

Introduction to Risk Code Assignment

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Objectives

After completing this lesson, you will be able to:

- Describe the different uses of risk codes in WIC clinics.
- Identify the four groups of risk codes.
- Describe how risk codes are selected for each participant.

Overview

WIC is different from other food assistance programs. WIC participants must have a nutrition need or risk to qualify for WIC services. WIC's goal is to use nutritious foods and nutrition education to improve participants' health and growth.

WIC focuses on:

- Reducing complications during pregnancy.
- Decreasing the number of low birth weight and premature infants.
- Improving the growth and development of young children.
- Reducing iron deficiency anemia.
- Increasing the number of breastfeeding mothers.

The **nutrition risk factors** are key to WIC services. Each participant has a certification appointment to identify the nutrition risk factors. These risk factors are the basis for the individualized services that WIC offers.

In the WIC clinic, nutrition risk factors are used to:

- Certify that participants are eligible for WIC.
- Focus participants' nutrition education on their needs.
- Determine participants at high risk.
- Identify referrals needed for the participants.

The nutrition risk criteria are standardized throughout the United States. The risk criteria are reviewed and recommended by a national group of health professionals in the Health and Medicine Division of the National Academies of Science, Engineering, and Medicine (NASEM). The federal WIC office at the United States Department of Agriculture (USDA) requires State WIC programs to use these standardized risk codes.

What Are the Nutrition Risk Codes?

WIC's nutrition risk codes can be classified into four groups – anthropometric, biochemical/clinical/health/medical, dietary, and other risks. There are over 80 different risk codes.

Groups of Risk Codes	Description	Examples
Anthropometric (Risk Criteria #100-#150)	Based on a person's size	<ul style="list-style-type: none"> ▪ Height ▪ Weight ▪ Rate of growth
Biochemical/Clinical/Health Medical (Risk Criteria #200- #380)	Based on a blood test Based on a person's health	<ul style="list-style-type: none"> ▪ Anemia ▪ Blood lead level ▪ Chronic illness ▪ Birth problems ▪ Genetic conditions
Dietary (Risk Criteria #400- #428)	Based on feeding behaviors	<ul style="list-style-type: none"> ▪ Inappropriate nutrition practices
Other Risks (Risk Criteria #500- #900)	Based on conditions that present a risk	<ul style="list-style-type: none"> ▪ Homelessness ▪ Foster care ▪ Breastfeeding complications

Further information on medical and dietary risk codes can be found in the [Nutrition Assessment Module](#).

How are Risk Codes Selected for Participants?

Each participant is assigned nutrition risk codes during the certification appointment. These nutrition risk codes are selected based on the participant's medical data and health information. The WIC Information System is used to record the medical and health information and to select the risk code factors for each participant.

In the WIC Information System, there is a master list of all risk codes. Risk codes can be either auto-assigned by the system or CPA-assigned.

1. Assigned by the WIC Information System
 - System automatically selects the risk code from the master list.

- System selects the risk code based on the information the CPA enters in the fields of height, weight and blood or health information screens.
- It is very important for the CPA to enter all information correctly so that correct risk codes will be selected by the system.

Examples for #1:

The CPA enters the height and weight of a participant. The WIC Information System calculates that the person is underweight and selects the risk code for “Underweight”.

The CPA enters an answer to the question about whether a woman is smoking during pregnancy. If she smokes, the WIC Information System automatically selects the risk code, “Maternal Smoking”.

2. Assigned by the CPA

- Risk codes are selected from the master list by the CPA.
- The CPA selects the risk code based on information learned during certification.
- Risk codes are often CPA-assigned during the health and/or nutrition questionnaire assessments.

Examples for #2:

During the health history assessment, a woman indicates that she has Crohn’s Disease. When the CPA enters the Risk Code screen, the CPA will select the risk code for “*Gastro-Intestinal Disorders*”.

During the certification appointment, a mother tells the CPA that her baby was born with a heart defect and will need surgery next month. The CPA selects the risk code “*Genetic and Congenital Disorders*” in the Risk Code Assignment screen.

3. Final Review

- After the CPA and WIC Information System have selected risk codes, the CPA must do a final review of all nutrition risk codes to make sure the correct ones were selected. This is done by reviewing the risk codes in the ‘Risk Factor’ screen in the WIC Information System.

NOTE: CPA assigned risk codes can be added or removed on the “Risk Factor” screen. This step is very important to ensure that the risk codes identified by the CPA are correct and appropriate for the participant.

