

ASSESS, CLASSIFY AND IDENTIFY TREATMENT OF A CHILD WITH COUGH OR DIFFICULT BREATHING, DIARRHOEA OR UNDERNUTRITION

ASSESSMENT	SIGNS	CLASSIFICATION	IDENTIFY TREATMENT										
CHECK FOR GENERAL DANGER SIGNS ASK: <ul style="list-style-type: none"> “Is the child able to drink or breast feed?” LOOK: <ul style="list-style-type: none"> See if the child is lethargic or unconscious 	Child is not able to drink OR is lethargic or unconscious	Severe disease	Refer to the hospital										
THEN ASK: “Does the child have cough or difficult breathing?” If yes <ul style="list-style-type: none"> Look for chest indrawing Count the breathing rate in one minute. Breathing rate is __/minute. Fast Breathing 2 months up to 12 months - 50 or more 12 months up to 5 years - 40 or more	Child not able to drink OR lethargic OR chest indrawing	Severe disease OR severe pneumonia	Refer to the hospital										
	Fast breathing	Pneumonia	Treat with Cotrimoxazole, provide home care										
	None of the above signs	No pneumonia	Home care only										
THEN ASK: “does the child have diarrhoea?” If yes ASK: <ul style="list-style-type: none"> “Is there blood in the stool?” “Is diarrhoea more than two weeks duration?” <ul style="list-style-type: none"> Offer a child a fluid to drink <ul style="list-style-type: none"> Drinks poorly Drinks eagerly Drinks normally Pinch the skin over the abdomen <ul style="list-style-type: none"> Very slow Slow Normally 	Blood in the stool	Dysentery	Refer to the hospital										
	Diarrhoea for more than two weeks	Persistent diarrhoea	Refer to the hospital										
	Not able to drink OR drinks poorly OR lethargic OR very slow skin pinch	Severe dehydration	Refer to the hospital										
	Slow skin pinch OR drinks eagerly	Some dehydration	Treat with ORS, provide home care										
	None of the above signs - diarrhoea less than two weeks No blood in the stools	No dehydration	Home care only										
Then check for undernutrition and anaemia <ul style="list-style-type: none"> Look for severe wasting Look for oedema of both feet Look for palmar pallor <ul style="list-style-type: none"> Severe pallor Some pallor No pallor Determine weight for age. 	Visible severe wasting OR oedema in both feet OR severe pallor	Severe undernutrition OR severe anaemia	Refer to the hospital										
	Very low weight for age OR some pallor	Undernutrition OR anaemia	Feeding advice, iron, home care										
	No wasting, no oedema not very low weight for age OR pallor	No undernutrition OR anaemia	Feeding advice if child below 2 years age, home care										
Check for other symptoms -Does the child have fever?	High fever	High fever	-Give paracetamol Refer if high grade fever for more than 1 day. -Refer if child is less than 2 months of age.										
Then check the child's immunization status <table style="width: 100%; text-align: center; border: none;"> <tr> <td style="border: none;">BCG</td> <td style="border: none;">DPT1</td> <td style="border: none;">DPT2</td> <td style="border: none;">DPT3</td> <td style="border: none;">Vitamin A</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;">Polio1</td> <td style="border: none;">Polio2</td> <td style="border: none;">Polio3</td> <td style="border: none;">Measels</td> </tr> </table>				BCG	DPT1	DPT2	DPT3	Vitamin A		Polio1	Polio2	Polio3	Measels
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2. TREATMENT AT HOME FOR

A: PNEUMONIA

Determine the dose of Cotrimoxazole for treatment of pneumonia

⇒ Give two times daily for 5 days

AGE (WEIGHT) OF CHILD	PEDIATRIC TABLET 20mg trimethoprim+ 100 mg sulphamethoxazole
Under 1 month (<4kg)	1/2 tablet (<4kg)
1 month up to 2 months (<4kg)	1 tablet
2 months up to 12 months (4-10kg)	2 tablets
12 months up to 5 years (10-19kg)	3 tablets

ADVISE THE MOTHER

- Avoid cotrimoxazole if infant is less than one month of age who are premature or jaundiced.
- Tell the mother the reason for giving the drug to the child.
- Explain how much to give to the child.
- Show the mother how to crush and mix the tablet with fluid or food.
- Explain carefully how to give the drug.
- Mother should give first dose in your presence.
- Explain that all the tablets must be used to finish the course of treatment, even if the child gets better before the medicine is finished. Child must be seen after 2 days.

