

Nutrition/Health Volume
Certification Section

Risk Factors 341 through 362 Nutrition-Related Risk Conditions (2.04475)

ER# 2.04475

Authority 2013~~4~~ 7 CFR 246.7(e)(2)(ii), WIC Policy Memorandums 98-9 Revision 4 WC-00-24-P and Revision 9 MPSF:WC-07-25-P. WIC Policy Memorandum 98-9, Revision 10 Nutrition Risk Criteria; Transmittal of Revised WIC Nutrition Risk Criteria June 25, 2012

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POLICY: Risk Factors 341 through 362 shall be assigned to all participants who have been identified with one of the following nutrition-related risk conditions listed in this policy (*list is all-inclusive in procedure D*). Presence of condition or disorder diagnosed, documented, or reported by a physician or someone working under a physician's orders, or as self reported by applicant/participant/caregiver. See Clarification under D.1. for additional guidance regarding self reporting of a diagnosis. Procedures for obtaining data, documentation and assigning risk factors must be followed.

PROCEDURES:

A. Obtaining Data

1. Obtain acceptable documentation or verification of diagnosis, such as on a physician's prescription pad, referral form, medical record or other reliable documentation. A telephone order is acceptable, as long as it is documented as such in the General Notes in MOWINS. A written statement from the health care provider must be obtained as follow-up to a telephone order.
2. Obtain diagnosis or condition as self reported by applicant/participant/caregiver. Presence of condition or disorder diagnosed, documented, or reported by a physician or someone working under a physician's orders, or as self reported by applicant/participant/caregiver. See Clarification under D.1. for additional guidance regarding self reporting of a diagnosis.

B. Documenting

- ~~1. Scan any acceptable documentation or verification of diagnosis in the participant's file in MOWINS, such as a physician's prescription pad, referral form, medical record, other reliable documentation.~~
- 1 2. If applicant/participant/caregiver self reports health and/or medical conditions (*listed in procedure D*) document in General/SOAP Notes the following in MOWINS. the following:
 - a. The name, contact information of the health care provider,
 - b. Contact information of the health care provider
 - c. Whether the condition is being controlled by diet or medication.
 - d. If medication has been prescribed document the drug name(s).

C. Assessing

1. Assess program category and review diagnosis or condition to verify if it substantiates the presence of a nutrition-related risk condition. The CPA may determine follow-up is needed for any of these risk factors and manually select as high risk and complete a SOAP note (high risk care plan) in MOWINS.

D. Assigning Risk Factors:

1. The certifying staff shall manually assign the following risk factor(s) unless otherwise indicated according to policy (refer to [Risk Factor Detail Guide](#)): **Note * Clarification on self-diagnosis and self-reported medical diagnosis:**

Self-reporting of a diagnosis by a medical professional should not be confused with self-diagnosis, where a person simply claims to have or to have had a medical condition without any reference to professional diagnosis. A self-reported medical diagnosis (“My doctor says that I have/my son or daughter has...”) should prompt the CPA to validate the presence of the condition by asking more pointed questions related to that diagnosis.

- a. Risk Factor 341 – Nutrient Deficiency Diseases. **Diagnosis of nutritional deficiencies or a disease caused by insufficient dietary intake of macro and micronutrients.** ~~Nutrient Deficiency Diseases. Diagnosis of nutritional deficiencies or a disease caused by insufficient dietary intake of macro and micronutrients.~~ Diseases include, but are not limited to, Protein Energy Malnutrition, Scurvy, Rickets, Beri Beri, Hypocalcemia, Osteomalacia, Vitamin K Deficiency, Pellagra, Cheilosis, Menkes Disease, Xerophthalmia. (P, B, N, I, C)
- b. Risk Factor 342 - Gastrointestinal Disorders. Disease(s) and/or condition(s) that interfere with the intake, digestion, and/or absorption of nutrients. The diseases and /or conditions include, but are not limited to gastroesophageal reflux disease (GERD); peptic ulcer;; post-bariatric surgery;; short bowel syndrome;; inflammatory bowel disease, including ulcerative colitis or Crohn’s disease, liver disease;; pancreatitis;; and biliary tract diseases. (P, B, N, I, C)
- c. Risk Factor 343 - Diabetes Mellitus. **Diabetes mellitus consists of a group of metabolic diseases characterized by inappropriate hyperglycemia resulting from defects in insulin secretion, insulin action or both.** (P, B, N, I, C)

*Note: MOWINS will automatically assign when the ‘Diabetes Mellitus’ box is selected on the Health Information tab.

