

PN-ACD-619
99476

Integrated Management of Childhood Illness (IMCI)

Complementary Course

ANSWERS

Prepared by World Education for BASICS
(Basic Support For Institutionalizing Child Survival)
Zambia Child Health Project, a USAID-Funded Project

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EXAMPLES OF GOOD COMMUNICATIONS SKILLS

	A caretaker comes to you with a child who has fever
What would you ASK the caretaker?	<i>"How long has the child had fever?" "How long has he had this rash?"</i>
How would you LISTEN to the caretaker?	<i>Attentively, to understand the child's problems and find out what the caretaker is already doing for her child</i>
What would you say to PRAISE the caretaker?	<i>"It is very good that you brought the child to the clinic today"</i>
How would you ADVISE the caretaker?	<i>After identifying the child's TREATMENT, you could say "This is how you treat the child's illness," and demonstrate how to prepare the treatments that the caretaker will give to the child at home</i>
What would you say to CHECK the caretaker's UNDERSTANDING?	<i>"How will you treat the child's illness at home?" "When will you bring the child for follow up?"</i>

WRITTEN EXERCISE
IMCI Chart Booklet

Refer to pages 2-7 of your *IMCI Chart Booklet* to complete the following questions

1 What is the name of the first chart in the *Chart Booklet*?

*ASSESS AND CLASSIFY THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS
Chart*

2 What are the four MAIN SYMPTOMS on that chart?

COUGH OR DIFFICULT BREATHING, DIARRHOEA, FEVER, EAR PROBLEM

3 What should you check for after you ask about the four MAIN SYMPTOMS?

*MALNUTRITION AND ANAEMIA, IMMUNIZATION STATUS, WHETHER OR
NOT THE CHILD SHOULD RECEIVE VITAMIN A, THE CHILD'S OTHER
PROBLEMS, THE MOTHER'S HEALTH NEEDS*

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Salina Age 15 mo. Weight 8.5 kg Temperature 38.5 C

ASK What are the child's problems? coughing 4 days, not eating well Initial Visit? Follow up-visit?

ASSESS (Circle all signs present)

CLASSIFY

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Salina Age 15 mos. Weight 8.6 kg Temperature 38.5 C
 ASK What are the child's problems? cough, not eating well Initial Visit? Follow-up Visit?

ASSESS (Circle all signs present)

CHECK FOR GENERAL DANGER SIGNS

- NOT ABLE TO DRINK OR BREASTFEED
- VOMITS EVERYTHING
- CONVULSIONS

LETHARGIC OR UNCONSCIOUS

CLASSIFY

General danger sign present?
 Yes No

**Remember to use danger sign
 when selecting classifications**

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Pemba Age 18 mos. Weight 9 kg Temperature 37 C
 ASK What are the child's problems? cough Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?
 Yes No

**Remember to use danger sign
 when selecting classifications**

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?

Yes No

• For how long? 3 Days

- Count the breaths in one minute
39 breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

**No Pneumonia:
 Cough or Cold**

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Gyatsu Age 6 mos. Weight 5.5 kg Temperature 38 C
 ASK What are the child's problems? cough Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?

Yes No

**Remember to use danger sign
 when selecting classifications**

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?

Yes No

• For how long? 2 Days

- Count the breaths in one minute
58 breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

Pneumonia

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Wambui Age 8 mos. Weight 6 kg Temperature 39 C
 ASK What are the child's problems? cough, trouble breathing, weak Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?
 Yes No
**Remember to use danger sign
 when selecting classifications**

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?

Yes No

• For how long? 3 Days

- Count the breaths in one minute. 55 breaths per minute. Fast breathing
- Look for chest indrawing
- Look and listen for stridor or wheezing

**Severe Pneumonia
 or
 Very Severe Disease**

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Ben Age 7 mos. Weight 6 kg Temperature 38.5 C
 ASK What are the child's problems? cough for 2 weeks Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)**CLASSIFY****CHECK FOR GENERAL DANGER SIGNS**

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?

Yes No

Remember to use danger sign
 when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?Yes No • For how long? 14 Days

- Count the breaths in one minute
55 breaths per minute Fast breathing
- Look for chest indrawing
- Look and listen for stridor or wheezing

Severe Pneumonia
 or
Very Severe Disease

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Pano Age 6 mos. Weight 5.5 kg Temperature 38.6 C
 ASK What are the child's problems? diarrhoea Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?
 Yes No

Remember to use danger sign
 when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?

Yes No

• For how long? Days

- Count the breaths in one minute
 breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

DOES THE CHILD HAVE DIARRHOEA?

Yes No

• For how long? 5 Days

• Is there blood in the stool? No

- Look at the child's general condition Is the child
 Lethargic or unconscious?
~~Restless and irritable?~~
- Look for ~~sunken eyes~~
- Offer the child fluid Is the child
 Not able to drink or drinking poorly?
~~Drinking eagerly, thirsty?~~
- Pinch the skin of the abdomen Does it go back
 Very slowly (longer than 2 seconds)?
~~Slowly?~~

Some
Dehydration

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Bwalya Age 3 yrs. Weight 10 kg Temperature 37 C
 ASK What are the child's problems? cough, diarrhoea Initial Visit? Follow-up Visit?

ASSESS (Circle all signs present)

CLASSIFY
CHECK FOR GENERAL DANGER SIGNS

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?
 Yes ___ No

Remember to use danger sign
 when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?

Yes No ___

• For how long? 3 Days

- Count the breaths in one minute
36 breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

No Pneumonia:
 Cough or Cold

DOES THE CHILD HAVE DIARRHOEA?

Yes No ___

- For how long? 15 Days
- Is there blood in the stool?

- Look at the child's general condition Is the child
 Lethargic or unconscious?
 Restless and irritable
- Look for sunken eyes
- Offer the child fluid Is the child
 Not able to drink or drinking poorly?
 Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back
 Very slowly (longer than 2 seconds)?
 Slowly?

No Dehydration

Persistent
 Diarrhoea

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Nathan Age 15 mos. Weight 12 kg Temperature 37.5 C
 ASK What are the child's problems? diarrhoea Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?
 Yes ___ No

Remember to use danger sign
 when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?

Yes ___ No

• For how long? ___ Days

- Count the breaths in one minute
 ___ breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

DOES THE CHILD HAVE DIARRHOEA?

Yes No ___

- For how long? 21 Days
- Is there blood in the stool? No

- Look at the child's general condition Is the child
 Lethargic or unconscious?
Restless and irritable
- Look for sunken eyes
- Offer the child fluid Is the child
 Not able to drink or drinking poorly?
Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back
 Very slowly (longer than 2 seconds)?
 Slowly?

Some Dehydration

Severe Persistent
 Diarrhoea

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Ernesto Age 10 mos. Weight 8 kg Temperature 38.5 C
 ASK What are the child's problems? diarrhoea, blood in stool Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)**CLASSIFY****CHECK FOR GENERAL DANGER SIGNS**

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?

Yes No

**Remember to use danger sign
 when selecting classifications**

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?Yes No

- For how long? Days

- Count the breaths in one minute
 breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

DOES THE CHILD HAVE DIARRHOEA?Yes No

- For how long? 3 Days
- Is there blood in the stool?

- Look at the child's general condition Is the child
 Lethargic or unconscious?
 Restless and irritable?
- Look for sunken eyes
- Offer the child fluid Is the child
 Not able to drink or drinking poorly?
 Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back
 Very slowly (longer than 2 seconds)?
 Slowly?

*No Dehydration**Dysentery*

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Josh Age 6 mos. Weight 6 kg Temperature 38 C
 ASK What are the child's problems? diarrhoea Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?

Yes No

Remember to use danger sign
 when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?

Yes No

• For how long? 3 Days

- Count the breaths in one minute
56 breaths per minute Fast breathing
- Look for chest indrawing
- Look and listen for stndor or wheezing

Pneumonia

DOES THE CHILD HAVE DIARRHOEA?

Yes No

- For how long? 5 Days
- Is there blood in the stool?

- Look at the child's general condition Is the child
 Lethargic or unconscious?
 Restless and irritable?
- Look for sunken eyes
- Offer the child fluid Is the child
 Not able to drink or drinking poorly?
 Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back
Very slowly (longer than 2 seconds)?
 Slowly?

*Severe
 Dehydration*

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Namakao Age 5 mos Weight 7 kg Temperature 36.5 C
 ASK What are the child's problems? not well x 3 days, fever Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS

- NOT ABLE TO DRINK OR BREASTFEED
- VOMITS EVERYTHING
- CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?

Yes No

Remember to use danger sign when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?

Yes No

- For how long? Days
- Count the breaths in one minute breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

DOES THE CHILD HAVE DIARRHOEA?

Yes No

- For how long? Days
- Is there blood in the stool?
- Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable?
- Look for sunken eyes
- Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?

DOES THE CHILD HAVE FEVER? by history feels hot/temperature 37.5 C or above) Yes No

- For how long? 3 Days
- If more than 7 days has fever been present every day?
- Has child had measles within the last 3 months? No
- Look or feel for stiff neck
- Look for signs of MEASLES
- Generalized rash and
- One of these cough runny nose or red eyes

If the child has measles now or within the last 3 months

- Look for mouth ulcers
- If Yes are they deep and extensive?
- Look for pus draining from the eye
- Look for clouding of the cornea

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Anders Age 3 yrs. Weight 9.4 kg Temperature 37 C
 ASK What are the child's problems? feels hot, cough Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)**CLASSIFY****CHECK FOR GENERAL DANGER SIGNS**

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?

Yes No

Remember to use danger sign when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?Yes No • For how long? 3 Days

- Count the breaths in one minute
51 breaths per minute. Fast breathing
- Look for chest indrawing
- Look and listen for stridor or wheezing

**Severe Pneumonia
or
Very Severe Disease**

DOES THE CHILD HAVE DIARRHOEA?Yes No

- For how long? Days
- Is there blood in the stool?

- Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable?
- Look for sunken eyes
- Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?

DOES THE CHILD HAVE FEVER? (by history feels hot temperature 37.5°C or above) Yes No

- For how long? 5 Days
- If more than 7 days has fever been present every day?
- Has child had measles within the last 3 months? No
- Look or feel for stiff neck
- Look for signs of MEASLES
- Generalized rash and
- One of these cough runny nose or red eyes

**Very Severe
Febrile Disease**

If the child has measles now
or within the last 3 months

- Look for mouth ulcers
If Yes are they deep and extensive?
- Look for pus draining from the eye
- Look for clouding of the cornea

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Dolma Age 12 mos. Weight 7.2 kg Temperature 36.5 C
 ASK What are the child's problems? feels hot, diarrhoea Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)**CLASSIFY****CHECK FOR GENERAL DANGER SIGNS**

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?

Yes ___ No

Remember to use danger sign
 when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?Yes ___ No

• For how long? ___ Days

- Count the breaths in one minute
 ___ breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

DOES THE CHILD HAVE DIARRHOEA?Yes No ___• For how long? 2 Days

• Is there blood in the stool?

- Look at the child's general condition Is the child
 Lethargic or unconscious?
 Restless and irritable?
- Look for sunken eyes
- Offer the child fluid Is the child
 Not able to drink or drinking poorly?
 Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back
 Very slowly (longer than 2 seconds)?
 Slowly?

No
 Dehydration

DOES THE CHILD HAVE FEVER? (by history/feels hot/temperature 37.5 C or above)Yes No ___• For how long? 2 Days

• If more than 7 days has fever been present every day?

• Has child had measles within the last 3 months? No

- Look or feel for stiff neck
 Look for signs of MEASLES
- Generalized rash and
- One of these cough runny nose or red eyes

Malaria

If the child has measles now
 or within the last 3 months

- Look for mouth ulcers
 If Yes are they deep and extensive?
- Look for pus draining from the eye
- Look for clouding of the cornea

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Paolo Age 10 mos. Weight 8.2 kg Temperature 37.5 C
 ASK What are the child's problems? rash, cough Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)	CLASSIFY
CHECK FOR GENERAL DANGER SIGNS NOT ABLE TO DRINK OR BREASTFEED VOMITS EVERYTHING CONVULSIONS LETHARGIC OR UNCONSCIOUS	General danger sign present? Yes ___ No <input checked="" type="checkbox"/> Remember to use danger sign when selecting classifications
DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>5</u> Days • Count the breaths in one minute <u>43</u> breaths per minute Fast breathing? • Look for chest indrawing • Look and listen for stndor or wheezing	No Pneumonia: Cough or Cold
DOES THE CHILD HAVE DIARRHOEA? Yes ___ No <input checked="" type="checkbox"/> • For how long? ___ Days • Is there blood in the stool? • Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable? • Look for sunken eyes • Offer the child fluid Is the child Not able to drnk or drnking poorly? Drnking eagerly thirsty? • Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?	
DOES THE CHILD HAVE FEVER? <u>(by history, feels hot, temperature 37.5°C or above)</u> Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>2</u> Days • If more than 7 days has fever been present every day? • Has child had measles within the last 3 months? • Look or feel for stiff neck Look for signs of MEASLES • <u>Generalized rash and</u> • One of these: <u>cough, runny nose, or red eyes</u>	Malaria
If the child has measles now or within the last 3 months • Look for mouth ulcers If Yes are they deep and extensive? • Look for pus draining from the eye • Look for clouding of the cornea	Measles

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Karim Age 5 mos. Weight 5.2 kg Temperature 37.5 C
 ASK What are the child's problems? not eating well, feels hot Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)**CLASSIFY**

CHECK FOR GENERAL DANGER SIGNS NOT ABLE TO DRINK OR BREASTFEED LETHARGIC OR UNCONSCIOUS VOMITS EVERYTHING CONVULSIONS	General danger sign present? Yes ___ No <input checked="" type="checkbox"/> Remember to use danger sign when selecting classifications
DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes ___ No <input checked="" type="checkbox"/> • For how long? ___ Days • Count the breaths in one minute ___ breaths per minute Fast breathing? • Look for chest indrawing • Look and listen for stridor or wheezing	
DOES THE CHILD HAVE DIARRHOEA? Yes ___ No <input checked="" type="checkbox"/> • For how long? ___ Days • Is there blood in the stool? • Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable? • Look for sunken eyes • Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty? • Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?	
DOES THE CHILD HAVE FEVER? (by history, feels hot, temperature 37.5 C or above) Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>2</u> Days • If more than 7 days has fever been present every day? • Has child had measles within the last 3 months? • Look or feel for stiff neck Look for signs of MEASLES • Generalized rash and • One of these cough runny nose or red eyes	<h1 style="font-size: 2em; margin: 0;">Malaria</h1>
If the child has measles now or within the last 3 months • Look for mouth ulcers If Yes are they deep and extensive? • Look for pus draining from the eye • Look for clouding of the cornea	

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Pu Age 4 yrs, 9 mos. Weight 14 kg Temperature 38 C
 ASK What are the child's problems? rash, fever Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)	CLASSIFY
CHECK FOR GENERAL DANGER SIGNS NOT ABLE TO DRINK OR BREASTFEED VOMITS EVERYTHING CONVULSIONS LETHARGIC OR UNCONSCIOUS	General danger sign present? Yes ___ No <input checked="" type="checkbox"/> Remember to use danger sign when selecting classifications
DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>7</u> Days • Count the breaths in one minute <u>44</u> breaths per minute <u>Fast breathing</u> • Look for chest indrawing • Look and listen for stridor or wheezing	<h3 style="font-size: 1.2em;">Pneumonia</h3>
DOES THE CHILD HAVE DIARRHOEA? Yes ___ No <input checked="" type="checkbox"/> • For how long? ___ Days • Is there blood in the stool? • Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable? • Look for sunken eyes • Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty? • Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?	
DOES THE CHILD HAVE FEVER? (by history/feels hot/temperature 37.5 C or above) Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>3</u> Days • If more than 7 days has fever been present every day? <u>No</u> • Has child had measles within the last 3 months? <u>Yes</u> • Look or feel for stiff neck Look for signs of MEASLES • <u>Generalized rash</u> and • One of these: <u>cough</u> , <u>runny nose</u> or red eyes	<h3 style="font-size: 1.2em;">Malaria</h3>
If the child has measles now or within the last 3 months • Look for <u>mouth ulcers</u> If Yes are they deep and extensive? • Look for pus draining from the eye • Look for clouding of the cornea	<h3 style="font-size: 1.2em;">Measles with eye or mouth complications</h3>

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Herbert Age 4 yrs Weight 19 kg Temperature 38 C
 ASK What are the child's problems? crying, irritable Initial Visit? Follow-up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS
 NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?
 Yes ___ No
Remember to use danger sign when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes ___ No

- For how long? ___ Days
- Count the breaths in one minute ___ breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

DOES THE CHILD HAVE DIARRHOEA? Yes ___ No

- For how long? ___ Days
- Is there blood in the stool?
- Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable?
- Look for sunken eyes
- Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?

