ARIZONA WIC FORMULA LIST
FY 2005

(Intended for use by AZ WIC Nutritionists/RD's only in combination with other resource materials)

Formula Name	WRITTEN APPROVAL ?		DESCRIPTION	INDICATIONS	COMPARABLE FORMULAS	PACKAGING		
	Yes	*No*				***Conc.***	***Powder***	***Ready-to-Use***
Alimentum Advance (Powder) Manufacture – Ross Form – Powder Category – M UPC Code: Type: Exempt	X		Complete formula for allergy and sensitivity to intact protein (milk or soy), lactose intolerance, protein and fat malabsorption, malnutrition, or cystic fibrosis; contains amino acids. Sucrose/tapioca, and MCT/safflower/soy oil; 20 cal/oz. **NOTE**: Powdered Alimentum differs from RTU in that it contains corn derivatives.	Store or pharmacy special order. For infants with special nutritional needs.	Nutramigen. Pregestimil	N/A	16 oz. Can 6 cans/case	See below
Alimentum Advance (RTU) Manufacture – Ross Form – Powder Category – 1 UPC Code: Type: Exempt	X		Complete formula for allergy and sensitivity to intact protein (milk or soy), lactose intolerance, protein and fat malabsorption, malnutrition, or cystic fibrosis: contains amino acids, sucrose/tapioca, and MCT/safflower/soy oils; 20 cal/oz. Corn-free.	Store or pharmacy special order. For infants with special nutritional needs.	Nutramigen Lipil	N/A	See above	8 oz. can 24 case 32 oz. Can 6/case
Alitra Q Manufacture – Ross Form – Powder Category – I UPC Code: Type: Med Food	X		A complete formula for patients with impaired GI function: contains increased glutamine (protein), soyl/lactalbumin hydrolysate, cornstarch/sucrose/fructose and safflower/fractionated coconut oils; 30 cal/oz.	Pharmacy special order. Vanilla.	Criticare HN, Vital HN, Peptamen Vivonex, T.E.N., Vivonex Plus	N/A	2.68 oz. Packet 24 pkts/case	N/A
Boost with Fiber (formerly Sustacal with Fiber) Manufacture – Mead Johnson Form – RTU Category – A UPC Code: Type: Med Food	X		Fiber containing supplement or tube feeding providing 30 cal/oz.	Pharmacy special order. Available in vanilla, chocolate.	Ensure with Fiber, Nutren with Fiber, FiberSource, NuBasics with Fiber.	N/A	N/A	8 oz. can 24 can/case
Boost High Protein (formerly Sustacal liquid) Manufacture – Mead Johnson Form – Powder Category – 1 UPC Code: Type: Med Food	X		High Protein oral supplement for volume restriction or weight gain. Lactose-free, contains casein/soy, corn syrup/sucrose, and corn oil: 30 cal/oz.	Pharmacy special order, Available in vanilla, chocolate, strawberry. Powdered formula available in vanilla.	NuBasics VHP, Ensure HP	N/A	1 lb. Can 6 cans/case	8 oz. can 24/case 32 oz. 6/case (vanilla)

M=Metabolic I=Infant P=Pediatric A=Adult

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Boost Plus (formerly Sustacal Plus) Manufacture – Form – Powder Category – 1 UPC Code: Type: Med Food	X		Complete high calorie, low residue, lactose free, nutrition in limited volume; 45 cal/oz.	Pharmacy special order. Vanilla/chocolate/strawberry.	Ensure Plus, Ensure Plus HN, Resource Plus, Nutren 1.5, NuBasic Plus, Comply	N/A	N/A	8 oz can 24 cans/case
Casec Manufacture – Mead Johnson Form – Powder Category – I, P, A UPC Code: Type: Med Food	X		Powdered protein supplement (calcium caseinate) for children and adults; 17 cal/TBSP.	Pharmacy special order. Not to be used alone. Unflavored	ProMod	N/A	10 oz. can 6/case	N/A
Citrotein Manufacture – Novartis (formerly Sandoz) Form – Pow. Category – A UPC Code: Type: Med Food	X		Fruit-flavored, high-protein, complete formula which is low in fat and residue, lactose free and acceptable on a clear liquid diet: contains egg white, sucrose/maltodextrin, and soy oil; 170 cal/8.45 oz.	Pharmacy special order. Orange, Punch flavor.	Forta Drink	N/A	14.16 oz can 12/case	N/A
Manufacture - Form – Category – UPC Code: Type:								

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Compleat Modified Manufacture – Novartis (formerly Sandoz) Form – RTU Category – A UPC Code: Type: Med Food	X		Complete formula made from blenderized foods with fiber, lactoce free, isotonic, contains beef/caseinate, maltodextrin/vegetable/fruit and beef/canola oil.	Pharmacy special order	Enrich, FiberSource, Jevity, Sustacal	N/A	N/A	250 ml can 24 case
Comply Manufacture – Mead Johnson Form – RTU Category – A UPC Code: Type: Med Food	X		High calorie, complete formula for persons with restricted fluid intake and increased energy needs: contains caseinates, maltodextrin, canola/MCT/soy oils; 45 cal/oz	Pharmacy special order. Available unflavored	Nutren, Ensure Plus HN, Resource plus	N/A	N/A	8 oz. can 24/case
Criticare HN Manufacture – Mead Johnson Form – RTU Category – A UPC Code: Type: Med Food	X		High-nitrogen, low sodium and lactose-free elemental formula for persons with Crohn's disease, shortgut syndrome, CF, pancreatic; contains casein hdrolysate, maltodextrin/corn starch, and safflower/fatty acids; 31.3 cal/oz.	Pharmacy special order. For adults and children age 4 and older. Unflavored	Vital HN, Peptamen, Vivonex T.E.N., Alitraq, Vivonex Plus.	N/A	N/A	8 oz bottle 24 btls./case
Deliver 2.0 Manufacture – Mead Johnson Form – RTU Category – A UPC Code: Type: Med Food	X		High calorie, high nitrogen formula for persons with fluid or volume restrictions or hypermetabolic: contains caseinates, corn syrup, and soy/MCT oils; 60 cal/oz.	Pharmacy special order. Vanilla	Nepro, Two Cal HN, Magacal, Nutren 2.0.	N/A	N/A	8 oz. can 24 cans/case
Duocal Manufacture – Scientific Hospital Form – Powder Category – I,P, A UPC Code: Type: Med Food	X		For person requiring an energy supplement with protein, electrolyte, and/or fluid restriction. High calorie, protein and lactose free, carbohydrate and fat supplement. 4.9 cal/g. 42 cal/level tbsp.	Pharmacy special order. Not to be used alone.	None	N/A	14 oz. can 4 cans/case	N/A

