

## Caring for the Sick Child

age 2 months up to 5 years



## Chart Booklet

for the Community Health Worker

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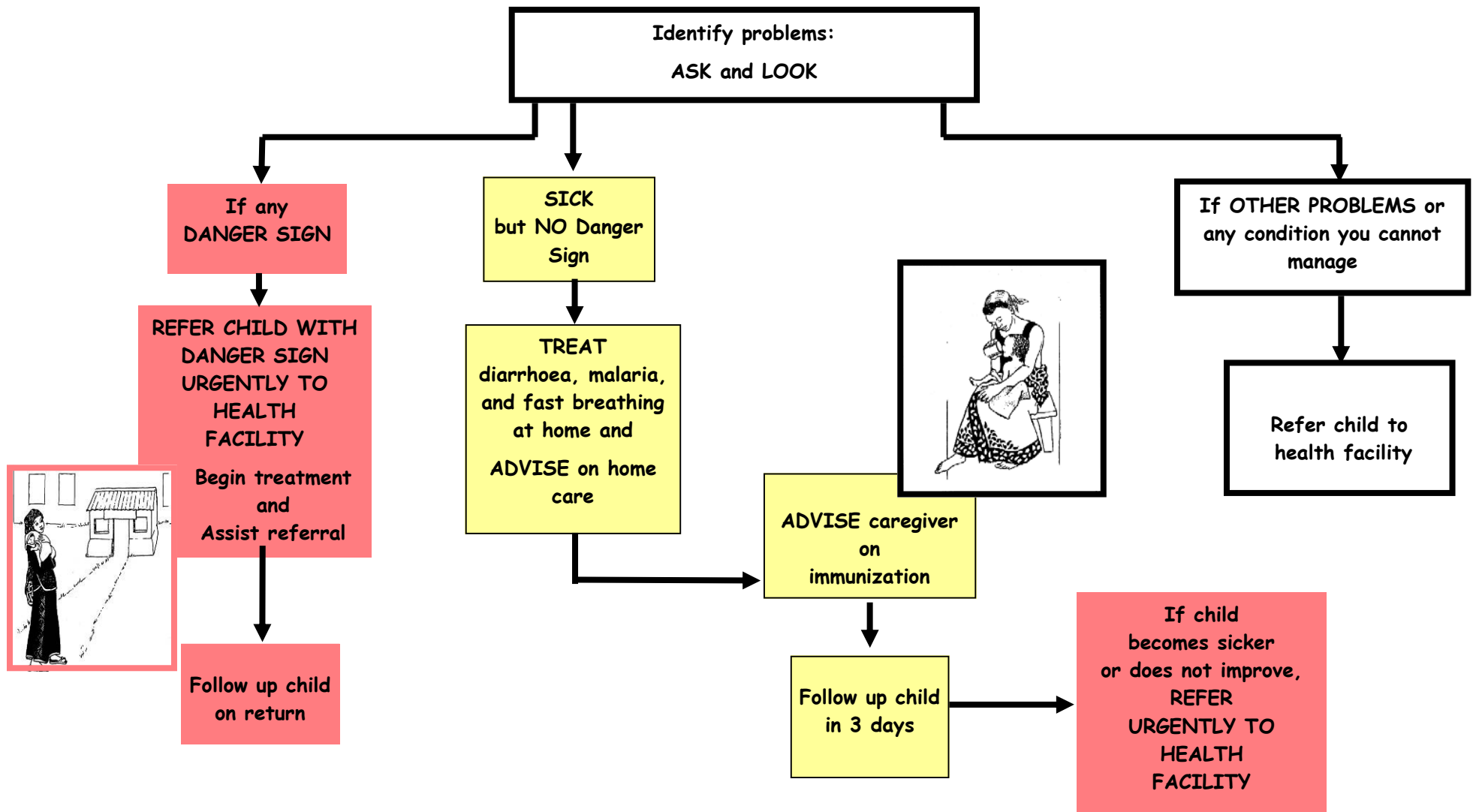
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**OVERVIEW: CARING FOR THE SICK CHILD IN THE COMMUNITY**

(child age 2 months up to 5 years)



## IDENTIFY PROBLEMS: ASK AND LOOK

ASK the caregiver: What are the child's problems?

