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**100 Risk Series - Anthropometric Risk**

**Risk**      **Category**      **Criteria**  
 101.01    PG                      Prepregnancy Underweight

- Prepregnancy Body Mass Index (BMI) below 18.5.

Note: Use the MI-WIC System Prenatal Weight Gain Grid

Body Mass Index (BMI) Table for Determining Weight Classification for Women (1)

Height (Inches)	Underweight BMI less than (<) 18.5	Normal Weight BMI 18.5-24.9	Overweight BMI 25.0-29.9	Obese BMI greater than or equal to (≥) 30.0
58"	<89	89-118	119-142	>142
59"	<92	92-123	124-147	>147
60"	<95	95-127	128-152	>152
61"	<98	98-131	132-157	>157
62"	<101	101-135	136-163	>163
63"	<105	105-140	141-168	>168
64"	<108	108-144	145-173	>173
65"	<111	111-149	150-179	>179
66"	<115	115-154	155-185	>185
67"	<118	118-158	159-190	>190
68"	<122	122-163	164-196	>196
69"	<125	125-168	169-202	>202
70"	<129	129-173	174-208	>208
71"	<133	133-178	179-214	>214
72"	<137	137-183	184-220	>220

(1) Adapted from the Clinical Guidelines on the Identification, Evaluation and Treatment of Overweight and Obesity in Adults, National Heart, Lung and Blood Institute (NHLBI), National Institutes of Health (NIH). NIH Publication No. 98-4083.

102.01    BE, BP, NPP Postpartum Underweight

- Non-breastfeeding clients and breastfeeding clients who are less than 6 months postpartum, prepregnancy or current Body Mass Index (BMI) below 18.5.
- Breastfeeding clients 6 months or more postpartum, current Body Mass Index (BMI) below 18.5.

Note: Use the “BMI Table for Determining Weight Classification for Women” found in Risk 101. Also use the MI-WIC System Prenatal Weight Gain Grid.

## 100 Risk Series - Anthropometric Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
103.01+	IBE, IBP, IFF, C1-C4	<p><u>High-Risk Underweight</u></p> <ul style="list-style-type: none"> <li>• Birth to less than 24 months: At or below the 2.3<sup>rd</sup> percentile for weight-for-length.</li> <li>• Children at or above 24 months: At or below the 5<sup>th</sup> percentile Body Mass Index (BMI)-for-age.</li> </ul> <p>Note: If manually plotted, all anthropometric percentiles should be rounded down to the whole number. This does not apply to measurements.</p>
103.02	IBE, IBP, IFF, C1-C4	<p><u>At-Risk of Underweight</u></p> <ul style="list-style-type: none"> <li>• Birth to less than 24 months: Above the 2.3<sup>rd</sup> percentile for weight-for-length and at or below the 5<sup>th</sup> percentile for weight-for-length.</li> <li>• Children at or above 24 months: Above the 5<sup>th</sup> percentile and at or below the 10<sup>th</sup> percentile Body Mass Index (BMI)-for-age.</li> </ul> <p>Note: If manually plotted, all anthropometric percentiles should be rounded down to the whole number. This does not apply to measurements.</p>
111.01	PG	<p><u>Prepregnancy Overweight</u></p> <ul style="list-style-type: none"> <li>• Prepregnancy Body Mass Index (BMI) at or above 25.0.</li> </ul> <p>Note: Use the “BMI Table for Determining Weight Classification for Women” found in Risk 101. Also use the MI-WIC System Prenatal Weight Gain Grid.</p>
112.01	BE, BP, NPP	<p><u>Postpartum Overweight</u></p> <ul style="list-style-type: none"> <li>• Non-Breastfeeding clients and breastfeeding clients who are less than 6 months postpartum, prepregnancy Body Mass Index (BMI) at or above 25.</li> <li>• Breastfeeding clients who are 6 months or more postpartum, current Body Mass Index (BMI) at or above 25.</li> </ul> <p>Note: Use the “BMI Table for Determining Weight Classification for Women” found in Risk Code 101.</p>

## 100 Risk Series - Anthropometric Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
113.01+	C2-C4	<p><u>Obese</u></p> <ul style="list-style-type: none"> <li>At or above the 95<sup>th</sup> percentile Body Mass Index (BMI)-for-age or <math>\geq</math> 95<sup>th</sup> percentile weight-for-stature.</li> </ul>
114.01	IBE, IBP, IFF, C1-C4	<p><u>Overweight or At-Risk of Overweight</u></p> <ul style="list-style-type: none"> <li>Children at or above 24 months of age: at or above the 85<sup>th</sup> and below the 95<sup>th</sup> percentile Body Mass Index (BMI)-for-age.</li> </ul> <p>Have one or more risk factors for being at-risk of becoming overweight. The risk factors are limited to:</p> <ul style="list-style-type: none"> <li>Infants less than 12 months of age, obese mother. Biological mother with BMI at or over 30 at the time of conception or at any point in the first trimester of the pregnancy (BMI must be based on self-reported, by the mother, pre-pregnancy weight and height or on a measured weight and height documented by staff or other health care provider, see Risk Help for Abbreviated Body Mass Index (BMI) Table).</li> <li>Children at or over 12 months of age, obese mother. Biological mother with BMI at or above 30 at the time of certification (BMI must be based on self-reported, by the mother, weight, and height or on weight and height measurements taken by staff at the time of certification. If the mother is pregnant or has had a baby within the past 6 months, use her prepregnancy weight to assess for obesity since her current weight will be influenced by pregnancy related weight gain, see Risk Help for Abbreviated Body Mass Index (BMI) Table).</li> <li>Infants or Children, obese father. Biological father with BMI at or above 30 at the time of certification (BMI must be based on self-reported, by the father, weight, and height or on weight and height measurements taken by staff at the time of certification, see Risk Help for Abbreviated Body Mass Index (BMI) Table).</li> </ul>
115.01	IBE, IBP, IFF, C1	<p><u>High Weight-for-Length</u></p> <ul style="list-style-type: none"> <li>At or above 97.7<sup>th</sup> percentile weight-for-length.</li> </ul>

**100 Risk Series - Anthropometric Risk**

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
121.01	IBE, IBP, IFF, C1-C4	<p><u>Short Stature</u></p> <ul style="list-style-type: none"> <li>• Birth to less than 24 months of age: At or below 2.3<sup>rd</sup> percentile length-for-age.</li> <li>• Children at or above 2 years of age: At or below the 5<sup>th</sup> percentile stature-for-age.</li> </ul>
121.02	IBE, IBP, IFF, C1-C4	<p><u>At Risk for Short Stature</u></p> <ul style="list-style-type: none"> <li>• Birth to less than 24 months of age: Above 2.3<sup>rd</sup> percentile and at or below the 5<sup>th</sup> percentile length-for-age.</li> <li>• Children at or above 2 years of age: Above the 5<sup>th</sup> percentile and at or below the 10<sup>th</sup> percentile stature-for-age.</li> </ul>
131.01+ PG		<p><u>Low Maternal Weight Gain</u></p> <ul style="list-style-type: none"> <li>• Weight gain is below the shaded area for any pregnant client on MI-WIC Prenatal Weight Gain Grid.</li> <li>• A low rate of weight gain, such that in the second and third trimesters, for singleton pregnancies:</li> </ul>

<i>Pregnancy Weight Classification</i>	<i>Weight Gain</i>
Underweight (BMI less than 18.5)	Gaining less than 4 pounds per month
Normal Weight (BMI 18.5 to 24.9)	Gaining less than 3.2 per month
Overweight (BMI 25 to 29.9)	Gaining less than 2 per month
Obese (BMI greater than or equal to 30)	Gaining less than 1.6 per month
Multi-fetal Pregnancies	See Risk Code 335 Multifetal Gestation

## 100 Risk Series - Anthropometric Risk

**Risk**      **Category**      **Criteria**  
 133.01      PG, BE, BP,      High Maternal Weight Gain  
                  NPP

Pregnant Client:

- Weight gain is above the shaded area for any pregnant client on MI-WIC Prenatal Weight Gain Grid.
- A high rate of weight gain, such that in the second and third trimesters, for singleton pregnancies:

<i>Pregnancy Weight Classification</i>	<i>Weight Gain</i>
Underweight (BMI less than 18.5)	Gaining more than 5.2 pounds per month
Normal Weight (BMI 18.5 to 24.9)	Gaining more than 4 per month
Overweight (BMI 25 to 29.9)	Gaining more than 2.8 per month
Obese (BMI greater than or equal to 30)	Gaining more than 2.4 per month
Multi-fetal Pregnancies	See Risk Code 335 Multifetal Gestation

Breastfeeding or non-lactating client (most recent pregnancy only):

- Gestational weight gain exceeding upper limit of the Institute of Medicine's recommended range based on Body Mass Index (BMI) as follows:

<i>Pregnancy Weight Classification</i>	<i>Total Weight Gain</i>
Underweight (BMI less than 18.5)	More than 40 pounds
Normal Weight (BMI 18.5 to 24.9)	More than 35 pounds
Overweight (BMI 25 to 29.9)	More than 25 pounds
Obese (BMI greater than or equal to 30)	More than 20 pounds
Multi-fetal Pregnancies	See Risk Code 335 Multifetal Gestation

134.01+      IBE, IBP,      Failure to Thrive  
                  IFF, C1-C4

- Diagnosed failure to thrive.

Note: Failure to thrive describes an inadequate growth pattern where growth is significantly lower than what is expected for age and sex.

135.01+      IBE, IBP, IFF Slowed/Faltering Growth Pattern

- Birth to less than 2 weeks of age: Excessive weight loss after birth, defined as greater than or equal to 7% birth weight.
- Infants 2 weeks to 6 months of age: Any weight loss, using two separate weight measurements taken at least 8 weeks apart.

## 100 Risk Series - Anthropometric Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
141.01+	IBE, IBP, IFF, C1	<p><u>Low Birth Weight and Currently Under 24 Months of Age</u></p> <ul style="list-style-type: none"> <li>• Birth weight at or less than (<math>\leq</math>) 5 pounds 8 ounces (2500 grams).</li> </ul> <p><u>Very Low Birth Weight (VLBW) and Currently Under 24 Months of Age</u></p> <ul style="list-style-type: none"> <li>• Birth weight at or less than (<math>\leq</math>) 3 pounds 5 ounces (1500 grams).</li> </ul>
142.01+	IBE, IBP, IFF, C1	<p><u>Preterm Delivery</u></p> <ul style="list-style-type: none"> <li>• Infant or child born less than 37 weeks gestation (infants and children less than 24 months old).</li> </ul>
142.02	IBE, IBP, IFF, C1	<p><u>Early Term Delivery</u></p> <ul style="list-style-type: none"> <li>• Infant or child born greater than or equal to 37 weeks gestation but less than 39 weeks gestation (infants and children less than 24 months old).</li> </ul>
151.01+	IBE, IBP, IFF, C1	<p><u>Small for Gestational Age and Currently Under 24 Months of Age:</u></p> <ul style="list-style-type: none"> <li>• Diagnosed small for gestational age (SGA).</li> </ul>
152.01	IBE, IBP, IFF, C1	<p><u>Low Head Circumference</u></p> <ul style="list-style-type: none"> <li>• Birth to less than 24 months: At or below the 2.3<sup>rd</sup> percentile head circumference-for-age.</li> </ul>
153.01+	IBE, IBP, IFF	<p><u>Large for Gestational Age</u></p> <ul style="list-style-type: none"> <li>• Birth weight at or above (<math>\geq</math>) 9 pounds (4000 grams).</li> <li>• Diagnosed large for gestational age (LGA).</li> </ul>

**200 Risk Series - Biochemical Risk**

**Risk      Category      Criteria**

201.01    PG, BE, BP, Low Hematocrit (Hct.)/ Low Hemoglobin (Hgb.)  
           NPP, IBE,  
           IBP, IFF,  
           C1-C4

- ***At the time the blood test was taken, any value less than (<) the blood values listed in the following chart.***

Note: For any client who smokes the blood value criterion must be based on the number of cigarettes smoked and the trimester of pregnancy (if appropriate). One pack of cigarettes equals 20 cigarettes.

Status	Non-smoking		Any smoking up to 19 cigarettes/day		Smoking 20 to 39 cigarettes/day		Smoking 40 or more cigarettes/day	
	Hct. %	Hgb. gm.	Hct. %	Hgb. gm.	Hct. %	Hgb. gm.	Hct. %	Hgb. gm.
BN Postpartum- at/over age 15	<36.0	<12.0	<37.0	<12.3	<38.0	<12.5	<38.0	<12.7
BN Postpartum- under age 15	<36.0	<11.8	<37.0	<12.1	<38.0	<12.3	<38.0	<12.5
P First trimester (0 through 13 weeks)	<33.0	<11.0	<34.0	<11.3	<35.0	<11.5	<35.0	<11.7
P Second trimester (14 through 26 weeks)	<32.0	<10.5	<33.0	<10.8	<34.0	<11.0	<34.0	<11.2
P Third trimester (27 weeks or more)	<33.0	<11.0	<34.0	<11.3	<35.0	<11.5	<35.0	<11.7
I 6 through 11 months	<33.0	<11.0						
C 12 through 23 months	<33.0	<11.0						
C 24 through 59 months	<33.0	<11.1						

211.01+    PG, BE, BP, Elevated Blood Lead Levels

NPP, IBE,  
 IBP, IFF,  
 C1-C4

- PG, BE, BP, NPP, IBE, IBP, and IFF: Venous blood lead level at or above ( $\geq$ ) 5 micrograms per deciliter within the past 12 months.
- C1-C4: Venous blood lead level at or above ( $\geq$ ) 3.5 micrograms per deciliter within the past 12 months.



### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
301.01+	PG	<p><u>Hyperemesis Gravidarum</u></p> <ul style="list-style-type: none"> <li>Diagnosed severe nausea and vomiting to the extent that a pregnant client becomes dehydrated and acidotic.</li> </ul>
302.01+	PG	<p><u>Gestational Diabetes</u></p> <ul style="list-style-type: none"> <li>Diagnosed gestational diabetes.</li> </ul>
303.01	PG, BE, BP, NPP	<p><u>History of Diagnosed Gestational Diabetes</u></p> <ul style="list-style-type: none"> <li>Any history of diagnosed gestational diabetes in a previous pregnancy.</li> </ul>
304.01	PG, BE, BP, NPP	<p><u>History of Preeclampsia</u></p> <ul style="list-style-type: none"> <li>Any history of diagnosed preeclampsia <ul style="list-style-type: none"> <li>Preeclampsia is defined as hypertension with onset during pregnancy, usually after 20 weeks gestation, and typically with proteinuria.</li> <li>Postpartum preeclampsia can also occur, regardless of whether it was present during pregnancy. It is usually diagnosed within 48 hours of delivery but can occur up to 6 weeks postpartum.</li> </ul> </li> </ul>
310.01+	PG	<p><u>History of Preterm Delivery</u></p> <ul style="list-style-type: none"> <li>Any history of birth of an infant less than 37 weeks gestation.</li> </ul>
310.02	PG	<p><u>History of Early Term Delivery</u></p> <ul style="list-style-type: none"> <li>Any history of birth of an infant greater than or equal to 37 weeks gestation but less than 39 weeks gestation.</li> </ul>
311.01	BE, BP, NPP	<p><u>History of Preterm Delivery</u></p> <ul style="list-style-type: none"> <li>Birth of an infant less than 37 weeks gestation – most recent pregnancy.</li> </ul>

### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
311.02	BE, BP, NPP	<p><u>History of Early Term Delivery</u></p> <ul style="list-style-type: none"> <li>• Birth of an infant greater than or equal to 37 weeks gestation but less than 39 weeks gestation – most recent pregnancy.</li> </ul>
312.01+	PG	<p><u>History of Low Birth Weight</u></p> <ul style="list-style-type: none"> <li>• Any history of low birth weight infant at or less than (<math>\leq</math>) 5 pounds 8 ounces (2500 grams).</li> </ul>
313.01	BE, BP, NPP	<p><u>History of Low Birth Weight</u></p> <ul style="list-style-type: none"> <li>• Low birth weight infant at or less than (<math>\leq</math>) 5 pounds 8 ounces (2500 grams) – most recent pregnancy.</li> </ul>
321.01	PG, BE, BP, NPP	<p><u>History of Spontaneous Abortion, Fetal or Neonatal Loss</u></p> <ul style="list-style-type: none"> <li>• Diagnosed <u>spontaneous abortion (miscarriage)</u> is the spontaneous termination of a gestation at less than 20 weeks gestation or less than 500 grams.</li> <li>• Diagnosed <u>fetal death</u> is the spontaneous termination of a gestation at greater than or equal to 20 weeks.</li> <li>• Diagnosed <u>neonatal death</u> is a death of an infant within 0 to 28 days of life. <ul style="list-style-type: none"> <li>○ Pregnant client: any history of fetal or neonatal death or 2 or more spontaneous abortions.</li> <li>○ Breastfeeding client: most recent pregnancy in which there was a multifetal gestation with one or more fetal or neonatal deaths but with one or more infants still living.</li> <li>○ Non-lactating client: most recent pregnancy.</li> </ul> </li> </ul>
331.01	PG, BE, BP, NPP	<p><u>Pregnancy at a Young Age</u></p> <ul style="list-style-type: none"> <li>• Conception at or less than (<math>\leq</math>) 20 years of age. <ul style="list-style-type: none"> <li>○ Pregnant client: current pregnancy.</li> <li>○ Breastfeeding client: most recent pregnancy.</li> <li>○ Non-lactating client: most recent pregnancy.</li> </ul> </li> </ul>



### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
337.01	PG, BE, BP, NPP	<p><u>History of Birth of a Large for Gestational Age Infant</u></p> <ul style="list-style-type: none"> <li>• History of giving birth to an infant weighing greater than or equal to (<math>\geq</math>) 9 pounds (4000 grams) or diagnosed large for gestational age infant.</li> </ul>
338.01	PG	<p><u>Pregnant Client Currently Breastfeeding</u></p> <ul style="list-style-type: none"> <li>• Pregnant client who is currently breastfeeding.</li> </ul> <p>Note: Generally, it is considered safe for most women to continue breastfeeding while pregnant and can be sustained for as long as mutually desired by the mother and child. The assignment of this risk is not intended to discourage women from continuing breastfeeding during pregnancy, but rather to highlight the need to review the mother's medical history and diet along with her breastfeeding goals.</p>
339.01+	PG, BE, BP, NPP	<p><u>History of Birth with Nutrition-Related Congenital or Birth Defect</u></p> <ul style="list-style-type: none"> <li>• Client who has given birth to an infant diagnosed with a congenital or birth defect associated with inappropriate nutritional intake, such as inadequate zinc (low birth weight), excessive vitamin A (cleft palate or lip), or inadequate folic acid (neural tube defect). <ul style="list-style-type: none"> <li>○ Pregnant client: any history of birth with nutrition-related congenital or birth defect.</li> <li>○ Breastfeeding client: most recent pregnancy.</li> <li>○ Non-lactating client: most recent pregnancy.</li> </ul> </li> </ul>
341.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Nutrient Deficiency or Disease</u></p> <ul style="list-style-type: none"> <li>• Diagnosed nutrient deficiencies or a disease caused by insufficient dietary intake of macro and micronutrients, treated or untreated.</li> <li>• Diseases include, but are not limited to, protein energy malnutrition, iron deficiency, scurvy, rickets, beri beri, hypocalcemia, osteomalacia, vitamin K deficiency, pellagra, cheilosis, Menkes disease, and/or xerophthalmia.</li> </ul>

### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
342+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Gastrointestinal Disorders</u></p> <ul style="list-style-type: none"> <li>• 342.00+ Diagnosed disease(s) or condition(s) that interferes with intake, digestion or absorption of nutrients or that may increase nutrient losses.</li> </ul> <p>Conditions include, but are not limited to:</p> <ul style="list-style-type: none"> <li>○ 342.01+ Gallbladder disease</li> <li>○ 342.02+ Liver disease</li> <li>○ 342.03+ Crohn's disease</li> <li>○ 342.04+ Inflammatory bowel disease</li> <li>○ 342.05+ Stomach (peptic) or intestinal ulcers, GI fistula</li> <li>○ 342.06+ Small bowel syndrome and/or enterocolitis</li> <li>○ 342.07+ Pancreatitis</li> <li>○ 342.08+ Ulcerative colitis</li> <li>○ 342.09+ Gastroesophageal reflux (GER)/Esophagitis</li> <li>○ 342.10+ Post-bariatric surgery</li> </ul>
343.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Diabetes Mellitus</u></p> <ul style="list-style-type: none"> <li>• Diagnosed diabetes mellitus.</li> </ul>
344+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Thyroid Disorders</u></p> <ul style="list-style-type: none"> <li>• 344.01+ Diagnosed hypothyroidism, including congenital conditions <ul style="list-style-type: none"> <li>○ Diagnosed postpartum thyroiditis in 1<sup>st</sup> year following delivery.</li> </ul> </li> <li>• 344.02+ Diagnosed hyperthyroidism, including congenital conditions.</li> </ul>
345+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Hypertension and Prehypertension</u></p> <ul style="list-style-type: none"> <li>• 345.01+ <u>Pregnancy-induced Hypertension</u> <ul style="list-style-type: none"> <li>○ Diagnosed hypertension during pregnancy (i.e., preeclampsia, eclampsia, and gestational hypertension).</li> </ul> </li> <li>• 345.02+ <u>Hypertension, Chronic &amp; Prehypertension</u> <ul style="list-style-type: none"> <li>○ Diagnosed hypertension or prehypertension, including chronic hypertension during pregnancy.</li> </ul> </li> </ul>

### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
346.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Renal Disease</u></p> <ul style="list-style-type: none"> <li>• Diagnosed renal disease including pyelonephritis and persistent proteinuria.</li> </ul> <p>Note: EXCLUDES urinary tract infections involving the bladder.</p>
347.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Cancer</u></p> <ul style="list-style-type: none"> <li>• Diagnosed cancer. The current condition, or treatment for the condition, must be severe enough to affect nutritional status.</li> </ul>
348+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Central Nervous System Disorders</u></p> <ul style="list-style-type: none"> <li>• Diagnosed condition which affects energy requirements and may affect the individual's ability to feed self that alters nutritional status metabolically, mechanically, or both. Includes, but not limited to: <ul style="list-style-type: none"> <li>○ 348.01+ Epilepsy</li> <li>○ 348.02+ Multiple sclerosis (MS)</li> <li>○ 348.03+ Neural tube defects (NTD), such as: <ul style="list-style-type: none"> <li>▪ Spina bifida</li> <li>▪ Myelomeningocele</li> </ul> </li> <li>○ 348.04+ Parkinson's disease</li> <li>○ 348.05+ Cerebral palsy</li> </ul> </li> </ul>
349+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Genetic and Congenital Disorders</u></p> <ul style="list-style-type: none"> <li>• Diagnosed genetic and congenital disorders that cause physical or metabolic abnormality. Current condition must alter nutrition status metabolically, mechanically, or both. Includes, but not limited to: <ul style="list-style-type: none"> <li>○ 349.01+ Muscular dystrophy (MD)</li> <li>○ 349.02+ Cleft lip or palate</li> <li>○ 349.03+ GI abnormalities</li> <li>○ 349.04+ Thalassemia major</li> <li>○ 349.06+ Sickle cell anemia (<u>not</u> sickle cell trait)</li> <li>○ 349.07+ Down syndrome</li> </ul> </li> </ul>

### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>																
351.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Inborn Errors of Metabolism</u></p> <ul style="list-style-type: none"> <li>• Diagnosed Inborn Errors of Metabolism (IEM) <ul style="list-style-type: none"> <li>○ Generally refer to gene mutations or gene deletions that alter metabolism of proteins, carbohydrates, or fats in the body. IEMs are rare and include, but are not limited to: <table border="0" style="width: 100%;"> <tr> <td>▪ Fructoaldolase deficiency</td> <td>▪ Hypermethioninemia</td> </tr> <tr> <td>▪ Galactokinase deficiency</td> <td>▪ Maple syrup urine disease</td> </tr> <tr> <td>▪ Galactosemia</td> <td>▪ Medium-chain acyl-CoA dehydrogenase (MCAD)</td> </tr> <tr> <td>▪ Glutaric aciduria</td> <td>▪ Methylmalonic acidemia</td> </tr> <tr> <td>▪ Glycogen storage disease</td> <td>▪ Phenylketonuria (PKU)</td> </tr> <tr> <td>▪ Histidinemia</td> <td>▪ Propionic acidemia</td> </tr> <tr> <td>▪ Homocystinuria</td> <td>▪ Tyrosinemia</td> </tr> <tr> <td>▪ Hyperlipoproteinemia</td> <td>▪ Urea cycle disorders</td> </tr> </table> </li> </ul> </li> </ul> <p style="text-align: center;">For more information, visit <a href="https://rarediseases.info.nih.gov/">https://rarediseases.info.nih.gov/</a></p>	▪ Fructoaldolase deficiency	▪ Hypermethioninemia	▪ Galactokinase deficiency	▪ Maple syrup urine disease	▪ Galactosemia	▪ Medium-chain acyl-CoA dehydrogenase (MCAD)	▪ Glutaric aciduria	▪ Methylmalonic acidemia	▪ Glycogen storage disease	▪ Phenylketonuria (PKU)	▪ Histidinemia	▪ Propionic acidemia	▪ Homocystinuria	▪ Tyrosinemia	▪ Hyperlipoproteinemia	▪ Urea cycle disorders
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▪ Histidinemia	▪ Propionic acidemia																	
▪ Homocystinuria	▪ Tyrosinemia																	
▪ Hyperlipoproteinemia	▪ Urea cycle disorders																	

352a+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Infectious Diseases - Acute</u></p> <ul style="list-style-type: none"> <li>• Diagnosed infectious disease (must be present now or within the past 6 months), characterized by a single or repeated episode of relatively rapid onset and short duration. Includes, but not limited to: <ul style="list-style-type: none"> <li>○ 352.01+ Meningitis</li> <li>○ 352.02+ Parasitic infections</li> <li>○ 352.09+ Hepatitis A, Hepatitis E</li> <li>○ 352.06+ Bronchitis (3 episodes in last 6 months)</li> <li>○ 352.08+ Pneumonia</li> <li>○ 352.11+ Listeriosis</li> </ul> </li> </ul>
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Note: EXCLUDES frequent colds, ear infections.

### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
352b+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Infectious Diseases - Chronic</u></p> <ul style="list-style-type: none"> <li>• Diagnosed infectious disease, likely lasting a lifetime and require long-term management of symptoms. Includes, but not limited to: <ul style="list-style-type: none"> <li>○ 352.04+ HIV (human immunodeficiency virus infection)</li> <li>○ 352.05+ AIDS (acquired immunodeficiency syndrome)</li> <li>○ 352.07+ Tuberculosis</li> <li>○ 352.10+ Hepatitis B, Hepatitis C, Hepatitis D</li> </ul> </li> </ul> <p>Note: EXCLUDES frequent colds, ear infections.</p>
353.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Food Allergies</u></p> <ul style="list-style-type: none"> <li>• Diagnosed adverse immune response to a food or a hypersensitivity that causes adverse immunologic reaction.</li> </ul> <p>Note: This applies when the diagnosed food intolerances or allergies require major dietary modification to provide optimal nutrition.</p>
354.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Celiac Disease</u></p> <ul style="list-style-type: none"> <li>• Diagnosed celiac disease (also known as celiac sprue, gluten enteropathy, non-tropical sprue).</li> </ul>
355.01	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Lactose Intolerance</u></p> <ul style="list-style-type: none"> <li>• Diagnosed lactose intolerance <ul style="list-style-type: none"> <li>○ Lactose intolerance is the syndrome of one or more of the following: diarrhea, abdominal pain, flatulence, and/or bloating, that occurs after lactose ingestion.</li> </ul> </li> </ul>
356.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Hypoglycemia</u></p> <ul style="list-style-type: none"> <li>• Diagnosed hypoglycemia.</li> </ul>



### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
357.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Drug and Nutrient Interaction</u></p> <ul style="list-style-type: none"> <li>• Use of prescription or over-the-counter drugs or medications that have been shown to interfere with nutrient intake, absorption, distribution, metabolism, or excretion to an extent that nutritional status is compromised.</li> <li>• Nutrition-related side effects of drugs may include, but are not limited to: <ul style="list-style-type: none"> <li>○ Changes to appetite</li> <li>○ Changes to taste and smell</li> <li>○ A dry or sore mouth</li> <li>○ Epigastric distress, nausea, vomiting, diarrhea, and/or constipation</li> </ul> </li> </ul>
358+	PG, BE, BP, NPP	<p><u>Eating Disorders</u></p> <ul style="list-style-type: none"> <li>• 358.01+ Bulimia</li> <li>• 358.02+ Anorexia</li> <li>• Diagnosed eating disorders or evidence of such disorders. <ul style="list-style-type: none"> <li>○ Symptoms are manifested by abnormal eating patterns and including, but not limited to: <ul style="list-style-type: none"> <li>▪ Self-induced vomiting.</li> <li>▪ Purgative abuse.</li> <li>▪ Alternating periods of starvation.</li> <li>▪ Use of drugs such as appetite suppressants, thyroid preparations, or diuretics.</li> <li>▪ Self-induced marked weight loss.</li> </ul> </li> </ul> </li> </ul>
359.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Recent Major Surgery, Trauma, Burns</u></p> <ul style="list-style-type: none"> <li>• Major surgery (including C-sections), trauma or burns severe enough to compromise nutritional status.</li> <li>• Any occurrences: <ul style="list-style-type: none"> <li>○ Within the past two (2) months may be self-reported.</li> <li>○ More than two (2) months previous must have the continued need for nutritional support diagnosed by a physician or a health care provider working under the orders of a physician.</li> </ul> </li> </ul>

### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
360+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Other Medical Conditions</u></p> <ul style="list-style-type: none"> <li>• Diagnosed diseases or conditions with nutritional implications that are not included in any of the other medical conditions.</li> <li>• Current condition or treatment for the condition must be severe enough to affect nutritional status. Includes, but not limited to: <ul style="list-style-type: none"> <li>○ 360.01+ Asthma*, persistent (moderate or severe) requiring daily medication</li> <li>○ 360.02+ Cystic fibrosis</li> <li>○ 360.03+ Heart disease</li> <li>○ 360.04+ Cardiorespiratory diseases</li> <li>○ 360.05+ Lupus erythematosus</li> <li>○ 360.06+ Juvenile rheumatoid arthritis (JRA)</li> <li>○ 360.07+ Other medical conditions</li> </ul> </li> </ul> <p>*This criterion usually is not applicable to infants; asthma-like symptoms are usually diagnosed as bronchiolitis with wheezing which is covered under risk code #352, Infectious Disease.</p>
361.01+	PG, BE, BP, NPP	<p><u>Depression</u></p> <ul style="list-style-type: none"> <li>• Diagnosed clinical depression, including postpartum depression.</li> </ul>
362.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Developmental Delays, Sensory or Motor Delays Interfering with Ability to Eat</u></p> <ul style="list-style-type: none"> <li>• Developmental, sensory, or motor disabilities that restrict the ability to chew or swallow food or require tube feeding to meet nutritional needs. Includes, but not limited to: <ul style="list-style-type: none"> <li>○ Birth injury.</li> <li>○ Brain damage.</li> <li>○ Feeding problems due to a developmental disability such as pervasive development disorder (PDD) which includes autism.</li> <li>○ Head trauma.</li> <li>○ Minimal brain function.</li> <li>○ Other disabilities.</li> </ul> </li> </ul>

**300 Risk Series - Clinical/Health/Medical Risk****Risk      Category      Criteria**363.01+    BE, BP, NPP    Pre-Diabetes

- Diagnosed pre-diabetes.