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Enfamil Human Milk Fortifier Manufacture – Mead Johnson Form – Powder Category – I UPC Code: Type: Rebate	X		For low birth weight infants who are receiving breast milk. Contains no iron. Increases levels of protein, calories, calcium, phosphorus, and other nutrients: contains whey, corn syrup solids. 3.5 calories per 0.025 oz packet (1 packet added to 25 ml. Of breast milk yields 24 Kcal.oz.)	Non-grocery store pharmacy special order. Uses as a supplement to breast milk. If greater than 25 packets are used daily, monitor for evidence of excessive vitamin A and vitamin D.	Similac Natural Care	N/A	100-.025 oz. Packet/carton 2 cartons/case	N/A
EnfaCare Lipil Manufacture – Mead Johnson Form – Powder Category – I UPC Code: Type: Exempt	X		For premature infants with increased caloric, calcium and phosphorus needs; contains corn syrup, cow's milk, and soy/coconut/safflower oils; 22 cal/oz	For short-term use only, to avoid over-nutrition.	Similac Neosure	N/A	12.8 oz can 6/case	3 oz. bottles 48/case
Enfamil AR Lipil Manufacture – Mead Johnson Form – Powder Category – 1 UPC Code: Type: Exempt	X		Contains DHA and ARA. For infants with gastroesophogeal reflux. Contains lactose, rice starch, maltodextrin as CHO which increases viscosity, 20 cal/oz.	Not designed for pre-term infants	None	N/A	N/A	32 oz. can 6 cans/case
Enfamil with Iron Manufacture – Mead Johnson Form – Pow, Conc, RTU Category – I UPC Code: Type: Rebate		X	Adequate for most healthy term infants: contains lactose, casein lactalbumin, and soy/coconut oils (corn oil in powder); 20 cal/oz.	Preferred AZ. WIC Program infant formula due to rebate.	All listed under – NON-REBATED MILK BASED @: Similac with Iron; Carnation Good Start.	13 oz. can 12 can/case	14.3 oz. can 6/case	8 oz can 16/case 32 oz. cans 6 cans/case
Enfamil Lipil with Iron Manufacture – Mead Johnson Form – Pow, Conc, RTU Category – I UPC Code: Type: Rebate	X		Contains DHA and ARA. Adequate for most healthy term infants: contains lactose, casein lactalbumin, and soy/coconut oils (corn oil in powder); 20 cal/oz	Preferred AZ. WIC Program infant formula due to rebate.	Similac Advanced with Iron	13 oz can 12 cans/case	12.9 oz can 6/case	8 oz can 16/case 32 oz. cans 6 cans/case
Enfamil Lipil (Low Iron) Manufacture – Mead Johnson Form – Pow, Conc, RTU Category – I UPC Code: Type: Rebate	X		For infants with documented medical need for low iron: contains whey and cow's milk, lactose, and palm/soy/coconut and sunflower oil; 20 cal/oz.	Medical condition does not include: gas bloating, constipation, diarrhea, or formula intolerance.	Similac (low iron)	13 oz can 12 cans/case	14.3 oz can 6 cans/case	8 oz. can 24/case 32 oz. can 6/case

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Enfamil LactoFree-Lipil Manufacture – Mead Johnson Form – Pow, Conc, RTU Category – 1 UPC Code: Type: Rebate		X	Contains DHA and ARA. For lactose-intolerant persons who can digest cow's milk protein; contains cow's milk, corn syrup, and palm/soy/coconut/sunflower oils; 20 cal/oz.	Preferred AZ. WIC Program infant formula due to rebate.	Lactose reduced formulas. Prosobee, Alsoy, Nutramigen, Pregestimil, Alimentum, Similac Lacto-free	13 oz can 12 case	12.9 oz can 6/case	32 oz. can 6/case
Enfamil Next Step Lipil Manufacture – Mead Johnson Form – Pow. Category – P UPC Code: Type: Exempt	X		Milk based, iron fortified formula for healthy toddlers that are eating a mixed diet; contains DHA/ARA, palm/soy/sunflower/coconut oils, corn syrup; 20 cal/oz.	For children age 1 to 3.	Toddlers Best	N/A	12 oz. can 4 cans/case	N/A
Enfamil Next Step Prosobee Lipil Manufacture – Mead Johnson Form – Powder Category – P UPC Code: Type: Exempt	X		Soy protein-based, iron-fortified formula for healthy toddlers who cannot tolerate cow's milk but eating a mixed diet. Contains DHA/ARA, soy protein, palm/soy/coconut/sunflower oils corn syrup/sucrose; 20 cal/oz.	For children 1 to 3.	Toddler's Best Soy-Based	N/A	12 oz. can 4/case	
Enfamil Premature Lipil (20 kcal) (low iron) Manufacture – Mead Johnson Form – RTU Category – I UPC Code: Type: Rebate	X		Contains DHA and ARA. For low birth weight infant; up to 7-1/2 lbs; contains whey and cow's milk protein (60:40) corn syrup/lactose, MCT/soy/coconut oils; 20 cal/oz. **Low iron.**	Non-grocery store pharmacy special order. Complete formula for infants	Premature formulas: Similac Special Care (20 cal), Similac NeoSure Advance (22 cal)	N/A	N/A	3 oz. nursery bottles 48/case
Enfamil Premature Lipil (20 Kcal) (with Iron) Manufacture – Mead Johnson Form – RTU Category – I UPC Code: Type: Rebate	X		Contains DHA and ARA. For low birth weight infants; up to 7-1/2lbs; contains whey and cow's milk protein (60:40), corn syrup/lactose, MCT/soy/coconut oils; 20 cal/oz.	Non-grocery store pharmacy special order.	Premature formula: Similac Special Care (20 cal.), Similac NeoSure Advance (22 cal)		N/A	3 oz nursery bottles 48/case

