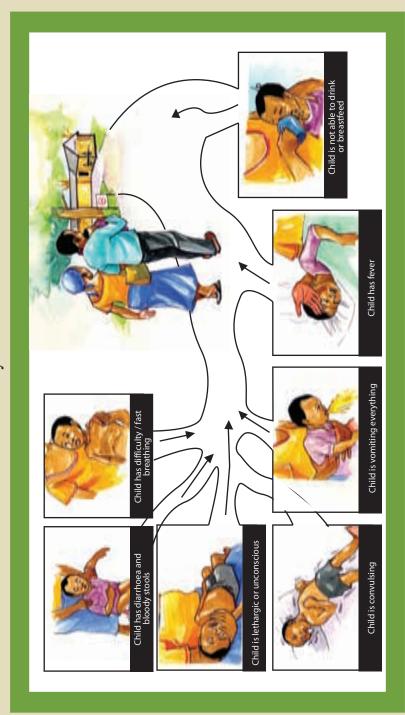
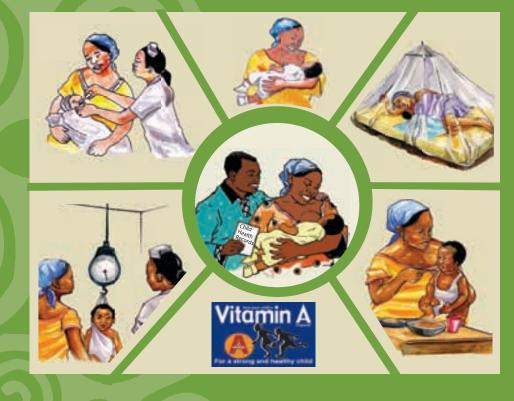
Rush immediately to the clinic if...... DANGER SIGNS



Child Health Records



Please bring this Booklet with you anytime you attend clinic

NOT FOR SALE DO NOT COVER

Name:

For More Information Contact Child Health Unit, Family Health Division Ghana Health Service, Accra.

BCSPROJECT

USAID



Clinic Reg. No.

The Purpose of the Child Health Records

- Provides health information and enables caregivers to learn about the useful practices they need to undertake to promote the health and development of their children
- Enables health workers to identify healthy and useful actions that need to be discussed with caregivers
- Helps caregivers and health workers to follow the child's growth and development and keep records of children's health.

Health Workers

- Give the Child Health Records Booklet to caregivers when the baby is born
- Use it to counsel and educate the caregiver
- Demand this Booklet each time you see a child in order to enter records eg. illnesses, treatment, growth, immunization, nutrition, etc. and counsel accordingly.

Caregivers

- Keep this Booklet at home, study it to know what to do at each point of your child's growth and development
- Take this Booklet along with you when going for "weighing"
- Take this Booklet along with you to the clinic when the child is sick. Give it to the doctor or nurse to see your child's progress
- Keep it safe, you may need it later to apply for school, passport or for health history.

PARENTS' PLEDGE



We the parents of Paky
We the parents of Baby
will apply the actions included in this health booklet and do our best so that our
child is healthy, grows and develops well.
Caregiver's signature/ thumbprint

CLINIC/HOSPITAL:
REGISTRATION No. :
Child's Personal Information
Gilliu & Personal Illiorniauon
Child's Name:
Birth Registration No. Sex: F M
Date of Birth: Birth Weight: Kg.
Place of Birth: Date First Seen:
Sickle Cell Status: G6PD Status:
Mother's Name:
Education: Nil Primary JHS SHS Tertiary
Father's Name:
Education: Nil Primary JHS SHS Tertiary
Address (Where family lives):
House No./Description
Town/Village:
Sub District: District:
Region: 3

	Brothers and Sisters							
No.	Name	Year of Birth	Sex	Remarks Dead / Alive				

Special Care: A child with any of the following history needs special care.

HICK	App	ropi	riate	ROX:

Birth Weight less than 2.5kg: Birth interval less than 1 year:
Fifth Child or more:
If Child is positive for Sickle Cell Disease?
Single Parent: Brother/Sister Malnourished:
Multiple Birth, e.g. Twins:
Orphan: Any Bother/Sister dead:
Others (Specify):

Record of Key Messages to be Given to Caregivers

Health Provider:

Mark the symbol below when these messages have been repeated to the caregiver.





