

FOR FAMILIES WHO QUALIFY FOR WIC

- If going home with some tube feeds, contact discharge coordinator, as home enteral tube company may supply feed for gavage feeds
- If feed given by mouth needs to be different to that given via tube, this is generally not covered by home enteral tube company
- Print appropriate state (MA, NH, RI, etc) WIC form “Request for Special Formula”
 - Most updated MA form is on Pike notes -
 - Pike notes> Department of Pediatric Newborn Medicine> Nutrition
 - For other states, please Google or contact SLP or RND
- Request “Enfamil AR”
 - “BRAND SUBSTITUTION NOT APPROPRIATE” must be overtly stated on form, or patient may receive Similac Spit-Up, which is not same thickness
- If required, request “ready-to-feed” (vs “powder”)
 - Enfamil AR powder + water is thicker and more gritty than Enfamil AR ready-to-feed
 - Ready-to-feed is generally only used when infant has shown they cannot drink formula made from powder+ water
 - Powder is easier to access and cheaper, but not tolerated by all
 - Ready to feed only comes in 20kcal/oz (No easy way to fortify this in the community)
 - Powder can be made to 20kcal/oz (as per can) or higher concentration (e.g. 24kcal/oz) (Dietician to provide recipe)
- Relevant ICD codes: (include all that are relevant)
 - R13.12 Oropharyngeal dysphagia
 - P24.31 Documented aspiration
 - K21.9 Gastroesophageal reflux
- Request 2-3 month supply. Beyond that, PCP must submit new request (6 month supply is generally rejected)
- Must be signed by MD/NP/PA