WIC PES Examples

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms

*** Shaded WIC codes can be referred to Medium Risk Nutritionist**

ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
A	101 Underweight BMI (Women)				
A	103.1 Underweight BMI Infants and Children		Increased nutrient needs (energy)	103, 141, 142.1, 151; preterm delivery (code 142.1) and being small for gestational age (code 151)	AEB LBW (code 141), wt for length <2nd%ile (code 103.1), and needing formula prepared to 24kcal/oz
A	103.1 Underweight BMI Infants and Children		Underweight	142.1, 141, 103.1, 903; r/t growth & developmental delays	AEB LBW, micropremie, wt/length 2%, and need to supplement diet with Pediasure.
A	103.1 Underweight BMI Infants and Children		Underweight r/t	Inadequate oral intake AEB	AEB code 103.1 BMI for age at 3rd %ile
A	111 Overweight BMI (Women)				
A	113 Child BMI ≥ 95th percentile				
A	115* High Wt for Length Infant		Excessive oral intake	115; Food and nutrition knowledge deficit	AEB Code 115 - WT FOR LENGTH GREATER THAN OR EQUAL TO 98TH%... with intake of 64oz formula daily in addition to foods
A	115* High Wt for Length Infant		Client overweight and constipated code 115	115; r/t Excessive formula intake	AEB growth in 95%ile and intake of 64 oz. daily in addition to foods.

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
A	131* Low Maternal Wt Gain				
A	133* High Maternal Weight Gain				
A	134 Failure to Thrive		Limited oral intake	134; r/t to feeding difficulty with dx failure to thrive code 134	AEB by mom reports the child will only eat certain foods, prefers foods that do not require much chewing.
A	134 Failure to Thrive		Growth rate below expected	r/t change in home environment with failure to thrive (code 134)	AEB limited food intake per AR report and needing Pediasure to supplement nutrition intake
A	135 Slowed/Falt. Growth Pattern				
A	141 LBW & VLBW (Infant)				
A	141* LBW & VLBW (C1)		Increased energy needs	141; r/t LBW, prematurity	AEB code 141, 142.1 and FFR for high kcal formula
A	142.1* Preterm		Increased nutrient needs (energy)	142.1; r/t code 142.1 preterm delivery	AEB code 141 low birth weight 4# 15oz
A	142.1* Preterm		At risk for inadequate energy intake and imbalance of	r/t growth & developmental delays	AEB LBW and micropremie

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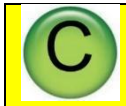 ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
			nutrients		
	142.2* Early Term		Breastfeeding difficulty	142.2; r/t lack of milk when pumping	AEB delayed letdown and reduced milk volume
	142.2* Early Term		Breastfeeding difficulty	142.2; r/t delayed milk production due to C-section	AEB infant hunger following feeds and lack of milk when pumping
	142.2* Early Term		Breastfeeding difficulty	142.2; r/t latching/sucking difficulty	AEB infant hunger following feeds and early term delivery
	142.2* Early Term		At risk for inadequate energy intake and imbalance of nutrients	142.2; r/t growth and developmental delays	AEB early term delivery
	142.2* Early Term		At risk for inadequate energy intake and imbalance of nutrients	142.2; r/t 411.7 routinely limiting frequency of nursing of IEN < 8 feedings in 24hrs	AEB caregiver report of feeding routine and lower growth than expected
	201.1* Anemia		Inadequate mineral intake (iron)	201.1; r/t food and nutrition knowledge deficit concerning food sources of iron	AEB code 201.1 low hemoglobin
	201.1* Anemia		Excessive mineral intake (calcium)	201.1; r/t food and nutrition knowledge deficit concerning how excess calcium intake inhibits absorption of iron	AEB code 201.1 low hemoglobin

