

**DCH-1326, WOMEN, INFANTS, AND CHILDREN (WIC)
SPECIAL FORMULA/FOOD REQUEST**

Michigan Department of Health and Human Services (MDHHS)
(Revised 3-26)

COMPLETE ALL APPLICABLE SECTIONS

Client Name		Date of Birth		Parent/Guardian Name	
(Optional)	Weight	Length/Height	Head Circumference	Hemoglobin/Hematocrit	
Date Measured	/ /	/ /	/ /	/ /	

SECTION 1 – QUALIFYING CONDITION(S)

- Preterm birth < 37 weeks gestation
 Low birth weight (≤ 5 lbs 8 oz)
 Failure to thrive
 Severe food allergies (specify)
 Immune system disorder (specify)
 Metabolic disorder/inborn errors of metabolism (specify)
 Medical condition that impairs nutrition status (specify)
 Gastrointestinal disorder/malabsorption syndromes (specify)

SECTION 2 – FORMULA

Formula	Amount/Ounces per day	Duration (not to exceed 12 months)
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I authorize WIC to issue a comparable formula if specified formula is not available (page 2) Yes No

SECTION 3 – FOOD RESTRICTIONS & SUBSTITUTIONS (OPTIONAL)

No WIC foods - provide formula only (≥ 6 months)

OMIT these WIC Foods (WIC professional will determine unless marked otherwise)

Infant (6-12 months)

Child (1-5 years) and Woman

- | | | | | |
|---|---------------------------------|--|---|--------------------------------|
| <input type="checkbox"/> Infant cereal | <input type="checkbox"/> Milk | <input type="checkbox"/> Peanut butter | <input type="checkbox"/> Canned fish | <input type="checkbox"/> Eggs |
| <input type="checkbox"/> Infant fruits/vegetables | <input type="checkbox"/> Yogurt | <input type="checkbox"/> Other nut/seed butter | <input type="checkbox"/> Breakfast cereal | <input type="checkbox"/> Juice |
| <input type="checkbox"/> Fruits/vegetables | <input type="checkbox"/> Cheese | <input type="checkbox"/> Fruits/vegetables | <input type="checkbox"/> Whole grains | <input type="checkbox"/> Tofu |

Replace fruits/vegetables with **infant fruits/vegetables** (≥ 12 months; honored only if formula is prescribed) **Replace half** **Replace all**

Replace breakfast cereal with **infant cereal** (≥ 12 months; honored only if formula is prescribed)

Whole milk (honored only if formula prescribed) **Plant-based beverage** **2% milk**

Instructions/Comments

SECTION 4 – HEALTH CARE PROVIDER

Health Care Provider Name		WIC Clinic Use Only	
Address		Approved Through (optional)	
Phone Number	Fax Number	Name	Phone Number
Signature	Date	Fax Number	Date

FOR CLIENTS: WIC may contact the health care provider for more information to process this request. Note: Submitting electronically may not be secure.

AUTHORIZED COMPARABLE FORMULAS

If authorized on Page 1, the following comparable formula(s) by category may be issued.

For the full list of WIC-approved formulas go to www.michigan.gov/wic, Health Care Provider link.

Formula Category	Formula Name	
Premature Infant Formula 22 kcal/oz	Enfamil EnfaCare Similac NeoSure	
Extensively Hydrolyzed Hypoallergenic Infant Formula 20 kcal/oz	Extensive HA Nutramigen Pepticate	Similac Alimentum
Amino Acid-Based Hypoallergenic Infant Formula 20 kcal/oz	Alfamino Infant EleCare Infant Neocate Infant	Neocate Syneo Infant PurAmino Infant
Amino Acid-Based Hypoallergenic Pediatric Formula 30 kcal/oz	Alfamino Junior EleCare Junior Neocate Junior	Neocate Splash Neocate Syneo Junior PurAmino Junior
Milk-based Pediatric Formula 30 kcal/oz	Boost Kid Essentials 1.0 Nutren Junior	Pediasure
Milk-based Pediatric Formula with Fiber 30 kcal/oz	Nutren Junior with Fiber Pediasure with Fiber	
Milk-based Pediatric Formula 45 kcal/oz	Boost Kid Essentials 1.5 Pediasure 1.5	
Milk-based Pediatric Formula with Fiber 45 kcal/oz	Boost Kid Essentials 1.5 with Fiber Pediasure 1.5 with Fiber	
Peptide-based Pediatric Formula 30 kcal/oz	Kate Farms Pediatric Peptide 1.0 Peptamen Junior	Pediasure Peptide 1.0
Peptide-based Pediatric Formula 45 kcal/oz	Kate Farms Pediatric Peptide 1.5 Peptamen Junior 1.5	Pediasure Peptide 1.5
Milk-based Adult Formulas 30 kcal/oz	Boost Ensure	
Milk-based Adult Formulas 45 kcal/oz	Boost Plus Ensure Plus	
Whole Food Blenderized Formula kcal/oz differ	Compleat Pediatric Organic Blends (1.2 kcal/mL) Kate Farms Pediatric Blended Meals (1.0 kcal/mL)	

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