

Pregnant/BF/PP Women Risk Criteria

New Hampshire WIC Program

Number	Risk	Definition	Priority
Anthropometric			
101	Underweight (Women) PG-[HP]	PG --Pre-pregnancy Body Mass Index (BMI) <18.5	1
		< 6 months postpartum--Breastfeeding/Non-breastfeeding women <i>pre-pregnancy</i> <u>or</u> <i>current</i> Body Mass Index (BMI) <18.5	1/6
		≥ to 6 months postpartum--Breastfeeding women <i>current</i> Body Mass Index (BMI) < 18.5	1
111	Overweight (Women)	PG --Pre-pregnancy Body Mass Index (BMI) ≥ 25.0	1
		< 6 months postpartum--Breastfeeding/Non-breastfeeding women <i>pre-pregnancy</i> Body Mass Index (BMI) ≥ 25	1/6
		≥ to 6 months postpartum--Breastfeeding women <i>current</i> Body Mass Index (BMI) ≥ 25	1
131	Low maternal weight gain PG-[HP]	PG Woman Only --Low maternal weight gain is defined as:	1
		<ol style="list-style-type: none"> 1) A low rate of gain such that in the 2nd and 3rd trimesters, singleton: Using the following cutoffs: <ul style="list-style-type: none"> ▪ Underweight woman gains < 1 pound/week or <28 pounds total wt; ▪ Normal weight woman gains < 0.8 pounds/wk or <25 pounds total wt; [twin gestation <37 pounds total wt gain] ▪ Overweight woman gains < 0.5 pounds/wk or <15 pounds total wt; [twin gestation <31 pounds total wt gain] ▪ Obese woman gains < 0.4 pounds/wk or < 11 pounds total wt; [twin gestation < 25 pounds total wt gain] or 2) Low weight gain at any point in pregnancy, such that: Using an Institute of Medicine based weight gain grid, a pregnant woman's weight plots at any point beneath the bottom line of the appropriate weight gain range for her respective pre-pregnancy weight category. 	
----- <i>For PG w/ triplets overall wt gain of 50# @ rate of 1.5#/week 1st-3rd trimester.</i> -----			

CDC's definition of trimesters: 1st trimester: 0-13 weeks; 2nd trimester: 14-26 weeks; 3rd trimester: 27-40 weeks

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Anthropometric

133	High maternal weight gain	<p>PG--High maternal weight gain is defined as:</p> <p>1) A high rate of gain such that in the 2nd and 3rd trimesters, singleton: <u>Using the following cutoffs:</u></p> <ul style="list-style-type: none"> ▪ Underweight woman gains > 1.3 pounds/wk or >40 pounds total wt ▪ Normal weight woman gains > 1 pound/wk or >35 pounds total wt; [twin gestation >54 pounds total wt] ▪ Overweight woman gains > 0.7 pounds/wk or >25 pounds total wt; [twin gestation >50 pounds total wt gain] ▪ Obese woman gains > 0.6 pounds/wk or >20 pounds total wt; [twin gestation >42 pounds total wt] <p style="text-align: center;">or</p> <p>2) High weight gain at any point in pregnancy, such that: Using an Institute of Medicine based weight gain grid, a pregnant woman's weight plots at any point above the top line of the appropriate weight gain range for her respective pre-pregnancy weight category.</p>	1
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Breastfeeding women/Non-breastfeeding women (most recent pregnancy): based on *pre-pregnancy* Body Mass Index (BMI), as follows:

<u>Pre-pregnancy Weight groups</u>	<u>Definition</u>	<u>Cut-off Value</u>
Underweight	BMI <18.5	>40 lbs
Normal Weight	BMI 18.5 to 24.9	>35 lbs
Overweight	BMI 25.0 to 29.9	>25 lbs
Obese	BMI ≥30.0	>20 lbs

Biochemical

201	Low Hematocrit/ Low Hemoglobin [HP]	<p>PG women</p> <p><u>1st trimester</u> <u>2nd trimester</u> <u>3rd trimester</u></p>	<p>Hgb(g/dl)/Hct(%)</p> <p><11.0/33.0 <10.5/32.0 <11.0/33.0</p>	1/6
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Breastfeeding/Non-Breastfeeding women	
<u>Age</u>	<u>Hgb(g/dl)/Hct(%)</u>
12 years to < 15 years	<11.8/35.7
15 years to < 18 years	<12.0/35.9
≥ 18 years	<12.0/35.7