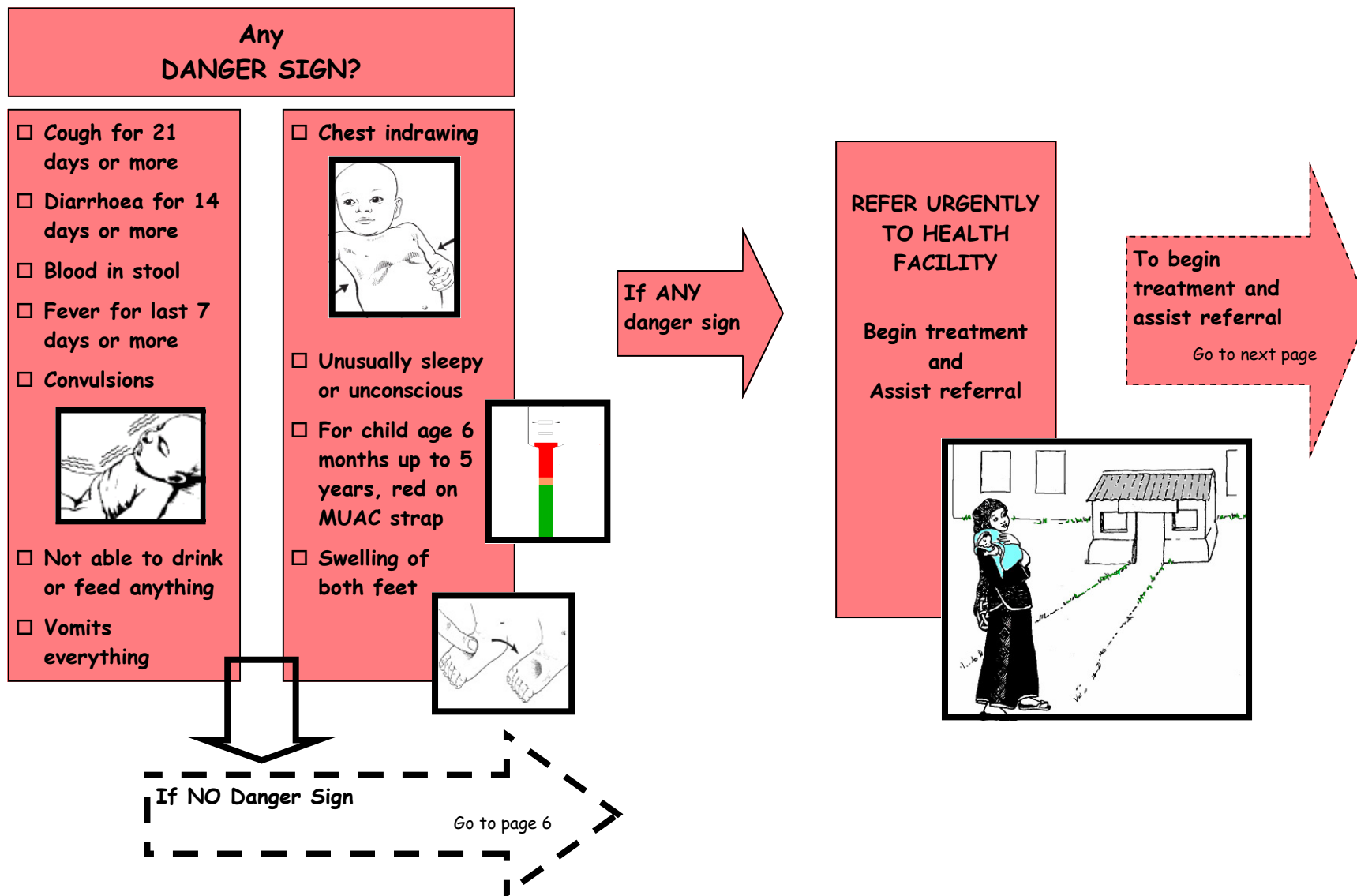
- Cough? If yes, for how long? \_\_\_\_ days
- Diarrhoea (3 or more loose stools in last 24 hours)? If yes, for how long? \_\_\_\_ days.
- If diarrhoea, blood in stool?
- Fever (reported or now)? If yes, started \_\_\_\_ days ago.
- Convulsions?
- Difficulty drinking or feeding? If yes, not able to drink or feed anything?
- Vomiting? If yes, vomits everything?
- Any other problem?