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Enfamil Premature Lipil (24 kcal) ***(low Iron)*** Manufacture – Mead Johnson Form – RTU Category – I UPC Code: Type: Rebate	X		Contains DHA and ARA. For low birth weight infant; up to 7-1/2 lbs.: contains whey and cow's milk protein (60:40) corn syrup/lactose, MCT/soy/coconut oils; 24 cal/oz. ***Low iron***	Non-grocery store pharmacy special order.	Premature formulas; Similac Special Care (20 cal.) Similac NeoSure (22 cal)		N/A	3 oz. nursery bottles 48/case
Ensure Manufacture – Ross Form – Pow., RTU Category – A UPC Code: Type: Med Food	X		Complete, lactose-free, low-sodium, low-cholesterol, gluten free, low residue formula for patients with medical, surgical, psychological stress; contains soy/caseinates, and corn syrup/caseinates, and corn/soy oils; 31.3 cal/oz.	Pharmacy special order. Come in 7 flavors; Straw, butter pecan, vanilla, chocolate. For children over 4 years and adults	Sustacal Basic, Nutren 1.0, Resource	N/A	N/A	8 oz can 24/case 32 oz. cans or bottles 6/case
Ensure Fiber w/Nutraflora FOS (formerly Enrich) Manufacture –Ross Form – RTU Category – A UPC Code: Type: Med Food	X		High-fiber, lactose-free, complete formula for persons with medical surgical or psychological stress with intolerance to low residue feedings: contains caseinates/soy. Cornstarch/sucrose, and corn oil. 31.3 cal/oz.	Pharmacy special order. For children over 4 years and adults. Vanilla and chocolate.	Sustacal with Fiber, Nutren with Fiber, Replete with Fiber.	N/A	N/A	8 oz. can 24/case
Ensure High Protein Manufacture – Ross Form – RTU Category – A UPC Code: Type: Med Food	X		Complete high nitrogen, lactose free, low residue formula for patients with increased nitrogen needs and/or fluid restriction; contains soy/caseinates, corn syrup/sucrose, and corn oil; 28.8 cal/oz.	Pharmacy special order. For children over 4 years and adults. Chocolate, banana, berry and vanilla.	Sustacal Basic, Nutren 1.0, Resource	N/A	N/A	8 oz can 24 cans/case
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Ensure Plus Manufacture – Ross Form – RTU Category – A UPC Code: Type: Med Food	X		Complete high calorie, lactose-free, low sodium, low residue, gluten free, low cholesterol Formula; contains soy/caseinates, corn syrup/sucrose, and corn oil; 45 cal/oz.	Pharmacy special order. For children over 4 years and adults. Vanilla, chocolate, strawberry, butter pecan.	NuBasic Plus, Comply, Resource Plus, Sustacal Plus, Nutren 1.5	N/A	N/A	8 oz. can 24/case
E028 Extra Manufacture – Scientific Hospital Form – Powder Category – P UPC Code: Type: Med Food	X		Synthetic amino acids comparable to human milk, elemental, complete formula for persons with GI impairment: contains free amino acids, corn syrup, and canola/sunflower/MCT oils; 26 cal/oz prepared 1.5 with water.	Pharmacy special order. Nutritional profile for adults.	Peptamen, Vital HN, Vivonex Plus, Vivonex T.E.N.	N/A	100 gm. Packet 10 pkts/case	N/A
Fibersource Manufacture – Novartis (formerly Sandoz) Form – RTU Category – A UPC Code: Type: Med Food	X		Complete lactose and gluten free formula with fiber for person with abnormal bowel functions, extended inactivity; contains caseinates, cornstarch/soy fiber, and MCT/canola oils; 36 cal/oz.	Pharmacy special order	Jevity, Glucerna, Nutren with Fiber	N/A	N/A	250 ml can 24 cans/case
Fibersource HN Manufacture – Novartis (Formerly Sandoz) Form – RTU Category – A UPC Code: Type: Med Food	X		High nitrogen complete formula with fiber for persons with abnormal bowel functions and increase protein needs: contains caseinates, cornstarch/soy fiber, and MCT/canola oils; 36 cal/oz.	Pharmacy special order.	Jevity, Ensure Plus HN	N/A	N/A	250 ml can 24 cans/case
Forta Drink Manufacture – Ross Form – Pow Category – A. UPC Code: Type: Med Food	X		Flavored, high protein, high calorie, low fat, lactose free incomplete formula; contains whey, sucrose; 85 cal/ ¼ cup powder	Pharmacy special order. Orange or fruit punch. For people requiring additional protein and supplemental nutrition; or low-fat diet; or clear liquid diet.	Citrotein	N/A	16.8 oz. can 4 cans/case	N/A
Forta Shake Manufacture – Ross Form – Powder Category – A UPC Code: Type: Med Food	X		Flavored, high calorie, high protein, milk based, low-fat incomplete formula; contains nonfat milk, sucrose/lactose; 140 cal/ 2 cup	Pharmacy special order. Vanilla, Strawberry, Eggnog. (Chocolate is 1 lb, 2.7 oz can)	Carnation instant Breakfast (no sugar added), Delmark Instant Breakfast.	N/A	16.6 oz can 4 cans/case	N/A