DOES THE CHILD HAVE FEVER? by history feels hot/temperature 37.5°C or above) Yes No ___

- For how long? 2 Days
- If more than 7 days has fever been present every day?
- Has child had measles within the last 3 months?
- Look or feel for stiff neck
- Look for signs of MEASLES
- Generalized rash and
- One of these cough runny nose or red eyes

Malaria

If the child has measles now or within the last 3 months

- Look for mouth ulcers If Yes are they deep and extensive?
- Look for pus draining from the eye
- Look for clouding of the cornea

DOES THE CHILD HAVE AN EAR PROBLEM? Yes No ___

- Is there ear pain?
- Is there ear discharge? If Yes for how long? 1 Days
- Look for pus draining from the ear
- Feel for tender swelling behind the ear

Acute Ear Infection

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Dana Age 18 mos Weight 9 kg Temperature 37 C
 ASK What are the child's problems? ear discharge Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS

- NOT ABLE TO DRINK OR BREASTFEED
- VOMITS EVERYTHING
- CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?

Yes ___ No

Remember to use danger sign when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes ___ No

- For how long? ___ Days

- Count the breaths in one minute
 ___ breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

DOES THE CHILD HAVE DIARRHOEA? Yes ___ No

- For how long? ___ Days
- Is there blood in the stool?

- Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable?
- Look for sunken eyes
- Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?

DOES THE CHILD HAVE FEVER? (by history/feels hot/temperature 37.5 C or above) Yes ___ No

- For how long? ___ Days
- If more than 7 days has fever been present every day?
- Has child had measles within the last 3 months?

- Look or feel for stiff neck
- Look for signs of MEASLES
- Generalized rash and
- One of these cough runny nose or red eyes

If the child has measles now or within the last 3 months

- Look for mouth ulcers
 If Yes are they deep and extensive?
- Look for pus draining from the eye
- Look for clouding of the cornea

DOES THE CHILD HAVE AN EAR PROBLEM? Yes No ___

- Is there ear pain?
- Is there ear discharge? If Yes for how long? 3-4 Days
- Look for pus draining from the ear
- Feel for tender swelling behind the ear

Acute Ear Infection

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Madie Age 18 mos. Weight 7 kg Temperature 38.5 C
 ASK What are the child's problems? feels hot, rash Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS

- NOT ABLE TO DRINK OR BREASTFEED
- VOMITS EVERYTHING
- CONVULSIONS
- LETHARGIC OR UNCONSCIOUS

General danger sign present?
 Yes ___ No
Remember to use danger sign when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes ___ No

- For how long? ___ Days
- Count the breaths in one minute ___ breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

DOES THE CHILD HAVE DIARRHOEA? Yes ___ No

- For how long? ___ Days
- Is there blood in the stool?
- Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable?
- Look for sunken eyes
- Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?

DOES THE CHILD HAVE FEVER? by history feels hot temperature 37.5 C or above Yes No ___

- For how long? 5 Days
- If more than 7 days has fever been present every day?
- Has child had measles within the last 3 months?
- Look or feel for stiff neck
- Look for signs of MEASLES Generalized rash and red eyes
- One of these cough runny nose or red eyes

Malaria

If the child has measles now or within the last 3 months

- Look for mouth ulcers If Yes are they deep and extensive?
- Look for pus draining from the eye
- Look for clouding of the cornea

Measles

DOES THE CHILD HAVE AN EAR PROBLEM? Yes ___ No

- Is there ear pain?
- Is there ear discharge? If Yes for how long? ___ Days
- Look for pus draining from the ear
- Feel for tender swelling behind the ear

THEN CHECK FOR MALNUTRITION AND ANAEMIA

- Look for visible severe wasting
- Look for palmar pallor Severe palmar pallor? Some palmar pallor?
- Look for oedema of both feet
- Determine weight for age Very Low Not Very Low ___
- Check for growth faltering

Severe Malnutrition or Severe Anaemia

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Kalisa Age 11 mos. Weight 8 kg Temperature 37 C
 ASK What are the child's problems? Dry cough for 3 weeks Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)**CLASSIFY****CHECK FOR GENERAL DANGER SIGNS**

NOT ABLE TO DRINK OR BREASTFEED
 VOMITS EVERYTHING
 CONVULSIONS

LETHARGIC OR UNCONSCIOUS

General danger sign present?

Yes ___ No

Remember to use danger sign when selecting classifications

DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING?Yes No ___• For how long? 21 Days

- Count the breaths in one minute
41 breaths per minute Fast breathing?
- Look for chest indrawing
- Look and listen for stridor or wheezing

**No Pneumonia:
 Cough or Cold**

DOES THE CHILD HAVE DIARRHOEA?Yes ___ No

- For how long? ___ Days
- Is there blood in the stool?

- Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable?
- Look for sunken eyes
- Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty?
- Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?

DOES THE CHILD HAVE FEVER? (by history/feels hot/temperature 37.5 C or above)Yes ___ No

- For how long? ___ Days
- If more than 7 days has fever been present every day?
- Has child had measles within the last 3 months?

- Look or feel for stiff neck
- Look for signs of MEASLES
- Generalized rash and
- One of these cough runny nose or red eyes

If the child has measles now
 or within the last 3 months

- Look for mouth ulcers
If Yes are they deep and extensive?
- Look for pus draining from the eye
- Look for clouding of the cornea

DOES THE CHILD HAVE AN EAR PROBLEM?Yes ___ No

- Is there ear pain?
- Is there ear discharge? If Yes for how long? ___ Days
- Look for pus draining from the ear
- Feel for tender swelling behind the ear

THEN CHECK FOR MALNUTRITION AND ANAEMIA

- Look for visible severe wasting
- Look for palmar pallor
Severe palmar pallor Some palmar pallor?
- Look for oedema of both feet
- Determine weight for age
Very Low ___ Not Very Low
- Check for growth faltering

**Severe
 Malnutrition
 or
 Severe Anaemia**

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Jorge Age 9 mos. Weight 5 kg Temperature 36.8 C
 ASK What are the child's problems? diarrhoea Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)**CLASSIFY**

CHECK FOR GENERAL DANGER SIGNS NOT ABLE TO DRINK OR BREASTFEED VOMITS EVERYTHING CONVULSIONS LETHARGIC OR UNCONSCIOUS	General danger sign present? Yes ___ No <input checked="" type="checkbox"/> Remember to use danger sign when selecting classifications
DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes ___ No <input checked="" type="checkbox"/> <ul style="list-style-type: none"> • For how long? ___ Days • Count the breaths in one minute ___ breaths per minute Fast breathing? • Look for chest indrawing • Look and listen for stridor or wheezing 	
DOES THE CHILD HAVE DIARRHOEA? Yes <input checked="" type="checkbox"/> No ___ <ul style="list-style-type: none"> • For how long? <u>5</u> Days • Is there blood in the stool? • Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable? • Look for sunken eyes • Offer the child fluid Is the child Not able to drink or drinking poorly? <u>Drinking eagerly thirsty?</u> • Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? <u>Slowly?</u> 	<p style="text-align: center; font-size: 1.2em;"><i>Some Dehydration</i></p>
DOES THE CHILD HAVE FEVER? (by history/feels hot/temperature 37.5°C or above) Yes ___ No <input checked="" type="checkbox"/> <ul style="list-style-type: none"> • For how long? ___ Days • If more than 7 days has fever been present every day? • Has child had measles within the last 3 months? • Look or feel for stiff neck • Look for signs of MEASLES • Generalized rash and • One of these cough runny nose or red eyes 	
If the child has measles now or within the last 3 months	<ul style="list-style-type: none"> • Look for mouth ulcers • If Yes are they deep and extensive? • Look for pus draining from the eye • Look for clouding of the cornea
DOES THE CHILD HAVE AN EAR PROBLEM? Yes ___ No <input checked="" type="checkbox"/> <ul style="list-style-type: none"> • Is there ear pain? • Is there ear discharge? If Yes for how long? ___ Days • Look for pus draining from the ear • Feel for tender swelling behind the ear 	
THEN CHECK FOR MALNUTRITION AND ANAEMIA <ul style="list-style-type: none"> • Look for visible severe wasting • Look for palmar pallor Severe palmar pallor? Some palmar pallor? • Look for oedema of both feet • Determine weight for age Very Low <input checked="" type="checkbox"/> Not Very Low ___ • Check for <u>growth faltering</u> 	<p style="text-align: center; font-size: 1.2em;"><i>Anaemia or Very Low Weight or Growth Faltering</i></p>

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

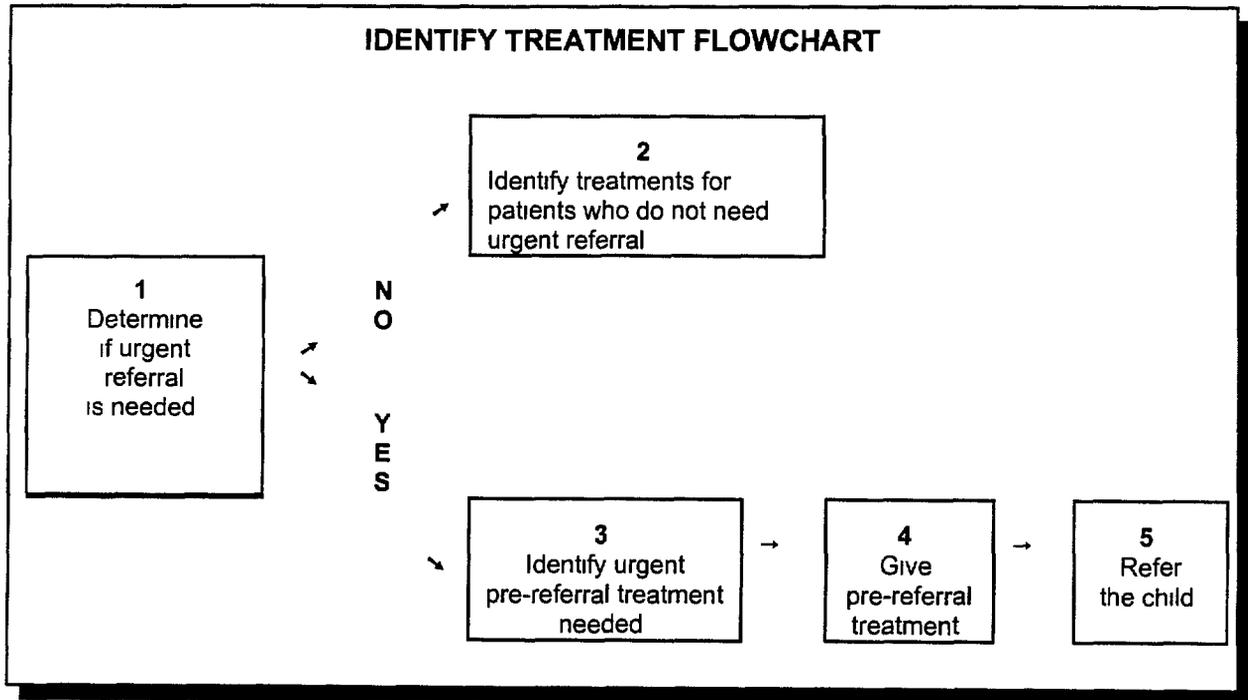
Child's Name Jenny Age 15 mos. Weight 6 kg Temperature 37 C
 ASK What are the child's problems? diarrhoea Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)**CLASSIFY**

CHECK FOR GENERAL DANGER SIGNS NOT ABLE TO DRINK OR BREASTFEED LETHARGIC OR UNCONSCIOUS VOMITS EVERYTHING CONVULSIONS	General danger sign present? Yes ___ No <input checked="" type="checkbox"/> Remember to use danger sign when selecting classifications
DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>5</u> Days • Count the breaths in one minute <u>42</u> breaths per minute. <u>Fast breathing</u> • Look for chest indrawing • Look and listen for stndor or wheezing	<h3 style="font-size: 1.2em;">Pneumonia</h3>
DOES THE CHILD HAVE DIARRHOEA? Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>2</u> Days • Is there blood in the stool? <u>No</u> • Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable? • Look for sunken eyes • Offer the child fluid Is the child Not able to drink or dnnking poorly? <u>Drinking eagerly thirsty</u> • Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?	<h3 style="font-size: 1.2em;">Diarrhoea with no Dehydration</h3>
DOES THE CHILD HAVE FEVER? (by history/feels hot/temperature 37.5 C or above) Yes ___ No <input checked="" type="checkbox"/> • For how long? ___ Days • If more than 7 days has fever been present every day? • Has child had measles within the last 3 months? • Look or feel for stiff neck Look for signs of MEASLES • Generalized rash and • One of these cough runny nose or red eyes	
If the child has measles now or within the last 3 months • Look for mouth ulcers If Yes are they deep and extensive? • Look for pus draining from the eye • Look for clouding of the cornea	
DOES THE CHILD HAVE AN EAR PROBLEM? Yes ___ No <input checked="" type="checkbox"/> • Is there ear pain? • Is there ear discharge? If Yes for how long? ___ Days • Look for pus draining from the ear • Feel for tender swelling behind the ear	
THEN CHECK FOR MALNUTRITION AND ANAEMIA • Look for <u>visible severe wasting</u> • Look for palmar pallor Severe palmar pallor? <u>Some palmar pallor</u> • Look for oedema of both feet • Determine weight for age Very Low <input checked="" type="checkbox"/> Not Very Low ___ • Check for growth faltering	<h3 style="font-size: 1.2em;">Severe Malnutrition</h3>