LOOK at the child.

- Chest indrawing?
- If cough, count breaths in 1 minute: \_\_\_\_ breaths per minute (bpm).
- Unusually sleepy or unconscious?
- For child age 6 months up to 5 years, MUAC strap colour: \_\_\_\_\_
- Swelling of both feet?



DANGER SIGNS



**→ IF ANY DANGER SIGN, REFER CHILD URGENTLY TO HEALTH FACILITY**

- Cough for 21 days or more
- Diarrhoea for 14 days or more
- Blood in stool
- Fever for last 7 days or more
- Convulsions
- Not able to drink or eat anything
- Vomits everything
- Chest indrawing
- Unusually sleepy or unconscious
- For child age 6 months up to 5 years, red on MUAC strap
- Swelling of both feet



**→ Assist referral to health facility:**

→ Explain why child needs to go to the health facility.

→ **GIVE FIRST DOSE OF TREATMENT:**

→ If diarrhoea, and if child can drink, begin giving ORS solution right away.

→ If fever AND: convulsions; or unusually sleepy/ unconscious; or not able to drink or feed; or vomits everything, give rectal artesunate suppository (100 mg):  
Age 2 months up to 3 years—1 suppository  
Age 3 years up to 5 years—2 suppositories

→ If fever AND danger sign other than the 3 above, give first dose of oral antimalarial AL:  
Age 2 months up to 3 years—1 tablet  
Age 3 years up to 5 years—2 tablets

→ If fast breathing or chest indrawing, give first dose of oral antibiotic (amoxicillin tablet—250 mg):  
Age 2 months up to 12 months—1 tablet  
Age 12 months up to 5 years—1 tablets

→ For any sick child who can drink, advise to give fluids and continue feeding.

→ Advise to keep child warm, if child is NOT hot with fever.

→ Write a referral note.

→ Arrange transportation, and help solve other difficulties in referral.

**FOLLOW UP** child on return at least once a week until child is well.

To give ORS solution.

Go to page 9



**→ IF ANY DANGER SIGN, REFER**



SICK BUT NO DANGER SIGN

**SICK  
but NO Danger Sign?**

- Cough (less than 21 days)
- Diarrhoea (less than 14 days AND no blood in stool)
- Fever (less than 7 days) in a malaria area
- Fast breathing:



- In a child age 2 months up to 12 months, 50 breaths or more per minute
- In a child age 12 months up to 5 years, 40 breaths or more per minute

If SICK but NO danger sign

TREAT at home and ADVISE on home care

To TREAT at home  
Go to next page

No problem found  
Check immunizations. Go to page 10

→ IF SICK BUT NO DANGER SIGN, TREAT AT HOME  
AND ADVISE ON HOME CARE

**If Diarrhoea**

- **Give ORS.** Help caregiver to give child ORS in front of you until child is no longer thirsty.  
Give caregiver 2 ORS packets to take home. Advise to give as much as the child wants, but at least 1/2 cup ORS solution after each loose stool.
- **Give zinc supplement.** Give 1 dose daily for 10 days:  
Age 2 months up to 6 months—1/2 tablet (total 5 tabs)  
Age 6 months up to 5 years—1 tablet (total 10 tabs)  
Help caregiver to give first dose now.