Keeping the baby warm

Newborn

Caregiver:

- Watch out for danger signs for the baby. e.g pus from eyes or cord, yellow eyes
- Always keep your baby warm and dry
- Clean the cord with only methylated spirit twice a day until the wound heals. Avoid applying other substances like shea butter and dusting powder
- Give your baby only breast milk.

Mark the symbol below when these messages have been repeated to the caregiver.



Breastfeeding

Foods for complimentary feeding



Feeding

Mothers:

- Give your baby only breast milk for the first 6 months of life
- After six months, give other foods that will help your child grow well and stay healthy
- Continue to breastfeed until baby is 2 years old or more.

Give foods that help your baby grow well and stay healthy.

Mark the symbol below when these messages have been repeated to the caregiver.





Family planning session

Fill in the symbol below once the

caregiver has applied these actions.

Caregiver:

 Family planning can prevent unwanted pregnancy until the couple is ready for a baby

Family Planning

- It can prevent sickness and death for the woman and her baby
- It helps couples plan better for their children's needs
- Some family planning methods (e.g. condom), protects you from sexually transmitted diseases including HIV/AIDS
- Talk to your health worker about family planning.

Immunization and Vitamin A

Caregiver:

- Immunize your baby fully before the age of 1 year
- From six months to 5 years, take your baby to the clinic for Vitamin A every 6 months.

••••••

Mark the symbol below when these messages have been repeated to the caregiver.

mmunisation



Growth Monitoring and Promotion

Caregiver:

- Take your baby to the clinic for weighing every month till the age of 2 years
- Continue to have your baby weighed every 4 months from 2 years to 5 years.

Mark the symbol below when these messages have been repeated to the parents.





Examining a sick child

Malaria

Caregiver:

- Prevent malaria by sleeping under ITNs
- When the child has malaria, act quickly! Sponge, give AA and paracetamol and go to a trained health worker for assessment and treatment.

Health Worker:

 Ask whether the caregiver and child are sleeping under an ITN and encourage he/she to continue.

Mark the symbol below when these messages have been repeated to the caregiver,





Preparing ORS

Diarrhoea

Caregiver:

- Give ORS to replace lost fluid and Zinc to reduce diarrhoea
- Bring your child quickly to the health facility if he/she refuses to drink or breastfeed and/or you notice blood in the stool
- Continue to breastfeed/feed the child.

Key Information for Caregivers

Newborn baby

- Start breastfeeding soon after delivery, within 30 minutes and give only breast milk for the first 6 months of life
- Wipe baby dry with a clean cloth, smear body with oil. (Use baby oil, shea butter, palm kernel oil etc.)



Keeping the baby warm

- Delay bathing the baby until next day (6 - 24hrs) and give the baby a bath only once a day
- Always keep your baby warm and dry
- Make sure your baby is immunized against polio and tuberculosis at birth
- Watch out for any problems such as difficult breathing, fever or low body temperature,

yellow eyes, pus from the eye or cord, and report to the health worker

- Clean the cord with only methylated spirit two times a day until the wound heals. Avoid applying other substances like shea butter and dusting powder
- Keep a clean environment and good personal hygiene.

Sickle Cell Disease

In Ghana Sickle cell disease is the most common blood disease that children can inherit from their parents. You will not know your child has Sickle Cell Disease unless he/she is tested.

Signs and symptoms include:

- Yellow eyes, mouth, palms, and other parts of the body
- Swelling of the hands and feet
- Frequent shortage of blood
- Enlargement of the abdomen (tummy)
- Children with sickle cell disease easily get malaria, pneumonia and other infections.

To find out if your child has sickle cell disease, take him/her to the health facility for laboratory tests as soon as possible, after birth.

Here are some tips on the care for a child with sickle cell disease:

- Feed the child well. Give breast-milk only for the first 6 months of life for protection against infections
- After 6 months give baby other foods in addition to breastmilk until he/she is 2 years old and beyond
- Protect the child from cold; do not give food/drink that is cold or iced
- Let him/her sleep under an ITN every night
- Give the child daily folic acid and other medicines prescribed by your health worker
- Do not give iron tablets/syrup except when prescribed by your doctor
- Give the child a lot of fluids to drink
- Always use warm water to bathe the child
- Keep all appointments with your health worker even if the child is well.