211	Lead poisoning	Blood lead level ≥ 5 ug/deciliter within the past 12 months.	1/6
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Clinical/Health Medical

301	*Hyperemesis gravidarum	Severe nausea and vomiting during pregnancy which may cause more than 5% weight loss and fluid electrolyte imbalances.	1/6
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Clinical/Health Medical

302	*Gestational diabetes	GDM is defined as any degree of glucose/carbohydrate intolerance w/ onset or first recognition during pregnancy.	1/6
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303	*History of gestational diabetes	Any history of diagnosed gestational diabetes.	1/6
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304	*History of preeclampsia	History of diagnosed preeclampsia	1/6
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311	History of preterm or early term delivery	History of preterm and/or early term delivery is defined as follows: <ul style="list-style-type: none"> • Preterm: Delivery of an infant born $\leq 36 \frac{6}{7}$ weeks • Early Term: Delivery of an infant born $\geq 37 \frac{0}{7}$ and $\leq 38 \frac{6}{7}$ weeks. 	1/6
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312	History of low birthweight	Any history of birth of an infant weighing ≤ 5 lbs. 8 oz. (≤ 2500 grams).	1/6
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321	History of spontaneous abortion, fetal or neonatal loss	Any history of a fetal death (death at ≥ 20 weeks gestation), a neonatal death (death within 0-28 days of life) or 2 or more spontaneous abortions (spontaneous termination of gestation at <20 weeks gestation or 500 grams).	1/6
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331	Young age PG-[HP]	Conception ≤ 20 years of age. Most recent pregnancy for BF/PP women.	1/4
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332	Short interpregnancy interval	Conception before 18 months postpartum. Most recent pregnancy for BF/PP women.	1/6
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334	Inadequate prenatal care PG-[HP]	Prenatal care beginning after the 1st trimester (after 13th week), or first prenatal visit in the third trimester (7-9 months) or: <table border="1" style="margin-left: 20px;"> <thead> <tr> <th><u>Weeks of gestation</u></th> <th><u>Number of prenatal visits</u></th> </tr> </thead> <tbody> <tr> <td>14-21</td> <td>0 or unknown</td> </tr> <tr> <td>22-29</td> <td>1 or less</td> </tr> <tr> <td>30-31</td> <td>2 or less</td> </tr> <tr> <td>32-33</td> <td>3 or less</td> </tr> <tr> <td>34 or more</td> <td>4 or less</td> </tr> </tbody> </table>	<u>Weeks of gestation</u>	<u>Number of prenatal visits</u>	14-21	0 or unknown	22-29	1 or less	30-31	2 or less	32-33	3 or less	34 or more	4 or less	1/6
<u>Weeks of gestation</u>	<u>Number of prenatal visits</u>														
14-21	0 or unknown														
22-29	1 or less														
30-31	2 or less														
32-33	3 or less														
34 or more	4 or less														