How are Risk Codes Selected for Participants?

The information used to assess participants for nutrition risks comes from several places.

1. Collected by WIC Staff

- WIC staff collects the information needed to assign the appropriate risk codes as part of the certification process.

Example: WIC staff measures and weighs the participant. This provides the information needed to assign an anthropometric risk code.

4. Historical Data

- For participants who are being recertified, WIC staff has information from previous certifications.

Example: The WIC Information System keeps track of the weight gain of a child over several visits to WIC. This information is used to determine if the child is growing at the appropriate rate for their age.

2. Information from a Health Care Provider

- WIC participants might bring information from their health care provider about their medical history which could be used to assign a risk code.

Example: An infant has a prescription for a medical formula which also lists information about the infant's medical diagnosis. The information is used to enter a clinical/medical risk.

3. Self-Reported by Participant

- WIC allows participants to self-report that their doctor has diagnosed them with a health condition.
- It is important to determine that a doctor has diagnosed a health condition, not that the participant just believes that she has the condition.
- It is not required to have a note from the doctor stating the diagnosis.
- Specific questions to ask the participant when they self-report a health condition include:
 - Are you seeing a doctor for the condition?
 - How long have you had this condition?
 - Can we contact your doctor to find out more about your condition? (Make sure to get a signed release of information.)
 - What type of medication are you taking for the condition?
 - Has your doctor prescribed a special diet for this condition?

Example: Following is an example of how the CPA can find out more information about a self-reported medical condition.

Scenario: Joan is at WIC to be enrolled as a pregnant woman. This is part of her conversation with the CPA during the Health History Assessment.

CPA: Joan, tell me about any medical or health problems you have been living with.

Jolene: Oh, well, I have had high blood pressure for a while now.

CPA: Okay, how has your doctor treated you for the high blood pressure?

Jolene: Well, my doctor really hasn't said anything about it.

CPA: I see. Tell me more about that.

Jolene: I haven't even talked to my doctor about it. I check my blood pressure when I pick up my vitamins at Walgreens, and I test my blood pressure on the machine while I am there.

CPA: Do they normally check your blood pressure when you visit your doctor?

Jolene: They do, but I haven't been there since I found out I was pregnant.

CPA: When are you scheduled to return?

Jolene: I have my first prenatal appointment this Thursday and plan to talk to my doctor about my blood pressure then.

CPA: I think it's great that you are being proactive about your health.

Jolene: Thanks, I really want this pregnancy to be healthy for the baby and me.

CPA: That is so good to hear! Tell me, do you have any other health or medical conditions that you have been diagnosed with?

Jolene: No, I have been very healthy overall.

CPA: It is great to hear you have been healthy, and I truly appreciate your willingness to share your concerns with me.

Result: Although Jolene was enrolled in WIC with other risk factors, she would not qualify for the risk code for *Hypertension*, because she was not diagnosed by a physician for the problem. **However:** If Jolene had said, "My doctor said at my last appointment that I have high blood pressure," then she would have qualified for the risk code for *Hypertension*.

"High-Risk" Risk Codes

All WIC participants are at nutritional risk, but some participants are at a greater risk than others for poor nutrition-related health outcomes. "High risk" in WIC designates participants who have a nutrition risk that puts them at high risk and for whom an Individual Nutrition Care Plan (INCP) is required.

Each state WIC agency is allowed to determine which nutrition risks are to be considered "high risk". The National Academies of Science, Engineering, and Medicine (NASEM) recommends

that nutrition risks that have a strong relationship to risk and potential to benefit from the services of the WIC Program be considered high risk.

For more information on High-Risk Individualized Nutrition Care Plans see [Section 6.6: High Risk Individual Nutrition Care](#) of the Minnesota Operations Manual (MOM) and the High Risk Counseling modules located on the [WIC New Staff Training](#) (NST) page in NST Phase IV.

Summary

Assigning the appropriate nutrition risk codes is key to WIC's service. A good assessment of the participant's health and nutrition status gives a more complete picture of their nutrition needs. When all risk codes are identified, it helps to focus the nutrition education on what will best assist the participant in reaching their goals and improving their health.

For more information and practice with Risk Codes complete the [Risk Code Practice Workbook](#).

Skill Check #1

1. What are the four groups of nutrition risk codes?
2. What are the 2 ways risk codes are assigned?
3. When are risk codes assigned by the CPA?
4. What information is used to assign risk codes?
5. What type of information requires careful questioning by the CPA?
6. Why is it important to review CPA-assigned risk codes?