CASE STUDIES

Read the Case Studies below Then tick (✓) the steps from the IDENTIFY TREATMENT FLOWCHART that the health worker would need to follow Refer to the TREATMENT column in your Chart Booklet as necessary



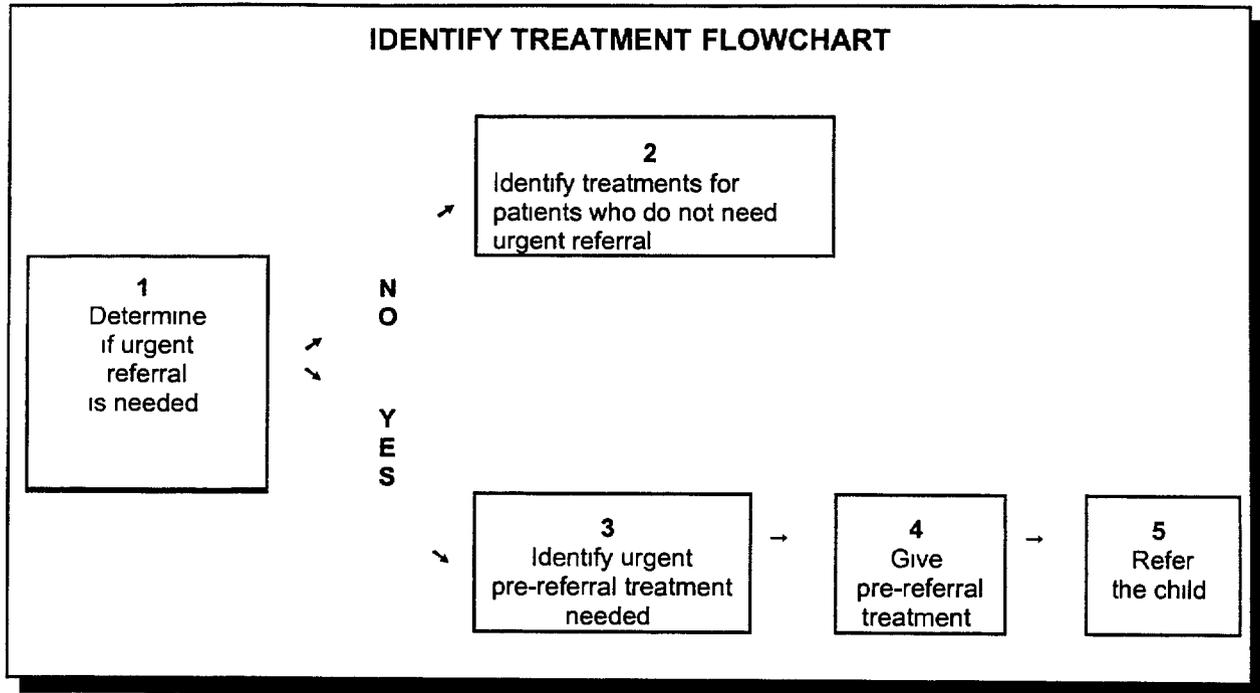
CASE STUDY CHANDA

Chanda is a four-month old boy He has no General Danger Signs, but he has COUGH OR DIFFICULT BREATHING and has chest indrawing He is classified as having SEVERE PNEUMONIA OR VERY SEVERE DISEASE

Which IDENTIFY TREATMENT steps should the health worker follow for Chanda?

✓ 1 ___ 2 ✓ 3 ✓ 4 ✓ 5

CASE STUDIES



CASE STUDY SARAH

Sarah is a three-year old girl. She has no General Danger Signs. She is classified as having MALARIA, CHRONIC EAR INFECTION, and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING.

Which IDENTIFY TREATMENT steps should the health worker follow for Sarah?

1

2

3

4

5

DECIDE IF URGENT REFERRAL IS NECESSARY

In this exercise you will decide whether or not urgent referral is needed Tick YES or NO

1 Chileshe is a 2-year-old girl She has no general danger signs Chileshe has

MALARIA
ACUTE EAR INFECTION
NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT
FALTERING
no other classifications

Does Chileshe need urgent referral? YES NO

2 Chanda is a 4-month-old boy He has no General Danger Signs He has

SEVERE PNEUMONIA OR VERY SEVERE DISEASE
MALARIA
no other classifications

Does Chanda need urgent referral? YES NO

3 Kabamba is a 7-month-old girl She has one General Danger Sign she is lethargic
She also has

SEVERE DEHYDRATION
no other classifications

Does Kabamba need urgent referral? YES NO

It depends If Kabamba is successfully rehydrated and is no longer lethargic, she will not need referral If she cannot be rehydrated or if she remains lethargic, she needs referral

DETERMINING IF URGENT REFERRAL IS NECESSARY

4 Kasonde is a 3-year-old girl She is unconscious She has no other classifications

Does Kasonde need urgent referral? YES NO

5 Mambo is an 11-month-old girl She has no General Danger Signs She has

PNEUMONIA
ACUTE EAR INFECTION
NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT
FALTERING
no other classifications

Does Mambo need urgent referral? YES NO

6 Chilufya is a 9-month-old boy He is lethargic He has

Diarrhoea with SEVERE DEHYDRATION
MALARIA
NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT
FALTERING
no other classifications

The clinic can provide IV therapy
Does Chilufya need urgent referral? YES NO

PRACTICE IDENTIFYING TREATMENTS FOR PATIENTS WHO DO NOT NEED URGENT REFERRAL

1 Namakao is 15 months old She has no General Danger Signs She has

PNEUMONIA
NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT
FALTERING

Namakao has received BCG and three doses of both DPT and OPV She last
received vitamin A at age 8 months

a What treatments are needed for her PNEUMONIA?

Give an appropriate antibiotic for 5 days, soothe the throat and relieve the cough

b Look in the "Identify Treatment" column for NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING Does Namakao need a feeding assessment?

Yes, because she is less than 2 years of age

c What immunization does Namakao need today?

Measles immunization

d Should Namakao receive vitamin A?

Yes, if there are adequate stocks

e What is the earliest definite time for Namakao to return for follow-up?

- 2 days

f What are the signs to return immediately?

Not able to drink, becomes sicker, develops a fever

PRACTICE IDENTIFYING TREATMENTS FOR PATIENTS WHO DO NOT NEED URGENT REFERRAL

2 Masauso is 2 years old He has no General Danger Signs He has

Diarrhoea with SOME DEHYDRATION
DYSENTERY
MALARIA (fever 37.5°C in clinic, fever present for 2 days)
NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT
FALTERING

Masauso has completed his immunizations He received vitamin A last when he was 20 months old

- a What treatments are needed for SOME DEHYDRATION?
Give fluid/food as on PLAN B, Advise mother when to return immediately, Follow-up in 5 days if not improving
- b What treatments are needed for DYSENTERY?
Oral antibiotic for Shigella, 5 days, Follow-up in 2 days
- c What treatments are needed for MALARIA?
*Oral antimalarial, Follow-up in 2 days if fever persists
Paracetamol is not needed since fever is not high Fever has only been present for 2 days, so there is no need to refer for assessment*
- d Look in the "Identify Treatment" column for NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING Does Masauso need a feeding assessment?
No Since Masauso is 2 years old and has NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING, you do not need to assess his feeding and counsel on feeding
- e Should Masauso receive Vitamin A?
No
- f What is the earliest definite time for Masauso to return for follow-up?
2 days

g What are the signs to return immediately?

If he is not able to drink or breastfeed or is drinking poorly, or if he becomes sicker He does not need to return if fever develops since it is already present

3 Mubita

The Sick Child Recording Form for Mubita follows Study the front of the form, then fold over the classifications and list the treatments on the back

Note Mubita has never had a dose of mebendazole Mubita has never received vitamin A before There is a sufficient supply of vitamin A at your health facility

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name mubita Age 3 yrs. Weight 15 kg Temperature 38.5 C

ASK What are the child's problems? ear hurts Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR GENERAL DANGER SIGNS</p> <p>NOT ABLE TO DRINK OR BREASTFEED LETHARGIC OR UNCONSCIOUS</p> <p>VOMITS EVERYTHING</p> <p>CONVULSIONS</p>	<p>General danger sign present? Yes ___ No <input checked="" type="checkbox"/></p> <p>Remember to use danger sign when selecting classifications</p>
<p>DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes <input checked="" type="checkbox"/> No ___</p> <p>• For how long? <u>4</u> Days</p> <p>• Count the breaths in one minute <u>44</u> breaths per minute <u>Fast breathing?</u></p> <p>• Look for chest indrawing</p> <p>• Look and listen for stndor or wheezing</p>	<p>Pneumonia</p>
<p>DOES THE CHILD HAVE DIARRHOEA? Yes ___ No <input checked="" type="checkbox"/></p> <p>• For how long? ___ Days</p> <p>• Is there blood in the stool?</p> <p>• Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable?</p> <p>• Look for sunken eyes</p> <p>• Offer the child fluid Is the child Not able to dnnk or drnking poorly? Drinking eagerly thirsty?</p> <p>• Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?</p>	
<p>DOES THE CHILD HAVE FEVER? (by history/feels hot <u>temperature 37.5°C or above</u>) Yes <input checked="" type="checkbox"/> No ___</p> <p>• For how long? <u>2</u> Days</p> <p>• If more than 7 days has fever been present every day?</p> <p>• Has child had measles within the last 3 months? <u>No</u></p> <p>• Look or feel for stiff neck</p> <p>• Look for signs of MEASLES</p> <p>• Generalized rash and</p> <p>• One of these cough runny nose or red eyes</p>	<p>Malaria</p>
<p>If the child has measles now or within the last 3 months</p> <p>• Look for mouth ulcers If Yes are they deep and extensive?</p> <p>• Look for pus draining from the eye</p> <p>• Look for clouding of the cornea</p>	
<p>DOES THE CHILD HAVE AN EAR PROBLEM? Yes <input checked="" type="checkbox"/> No ___</p> <p>• Is there <u>ear pain?</u></p> <p>• Is there <u>ear discharge?</u> If Yes for how long? <u>2</u> Days</p> <p>• Look for pus draining from the ear</p> <p>• Feel for tender swelling behind the ear</p>	<p>Acute Ear Infection</p>
<p>THEN CHECK FOR MALNUTRITION AND ANAEMIA</p> <p>• Look for visible severe wasting</p> <p>• Look for palmar pallor Severe palmar pallor? Some palmar pallor?</p> <p>• Look for oedema of both feet</p> <p>• Determine weight for age Very Low ___ Not Very Low <input checked="" type="checkbox"/></p> <p>• Check for growth faltering</p>	<p>No Anaemia, Not Very Low Weight, Growth Not Faltering</p>
<p>CHECK THE CHILD'S IMMUNIZATION STATUS Circle immunizations needed today</p> <p>BCG <input checked="" type="checkbox"/> OPV 0 <input checked="" type="checkbox"/> DPT 1 <input checked="" type="checkbox"/> OPV 1 <input checked="" type="checkbox"/> DPT 2 <input checked="" type="checkbox"/> OPV 2 <input checked="" type="checkbox"/> DPT 3 <input checked="" type="checkbox"/> OPV 3 <input checked="" type="checkbox"/> Measles <input checked="" type="checkbox"/></p>	<p>Next immunization on (Date)</p> <p>_____</p>
<p>CHECK WHETHER THE CHILD SHOULD RECEIVE VITAMIN A</p>	
<p>ASSESS CHILD'S FEEDING if child has ANAEMIA OR VERY LOW WEIGHT or GROWTH FALTERING or is less than 2 years old</p> <p>• Do you breastfeed your child? Yes ___ No ___ If Yes how many times in 24 hours? ___ times Do you breastfeed during the night? Yes ___ No ___</p> <p>• Does the child take any other food or fluids? Yes ___ No ___ If Yes what food or fluids? _____ How many times per day? ___ times What do you use to feed the child? _____ If very low weight for age or growth faltering How large are servings? _____ Does the child receive his own serving? ___ Who feeds the child and how? _____</p> <p>• During this illness has the child's feeding changed? Yes ___ No ___ If Yes how? _____</p>	<p>Feeding Problems</p>

ASSESS THE CHILD'S OTHER PROBLEMS

ASSESS THE MOTHER'S HEALTH NEEDS

- Do you have any health problems? Yes ___ No ___
- Do you want help with family planning? Yes ___ No ___
- Did you bring your maternal health card? Yes ___ No ___
- May I please look at it? Yes ___ No ___

PRACTICE IDENTIFYING URGENT PRE-REFERRAL TREATMENTS

*In this exercise you will practice identifying urgent pre-referral treatments. Remember that these are in **bold print** on the ASSESS & CLASSIFY chart*

- 1 Lamei is a 15-month-old girl. She has no General Danger Signs. She has **NO PNEUMONIA, COUGH OR COLD, MASTOIDITIS, NO ANAEMIA AND NOT VERY LOW WEIGHT**, and no other classifications.

Lamei needs urgent referral for **MASTOIDITIS**. Following is a list of treatments for all of Lamei's classifications. Tick the **urgent, pre-referral treatment(s)**.

- a Soothe the throat and relieve the cough with a safe remedy
- b Advise the mother when to return immediately
- c Follow-up in 5 days if not better
- d Give first dose of an appropriate antibiotic
- e Give first dose of paracetamol for pain
- f Refer **URGENTLY** to hospital
- g Assess the child's feeding and counsel the mother on feeding. If feeding problem, follow-up in 5 days

- 2 Chandra is an 18-month-old girl. She has no General Danger Signs. She has **NO SIGNS OF DEHYDRATION, PERSISTENT DIARRHOEA, SEVERE MALNUTRITION OR SEVERE ANAEMIA**, and no other classifications.

Chandra needs referral for **SEVERE MALNUTRITION OR SEVERE ANAEMIA**. Following is a list of treatments for all of Chandra's classifications. Tick the **urgent, pre-referral treatment(s)**.

- a Give fluid and food to prevent dehydration (Plan A)
- b Advise the mother when to return immediately
- c Advise the mother on feeding a child who has persistent diarrhoea
- d Follow-up in 5 days
- e Follow-up in 5 days if not improving
- f Give vitamin A
- g Refer **URGENTLY** to hospital

- 3 Oko is a 2-year-old boy. He is lethargic. He has a fever of 39°C. The health worker classifies Oko as having VERY SEVERE FEBRILE DISEASE and CHRONIC EAR INFECTION. He has some palmar pallor so is classified as having ANAEMIA, although he is not very low weight. He has never had a dose of mebendazole.

Oko needs referral for VERY SEVERE FEBRILE DISEASE. Following is a list of treatments for all of Oko's classifications. Tick the **urgent, pre-referral treatments**.