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
B	201.1* Anemia				
C	301 Hyperemesis Gravidarum		Increased energy needs	301; r/t code 301 Hyperemesis Gravidarum	AEB underweight and doctor concern for client's poor weight gain.
C	301 Hyperemesis Gravidarum		Inadequate oral intake	301; r/t decreased ability to consume sufficient energy and nutrients with dx of hyperemesis (code 301)	AEB minimal food intake and several trips to the ER for IV fluid and electrolyte replacements
C	301 Hyperemesis Gravidarum		Altered GI function	301; changes in GI tract with pregnancy with hyperemesis (code 301)	AEB excessive nausea and vomiting
C	302 GDM		Inconsistent carbohydrate intake	302; r/t not ready for diet/lifestyle change with dx GDM (code 302)	AEB skipping breakfast
C	302 GDM		Food and nutrition related knowledge deficit	302; r/t limited prior exposure to nutrition related information with dx of code 302 gestational diabetes	AEB unaware that foods lower in fiber (ie white bread) will spike blood sugars more than foods with fiber (ie whole grain bread)
C	302 GDM		Limited adherence to nutrition related recommendations	302; r/t not ready for lifestyle or diet change with dx GDM (code 302) due perception that lack of time prevents changes in diet	AEB uncertainty regarding nutrition-related recommendations, skipping breakfast, reports inconsistent carbohydrate intake
C	302 GDM		Limited adherence to nutrition-related recommendation	302; r/t lack of social support for implementing changes with code 302 Gestational Diabetes	AEB lack of compliance or inconsistent compliance with plan to avoid fast food, frozen pizza.

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
			s (NB-1.6)		
C	303* Hx of GDM				
C	304 *Hx of Preeclampsia		Food- and nutrition- related knowledge deficit	304, 111: r/t limited understanding of appropriate food/beverage choices for someone with hx of preeclampsia	AEB participant report of regular coffee/sports drink consumption and low f/v intake.
C	304 *Hx of Preeclampsia		Risk of inadequate calcium intake	304; r/t low intake of foods containing calcium	AEB increased needs during pregnancy and history of preeclampsia.
C	304 *Hx of Preeclampsia		Risk of inadequate folic acid intake	r/t low intake of foods containing folate	AEB increased needs during pregnancy and history of preeclampsia
C	335* Multi-fetal Gestation		Increased energy expenditure	335; physiological causes increasing nutrient needs	AEB breastfeeding with twins (code 335)
C	341 Nutrient Deficiency or Disease		Limited adherence to nutrition related recommendations	341; r/t lack of value for behavior change with dx hypertension (code 345)	AEB uncertainty as to how to consistently apply food/nutrition information
C	342 GERD		Altered GI function	342; r/t Code 342 gastro-intestinal disorder constipation	AEB Straining and in pain when passing stool, requiring miralax prescription

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
C	342 GERD		altered GI function r/t	code 342 GERD	AEB Need for daily medication and dietary modifications
C	343 DM				
C	344* Thyroid Disorders		Excessive oral intake	r/t hyperphagia possibly associated with hyperthyroidism (code 344)	AEB client reporting new Dx of hyperthyroidism and reporting excessive snacking and lack of satiety.
C	344* Thyroid Disorders		Unintended wt gain	r/t increased appetite and energy intake > energy expenditure	AEB client reporting 10-lb wt gain between start of PG and 12-weeks of PG.
C	344* Thyroid Disorders		Predicted BF difficulty	r/t risk for delayed lactogenesis and inadequate milk production	AEB Hx GDM (code 303) and Hx BF difficulty with previous infant.
C	344* Thyroid Disorders		Underweight	r/t 344 hyperthyroidism	103.1; AEB underweight and doctor concern for participant's poor weight gain.
C	344* Thyroid Disorders		Overweight/obese	r/t 344 hypothyroidism	111, 113, 115 AEB Need for daily medication to regulate thyroid production
C	344* Thyroid Disorders		Inadequate oral food/beverage intake	r/t 344 hyperthyroidism	AEB limited food intake per AR report and needing Pediasure to supplement nutrition intake
C	344* Thyroid Disorders		Inadequate energy intake	r/t Limited food acceptance d/t food aversion; 344 hyperthyroidism	AEB Estimated energy intake from all sources less than projected needs, Prolonged feeding time, mealtime resistance

