Child Diet Risk Codes

OCTOBER 2026

Risk Code	Definition and Examples
425: A-I: Inappropriate Nutrition Practices for Children **Children 12 months of age & older**	Assessment for Risk Code 425: Inappropriate Feeding Practices for Children MUST be completed.
425A: Routinely feeding inappropriate beverages as primary milk source	Routine use of feeding practices may result in impaired nutrient status, disease, or health problems. • Cow's milk, goat's milk, canned evaporated or sweetened condensed milk. • Imitation or substitute milks – inadequately fortified rice or almond or other plant-based beverages, non-dairy creamer, or other "homemade concoctions". • Non-fat or reduced-fat milk for 12-24 month olds, unless when overweight/obesity is concern.
425B: Routinely feeding a child any sugar containing fluids	Consumption of foods and beverages high in fermentable carbohydrates, such as sucrose, increases the risk of early childhood caries and tooth decay. Examples: • Soda/soft drinks. • Gelatin water. • Corn syrup solution. • Sweetened tea. • 100% juice > once a day.
425C: Routinely using bottles, cups or pacifiers improperly	Routine use of feeding practices may result in impaired nutrient status, disease, or health problems. • Using a bottle for feeding or drinking beyond 14 months of age. • Using a bottle to feed: fruit juice, diluted cereal or other solid foods. • Allowing child to fall asleep or put to bed with bottle at nap or bedtime. • Allowing child to use bottle without restriction (walking around) or as a pacifier. • Using pacifier dipped in sweetening agents (sugar, honey, syrups). • Allowing child to carry around & drink throughout day from cup.

Risk Code	Definition and Examples
425D: Routinely using feeding practices that disregard developmental needs of child	Routine use of feeding practices may result in impaired nutrient status, disease, or health problems. • Inability to recognize, insensitivity to, or disregarding child's cues for hunger and satiety (*forcing child to eat certain type or amount of food or beverage or ignoring hungry child's requests for appropriate foods*). • Feeding foods of inappropriate consistency, size or shape that puts child at risk of choking. • Not supporting child's need for growing independence with self-feeding (*spoon-feeding child able to finger-feed/use utensils*). • Feeding child foods with inappropriate texture for developmental stage (*feeding primarily pureed/liquid when child ready & capable of eating mashed, chopped, or finger foods*).
425E: Feeding foods that could be contaminated with harmful microorganisms	Routine use of feeding practices may result in impaired nutrient status, disease, or health problems. • Unpasteurized fruit/vegetable juice. • Unpasteurized dairy products or soft cheese (feta, Brie, Camembert, blue-veined, and Mexican-style). • Raw/undercooked meat, fish, poultry, or eggs. • Raw vegetable sprouts. • Deli meat, hot dogs & processed meats (avoid unless heated until steaming hot).
425F: Routinely feeding diet very low in calories/essential nutrients	Routine use of feeding practices may result in impaired nutrient status, disease, or health problems. • Vegan diet. • Macrobiotic diet. • Other diets very low in calories/essential nutrients.
425G: Feeding dietary supplements with potentially harmful consequences	Routine use of feeding practices may result in impaired nutrient status, disease, or health problems. • Single or multi-vitamins. • Mineral supplements. • Herbal or botanical supplements, remedies, teas.
425H: Routinely not providing dietary supplements recognized as essential by national public health policy when a child's diet alone cannot meet nutrient requirements	Routine use of feeding practices may result in impaired nutrient status, disease, or health problems. • Children < 36 months of age ingesting < 0.25 mg fluoride daily when water supply contains < 0.3 ppm fluoride. • Children 36-60 months of age ingesting < 0.50 mg fluoride daily when water supply contains < 0.3 ppm fluoride. • Not providing 400 IU of Vitamin D supplement if child drinks < 1 liter (1 quart) of Vitamin D fortified milk.

Risk Code	Definition and Examples
425I: Routine ingestion of nonfood items (pica)	Routine use of feeding practices may result in impaired nutrient status, disease, or health problems. Examples: Ashes, carpet fibers, cigarettes or cigarette butts, clay, dust, foam, rubber, paint chips, dirt, starch (laundry and cornstarch).
425X: Child Transitioning to New Age Category **Infants turning 1 year old and children aged 23-24 months**	Created as a workaround to allow staff to create default food packages when there aren't any age-appropriate risk factors. • Infant turning 1 year old prior to recertification. • Children aged 23-24 months.
428: Dietary Risk Associated with Complementary Feeding Practices Assigned **ONLY** after a complete nutrition assessment has been performed and no other dietary risk(s) identified. **Children 12-23 months**	Transition from diet based on infant/toddler foods to one based on Dietary Guidelines for Americans. An infant or child who has begun to or expected to begin to: • Consume complementary food & beverages. • Eat Independently. • Be weaned from breastmilk or infant formula.
401: Failure to Meet Dietary Guidelines for Americans Assigned ONLY after a complete nutrition assessment has been performed and no other dietary risk(s) identified. **Children 2 years of age and older**	Consuming fewer than the recommended number of servings from one or more of the basic food groups (grains, fruits, vegetables, milk products, and meat or beans).

Minnesota Department of Health - WIC Program, 625 Robert St N, PO BOX 64975, ST PAUL MN 55164-0975; 1-800-657-3942, health.wic@state.mn.us, www.health.state.mn.us; to obtain this information in a different format, call: 1-800-657-3942.

This *institution is an equal opportunity provider.*