Immunization/Weighing

Immunize your baby fully before the age of one year.

- Immunization protects your baby against many childhood diseases
- Give paracetamol and sponge the child if he/she develops fever after vaccination
- Report to the health worker if the child develops unusual symptoms such as, swelling, rashes, fever and twitching/convulsion after vaccination



Take your baby to the clinic for weighing every month till the age of 2 years. From age 6 months until he/she is 5 years old, give your child Vitamin A every 6 months.

8

Breastfeeding



- Good positioning and attachment
 Start breastfeeding within 30 minutes after delivery
- Give your baby only breast milk for the first six months of life
- Breast milk provides all the food and water your baby needs for the first six months of life and protects the baby against infections
- The first yellowish milk (colostrum) also protects the baby against infections, give it to your baby
- Give no water or any other liquids for the first six months of baby's life
- Breastfeed as often as the baby wants, day and night
- Properly position and attach the baby to the breast (see the picture above). The baby needs to take part of the breast and not just the nipple
- Talk to your health worker on how to feed your baby if you are HIV positive.

Feeding the Child

It is always important to feed your child with foods and fruits that would help him/her to grow well and stay healthy. Foods can be mashed, fruits can also be mashed, cut up or squeezed into juice.







asiling harius with soap and water



Birth to 6 months

- Start breastfeeding within 30 minutes after birth
- Give only breast milk
 as often as the child
 wants, at least 10
 times during the day
 and night
- Breastfeed long enough to empty one breast at each feed (about 10 minutes), before giving the other breast
- Do not give water, sugar water, gripe water, cod liver oil, friut juice, pito, herbal preparations, koko, milk or other liquids or foods
- If you think the baby is thirsty give more breastmilk.

12

Feeding a Healthy Child



6 months to 9 months

- Breastfeed as often as the child wants, at least 8 times during the day and night
- Give 3 times a day, an adequate serving of a variety of foods without pepper. (4 times if not breastfed)
- Give also one (1) snack a day between main meals
- Give fruit everyday. Wash the fruit in salt water, mash or squeeze into juice
- Feed new foods patiently
- Do not give water just before breast feeding or other feeds
- Serve the child in a separate bowl
- Wash
 yours and
 the child's
 hands
 with soap
 and water
 before
 feeding.



9 months to 12 months

- Breastfeed as often as the child wants
- Give 4 times a day, adequate serving of a variety of foods without pepper (5 times if not breastfeeding)
- Give also one (1) snack a day between main meals



- Give fruit everyday.
 Wash fruit, mash, cut up, or squeeze into juice
- Do not give water just before breastfeeding or other feeds
- Serve the child in a separate bowl
- Wash yours and the child's hands with soap and water before feeding.

Feeding a Healthy Child



12 months to 2 years

- Breastfeed as often as the child wants
- Feed 3 times per day, a variety of family foods with little or no pepper (4 times if not breastfeeding)
- Give also, two (2) snacks in between main meals
- Give fruit everyday. Wash before eating
- Do not give water just before breastfeeding or other feeds
- Serve the child in a separate bowl and supervise the child when eating
- Wash yours and the child's hands with soap and water before eating.



Make sure your child's food has enough vitamins (See vitamin rich foods on page 23).



2 years and older

- Feed 3 times per day a variety of family foods
- Give also two (2) snacks daily in between main meals
- Give fruits every day. Wash the fruits before eating
- Serve child in a separate bowl and supervise the child to eat
- Wash yours and the child's hands with soap and water before eating.



Feeding during and after illness:

Birth - 5 years

- Increase the frequency of breast feeding/feeding so that he/she can quickly recover weight and strength lost
- Give him/her one or two extra meals each day for two weeks after the child gets better to help regain lost weight.

Continue Breastfeeding for 2 years and beyond.

Continue Breastfeeding for 2 years and beyond

13

Family foods that you can give to the child



Thick porridge

Porridge

Thick porridge made from maize, millet, sorghum, guinea corn or rice; ekwegbemi or other thick porridge like tom-brown and weanimix. Add a little sugar and enrich with one or more of the following:

Palm oil, shea butter or other vegetable oil, groundnut paste, soy flour, bean flour, egg, milk or fish powder.

For children 12 months and older, porridge should be served with bread, doughnuts (bofrot), koose, kulikuli or biscuit.

