

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

New Participant Save

### New Participant Information

Name:  First  Middle  Last

Participant ID:  /

Date of Birth:  /  /  (mm/dd/yyyy)

Gender:

Race:  American Indian or Alaskan Native  
 Asian  
 Black or African American  
 Native Hawaiian or Other Pacific Islander  
 White

Ethnicity:  Hispanic or Latino  
 Not Hispanic or Latino

OMB #0720-0030  
09/30/2016

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN 17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

AA Data Entry Step 1/5 Next ▶ [Participant Home](#) [Visit Home](#)  Residential  Categorical  Participant Type  Income  Nutr Assessment

### Sponsor Information

Sponsor's Military Branch/Civilian:

Sponsor's Pay Grade:

### Participant Information

Participant Type:

Marital Status:

### Participant Address

Mailing Address:

APO/FPO:

AE/AP:

Zip Code:

Home Phone:

Unit/Work Phone:

Home Email:

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)


Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR



PREGNANT WOMAN 17 Years  
Visit Date: 02/09/2016


[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)



AA Data Entry Step 2/5 [Back](#) [Next](#) [Save](#) [Participant Home](#) [Visit Home](#)  Residential  Categorical  Participant Type  Income  Nutr Assessment

**Participant Category**

Presumptive Eligibility 

**Income Data**   Conditional Approval 

Economic Unit:  

Pay Amount  Pay Frequency  Pay Type   Pay Source  Documentation Source  

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN 17 Years  
Pregnant Woman Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

AA Data Entry Step 3/5 [Back](#) [Next](#) [Save](#) [Participant Home](#) [Visit Home](#)  Residential  Categorical  Participant Type  Income  Nutr Assessment

**Educational Level/Language**

Participant Education:

Primary Language:

**Health Care Providers**

Medical Treatment Facility:  [Manage List](#)

Primary Care Manager (PCM) or Care Team:  [Manage List](#)

Host Nation Provider/Facility:  [Manage List](#)

Prenatal Care Provider:  [Manage List](#)

**WIC Overseas Participation**

If a proxy will be used, enter full name:

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

AA Data Entry Step 4/5 [Back](#) [Next](#) [Save](#) [Participant Home](#) [Visit Home](#)  Residential  Categorical  Participant Type  Income  Nutr Assessment

### Sponsor Information

Name:  First  Middle  Last

Relationship:

DEROS/PRD/RTD:  /  /  (mm/dd/yyyy) [?](#)

### Address

Mailing Address:

APO/FPO:

AE/AP:

Zip Code:

Home Phone:

Unit/Work Phone:

Home Email:

Work Email:

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

AA Data Entry Step 5/5 [Back](#) [Save](#) [Participant Home](#) [Visit Home](#)  Residential  Categorical  Participant Type  Income  Nutr Assessment

### Non-Sponsor Information (Spouse) Not Applicable

Name:  First  Middle  Last

Relationship:

### Address Same as Sponsor

Mailing Address:

APO/FPO:

AE/AP:

Zip Code:

Home Phone:

Unit/Work Phone:

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

CPA Data Entry [Back](#) [Next](#) [Save](#) [Participant Home](#) [Visit Home](#)  Residential  Categorical  Participant Type  Income  Nutr Assessment

**Authorization to Release Information**

**Height/Weight Information**

Height (inches):  ?

Weight (pounds):  ?

Pre-Pregnancy Weight (pounds):  Pre-Pregnancy BMI:

**Blood Work Information** ?

Hematocrit (%):  ?

Hemoglobin (g/dL):

Blood Work Date:  /  /  (mm/dd/yyyy)

CPA DataID 1

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

CPA Data Entry [Back](#) [Next](#) [Save](#) [Participant Home](#) [Visit Home](#)  Residential  Categorical  Participant Type  Income  Nutr Assessment

**Current Pregnancy History**

Number of previous pregnancies:

Number of previous live births (twins equal 1 birth):

Expected delivery date:  /  /  (mm/dd/yyyy)

Weeks gestation:

Number of fetuses:

Currently breastfeeding ?

**Prenatal Care** ?

Date prenatal care began:  /  /  (mm/dd/yyyy)

Prenatal care has not begun:

Weeks gestation before first prenatal care visit:

Number of prenatal care visits since conception:

**Pregnancy History**

Gestational diabetes ?

Preeclampsia ?

Preterm delivery ?

Low birth weight ?

Spontaneous abortions ?

Fetal death ?

Neonatal death ?

Birth with a nutrition related congenital or birth defect ?