371.01    PG, BE, BP,    Nicotine and Tobacco Use  
NPP

- Any use of products that contain nicotine and/or tobacco to include but not limited to cigarettes, pipes, cigars, electronic nicotine delivery systems (e.g., e-cigarettes, vaping devices), hookahs, smokeless tobacco (e.g., chewing tobacco, snuff, dissolvables), or nicotine replacement therapies (e.g., gums, patches).

372.01    PG, BE, BP,    Alcohol and Substance Use  
NPP

- Pregnant client:
  - Any alcohol use.
  - Any illegal substance use and/or abuse of prescription medications.
  - Any marijuana use in any form.
- Breastfeeding and non-lactating client:
  - Alcohol Use
  - High Risk Drinking: Routine consumption of 8 or more drinks per week or 4 or more drinks on any day.
  - Binge Drinking: Routine consumption of 4 or more drinks within 2 hours.
  - Any illegal substance use and/or abuse of prescription medications.
  - Any marijuana use in any form (breastfeeding women only).

Note: A serving, or standard sized drink, is:

- 12 fluid ounces of beer or wine cooler.
- 5 ounces of wine.
- 1 ½ fluid ounces of hard liquor, vermouth, cordials, or liqueurs.

### 300 Risk Series - Clinical/Health/Medical Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
381.01	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Dental Problems</u></p> <ul style="list-style-type: none"> <li>• Diagnosed dental problem. Includes, but not limited to:               <ul style="list-style-type: none"> <li>○ IBE, IBP, IFF, C1-C4 only                   <ul style="list-style-type: none"> <li>▪ Presence of nursing or baby bottle tooth decay.</li> <li>▪ Smooth surface decay of maxillary anterior teeth and primary molars.</li> </ul> </li> <li>○ PG, BE, BP, NPP, C1-C4                   <ul style="list-style-type: none"> <li>▪ Tooth decay.</li> <li>▪ Periodontal disease.</li> <li>▪ Tooth loss and/or ineffectively replaced teeth which impair ability to ingest food in adequate quantity or quality.</li> </ul> </li> <li>○ PG only                   <ul style="list-style-type: none"> <li>▪ Gingivitis of pregnancy.</li> </ul> </li> </ul> </li> </ul>
382.01+	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Fetal Alcohol Spectrum Disorders</u></p> <ul style="list-style-type: none"> <li>• Diagnosed fetal alcohol spectrum disorders (FASDs). FASDs are a group of conditions that can occur in a person whose mother consumed alcohol during pregnancy. FASDs is an overarching phrase that encompasses a range of possible diagnoses, including:               <ul style="list-style-type: none"> <li>○ Fetal Alcohol Syndrome (FAS).</li> <li>○ Partial Fetal Alcohol Syndrome (pFAS).</li> <li>○ Alcohol-Related Birth Defects (ARBD).</li> <li>○ Alcohol-Related Neurodevelopmental Disorder (ARND).</li> <li>○ Neurobehavioral Disorder associated with Prenatal Alcohol Exposure (ND-PAE).</li> </ul> </li> </ul>
383.01+	IBE, IBP, IFF	<p><u>Neonatal Abstinence Syndrome</u></p> <ul style="list-style-type: none"> <li>• Diagnosed neonatal abstinence syndrome.</li> </ul>

## 400 Risk Series - Dietary Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
401.01	PG, BE, BP, NPP, C2-C4	<p><u>Failure to Meet <i>Dietary Guidelines for Americans</i></u></p> <ul style="list-style-type: none"> <li>• Women and children two years of age and older who meet WIC eligibility requirements may be presumed to be at nutrition risk for failure to meet Dietary Guidelines for Americans (DGAs). Failure to meet DGAs is defined as consuming fewer than the recommended number of servings from one or more of the basic food groups (grains, fruits, vegetables, milk products, and meat or beans).</li> <li>• This criterion may only be assigned after a complete assessment has been performed to assess for risk and no other risk is identified.</li> </ul>
411.01	IBE, IBP, IFF	<p><u>Inappropriate Infant Feeding Practices</u></p> <ul style="list-style-type: none"> <li>• Infant not fed human milk or iron-fortified formula. <ul style="list-style-type: none"> <li>○ During first 12 months of life, routinely using a substitute for human milk or for FDA approved iron-fortified formula as primary nutrient source. Examples: <ul style="list-style-type: none"> <li>▪ Low iron formula w/o iron supplement before 6 months.</li> <li>▪ Feeding cow's milk, goat's milk, sheep's milk, imitation milks, substitute milks or homemade concoctions in place of human milk or FDA-approved infant formula during the first year of life.</li> </ul> </li> </ul> </li> <li>• No Dependable Source of Iron for Infants Older than 6 Months of Age. <ul style="list-style-type: none"> <li>○ No routine age-appropriate iron source after 6 months of age, such as: <ul style="list-style-type: none"> <li>▪ Iron-fortified cereals.</li> <li>▪ Iron-fortified infant formula (at least 10 mg of iron per liter of formula prepared at standard dilution).</li> <li>▪ Infant meats.</li> <li>▪ Oral iron supplements.</li> </ul> </li> </ul> </li> </ul>
411.02	IBE, IBP, IFF	<p><u>Routinely Using Nursing Bottles or Cups Improperly</u></p> <ul style="list-style-type: none"> <li>• Using a bottle to feed fruit juice.</li> <li>• Feeding any sugar-containing fluids, such as soda/soft drinks, gelatin water, corn syrup solutions, and sweetened tea.</li> <li>• Allowing the infant to fall asleep or be put to bed with a bottle at naps or bedtime.</li> <li>• Allowing the infant to use the bottle without restriction (e.g., walking around with a bottle) or as a pacifier.</li> <li>• Propping the bottle when feeding.</li> <li>• Allowing an infant to carry around and drink throughout the day from a covered or training cup.</li> <li>• Adding any food (cereal or other solid foods) to the infant's bottle.</li> </ul>

**400 Risk Series - Dietary Risk**

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
411.03	IBE, IBP, IFF	<u>Inappropriate Complementary Foods (infants)</u> <ul style="list-style-type: none"><li>• Routinely offering complementary foods or other substances that are inappropriate foods/feeding schedule (inappropriate type or timing of food substances). Examples:<ul style="list-style-type: none"><li>○ Adding sweet agents such as sugar, honey, or syrups to any beverage (including water) or prepared food, or used on a pacifier.</li><li>○ Introducing any food other than human milk or iron-fortified infant formula before 6 months of age.</li></ul></li></ul> <p>Note: Complementary foods are any foods or beverages other than human milk or infant formula.</p>
411.04	IBE, IBP, IFF	<u>Routinely Using Inappropriate Feeding Practices and Early Introduction of Solid Food</u> <ul style="list-style-type: none"><li>• Inability to recognize, insensitivity to, or disregarding the infant's cues for hunger and satiety (e.g., forcing an infant to eat a certain type and/or amount of food or beverage or ignoring an infant's hunger cues).</li><li>• Not supporting an infant's need for growing independence with self-feeding (e.g., solely spoon-feeding an infant who is able and ready to finger-feed and/or try self-feeding with appropriate utensils).</li><li>• Feeding an infant food with inappropriate textures based on his/her developmental stage (e.g., feeding primarily pureed or liquid foods when the infant is ready and capable of eating mashed, chopped, or appropriate finger foods).</li><li>• Routinely using feeding practices that disregard developmental needs of infant such as no solids before 7 months, no spoon, no finger feeding by 7-9 months.</li><li>• Feeding foods of inappropriate consistency, size, or shape that put the infant at risk of choking.</li></ul>

