

## Sick Child Recording Form PART B

(for community-based treatment of child age 2 months up to 5 years)

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Day / Month / Year)

HSA: \_\_\_\_\_

Child's First Name: \_\_\_\_\_ Surname \_\_\_\_\_ Age: \_\_Years/ \_\_Months Boy / Girl

Caregiver's name: \_\_\_\_\_ Relationship: Mother / Father / Other: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Village /TA: \_\_\_\_\_

### 1. Identify problems

ASK and LOOK	Any DANGER SIGN?	SICK but NO Danger Sign?
<p><b>LOOK</b>                      YES, sign present → Tick <input checked="" type="checkbox"/>      NO sign → Circle <input type="checkbox"/></p> <p><input type="checkbox"/> For child 6 mo. up to 5 years, MUAC colour: _____                      MUAC _____ cm</p> <p><input type="checkbox"/> For all children                      ■ Oedema?</p> <p>If yes, <input type="checkbox"/> Oedema +   <input type="checkbox"/> Oedema ++   <input type="checkbox"/> Oedema +++</p>	<p><input type="checkbox"/> Oedema +++</p> <p><input type="checkbox"/> Red MUAC with complication</p> <p><input type="checkbox"/> Yellow MUAC</p> <p><input type="checkbox"/> Oedema + or ++ with complications (age 6 mo. or more)</p> <p><input type="checkbox"/> Oedema + or ++ with or without complications (age 2 up to 6 mo.)</p>	<p><input type="checkbox"/> Red on MUAC tape</p> <p><input type="checkbox"/> Oedema +</p> <p><input type="checkbox"/> Oedema ++</p>
	<div style="border: 2px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <input type="checkbox"/> If ANY Danger Sign, refer to health facility                     </div>	<div style="border: 2px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <input type="checkbox"/> If NO Danger Sign, treat at home and advise caregiver                     </div>

**NOTE:** Medical complications are diarrhoea of any duration, fever of any duration, fast breathing, red eye of any duration, peeling of the skin or no appetite for RUTF

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Child's name: \_\_\_\_\_ Age: \_\_\_\_\_

(Treatment given and other actions)

If ANY Danger, refer to health facility

If NO Danger Sign, treat at home and advise caregiver

**If any danger sign, REFER URGENTLY to health facility:**

**ASSIST REFERRAL to health facility:**

- Explain why child needs to go to health facility
- Advise to give 10% sugar water ( Less than 6 months = 25 ml, 6 months or more = 50 ml)
- FOR SICK CHILD WHO CAN DRINK, BEGIN TREATMENT:

<p><b>If</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Oedema +++</li> <li><input type="checkbox"/> Red on MUAC with complication / danger sign</li> <li><input type="checkbox"/> Oedema + or ++ with danger sign / complication</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Give oral antibiotic (Amoxicillin—250 mg single dose).</li> <li><input type="checkbox"/> Age 2 months up to 12 months—1 tablet</li> <li><input type="checkbox"/> Age 12 months up to 5 years—2 tablets</li> </ul>
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**If no danger sign, TREAT at home and ADVISE on home care:**

- If severe acute malnutrition (and eligible)
 

Food Item	Daily Quantity	For 7 Days	Ration to Give
<input type="checkbox"/> RUTF	2 sachets	14 sachets	14 sachets
- Enroll
- Give RUTF

Give oral antibiotic (Amoxicillin—250 mg). Give twice daily for 7 days:

- Age 2 months up to 12 months—1 tablet (total 14 tabs)
- Age 12 months up to 5 years—2 tablets (total 28 tabs)

Help caregiver give first dose now.

- Do a rapid diagnostic test (RDT): {if not already done for fever in part A} \_\_\_Positive \_\_\_Negative
- If RDT is positive, give oral antimalarial LA (Artemether-Lumefantrine) {if not already given for fever above} Give twice daily for 3 days:
  - Age 5 months up to 3 years—1 tablet (total 6 tabs)
  - Age 3 years up to 5 years—2 tablets (total 12 tabs)

Help caregiver give first dose now. Advise to give 2<sup>nd</sup> dose after 8 hours, and to give dose twice daily for 2 more days.

Advise caregiver to give more fluids and continue feeding.

Advise on when to return. Go to nearest health facility or, if not possible, return immediately if child

- Cannot drink or feed
- Becomes sicker
- Has blood in the stool

- Follow up child in 3 days (schedule appointment in item 6 below).
- For SAM follow up in 7 days
- Encourage HIV test if not tested.

**Note on follow up:**  Child better—continue to treat at home. Day of next follow up: \_\_\_\_\_

**Give Albendazole**

- Less than 2 years - 200 mg
- 2 years or more - 400 mg single dose
- Child is not better: — refer **URGENTLY** to health facility.
- Child has danger sign — refer **URGENTLY** to health facility.