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
C	344* Thyroid Disorders		Limited food acceptance	r/t Lack of interest in eating; 344 hypothyroidism	AEB Avoidance of foods of age-appropriate texture and needing Pediasure to supplement nutrition intake
C	344* Thyroid Disorders		Limited food acceptance	r/t predict code 344 thyroid disorder and teeth hurting	AEB diet history with limited food intake, drinking 2 pediasure per day
C	344* Thyroid Disorders		Suboptimal growth rate	r/t 344 hypo/hyper-thyroidism	AEB [length-for-age, ht-for-age, wt-for-age] below 2nd percentile
C	344* Thyroid Disorders		Hypermetabolism	r/t 344 hyperthyroidism	103.1, 103.2; AEB Need for daily medication and dietary supplementation
C	344* Thyroid Disorders		Hypometabolism	r/t 344 hypothyroidism	113, 115; AEB Need for daily medication to regulate thyroid production
C	345 HTN or Pre-HTN		Food and nutrition-related knowledge deficit	345; r/t lack of knowledge on sodium recs and relation to 345 Hypertension	AEB client unable to recall sodium/whole grain recs or explain how sodium affects blood pressure
C	345 HTN or Pre-HTN		Food and nutrient-related knowledge deficit	345; r/t 345 Hypertension	AEB mom's report of no prior diet education on hypertension management.
C	346 Renal Disease		Impaired nutrient utilization	346; r/t compromised renal function	AEB receiving dialysis 3x week and needing to modify diet
C	347 Cancer				

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
C	348 CNS Disord. - Epilepsy -Cerebral palsy -Neural tube defects - Parkinson's disease		Inadequate energy intake	d/t difficulty chewing	AEB Underweight
C	348 CNS Disord. - Epilepsy -Cerebral palsy -Neural tube defects - Parkinson's disease		Inadequate* Protein-Energy Intake	d/t Unable or unwilling to eat sufficient energy/protein to maintain a healthy weight	AEB • Patient/client/caregiver fatigue during feeding process resulting in inadequate intake
C	348 CNS Disord. - Epilepsy -Cerebral palsy -Neural tube defects - Parkinson's disease		Self-feeding difficulty (motor control)	d/t Inability to physically: • Bend elbow at wrist • Grasp cups and utensils • Sit with hips square and back straight • Support neck and/or control head and neck • Coordinate hand movement to mouth	AEB • Prolonged feeding times • Patient/client/caregiver fatigue during feeding process resulting in inadequate intake
C	348 CNS Disord. - Epilepsy -Cerebral palsy -Neural tube defects - Parkinson's disease		Self-feeding difficulty (fatigue)	d/t Limited physical strength or range of motion	AEB • Shortness of breath, muscle weakness, fatigue
C	348 CNS Disord. - Epilepsy -Cerebral palsy -Neural tube defects - Parkinson's disease		Self-feeding difficulty	d/t Neuromuscular dysfunction r/t Cerebral palsy	AEB • Involuntary physical activity/movement

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
C	348 CNS Disord. - Epilepsy -Cerebral palsy -Neural tube defects - Parkinson's disease		Swallowing difficulty	d/t Neuromuscular dysfunction r/t Cerebral palsy	AEB • Prolonged feeding times • Impaired tongue movement • Avoidance of foods of age-appropriate texture • Spitting food out or prolonged feeding time
C	348 CNS Disord. - Epilepsy -Cerebral palsy -Neural tube defects - Parkinson's disease		Biting/Chewing (Masticatory) Difficulty	d/t Neuromuscular dysfunction r/t Cerebral palsy	AEB • Avoidance of foods of age-appropriate texture • Coughing, choking, prolonged chewing, facial expression changes during eating • Drooling, noisy wet upper airway sounds, feeling of "food getting stuck," pain while swallowing.
C	348 CNS Disord. - Epilepsy -Cerebral palsy -Neural tube defects - Parkinson's disease		Limited adherence to nutrition-related recommendations	r/t Lack of social support for implementing changes	AEB Limited adherence to nutrition-related recommendations
C	349 Genetic & Congenital Disorders		Undesirable food choices	142.1, 349; r/t limited food acceptance due to aversions, with code 349 heart condition and code 142.1 preterm delivery	AEB not eating much variety, typically has same thing for breakfast and lunch (bagel/eggs, avocado/hot dog)
C	349 Genetic & Congenital Disorders		Self feeding difficulty r/t	349; Down syndrome (349)	AEB still needing infant formula to supplement nutrition intake
C	349 Genetic & Congenital Disorders		Self-feeding difficulty	142.1, 349; r/t code 142.1 preterm delivery and code 349 heart condition	AEB Current PT/OT-facilitated feeding therapy and previous reliance on enteral nutrition
C	351 Inborn Errors of Metabolism				