## 400 Risk Series - Dietary Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
411.05	IBE, IBP, IFF	<p><u>Feeding Potentially Unsafe Foods (infants)</u></p> <ul style="list-style-type: none"> <li>• Feeding foods to an infant that could be contaminated with harmful microorganisms. Examples of potentially harmful foods for an infant are:               <ul style="list-style-type: none"> <li>○ Unpasteurized fruit or vegetable juice.</li> <li>○ Unpasteurized dairy products or soft cheeses such as feta, Brie, Camembert, blue-veined, and Mexican-style cheese.</li> <li>○ Honey (added to liquids or solid foods, used in cooking, as part of processed foods, on a pacifier, etc.).</li> <li>○ Raw or undercooked meat, fish, poultry, or eggs.</li> <li>○ Raw vegetable sprouts (alfalfa, clover, bean, and radish).</li> <li>○ Donor human milk (acquired from individuals or the Internet).</li> <li>○ Deli meats, hot dogs, and processed meats (avoid unless heated until steaming hot).</li> </ul> </li> </ul>
411.06	IBE, IBP, IFF	<p><u>Improper Dilution of Formula</u></p> <ul style="list-style-type: none"> <li>• Routine over or under dilution of formula (failure to follow manufacturers dilution instructions or specific instructions accompanying a prescription).</li> </ul>
411.07	IBE	<p><u>Limiting Frequency of Breastfeeding when Human Milk is Sole Source of Nutrients</u></p> <ul style="list-style-type: none"> <li>• Examples of inappropriate frequency of breastfeeding:               <ul style="list-style-type: none"> <li>○ Scheduled feedings instead of demand feedings.</li> <li>○ Less than 8 feedings in 24 hours if less than 2 months of age.</li> </ul> </li> </ul>
411.08+	IBE, IBP, IFF	<p><u>Highly Restrictive Diets</u></p> <ul style="list-style-type: none"> <li>• Severely limited intake of important food sources of nutrients.</li> <li>• High risk eating pattern.</li> <li>• Inappropriate, infrequent, or highly restrictive feeding schedules (such as infrequent breastfeeding, infant held to rigid feeding schedule, withholding food, overfeeding) or forcing an infant to eat a certain type and/or amount of food.</li> </ul> <p>Examples:</p> <ul style="list-style-type: none"> <li>• Strict vegan diet</li> <li>• Macrobiotic diet</li> <li>• Other diets very low in calories and/or essential nutrients</li> </ul>

**400 Risk Series - Dietary Risk**

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
411.09	IBE, IBP, IFF	<p><u>Routinely Using Inappropriate Sanitation in Preparation, Handling, and Storage of Expressed Human Milk or Formula</u></p> <ul style="list-style-type: none"><li>• Limited or no access to safe water supply with no stove for sterilizing or refrigerator/freezer for storage.</li><li>• Failure to handle or store expressed human milk properly including:<ul style="list-style-type: none"><li>○ Thawing/heating in a microwave.</li><li>○ Refreezing.</li><li>○ Adding freshly expressed unrefrigerated human milk to frozen human milk.</li><li>○ Adding freshly pumped chilled human milk to frozen human milk in an amount that is greater than the amount of frozen human milk.</li><li>○ Feeding thawed human milk more than 24 hours after it was thawed.</li><li>○ Saving human milk from a used bottle for another feeding.</li><li>○ Failure to clean breast pump per manufacturer's instruction.</li><li>○ Donor human milk (acquired from individuals or the Internet).</li></ul></li><li>• Improper preparation, handing and/or storage of bottles or containers of formula including:<ul style="list-style-type: none"><li>○ Storing at room temperature for more than 1 hour.</li><li>○ Failure to store prepared formula per manufacturer's instructions.</li><li>○ Using formula in a bottle one hour after the start of a feeding.</li><li>○ Saving formula from a used bottle for another feeding.</li><li>○ Failure to clean baby bottle properly.</li></ul></li></ul>
411.10	IBE, IBP, IFF	<p><u>Inappropriate or Excessive Intake of Dietary Supplements</u></p> <ul style="list-style-type: none"><li>• Routinely taking inappropriate or excessive amounts of any dietary supplements not prescribed by a physician with potentially harmful consequences, including but not limited to ingestion of unprescribed or excessive or toxic:<ul style="list-style-type: none"><li>○ Herbal remedies.</li><li>○ Mineral or botanical supplements/remedies/teas.</li><li>○ Multi or single vitamins.</li></ul></li></ul>



## 400 Risk Series - Dietary Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
411.11	IBE, IBP, IFF	<p><u>Vitamin/Mineral Supplementation</u></p> <ul style="list-style-type: none"> <li>• Client not routinely taking a dietary supplement recognized as essential by national public health policy makers because diet alone cannot meet nutrient requirements.</li> <li>• Examples include but are not limited to:               <ul style="list-style-type: none"> <li>○ Infants and children, age 6 months through 35 months, not taking 0.25 mg of fluoride daily when the water supply contains less than 0.3 ppm fluoride.</li> <li>○ Breastfed and non-breastfed infants who are ingesting less than 1 quart (32 ounces) per day of Vitamin D-fortified formula and are not taking a supplement of 400 IU of Vitamin D.</li> </ul> </li> </ul>
425.01	C1-C4	<p><u>Routine Ingestion of Inappropriate Beverages as Milk Source</u></p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• Non-fat or reduced fat milk between 12 and 24 months, unless child for whom overweight or obesity is a concern, health care provider recommends 2% milk, or family history is positive for obesity, dyslipidemia, or cardiovascular disease.</li> <li>• Unfortified or inadequately fortified goat’s milk, sheep’s milk, imitation or substitute milks such as rice, soy beverages, almond, non-dairy creamers or other “homemade concoctions”.</li> <li>• Sweetened condensed milk.</li> </ul>
425.02	C1-C4	<p><u>Routine Ingestion of Sugar Containing Fluids</u></p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• Soda/pop</li> <li>• Soft drinks</li> <li>• Gelatin water</li> <li>• Corn syrup solutions</li> <li>• Sweetened tea</li> </ul>

### 400 Risk Series - Dietary Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
425.03	C1-C4	<p><u>Routinely Using Nursing Bottles, Cups, or Pacifiers Improperly</u></p> <ul style="list-style-type: none"> <li>• Using a bottle to feed fruit juice, diluted cereal, or other solid foods.</li> <li>• Allowing the child to fall asleep or be put to bed with a bottle at naps or bedtime.</li> <li>• Allowing the child to use the bottle without restriction (e.g., walking around with a bottle) or as a pacifier.</li> <li>• Using a bottle for feeding or drinking beyond 14 of age.</li> <li>• Using a pacifier dipped in sweet agents such as sugar, honey, or syrups.</li> <li>• Allowing a child to carry around and drink throughout the day from a covered or training cup.</li> </ul>
425.04	C1-C4	<p><u>Inappropriate Feeding Practices for Children that Disregard Developmental Needs</u></p> <ul style="list-style-type: none"> <li>• Routinely using feeding practices that disregard developmental needs of the child such as: <ul style="list-style-type: none"> <li>○ Not supporting growing independence with spoon.</li> <li>○ No finger feeding.</li> <li>○ Forcing food.</li> <li>○ Not feeding when hungry.</li> <li>○ Not supporting self-feeding.</li> <li>○ Not feeding texture appropriate foods.</li> <li>○ Putting at risk of choking.</li> </ul> </li> <li>• Not supporting a child's need for growing independence with self-feeding (e.g., spoon-feeding a child who is able and ready to finger-feed and/or try self-feeding with appropriate utensils.</li> <li>• Feeding inappropriate consistency size or shape to less than 4-year-old</li> <li>• Feeding or offering a child primarily pureed or liquid food when the child is ready and capable of eating foods of an appropriate texture (mashed, chopped or appropriate finger foods.)</li> </ul>

## 400 Risk Series - Dietary Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
425.05	C1-C4	<p><u>Feeding Potentially Unsafe Foods (children)</u></p> <ul style="list-style-type: none"> <li>• Examples of potentially harmful foods for a child:               <ul style="list-style-type: none"> <li>○ Unpasteurized fruit or vegetable juice.</li> <li>○ Unpasteurized dairy products or soft cheeses such as feta, Brie, Camembert, blue-veined, and Mexican-style cheese.</li> <li>○ Raw or undercooked meat, fish, poultry, or eggs.</li> <li>○ Raw vegetable sprouts (alfalfa, clover, bean, and radish).</li> <li>○ Deli meats, hot dogs, and processed meats (avoid unless heated until steaming hot).</li> </ul> </li> </ul>
425.06+	C1-C4	<p><u>Highly Restrictive Diets</u></p> <ul style="list-style-type: none"> <li>• Severely limited intake of calories and important food sources of essential nutrients.</li> <li>• High risk eating pattern.</li> </ul> <p>Examples:</p> <ul style="list-style-type: none"> <li>• Strict vegan diet.</li> <li>• Macrobiotic diet.</li> <li>• Other diets very low in calories and/or essential nutrients.</li> </ul>
425.07	C1-C4	<p><u>Inappropriate or Excessive Intake of Dietary Supplements</u></p> <ul style="list-style-type: none"> <li>• Routinely taking inappropriate or excessive amounts of any dietary supplements not prescribed by a physician with potentially harmful consequences, including but not limited to ingestion of unprescribed or excessive or toxic:               <ul style="list-style-type: none"> <li>○ Herbal remedies or botanical supplements/remedies/teas.</li> <li>○ Mineral supplements.</li> <li>○ Multi or single vitamins.</li> </ul> </li> </ul>