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Glucerna Manufacture – Ross Form – RTU Category – A UPC Code: Type: Med Food	X		Nutritionally complete formula for children and adults with abnormal glucose tolerance (e.g. diabetes hyperglycemia); low carb, high fat, gluten and lactose-free; contains caseinates, cornstarch/fructose, and safflower/soy oils; 30 cal/oz.	Pharmacy special order. Vanilla	Similar to DiabetiSource AC, Choice DM, Glytol	N/A	N/A	8 oz can 24 cans/case
Isocal Manufacture – Mead Johnson Form – RTU Category – A UPC Code: Type: Med Food	X		Isotonic lactose-free, nutritionally complete, low residue feeding with ultra-trace minerals for persons with increased nutrient needs; contains soy/caseinates, maltodextrin, and and MCT/soy oils; 31 cals per oz	Pharmacy special order. Unflavored.	Osmolite, Isosource, Nutren 1.0	N/A	N/A	8 oz. can 24 case 32 oz can 6/case
Isocal HN Manufacture – Mead Johnson Form – RTU Category – A UPC Code: Type: Med Food	X		High nitrogen, isotonic, nutritionally complete low residue formula for persons needing high protein, high calorie diets; contains caseinates, corn syrup, and soy/MCT oils; 31 cal/oz.	Pharmacy special order. Unflavored	Osmolite HN, Isosource HN, Nutren 1.0	N/A	N/A	8 oz can 24 case 32 oz. can 6/case
Similac Isomil Manufacture – Ross Form – Conc, Pow, RTU Category – I UPC Code: Type: Non Rebate	X		For lactose or milk protein intolerance: contains corn syrup/sucrose, soy protein, coconut/soy oil; 20 cal/oz.	Use with lactose intolerance, diarrhea, or galactosemia, Not recommended for very low birth weight infants.	Alsoy	13 oz can 24 cans/case	12.9 oz can 6 cans/case	8 oz.can 24 case/cans (8 oz size being disc.)
Similac Isomil Advance Manufacture – Ross Form – Conc, Pow, RTU Category – I UPC Code: Type: No Rebate	X		Contains DHA and ARA. For lactose or milk protein intolerance: contains corn syrup/sucrose, soy protein, coconut/soy oil; 20 cal/oz.	Use with lactose intolerance, diarrhea, or galactosemia, Not recommended for very low birth weight infants.	Prosobee Lipil, Alsoy	13 oz can 12 cans/case	12.9 oz 6.case	8 oz. can 4-6 pks/case 32 oz. bottle 6/case

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Similac Isomil DF Manufacture – Ross Form – RTU Category – I and P UPC Code: Type: Exempt	X		Short term soy feeding with fiber for diarrhea in infants 6 months and older, and toddlers; contains soy protein, corn syrup/sucrose, and soy/coconut oils; 20 cal/oz.	Do not use for infants with constipation or infants less than 6 months of age.	None for infants or toddlers. For adults, see Fibersource	N/A	N/A	8 oz can 24 cans/case 32 oz can 6/case
Isosource Manufacture – Novartis (formerly Sandoz) Form – Category – UPC Code: Type: Med Food	X		Lactose, gluten and fiber free, complete formula for persons with increased nutrient needs; contains soy/caseinates, cornstarch, MCT, Canola oils: 36 cal/oz	Pharmacy special order	Isocal, Osmolite, Nutren 1.0	N/A	N/A	250 ml can 24/case
Isosource HN Manufacture – Novartis (formerly Sandoz) Form – RTU Category – A UPC Code: Type: Med Food	X		Lactose, gluten and fiber free, complete formula for persons with elevated protein and calorie needs: contains soy/caseinates, cornstarch, and MCT/canola oils; 36 cal/oz.	Pharmacy Special Order	Isocal HN, Osmolite HN, Nutren 1.0. Isotein HN	N/A	N/A	250 ml can 24 case
Isotein HN Manufacture – Novartis (formerly Sandoz) Form – Pow. Category – A UPC Code: Type: Med food	X		High protein, high calorie, lactose free isotonic, low cholesterol, sodium and potassium; Flavored, complete formula; contains lactalbumin, maltodextrin, and soy oil. 35 cal/oz.	Pharmacy special order.	Isocal HN, Osmolite HN, Nutren1.0. IsoSource HN	N/a	2.9oz. packet 36 pkts/case	N/A
Jevity Manufacture – Ross Form – RTU Category – A UPC Code: Type: Med Food	X		High nitrogen, isotonic, lactose free, complete formula with fiber and iron for persons with increased nutrient need and/or reduced calorie requirements; contains caseinates, cornstarch, and safflower, canola/MCT oil: 31.3 cal/oz	Pharmacy special order. Acceptable for children over 4 years and adults (FNS-268)	Fibersource, Glucerna, Nutren with Fiber.	N/A	N/A	8 oz can 24/case 32 oz can

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Kindercal Manufacture – Mead Johnson Form – RTU Category – P UPC Code: Type: Med Food	X		Isotonic, lactose free nutritionally Complete formula for supplement or sole source of nutrition: contains whey, sucrose, corn sunflower/MCT oils; 32cal/oz.	For children 1 to 10. Vanilla, chocolate Retail Only	Pedisure, Resource Just for Kids	N/A	N/A	8 oz. Can 24 cans/case
Lipisorb Liquid Manufacture – Mead Johnson Form – RTU Category – A UPC Code: Type: Med Food	X		Modular, high calorie, lactose-free fat supplement for persons with fat malabsorption: contains MCT/corn oil (powder); 40 cal/oz	Used for HIV,CF, inflammatory bowel disease, liver disease, pancreatic. Vanilla	Portagen	N/A	N/A	8 oz. Can 24 can/case
Magnacal Renal Manufacture – Mead Johnson Form – RTU Category – A UPC Code: Type: Med Food	X		High calorie, complete formula for volume restricted or hypomatabolic person. Contains caseinates, maltodextrin/sucrose and soy oil; 59 cal./oz	Pharmacy special order. Vanilla honey graham	Deliver 2.0, Nepro, Two Cal HN, Nutren 2.0	N/A	N/A	8 oz. Can 24 can/case
Maxamum XP Manufacture – Scientific Hospital Supplies Form – Powder Category – M,P, UPC Code: Type: Med Food	X		Phenylanlanine-free, complete formula for maternal Phenyketonurics: contains free amino acids, carbohydrates, vitamins, minerals and trace elements	Pharmacy special order unflavored/orange	PKU 3	N/A	454 gm/can 4 cans/case	N/A
Microlipid Manufacture – Mead Johnson Form – RTU Category – A UPC Code: Type: Med Food	X		A modular fat supplement for person needing an extra source of calories from fat. Nutritionally incomplete fat (safflower oil emulsion) source; contains safflower/polyglycerol/soy oils; 129 cal/oz	Pharmacy special order. Intended as supplement to other food/formula	MCT oil	N/A	N/A	3.1 oz/ btl. 48/case