335	Multifetal gestation PG-[HP]	More than one fetus in a current pregnancy. Most recent pregnancy for BF/PP women.	1/6
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336	*Fetal growth restriction	Fetal Growth Restriction (FGR) is defined as a fetal weight < 10 th percentile for gestational age.	
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337	*History of birth of a large-for-gestational-age infant	In the most recent pregnancy , or any history of giving birth to an infant ≥ 9 pounds (≥ 4000 grams)	1/6
338	Currently breastfeeding	Breastfeeding woman now pregnant.	1/6
339	*History of birth with nutrition related congenital or birth defect	A woman who has given birth to an infant who has a congenital or birth defect linked to inappropriate nutritional intake, e.g., inadequate zinc, folic acid, excess vitamin A. Any history of birth with nutrition-related congenital or birth defect. BF/PP women In the most recent pregnancy.	1/6
341	*Nutrient Deficiency or Disease	Diagnosis of clinical signs of nutritional deficiencies or a disease caused by insufficient dietary intake of macro and micro nutrients. Diseases include, but are not limited to, Protein Energy Malnutrition, Scurvy, Rickets, Beri Beri, Hypocalcemia, Osteomalacia, Vitamin K Deficiency, Pellagra, Xerophthalmia, and iron deficiency.	1/6
342	*Gastro-intestinal disorders	Disease(s) or condition(s) that interferes with the intake or absorption of nutrients. The conditions include, but are not limited to: Gastroesophageal reflux disease (GERD), peptic ulcers, post-bariatric surgery, small bowel syndrome, inflammatory bowel disease, including ulcerative colitis or Crohn's disease, liver disease, pancreatitis, and biliary tract (gallbladder) disease.	1/6
343	*Diabetes mellitus	A metabolic disease characterized by inappropriate hyperglycemia resulting from defects in insulin secretion, insulin action or both.	1/6
344	*Thyroid disorders	Thyroid dysfunctions caused by the abnormal secretion of the thyroid hormones. Conditions include but are not limited to: hyperthyroidism (high levels of thyroid hormone secreted), hypothyroidism (insufficient levels of thyroid hormone produced or severe iodine deficiency), congenital hyperthyroidism/hypothyroidism and postpartum thyroiditis.	1/6
345	*Hypertension & pre-hypertension	Includes chronic HTN and pregnancy-induced HTN (PIH) (PIH=Preeclamsia, eclamsia and gestational HTN) HTN $\geq 140/\geq 90$ mm Hg; Pre-HTN consistently $\geq 120/\geq 80$ to $\leq 139/\leq 89$ mm Hg	1/6
346	*Renal disease	Any renal disease including pyelonephritis and persistent proteinuria, but excluding urinary tract infections (UTI) involving the bladder.	1/6
347	*Cancer	The current condition, or the treatment for the condition, must be severe enough to affect nutritional status.	1/6
348	*Central nervous system disorders	Conditions which affect energy requirements, ability to feed self, or alter nutritional status metabolically, mechanically, or both. Includes, but is not limited to: epilepsy, cerebral palsy (CP), neural tube defects (NTDs), such as spina bifida, Parkinson's disease, and multiple sclerosis (MS).	1/6

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Number	Risk Clinical/Health Medical	Definition	Priority
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, muscular dystrophy , thalassemia major, sickle cell anemia (not sickle cell trait).	1/6
351	*Inborn errors of metabolism (IEM)	Gene mutations or gene deletions that alter metabolism in the body, including but not limited to: <ul style="list-style-type: none"> • <u>Amino Acid Disorders</u>-i.e. phenylketonuria (PKU), maple syrup urine disease homocystinuria, tyrosinemia, hypermethioninemia, and histidinemia; • <u>Carbohydrate Disorders</u> i.e. fructoaldolase deficiency, galactosemia, glycogen storage diseases; • <u>Fatty Acid Oxidation Defects</u>-i.e. medium-chain acyl-CoA dehydrogenase (MCAD); • <u>Organic Acid Metabolism Disorders</u> –i.e. propionic acidemia, glutaric aciduria, methylmalonic acidemia; • <u>Lysosomal Storage Diseases</u>; • <u>Mitochondrial Disorders</u>; • <u>Peroxisomal Disorders</u>; and • <u>Urea Cycle Disorders</u>. <p style="text-align: right;">See: http://rarediseases.info.nih.gov/GARD</p>	1/6
352a	*Infectious diseases- Acute	A disease present w/in the last 6 months which is characterized by a single or repeated episode of relatively rapid onset and short duration. Including, but not limited to: Hepatitis A, Hepatitis E, Meningitis (bacterial/viral), Parasitic infections, Listerosis, Pneumonia, Bronchitis--3 episodes in last 6 months. See: http://www.nlm.nih.gov/medlineplus/infections.html	1/6
352b	*Infectious diseases- Chronic	Conditions likely lasting a lifetime and require long-term management of symptoms. Including, but not limited to: HIV (Human Immunodeficiency Virus), AIDS (Acquired Immunodeficiency Syndrome), Hepatitis D, Hepatitis B, Hepatitis C. See: http://www.nlm.nih.gov/medlineplus/infections.html	1/6
353	*Food allergies	An adverse immune health effects arising from a specific immune response that occurs reproducibly on exposure to a given food. Most common food allergies are: cow’s milk and foods containing cow’s milk, eggs, peanuts, tree nuts, fish, crustacean shellfish, wheat and soy.	1/6
354	*Celiac disease	An autoimmune disease precipitated by the ingestion of gluten (a protein in wheat, rye, and barley) that result in damage to the small intestine and malabsorption of the nutrients from food. Also known as: Celiac Sprue, Gluten-sensitive Enteropathy, Non-tropical Sprue.	1/6
355	*Lactose intolerance	Diagnosis of intolerance or symptoms well documented by the competent professional authority. Documentation should indicate that the ingestion of lactose causes symptoms consistent with lactose intolerance (i.e. gas, abdominal pain, bloating, and/or diarrhea) and the avoidance of such lactose containing products eliminates them.	1/6

