

NC WIC Program Monitoring Tool Appendix 2. WIC Record Review (Pregnant & Postpartum Women)

Agency and Site Reviewed: _____

Date: _____ **Reviewers:** _____

1. Client Identifying Information

	1	2	3	4	5
Client Identifier Number					
Date of birth					
EDC					
Date of delivery					
Date of certification being reviewed					

2. Nutrition Assessment

Physically present					
Eco-social					
Anthropometric					
<ul style="list-style-type: none"> ▪ Prenatal : prepregnancy BMI, weight & height, prenatal weight gain chart ▪ Postpartum: prepregnancy BMI, weight & height, total wt gain in pregnancy 					
Biochemical (hgb/hct)					
Clinical					
Diet & Physical Activity					
Required prescription (i.e. food or medical food)					
Summary of nutrition status					
Medical /nutritional eligibility					

3. Plan of Nutrition Care

Client action steps reflect client input					
Nutrition education appropriate to need					
Required education topics					
<ul style="list-style-type: none"> ▪ importance of nutrition ▪ breastfeeding ▪ substance use ▪ folic acid ▪ immunizations for children 					
Appropriate client referrals					
Food package assigned					
Appropriate plans for follow-up					
Certification dated w/signature & title					

4. Frequency of Nutrition Education

Required # of contacts**					
<ul style="list-style-type: none"> ▪ Client refusal of nutrition education is documented 					

5. Notifications *(Link findings with monitoring item 5.2)*

Required notifications given**					
<ul style="list-style-type: none"> ▪ certification ineligibility, no longer eligible, recertification due, termination due, missed certification appointment (pregnant women only) 					

** may be documented in the WIC ADP system