Birth of a large for gestational age (LGA) infant ?

CPA DataID 2

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

New Participant | Lookup Participant | Administrative Tools | Log Out

CPA Data Entry | Back | Next | Save | Participant Home | Visit Home | Residential | Categorical | Participant Type | Income | Nutr Assessment

### Tobacco, Alcohol, Drug Use

Do you smoke any tobacco products?  ?

Does anyone else living in your household smoke inside the home?  ?

Do you drink any alcohol?  ?

Participant uses illegal drugs? ?

### Current Pregnancy Complications

Gestational diabetes ?

Preeclampsia ?

Weight loss of 2 or more pounds in 2nd or 3rd trimester ?

Low maternal weight gain ?

High maternal weight gain ?

Fetal growth restriction (FGR) ?

Hyperemesis gravidarum ?

Conception at or before 17 years of age ?

Conception before 16 months postpartum ?

High parity and young age ?

Do you plan to breastfeed?

CPA DataID 3

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

New Participant | Lookup Participant | Administrative Tools | Log Out

CPA Data Entry | Back | Next | Save | Participant Home | Visit Home | Residential | Categorical | Participant Type | Income | Nutr Assessment

### Risk Conditions

Asthma, persistent requiring daily medications ?

Cancer ?

Celiac disease ?

Central nervous system disorders ?

Oral health conditions ?

Depression ?

Developmental, sensory or motor disabilities interfering with the ability to eat ?

Diabetes mellitus ?

Drug nutrient interactions ?

Eating disorders ?

Elevated blood lead levels  $\geq$  10 micrograms/dl (past year) ?

Food allergies (not food intolerance) ?

Foster care ?

Gastrointestinal disorders ?

Genetic and congenital disorders ?

Hypertension and prehypertension ?

Hypoglycemia ?

Inborn errors of metabolism ?

Infectious diseases ?

CPA DataID 5

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

CPA Data Entry [Back](#) [Next](#) [Save](#) [Participant Home](#) [Visit Home](#)  Residential  Categorical  Participant Type  Income  Nutr Assessment

### Risk Conditions (cont)

Lactose intolerance  Lupus erythematosus

Limited ability to make feeding decisions or prepare food

Nutrient deficiency diseases

Recent major surgery, trauma, burns

Recipient of abuse

Renal disease

Thyroid disorders

Cardiorespiratory disease

Cystic fibrosis

Heart disease

CPA DataID 6

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

CPA Data Entry [Back](#) [Next](#) [Save](#) [Participant Home](#) [Visit Home](#)  Residential  Categorical  Participant Type  Income  Nutr Assessment

### 24-Hour Dietary Recall:

For each of the food groups, select the number of **SERVINGS** the participant has eaten in the past 24 hours.

	0	1	2	3	4	5	6+
Number of servings of bread, cereal, rice, and pasta:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of servings of vegetables:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of servings of fruit and/or fruit juice:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of servings of milk, yogurt or cheese:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of servings of meat, poultry, fish, dry beans, eggs or nuts:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Excessive fats, oils and sweets							

### Nutrition Practices:

Check all that apply

Consuming dietary supplements w/potentially harmful consequences

Very low calorie and/or essential nutrient intake

Pica

Inadequate vitamin/mineral supplementation recognized as essential by public health policy

Ingestion of foods potentially contaminated with pathogenic microorganisms

CPA DataID 7



WIC Overseas PIMS - [1111] Training, Overseas

**pims**™ PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

Food Package 2/2 [Back](#) [Save](#) [Participant Home](#) [Visit Home](#) [Residential](#) [Categorical](#) [Participant Type](#) [Income](#) [Nutr Assessment](#)

### Draft Information

**Food Package Selection**

Recommended Package:

Last Issued Food Package:

Would you like to:  Proceed with last issued food package  
 Choose food package

**Food Package List**

- PB0
- PB1
- PBD1
- XPBR1

WIC Overseas PIMS - [1111] Training, Overseas

**pims**™ PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

Nutrition Education [Back](#) [Save](#) [Participant Home](#) [Visit Home](#) [Residential](#) [Categorical](#) [Participant Type](#) [Income](#) [Nutr Assessment](#)

**Nutrition Education / Visit Notes** [Spell Check](#)

Participant Type:



WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

Referrals [Save](#) [Participant Home](#) [Visit Home](#) [Residential](#) [Categorical](#) [Participant Type](#) [Income](#) [Nutr Assessment](#)