Final Skill Check

1. Nutrition risk codes can help identify referrals that the participant may need.

True or False

2. Each state determines the risk code criteria used in that state.

True or False

3. There are four different groups of risk codes.

True or False

4. The requirement that all participants must have a risk code makes the WIC program different from other food assistance programs.

True or False

5. The four groups of nutrition risk codes are: anthropometric, medical, dietary, and other.

True or False

6. The risk code for “Lactose Intolerance” should be assigned for a child when the mother reports that the child seems to have difficulty digesting milk.

True or False

7. Only information collected by WIC staff can be used to assign anthropometric risk codes.

True or False

8. A high blood lead level is an example of a medical risk code.

True or False

9. Anthropometric risk codes are based on a person’s physical size.

True or False

10. Biochemical risk codes are based only on results from blood tests.

True or False

Module Answer Keys

Supplementary Materials

List of Risk Code Numbers and Names

Here is a list of all risk code numbers and their names as listed on the [MN WIC Risk Criteria-Exhibit 5-T](#). . For more detailed information about each specific risk code, refer to the '[WIC Risk Criteria](#)'.

100s

- 101 *Underweight (Women)*
- 103 *Underweight or at-Risk of Becoming Underweight (Infants and Children)*
- 111 *Overweight (Women)*
- 113 *Obese (Children 2-5 years old)*
- 114 *Overweight or At Risk of Overweight (Infants and Children)*
- 115 *High Weight-for-Length (Infants and Children <24 Months)*
- 121 *Short Stature or At Risk of Short Stature (Infants and Children)*
- 131 *Low Maternal Weight Gain*
- 133 *High Maternal Weight Gain*
- 134 *Failure to Thrive (FTT)*
- 135 *Slowed/Faltering Growth Pattern*
- 141 *Low Birth Weight and Very Low Birth Weight*
- 142 *Preterm or Early Term Delivery*
- 151 *Small for Gestational Age*
- 152 *Low Head Circumference*
- 153 *Large for Gestational Age*

200s

- 201 *Low Hemoglobin/Low Hematocrit*
- 211 *Elevated Blood Lead Levels*

300s

- 301 *Hyperemesis Gravidarum*
- 302 *Gestational Diabetes*
- 303 *History of Gestational Diabetes*
- 304 *History of Preeclampsia*

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- 311 *History of Preterm or Early Term Delivery*
- 321 *History of Spontaneous Abortion, Fetal or Neonatal Loss*
- 331 *Pregnancy at a Young Age*
- 332 *Short Interpregnancy Interval*
- 334 *Lack of or Inadequate Prenatal Care*
- 335 *Multifetal Gestation*
- 336 *Fetal Growth Restriction*
- 337 *History of Birth of a Large for Gestational Age Infant*
- 338 *Pregnant Woman Currently Breastfeeding*
- 339 *History of a Birth with Nutrition Related Congenital or Birth Defect*
- 341 *Nutrient Deficiency or Disease*
- 342 *Gastro-Intestinal Disorders*
- 343 *Diabetes Mellitus*
- 344 *Thyroid Disorders*
- 345 *Hypertension and Prehypertension*
- 346 *Renal Disease*
- 347 *Cancer*
- 348 *Central Nervous System Disorders*
- 349 *Genetic and Congenital Disorders*
- 351 *Inborn Errors of Metabolism*
- 352A *Infectious Disease- Acute*
- 352B *Infectious Disease- Chronic*
- 353 *Food Allergies*
- 354 *Celiac Disease*
- 355 *Lactose Intolerance*
- 356 *Hypoglycemia*
- 357 *Drug Nutrient Interactions*
- 358 *Eating Disorders (Women Only)*
- 359 *Recent Major Surgery, Trauma, or Burns*
- 360 *Other Medical Conditions*
- 361 *Mental Illnesses*

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- 362 *Developmental, Sensory, or Motor Disabilities Interfering with the Ability to Eat*
- 363 *Pre-Diabetes*
- 371 *Nicotine and Tobacco Use*
- 372 *Alcohol and Substance Use*
- 381 *Oral Health Conditions*
- 382 *Fetal Alcohol Spectrum Disorders*
- 383 *Neonatal Abstinence Syndrome (NAS)*

400s

- 401 *Failure to Meet Dietary Guidelines for Americans*
- 411 *Inappropriate Nutrition Practices for Infants*
- 425 *Inappropriate Feeding Practices for Children*
- 427 *Inappropriate Nutrition Practices for Women*
- 428 *Dietary Risk Associated with Complementary Feeding Practices*