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
C	352.1* Infectious Diseases - Acute				
C	352.2 Infectious Dis. - Chronic				
C	353 Food Allergies		Intake of unsafe food r/t	353; r/t New food allergies to peanuts and tree nuts	AEB AR offering nut-containing breakfast cereal to child by accident
C	353 Food Allergies		Undesirable food choices r/t	353; r/t Food allergies impeding food choices consistent with guidelines	AEB allergy to dairy and eggs
C	354 Celiac Disease		Intake of unsafe food r/t	354; r/t Limited social support for implementing changes with new dx	AEB Child's father continuing to serve foods with gluten
C	356 Hypoglycemia				
C	358 Eating Disorders		Inconsistent carbohydrate intake r/t *client with DM1	343, 358; r/t Psychological causes including disordered eating with difficulty determining what to eat for meals/snacks	AEB Often not eating til lunch or dinner time
C	358 Eating Disorders		Harmful Beliefs/Attitudes about Food or Nutrition-related topics	358, 427.3; r/t history of [eating disorder dx] and eating behavior serves a purpose other than nourishment (eg pica)	AEB • Food avoidance/lack of interest in food • Compulsively ingesting non-food items

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
C	358 Eating Disorders		Limited Adherence to Nutrition-related recommendations	358; r/t history of [eating disorder dx]	AEB • Highly variable estimated daily energy intake • Disordered eating patterns
C	358 Eating Disorders		Inadequate energy intake	358, 101; r/t history of anorexia nervosa	AEB: • BMI below 18.5 • Weight loss, of >10% in 6 months, • Weight loss >5% in one month
C	358 Eating Disorders		Disordered eating pattern	358; r/t obsessive desire to be thin	AEB • Purging behavior • Excessive physical activity
C	ARFID (no WIC code)		Undesirable food choices	Limited food acceptance d/t food aversion	AEB Rigid sensory preferences, avoidance of foods, food avoidance and/or lack of interest in food
C	ARFID (no WIC code)		Inadequate fiber intake	Developmental delay	Avoidance of foods containing fiber, spitting out food, coughing, choking
C	ARFID (no WIC code)		Limited food acceptance	Sensory processing disorder	AEB Estimated energy intake from all sources less than projected needs, Prolonged feeding time, mealtime resistance
C	362 Develop., Sens., or Motor Disab. Interf. w/ Ability to Eat		Excessive Oral Intake	362; Unwilling or disinterested in reducing intake	AEB Intake of large portions of foods/beverages, food groups, or specific food items
C	362 Develop., Sens., or Motor Disab. Interf. w/ Ability to Eat		Inadequate oral intake	103.1, 134, 141, 342, 362; r/t code 134 failure to thrive, code 342 GERD, code 362	AEB code 103.1 wt/length at 2nd%ile on 8/5/21 and code 141 low birth weight 4# 12oz d

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
				developmental/sensory/motor delays interfering with the ability to eat	
C	362 Develop., Sens., or Motor Disab. Interf. w/ Ability to Eat		Inadequate oral intake	103.1, 362; developmental/sensory /motor delays interfering with the ability to eat	AEB need for Pediasure oral nutrition supplement with code 103.1 wt for length at 2nd%ile on 2/3/22 and medical dx Rubinstein-Taybi syndrome
C	362 Develop., Sens., or Motor Disab. Interf. w/ Ability to Eat		Swallowing Difficulty	362; Motor causes, e.g., neurological or muscular disorders, such as cerebral palsy, stroke, multiple sclerosis, scleroderma, ALS, inflammation, surgery, stricture or oral, pharyngeal and esophageal tumors, or mechanical ventilation.	AEB • Coughing, choking, prolonged chewing, pouching of food, regurgitation, • Facial expression changes during eating, drooling, noisy wet upper airway sounds, feeling of "food getting stuck," pain while swallowing,. • Prolonged feeding time • Avoidance of foods • Spitting food out • Rumination • Self-feeding difficulty
C	362 Develop., Sens., or Motor Disab. Interf. w/ Ability to Eat		Biting/Chewing (Masticatory) Difficulty	362; Neuromuscular dysfunction	AEB (Reports or observations of…) • Decreased estimated food intake • Alterations in estimated food intake from usual • Decreased estimated intake or avoidance of food difficult to form into a bolus e.g., nuts, whole pieces of meat, poultry, fish, fruits, vegetables • Avoidance of foods of age-appropriate texture • Preference to drink rather than eat • Self-feeding difficulty
C	362 Develop., Sens., or Motor Disab. Interf. w/ Ability to Eat		362; Altered GI Function	362; Changes in gastric motility, e.g., gastroparesis	AEB • Avoidance or limitation of estimated total intake or intake of specific foods/food groups d/t GI sx (bloating, cramping, pain, diarrhea) • Condition associated with a dx or tx e.g, malabsorption,