### 400 Risk Series - Dietary Risk

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>														
425.08	C1-C4	<p><u>Vitamin/Mineral Supplementation</u></p> <ul style="list-style-type: none"> <li>• Client not routinely taking a dietary supplement recognized as essential by national public health policy makers because diet alone cannot meet nutrient requirements.</li> <li>• Examples include but are not limited to:               <ul style="list-style-type: none"> <li>○ When water supply contains less than 0.3 ppm fluoride and:                   <ul style="list-style-type: none"> <li>▪ Children, age 6 months to 35 months, not taking 0.25 mg of fluoride daily.</li> <li>▪ Children, age 36 to 60 months, not taking 0.5 mg of fluoride daily.</li> </ul> </li> <li>○ Children who are taking less than 1 quart per day of Vitamin D-fortified milk and are not taking 400 IU supplement of Vitamin D. (For children 2 years and older, the recommendation is 2 cups (16 oz.) low-fat milk per day.)</li> </ul> </li> </ul>														
425.09	C1-C4	<p><u>Routine Ingestion of Non-Food Items - Pica:</u></p> <ul style="list-style-type: none"> <li>• Current craving for or consumption of non-food substances such as:               <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">○ Ashes</td> <td style="width: 50%;">○ Coffee grounds</td> </tr> <tr> <td>○ Baking soda</td> <td>○ Foam Rubber</td> </tr> <tr> <td>○ Carpet fibers</td> <td>○ Ice (excessive intake which replaces an adequate diet)</td> </tr> <tr> <td>○ Cigarettes or cigarette butts</td> <td>○ Paint chips</td> </tr> <tr> <td>○ Chalk</td> <td>○ Soil</td> </tr> <tr> <td>○ Clay or dirt</td> <td>○ Starch (laundry, cornstarch)</td> </tr> <tr> <td>○ Dust</td> <td>○ Wood</td> </tr> </table> </li> </ul>	○ Ashes	○ Coffee grounds	○ Baking soda	○ Foam Rubber	○ Carpet fibers	○ Ice (excessive intake which replaces an adequate diet)	○ Cigarettes or cigarette butts	○ Paint chips	○ Chalk	○ Soil	○ Clay or dirt	○ Starch (laundry, cornstarch)	○ Dust	○ Wood
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427.01	PG, BE, BP, NPP	<p><u>Inappropriate or Excessive Intake of Dietary Supplements</u></p> <ul style="list-style-type: none"> <li>• Routinely taking inappropriate or excessive amounts of any dietary supplements not prescribed by a physician with potentially harmful consequences, including but not limited to ingestion of unprescribed or excessive or toxic:               <ul style="list-style-type: none"> <li>○ Herbal remedies or botanical supplements/remedies/teas.</li> <li>○ Mineral supplements.</li> <li>○ Multi or single vitamins.</li> </ul> </li> </ul>														

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427.02+	PG, BE, BP, NPP	<p><u>Highly Restrictive Diets</u></p> <ul style="list-style-type: none"> <li>• Diet very low in calories including impaired absorption following bariatric surgery.</li> <li>• Severely limited intake of important food sources of nutrients.</li> <li>• High risk eating pattern.</li> </ul> <p>Examples:</p> <ul style="list-style-type: none"> <li>• Strict vegan diet</li> <li>• Low-carbohydrate, high-protein diet</li> <li>• Macrobiotic diet</li> <li>• Other diets very low in calories and/or essential nutrients</li> </ul>
427.03	PG, BE, BP, NPP	<p><u>Routine Ingestion of Non-Food Items - Pica:</u></p> <ul style="list-style-type: none"> <li>• Current craving for or consumption of non-food substances such as: <ul style="list-style-type: none"> <li>○ Ashes</li> <li>○ Baking soda</li> <li>○ Carpet fibers</li> <li>○ Cigarettes or cigarette butts</li> <li>○ Chalk</li> <li>○ Clay or dirt</li> <li>○ Dust</li> <li>○ Coffee grounds</li> <li>○ Foam Rubber</li> <li>○ Ice (excessive intake which replaces an adequate diet)</li> <li>○ Paint chips</li> <li>○ Soil</li> <li>○ Starch (laundry, cornstarch)</li> <li>○ Wood</li> </ul> </li> </ul>
427.04	PG, BE, BP, NPP	<p><u>Vitamin/Mineral Supplementation</u></p> <ul style="list-style-type: none"> <li>• Client not routinely taking a dietary supplement recognized as essential by national public health policy makers because diet alone cannot meet nutrient requirements.</li> <li>• Examples include but are not limited to: <ul style="list-style-type: none"> <li>○ Pregnant women taking less than 27 mg of supplemental iron daily.</li> <li>○ Non-pregnant women consuming less than 400 mcg. of folic acid (synthetic) from fortified foods and/or supplements daily.</li> <li>○ Pregnant and lactating women consuming less than 150 ug. of supplemental iodine per day.</li> </ul> </li> </ul>

**400 Risk Series - Dietary Risk**

<b><u>Risk</u></b>	<b><u>Category</u></b>	<b><u>Criteria</u></b>
427.05	PG	<p><u>Consuming Potential Unsafe Foods (pregnant)</u></p> <ul style="list-style-type: none"><li>• Examples of potentially harmful foods for a pregnant client:<ul style="list-style-type: none"><li>○ Raw fish or shellfish, including oysters, clams, mussels, and scallops.</li><li>○ Refrigerated smoked seafood, unless it is an ingredient in a cooked dish, such as a casserole.</li><li>○ Raw or undercooked meat or poultry.</li><li>○ Hot dogs, luncheon meats (cold cuts), fermented and dry sausage and other deli-style meat or poultry products unless reheated until steaming hot.</li><li>○ Refrigerated pâté or meat spreads.</li><li>○ Unpasteurized milk or foods containing unpasteurized milk.</li><li>○ Soft cheeses such as feta, Brie, Camembert, blue-veined cheeses, and Mexican style cheeses such as queso blanco, queso fresco, or Panela unless labeled as made with pasteurized milk.</li><li>○ Raw or undercooked eggs or foods containing raw or lightly cooked eggs. including certain salad dressings, cookie and cake batters, sauces, and beverages such as unpasteurized eggnog.</li><li>○ Raw sprouts (alfalfa, clover, and radish).</li><li>○ Unpasteurized fruit or vegetable juices.</li></ul></li></ul>
428.01	IBE, IBP, IFF, C1	<p><u>Inappropriate 4-23 mo. old Feeding</u> (Dietary Risk Associated with Complementary Feeding Practices)</p> <ul style="list-style-type: none"><li>• This criterion may only be assigned to 4 through 23-month-old after a complete assessment has been performed to assess for risk (including #411.01 – 411.11, Inappropriate Feeding Practices for Infants or #425.01 – 425.09, Inappropriate Nutrition Practices for Children) and no other risk is identified.</li></ul>