- d. Risk Factor 344 - Thyroid Disorders ~~hypothyroidism or hyperthyroidism.~~ **Hypothyroidism (insufficient levels of thyroid hormone produced or defect in receptor) or hyperthyroidism (high levels of thyroid hormone secreted). Thyroid dysfunctions that occur in pregnant and postpartum women, during fetal development, and in childhood are caused by the abnormal secretion of thyroid hormones. The medical conditions include, but are not limited to, the following:**

Thyroid Dysfunction	Definition
Hyperthyroidism	Excessive thyroid hormone production (most commonly known as Graves' disease and toxic multinodular goiter).
Hypothyroidism	Low secretion levels of thyroid hormone (can be overt or mild/subclinical). Most commonly seen as chronic autoimmune thyroiditis (Hashimoto's thyroiditis or autoimmune thyroid disease). It can also be caused by severe iodine deficiency.
Congenital Hyperthyroidism	Excessive thyroid hormone levels at birth, either transient (due to maternal Grave's disease) or persistent (due to genetic mutation).
Congenital Hypothyroidism	Infants born with an under active thyroid gland and presumed to have had hypothyroidism in-utero.
Postpartum Thyroiditis	Transient or permanent thyroid dysfunction occurring in the first year after delivery based on an autoimmune inflammation of the thyroid. Frequently, the resolution is spontaneous.

(P, B, N, I, C)

- e. Risk Factor 345 – Hypertension and Pre-hypertension. ~~Chronic and Pregnancy-Induced. Repeated elevated blood pressure exceeding 140 mmHg over 90 mmHg; a systolic blood pressure above 140 mmHg with a diastolic blood pressure above 90 mmHg.~~ Presence of hypertension or prehypertension diagnosed, documented, or reported by a physician or someone working under a physician's orders, or as self reported by applicant/participant/caregiver. (P, B, N, I, C)

*Note: MOWINS will automatically assign when the 'Hypertension/Pre-Hypertension' box is selected on the Health Information tab.

- f. Risk Factor 346 - Renal Disease. Any renal disease including pyelonephritis and persistent proteinuria, but excluding urinary tract infections (UTI) involving the bladder. (P, B, N, I, C)
- g. Risk Factor 347 – Cancer. ~~Current condition, or the treatment for this condition, must be severe enough to affect nutritional intake.~~ A chronic disease whereby populations of cells have acquired the ability to multiply and spread without the usual biologic restraints. The current condition, or the treatment for the condition, must be severe enough to affect nutritional status. (P, B, N, I, C)
- h. Risk Factor 348 - Central Nervous System Disorders. Conditions which affect energy requirements, ~~and may affect the individual's~~ ability to feed self, ~~or which~~ alters the nutritional status metabolically, mechanically, or both. ~~These includes,~~ but ~~is~~ are not limited to: epilepsy;; cerebral palsy (CP) ;; multiple sclerosis (MS) ;; Parkinson's disease; and neural tube defects (NTD), such as spina bifida ~~or~~

myelomeningocele. (P, B, N, I, C)

- i. Risk Factor 349 - Genetic and Congenital Disorders. Hereditary or congenital condition at birth that causes physical or metabolic abnormality. The current condition must alter nutrition status metabolically, mechanically, or both. May include, but is not limited to, cleft lip or palate, Down's syndrome, thalassemia major, sickle cell anemia (not sickle cell trait) and muscular dystrophy. (P, B, N, I, C)
- j. Risk Factor 351 - Inborn Errors of Metabolism. Inherited metabolic disorders caused by a defect in the enzymes or their co-factors that metabolize protein, carbohydrate, or fat. Inborn errors of metabolism (IEM) generally refers to gene mutations or gene deletions that alter metabolism in the body, including, but not limited to: Amino acid disorders, urea cycle disorders, organic acid metabolism disorders, carbohydrate disorders, fatty acid oxidation disorders, peroxisomal disorders, lysosomal storage diseases, and mitochondrial disorders. For information about additional IEM, please see USDA Clarification. Phenylketonuria (PKU), maple syrup urine disease (MSUD), galactosemia, hyperlipoproteinemia, homocystinuria, tyrosinemia, histidinemia, urea cycle disorders, glutaric aciduria, methylmalonic acidemia, glycogen storage disease, galactokinase deficiency, fructoaldolase deficiency, propionic acidemia, hypermethioninemia and medium-chain acyl-CoA dehydrogenase (MCAD). (P, B, N, I, C)
- k. Risk Factor 352 - Infectious Diseases. A disease caused by growth of pathogenic microorganisms in the body within the past six months severe enough to affect nutritional status. Includes, but is not limited to: Tuberculosis, HIV (Human Immunodeficiency Virus Infections)*, AIDS (Acquired Immunodeficiency Syndrome)*, pneumonia, meningitis, parasitic infections, hepatitis and bronchiolitis (3 episodes in last 6 months). The infectious disease must be present within the past 6 months. *Breastfeeding is contraindicated for women with HIV or AIDS. Breastfeeding may be permitted for women with hepatitis (see Clarification for guidelines). (P, B, N, I, C)
- l. Risk Factor 353 - Food Allergies are adverse health effects arising from a specific immune response that occurs reproducibly on exposure to a given food. (P, B, N, I, C). May be system assigned for women or children based upon answers provided to Nutrition Assessment questions within Nutrition Assessment tab in MOWINS.
- m. Risk Factor 354 - Celiac Disease (CD) is also known as Celiac Sprue, Gluten-sensitive Enteropathy or Non-tropical Sprue (as an autoimmune disease precipitated by the ingestion of gluten (a protein in wheat, rye and barley) that results in damage to the small intestine and malabsorption of the nutrients from food. (For more information about the definition of CD, please see the USDA Clarification section.) CD is also known as: Celiac Sprue, Gluten-sensitive Enteropathy, Non-tropical Sprue. (P, B, N, I, C)
- n. Risk Factor 355 - Lactose Intolerance is the syndrome of one or more of the following: diarrhea, abdominal pain, flatulence, and/or bloating, that occurs after