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Moducal Manufacture – Mead Johnson Form – Pow Category – I,P,A UPC Code: Type: Med Food	X		Modular carbohydrate supplement (maltodextrin) for children and adults with difficulties digesting carbohydrates; contains 100% maltodextrin; 30 cal/Tbsp.	Pharmacy special order. Intended as additive to other foods/drinks	Polycose	N/A	13 oz. Can 6 cans/case	N/A
Nepro Manufacture – Ross Form – RTU Category – A UPC Code: Type: Med Food	X		Moderate protein low electrolyte, low fluid, lactose free high calorie formula for dialyzed patients with chronic or acute renal failure; contains caseinates, corn starch/sucrose and safflower/soy oils; 59 cal/oz.	Pharmacy special order. Vanilla, cherry, butter pecan	Deliver 2.0, Two Cal HN, Magnacal, Nutren 2.0	N/A	N/A	8 oz can 24 cans/case
Neocate Manufacture – Scientific Hospital Form – Pow Category – I UPC Code: Type: Exempt Formula	X		All free amino acids, lactose free, complete infant formula for allergies or intolerance; contains free amino acids, corn syrup and safflower/coconut/soy oils; 20 cal/oz.	Pharmacy special order	Alimentum, Pregetimil, Nutramigen	N/A	14 oz. Can 4/case	N/A
Neocate One+ (**Not** same as Neocate) Manufacture – Scientific Hospital Form – Pow only (RTU version is Pediatric E028) Category – P UPC Code: Type: Med Food	X		Lactose gluten, soy and cow's milk free, elemental, complete formula for children ages 1-10 years with allergies or digestive disorders; contains all fee amino acids, maltodextrin/sucrose and MCT/canola oils; 30 cal/oz prepared.	Pharmacy special order. Bland tasting	Vivonex Pediatric	N/A	3.5 oz packet 10/case 40-100g packets make 540 oz.	See Pediatric E028
Nestle Good Start Supreme-DHA & ARA Manufacture – Nestle Form – Conc, Pow, RTU Category – I UPC Code: Type: Non-Rebate	X		Contains DHA and ARA. Iron-fortified, nutritionally complete infant formula with partially hydrolyzed 100% whey protein. 20 cal/oz	For infants who do not tolerate rebated formulas	Enfamil Lipil, Similac Advance	13 oz can 12/case	12 oz. Can 6/case	32 oz. Can 6/case

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Nestle Good Start Essentials Soy (formerly Alsoy) Manufacture – Nestle Form – Conc, Pow, RTU Category – I UPC Code: Type: Non Rebate	X		For lactose or milk protein intolerance; contains soy protein, tapioca dextrin/sucrose, and soy oil; 20 cal/oz.	For infants with cow's milk intolerance	Prosobee, Isomil	13 oz. Can 12/case	14 oz. Can 6/case	32 oz. Can 6/case
Nestle Good Start 2 Essentials (Formerly Carnation Follow-up) Manufacture – Nestle Form – Conc, Pow, RTU Category – I UPC Code: Type: Non rebate	X		Developed for infants 4-12 months and older who are eating solid foods; contains Cow's Milk, palm/soy/coconut/safflower oils, and corn syrup/lactose, iron fortified; 20 cal/oz.	Not recommended for infants less than 6 mos. old. For infants who do not tolerate rebated formulas.	Enfamil with Iron, Similac with Iron	13 oz. Can 12/case	12 oz. Can 6/case	32 oz can 6/case
Nestle Good Start Supreme (Formerly Carnation Good Start Manufacture – Nestle Form – Conc, Pow, RTU Category – I UPC Code: Type: Non Rebate	X		Adequate for most health term infants; contains palm/soy/coconut/safflower oils, whey hydrolysate, lactose; 20 cal/oz.	Intolerance to rebated formulas	Enfamil with Iron, Similac with Iron	13 oz. Can 12/case	12 oz. Can 6/case	32 oz can 6/case
NuBasics Manufacture – Nestle (formerly Clintec) Form – RTU Category – A UPC Code: Type: Med Food	X		High calorie; lactose, gluten and cholesterol free; Low sodium, low residue, kosher, flavored, complete formula; contains caseinates, corn syrups/sucrose, and canola/corn/soy oils; 30 cal/oz.	Pharmacy special order. Vanilla/Choc/Straw.	Ensure, Resource, Sustacal Basic	N/A	N/A	250 ml can 24/case
Manufacture – Form – Category – UPC Code: Type:								