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
					maldigestion, steatorrhea, obstruction, constipation, diverticulitis, Crohn's disease, IBD, cystic fibrosis, celiac disease, cancers, IBS, infection, dumping syndrome • Mealtime resistance
C	362 Develop., Sens., or Motor Disab. Interf. w/ Ability to Eat		362; Inadequate fiber intake	362; Difficulty chewing or swallowing high-fiber foods	AEB • Inadequate fecal bulk • Estimated intake of fiber that is insufficient when compared to recommended amounts • (38 g/day for men and 25 g/day for women) • 19 g/d for 1-3yr olds • 25 g/d for 4-8 yr olds • Conditions associated with a diagnosis or treatment, e.g., ulcer disease, inflammatory bowel disease, or short-bowel syndrome treated with a low-fiber diet
C	362 Develop., Sens., or Motor Disab. Interf. w/ Ability to Eat		362; Disordered eating pattern	362; Obsessive desire to have a thin body shape Rigid sensory preferences	AEB • Code 427.2 Diet very low in calories/essential nutrients • Inappropriate reliance on foods, food groups, supplement, or nutrition support • Limited number of accepted foods • Rigid sensory preferences • Refusal to eat/chew • Patient/client/caregiver fatigue during feeding process resulting in inadequate intake • Willingness to try new foods
C	362 Develop., Sens., or Motor Disab. Interf. w/ Ability to Eat				
C	363* Prediabetes				

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ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
C	382 Fetal Alcohol Syndrome				
C	383 Neonatal Abstinence Syndrome		383, 603; Breastfeeding difficulty	r/t inability to latch	AEB infant turning away from breast
C	383 Neonatal Abstinence Syndrome		Food- and nutrition-related knowledge deficit	r/t to belief that babies cry mostly because of hunger	AEB interview with caregiver
C	383 Neonatal Abstinence Syndrome				
D	411.1* Inappr. Subst. for Human Milk				
D	411.7* Lim. Freq. Nursing for IEN				
D	411.8* Diet VL Kcal 425.6* or Essential 427.2* Nutrients		Disordered eating pattern	427.2; r/t Obsessive desire to have a thin body shape	AEB Code 427.2 Diet very low in calories/essential nutrients
D	411.8* Diet VL Kcal 425.6* or Essential 427.2* Nutrients				

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C ABCDE Icon	WIC Code		Problem	Etiology	Signs/Symptoms
D	411.8* Diet VL Kcal 425.6* or Essential 427.2* Nutrients				
D	411.8* Diet VL Kcal 425.6* or Essential 427.2* Nutrients				
D	602 BF Complications for Women		Breastfeeding difficulty	602; r/t inability to latch infant	AEB lowered milk production.
D	602 BF Complications for Women		Breastfeeding difficulty	602; r/t Severe breast engorgement (code 602)	AEB Infant with trouble latching at the breast
D	602 BF Complications for Women		Breastfeeding difficulty	602; r/t perception of inadequate milk supply with hx of mastitis (code 602)	AEB AR concerned that infant has been feeding more often and not seeming satisfied
D	603 BF Complications for Infants		Breastfeeding difficulty	603; r/t Difficulty latching due to mom having flat nipples (code 603)	AEB Jaundiced with inadequate stooling
E	802 Migrancy (not MR / HR referral code)		Physical inactivity	802; r/t Lack of access to safe exercise environment	AEB Code 801 homelessness
E	Environmental Codes 900s (E codes are not MR / HR referrals)				
E	Environmental Codes 900s (E codes are not MR / HR referrals)				

examples that do not involve a WIC code:

limited food acceptance r/t poor appetite and nausea AEB skipping meals and cravings for sweets

poor nutrition quality of life r/t aversion to foods of certain textures AEB limited intake of certain fruits and vegetables such as berries and avocado

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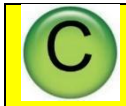 **ABCDE Icon**	**WIC Code**		**Problem**	**Etiology**	**Signs/Symptoms**

not ready for diet/lifestyle change r/t not weaned from bottle yet (code 425.3) AEB AR stating they are going wait to work on bottle weaning until they move to their new home