

CHILDREN'S CLINIC CARD

CHILD'S PARTICULARS

Name of Health Facility: Buteko

Child's No.: 242/17

Child's Name: Chipanzya Phronesis Boy/Girl: Boy

Mother's or Guardian's Name: Gerona mwale NRC no.: 4/6010/16/1

Father's or Guardian's Name: Donald Chipanzya NRC no.:

Date first seen: 24-10-2017 Birth weight: 3.0kg

Place of Birth: Ronald Ross KCH

Where the family lives: address: B 865 Kalukanya T/Shipi Mufuta

Tick if the child has/is:

Birth weight less than 2.5kg	
Birth defect/handicap	
Born within 2 years of last delivery	
Fully protected against Tetanus at birth	
Mother dead	
Father dead	
Number of brothers and sisters	Alive: _____ Dead: _____
Twin child	Alive: _____ Dead: _____
Any other reason for special attention:	

DEWORMING

For children aged 12 months and above, 500 mg Mebendazole every six months

Date	Medication	Date	Medication

IMMUNISATION RECORD

IMMUNISATION against Tuberculosis (TB)
BCG (at birth) Date: 6/11/17
If no scar after 12 weeks, repeat dose. Unless symptomatic HIV Date: _____

IMMUNISATION against Polio (OPV), Diphtheria, Whooping Cough, Tetanus, Hib, Hepatitis B, Meningitis, Pneumonia (DPT-HepB-Bib), Measles, Diarrhoea (Rota), & Streptococcal Pneumonia (PVC)

OPV 0 (at birth to 13 days) Date: 26/10/17

OPV 1 (at 6 weeks) Date: <u>20/12/17</u>	DPT-HepB-Hib 1 (at 6 weeks) Date: <u>20/12/17</u>
OPV 2 (at least 4 weeks after OPV 1) Date: <u>19/01/18</u>	DPT-HepB-Hib 2 (at least 4 weeks after DPT-HepB-Hib 1) Date: <u>19/01/18</u>
OPV 3 (at least 4 weeks after OPV 2) Date: <u>20/02/18</u>	DPT-HepB-Hib 3 (at least 4 weeks after DPT-HepB-Hib 2) Date: <u>20/02/18</u>
OPV 4 (at 9 months, only if OPV 0 was not given) Date: _____	Measles (at 9 months, or soon after. Unless symptomatic HIV) Date: <u>26/08/18</u>
PCV 1 (at 6 weeks) Date: <u>20/12/17</u>	Measles second dose (Unless symptomatic HIV) Date: <u>05/05/19</u>
PCV 2 (at least 4 weeks after PCV 1) Date: <u>19/01/18</u>	ROTA VACCINE 1 (at 6 weeks) Date: <u>20/12/17</u>
PCV 3 (at least 4 weeks after PCV 2) Date: <u>20/02/18</u>	ROTA VACCINE 2 (at 4 weeks after ROTA 1) Date: <u>19/02/18</u>

OTHER IMMUNISATIONS

Polio Date: 26/11/17

IPV Date: 20/02/20

VITAMIN A SUPPLEMENTATION

Dosage: 0-5 months, 50,000 IU only if not breastfed;
6-11 months, 100,000 IU;
12-59 months, 200,000 IU every six months

Date	Dosage	Date	Dosage
<u>22/06/21</u>	<u>100,000 IU</u>		

VITAMIN A SUPPLEMENTATION FOR MOTHER

Date Vit. A given to the mother: _____

Vitamin A (1 dose of 200,000 IU) to be given soon after birth or within two months of delivery.

PMTCT

CE MSU CNE

Test by:

DATE	PCR	R	NR	I
	<u>6/52</u>			
	<u>12/12</u>			
	<u>18/12</u>			

MGA IGA

Follow up time	6 Weeks	2 Months	3M	4M	5M	6M	7M
Cotrimoxazole							
Follow up time	8M	9M	10M	12M	15M	18M	24M
Cotrimoxazole							

Date baby referred for ART: _____

Date initiated on ART: _____

Age at initiation of ART: _____

MONITORING OF INFANT AND YOUNG CHILD FEEDING

Follow up time	Birth	6 Days	1M	6W	2M	3M	4M	5M	6M
Infant feeding code									
Follow up time	7M	8M	9M	10M	11M	12M	15M	18M	24M
Infant feeding code									

- Feeding Code:
- Exclusive breast feeding (in the first 6 months, breast-feeding only, no water no other fluids except medicines indicated by medical personnel)
 - Exclusive Alternative Infant Formula
 - Animal Milk
 - Mixed feeding (breast milk and other foods)
 - Continued breast feeding after six months in addition to other foods
 - Milk based feed after six months in addition to other foods
 - Other, specify _____

IMPORTANT.

All infants and young children should be breastfed exclusively for the first six months of life and continue to breastfeed up to two years and beyond with adequate complementary feeding from six months of age unless medically indicated.

Babies born to HIV positive mothers have special feeding needs. Discuss with a health worker.

IF THE CHILD HAS DIARRHOEA

If the child is still on breast milk, continue breast feeding.

After each loose stool, do the following:

- Give ORS
- Give extra fluids
- Continue to feed the child.

Note: (dilute 1 sachet of ORS in 1 litre of boiled cooled water)

Go immediately to the nearest Health Centre.

PNEUMONIA

If a child has a cough with:

- Fast Breathing
- Difficulties in breathing
- Difficulties in breast-feeding

The child may have Pneumonia, Go immediately to the nearest Health Centre.

DISCUSS

- Breastfeeding
- Complementary feeding
- Immunisation
- Vitamin A supplementation
- Family planning
- Feeding during and after illness
- Safe food and drinking water
- Treatment of diarrhoea
- HIV/AIDS
- Malaria