M=Metabolic I=Infant P=Pediatric A=Adult

Formula Name	WRITTEN APPROVAL ?		DESCRIPTION	INDICATIONS	COMPARABLE FORMULAS	PACKAGING		
	Yes	*No*				***Conc.***	***Powder***	***Ready-to-Use***
Enfamil Nutramigen Lipil Manufacture – Mead Johnson Form – Conc, Pow, RTU Category – I UPC Code: Type: Exempt	X		Contains DHA and ATA. Complete formula for allergy or insensitivity to intact protein (milk or soy) and lactose, food allergies, persistent diarrhea, or other intestinal disturbances; contains protein hydrolysate, corn syrup and palm/soy/coconut/sunflower oils;20 cal oz.	Store or pharmacy special order. Complete formula for infants	Alimentum Advance	13 oz can 12/case	16 oz. Can 6/case	32 oz. Can 6/case
Nutren 1.5 Manufacture – Nestle (Formerly Clintec) Form – RTU Category – A UPC Code: Type: Med Food	X		High calorie, isotonic, lactose and gluten free, low residue, kosher, complete formula for persons with increased calories and /or fluid restriction: contains caseinates, maltodextrin, and MCT/canola/corn/soy oils; 45 cal/oz.	Pharmacy special order. Vanilla or unflavored.	Sustacal Plus, Ensure Plus, Ensure Plus HN, Resource Plus, Comply, Ultralan	N/A	N/A	250 ml can 24/case
Nutren 2.0 Manufacture – Nestle (Formerly Clintec) Form – RTU Category – A UPC Code: Type: Med Food	X		High calorie, isotonic, lactose and gluten free, low residue, kosher, complete formula for persons with very high calorie needs or fluid restriction: contains caseinates, maltodextrin/sucrose, and MCT/canola/corn/soy oils; 45 cal/oz.	Pharmacy special order. Vanilla	Deliver 2.0 Nepro, Two Cal HN, Magnacal	N/A	N/A	250 ml can 24/case
Nutren Fiber Manufacture – Nestle (Formerly Clintec) Form – RTU Category – A UPC Code: Type: Med Food	X		Isotonic, lactose and gluten free, kosher complete formula for persons who require increased calories and nutrients; prevents constipation and diarrhea and diarrhea in tube fed patients; 30 cal/oz.	Pharmacy special order. Vanilla or unflavored.	Jevity, FiberSource	N/A	N/A	250 ml. Can 24/case
NutriVent Manufacture – Nestle (Formerly Clintec) Form – RTU Category – A UPC Code: Type: Med Food	X		Low carbohydrate, lactose and gluten free, low residue, kosher, complete formulas for person who need increased calorie and protein, but decreased respiratory quotient (pulmonary disease): contains caseinates, cornstarch, and safflower/canola/MCT oils; 31.3 cal/oz.	Pharmacy special order	Pulmocare, Respator	N/A	N/A	250 ml. Can 24/case

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Formula Name	WRITTEN APPROVAL ?		DESCRIPTION	INDICATIONS	COMPARABLE FORMULAS	PACKAGING		
	Yes	*No*				***Conc.***	***Powder***	***Ready-to-Use***
Osmolite Manufacture – Ross Form – RTU Category – A UPC Code: Type: Med Food	X		Complete, isotonic, lactose free, low residue, low electrolyte liquid for people with fat maldigestion/malabsorption; contains soy/caseinates, cornstarch and safflower/canola/MCT oils; 31.3 cal/oz.	Pharmacy special order. For children over 4 years and adults on electrolyte-restricted diets	Nutren 1.0, Isocal	N/A	N/A	8 oz can 24 cans/case 32 0z can 6 cans/case
Osmolite 1 Cal Manufacture – Ross Form – RTU Category – A UPC Code: Type: Med Food			Same as Osmolite (above) plus increased protein; for persons above who are intolerant to hypersomolar feedings; 31.3 cal/oz	Pharmacy special order. For children over 4 years and adults.	IsoSource HN, Isocal HN	N/A	N/A	8 oz can 24 cans/case 32 0z can 6 cans/case
Pediasure Manufacture – Ross Form – RTU Category – P UPC Code: Type: Med Food	X		Lactose and gluten free, isotonic, complete formula for supplement or sole source of nutrition; contains whey, sucrose, safflower/soy/coconut oils; 30 cal/oz	For children 1 to 10 years. Vanilla, Banana, Straw, Choc and Orange.	Kindercal, Resource Just for Kids	N/A	N/A	8 oz can 24 cans/case
Pediasure with Fiber Manufacture – Ross Form – RTU Category – P UPC Code: Type: Med Food	X		Nutritionally complete, lactose free supplement with fiber. 20% of fat is MCT oil; 30 cal/oz.	Vanilla	Kindercal w/fiber			
Pediatric E028 Manufacture – Scientific Hospital Form – Pow. only (RTU version is Pediatric E028) Category – P UPC Code: Type: Med Food	X		Lactose, gluten, soy, and cow's milk free, elemental, complete formula for children ages 1-10 years with allergies or digestive disorders; contains all free amino acids, maltodextrin/sucrose and MCT/canola oils; 30 cal/oz prepared	Pharmacy special order. Bland-testing.	Vivonex Pediatric	N/A	See Neocate 1+	8 oz can 27/case
Peptamen 1.5 Manufacture – Nestle (formerly Clintec) Form – RTU Category – A UPC Code: Type: Med Food	X		High glutamine, isotonic, lactose and gluten free, low residue, elemental, peptide-based, complete formula for person with impaired GI function: contains whey, maltodextrin/ cornstarch, and MCT/sunflower/soy oils; 45 cal/oz	Pharmacy special order. Vanilla or unflavored	Criticare HN, Vital HN, Vivonex T.E.N., Vivonex Plus	N/A	N/A	250 ml can 24/case

