form
North Dakota Department of Health - Division of Nutrition and Physical Activity - WIC Program

To authorize a special WIC-approved formula or WIC-eligible nutritional (medical food), complete this form, then fax to ______________ or have the participant return it to their local WIC office.

Participant’s Name: _________________________________ Date of Birth: ______________
Parent/Guardian’s Name: __________________________________________________________

---

COMPLETE IF PRESCRIBING A SPECIAL FORMULA OR WIC-ELIGIBLE NUTRITIONAL (MEDICAL FOOD)

Not Allowed: Similac Advance, Soy Isomil, Sensitive, Spit-Up; Gerber Good Start Gentle, Soy, Soothe; store brand formulas

WIC Special Formula or WIC-eligible Nutritional (Medical Food) Requested: ________________________________________________________________

Medical Diagnosis: (Not Acceptable Diagnoses - formula intolerance, spitting up, or colic)

- Lactose intolerance
- Inadequate growth/Failure to thrive
- Malabsorption syndromes
- Cerebral palsy
- Other medical diagnosis: ____________________________________________________

Time Needed: _______ months OR □ Until 1 year of age  Prescribed Amount: □ Full Amount Allowed OR _____ oz/day

Instructions for Preparation: ______________________________________________________ Caloric Density: _____ kcal/oz (22, 24, etc.)

WIC Foods: (Check ONE box only.)

- □ Refer to the WIC dietician or nutritionist to determine the WIC foods provided.
- OR □ Issue full amount of age-appropriate WIC foods;
- OR □ Issue no WIC foods; provide formula only;
- OR □ Issue a food package without the WIC foods checked below.

- Infants (6 through 11 months) □ Infant Cereal □ Baby Food Fruits/Vegetables □ Baby Food Meats
- Fresh Fruits/Vegetables
- Children (1 through 4 years old) and Women □ Cheese □ Cereal □ Juice □ Eggs □ Beans/Peas
- Whole Wheat Bread/Brown Rice/Tortillas/Pasta □ Peanut Butter □ Fruits/Vegetables □ Tuna/Salmon □ Milk
- Soy Milk □ Yogurt (women and children 2 years of age and older)

Baby Food Fruits and Vegetables: □ Issue baby food fruits and vegetables instead of fresh fruits and vegetables for children (1 through 4 years old). Only children receiving a formula/WIC-eligible nutritional (medical food) with a qualifying medical diagnosis can get baby food fruits and vegetables.

Whole Milk: □ Issue whole milk for a child over 2 or a woman. Only participants receiving a formula/WIC-eligible nutritional (medical food) with a qualifying medical diagnosis can get whole milk. (WIC regulations specify 1% or fat free skim milk for women and children 2 years of age and older.)

COMPLETE FOR ALL

Signature of Health Care Provider: ____________________________________________ Date: ______________
Health Care Provider’s Name: ________________________________________________ □ MD □ DO □ NP □ PA
Clinic/Address: ____________________________________________________________________________________________

Phone Number: __________________________ Fax Number: __________________________

For more information or help in completing this form: Contact ______________________ at ______________________.

Rev. 12/2017