- a Give quinine for severe malaria (first dose)
- b Give first dose of an appropriate antibiotic
- c Treat the child to prevent low blood sugar
- d Give one dose of paracetamol in clinic for high fever (38.5°C or above)
- e Refer URGENTLY to hospital
- f Dry the ear by wicking
- g Follow-up in 5 days
- h Assess the child's feeding and counsel the mother on feeding. If feeding problem, follow up in 5 days
- l Give iron
- j Give oral antimalarial
- k Give mebendazole
- l Advise mother when to return immediately
- m Follow-up in 14 days (for pallor)

- 4 Markita is 4 years old. She is lethargic. She is classified as having diarrhoea with SEVERE DEHYDRATION and SEVERE MALNUTRITION OR SEVERE ANAEMIA. She has no other classifications. She is able to drink. She lives in an area where there is cholera.

Markita needs referral for her severe classifications. Tick the **urgent, pre-referral treatments**.

- a Provide ORS for the mother to give in frequent sips on the way
- b Advise mother to continue breastfeeding
- c Give antibiotic for cholera
- d Give vitamin A
- e Refer URGENTLY to hospital

FAST BREATHING CUT-OFFS		
GROUP	AGE	FAST BREATHING CUT-OFF
Young Infants	1 week up to 2 months	60 breaths per minute or more
Infants	2 months up to 12 months	50 breaths per minute or more
Children	12 months up to 5 years	40 breaths per minute or more

DOES THIS CHILD HAVE FAST BREATHING?			
QUESTIONS		ANSWERS	
Age	Breathing Rate	Yes	No
3 weeks	55		✓
4 weeks	63	✓	
2 weeks	59		✓
18 months	44	✓	
2 months	48		✓
12 months	40	✓	
3 years	38		✓
12 months	38		✓
3 years	42	✓	
12 months	49	✓	
11 months	49		✓
6 months	52	✓	
6 weeks	65	✓	
14 months	45	✓	

NASAL FLARING

Does this drawing show nasal flaring?

Yes _____

No _____



Does this drawing show nasal flaring?

Yes _____

No _____



PHOTOGRAPHS					
UMBILICUS				SKIN PUSTULES	
	Normal	Redness or draining pus	Redness extending to the skin of abdomen	Many	Severe
Photograph 63			✓		
Photograph 64	✓				
Photograph 65		✓ (pus)		✓	

CASE STUDIES Henri, Neera and Jenna

- 1 Read the Case Study Write the young infant's name, age, weight, temperature and problem on a Recording Form Tick (✓) "Initial Visit" (the young infants in this exercise are coming for an initial visit)
- 2 Write the child 's CLASSIFICATION for POSSIBLE BACTERIAL INFECTION on the Recording Form

Case Study 1 Henri

Henri is a 3-week-old infant His weight is 3.6 kg His axillary temperature is 36.5° C He is brought to the clinic because he is having difficulty breathing The health worker first checks the young infant for signs of possible bacterial infection His mother says that Henri has not had convulsions The health worker counts 74 breaths per minute He repeats the count The second count is 70 breaths per minute He finds that Henri has mild chest indrawing and nasal flaring He has no grunting The fontanelle does not bulge There is no pus in his ears, the umbilicus is normal, and there are no skin pustules Henri is calm and awake, and his movements are normal

MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Henri Age 3 wks Weight 3.6 kg Temperature 36.5 C
 ASK What are the infant's problems? difficulty breathing Initial Visit? Follow-up visit?

ASSESS (Circle all signs present)

CLASSIFY

ASSESS (Circle all signs present)	CLASSIFY
<p>CHECK FOR POSSIBLE BACTERIAL INFECTION</p> <p>Has the infant had convulsions? <u>No</u></p> <p>Count the breaths in one minute. <u>74</u> breaths per minute Repeat if elevated <u>70</u> <u>Fast breathing?</u></p> <p>Look for severe chest indrawing</p> <p>Look for <u>nasal flaring</u></p> <p>Look and listen for grunting</p> <p>Look and feel for bulging fontanelle</p> <p>Look for pus draining from the ear</p> <p>Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin?</p> <p>Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)?</p> <p>Look for skin pustules Are there many or severe pustules?</p> <p>See if the young infant is lethargic or unconscious</p> <p>Look at young infant's movements Less than normal?</p>	<p>Possible Serious Bacterial Infection</p>

Case Study 2 Neera

Neera is 6 weeks old Her weight is 4.2 kg Her axillary temperature measures 36.5° C Her mother brought her to the clinic because she has diarrhoea and seems very sick When the health worker asks the mother if Neera has had convulsions, she says no The health worker counts 50 breaths per minute Neera has severe chest indrawing and nasal flaring She is not grunting Her fontanelle is not bulging There is no pus draining from her ears and her umbilicus is not red or draining pus There are no pustules on her body Undressing Neera, speaking to her, shaking her arms and legs and picking her up do not wake her Neera is unconscious

MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Neera Age 6 wks. Weight 4.2 kg Temperature 36.5 C
 ASK What are the infant's problems? diarrhoea, very sick Initial Visit? Follow-up visit?

ASSESS (Circle all signs present)

CLASSIFY

ASSESS (Circle all signs present)	CLASSIFY
<p>CHECK FOR POSSIBLE BACTERIAL INFECTION</p> <p>Has the infant had convulsions? <u>No</u></p> <p>Count the breaths in one minute <u>50</u> breaths per minute Repeat if elevated <u>Fast breathing?</u></p> <p>Look for <u>severe chest indrawing</u></p> <p>Look for <u>nasal flaring</u></p> <p>Look and listen for grunting</p> <p>Look and feel for bulging fontanelle</p> <p>Look for pus draining from the ear</p> <p>Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin?</p> <p>Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)?</p> <p>Look for skin pustules Are there many or severe pustules?</p> <p>See if the young infant is lethargic or <u>unconscious</u></p> <p>Look at young infant's movements <u>less than normal</u></p>	<p>Possible Serious Bacterial Infection</p>

Case Study 3 Jenna

Jenna is 7 weeks old Her weight is 3 kg Her axillary temperature is 36.4°C Her mother has brought her because she has diarrhoea The health worker first assesses her for signs of possible bacterial infection Her mother says that she has not had convulsions Her breathing rate is 58 per minute She was sleeping in her mother's arms but awoke when her mother unwrapped her She has slight chest indrawing, no nasal flaring and no grunting Her fontanelle is not bulging No pus is draining from her ears Her umbilicus is not red or draining pus She has a rash in the area of her diaper, but there are no pustules She is crying and moving her arms and legs

MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Jenna Age 7 wks. Weight 3 kg Temperature 36.4°C
 ASK What are the infant's problems? diarrhoea Initial Visit? Follow-up-visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR POSSIBLE BACTERIAL INFECTION	
Has the infant had convulsions? <u>No</u> Count the breaths in one minute <u>58</u> breaths per minute Repeat if elevated _____ Fast breathing? Look for severe chest indrawing Look for nasal flaring Look and listen for grunting Look and feel for bulging fontanelle Look for pus draining from the ear Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin? Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)? Look for skin pustules Are there many or severe pustules? See if the young infant is lethargic or unconscious Look at young infant's movements Less than normal?	

CASE STUDIES Henri, Neera and Jenna

- 1 Read the first Case Study Write the young infant's name, age, weight, temperature and problem on a Recording Form Check Initial Visit (the young infants in this exercise are coming for an initial visit)
- 2 Write the child 's CLASSIFICATIONS on the Recording Form

Case Study 1 Henri

Henri is a 3-week-old infant His weight is 3.6 kg His axillary temperature is 36.5° C He is brought to the clinic because he is having difficulty breathing The health worker first checks the young infant for signs of possible bacterial infection His mother says that Henri has not had convulsions The health worker counts 74 breaths per minute He repeats the count The second count is 70 breaths per minute He finds that Henri has mild chest indrawing and nasal flaring He has no grunting The fontanelle does not bulge There is no pus in his ears, the umbilicus is normal, and there are no skin pustules Henri is calm and awake, and his movements are normal

The health worker asks the mother, "Does Henri have diarrhoea?" The mother responds, "No, he does not have diarrhoea "

MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Henri Age 3 wks Weight 3.6 kg Temperature 36.5 C
 ASK What are the infant s problems? difficulty breathing Initial Visit? Follow up visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR POSSIBLE BACTERIAL INFECTION Has the infant had convulsions? <u>No</u></p>	<p>Count the breaths in one minute <u>74</u> breaths per minute Repeat if elevated <u>70</u> <u>Fast breathing?</u> Look for <u>severe chest indrawing</u> Look for <u>nasal flaring</u> Look and listen for grunting Look and feel for bulging fontanelle Look for pus draining from the ear Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin? Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)? Look for skin pustules Are there many or severe pustules? See if the young infant is lethargic or unconscious Look at young infant s movements Less than normal?</p>	<p>Possible Serious Bacterial Infection</p>
<p>DOES THE YOUNG INFANT HAVE DIARRHOEA? For how long? ___ Days Is there blood in the stool?</p>	<p>Yes ___ No <input checked="" type="checkbox"/> Look at the young infant s general condition Is the infant Lethargic or unconscious? Restless and irritable? Look for sunken eyes Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?</p>	

Case Study 3 Neera

Neera is 6 weeks old Her weight is 4.2 kg Her axillary temperature measures 36.5° C Her mother brought her to the clinic because she has diarrhoea and seems very sick When the health worker asks the mother if Neera has had convulsions, she says no The health worker counts 50 breaths per minute Neera has severe chest indrawing and nasal flaring She is not grunting Her fontanelle is not bulging There is no pus draining from her ears and her umbilicus is not red or draining pus There are no pustules on her body Undressing Neera, speaking to her, shaking her arms and legs and picking her up do not wake her Neera is unconscious

In response to the health worker's questions, the mother says that Neera has had diarrhoea for 1 week, and there is no blood in the stool The health worker finds that her eyes are sunken When the skin on her abdomen is pinched, it goes back very slowly

MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Neera Age 6 wks. Weight 4.2 kg Temperature 36.5 C
 ASK What are the infant's problems? diarrhoea, very sick Initial Visit? Follow-up visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR POSSIBLE BACTERIAL INFECTION Has the infant had convulsions? <u>No</u></p>	<p>Count the breaths in one minute <u>50</u> breaths per minute Repeat if elevated _____ Fast breathing? Look for <u>severe chest indrawing</u> Look for <u>nasal flaring</u> Look and listen for grunting Look and feel for bulging fontanelle Look for pus draining from the ear Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin? Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)? Look for skin pustules Are there many or severe pustules? See if the young infant is lethargic or <u>unconscious</u> Look at young infant's movements <u>less than normal</u></p>	<p>Possible Serious Bacterial Infection</p>
<p>DOES THE YOUNG INFANT HAVE DIARRHOEA? For how long? <u>1</u> Days is there blood in the stool? <u>No</u></p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Look at the young infant's general condition Is the infant Lethargic or <u>unconscious</u>? Restless and irritable? Look for <u>sunken eyes</u> Pinch the skin of the abdomen Does it go back <u>very slowly</u> (longer than 2 seconds)? Slowly?</p>	<p>Severe Dehydration</p>

Case Study 3 Jenna

Jenna is 7 weeks old Her weight is 3 kg Her axillary temperature is 36.4°C Her mother has brought her because she has diarrhoea The health worker first assesses her for signs of possible bacterial infection Her mother says that she has not had convulsions Her breathing rate is 58 per minute She was sleeping in her mother's arms but awoke when her mother unwrapped her She has slight chest indrawing, no nasal flaring and no grunting Her fontanelle is not bulging No pus is draining from her ears Her umbilicus is not red or draining pus She has a rash in the area of her diaper, but there are no pustules She is crying and moving her arms and legs

When the health worker asks the mother about Jenna's diarrhoea, the mother replies that it began 3 days ago, and there is blood in the stool Jenna is still crying She stopped once when her mother put her to the breast She began crying again when she stopped breastfeeding Her eyes look normal, not sunken When the skin of her abdomen is pinched, it goes back slowly

MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Jenna Age 7 wks Weight 3 kg Temperature 36.4 C
 ASK What are the infant's problems? diarrhoea Initial Visit? Follow up visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR POSSIBLE BACTERIAL INFECTION Has the infant had convulsions? <u>No</u></p>	<p>Count the breaths in one minute <u>58</u> breaths per minute Repeat if elevated _____ Fast breathing? Look for severe chest indrawing Look for nasal flaring Look and listen for grunting Look and feel for bulging fontanelle Look for pus draining from the ear Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin? Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)? Look for skin pustules Are there many or severe pustules? See if the young infant is lethargic or unconscious Look at young infant's movements Less than normal?</p>	
<p>DOES THE YOUNG INFANT HAVE DIARRHOEA? For how long? <u>3</u> Days Is there <u>blood in the stool?</u></p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Look at the young infant's general condition Is the infant Lethargic or unconscious? <u>Restless and irritable</u> Look for sunken eyes Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? <u>Slowly?</u></p>	<p><u>Some Dehydration</u> <u>Dysentery</u></p>

BREAST ATTACHMENT

Study photographs 66 through 74. In each photograph, look for each of the **signs** of good attachment and mark on the chart whether each sign is present. Also write your overall assessment of attachment and any comments about the attachment. The first three are already done for you.

Photo	Signs of Good Attachment				Assessment	Comments
	Chin Touching Breast	Mouth Wide Open	Lower Lip Turned Outward	More Areola Showing Above		
66	yes (almost)	yes	yes	yes	Good attachment	
67	no	no	yes	no (same above and below)	Not well attached	
68	yes	no	no	yes	Not well attached	Lower lip turned in
69	no	no	no	no	Not well attached	cheeks pulled in
70	yes	yes	yes	cannot see	Good attachment	
71	no	no	yes	no (equal above and below)	Not well attached	
72	yes	yes	yes	yes	Good attachment	
73	yes (almost)	yes	yes	yes	Good attachment	
74	yes	no	no	no (more below)	Not well attached	lower lip turned in

MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Henri Age 3 wks. Weight 3.6 kg Temperature 36.5 C
 ASK What are the infant's problems? difficulty breathing Initial Visit? Follow up visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR POSSIBLE BACTERIAL INFECTION Has the infant had convulsions? <u>No</u> Count the breaths in one minute <u>74</u> breaths per minute Repeat if elevated <u>70</u> <u>Fast breathing?</u> Look for <u>nasal flaring</u> Look and listen for grunting Look and feel for bulging fontanelle Look for pus draining from the ear Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin? Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)? Look for skin pustules Are there many or severe pustules? See if the young infant is lethargic or unconscious Look at young infant's movements Less than normal?</p>	<p>Possible Serious Bacterial Infection</p>	
<p>DOES THE YOUNG INFANT HAVE DIARRHOEA? For how long? ___ Days Is there blood in the stool? Look at the young infant's general condition Is the infant Lethargic or unconscious? Restless and irritable? Look for sunken eyes Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?</p>	<p>Yes ___ No <input checked="" type="checkbox"/></p>	
<p>THEN CHECK FOR FEEDING PROBLEM OR LOW WEIGHT Is there any difficulty feeding? Yes ___ No <input checked="" type="checkbox"/> Is the infant breastfed? Yes <input checked="" type="checkbox"/> No ___ If Yes how many times in 24 hours? <u>8</u> times Does the infant usually receive any other foods or drinks? Yes ___ No <input checked="" type="checkbox"/> If Yes how often? What do you use to feed the child?</p>	<p>Determine weight for age Low ___ Not Low <input checked="" type="checkbox"/> Check for growth faltering</p>	
<p>If the infant has any difficulty feeding, is feeding less than 8 times in 24 hours, is taking any other food or drinks or is low weight for age AND has no indications to refer urgently to hospital</p> <p>ASSESS BREASTFEEDING Has the infant breastfed in the previous hour? If infant has not fed in the previous hour ask the mother to put her infant to the breast Observe the breastfeed for 4 minutes Is the infant able to attach? To check attachment look for Chin touching breast Yes ___ No ___ Mouth wide open Yes ___ No ___ Lower lip turned outward Yes ___ No ___ More areola above than below the mouth Yes ___ No ___ no attachment at all not well attached good attachment Is the infant suckling effectively (that is slow deep sucks Sometimes pausing)? no suckling at all not suckling effectively suckling effectively Look for ulcers or white patches in the mouth (thrush)</p>		<p>no feeding problem</p>
<p>CHECK THE YOUNG INFANT'S IMMUNIZATION STATUS Circle immunizations needed today <input checked="" type="checkbox"/> BCG OPV 0 DPT 1 OPV 1 DPT 2 OPV 2</p>		<p>Return for next immunization on <u>at 6 wks. of age</u> (Date)</p>

