

Medical Diagnosis Requirements for the Issuance of Nutritional Supplements

The issuance of a nutritional supplement requires documentation of a medical condition for which the consumption of conventional foods is prohibited, restricted, or inadequate. For the purposes of this guidance, a nutritional supplement is defined as a concentrated source of nutrients for children and adults, often in the form of a beverage, providing supplemental or complete nutrition intended for oral or tube feedings. Common examples of nutritional supplements include, PediaSure, Boost, and Ensure products.

Participants requesting a nutritional supplement for the management of body weight (i.e. underweight, poor weight gain), without an underlying medical condition, cannot be authorized to receive a nutritional supplement, and will be offered nutrition education and dietary counseling on adequate intake of conventional foods. Use the following guidance as allowable reasons to issue nutritional supplements.

A. Failure to Thrive (FTT)

A FTT diagnosis requires a growth assessment meeting any of the conditions detailed below. Growth measurements must be taken within the last 6 months and may be provided by the medical office or determined from the WIC medical record. The following FTT guidance provided by Georgia WIC is specific to children and women for the issuance of nutritional supplements. For additional information, reference Failure to Thrive Justification and Clarification in the [WIC Risk Criteria Handbook](#), Appendix L.

1. Gender specific weight for length or BMI <5th percentile
2. Two or more consecutive weight for age measurements below the 5th percentile (must reflect the most recent measures taken at least 1 month apart)
3. A progressive decrease to below the 5th percentile for weight for age
4. Weight for length decreasing across at least one major percentile channel in children with established growth patterns at less than or equal to the 50th percentile
5. No weight gain for three or more months
6. Weight loss in children with established growth patterns less than the 10th percentile for BMI or weight for age

B. Oral motor feeding problems or developmental disorders causing severely restricted or limited and inadequate food intake (i.e. tube feedings, dysphagia, and food aversions).

C. Hypermetabolic conditions (i.e. cancer/blastoma, Cystic Fibrosis).

D. Low maternal weight gain with:

1. Intrauterine growth restriction (IUGR)
2. Hyperemesis gravidarum
3. Cystic fibrosis (CF)
4. HIV/AIDS
5. Any hypermetabolic disease condition