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356	*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.	1/6
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.	1/6
358	*Eating disorders	Diagnosis or evidence of such disorders documented by the CPA	1/6
359	Recent major surgery, physical trauma, burns	Major surgery (including C-sections), trauma or burns severe enough to compromise nutritional status. Any occurrence within the past two months may be self-reported, more than two 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.	1/6
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. 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.)	1/6
361	*Depression	Presence of clinical depression, including postpartum depression. See potentially related RC 902 (for woman and any infant or children). See related RC 357.	1/6
362	Disabilities interfering w/ the ability to eat	Developmental, sensory or motor disabilities that restrict the ability to chew or swallow food or require tube feeding to meet nutritional needs. Includes but not limited to: minimal brain function, feeding problems due to developmental delays or disabilities (pervasive development disorder including autism), birth injury, head trauma, brain damage, other disabilities.	1/6
371	Nicotine and Tobacco Use	Any smoking of tobacco products, including but not limited to cigarettes, pipes, cigars, electronic nicotine delivery systems, hookahs, smokeless tobacco, or nicotine replacement therapies. See related RC 904.	1/6
372	Alcohol and Substance Use	PG-Woman --Any alcohol use, illegal substance use and/or abuse of prescription medications; marijuana use in any form. BF/PP Woman — <u>High Risk Drinking</u> : Routine consumption of ≥ 8 drinks per week or ≥ 4 drinks on any day. <u>Binge Drinking</u> : Routine consumption of ≥ 4 drinks within 2 hours; or any illegal substance use and/or abuse of prescription medications, marijuana use in any form. Note: A serving or standard sized drink is: 1 can of beer (12 fluid oz.); 5 oz. wine; and 1 ½ fluid ounces 80 proof distilled spirits (e.g. gin, rum, vodka, whiskey, cordials or liqueurs). See potentially related RC 902.	1/6
381	*Oral Health Conditions	Dental caries (cavities/tooth decay) is a common chronic infectious transmittable disease from bacteria metabolizing sugars to acid which demineralize the tooth structure. Periodontal disease is an infection that affects the bone and tissue that support the teeth. There are 2 stages: gingivitis (milder/reversible) and periodontitis (more destructive). Tooth loss, ineffectively replaced teeth or oral infection which impairs the ability to eat food in adequate quantity or quality	1/6

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Number Risk Definition Priority

401 ~Presumed~ Failure to meet the Dietary Guidelines
NOTE: May be assigned as a RC only after a complete assessment for RC 427.
 May use this if assessing dietary needs. The Dietary Guidelines identify the **minimum** daily amount and/or **maximum** in fat, sugar or salt. 4/6

If assigning this RC there should not be any other RC assigned.