Snacks: Give in between meals, doughnuts (bofrot), koose, bread with margarine or groundnut paste, kulikuli, biscuit, banana, roasted or fried plantain or yam, fruit.



Fruits: Give the child everyday, fruits such as mango, orange, watermelon, avacado pear, pawpaw, pineapple, banana etc.



Family foods that you can give to the child

Family Foods

Waakye, rice, kenkey, fufu, aboloo, gari, yam cocoyam, plantain, cassava, sweet potato, kokonte, akple or tuozafi.

Serve with at least one ladle of stew such as:

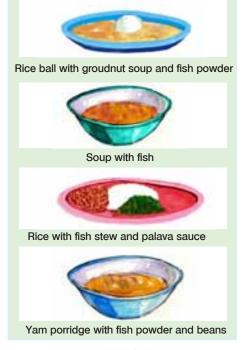
Kontomire, beans, garden egg, okro, tomato, agushie, aleefu, ayoyo, pumpkin, bokoboko all cooked with palm oil or other vegetable oil and mashed fish, meat or egg.

Or with at least one ladle of soup such as:

groundnut, palm nut, neri, okro, vegetable soup, or green leafy vegetable soup. All prepared with mashed fish, meat, egg or beans.

Other family foods e.g.

Mpotompoto, gari-foto, aprapransa with palm oil or other vegetable oil and mashed fish, egg, meat, or beans.







Wash hands with soap and water before preparing food or feeding your child

When Baby is Sick

Seek care at a health facility as soon as your child is sick. Do not delay.

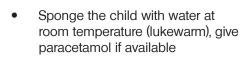
Treatment for Worm Infestation

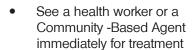
From the age of two years, give your child worm medicines every six months to get rid of worms.

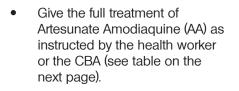
Home Care for Fever

When your child is sick with fever/malaria

- He/she might have malaria
- Malaria kills so treat it urgently!









Feel the body



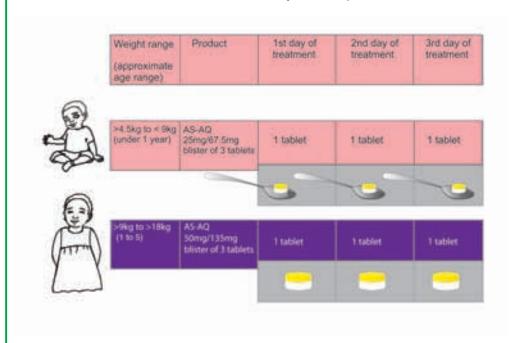


Health worker examines the sick child



Give medicines and food at home

Treatment for malaria with MOH Artesunate Amodiaquin (AS-AQ)



- If your child has any of these signs: vomiting, dark urine, difficult to wake up or convulsing, insert rectal Artemisinin (Artemisinin suppository if available)
- Report at once to the nearest health facility.

Malaria Prevention

 Prevent malaria by sleeping with your baby under ITN every night.



Sleep under well tucked-in ITN

Home Care For Diarrhoea

How to prepare ORS



Pour one sachet of ORS into a bowl



Add one beer bottle or two mineral bottles full of water and mix well



Give ORS to the Child

- Treat diarrhoea with Oral Rehydration Salt (ORS) and Zinc
- Give your child as much fluid as possible; if your baby is still breastfeeding, let him/her feed more often
- You may give clean boiled water, rice water, porridge, mashed kenkey or coconut juice in addition to ORS
- Use Zinc tablets in addition to treat diarrhoea at home. Dissolve the zinc tablets with a little clean water, ORS, or breast milk if the child is still breastfeeding
- Continue feeding with the child's favourite food.
- Take your child quickly to the nearest clinic, if he/she refuses to drink, breastfeed, vomits everything, is very weak and/or you notice blood in the stool.

How much Zinc to give

Age	Dose/ Daily	Time Period
0 - 6 months	10 mg	14 days
7 months - 5 yrs	20 mg	14 days



Dissolve zinc tablet in little water or breastmilk and give to the child

Continue Zinc treatment for 14 days even when the diarrhoea stops.