ASSESS THE CHILD'S OTHER PROBLEMS

ASSESS THE MOTHER'S HEALTH NEEDS

Do you have any health problems? Yes ___ No ___
 Do you want any help with family planning? Yes ___ No ___
 Did you bring your maternal health card? Yes ___ No ___
 May I please look at it? Yes ___ No ___

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MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Neera Age 6 wks Weight 4.2 kg Temperature 36.5 C

ASK What are the infant's problems? diarrhoea, very sick Initial Visit? Follow up visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR POSSIBLE BACTERIAL INFECTION Has the infant had convulsions? <u>No</u> Count the breaths in one minute <u>50</u> breaths per minute Repeat if elevated <u>Fast</u> breathing? Look for <u>severe chest indrawing</u> Look for <u>nasal flaring</u> Look and listen for grunting Look and feel for bulging fontanelle Look for pus draining from the ear Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin? Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)? Look for skin pustules Are there many or severe pustules? See if the young infant is lethargic or <u>unconscious</u> Look at young infant's movements <u>Less than normal</u></p>	<p>Possible Serious Bacterial Infection</p>
<p>DOES THE YOUNG INFANT HAVE DIARRHOEA? For how long? <u>7</u> Days Is there blood in the stool? Look at the young infant's general condition Is the infant Lethargic or <u>unconscious</u>? Restless and irritable? Look for <u>sunken eyes</u> Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty? Pinch the skin of the abdomen Does it go back <u>Very slowly</u> (longer than 2 seconds)? Slowly?</p>	<p>Severe Dehydration</p>
<p>THEN CHECK FOR FEEDING PROBLEM OR LOW WEIGHT Is there any difficulty feeding? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Is the infant breastfed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes how many times in 24 hours? <u>9</u> times Does the infant usually receive any other foods or drinks? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes how often? What do you use to feed the child?</p>	
<p>If the infant has any difficulty feeding, is feeding less than 8 times in 24 hours, is taking any other food or drinks, or is low weight for age AND has no indications to refer urgently to hospital</p> <p>ASSESS BREASTFEEDING Has the infant breastfed in the previous hour? If infant has not fed in the previous hour ask the mother to put her infant to the breast Observe the breastfeed for 4 minutes Is the infant able to attach? To check attachment look for Chin touching breast Yes <input type="checkbox"/> No <input type="checkbox"/> Mouth wide open Yes <input type="checkbox"/> No <input type="checkbox"/> Lower lip turned outward Yes <input type="checkbox"/> No <input type="checkbox"/> More areola above than below the mouth Yes <input type="checkbox"/> No <input type="checkbox"/> no attachment at all not well attached good attachment Is the infant suckling effectively (that is slow deep sucks Sometimes pausing)? no suckling at all not suckling effectively suckling effectively Look for ulcers or white patches in the mouth (thrush)</p>	<p>Not able to feed - Possible Serious Bacterial Infection</p>
<p>CHECK THE YOUNG INFANT'S IMMUNIZATION STATUS Circle immunizations needed today <input checked="" type="checkbox"/> BCG <input type="checkbox"/> OPV 0 <input checked="" type="checkbox"/> DPT 1 <input checked="" type="checkbox"/> OPV 1 <input type="checkbox"/> DPT 2 <input type="checkbox"/> OPV 2</p>	<p>Return for next immunization on <u>in 4 weeks</u> (Date)</p>

ASSESS THE CHILD'S OTHER PROBLEMS

ASSESS THE MOTHER'S HEALTH NEEDS

Do you have any health problems? Yes No
 Do you want any help with family planning? Yes No
 Did you bring your maternal health card? Yes No
 May I please look at it? Yes No

MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Jenna Age 7 wks Weight 3 kg Temperature 36.4 C

ASK What are the infant's problems? diarrhoea Initial Visit? Follow up visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR POSSIBLE BACTERIAL INFECTION Has the infant had convulsions? <u>No</u> Count the breaths in one minute <u>58</u> breaths per minute Repeat if elevated _____ Fast breathing? Look for severe chest indrawing Look for nasal flaring Look and listen for grunting Look and feel for bulging fontanelle Look for pus draining from the ear Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin? Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)? Look for skin pustules Are there many or severe pustules? See if the young infant is lethargic or unconscious Look at young infant's movements Less than normal?</p>	
<p>DOES THE YOUNG INFANT HAVE DIARRHOEA? For how long? <u>3</u> Days Is there <u>blood in the stool</u>? Look at the young infant's general condition Is the infant Lethargic or unconscious? <u>Restless and irritable</u> Look for sunken eyes Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty? Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? <u>Slowly?</u></p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Some Dehydration Dysentery</p>
<p>THEN CHECK FOR FEEDING PROBLEM OR LOW WEIGHT Is there any difficulty feeding? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Is the infant breastfed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes how many times in 24 hours? <u>3</u> times Does the infant usually receive any other foods or drinks? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes how often? <u>3 times per day - breastmilk substitute feeding bottle</u> What do you use to feed the child?</p>	
<p>If the infant has any difficulty feeding <u>is feeding less than 8 times in 24 hours</u> <u>is taking any other food or drinks</u> or <u>is low weight for age</u> AND has no indications to refer urgently to hospital</p> <p>ASSESS BREASTFEEDING Has the infant breastfed in the previous hour? If infant has not fed in the previous hour ask the mother to put her infant to the breast. Observe the breastfeed for 4 minutes Is the infant able to attach? To check attachment look for Chin touching breast Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Mouth wide open Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Lower lip turned outward Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> More areola above than below the mouth Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> no attachment at all <u>not well attached</u> good attachment Is the infant suckling effectively (that is slow deep sucks Sometimes pausing)? no suckling at all <u>not suckling effectively</u> suckling effectively Look for ulcers or white patches in the mouth (thrush)</p>	<p>Feeding Problem and Low Weight</p>
<p>CHECK THE YOUNG INFANT'S IMMUNIZATION STATUS Circle immunizations needed today <u>at birth</u> <input checked="" type="checkbox"/> BCG <input checked="" type="checkbox"/> OPV 0 <u>DPT 1</u> <u>OPV 1</u> DPT 2 OPV 2</p>	<p>Return for next immunization on <u>in 4 weeks</u> (Date)</p>

ASSESS THE CHILD'S OTHER PROBLEMS

ASSESS THE MOTHER'S HEALTH NEEDS

Do you have any health problems? Yes No
 Do you want any help with family planning? Yes No
 Did you bring your maternal health card? Yes No
 May I please look at it? Yes No

REFERRAL NOTE FOR NEERA

Fill out the referral note below for Neera

INSTRUCTIONS

- 1 Use today's date and time
- 2 Refer Neera to University Teaching Hospital
- 3 The name of your health center is Health Center 4, Lusaka
- 4 Neera's first dose of intramuscular antibiotics was gentamicin-1 0 ml and benzylpenicillin-at 250 000 units/ml--8 ml
- 5 Neera was given sugar water by NG tube to prevent low blood sugar
- 6 Sign the note with your own name

Today's Date Current Time

Urgent referral to University Teaching Hospital

Neera, age 6 weeks

Referred for: POSSIBLE SERIOUS BACTERIAL INFECTION
SEVERE DEHYDRATION
NOT ABLE TO FEED-POSSIBLE SERIOUS
BACTERIAL INFECTION

Treatment given at Health Center 4, Lusaka:

First dose of intramuscular antibiotics:

Gentamicin - 1.0 ml

Benzylpenicillin- at 250000 units/ml - 8ml

To prevent low blood sugar:

Sugar water by NG tube

Mother advised to keep infant warm on way to hospital

Health Worker's Name

SPECIAL POINTS TO REMEMBER

Write "T" for true or "F" for false beside each statement

PLAN A. TREAT DIARRHOEA AT HOME

- 1 T All infants who have diarrhoea need extra fluid to prevent dehydration and give nourishment
- 2 T Additional fluids that may be given to a young infant are ORS solution and clean water
- 3 T If an infant is exclusively breastfed, it is important not to introduce a food-based fluid
- 4 T If a young infant will be given ORS solution at home, the health worker should show the mother how much ORS to give the infant after each loose stool
- 5 T Remind the mother to stop giving ORS solution after the diarrhoea has stopped

PLAN B. TREAT SOME DEHYDRATION

- 6 T A young infant who has SOME DEHYDRATION needs ORS solution as described in Plan B
- 7 F During the first 4 hours of rehydration, the mother should give ORS and not breastfeed
- 8 T Give a young infant who does not breastfeed an additional 100-200 ml clean water during the first 4 hours of rehydration

MANAGEMENT OF THE SICK YOUNG INFANT AGE 1 WEEK UP TO 2 MONTHS

Name Sashi Age 5 wks Weight 4 kg Temperature 37 C

ASK What are the infant's problems? rash, diarrhoea Initial Visit? Follow up visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR POSSIBLE BACTERIAL INFECTION Has the infant had convulsions?</p> <p>Count the breaths in one minute <u>55</u> breaths per minute Repeat if elevated _____ Fast breathing?</p> <p>Look for severe chest indrawing Look for nasal flaring Look and listen for grunting Look and feel for bulging fontanelle Look for pus draining from the ear Look at the umbilicus Is it red or draining pus? Does the redness extend to the skin? Fever (temperature 37.5 C or above or feels hot) or low body temperature (below 35.5 C or feels cool)? Look for <u>skin pustules</u> Are there many or severe pustules? See if the young infant is lethargic or unconscious Look at young infant's movements Less than normal?</p>	<p>Local Bacterial Infection</p>
<p>DOES THE YOUNG INFANT HAVE DIARRHOEA? For how long? <u>3</u> Days Is there blood in the stool?</p> <p>Look at the young infant's general condition Is the infant Lethargic or unconscious? <u>Restless and irritable</u> Look for sunken eyes Pinch the skin of the abdomen Does it go back <u>Very slowly</u> (longer than 2 seconds)? <u>Slowly?</u></p>	<p>Some Dehydration</p>
<p>THEN CHECK FOR FEEDING PROBLEM OR LOW WEIGHT Is there any difficulty feeding? Yes ___ No <input checked="" type="checkbox"/> Is the infant breastfed? Yes <input checked="" type="checkbox"/> No ___ If Yes how many times in 24 hours? <u>3</u> times Does the infant usually receive any other foods or drinks? Yes <input checked="" type="checkbox"/> No ___ If Yes how often? <u>3 times per day - breastmilk substitute</u> What do you use to feed the child? <u>feeding bottle</u></p> <p>Determine weight for age <u>Low</u> <input checked="" type="checkbox"/> Not Low ___ Check for growth faltering</p>	<p>Feeding Problem and Low Weight</p>
<p>If the infant has any difficulty feeding, is <u>feeding less than 8 times in 24 hours</u>, is <u>taking any other food or drinks</u>, or is <u>low weight for age</u> AND has no indications to refer urgently to hospital</p>	
<p>ASSESS BREASTFEEDING Has the infant breastfed in the previous hour?</p> <p>If infant has not fed in the previous hour ask the mother to put her infant to the breast Observe the breastfeed for 4 minutes</p> <p>Is the infant able to attach? To check attachment look for Chin touching breast Yes ___ No <input checked="" type="checkbox"/> Mouth wide open Yes ___ No <input checked="" type="checkbox"/> Lower lip turned outward Yes ___ No <input checked="" type="checkbox"/> More areola above than below the mouth Yes ___ No <input checked="" type="checkbox"/></p> <p>no attachment at all <u>not well attached</u> good attachment</p> <p>Is the infant suckling effectively (that is slow deep sucks Sometimes pausing)? no suckling at all <u>not suckling effectively</u> suckling effectively</p> <p>Look for ulcers or white patches in the mouth (thrush)</p>	<p>Feeding Problem and Low Weight</p>
<p>CHECK THE YOUNG INFANT'S IMMUNIZATION STATUS Circle immunizations needed today</p> <p><input checked="" type="checkbox"/> BCG <input checked="" type="checkbox"/> OPV 0 DPT 1 OPV 1 DPT 2 OPV 2 <u>at birth</u> <u>at birth</u></p>	<p>Return for next immunization on <u>at 6 weeks of age</u> (Date)</p>

ASSESS THE CHILD'S OTHER PROBLEMS

ASSESS THE MOTHER'S HEALTH NEEDS

Do you have any health problems? Yes ___ No
Do you want any help with family planning? Yes ___ No
Did you bring your maternal health card? Yes ___ No
May I please look at it? Yes ___ No ___

TREAT

Give oral antibiotic - Cotrimoxazole
 1 paediatric tablet 2 times/day x 5 days
 Teach mother to treat local infection
 Advise on home care for young infant
 F/Up : 2 days

Give fluid and food for some Dehydration (Plan B)

Advise to breastfeed as often and as long as
 infant wants
 Teach correct positioning and attachment
 Increase frequency of feeding
 Reduce other foods and drinks
 Use cup instead of bottle
 Advise on home care
 F/Up feeding problem : 2 days
 F/Up low WFA : 14 days

Return for follow-up in 2 days

Give any immunizations needed today None

SASHIE

- 1 In addition to treatment with antibiotics, Sashie needs treatment at home for her local infection, that is, the pustules on her buttocks. List below the steps that her mother should take to treat the skin pustules at home.

Wash hands

Gently wash off pus and crusts with soap and water

Dry the area

Paint with gentian violet for 5 days

Wash hands

- 2 How often should her mother treat the skin pustules?

Twice each day

- 3 Sashie also needs "home care for the young infant." What are the 3 main points to advise the mother about home care?

Food/Fluids Breastfeed frequently, as often and for as long as the infant wants, day and night, during sickness and health

When to return

Make sure the young infant stays warm at all times

- 4 What would you tell Sashie's mother about when to return?