**If Fever (less than 7 days) in a malaria area**

- **Do a rapid diagnostic test (RDT).**
- **If RDT is positive, give oral antimalarial AL (Artemether-Lumefantrine).**  
Age 2 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.

**If Fast Breathing (pneumonia)**

- **Give oral antibiotic (amoxicillin tablet—250 mg ).**  
Give twice daily for 5 days:  
Age 2 months up to 12 months—1 tablet (total 10 tabs)  
Age 12 months up to 5 years—2 tablets (total 20 tabs)  
Help caregiver give first dose now.

**If Yellow on MUAC strap**

- **Counsel caregiver on feeding or refer the child to a supplementary feeding programme, if available.**

To give ORS solution.

Go to page 8



For **ALL children treated at home, advise on home care**

- Advise the 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 stool
- Advise caregiver on use of a bednet (ITN)
- Follow up child in 3 days.

If child becomes sicker or does not improve,  
**REFER CHILD URGENTLY TO HEALTH FACILITY**



**→ Give ORS solution**

→ Mix 1 package of ORS with 1 litre of clean water to make ORS solution.

→ Show the caregiver how to mix the ORS solution and give it to the child. Give frequent, small sips of ORS solution from a cup or spoon.

**→ For child with diarrhoea being referred:**

→ Ask the caregiver to continue to give the child ORS solution on the way to the health facility, if the child can drink. Also, if the child is breastfed, continue to breastfeed on the way.

**→ For child with diarrhoea to be treated at home:**

→ Help the caregiver to continue to give the child ORS solution in front of you until child has no more thirst.

→ Give the caregiver 2 packets of ORS to take home. Advise the caregiver to continue to give the child at home as much ORS solution as the child wants, but at least 1/2 cup after each loose stool. Do not keep the mixed ORS solution for more than 24 hours.

→ If the child is breastfeeding, advise the mother to breastfeed frequently and for a longer time at each feed. Give ORS solution in addition to breastmilk, even if the child is exclusively breastfed.

→ If the child is exclusively taking a breastmilk substitute, advise the mother to give ORS solution in addition to the breastmilk substitute.



## CHECK IMMUNIZATIONS

Check immunizations completed (see child's health card)

Age	Vaccine	
Birth	BCG	OPV-0
6 weeks	DPT-Hib + HepB-1	OPV-1
10 weeks	DPT-Hib + HepB-2	OPV-2
14 weeks	DPT-Hib + HepB-3	OPV-3
9 months	Measles	[Give OPV-4 if OPV-0 not given at birth]

Advise the caregiver on when and where to take the child for immunizations, if needed.

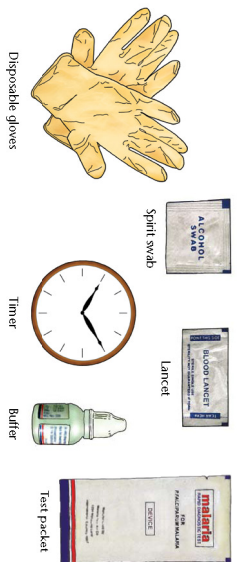


→ If any OTHER PROBLEM or condition you cannot manage, refer child to health facility, write a referral note, and follow up child on return.

# How To Do the Rapid Test for Malaria

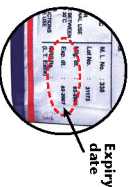


- Collect:
- NEW unopened test packet
  - NEW unopened spirit swab
  - NEW unopened lancet
  - NEW pair of disposable gloves
  - Buffer
  - Timer



## READ THESE INSTRUCTIONS CAREFULLY BEFORE YOU BEGIN.

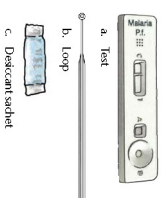
**1.** Check the expiry date on the test packet.