Dietary Guidelines 2020 [Dietary Guidelines for Americans, 2020-2025](#)

	Equivalents	Minimum Daily Amounts				
		1800	2000	2200	2400	2600
	Calories					
Grains	ounce	6**	6**	7**	8**	9**
Vegetables	cup	2.5	2.5	3	3	3.5
Fruit	cup	1.5	2	2	2	2
Milk	cup	3	3	3	3	3
Protein foods	ounces	5	5.5	6	6.5	6.5
Oils (tsp/gms)	tsp	5tsp/(24gm)	6tsp/(27gm)	6tsp/(29gm)	6tsp/(31gm)	7tsp/(34gm)
Maximum Daily Amounts						
Fat		25-35% of total calories (50-101 gm)				
Fat gms		50-70	55.5-78	61-85.5	67-93	72-101
Sat'd fat		< 10% total calories				
Added sugars		< 10% total calories				
Limit on kcal for other uses	calories	140	240	250	320	350
Sodium		< 2300 mg				

***Need for upper minimum level to be determined by CPA, based on dietary assessment.

	14-18 years			19-30 years			31-50 years		
	1 st trimester	2 nd trimester	3 rd trimester	1 st trimester	2 nd trimester	3 rd trimester	1 st trimester	2 nd trimester	3 rd trimester
PREGNANT									
Calories	1800	2200	2400	2000	2400	2600	1800	2200	2400
(Extra calories)	(+0)	(+340)	(+452)	(+0)	(+340)	(+452)	(+0)	(+340)	(+452)
LACTATING	14-18 years			19-30 years			31-50 years		
BF months	0-6m		7-12m	0-6m		7-12m	0-6m		7-12m
Calories	2200		2200	2400		2400	2200		2200
(Extra calories)	(+330)		(+400)	(+330)		(+400)	(+330)		(+400)

Equivalents
Grains: 1 ounce = 1 slice of bread, 1 oz. or 1 cup of ready-to-eat cereal, 1/2 c. of cooked cereal, rice, or pasta
** Whole grains: at least 1/2 of grain choices
Vegetables: 1 c. vegetables cooked or chopped raw, 1 c. of vegetable juice, 2 c. of raw leafy vegetables, 1/2 cup dried vegetables
Fruit: 1 c. of chopped, cooked, or canned fruit, 1 c. of fruit juice; 1 medium fruit or 1/2 cup dried fruit
Dairy: 1 c. of milk or yogurt, 1 1/2 oz. of natural or 2 oz. of processed cheese = 1 cup
Protein foods: 1 oz. cooked lean meat, poultry, or fish. 1/4 c. cooked dry beans, 1 egg, 1 tbs. peanut butter, 1/2 ounce of nuts or seeds = 1 ounce of lean meat.
Oils: 1 tsp. vegetable oil, margarine, mayo etc. (1 Tsp= 5gms) 1 tbsp. LF mayo; 2 TBSP light salad dressing = 5 grams
Sugar: i.e. cookie, pie, candy, donut, cake, sodas, etc (1 tsp sugar=4gms)

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Number Dietary	Risk	Definition	Priority
427	Inappropriate Nutrition Practices for Women INPW, such as:		4/6
[427.1]	INPW Dietary supplements w/ harmful consequences	Intake of dietary supplements when ingested in excess of recommended doses may be toxic or have harmful consequences: <ul style="list-style-type: none"> • Single or multiple vitamins; • Mineral supplements and • Herbal or botanical supplements /remedies/teas (ie:Blue cohosh/ penny royal). • 	
[427.2]	INPW Diet low in calories or nutrients, <u>or</u> intake or absorption following bariatric surgery.	Consuming a diet very low in calories and/or essential nutrients; or impaired caloric intake or absorption of essential nutrients. <ul style="list-style-type: none"> • Strict vegan diet; • Low carbohydrate diet, high protein; • Macrobiotic diets; and Any other diet restricting calories and or essential nutrients.	
[427.3]	INPW Pica	Current or recent craving for or ingestion of nonfood items including, but not limited to: ashes, baking soda, burnt matches, carpet fibers, chalk, cigarettes, clay, dust, large quantities of ice and/or freezer frost, paint chips, soil, starch (laundry and cornstarch).	4/6
[427.4]	INPW Inadequate vitamin/ mineral supplementation	Participant not routinely taking a dietary supplement recognized as essential by national public health policy makers because diet alone cannot meet nutrient requirements. i.e. <ul style="list-style-type: none"> • PG--Consumption of < 27mg of supplemental iron/day. • PG/BF--Consumption of < 150 micrograms of supplemental Iodine/day. • PP-- Consumption 400 mcg of folic acid foods and/or supplements/day. 	
[427.5]	INPW Ingesting foods potentially contaminated with pathogenic microorganisms <u>PG WOMEN ONLY</u>	Potentially harmful foods: <ul style="list-style-type: none"> • Raw fish or shellfish, including oysters, clams, mussels and scallops; • Refrigerated smoked seafood, unless it is an ingredient in a cooked dish, such as a casserole; • Raw or undercooked meat or poultry; • Hot dogs, luncheon meat (cold cuts), fermented and dry sausage and other deli-style meat or poultry products unless reheated to steaming hot; • Refrigerated pate or meat spreads; • Unpasteurized milk or foods containing unpasteurized milk; • Soft cheeses such as: feta, Brie, Camembert, blue-veined cheeses and Mexican style cheese such as: queso blanco, queso fresco, or Panela unless labeled "made with pasteurized milk"; • Raw or undercooked eggs or foods containing raw or lightly cooked eggs including certain salad dressings, cookie and cake batters, sauces, and beverages such as eggnog; • Raw sprouts (alfalfa, clover, and radish); or • Unpasteurized fruit or vegetable juices. 	