Return in 2 days for follow-up (to be sure the skin pustules are improving)

*Return **immediately** if Sashie becomes sicker, develops a fever, breathing becomes fast or difficult*

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Muka Ka Age 15 mos. Weight 9 kg Temperature 39 C

ASK What are the child's problems? very sick, rash Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR GENERAL DANGER SIGNS NOT ABLE TO DRINK OR BREASTFEED VOMITS EVERYTHING CONVULSIONS</p>	<p>General danger sign present? Yes ___ No <input checked="" type="checkbox"/> Remember to use danger sign when selecting classifications</p>
<p>DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>3</u> Days • Count the breaths in one minute <u>38</u> breaths per minute Fast breathing? • Look for chest indrawing • Look and listen for stridor or wheezing</p>	<p>No Pneumonia: Cough or Cold</p>
<p>DOES THE CHILD HAVE DIARRHOEA? Yes ___ No <input checked="" type="checkbox"/> • For how long? ___ Days • Is there blood in the stool? • Look at the child's general condition Is the child Lethargic or unconscious? Restless and irritable? • Look for sunken eyes • Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty? • Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?</p>	
<p>DOES THE CHILD HAVE FEVER? (by history/feels hot) <u>temperature 37.5°C or above</u> Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>3</u> Days • If more than 7 days has fever been present every day? • Has child had measles within the last 3 months? • Look or feel for stiff neck • Look for signs of MEASLES • <u>Generalized rash</u> and • One of these: <u>cough</u> <u>runny nose</u> or <u>red eyes</u></p>	<p>Malaria</p>
<p>If the child has measles now or within the last 3 months • Look for mouth ulcers If Yes are they deep and extensive? • Look for pus draining from the eye • Look for <u>clouding of the cornea</u></p>	<p>Severe Complicated Measles</p>
<p>DOES THE CHILD HAVE AN EAR PROBLEM? Yes ___ No <input checked="" type="checkbox"/> • Is there ear pain? • Is there ear discharge? If Yes for how long? ___ Days • Look for pus draining from the ear • Feel for tender swelling behind the ear</p>	
<p>THEN CHECK FOR MALNUTRITION AND ANAEMIA • Look for visible severe wasting • Look for palmar pallor Severe palmar pallor? Some palmar pallor? • Look for oedema of both feet • Determine weight for age Very Low ___ Not Very Low <input checked="" type="checkbox"/> • Check for growth faltering</p>	<p>No Anaemia and Not Very Low Weight and Growth not Faltering</p>
<p>CHECK THE CHILD'S IMMUNIZATION STATUS Circle immunizations needed today BCG OPV 0 DPT 1 OPV 1 DPT 2 OPV 2 DPT 3 OPV 3 Measles</p>	<p>Next immunization on (Date) _____</p>
<p>CHECK WHETHER THE CHILD SHOULD RECEIVE VITAMIN A</p>	
<p>ASSESS CHILD'S FEEDING if child has ANAEMIA OR VERY LOW WEIGHT or GROWTH FALTERING or is less than 2 years old • Do you breastfeed your child? Yes ___ No ___ If Yes how many times in 24 hours? ___ times Do you breastfeed during the night? Yes ___ No ___ • Does the child take any other food or fluids? Yes ___ No ___ If Yes what food or fluids? _____ How many times per day? ___ times What do you use to feed the child? _____ If very low weight for age or growth faltering How large are servings? _____ Does the child receive his own serving? ___ Who feeds the child and how? _____ • During this illness has the child's feeding changed? Yes ___ No ___ If Yes how?</p>	<p>Feeding Problems</p>

ASSESS THE CHILD'S OTHER PROBLEMS

ASSESS THE MOTHER'S HEALTH NEEDS

- Do you have any health problems? Yes ___ No ___
- Do you want help with family planning? Yes ___ No ___
- Did you bring your maternal health card? Yes ___ No ___
 May I please look at it? Yes ___ No ___

TREAT

**Remember to refer any child who has a danger sign
and no other severe classification**

Vitamin A
First dose antibiotic
Tetracycline eye ointment
Refer urgently to hospital

Return for follow-up in _____

Advise mother when to return immediately

Give any immunizations needed today _____

Feeding advice _____

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Daliso Age 12 mos Weight 10 kg Temperature 38 C

ASK What are the child's problems? cough, very weak Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

<p>CHECK FOR GENERAL DANGER SIGNS NOT ABLE TO DRINK OR BREASTFEED VOMITS EVERYTHING CONVULSIONS</p> <p style="text-align: center;"><u>LETHARGIC OR UNCONSCIOUS</u></p>	<p>General danger sign present? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Remember to use danger sign when selecting classifications</p>
<p>DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> • For how long? <u>6</u> Days • Count the breaths in one minute <u>52</u> breaths per minute <u>Fast breathing?</u> • Look for <u>chest indrawing</u> • Look and listen for stridor or wheezing</p>	<p>Severe Pneumonia or Very Severe Disease</p>
<p>DOES THE CHILD HAVE DIARRHOEA? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> • For how long? <u>7</u> Days • Is there blood in the stool? • Look at the child's general condition Is the child <u>Lethargic</u> or unconscious? Restless and irritable? • Look for <u>sunken eyes</u> • Offer the child fluid Is the child Not able to drink or <u>drinking poorly?</u> Drinking eagerly thirsty? • Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? <u>Slowly?</u></p>	<p>Severe Dehydration</p>
<p>DOES THE CHILD HAVE FEVER? (by history/feels hot <u>temperature 37.5 C or above</u>) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> • For how long? <u>2</u> Days • If more than 7 days has fever been present every day? • Has child had measles within the last 3 months? <u>No</u> • Look or feel for stiff neck Look for signs of MEASLES • Generalized rash and • One of these cough runny nose or red eyes</p>	<p>Very Severe Febrile Disease</p>
<p>If the child has measles now or within the last 3 months • Look for mouth ulcers If Yes are they deep and extensive? • Look for pus draining from the eye • Look for clouding of the cornea</p>	
<p>DOES THE CHILD HAVE AN EAR PROBLEM? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> • Is there ear pain? • Is there ear discharge? If Yes for how long? <u> </u> Days • Look for pus draining from the ear • Feel for tender swelling behind the ear</p>	
<p>THEN CHECK FOR MALNUTRITION AND ANAEMIA • Look for visible severe wasting • Look for palmar pallor Severe palmar pallor? Some palmar pallor? • Look for oedema of both feet • Determine weight for age Very Low <input type="checkbox"/> Not Very Low <input checked="" type="checkbox"/> • Check for growth faltering</p>	<p>No Anaemia Not Very Low Weight Growth not Faltering</p>
<p>CHECK THE CHILD'S IMMUNIZATION STATUS Circle immunizations needed today BCG OPV 0 DPT 1 OPV 1 DPT 2 OPV 2 DPT 3 OPV 3 <u>Measles</u></p>	<p>Next immunization on (Date) _____</p>
<p>CHECK WHETHER THE CHILD SHOULD RECEIVE VITAMIN A</p>	
<p>ASSESS CHILD'S FEEDING if child has ANAEMIA OR VERY LOW WEIGHT or GROWTH FALTERING or is less than 2 years old • Do you breastfeed your child? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes how many times in 24 hours? <u> </u> times Do you breastfeed during the night? Yes <input type="checkbox"/> No <input type="checkbox"/> • Does the child take any other food or fluids? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes what food or fluids? <u> </u> How many times per day? <u> </u> times What do you use to feed the child? <u> </u> If very low weight for age or growth faltering How large are servings? <u> </u> Does the child receive his own serving? <u> </u> Who feeds the child and how? <u> </u> • During this illness has the child's feeding changed? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes how? <u> </u></p>	<p>Feeding Problems</p>

ASSESS THE CHILD'S OTHER PROBLEMS

ASSESS THE MOTHER'S HEALTH NEEDS

- Do you have any health problems? Yes No
- Do you want help with family planning? Yes No
- Did you bring your maternal health card? Yes No
- May I please look at it? Yes No

TREAT

Remember to refer any child who has a danger sign and no other severe classification

First dose antibiotic

Refer urgently to hospital

ORS to be given in frequent sips on way to hospital

Advise to continue breastfeeding

Quinine

Prevent low blood sugar

Return for follow-up in _____

Advise mother when to return immediately

Give any immunizations needed today _____

Feeding advice _____

MANAGEMENT OF THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

Child's Name Kanfwa Kaoma Age 4 mos. Weight 7 kg Temperature 38 CASK What are the child's problems? cough Initial Visit? Follow up Visit?

ASSESS (Circle all signs present)

CLASSIFY

CHECK FOR GENERAL DANGER SIGNS NOT ABLE TO DRINK OR BREASTFEED LETHARGIC OR UNCONSCIOUS VOMITS EVERYTHING CONVULSIONS	General danger sign present? Yes ___ No <input checked="" type="checkbox"/> Remember to use danger sign when selecting classifications
DOES THE CHILD HAVE COUGH OR DIFFICULT BREATHING? Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>6</u> Days • Count the breaths in one minute <u>54</u> breaths per minute <u>Fast breathing</u> • Look for <u>chest indrawing</u> • Look and listen for stridor or wheezing	<u>Severe Pneumonia</u> <u>or</u> <u>Very Severe Disease</u>
DOES THE CHILD HAVE DIARRHOEA? Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>2</u> Days • Is there blood in the stool? <u>No</u> • Look at the child's general condition Is the child Lethargic or unconscious? Restless and <u>irritable</u> • Look for sunken eyes • Offer the child fluid Is the child Not able to drink or drinking poorly? Drinking eagerly thirsty? • Pinch the skin of the abdomen Does it go back Very slowly (longer than 2 seconds)? Slowly?	<u>No Dehydration</u>
DOES THE CHILD HAVE FEVER? (by history/feels hot) <u>temperature 37.5 C or above</u> Yes <input checked="" type="checkbox"/> No ___ • For how long? <u>3</u> Days • If more than 7 days has fever been present every day? • Has child had measles within the last 3 months? <u>No</u> • Look or feel for stiff neck • Look for signs of MEASLES • Generalized rash and • One of these cough runny nose or red eyes	<u>Malaria</u>
If the child has measles now or within the last 3 months • Look for mouth ulcers If Yes are they deep and extensive? • Look for pus draining from the eye • Look for clouding of the cornea	
DOES THE CHILD HAVE AN EAR PROBLEM? Yes ___ No <input checked="" type="checkbox"/> • Is there ear pain? • Is there ear discharge? If Yes for how long? ___ Days • Look for pus draining from the ear • Feel for tender swelling behind the ear	
THEN CHECK FOR MALNUTRITION AND ANAEMIA • Look for visible severe wasting • Look for palmar pallor Severe palmar pallor? Some palmar pallor? • Look for oedema of both feet • Determine weight for age Very Low ___ Not Very Low <input checked="" type="checkbox"/> • Check for growth faltering	<u>No Anaemia</u> <u>Not Very Low Weight</u> <u>Growth not Faltering</u>
CHECK THE CHILD'S IMMUNIZATION STATUS Circle immunizations needed today BCG OPV 0 DPT 1 OPV 1 <u>DPT 2</u> <u>OPV 2</u> DPT 3 OPV 3 Measles	Next immunization on (Date) <u>15-8-96</u>
CHECK WHETHER THE CHILD SHOULD RECEIVE VITAMIN A	
ASSESS CHILD'S FEEDING if child has ANAEMIA OR VERY LOW WEIGHT or GROWTH FALTERING or is less than 2 years old • Do you breastfeed your child? Yes ___ No ___ If Yes how many times in 24 hours? ___ times Do you breastfeed during the night? Yes ___ No ___ • Does the child take any other food or fluids? Yes ___ No ___ If Yes what food or fluids? How many times per day? ___ times What do you use to feed the child? _____ If very low weight for age or growth faltering How large are servings? _____ Does the child receive his own serving? ___ Who feeds the child and how? _____ • During this illness has the child's feeding changed? Yes ___ No ___ If Yes how? _____	Feeding Problems

ASSESS THE CHILD'S OTHER PROBLEMS

ASSESS THE MOTHER'S HEALTH NEEDS

- Do you have any health problems? Yes ___ No ___
- Do you want help with family planning? Yes ___ No ___
- Did you bring your maternal health card? Yes ___ No ___
 May I please look at it? Yes ___ No ___

TREAT

**Remember to refer any child who has a danger sign
and no other severe classification**

First dose antibiotic

Return for follow-up in _____

Advise mother when to return immediately

Give any immunizations needed today _____

Feeding advice _____

REFERRAL NOTE FOR KAMFWA

Write a referral note for Kamfwa Kaoma to a hospital Use today's date and the current time Use your own name as that of the health worker

REFERRAL NOTE

Today's Date Current Time

Urgent Referral to University Teaching Hospital

Kanfwa Kaoma, age 4 months, 7 Kg

Referred for SEVERE PNEUMONIA OR VERY SEVERE DISEASE (has cough, chest indrawing, fast breathing - 54 breaths per minute. Also has diarrhoea, temperature 38°C)

Has been given first dose of antibiotic.

Needs DPT2 and OPV2.

Health Worker's Signature
Health Worker's Clinic

Case Study Number 1

Age 6 months

Weight 7 kg

Classification MASTOIDITIS

First-line antibiotic for MASTOIDITIS is cotrimoxazole

½ adult tablet twice a day for five days, or 2 paediatric tablets twice a day for five days, or 5.0 ml of syrup twice a day for five days

The child should be given the first-line oral antibiotic if it is available. It has been chosen because it is effective, easy to give and inexpensive

Case Study Number 2

Weight 6 kg

Classification MALARIA

First-line antimalarial is chloroquine

Adult tablet ½ tab for three days,

Paediatric tablet 1 tablet for the first 2 days and ½ tablet on the third day,

Syrup 7.5 ml for the first two days and 5.0 ml on the third day

Case Study Number 3

Weight 12 kg

Classification MALARIA and high fever

For chloroquine Adult tablet (150 mg base) and paediatric tablet (100 mg base) and syrup

Dose and schedule for chloroquine

1 tablet (150 mg) once a day on days 1 and 2, and ½ tablet on day 3

1½ tablets (100 mg) once a day on days 1 and 2, and ½ tablet on day 3

150 syrup once a day on days 1 and 2, and 50 ml on day 3)

For paracetamol Adult tablet (500 mg) and paediatric tablet (100 mg)

Dose and schedule for paracetamol

¼ tablet (of a 500 mg tablet) every six hours until high fever is gone

1 tablet (of a 100 mg tablet) every six hours until high fever is gone

Case Study Number 4

Age 9 months

Weight Unknown

Classification MEASLES

Vitamin A capsule and syrup give first dose in clinic and give mother one dose to give at home the next day ½ capsule (200 000 IU), or 1 capsule (100 000 IU), or 2 capsules (50 000 IU)

Case Study Number 5

Age 3 years

Weight 14 kg

Classification ANAEMIA with some palmar pallor

Formulations for Chloroquine adult tablets, paediatric tablets and syrup

Dose and schedule for Chloroquine Adult tablet 1 tablet for the first 2 days and ½ tablet on the third day, Paediatric tablet 1 ½ tablets for the first 2 days and ½ tablet on the third day, Syrup 15 ml for the first two days and 50 ml on the third day

Formulations for Iron Adult tablet (200 mg), paediatric syrup (100 mg per 5 ml)

Dose and schedule for Iron Tablet ½ tab (200 mg) daily for 14 days or 2.5 ml (½ tsp) daily for 14 days

Formulations for Mebendazole Tablets (500 mg or 100 mg)

Dose and schedule for Mebendazole 500 mg single dose in clinic

WRITTEN EXERCISE DEMONSTRATE MEASURING DOSES

Determine Dose and Schedule

- 1 Cotrimoxazole for a 6-kg-child, named Amin
*Answer ½ adult tablet, or
 2 pediatric tablets or
 5 ml of suspension 2 times daily
 for 5 days*

Write Labels

NAME		DATE	
DRUG		QUANTITY	
			
DOSE			

- 2 Chloroquine for a 9-kg-child, named Kumkum
*Answer ½ tablet (150 mg) for 3 days
 or 1 tablet (100 mg) for 2 days and ½
 tab on third day or
 7.5 ml syrup for second day and 5
 ml on third day*

NAME		DATE	
DRUG		QUANTITY	
			
DOSE			

- 3 Iron tablet for a 12-kg-child, named Barbara
*Answer ½ tablet (200 mg) every
 day for 14 days, or
 2 ml syrup (100 mg per 5 ml) every day
 for 14 days*

NAME		DATE	
DRUG		QUANTITY	
			
DOSE			

WRITTEN EXERCISE
(continued)

Decide Dose and Schedule

Write Labels

- 4 Mebendazole for a 3-year-old child, named Juan
Answer 1 tablet (500 mg), or 5 tablets (100 mg) given in a single dose in clinic

NAME		DATE	
DRUG		QUANTITY	
			
DOSE			

- 5 Paracetamol for high fever in a 14-kg-child, named Alice
Answer 1½ tablet (100 mg), or ½ tablet (500 mg) every six hours until high fever is gone

NAME		DATE	
DRUG		QUANTITY	
			
DOSE			

- 6 Vitamin A for a 5-month-old child (100 000 IU), Namakao
Answer ½ capsule given in clinic and ½ capsule given to mother to give at home the next day

NAME		DATE	
DRUG		QUANTITY	
			
DOSE			

CASE STUDY#1

A child is classified as having SEVERE PNEUMONIA OR VERY SEVERE DISEASE and is unconscious. The child is 6 months old and weighs 7 kg.

