

**Algorithm 2: Guide for Prescribing Hypoallergenic Formula for GPs and Pharmacists**

**New prescription request**

**N.B Maternal dairy free diet is not recommended if no symptoms when exclusively breastfeeding**

**<12 months**

**12 months and older**

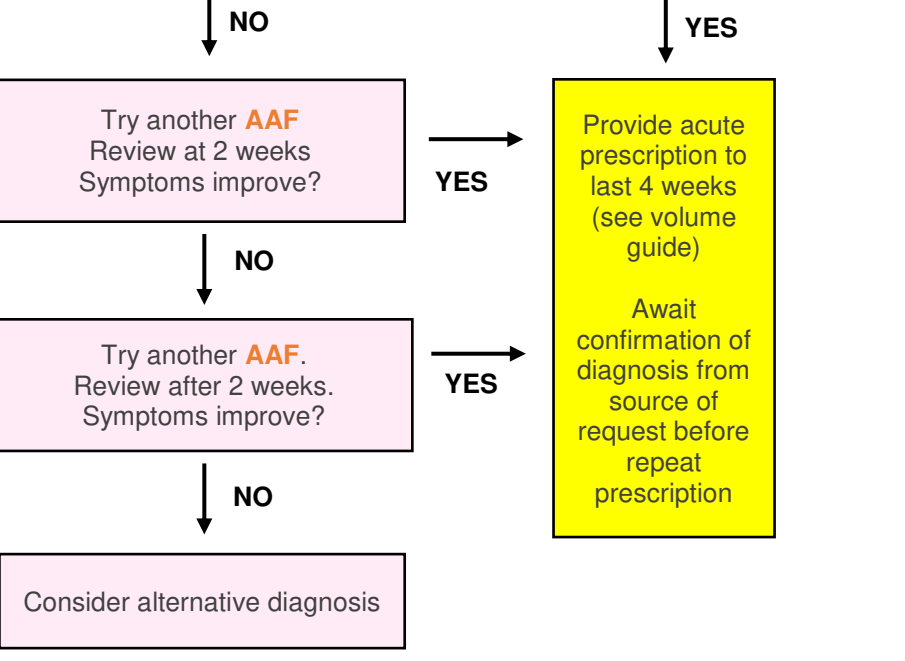
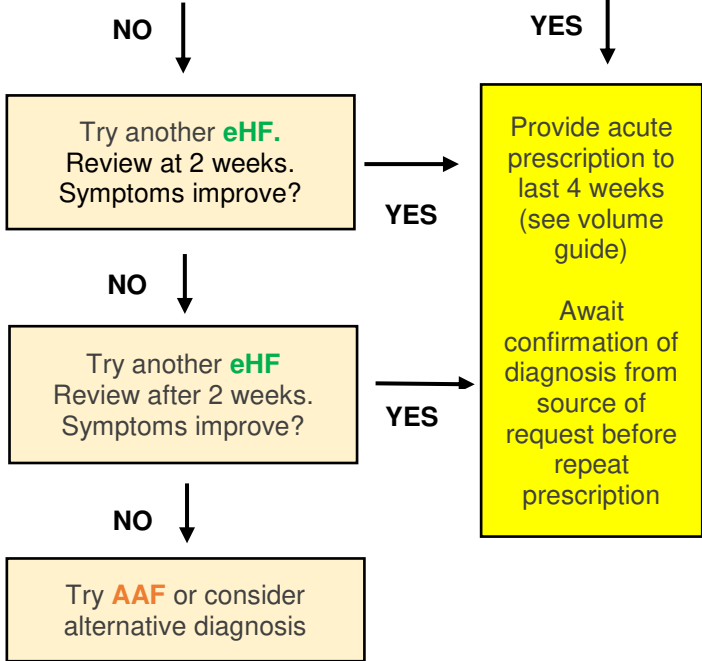
**eHF requested**

**AAF requested**

Prescribe 2 tins of **First line product** i.e. **eHF** (see [Guide 1](#)) on acute prescription. Formula accepted?

If requested privately, change to **eHF** (see [Guide 1](#))  
Prescribe 2 tins of **AAF** only if CMA with growth faltering or anaphylaxis. Formula accepted?

Do **not** prescribe formula  
Recommend shop-bought plant-based milk (see [section 2.5](#) in main document)



**Neocate Junior requested**

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**Not to be initiated without dietetic review**  
Not for <12 months infants  
This is **not** a follow-on formula for HF

**OTC products (do not prescribe) - Soya formula, Lactose-free formula, Anti-reflux formula, Comfort formula, Carobel**

**Repeat prescription request**

**EMIS prescription template review guide**

- Ensure it has been documented on prescription request letter that diagnosis of CMA has been confirmed before providing repeat prescription. If no confirmation of diagnosis has been provided, contact request source.
- Add: next **review date** (review prescription against volume based on age or intake every 3 months) and **prescription end date** within dosage instruction (Date when patient is 14 months of age)
- Adjust volume:
  - Volume recommendation from dietitian letter
  - If not available, use volume recommendation (see [Guide 1](#)) based on age/ intake
- Child should transition from formula to an appropriate shop-bought plant-based milk (see [section 2.5](#) in main document) from 12 months of age
- Stop prescription if:
  - tolerating dairy in diet
  - >14 months of age: unless advised by dietitian (check recent dietetic letter)

**Neocate Junior**

**Prescription review process**

- Review 3 monthly until prescription is no longer required.
- Check to ensure that dietetic review has been completed within the last 6 months (check latest dietetic correspondence letter) and re-refer if no evidence of dietetic input within the last 6 months.

**Refer to dietetics service if dietetic input not yet received as all infants with suspected/confirmed CMA should receive dietetic support. See [Referring to Local Services](#)**

**Contact SEL Prescribing Support Dietitians [gst-tr.prescribingsupportdietitians@nhs.net](mailto:gst-tr.prescribingsupportdietitians@nhs.net) if:**

- Unsuccessful transition onto shop-bought plant based milks at 14 months of age despite giving advice on transition
- Patient with active HF prescription has been discharged from local dietetics service due to DNA or not making contact
- Any other HF prescription queries

**Volume Guide:**

**1. Volume required if mixed-fed (Based on daily intake of formula as reported by carer)**

oz/day	ml/day	g/28 days
10oz	300ml	1600g
14oz	400ml	2000g
17oz	500ml	2400g
20oz	600ml	2800g
24oz	700ml	3200g
27oz	800ml	3600g
30oz	900ml	4000g
33oz	1000ml	4400g
36oz	1100ml	4800g

**2. Volume required if exclusively formula fed**

Age	g/28 days
0-3 months	4000g
3-6 months	5200g
6-9 months	4000g
9-12 months	3200g
12-14 months	2400g

**Abbreviations:**  
**CMA** cow's milk allergy  
**BF** breastfeeding.  
**eHF** extensively hydrolysed formula  
**AAF** amino acid formula  
**HF** hypoallergenic formula (includes both eHF and AAF)  
**IgE** immunoglobulin E  
**OTC** over-the-counter  
**RAC** rapid access clinic  
**SEL** south east London

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