lactose ingestion. Documentation should indicate that the ingestion of dairy products causes the symptoms and the avoidance of such dairy products eliminates them. (P, B, N, I, C)

- o. Risk Factor 356 – **Presence of hypoglycemia.** Hypoglycemia can occur as a complication of diabetes, as a condition in itself, in association with other disorders, or under certain conditions such as early pregnancy, prolonged fasting, or long periods of strenuous exercise. (P, B, N, I, C)
- p. Risk Factor 357 - Drug-Nutrient Interactions. Use of prescription or over-the-counter drugs or medications that have been shown to interfere with nutrient intake or utilization, to an extent that nutritional status is compromised. (P, B, N, I, C)
- q. Risk Factor 358 - Eating Disorders (anorexia nervosa and bulimia), are characterized by a disturbed sense of body image and morbid fear of becoming fat. Symptoms are manifested by abnormal eating patterns including, but not limited to: self-induced vomiting, purgative abuse, alternating periods of starvation, use of drugs such as appetite suppressants, thyroid preparations or diuretics, and self-induced marked weight loss. (P, B, N)
- r. Risk Factor 359 - Recent Major Surgery, Trauma, Burns. Major surgery (including C-sections), trauma or burns severe enough to compromise nutritional status. Any occurrence within the past two (<2) months, ~~participant can~~ **may be self-reported.** Any occurrence ~~more greater~~ **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. (P, B, N, I, C)
- s. Risk Factor 360 - Other Medical Conditions. Diseases or conditions with nutritional implications that are not included in any of the other medical conditions. The current condition, or treatment for the condition, must be severe enough to affect nutritional status. **This includes,** but is not limited to: juvenile rheumatoid arthritis (**JRA**), lupus erythematosus, cardiorespiratory diseases, heart disease, cystic fibrosis, persistent asthma (moderate or severe) requiring daily medication. (P, B, N, I, C)

NOTE: *This criterion will usually not be applicable to infants for the medical condition of asthma. In infants, asthma-like symptoms are usually diagnosed as bronchiolitis with wheezing which is covered under Criterion #352, Infectious Diseases.

- t. Risk Factor 361 – Depression. Presence of clinical depression, **including postpartum depression.** Presence of condition diagnosed, documented or reported by a physician, clinical psychologist or ~~psychologist~~ **someone working under a physician's orders, or as self reported by applicant/participant/caregiver,; or as reported or documented by a physician, psychologist or someone working under physician's orders.** (Appetite changes are a distinguishing feature of depression. Severe depression is often associated with anorexia, bulimia, and weight loss.) (P, B, N, C)
- u. Risk Factor 362 - Developmental, sensory or motor disabilities that restrict the

ability to intake, chew or swallow food or require tube feeding to meet nutritional needs. Disabilities include, but is are not limited to minimal brain function, feeding problems due to a developmental disability such as pervasive development disorder (PDD) which includes autism, birth injury, head trauma, brain damage and other disabilities. (P, B, N, I, C) May be system assigned for children based upon answers provided to Nutrition Assessment questions within Nutrition Assessment tab in MOWINS.

- E. Providing Appropriate [Counseling Guides](#). Refer to the [Nutrition Training Manual](#) for more information. Additional education suggestions are located in the *Implications for WIC Nutrition Services* section of the USDA Regulations and Justification for the risk factors.
 - 1. Counseling and education shall be provided by the CPA.
 - 2. Document counseling contact in MOWINS.
- F. Providing Referrals
 - 1. Provide appropriate referral information and document in MOWINS.