What is the treatment for this child? If appropriate, what is the appropriate antibiotic, what is its route, and what is the appropriate dose for this child's condition?

Give first dose of intramuscular chloramphenicol and refer urgently. If chloramphenicol is not available, give benzylpenicillin and refer urgently. DOSE Chloramphenicol 1.5 mls, Benzylpenicillin 1 ml

CASE STUDY #2
DETERMINE INTRAMUSCULAR DRUG

A child is classified as having VERY SEVERE FEBRILE DISEASE and is unable to drink. The child is 12 months old and weighs 10 kg. His temperature is 38.5°C.

What are the appropriate drugs, and what are the appropriate dosages for this child's condition?

TREATMENT Give first dose of intramuscular quinine for severe malaria, first dose of intramuscular chloramphenicol & one dose of paracetamol for fever, treat for low blood sugar and refer urgently. DOSE Quinine 0.8 ml (150 mg/ml) or 0.4 ml (300 mg/ml), chloramphenicol 2.5 mls, paracetamol 1 tab (100 mg) or 1/4 tab (500 mg)

CASE STUDY #3
DETERMINE SUBCUTANEOUS INJECTION

A 14 month old child is brought to the clinic by his mother. He is classified as SEVERE PNEUMONIA OR VERY SEVERE DISEASE and has severe wheezing. He weighs 10 kg.

TREATMENT For SEVERE PNEUMONIA OR VERY SEVERE DISEASE If able to take an oral antibiotic, give cotrimoxazole Dose 1 adult tablet stat. If unable to take oral antibiotic, give an intramuscular injection of chloramphenicol DOSE 2.5 ml

For severe wheezing Give subcutaneous epinephrine 0.1 ml or IV Aminophylline 3.0 ml of a 25 mg/ml solution given over at least 20 minutes of time

PREPARE INTRAMUSCULAR DRUGS

1 Chloramphenicol for a 6-kg-child

Write dose $1.5 \text{ ml} = 270 \text{ mg}$

2 Quinine for an 11-kg-child

Write dose $0.8 \text{ ml}, 150 \text{ mg/ml}$
 $0.4 \text{ ml}, 300 \text{ mg/ml}$

SUMMARY CASE STUDY WING

Wing, a 12-month-old (10 kg) boy, was brought to the clinic this morning because he has had fever for 2 days and has been sleeping since yesterday

A health worker assessed Wing and found that he is unconscious. He classified Wing as VERY SEVERE FEBRILE DISEASE and NO ANAEMIA AND NOT VERY LOW WEIGHT

Specify the dose of each treatment that Wing will receive

The health worker will give Wing an intramuscular antibiotic and quinine. He will also give him sugar water by nasogastric tube to prevent low blood sugar. Then the health worker will refer Wing urgently to the nearest hospital.

Dose	Chloramphenicol	2.5 ml,
	Quinine	0.8 ml if concentration is 150 mg/ml, or 0.4 ml if concentration is 300 mg/ml,
	Sugar water by NG tube	50 ml

CASE STUDIES

- 1 A mother brings her 5-month-old daughter, Joli, to the clinic because she has diarrhoea with blood in the stool. The health worker classifies Joli as NO DEHYDRATION, DYSENTERY and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. Joli's immunization card shows she had OPV 2 and DPT 2 five weeks ago.

- a Should the health worker give Joli OPV 3 and DPT 3 today?

Yes. DYSENTERY is not a contraindication to immunizations.

The mother says that she does not want Joli to be immunized again. She tells the health worker that Joli had a fever and was irritable after the last time.

- b What should the health worker tell the mother about possible side effects of OPV and DPT vaccines?

The health worker should tell the mother that there are no side effects of the OPV vaccine, but sometimes there are side effects from DPT. Fever, irritability and soreness are possible, but not serious. If the child is not immunized now, the child could get very sick from polio, diphtheria, pertussis, or tetanus. Tell the mother to give paracetamol to Joli if she feels very hot or is in pain this time.

The mother agrees to let Joli be immunized. The health worker gives Joli the immunizations.

- c How should the health worker record the immunizations?

The health worker should record the date that the DPT-3 is given on the immunization card and in the clinic's register. The OPV 3 should not be recorded because the child has diarrhoea today. Tell the mother to return in 4 weeks for another dose of OPV 3. When she returns, the health worker should then record the date of the OPV-3.

- 2 A health worker wants to immunize a 1-year-old child for measles. The child has been classified as PNEUMONIA and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. The child's mother does not want her child to be immunized. She says that she will return for immunization when the child is better.

Using the communications skills ASK, LISTEN, PRAISE, ADVISE, CHECK UNDERSTANDING, describe what the health worker should say to a child's mother to try to convince her to have her child immunized for measles today.

Please be specific in your responses.

- What should the health worker ASK?
Ask the mother if she has transportation to get to the clinic, why she doesn't want her child to be immunized.
- How should the health worker LISTEN?
Listen to the mother's concerns with sensitivity and allow her to express her concerns.
- What should the health worker say to PRAISE the mother?
Praise the mother for bringing her child to the clinic today. Praise her for taking good care of her child.
- What should the health worker say to ADVISE the mother?
"Your child is at an age when he is very likely to get measles. Immunizing your child for measles will not make him sicker. It will prevent him from getting measles. If he is not immunized today, he may get measles before he comes back to the clinic. Measles can make your child very sick."
- What should the health worker say to CHECK UNDERSTANDING?
Ask questions to check if she has understood what you have said. The questions should be open-ended, meaning that she cannot answer them with a yes or no answer. For example, ask the mother, "What will the measles immunization do for your child?" "What could happen to your child if he does not get the measles immunization today?" "What could happen to your child if he gets the measles?"

TREAT SOME DEHYDRATION WITH ORS

- 1 The following children came to the clinic because of diarrhoea. They were assessed and found to have SOME DEHYDRATION and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. Write the range of amounts of ORS solution each child is likely to need in the first 4 hours of treatment.

<u>Name</u>	<u>Age or Weight</u>	<u>Range of Amounts of ORS Solution</u>
Mwanba	3 years	900-1400 ml
Mukuka	10 kg	750 ml or 700-900 ml
Chileshe	7.5 kg	562.5 ml or 400-700 ml
Kabamba	11 months	400-700 ml

2

Kasonde is 5 months old and has diarrhoea. She is classified as SOME DEHYDRATION and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. There is no scale for weighing Kasonde at the small clinic. Kasonde's mother died during childbirth, so Kasonde has been taking infant formula. The grandmother has recently started giving cooked cereal as well.

a Kasonde should be given 400-700 ml of ORS solution during the first 4 hours of treatment. She should also be given 100-200 ml of clean water during this period.

- b What should the grandmother do if Kasonde vomits during the treatment?

She should wait 10 minutes before giving more ORS solution. Then she should give Kasonde the ORS solution more slowly.

- c When should the health worker reassess Kasonde?

After Kasonde is given ORS solution for 4 hours on Plan B.

- d When Kasonde is reassessed, she has NO DEHYDRATION. What treatment plan should Kasonde be put on?

Because Kasonde has been reassessed as NO DEHYDRATION, she should be put on Plan A.

- e How many one-litre packets of ORS should the health worker give the grandmother?

2 one-litre packets.

- f To continue treatment at home, the grandmother should give Kasonde

50-100 ml of ORS solution after each loose stool.

3

Mambo is 9 months old and weighs 8kg. Her mother brought her to the clinic with diarrhoea. The health worker assesses Mambo as **SOME DEHYDRATION** and **NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING**. The health worker chooses Plan B. He asks if Mambo still breastfeeds. Her mother says that she breastfeeds several times each day. She also eats 3 meals each day of rice along with vegetables, beans, and sometimes bits of meat.

- a Approximately how much ORS solution should Mambo's mother give her during the first 4 hours?

400-700 ml of ORS solution

- b During the first 4 hours of treatment, should Mambo eat or drink anything in addition to the ORS solution? If so, what?

Yes, Mambo should breastfeed whenever and as much as she wants

- c After 4 hours of treatment, the health worker reassesses Mambo. She is still classified as **SOME DEHYDRATION**. What is the appropriate plan to continue her treatment?

*Because Mambo is still classified as **SOME DEHYDRATION**, she should continue on Plan B*

- d Describe the treatment to give Mambo now. (Your answer should include more than ORS solution)

Tell the caretaker to begin feeding Mambo. Offer the caretaker food, milk or juice to give the child. After the child has had some food, repeat the 4-hour Plan B treatment. Offer food, milk or juice every 3-4 hours. Remind the caretaker to continue to breastfeed Mambo frequently.

- 4 A caretaker and her child must leave the clinic before the child is fully rehydrated. What should the health worker do before the mother leaves?

Complete the list below

- Show her how to prepare ORS solution at home
- *Show the caretaker how much ORS solution to give to finish the 4-hour treatment at home*
- *Give her enough packets to complete rehydration. Also give her 2 one-litre packets as recommended in Plan A*
- Explain the 3 Rules of Home Treatment
 - 1 *GIVE EXTRA FLUID* Explain what extra fluids to give. Since the child is being treated with Plan B during this visit, the caretaker should give ORS at home. Explain how much ORS solution to give after each loose stool
 - 2 *CONTINUE FEEDING* Instruct the caretaker how to continue feeding during and after diarrhoea
 - 3 *WHEN TO RETURN* Teach the caretaker the signs to bring a child back immediately

- 5 What checking question can you ask the caretaker to make sure that she knows when to return?

“What are the signs that you should bring the child back immediately?”

QUESTIONS ABOUT CHILUFYA

1 What rehydration plan was applied in Chilufya's case?

Plan A Treat Diarrhoea at Home to Prevent Dehydration

2 What treatment was prescribed for Chilufya?

2 packets of ORS

3 Was the caretaker instructed on how to mix the ORS?

Caretaker was instructed to mix ORS in one litre of water. No available home measuring utensil was identified. No instructions were provided on how much solution to give.

4 Was the caretaker given any other instructions on home management of the diarrhoea?

No other instructions were given. No instructions were given regarding the key signs for bringing Chilufya back to the clinic.

5 What went wrong in the clinic routines which led to Chilufya's condition of severe dehydration? Can you propose an action which would keep the same thing from happening again?

Identified Problem: Caretaker not given appropriate instructions on ORS preparations, administration and when to return to the health facility.

Possible Solution: Establish ORT Corner and assign a health worker to counsel care takers on ORS preparation and administration, and discuss rules of home treatment of diarrhoea, including when to return to the clinic.

HOME TREATMENT FOR DIARRHOEA

- 1 Lwendo is a 4 year old boy who has diarrhoea. He has no general danger signs. He was classified as having diarrhoea with NO DEHYDRATION and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. He will be treated with Plan A.

a What are the three rules of home treatment of diarrhoea?

- *Give extra fluid*
- *Continue feeding*
- *When to return*

b What fluids should the health worker tell his caretaker to give?

ORS solution, food-based fluids such as soup, rice water, and yoghurt drinks, and clean water

- 2 Chilufya is a 3 month old boy who has diarrhoea. He has no general danger signs. He was classified as NO DEHYDRATION and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. He is exclusively breastfed. What should the health worker tell his caretaker about giving him extra fluids?

Breastfeed him more frequently than usual. After breastfeeding, she should give him ORS solution or clean water.

- 3 For which children with NO DEHYDRATION is it especially important to give ORS at home?
- *Children who have been treated with Plan B or Plan C during the clinic visit*
 - *Children who cannot return to a clinic if the diarrhoea gets worse*

- 4 The following children came to the clinic because of diarrhoea. They were assessed and found to have no general danger signs. They were classified as NO DEHYDRATION and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. Which Plan should these children follow?

Write the amount of extra fluid that the caretaker should give after each stool

- a) Mutubilia 6 months 50 to 100 ml
- b) Chilanga 2 years 100 to 200 ml
- c) Misozi 15 months 50 to 100 ml
- d) Mofya 4 years 100 to 200 ml

- 5 A 4 year old boy has diarrhoea. He has no general danger signs. He was classified with NO DEHYDRATION and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. The health worker has taught his caretaker Plan A and given her 2 packets of ORS to use at home.