**2.** Put on the gloves. Use new gloves for each patient.



**3.** Open the packet and remove:



**4.** Write the patient's name on the test.



**5.** Open the alcohol swab. Grasp the 4<sup>th</sup> finger on the patient's left hand. Clean the finger with the spirit swab. Allow the finger to dry before pricking.



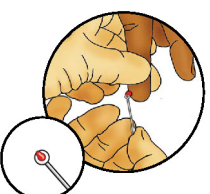
**6.** Open the lancet. Prick patient's finger to get a drop of blood.



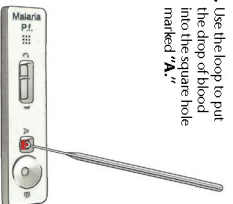
**7.** Discard the lancet in the Sharps Box immediately after pricking finger. **Do not set the lancet down before discarding it.**



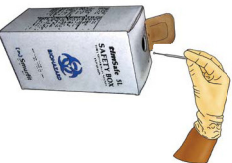
**8.** Use the loop to collect the drop of blood.



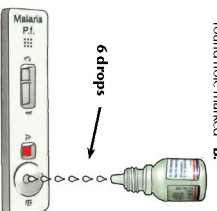
**9.** Use the loop to put the drop of blood into the square hole marked "A."



**10.** Discard the loop in the Sharps Box.



**11.** Put six (6) drops of buffer into the round hole marked "B."



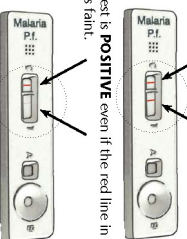
**12.** Wait **15 minutes** after adding buffer.



**13.** Read test results. **(NOTE: Do Not read the test sooner than 15 minutes after adding the buffer. You may get FALSE results.)**

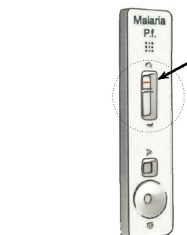
**14.** How to read the test results:

**POSITIVE**  
One red line in window "C" **AND** one red line in window "T" means the patient **DOES** have *falciparum* malaria.

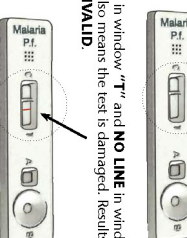


The test is **POSITIVE** even if the red line in window "T" is faint.

**NEGATIVE**  
One red line in window "C" and **NO LINE** in window "T" means the patient **DOES NOT** have *falciparum* malaria.



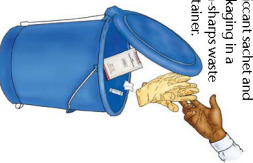
**INVALID RESULT**  
**NO LINE** in window "C" means the test is damaged.



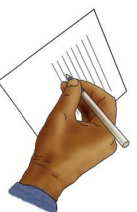
A line in window "T" and **NO LINE** in window "C" also means the test is damaged. Results are **INVALID**.

If no line appears in window "C," repeat the test using a **NEW unopened** test packet and a **NEW unopened** lancet.

**15.** Dispose of the gloves, spirit swab, disinfectant swab and packaging in a non-sharps waste container.



**16.** Record the test results in your CHW register. Dispose of cassette in non-sharps waste container.



**NOTE:** Each test can be used **ONLY ONE TIME**. Do not try to use the test more than once.



### Sick Child Recording Form

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

Date: \_\_\_/\_\_\_/20\_\_\_

GMV: \_\_\_\_\_

(Day / Month / Year)

Child's name: First \_\_\_\_\_ Family \_\_\_\_\_ Age: \_\_\_ Years/\_\_\_ Months Boy / Girl

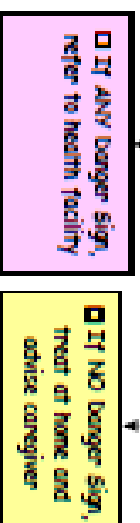
Caregiver's name: \_\_\_\_\_ Relationship: Mother / Father / Other: \_\_\_\_\_