500s

- 501 *Possibility of Regression*
- 502 *Transfer of Certification*

600s

- 601 *Breastfeeding Mother of Infant at Nutritional Risk*
- 602 *Breastfeeding Complications or Potential Complications (Woman)*
- 603 *Breastfeeding Complications or Potential Complications (Infant)*

700s

- 701 *Infant Up to 6 Months Old of WIC Mother or of a Woman Who Would Have Been Eligible During Pregnancy*
- 702 *Breastfeeding Infant of Woman at Nutritional Risk*

800s

- 801 *Homelessness*
- 802 *Migrancy*

900s

- 901 *Recipient of Abuse*

- 902 *Woman or Infant/Child of Primary Caregiver with Limited Ability to Make Feeding Decisions and/or Prepare Food*
- 903 *Foster Care*
- 904 *Exposure to Environmental Tobacco Smoke (ETS)*

Disease Names and Risk Codes

For this condition:

Use this Risk Code (RC):

AIDS	<i>RC 352B- Infectious Disease- Chronic</i>
Anencephaly	<i>RC 348- Central Nervous System Disorders RC 339- History of Birth with Nutrition Related Congenital or Birth Defect</i>
Anxiety Disorders	<i>RC 361 Mental Illnesses</i>
Attention-Deficit/Hyperactivity Disorder (ADHD)	<i>RC 361 Mental Illnesses</i>
Autism	<i>RC 362 – Developmental, Sensory or Motor Disabilities Interfering with the Ability to Eat</i>
Anemia	<i>RC 201- Low Hemoglobin/Low Hematocrit</i>
Anorexia Nervosa	<i>RC 358- Eating Disorders (Women only)</i>
Arthritis	<i>RC 360- Other Medical Conditions</i>
Asthma	<i>RC 360- Other Medical Conditions</i>
Baby Bottle Tooth Decay	<i>RC 381- Oral Health Conditions</i>
Bipolar Disorder	<i>RC 361- Mental Illnesses</i>
Bowel Resection	<i>RC 342- Gastro-Intestinal Disorders</i>
Brain Damage	<i>RC 362- Developmental, Sensory or Motor Disabilities Interfering with the Ability to Eat</i>
Branched Chain Ketoaciduria	<i>RC 351- Inborn Errors of Metabolism</i>
Bronchial Asthma	<i>RC 360- Other Medical Conditions</i>
Bronchiolitis	<i>RC 352A – Infectious Diseases- Acute</i>
Bulimia	<i>RC 358 – Eating Disorders (Women only)</i>
C-section	<i>RC 359 – Recent Major Surgery, Trauma or Burns</i>

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For this condition:	Use this Risk Code (RC):
Cancer	<i>RC 347 – Cancer</i>
Cardiorespiratory Diseases	<i>RC 360 – Other Medical Conditions</i>
Cardiovascular Disease/Heart Disease	<i>RC 360 Other Medical Conditions</i>
Celiac Disease	<i>RC 354- Celiac Disease</i>
Celiac Sprue	<i>RC 354 – Celiac Disease</i>
Cerebral Palsy	<i>RC 348 – Central Nervous System Disorders</i>
Cesarean	<i>RC 359- Recent Major Surgery, Trauma or Burns</i>
Cholecystitis	<i>RC 342- Gastro-Intestinal Disorders</i>
Cholelithiasis	<i>RC 342 – Gastro-Intestinal Disorders</i>
Cleft Lip or Palate	<i>RC 349- Genetic and Congenital Disorders</i> <i>RC 339 – History of Birth with Nutrition Related Congenital or Birth Defect</i>
Crohn’s Disease	<i>RC 342 – Gastro-Intestinal Disorders</i>
Cystic Fibrosis	<i>RC 360 – Other Medical Conditions</i>
Depression	<i>RC 361 – Mental Illnesses</i> <i>RC 902 – Woman or Infant/Child of Primary Caregiver with Limited Ability to Make Feeding Decisions and/or Prepare Food</i>
Developmental Disorders	<i>RC 362 – Developmental, Sensory or Motor Delays Interfering with the Ability to Eat</i>
Diabetes Mellitus (Type 1 or Type 2)	<i>RC 343 – Diabetes Mellitus</i>
Down Syndrome	<i>RC 349 – Genetic and Congenital Disorders</i>
Epilepsy	<i>RC 348 – Central Nervous System Disorders</i>
Failure to Thrive	<i>RC 134 – Failure to Thrive (FTT)</i>
Fetal Alcohol Syndrome	<i>RC 382 – Fetal Alcohol Spectrum Disorders</i>
Fetal Growth Restriction	<i>RC 336 – Fetal Growth Restriction</i>
Food Allergy	<i>RC 353 – Food Allergies</i>
Galactosemia	<i>RC 351 – Inborn Errors of Metabolism</i>
Gallbladder Disease	<i>RC 342 – Gastro-Intestinal Disorders</i>

