



Physician Authorization Form

for WIC-Approved Infant Formulas and Medical Foods

Effective January 1, 2008, Colorado WIC standard contract formulas are:

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|-------------------------|-------------------------|
| Enfamil LIPIL | Enfamil Gentlease LIPIL |
| ProSobee LIPIL | Enfamil AR LIPIL |
| Enfamil LactoFree LIPIL | |

These formulas WILL BE GIVEN unless a physician diagnoses a medical condition that requires a therapeutic infant formula, such as Nutramigen LIPIL or Neocate Infant. Reasons such as “colic,” “spitting up,” “constipation,” or “intolerance to current formula” will not be accepted as a substitution for a medical diagnosis.

How to request a therapeutic infant formula or medical food (refer to complete listing on the back of this form):

- ◆ Complete and return this form to the patient or send it to the address noted below. The WIC Registered Dietitian or Registered Nurse will determine if the prescription is accepted. By completing and signing this form you verify to the WIC Program that:
 - You have seen this infant or child and evaluated feeding and symptoms.
 - AND
 - The medical condition precludes the use of any standard contract formulas.
- ◆ If the product is a special order item, please provide a starter supply.
- ◆ A new prescription is needed every three months.

For more information call the Registered Dietitian or Registered Nurse at your patient’s WIC Program (listed below) or a Registered Dietitian Nutrition Consultant at the State WIC Office at (303) 692-2400.

Physician Authorization			
Patient’s Name: _____			
Product(s) Needed: _____			
Medical Reason/Diagnosis: _____			
Time Needed: Valid for maximum authorized time (see back of form) unless specified otherwise: <div style="text-align: center; margin-top: 5px;"> 1 2 3 months </div>			
Instructions for preparation and use if not standard _____ _____ _____			
Physician’s Name (print)	Physician’s Signature	Telephone	Date
<u>Return to:</u> Local WIC Program Staff: _____ Telephone: _____ FAX: _____	For WIC Clinic Use New prescription needed: _____ RD/RN appointment scheduled: _____ WIC Program RD/RN Authorization / Date: _____		

**COLORADO WIC PROGRAM
WIC-APPROVED INFANT FORMULAS AND MEDICAL FOODS**

PRODUCT	WIC AUTHORIZATION
<p>Standard Contract Infant Formulas Enfamil LIPIL ProSobee LIPIL Enfamil LactoFree LIPIL Enfamil Gentlease LIPIL Enfamil AR LIPIL</p>	<ul style="list-style-type: none"> ◆ WIC infants will be issued standard contract formulas unless the physician indicates a medical reason or medical diagnosis requiring a therapeutic infant formula. ◆ No prescription is needed for standard contract infant formulas. ◆ A prescription is needed for adults and children over one-year of age and is valid for three (3) months.
<p>Therapeutic Infant Formulas and Medical Foods Alimentum Boost High Protein E028 Splash EleCare Enfamil EnfaCare LIPIL Ensure Ensure Plus Isocal Kindercal Kindercal with Fiber Kindercal TF Kindercal TF with Fiber Neocate Infant Neocate Infant with DHA & ARA Neocate Junior Neocate One+ NeoSure Next Step ProSobee LIPIL (only for children over 1 year) Nutramigen LIPIL Nutren Junior Nutren Junior with Prebio Fiber Nutren 1.0 Nutren 1.0 with Fiber Nutren 1.5 Nutren 2.0 Osmolite PediaSure (any flavor) PediaSure with Fiber (any flavor) Peptamen Peptamen Junior Peptamin Junior with Fiber Peptinex Portagen Resource Just for Kids 1.5 Cal Resource Just for Kids 1.5 Cal with Fiber Similac PM 60/40 Tolerex Vivonex Pediatric Vivonex T.E.N.</p>	<ul style="list-style-type: none"> ◆ Therapeutic formulas are only provided for a three-month duration. Another authorization form is required at the end of each three-month authorization period (3 month maximum).
<p>Formulas For Inherited Metabolic Diseases</p>	<ul style="list-style-type: none"> ◆ Contact a Nutrition Consultant at the State WIC Office at (303) 692-2400