Tick all the fluids that the caretaker should encourage her son to drink as long as the diarrhoea continues

- a Clean water or tea that the child usually drinks with meals
- b Fruit juice that the child usually drinks each day
- c Clean water from the water jug. The child can get clean water from the jug whenever he is thirsty
- d ORS after each loose stool
- e Yoghurt drink when the mother makes some for the family

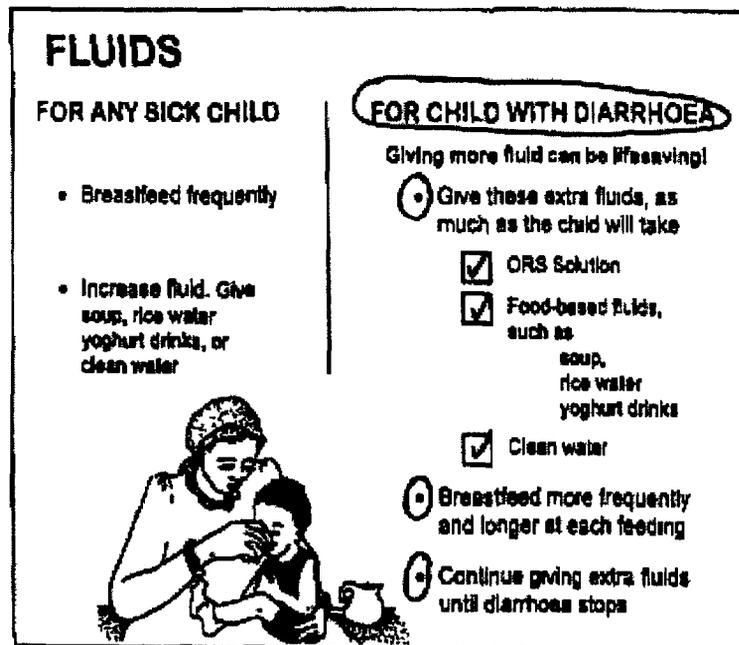
- 6 A caretaker brought her 11 month old daughter, Malpaso, to the clinic because she has diarrhoea. Malpaso usually eats cereal and bits of meat, vegetables and fruit. Her caretaker has continued to breastfeed her as well. The caretaker says she lives far from the clinic and might not be able to come back for several days, even if the child gets worse.

The health worker assesses Malpaso and finds she has no general danger signs and no other disease classifications. He classifies her as NO DEHYDRATION and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. He decides Malpaso needs treatment according to Plan A.

- a Should the health worker give this caretaker ORS packets to take home? If so, how many one-litre packets should he give?

Yes, 2 packets

- b Mark this Mother's Card for Malpaso's caretaker



- c Why did you mark the Mother's Card this way?

Because Malpaso has diarrhoea and needs extra fluid and more frequent and longer breastfeeds until the diarrhoea stops, according to Plan A

- d Write 3 checking questions to ask Malpaso's caretaker to make sure she understands how to mix and give ORS solution

-- *What container will you use to mix the ORS?*

-- *How many packets will you use each time you mix it?*

-- *How much ORS will you give after each loose stool?*

Why are these good checking questions?

Because these questions require the caretaker to answer with more than "yes" or "no" and they help the health worker know whether or not the caretaker understands what to do

- e What should the caretaker do if the child vomits while being fed the solution?

The caretaker should wait 10 minutes before giving more fluid. Then she should give the solution more slowly.

- f How long should Mpasos caretaker continue giving extra fluid?

The caretaker should continue giving extra fluid until the diarrhoea stops.

- g The health worker will tell the caretaker to continue feeding Mpasos. He will also teach her the signs to return immediately. What signs should the health worker teach Mpasos caretaker?

Drinking poorly or not able to drink or breastfeed, becomes sicker, develops a fever, has blood in stool.

- 7 At your clinic, what are the recommended fluids for children with diarrhoea with NO DEHYDRATION?

Answers will vary according to practices at participants' clinics, but they should include ORS, clean water, and a food-based fluid.

- 5 In addition to treatment with antibiotics, Sashie needs treatment for SOME DEHYDRATION according to Plan B. How much ORS should Sashie be given for the first 4 hours of treatment?

In clinic, during the first 4 hours, Sashie should be given approximately 200 ml of ORS

Should she receive any other fluids during the 4-hour period? If so, what fluids?

Her mother should continue breastfeeding her during the 4-hour period

- 6 While giving ORS, the several mothers in the ORT corner were taught how to mix ORS. After 4 hours of treatment, Sashie is reassessed. She is calm. A skin pinch goes back immediately. The health worker classifies her as having NO DEHYDRATION and selects Plan A to continue her treatment.

The health worker tells the mother that during diarrhoea, Sashie will need extra fluids. She explains that the best way to give an infant extra fluids is to breastfeed frequently and for longer at each feed. The health worker also gives her mother 2 packets of ORS to give to Sashie at home.

What else should the health worker tell the mother about giving ORS at home?

The health worker should tell the mother: After each loose stool, offer a breastfeed. Then offer about 50 ml ORS (show her how much fluid this is). Give frequent small sips from a cup. If she vomits, wait 10 minutes. Then continue, but more slowly. Continue giving extra fluid until the diarrhoea stops.

PHOTOGRAPHS

Instructions

In this exercise you will study photographs to practice recognizing signs of good or poor positioning and attachment for breastfeeding. There will be a group discussion of each photograph. You will discuss what the health worker could do to help the mother improve the positioning and attachment for breastfeeding.

- 1 *Study photographs numbered 77 through 79 of young infants at the breast. Look for each of the signs of good positioning. Compare your observations about each photograph with the answers in the chart below to help you learn what good or poor positioning looks like.*
- 2 *Now study photographs 80 through 82. In these photographs, look for each of the signs of good positioning and mark on the chart whether each is present. Also decide if the attachment is good.*

Photo	Signs of Good Positioning				Comments on Attachment
	Infant's Head and Body Straight	Head and Body Facing Breast	Infant's Body Close to Mother's	Supporting Infant's Whole Body	
77	yes	yes	yes	yes	
78	yes	yes	yes	yes	
79	no - neck turned so not straight with body	no	no - turned away from mother's body	no	Not well attached mouth not wide open lower lip not turned out areola same above and below
80	no	no -- body turned away	no -- body not close	no -- only neck and shoulders supported	Not well attached mouth not wide open lower lip not turned out, more areola below than above
81	yes	yes	yes -- very close	yes	Good attachment chin touching breast
82	no -- head and neck twisted and bent forward, not straight with body	no -- body turned away	no -- not close	no -- only neck and shoulders supported	Not well attached mouth not wide open

CASE STUDY AHMED

Ahmed has been brought for a follow-up visit for pneumonia. He is three years old and weighs 12.5 kg. His axillary temperature is 37°C. He has been taking cotrimoxazole. His mother says he is still sick and has vomited twice today.

- a) How would you reassess Ahmed today? List the signs you would look at and the questions you would ask his mother.

Is he able to drink?

Does he vomit everything?

Has he had convulsions?

See if he is lethargic or unconscious

Is he still coughing? How long has he been coughing?

Count the breaths in one minute

Look for chest indrawing

Look and listen for stridor

Is he breathing slower?

Is there fever? Is it less?

Is he eating better?

When you reassess Ahmed, you find that he is able to drink and does not always vomit after drinking. He has not had convulsions. He is not lethargic or unconscious. He is still coughing, so he has been coughing now for about 2 weeks. He is breathing 55 breaths per minute. He has chest indrawing. He does not have stridor. His mother says that sometimes he feels hot. She is very worried because he is not better. He has hardly eaten for two days.

- b) Is Ahmed getting worse, the same or better?

He is worse. He has chest indrawing.

- c) How should you treat Ahmed? If you would give a drug, specify the dose and schedule.

Refer urgently. Before departure give him a dose of amoxicillin (the second-line antibiotic), one 250 mg tablet.

CASE STUDY EVARISTO

Evaristo was brought for follow-up of PERSISTENT DIARRHOEA after 5 days. He is 9 months old and weighs 6.5 kg. His temperature is 36.5°C today. He is no longer breastfed. His mother feeds him cereal twice a day and gives him a milk formula 4 times each day. When you saw him last week, you advised his mother to give him only half his usual amount of milk. You also advised the mother to replace half the milk by giving extra servings of cereal with oil and vegetables or meat or fish added to it.

- a) What is your first step for reassessing Evaristo?

*Ask: Has Evaristo's diarrhoea stopped?
How many loose stools is he having per day?*

- b) Evaristo's mother tells you that his diarrhoea has not stopped. What would you do next?

Reassess Evaristo completely as described on the ASSESS & CLASSIFY chart. Treat any problems that require immediate attention. Then refer him to hospital.

You do a complete reassessment of Evaristo, as on the ASSESS & CLASSIFY chart. You find that Evaristo has no General Danger Signs. He has no cough. When you reassess his diarrhoea, his mother says that now he has had diarrhoea for about 3 weeks. There is no blood in the stool. Evaristo is restless and irritable. His eyes are not sunken. When you offer him some water, he takes a sip but does not seem thirsty. A skin pinch goes back immediately. He has no fever, no ear problem, and is classified as NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. Evaristo's mother tells you that he has no other problems.

- c) Is Evaristo dehydrated? *No*

- d) How will you treat Evaristo?

Refer him to a hospital. He does not need any treatments before he leaves.

- e) During your reassessment, if you had found that Evaristo had some dehydration, what would you have done before referral?

Rehydrate him according to Plan B before referral.

ORAL CASE STUDY MARY

Mary was brought to the clinic for a follow-up visit. She is 11 months old and weighs 9 kg. Two days ago a health worker classified Mary as having DYSENTERY, NO DEHYDRATION, and NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING. The health worker gave Mary's mother cotrimoxazole and ORS to use at home and asked her to bring Mary back in 2 days. The mother says that Mary has no new problems.

- a) How will you assess Mary?

Assess Mary for diarrhoea as on the ASSESS & CLASSIFY chart

What are the questions that you will ask the caretaker?

- *Are there fewer stools?*
- *Is there less blood in the stool?*
- *Is there less fever?*
- *Is there less abdominal pain?*
- *Is the child eating better?*

When you assess Mary's diarrhoea, her mother tells you that she still has several stools each day. There is still about the same amount of blood in the stool. She has now had diarrhoea for about a week. Mary is restless and irritable. Her eyes are not sunken. She drinks eagerly when her mother offers her a cup of ORS. A skin pinch goes back slowly. The mother says that Mary has not had fever. She thinks Mary is having abdominal pain because she is irritable and seems uncomfortable. Mary is not eating better.

- b) Is Mary dehydrated? If so, what will you do?

Yes, she has SOME DEHYDRATION. Use Plan B. Give 400 - 700 ml of ORS in first 4 hours and reassess dehydration.

- c) What else will you do to treat Mary?

Mary's dysentery is the same, and she is dehydrated. Because she is less than 12 months old, refer her to hospital. Treat her dehydration according to Plan B before departure.

CASE STUDIES LIN AND SALA

In this clinic,

- Chloroquine is the first-line oral antimalarial (150 mg base tablets)
- Sulfadoxine-pyrimethamine (Fansidar) is the second-line oral antimalarial
- Cotrimoxazole is the first-line oral antibiotic for pneumonia

1 Lin's mother has brought him back to the clinic because he still has fever Two days ago he was given chloroquine for MALARIA He was also given a dose of paracetamol His mother says that he has no new problems, just the fever He is 3 years old and weighs 14 kg His axillary temperature is 38.5°C

a) How would you reassess Lin?

Completely assess Lin as on the ASSESS & CLASSIFY chart Also, assess for other possible causes of the fever

When you reassess Lin, he has no General Danger Signs He has no cough and no diarrhoea He has now had fever for 4 days He does not have stiff neck There is no generalized rash He has no ear problem He is classified as having NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING There is no other apparent cause of fever

b) How would you treat Lin? If you would give a drug, specify the dose and schedule When should Lin next be seen in clinic?

Treat with the second-line oral antimalarial, sulfadoxine-pyrimethamine Give one tablet in clinic

Advise the mother to return again in 2 days if the fever persists

- 2 Sala's mother has come back to the clinic because Sala still has a fever. Three days ago she was given chloroquine for MALARIA. Her mother says that she is sicker now, vomiting and very hot. Sala is 18 months old and weighs 11 kg. Her axillary temperature is 39°C today.

When you assess Sala, her mother says that yesterday she could drink, but she vomited after eating. She did not always vomit after drinking a small amount. She has not had convulsions. She will not wake up when her mother tries to wake her. She is unconscious. Her mother says that she does not have a cough or diarrhoea. She has now had fever for 5 days. She does not have stiff neck or generalized rash. She does not have an ear problem. She is classified as having NO ANAEMIA AND NOT VERY LOW WEIGHT AND GROWTH NOT FALTERING.

How would you treat Sala? If you would give drugs, specify the dose and schedule.

Since Sala has a General Danger Sign, treat her for VERY SEVERE FEBRILE DISEASE. Refer her urgently to hospital, but before referral give

- *quinine -- 0.8 ml (150 mg/ml)*
- *chloramphenicol (2.5 ml = 450 mg) since she cannot drink to take an oral drug*
- *breastmilk, milk, or sugar water by NG tube if possible (since she cannot drink)*
- *no paracetamol, since she cannot drink*

CASE STUDY SASHIE

Sashie is 5 weeks old. The health worker classified her as having LOCAL BACTERIAL INFECTION because she had some skin pustules on her buttocks. Her mother got paediatric tablets of cotrimoxazole to give at home, and learned how to clean the skin and apply gentian violet at home. She has returned for a follow-up visit after 2 days. Sashie has no new problems.

a) How would you reassess Sashie?

Look at the umbilicus to see if it is red or draining pus or if the redness extends to the skin. Then look at the skin pustules to see if they are many or severe.

When you look at the skin of her buttocks, you see that there are fewer pustules and less redness.

b) What treatment does Sashie need? What would you communicate with Sashie's mother?

Tell the mother to continue giving the 5 days of antibiotic and to continue treating the local infection with gentian violet paint at home. Praise the mother for the good treatment she is giving.

CASE STUDY AFIYA

Afiya, a 5-week-old infant, was brought to the clinic 2 days ago. During that visit he was classified with a FEEDING PROBLEM because he was not able to attach well to the breast. He weighed 3.25 kg (not low weight for age). He was breastfeeding 5 times a day. He also had white patches of thrush in his mouth. Afiya's mother was taught how to position her infant for breastfeeding and how to help him attach to the breast. She was advised to increase the frequency of feeding to at least 8 times per 24 hours and to breastfeed as often as the infant wants, day and night. She was taught to treat thrush at home. She was also asked to return for follow-up in 2 days. Today, Afiya's mother has come to see you for follow-up. She tells you that the infant has no new problems.

a) How would you reassess this infant?

Ask "is there any difficulty feeding?"

Ask "Is the infant breastfed?" and if "Yes," ask "How many times in 24 hours?"

Ask "Does the infant usually receive any other food or drinks?" and, if "Yes," ask "How often?"

Ask "What do you use to feed the infant?"

Determine weight for age

Check for GROWTH FALTERING

Ask about any feeding problems found on the initial visit

Assess breastfeeding

Look for ulcers or white patches in the mouth

Afiya's weight today is 3.35 kg. When you reassess the infant's feeding, the mother tells you that he is feeding easily. She is now breastfeeding Afiya at least 8 times a day, and sometimes more when he wants. He is not receiving other foods or drinks. You ask the mother to put Afiya to the breast. When you check the attachment, you note that the infant's chin is touching the breast. The mouth is wide open with the lower lip turned outward. There is more areola visible above than below the mouth. The infant is suckling effectively. You look in his mouth. You cannot see white patches now.

b) How will you treat this infant?

Continue half strength gentian violet for 3 more days, for a total of 5 days

c) What will you communicate to Afiya's mother?

Praise the mother and encourage her to continue her current breastfeeding practices