Danger Signs When the Child is sick

Take the child to the health facility immediately you see these signs:

- Has diarrhoea and blood in stool
- Has difficult or fast breathing
- Is lethargic or unconscious (very sleepy, difficult to awaken)
- Is convulsing
- Is vomiting everything
- Has Fever
- Is not able to drink or breastfeed
- Looks sicker (worse).

Danger Signs



Blood in stool



Lethargic / unconscious



Difficult or fast breathing



Vomiting everything





Unable to drink or breastfeed



Fever

Family Planning

Family planning has several benefits for the health and welfare of the family.



Family planning counseling session

When can you use family planning methods?

- After a baby is born
- If the couple no longer wants to have more children
- When the mother to be is too young or too old. (under 20 years or above 35 years)
- To avoid pregnancies too close together. (Less than 2 years).

Why family planning?



Mother too young



Mother too old



Pregnancies too close together

- Family planning can prevent pregnancy until the woman and man are ready for a baby
- It can prevent sickness and death for the woman and her baby
- It helps couples plan better for their children's needs
- Some family planning methods protect you e.g condom, from sexually transmitted diseases, including HIV/AIDS.

There are several family planning methods available. See your health worker after giving birth and at any other time to help you choose the most suitable method for you.

	Immunizations and Vitamin A					
Age Period	Vaccine	Date Given	Batch No.	Place Given	Date of Next Visit	
At Birth	BCG					
	Polio					
	Hepatitis B					
6 Weeks	Polio					
	DPT/Hep B/ Hib 1 (5 in 1)					
	Pneumococcal					
	Rotavirus					
10 Weeks	Polio					
	DPT/Hep B/ Hib 2 (5 in 1)					
	Pneumococcal					
	Rotavirus					
14 Weeks	Polio					
	DPT/Hep B/ Hib 3 (5 in 1)					
	Pneumococcal					
	Rotavirus					
6 Months	Vitamin A					
9 Months	Measles					
	Yellow Fever					
12 Months	Vitamin A					
18 Months	Vitamin A					
	Measles					

Vitamin A Continued

Vitamin A							
Age:	2 years	2 ½ years	3 years	3½ years	4 years	4½ years	5 years
Date:							
		Oth	er Vacc	ines			
Date:							
Vaccine:							
Batch No.							
Date Given:							
Date of Next Visit:							

Foods Rich in Vitamin A





Growth Monitoring and Promotion

Use of the Growth Chart

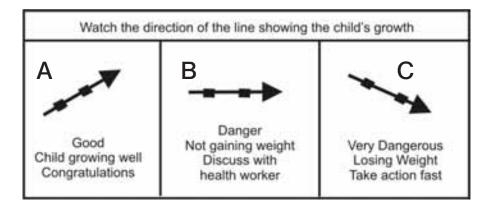
- The growth charts have been developed to help caregivers to follow the growth of the child (Pink for girls, and blue for the boys).
- Each child grows along his or her own curve based on the birth weight. Some babies may be born big, and others small.
- The caregiver should make sure that the child's weight increases adequately every month, which can be shown at monthly weighing.
- When the curve remains flat, dips or does not rise adequately then there is a problem. This means that the child may be sick or not receiving adequate food. Discuss with your health worker and take action.



Weighing

Mother, Father, Caregiver,

 Look at the direction of your child's curve. Is it rising adequately (A), flat (B) or dipping (C)?



 Discuss your child's growth with the health worker and take action, when necessary.

Stages of Growth (Developmental Milestones)

It is important to follow your child's growth. There are a few signs that can help you follow the growth and development of your child from birth to 5 years.

Look out for these signs

A child might have a problem in these areas when the child shows any of the following behaviours/signs.

Hearing – if the child:

- Does not turn toward the source of new sounds or voices
- Has frequent ear infection. (discharge from ear, earache)
- Does not respond when you call unless he can see you
- Does not talk or talks strangely.

Seeing – If the child:

- Has red or discharging eyes
- A cloudy appearance of the eyes
- Frequently rubs eyes and says they hurt
- Often bumps into things while moving around
- Holds head in an awkward position when trying to look at something
- Has eyes which sometimes or always look in different directions (squints)
- Has a white spot in the eye.





Talking - If the child:

- Does not say mama/mommy/dada by 18 months of age
- Cannot name a few familiar objects/ people by 2 years
- Cannot repeat simple songs/rhymes by 3 years
- Is not talking in short sentences by age 4 years.