Address, Community: \_\_\_\_\_

#### 1. Identify problems

ASK and LOOK	Any DANGER SIGN	SICK but NO Danger Sign?
<p><b>ASK: What are the child's problems? If not reported, then ask to be sure.</b></p> <p>YES, sign present <input checked="" type="checkbox"/> <b>NO sign + one!</b></p>		
<p><input type="checkbox"/> <b>Cough?</b> If yes, for how long? ___ days</p>	<p><input type="checkbox"/> Cough for 21 days or more</p>	
<p><input type="checkbox"/> <b>Diarrhoea</b> (3 or more loose stools in 24 hrs)?</p> <p>IF YES, for how long? ___ days</p>	<p><input type="checkbox"/> Diarrhoea for 14 days or more</p>	<p><input type="checkbox"/> Diarrhoea (less than 14 days <b>AND</b> no blood in stool)</p>
<p><input type="checkbox"/> <b>IF DIARRHOEA</b>, blood in stool?</p>	<p><input type="checkbox"/> Blood in stool</p>	
<p><input type="checkbox"/> <b>Fever</b> (reported or new)?</p> <p>If yes, started ___ days ago.</p>	<p><input type="checkbox"/> Fever for last 7 days or more</p>	<p><input type="checkbox"/> Fever (less than 7 days) in a malaric area</p>
<p><input type="checkbox"/> <b>Convulsions?</b></p>	<p><input type="checkbox"/> Convulsions</p>	
<p><input type="checkbox"/> <b>Difficulty drinking or feeding?</b></p> <p>IF YES, <input type="checkbox"/> not able to drink or feed anything?</p>	<p><input type="checkbox"/> Not able to drink or feed anything</p>	
<p><input type="checkbox"/> <b>Vomiting?</b> If yes, <input type="checkbox"/> vomits everything?</p>	<p><input type="checkbox"/> Vomits everything</p>	
<p><b>LOOK:</b></p>		
<p><input type="checkbox"/> <b>Chest indrawing?</b> (FOR ALL CHILDREN)</p>	<p><input type="checkbox"/> Chest indrawing</p>	
<p><input type="checkbox"/> <b>IF COUGH</b>, count breaths in 1 minute: _____ breaths per minute (bpm)</p> <p><input type="checkbox"/> <b>Fast breathing:</b></p> <p>Age 2 months up to 12 months: 50 bpm or more</p> <p>Age 12 months up to 5 years: 40 bpm or more</p>		<p><input type="checkbox"/> Fast breathing</p>
<p><input type="checkbox"/> <b>Unusually sleepy or unconscious?</b></p>	<p><input type="checkbox"/> Unusually sleepy or unconscious</p>	
<p>For child 6 months up to 5 years, MUAC strap colour: red ___ yellow ___ green ___</p>	<p><input type="checkbox"/> Red on MUAC strap</p>	<p><input type="checkbox"/> Yellow on MUAC strap</p>
<p><input type="checkbox"/> <b>Swelling of both feet?</b></p>	<p><input type="checkbox"/> Swelling of both feet</p>	

#### 2. Decide: Refer or treat child (tick decision)



GO TO PAGE 2 →

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

3. Refer or treat child  
(tick treatments given  
and other actions)

If ANY Danger Sign.  
REFER URGENTLY  
to health facility

If NO Danger Sign.  
Treat at home and  
ADVISE caregiver

If any danger sign,  
REFER URGENTLY to health facility:  
Explain why child needs to go to health  
facility, **GIVE FIRST DOSE OF  
TREATMENT:**

If  
Malaria

Give oral cotrimoxazole, 1000mg  
and/or OZS solution night  
and/or

If Fever AIN  
Discontinue or  
downgrade fever  
or antimalarial or  
child able to drink  
or treat diarrhea  
Diarrhoea symptoms

