



Lincoln Community Health Center WIC Program

1301 Fayetteville St. Durham, NC 27707 – (919) 956-3805 Fax (919) 956-4558
Live Well 3901 N. Roxboro St, Durham, NC 27704– (919) 403-1300 Fax (919) 403-1388
Durham County. Dept of Public Health: 414 East Main St.– (919) 560-8149 Fax (919) 560-7799

DATE: _____

Referred By: _____ Phone: _____

MOTHER'S NAME: _____ DOB: _____

Phone: _____

Primary Language: _____

Was the mother on WIC during her pregnancy? Yes / No WIC/MR#: _____

Is the mother pumping? Yes / No

Referral for E. pump? Yes / No Medela _____ Ameda _____ Other _____

Double Kit Provided? Yes / No

Physical Condition of Mother

Delivery Type: _____ Previously BF? Yes / No

Breasts: _____ Nipples: _____ Milk Supply: _____

Other: _____

BABY'S NAME: _____ DOB: _____ Sex: _____

Gestational age at birth: _____

Present age: _____

Birth weight: _____

Present weight: _____ Gain / Loss

Physical Condition of Infant

Feeding Instructions

Reason for Referral (Check all that apply)

Baby in ICN/NICU _____ Sore Nipples _____ Mother's request _____

Baby in Special Care _____ Engorgement _____ Milk supply: _____

Premature/LBW _____ Baby weight loss _____ BFing aids _____

Assist with latch _____ Flat/Inverted Nipple _____ Working & BFing _____

Assist with positioning _____ Sore Breasts _____ Use of pump _____

Peer Counseling _____ 1st time mother _____ Breastmilk storage _____

Other: _____

Referral results at LCHC Completed by: _____ Date: _____

Comments: _____

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