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Formula Name	WRITTEN APPROVAL ?		DESCRIPTION	INDICATIONS	COMPARABLE FORMULAS	PACKAGING		
	Yes	*No*				***Conc.***	***Powder***	***Ready-to-Use***
Periflex Manufacture – Scientific Hospital Form – Pow Category – M.P UPC Code: Type: Med Food	X		Phenylalanine-Free, complete formula for children nwith PKU: contains free amino acids, corn syrup/sucrose, and canola/safflower/MCT oils; 30 cal/oz. (1:4 dilution)	Pharmacy special order. Flavoring available.	None for children. Lofenelac, Analog Xp for infants.	N/A	16 oz can 4/case	N/A
PKU 3 Manufacture – Mead Johnson Form – Pow Category – M,P,A UPC Code: Type: Med Food	X		Phenylalanine-free, complete formula for maternal Phenylketonurics: contains free amino acids, vitamins, minerals and trace elements.		Maxamum XP	N/A	500 gm/can 2 cans/case	
Polycose Manufacture – Ross Form – Pow, RTU Category – I, P, A UPC Code: Type: Med Food	X		Modular carbohydrates supplement for increased calories such as persons with restrictions in fat, protein and electrolytes; contains glucose; 23 cal/Tbsp. Powder or 60 cal/oz liquid.	Pharmacy special order. Is not a complete food. Do not administer undiluted to infants.	Moducal	N/A	12.3 oz can 6 cans/case	Is not available to WIC
Pregestimil Manufacture – Mead Johnson Form – Pow, RTU Category – I UPC Code: Type: Exempt	X		Complete Formula for infant with severe malabsorption problems; contains hydrolyzed casein, corn syrup/tapioca, and MCT/corn oils; 20 0r 24 cal/oz	Pharmacy special order	Nutramigen, Alimentum, Neocate	N/A	1 lb. Can 6/case	3 oz. Bottle 48/case
ProMod Manufacture – Ross Form – Pow Category – I, P, A UPC Code: Type: Med Food	X		Modular protein supplement for patients with increased protein needs: contains whey protein and soy lecithin, 28 cal/scoop	Pharmacy special order. Not for infant use. Not to be used alone.	Casec	N/A/	9.7 oz. Can 6/cans/case	N/A
Prosobee Lipil Manufacture – Mead Johnson Form – Conc. Pow, RTU Category – I UPC Code: Type: Rebate	X		Contains DHA and ARA. For lactose, milk protein, or sucrose intolerance; contains corn syrup, soy protein, and coconut/soy oils; 20 cal/oz	Use for vegetarian, cow's milk sensitive, or lactose intolerant persons, anti diarrhea treatment.	All listed under a NON-REBATED SOY BASED©: Isomil; Alsoy, lactose and sucrose free; Isomil SF	13 oz can 12/case	12.9 oz can 6/case	8 oz can 6-4 pk/case 32 oz can 6/case

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	Yes	*No*				***Conc.***	***Powder***	***Ready-to-Use***
ProViMin Manufacture – Ross Form – Pow Category – I UPC Code: Type: Med Food	X		Metabolic product. Protein/iron supplement for infants and children with chronic diarrhea/malabsorption disorders requiring fat and carbohydrate restrictions; 9.4 cal/Tbsp	Pharmacy special order. Intended as supplement to diet.	None with vitamins and minerals.	N/A	5.3 oz can 6 cans/case	N/A
Pulmocare Manufacture – Ross Form – RTU Category – A UPC Code: Type: Med Food	X		Complete high fat, low carbohydrate supplement designed for the dietary management of pulmonary insufficiency, contains caseinates, sucrose/cornstarch, and canola/MCT oils; 45 cal/oz.	Pharmacy special order. For children age 4 years and adults. Vanilla and Strawberry.	NutriVent, Respalor	N/A	N/A	8 oz can 24 can/case
Resource Just for Kids Manufacture – Novartis (Formerly Sandoz) Form – RTU Category – A UPC Code: Type: Med Food	X		High calorie, lactose free, low renal solute load, flavored, complete formula for children ages 1-10 years; contains caseinates, corn starch, and sunflower/soy/MCT oils; 30 cal/oz	Pharmacy special order. Vanilla, Chocolate, Strawberry	Pediasure	N/A	N/A	8 oz box (Tetra-Brik 7) 27 boxes/case
Resource Plus Manufacture – Novartis (formerly Sandoz) Form – RTU Category – A UPC Code: Type: Med Food	X		High calorie, lactose and gluten free complete formula; contains caseinates/soy, corn starch/sucrose, corn oil; 45 cal/oz	Pharmacy special order.	Sustacal Plus, Ensure Plus, Nutren 1.5, NuBasics Plus, Comply	N/A	N/A	8 oz box 27/case
Respalor Manufacture – Mead Johnson Form – TRU Category – A UPC Code: Type: Med Food	X		High calorie and nitrogen, lactose free, complete formula for persons with respiratory distress, COPD: contains caseinates, corn syrup/sucrose and canola/MCT/soy oils; 45 cal/oz	Pharmacy special order	NutriVent, Pulmocare	N/A	N/A	8 oz can 27/case
RCF (Ross Carb Free) Manufacture – Ross Form – Conc Category – M, I, P, UPC Code: Type: Exempt	X		Metabolic food. No carbohydrate, low iron, soy formula; for patients with intractable diarrhea or unable to tolerate any other formula; contains soy protein, soy/coconut oils; std. Dilution: 20 cal/oz	Is not a complete formula. Carbohydrate must be added before feeding. Approved for infants.	None	13 oz can 12 cans/case	N/A	N/A

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	Yes	*No*				***Conc.***	***Powder***	***Ready-to-Use***
Similac w/Iron Manufacture – Ross Form – Con, Pow, RTU Category – I UPC Code: Type: Non rebate	X		Adequate for most healthy term infants; contains coconut/soy/corn oil, lactose, nonfat milk powder; 20 cal/oz.	Intolerance to rebated formulas	Enfamil with Iron	13 oz can 24 cans/case	12.9 oz can 6-case	8 oz can 4-6pk/case 32 oz bottle 6/case
Similac Lactose Free Manufacture – Ross Form – Conc, Pow, RTU Category – I UPC Code: Type: Non- Rebate	X		For lactose intolerant persons who can digest cow's milk protein; contains cow's milk protein. Corn syrup sucrose, and soy/coconut/oils 20 cal. Oz	Us for mild diarrhea, cramping, bloating, gas.	Lactofree, Prosobee, Alsoy, Nutramigen, Pregestimil, Alimentum	13 oz can 12 cans/case	14 oz can 6 cans/case	N/A
Similac Lactose Free Advance Manufacture – Ross Form – Conc, Pow, RTU Category – I UPC Code: Type: Non-Rebate	X		Contains DHA and ARA. For lactose-intolerant persons who can digest cow's milk protein, corn syrup, sucrose, and soy/coconut oils; 200 ca/oz.	Use for mild diarrhea, cramping, bloating gas	Prosobee Lipil, Almemtum Advance, Nutraigen Lipil	N/A	N/A	32 oz bottle 6/case
Similac Natural Care Advance (low iron Human Milk Fortifier) Manufacture – Ross Form – RTU Category – I UPC Code: Type: Non Rebate	X		For low birth weight infants who are receiving breast milk. Contains DHA and ARA. Contains no iron. Improves total intake of energy, protein, vit/min: contains nonfat milk, whey hydrolyzed cornstarch, lactose, soy/coconut oils; not to be used as sole source of nutrients.	Non-grocery store pharmacy special order. Use as supplement to breast milk.	Enfamil Human Milk Fortifier	N/A	NA	4 oz nursery bottles 24 btls/case
Similac NeoSure Advance Manufacture – Ross Form – Powder Category – I UPC Code: Type: Exempt	X		Contains DHA and ARA. For premature infants and increased caloric, calcium and phosphorous needs; contains corn syrup, cow's milk and soy/coconut/safflower oils; 24 cal/oz.	For short-term use only to avoid over-nutrition	EnfaCare	N/A	12.8 oz can 6 cans/case	N/A
Similac Special Care Advance w/Iron 24 Manufacture – Ross Form – RTU Category – I UPC Code: Type: None Rebate	X		Contains DHA and ARA. For premature infants with increased caloric; calcium and phosphorous needs; contains corn syrup, cow's milk and soy/coconut/safflower oils; 24 cal/oz.	Non grocery store pharmacy special order.	Enfamil Premature with Iron (24 cal)	N/A	N/A	4 oz nursery bottles 24 btls/case

