

Tennessee WIC Program Referral

To receive WIC Program benefits, applicants must be determined to have a medical or nutritional risk. The WIC assessment includes current anthropometric measures and periodic blood screening. To refer a patient to WIC, please complete this form and send it to the patient's local health department or WIC clinic.

WIC offers families:

- ✓ Tips for eating well to improve health
- ✓ Breastfeeding promotion and support
- ✓ An EBT card to buy healthy foods
- ✓ Health and Social Service referral

The WIC program is for pregnant women, breastfeeding women, postpartum women, infants, and children up to the age of 5.

Please fill out this referral, and fax or email a copy to your local WIC office.

Find WIC office contact information at tn.gov/wic-clinics.

WIC Phone #: _____ WIC Fax #: _____
WIC Email: _____

WIC APPLICANT/PATIENT INFORMATION *(to be completed by HCP)*

NAME: _____ DOB: _____

PATIENT PHONE #: _____ PRIMARY LANGUAGE: _____

HEIGHT/LENGTH: _____ in/cm (Date: _____) WEIGHT: _____ lb/kg (Date: _____)

HCT OR HGB: _____ (Date: _____)

ESTIMATED DATE OF DELIVERY (if pregnant): _____

NUTRITION & HEALTH CONCERNS (if applicable): _____

HEALTHCARE PROVIDER INFORMATION

OFFICE/CLINIC NAME: _____

PHONE #: _____ FAX #: _____

EMAIL (if available): _____

PHYSICIAN'S (or designee) SIGNATURE: _____

Visit tn.gov/wic