If Fever AIN  
downgrade sign other than  
the 3 above

Give first dose of oral  
antimalarial (A).  
 Age 2 months up to 3  
years—1 tablet  
 Age 3 years up to 5  
years—2 tablets

If GICT  
Hydrate, or  
Fast feeding

Give child can drink, give  
first dose of oral  
antibiotic (amoxicillin  
tablet—250 mg)  
Day 2 month up to 12  
months—1 tablet  
Day 12 months up to 5  
years—2 tablets

Do not give oral cotrimoxazole, advise to give  
first and further therapy.  
Advise to begin oral cotrimoxazole if child is NOT yet  
with fever.  
Downgrade temperature, and with other  
symptoms in referral  
Follow up child in return of next day a week  
with oral cotrimoxazole

If no danger sign,  
TREAT at home and ADVISE on home care:

If  
Malaria  
(fever than 38  
days AIN) no  
blood in  
stool)

Give OZS. Help caregiver give child OZS solution in front of you  
until child is no longer thirsty.  
 Give cotrimoxazole 2 OZS packets in their bowl. Advise to give as  
much as child wants, but at least 1/2 cup OZS solution after each  
bowl meal.  
 Give fever treatment. Give 1 dose daily for 10 days.  
Day 2 month up to 6 months—1/2 tablet (total 5 tabs)  
Day 6 months up to 5 years—1 tablet (total 10 tabs)  
Help caregiver to give first dose now.

If  
Fever  
(fever than 38  
days) in a  
malaria area

Give a first dose of oral  
antimalarial (A).  
 First dose of oral antimalarial (A) (Artemether-  
Lumefantrine).  
 2<sup>nd</sup> dose of oral antimalarial (A) (Artemether-  
Lumefantrine).  
Give 1<sup>st</sup> dose of oral antimalarial (A) (Artemether-  
Lumefantrine).  
 Age 2 months up to 3 years—1 tablet (total 6 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.

If  
Fast  
Feeding

Give oral antibiotic (amoxicillin tablet—250 mg).  
Give twice daily for 5 days.  
 Age 2 months up to 12 months—1 tablet (total 10 tabs)  
 Age 12 months up to 5 years—2 tablets (total 20 tabs)  
Help caregiver give first dose now.

If  
William W  
with 6 other  
children  
threaten of  
disease  
advise on  
home care

Advise caregiver to give more first and further therapy.  
 Advise on when to return. Go to nearest health facility  
immediately or if not possible return if child  
 Cannot drink or feed  
 Becomes sicker  
 Has blood in the stool  
 Advise caregiver on use of a barrier stool.  
 Explain on when to give cotrimoxazole (see 6 below).

4. Check vaccines received)  
(tick if vaccines completed)  
Advise caregiver if received  
when and where is the next  
vaccine to be given?

Age	Vaccine	Date given
Birth	<input type="checkbox"/> BCG	<input type="checkbox"/> OPV-0
6 weeks	<input type="checkbox"/> OPV-HB + HepB 1	<input type="checkbox"/> OPV-1
10 weeks	<input type="checkbox"/> OPV-HB + HepB 2	<input type="checkbox"/> OPV-2
14 weeks	<input type="checkbox"/> OPV-HB + HepB 3	<input type="checkbox"/> OPV-3
9 months	<input type="checkbox"/> Measles	<input type="checkbox"/> OPV-4, if OPV-0 not given or level

Describe problem:

5. When to return for FOLLOW UP (circle): Monday Tuesday Wednesday Thursday Friday Saturday Sunday  
7. Note on follow up:  
 Child is better—continue to treat at home. Day of next follow up: \_\_\_\_\_  
 Child is not better—refer URGENTLY to health facility.  
 Child has danger sign—refer URGENTLY to health facility.

**For more information, please contact:**

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**Website: [http://www.who.int/child\\_adolescent\\_health](http://www.who.int/child_adolescent_health)**



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