### Referral

<input type="checkbox"/> Breastfeeding support group	<input type="checkbox"/> Health care provider
<input type="checkbox"/> Chaplain	<input type="checkbox"/> Immunizations
<input type="checkbox"/> Community center	<input type="checkbox"/> Lactation consultant
<input type="checkbox"/> Dentist	<input type="checkbox"/> Legal
<input type="checkbox"/> Exceptional family member program (EFMP)	<input type="checkbox"/> New parent support program
<input type="checkbox"/> Family advocacy	<input type="checkbox"/> Smoking cessation
<input type="checkbox"/> Financial planning	<input type="checkbox"/> Substance abuse

Other Referral:

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

Print Visit Reports [Back](#) [Participant Home](#) [Visit Home](#) [Residential](#) [Categorical](#) [Participant Type](#) [Income](#) [Nutr Assessment](#)

### Print Visit Reports

Participant Name :

[Participant Profile Report](#) [Draft Issuance Report](#) [Notice of Ineligibility/Termination](#)

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

[Back](#) [Participant Home](#) [Visit Home](#) [Residential](#) [Categorical](#) [Participant Type](#) [Income](#) [Nutr Assessment](#)

Print

Main Report

**FOR OFFICIAL USE ONLY**

**WIC Overseas Participant Profile Report**

Visit Date: Tuesday, February 09, 2016		PREGNANT WOMAN	
WIC Overseas Site ID : 1111 Training, Overseas		Participant ID : 01/4560	
Encounter Type : New Certification	Certification Dates: 02/09/2016 - 09/19/2016		
Participant Category : Pregnant	Economic Unit : 3		
Gender : Female	Address : 123 MAIN STREET APO, AE, 11111		
DOB : 09/09/1998	Home Phone : 234-567-8910		
Age : 17 Years 5 Months	Work Phone : 234-567-0123		
Participant Type : Dependent of a member of the armed forces stationed overseas	Home Email : EMAIL@HOME.COM		
Sponsor Name : JOHN DOE	Grade : E-3	DEROS/PRD/RTD: 11/11/2017	
Non-Sponsor Name :	Home Phone : 234-567-8910		
	Work Phone : 234-567-0123		
Address : 123 MAIN STREET APO, AE, 11111	Work Email : EMAIL@WORK.ARMY.MIL		
Source of Health Care:	MTF : TRAINING HOSPITAL	Prenatal Care Provider : TRAINING PRENATAL	
	PCM : TRAINING CARE TEAM	EDD : 08/08/2016	
<u>Measurements</u>	<u>Value</u>	<u>Date</u>	<u>Nutritional Risks</u>
Hematocrit:	42%	02/03/2016	131 Low Maternal Weight Gain
			345 Hypertension and Prehypertension
			Priority 1

Current Page No.: 1 Total Page No.: 1 Zoom Factor: Page Width

WIC Overseas PIMS - [1111] Training, Overseas

**pims** PARTICIPANT INFORMATION MANAGEMENT SYSTEM Version 2.0 [About PIMS](#)

Tuesday, February 09, 2016  
You are logged in as: Jane Doe CTR

PREGNANT WOMAN  
Pregnant Woman

17 Years  
Visit Date: 02/09/2016

[New Participant](#) [Lookup Participant](#) [Administrative Tools](#) [Log Out](#)

[Draft Issuance](#) [Back](#) [Next](#) [Save](#) [Participant Home](#) [Visit Home](#) [Residential](#) [Categorical](#) [Participant Type](#) [Income](#) [Nutr Assessment](#)

**Draft Issuance Information**

Number of Months Issued:  Re-Certification Date:

**First Month**

Food Package:

Use Dates:  -

**Draft Numbers**

Draft 1

Draft 2

Draft 3



New Participant Lookup Participant Administrative Tools Log Out

Print Page Back Participant Home Visit Home Residential Categorical Participant Type Income Nutr Assessment

Print

Main Report

WOMAN, PREGNANT		02/09/2016	
		03/09/2016	1111001826
3	gals.	skim, low fat, butter (lactose free,organic,soy,UHT) milk;	
OR 12	ltrs.	skim, low fat, butter (lactose free,organic,soy,UHT) milk	
2 - 11.5/12	oz.	frozen juice concentrate;	
OR 2 - 46/48	fl. oz.	cans/bottles single strength juice;	
OR 1 - 59-64	fl. oz.	carton/bottle single strength juice	
36	oz.	dry cereal	
1	dozen	eggs	

WOMAN, PREGNANT		02/09/2016	
		03/09/2016	1111001827
2	gals.	skim, low fat, butter (lactose free,organic,soy,UHT) milk;	