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For this condition:	Use this Risk Code (RC):
Gestational Diabetes	<i>RC 302- Gestational Diabetes</i> <i>RC 303- History of Gestational Diabetes</i>
Gingivitis of Pregnancy	<i>RC 381 – Oral Health Conditions</i>
Gluten Enteropathy	<i>RC 354 – Celiac Disease</i>
Heart Disease	<i>RC 360 – Other Medical Conditions</i>
Hepatitis B/C/D	<i>RC 352B – Infectious Diseases - Chronic</i>
High Blood Pressure	<i>RC 345 – Hypertension and Prehypertension</i>
HIV	<i>RC 352B – Infectious Diseases - Chronic</i>
Hyperemesis Gravidarum	<i>RC 301- Hyperemesis Gravidarum</i>
Hypertension	<i>RC 345 – Hypertension and Prehypertension</i>
Hypoglycemia	<i>RC 356 – Hypoglycemia</i>
Inflammatory Bowel Disease	<i>RC 342 – Gastro-Intestinal Disorders</i>
Fetal Growth Restriction (FGR)	<i>RC 336 – Fetal Growth Restriction</i>
Juvenile Rheumatoid Arthritis (JRA)	<i>RC 360- Other Medical Conditions</i>
Juvenile Idiopathic Arthritis (JIA)	<i>RC 360- Other Medical Conditions</i>
Kidney Disease	<i>RC 346 – Renal Disease</i>
Lactose Intolerance	<i>RC 355 – Lactose Intolerance</i>
Elevated Blood Lead Levels	<i>RC 211 –Elevated Blood Lead Levels</i>
Liver Disease	<i>RC 342- Gastro-Intestinal Disorders or</i> <i>RC 352A – Infectious Disease- Acute (Hepatitis A/E)</i> <i>RC 352B- Infectious Disease- Chronic (Hepatitis B/C/D)</i>
Lupus Erythematosus	<i>RC 360 – Other Medical Conditions</i>
Malabsorption Syndrome	<i>RC 342 – Gastro-Intestinal Disorders</i>
Malnutrition	<i>RC 341 – Nutrient Deficiency or Disease</i>
Maple Sugar Urine Disease (MSUD)	<i>RC 351 – Inborn Errors of Metabolism</i>
Metabolic Diseases	<i>RC 351 – Inborn Errors of Metabolism</i>
Meningitis	<i>RC 352A – Infectious Diseases - Acute</i>

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For this condition:

Use this Risk Code (RC):

Meningocele	<i>RC 348 – Central Nervous System Disorders RC 339- History of Birth with Nutrition Related Congenital or Birth Defect</i>
Mentally Delayed	<i>RC 902 – Woman/Primary Caregiver with Limited Ability to Make Feeding Decisions and/or Prepare Food</i>
Multiple Sclerosis	<i>RC 348 – Central Nervous System Disorders</i>
Myelomeningocele	<i>RC 348 -Central Nervous System Disorders RC 339 – History of Birth with Nutrition Related</i>
Necrotizing Enterocolitis (NEC)	<i>RC 342 –Gastro-Intestinal Disorders</i>
Neural Tube Defects (NTD)	<i>RC 348 – Central Nervous System Disorders RC 339 – History of Birth with Nutrition Related Congenital or Birth Defect</i>
Non-tropical Sprue	<i>RC 354 – Celiac Disease</i>
Obsessive-Compulsive Disorder	<i>RC 361 Mental Illnesses</i>
Occulta	<i>RC 348 – Central Nervous System Disorders RC 339 – History of Birth with Nutrition Related Congenital or Birth Defect</i>
Parasites	<i>RC 352A – Infectious Diseases - Acute</i>
Pancreatitis	<i>RC 342 – Gastro-Intestinal Disorders</i>
Parkinson’s Disease	<i>RC 348 – Central Nervous Systems Disorders</i>
Periodontal Disease	<i>RC 381 – Oral Health Conditions</i>
Persistent Proteinuria	<i>RC 346 – Renal Disease</i>
Personality Disorder	<i>RC 361 Mental Illnesses</i>
Phenylketonuria (PKU)	<i>RC 351 – Inborn Errors of Metabolism</i>
PIH	<i>RC 345 – Hypertension and Prehypertension</i>
Pink worm	<i>RC 352A – Infectious Diseases- Acute</i>
PKU	<i>RC 351 – Inborn Errors of Metabolism</i>
Pneumonia	<i>RC 352A – Infectious Diseases- Acute</i>
Polycystic Kidney Disease	<i>RC 346 – Renal Disease</i>