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Other Risks			
502	Transfer (nutrition risk unknown)	Person with current valid Verification of Certification (VOC) document from another State or local agency.	1/6
503	Presumptive Eligibility	PREGANANT WOMAN ONLY --Meets WIC income eligibility standards but has not yet been evaluated for nutrition risk, for a period of up to 60 days.	4
601	Breastfeeding women of infant at nutritional risk	A breastfeeding woman whose breastfed infant has been determined to be at nutritional risk. Must be the same priority as infant.	1,2, or 4
602	Breastfeeding complications	A breastfeeding woman with any of the following complications or potential complications for breastfeeding: a) Severe breast engorgement b) Recurrent plugged ducts c) Mastitis (fever or flu-like symptoms with localized breast tenderness) d) Flat or inverted nipples e) Cracked, bleeding or severely sore nipples f) Age greater than or equal to 40 years g) Failure of milk to come in by 4 days postpartum h) Tandem nursing (breastfeeding two siblings who are not twins)	1
801	Homelessness	A woman, infant or child who lacks a fixed/regular nighttime residence; or whose primary nighttime residence is a supervised publicly/private operated shelter (including a welfare hotel, a congregate shelter, or a shelter for victims of domestic violence) designed to provide temporary living accommodations; an institution that provides a temporary residence for individuals intended to be institutionalized; a temporary accommodation of not more than 365 days in the residence of another individual; or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.	4/6
802	Migrancy	Women who are members of families which contain at least one individual whose principal employment is in agriculture on a seasonal basis, who has been so employed within the last 24 months, and who establishes, for the purposes of such employment, a temporary abode.	4/6
901	Recipient of abuse	Battering/ violent physical assault within past 6 months as self-reported, or as documented by a social worker, health care provider or on other appropriate documents, or as reported through consultation with a social worker, health care provider, or other appropriate personnel.	4/6

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Other Risks			
902	Woman with limited ability (*mental illness including clinical depression and Intellectual disability as diagnosed by physician or psychologist)	Woman who <i>is assessed</i> to have a limited ability to make appropriate feeding decisions and/or prepare food. Examples may include individuals who are: <ul style="list-style-type: none"> • less than or equal to 17 years of age, • *mental illness including clinical depression • Physical disability to a degree which impairs ability to feed infant/child or limits food preparation abilities. • *Intellectual disability • Documentation or self-report of currently using or having a history of misuse of alcohol, use of illegal substances, use of marijuana, or misuse or prescription medications <p style="text-align: center;">See potentially related RC 361, 372.</p>	4/6
903	Foster care	Entering the foster care system during the previous six months or moving from one foster care home to another foster care home during the previous six months.	4/6
904	Environmental tobacco smoke [ETS] exposure	Exposure to smoke from tobacco products inside closed areas, like the home, place of childcare, etc. This definition also includes exposure to the aerosol from electronic nicotine delivery systems. See related RC 371.	1/6

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