Playing – If the child:

- Does not enjoy playing simple waving games by 1 year
- Does not play with common objects (e.g. spoons and bowls), by 2 years
- Does not join games with other children by 4 years. (e.g. catch, hide and seek)
- Does not play like other children of the same age.

Moving – If the child:

- Is unable to sit unsupported by 10months
- Cannot walk without help by 2 years
- Cannot balance on one (1) foot for a short time by 4 years
- Moves very differently from other children of the same age.



Any child with an identified problem should immediately be taken to a health worker.

Keeping Healthy

- Wash your hands with soap and water
 - Before preparing food
 - Before eating
 - Before feeding the baby
 - After visiting the toilet
 - After cleaning the baby
 - After handling chemicals eg. fertilizer, chemicals that kill weed, insecticide spray

Wash your hands with water and soap



- Continue to give the child nutritionally adequate diet with lots of fruits and vegetables.
- Ensure the child gets enough rest, a nap in the afternoon

Continue to give your child healthy foods that will promote growth and development.

Assessment form for sick children under 5 years (IMNCI)

Health Provider

All sick children should be assessed for the following:

Date:	Temp:	Age:
Weight:		
Complaint:		

Danger Signs

Not able to drink/breastfeed Vomits everything he/she eats and drinks Convulsions (History of convulsion in present illness) Lethargic/unconsciousness (very sleepy, hard to awaken) For new born, yellow eyes, discharging cord.

Cough/Difficult Breathing (Y/N)

Duration (days)
Breath rate per minute
Chest indrawing
Stridor.

Diarrhoea (Y/N)

Duration (days)
Blood in stool
Lethargic/ Unconsciousness
Sunken Eyes
Not able to drink/drinking poorly
Skin pinch (normal/abnormal).

Fever (Y/N)

Duration (days)
Measles within last 3 months
Neck stiffness
Measles rash
Cough/runny nose/red eyes
If yes for measles, look for mouth ulcers/pus in eyes/cloudy cornea.

Ear Problem (Y/N)

Pain
Discharge (If yes state duration)
Tender swelling behind ear.

Nutrition

Visible severe wasting (inadequate weight gain)
Palmer pallor (If yes, severe or some)
Oedema of both feet
Weight for age (very low/not very low inadequate weight gain).

Check Immunisation and Vitamin A status and refer/immunise if not up to date

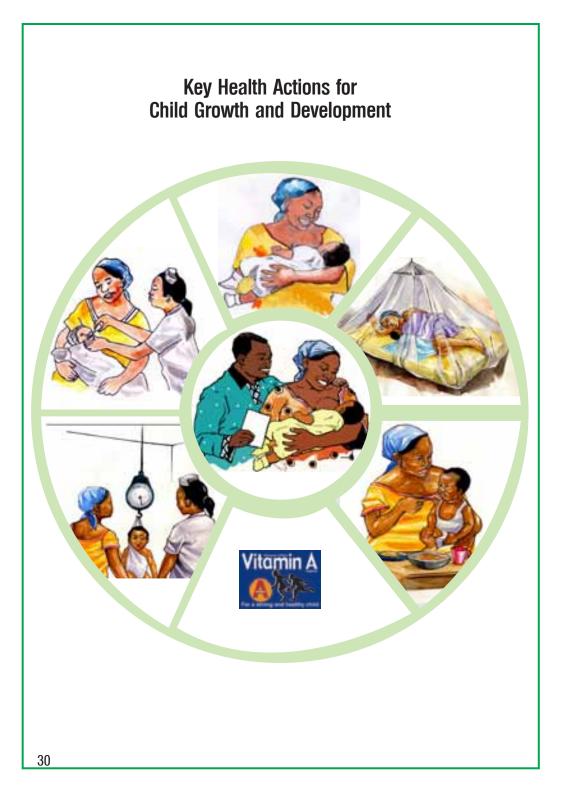
Assess feeding if anaemic, low weight or less than 2 years

(Frequency of breast feeding / 24 hours)
Use of feeding bottle
Frequency of other foods/drink given.

Assess Other Problems

Diagnosis or classification Counseling on feeding (see recommendations on pages 11 & 15) Treatment Referral.

ALWAYS USE THIS FORMAT
ON PAGES 28 AND 29 AS
A GUIDE FOR YOUR CLINICAL NOTES



Data		
Date		

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