**500 Risk Series - Fear of Regression/Transfer**

<b><u>Risk</u></b>	<b><u>Category</u></b>	<b><u>Criteria</u></b>
501.01	BE, BP, NPP, C1-C4	<p><u>Possibility of Regression at Subsequent Certification</u></p> <ul style="list-style-type: none"><li>• Fear of regression in nutritional status without WIC Program benefits after a risk code from the 100, 200, 300, 400, 800 or 900 Risk Series <i>when no other risk code is identified</i>. Risk #501 <u>cannot follow</u> a certification with <u>only</u> risk from the 500, 600, or 700 Risk Series.<ul style="list-style-type: none"><li>○ A WIC re-certification assessment shall be completed to rule out the existence of another risk factor before assigning risk code 501.</li></ul></li></ul> <p>EXCEPTION: Risk code 501 does not apply to previous risk(s) with respect to a pregnancy only condition. These risk conditions are directly associated with the pregnancy. For example, gestational diabetes is not a condition to which a new mother could regress.</p>
502.01	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Transfer of Out-of-State Certification</u></p> <ul style="list-style-type: none"><li>• An individual transferring from an out-of-state WIC Program with a current Identification and Verification of Certification (ID/VOC) document.</li><li>• ID/VOC document is valid until the certification period expires and is accepted as proof of eligibility for Program benefits.</li><li>• If receiving local agency has waiting lists for participation, the transferring individual shall be placed on the list ahead of all other waiting applicants.</li></ul>

**600 Risk Series - Breastfeeding Client/Infant Dyad**

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
601.01	PG, BE, BP	<u>Breastfeeding Mother of Infant at Nutritional Risk 100-300 Risk Series</u> <ul style="list-style-type: none"><li>• A lactating client whose breastfed infant is eligible for WIC with an anthropometric, biochemical, or clinical/health/medical risk.</li></ul>
602.01	PG, BE, BP	<u>Lactating Client with Breastfeeding Complications or Potential Complications</u> <ul style="list-style-type: none"><li>• Severe breast engorgement.</li><li>• Recurrent plugged ducts.</li><li>• Mastitis (fever or flu-like symptoms with localized breast tenderness).</li><li>• Flat or inverted nipples.</li><li>• Cracked, bleeding or severely sore nipples.</li><li>• At or older than 40 years of age.</li><li>• Failure of milk to come in by 4 days postpartum.</li><li>• Tandem nursing (breastfeeding 2 siblings who are not twins).</li></ul> <p>Note: If the breastfeeding complication is current, this risk code is an indication for a referral to the Breastfeeding Peer Counselor, Lactation Consultant or Health Care Provider.</p>
603.01	IBE, IBP, IFF	<u>Breastfed Infant with Breastfeeding Complications or Potential Complications</u> <ul style="list-style-type: none"><li>• Breastfeeding jaundice (an exaggeration of physiologic jaundice and an indicator of inadequate breastfeeding).</li><li>• Weak or ineffectual suck.</li><li>• Difficulty latching onto mother's breast.</li><li>• Inadequate stools for age as determined by a physician or other health care professional.</li><li>• Less than 6 wet diapers per day.</li></ul> <p>Note: If any of the above are a current breastfeeding complication, this is an indication for an <u>immediate</u> referral to the Health Care Provider.</p>
604.01	BE, BP	<u>Breastfeeding Mother of Infant at Nutritional Risk 400 Risk Series</u> <ul style="list-style-type: none"><li>• A lactating client whose breastfed infant is eligible for WIC with a dietary risk only.</li></ul>



**700 Risk Series - Infant Enrolled Due to Maternal Risk**

<b><u>Risk</u></b>	<b><u>Category</u></b>	<b><u>Criteria</u></b>
701.01	IBE, IBP, IFF	<p><u>Infant of a Mother Enrolled in WIC During Pregnancy or Not Enrolled But Would Have Been Eligible with 100-300 Risk Series (birth through 5 months)</u></p> <ul style="list-style-type: none"><li>• An infant of a mother who was enrolled in WIC during pregnancy with an anthropometric, biochemical, or clinical/health/medical risk.</li><li>• An infant of a mother who was not on WIC during pregnancy but would have been eligible to be a WIC client with an anthropometric, biochemical, or clinical/health/medical risk.</li></ul>
702.01	IBE, IBP, IFF	<p><u>Breastfed Infant of a WIC Eligible or Enrolled Mother 100-300 Risk Series (birth through 11 months)</u></p> <ul style="list-style-type: none"><li>• A breastfed infant of a lactating mother who was enrolled or eligible to be a WIC client any time during pregnancy, or who is currently eligible for WIC with an anthropometric, biochemical, or clinical/health/medical risk.</li></ul>
704.01	IBE, IBP, IFF	<p><u>Breastfed Infant of a WIC Eligible or Enrolled Mother 400 Risk Series (birth through 11 months)</u></p> <ul style="list-style-type: none"><li>• A breastfed infant of a lactating mother who was enrolled or eligible to be a WIC participant any time during pregnancy, or who is currently eligible for WIC with a dietary risk.</li></ul>

**800 Risk Series - Homelessness/Migrancy**

<b><u>Risk</u></b>	<b><u>Category</u></b>	<b><u>Criteria</u></b>
801.01	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<b><u>Homelessness</u></b> <ul style="list-style-type: none"><li>• Client who lacks a fixed and regular nighttime residence.</li><li>• Client whose primary nighttime residence is:<ul style="list-style-type: none"><li>○ A supervised publicly or privately operated shelter (including a welfare hotel, a congregate shelter, or a shelter for victims of domestic violence) designed to provide temporary living accommodations.</li><li>○ An institution that provides temporary residence for individuals intended to be institutionalized.</li><li>○ A temporary accommodation of not more than 365 days in the residence of another individual.</li><li>○ A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.</li></ul></li></ul>
802.01	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<b><u>Migrant</u></b> <ul style="list-style-type: none"><li>• Categorically eligible clients who are members of families which contain at least one individual whose principal employment is in agriculture on a seasonal basis, who has been so employed within the last 24 months, and who establishes, for the purposes of such employment, a temporary abode.</li></ul>

**900 Risk Series - Other Nutrition Risks**

<u>Risk</u>	<u>Category</u>	<u>Criteria</u>
901.01	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Recipient of Abuse</u></p> <ul style="list-style-type: none"> <li>• A client who has experienced physical, sexual, emotion, economic, or psychological maltreatment that may frighten, intimidate, terrorize, manipulate, hurt, humiliate, blame, injure, and/or wound the individual. Includes, but not limited to:                             <ul style="list-style-type: none"> <li>○ Domestic violence.</li> <li>○ Intimate partner violence.</li> <li>○ Child abuse and/or neglect.</li> </ul> </li> </ul>
902.01	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Woman or Infant/Child of Primary Caregiver with Limited Ability to Make Feeding Decisions and/or Prepare Food</u></p> <ul style="list-style-type: none"> <li>• Postpartum, lactating, or non-lactating client, or infant/child who’s primary caregiver is assessed to have a limited ability to make appropriate feeding decisions and/or prepare food. Examples include, but are not limited to, a client or caregiver with the following:                             <ul style="list-style-type: none"> <li>○ Documentation or self-report of misuse of alcohol, use of illegal substances, use of marijuana, or misuse of prescription medications.</li> <li>○ Mental illness, including clinical depression diagnosed, documented, or reported by a physician or psychologist or someone working under a physician’s orders, or as self-reported by applicant/participant/caregiver.</li> <li>○ Intellectual disability diagnosed, documented, or reported by a physician or psychologist or someone working under a physician’s orders, or as self-reported by applicant/participant/caregiver.</li> <li>○ Physical disability to a degree which impairs ability to feed infant/child or limits food preparation abilities.</li> <li>○ 17 years of age and younger.</li> </ul> </li> </ul>
903.01	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Foster Care</u></p> <ul style="list-style-type: none"> <li>• Entering the foster care system during the previous 6 months.</li> <li>• Moving from one foster care home to another foster care home during the previous 6 months.</li> </ul>
904.01	PG, BE, BP, NPP, IBE, IBP, IFF, C1-C4	<p><u>Environmental Tobacco Smoke Exposure</u></p> <ul style="list-style-type: none"> <li>• Environmental tobacco smoke (ETS) exposure is defined (for WIC eligibility purposes) as exposure to smoke from tobacco products inside enclosed areas, like the home, place of childcare, etc. This definition also includes the exposure to the aerosol from electronic nicotine delivery systems (refer to #371.01, Nicotine and Tobacco Use). ETS is also known as passive, secondhand, or involuntary smoke.</li> </ul>