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For this condition:	Use this Risk Code (RC):
Polycystic Ovary Syndrome	<i>RC 360- Other Medical Conditions</i>
Post-Traumatic Stress Disorder	<i>RC 361 Mental Illnesses</i>
Pregnancy Induced Hypertension	<i>RC 345 – Hypertension and Prehypertension</i>
Pre-eclampsia	<i>RC 345 – Hypertension and Prehypertension</i>
Projectile Vomiting	<i>RC 342- Gastro-Intestinal Disorder</i>
Protein Energy Malnutrition	<i>RC 341 – Nutrient Deficiency or Disease</i>
Proteinuria	<i>RC 346 – Renal Disease</i>
Rheumatoid Arthritis	<i>RC 360 – Other Medical Conditions</i>
Rickets	<i>RC 341 – Nutrient Deficiency or Disease</i>
Schizophrenia	<i>RC361 Mental Illnesses</i>
Scurvy	<i>RC 341 – Nutrient Deficiency or Disease</i>
Short Bowel Syndrome	<i>RC 342 – Gastro-Intestinal Disorders</i>
Sickle Cell Anemia	<i>RC 349 – Genetic and Congenital Disorders</i>
Small Bowel Enterocolitis	<i>RC 342 – Gastro-Intestinal Disorders</i>
Small Bowel Syndrome	<i>RC 342 – Gastro-Intestinal Disorders</i>
Small for Gestational Age	<i>RC 151 – Small for Gestational Age</i>
Spina Bifida	<i>RC 348 – Central Nervous System Disorders</i> <i>RC 339 – History of Birth with Nutrition Related Congenital or Birth Defect</i>
Tapeworm	<i>RC 352A – Infectious Diseases- Acute</i>
TB	<i>RC 352A – Infectious Diseases - Acute</i>
Thalassemia	<i>RC 349 - Genetic and Congenital Disorders</i>
Toxemia	<i>RC 345 – Hypertension and Prehypertension</i>
Tuberculosis	<i>RC 352A – Infectious Diseases- Acute</i>
Type 1 Diabetes	<i>RC 343 – Diabetes Mellitus</i>
Type 2 Diabetes	<i>RC 343 – Diabetes Mellitus</i>
Ulcerative Colitis	<i>RC 342 – Gastro-Intestinal Disorders</i>
Ulcers	<i>RC 342 – Gastro-Intestinal Disorders</i>

For this condition:

Use this Risk Code (RC):

Vitamin A Excess (Pre-conception or during pregnancy linked to a birth defect)

*RC 339 – History of Birth with Nutrition Related
Congenital or Birth Defect*

Zinc Deficiency (Pre-conception or during pregnancy linked to a birth defect)

*RC 339 – History of a Birth with a Nutrition
Related Congenital or Birth Defect*

References- Complete Listing of Hyperlinks:

Nutrition Assessment Module

(<https://www.health.state.mn.us/docs/people/wic/localagency/training/nutrition/nst/dietary.pdf>)

Section 6.6: High Risk Individual Nutrition Care Plans

(https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch6/sctn6_6.pdf)

WIC New Staff Training

(<https://www.health.state.mn.us/people/wic/localagency/training/nst.html>)

Risk Code Practice Workbook

(<https://www.health.state.mn.us/docs/people/wic/localagency/training/nutrition/nst/rcworkbook.pdf>)

Module Answer Keys

(<https://www.health.state.mn.us/people/wic/localagency/training/answerkeys.html>)

MN WIC Risk Criteria- Exhibit 5-T

(https://www.health.state.mn.us/docs/people/wic/localagency/program/mom/exhbts/ex5/5t_new.pdf)

WIC Risk Criteria

(<https://www.health.state.mn.us/people/wic/localagency/riskcodes/index.html#low1>)

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