B: DIARRHOEA (some dehydration)

Determine the amount of ORS for treatment of dehydration

HOW MUCH ORS TO GIVE DURING THE FIRST 4 HOURS

ORS	AGE OF CHILD			
	Up to 4 months	4 months up to 12 months	12 months up to 2 years	2 years up to 5 years
In ml	200-400	400-700	700-900	900-1400
In Cups	2 cups	3-4 cups	5-6 cups	6-8 cups

ADVISE THE MOTHER

- If the child wants more ORS than shown, give more.
 - For infants under 6 months who are not breast fed, also give them 100-200ml plain clean water, in addition to ORS, during the first 4 hours.
- ⇒ SHOW THE MOTHER HOW TO GIVE ORS SOLUTION
- Give frequent small sips from a cup. For small infants, tell the mother to give one teaspoon every minute.
 - If the child vomits, wait for 10 minutes. Then continue giving ORS, but more slowly.
 - Continue breast feeding wherever the child wants.
- ⇒ AFTER 4 HOURS
- Reassess the child (see over # 1)
 - Select the appropriate treatment (see over #1).
 - Begin feeding the child.

3. COUNSEL THE MOTHER ON HOME TREATMENT FOR

C: COUGH OR COLD (No Pneumonia)

⇒ TELL THE MOTHER

1. Feed the child:
 - Feed the child during illness.
2. Give increased fluids:
 - Increase breast feeding.
 - Offer the child extra to drink. (See home fluids listed at #3 D)
3. Soothe the throat and relieve the cough with a safe home made cough remedy (made into tea) such as:
 - sugar, ginger, lemon, tulsi leaves;
 - sugar, ginger, lemon, mint;
 - sonf, clashi, ginger.
4. If the child's nose is blocked and interferes with feeding, clean the nose by putting in nose drops (boiled and cooled water mixed with salt) and by cleaning the nose with a soft cotton wick.
5. Keep the young infant warm.
6. Watch for the following signs and return quickly if they occur:
 - Fast breathing
 - Difficult breathing
 - Child becomes sicker
 - Not able to drink or breast feed

D: DIARRHOEA (No Dehydration)

⇒ TELL THE MOTHER

Give extra fluid (as much as the child will take) such as: ORS, milk, yoghurt drink, shikanji, rice, kanji, mand (peech), dal soup, vegetable soup, fruit juice, plain clean water (or other locally available fluids, e.g. _____).

1. • Breast feed frequently and for longer at each feed.
 - If the child is not exclusively breast fed, give one or more of the above home available fluids (such as water or ORS).
2. Show the mother how much fluid to give after each stool in addition to the usual fluid intake:

Up to 2 years	-	half cup.	Give more if the child wants more.
2 years or more	-	full cup.	Give more if the child wants more.

3. • Give frequent small sips from a cup. For small infants, give one teaspoon every minute.
 - If the child vomits, wait for 10 minutes. Then continue, but more slowly.
 - Continue giving extra fluid until the diarrhoea stops.
4. Continue feeding.
5. When to return. Tell the mother to return to the health worker if:
 - The child is not able to drink or breast feed;
 - The child becomes sicker;
 - There is blood in stool;
 - The child is drinking pootty.

4. TREATMENT OF

FEVER		ANAEMIA			VITAMIN	
Age	Dose	Age	Dose	Age	Age	Dose
2 months up to 3 years	1/4	2 months up to 1 year	1/4 daily	1 daily	6 month up to 1 year	100 000 units (IV)
3 years up to 5 years	1/2	1 year up to 3 years	1/2 daily	2 daily	1 year up to 5 years	200 000 units (IV)
		3 years up to 5 years	1/2 daily	3 daily		