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Formula Name	WRITTEN APPROVAL ?		DESCRIPTION	INDICATIONS	COMPARABLE FORMULAS	PACKAGING		
	Yes	*No*				***Conc.***	***Powder***	***Ready-to-Use***
Similac (low Iron) Manufacture – Ross Form – Conc, Pow, RTU Category – I UPC Code: Type: Non Rebate	X		For documented medical need for low iron (2); contains cow's milk, lactose, and soy/coconut oils; 20 cal/oz	A medical condition does not include: gas, bloating, constipation, diarrhea, or formula intolerance.	Enfamil (low Iron)	13 oz can 12/case	14.1 oz can 6 cans/case	8 oz can 24/case 32 oz can 6/case
Similac 24 w/Iron Manufacture – Ross Form – Conc, Pow, RTU Category – I UPC Code: Type: Non Rebate	X		For growing, low birth weight infants up to 8 lbs. This is not a premature formula. 24 cal/oz.	Special hospitalorder	Enfamil 24	N/A	N/A	4 oz bottles 24/case
Similac PM 60/40 Manufacture – Ross Form – Pow Category – I UPC Code: Type: Exempt	X		A low mineral, low iron formula for infants with hypercalcermia, renal, digestive or cardiovascular problems; contain whey protein, lactose and corn/coconut oils; 20 cal/oz	Pharmacy special order. Low iron formula. Give under Doctor's supervision.	None	N/A	1 lb. Can 6 cans/case	N/A
Suplena Manufacture – Ross Form – RTU Category – I UPC Code: Type: Med Food	X		High calorie, low-nitrogen, low electrolyte, complete formula for person requiring protein and fluid restriction; contains caseinates, sucrose/maltodextrins, and safflower/soy oils, 59.4 cal/oz	Pharmacy special order. Vanilla	Renalcal Diet, Nepro	N/A	N/A	8 oz can 24 cans.case
Two Cal HN Manufacture – Ross Form – RTU Category – A UPC Code: Type: Med Food	X		High calorie, High nitrogen, lactose free complete formula; used as supplement for patients whoe food intake is low or whose fluid intake is restricted; contains caseinates, maltodextrin/sucrose, and corn/MCT oils; 60 cal/oz	Pharmacy special order. For adults and children over 4 years. Vanilla, butter pecan.	Nutren, Magnacal, Deliver 2.0	N/A	N/A	8 oz. Can 24 cans/case
Manufacture – Form – Category – UPC Code: Type:								

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Formula Name	WRITTEN APPROVAL ?		DESCRIPTION	INDICATIONS	COMPARABLE FORMULAS	PACKAGING		
	Yes	*No*				***Conc.***	***Powder***	***Ready-to-Use***
Vital HN Manufacture – Ross Form – Pow Category – A UPC Code: Type: Med Food	X		Complete, High nitrogen, partially hydrolyzed formula for persons with limited digestion and/or absorption: contains whey/meal/soy protein, Maltodextrin/sucrose, and safflower/MCT oils; 30 cal/oz.	Pharmacy special order. For adults and children over 4 years. Vanilla	Peptamen, Vivonex TEN, Criticare HN	N/A	2.79 oz pkt 24 pkts/case	N/A
Vivonex Pediatric Manufacture – Novartis Form – Pow Category – P UPC Code: Type: Med Food	X		100% amino acid formula, nutritionally complete, isotonic formula for impaired GI funtion and as a step down from TPN; contains maltodextrin starch, MCT/soybean oil; 220 cal per 250 ml.	For children ages 1-10. Flavoring sold separately.	Neocate 1	N/A	1.7 oz packets 36 pkts/case	N/A
Vivonex Plus Manufacture – Novartis Form – Pow Category – A UPC Code: Type: Med Food	X		Elemental, high nitrogen formula with 100 % free amino acids for persons with GI disorders; contains free amino acids, maltodextrin/starch, and soy oil; 30 cal/oz	Pharmacy special order.	Criticare HN, Peptamen VHN, Vital HN, AlitraQ, Vivonex Plus	N/A	2.8 oz packet 36 pkts/case	N/A
Vivonex T.E.N. Manufacture – Ross Form – Pow Category – A UPC Code: Type: Med Food	X		Elemental, complete formula with glutamine and 100% free amino acids for persons with GI impairment: maltodextrin/starch, and safflower oil; 30 cal/oz.	Pharmacy special order. Flavor packets sold separately.	Criticare HN, Peptamen VHN, Vital HN, AlitraQ, Vivonex Plus	N/A	2.84 oz packet 60 pkts/case	N/A
Manufacture – Form – Category – UPC Code: Type:								

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