

INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS

**ASSESS AND CLASSIFY
THE SICK CHILD
AGE 2 MONTHS UP TO 5 YEARS**

World Health Organization and UNICEF
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ASSESS AND CLASSIFY THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS

INTRODUCTION

A mother brings her sick child to the clinic for a particular problem or symptom. If you only assess the child for that particular problem or symptom, you might overlook other signs of disease. The child might have pneumonia, diarrhoea, malaria, measles, or malnutrition. These diseases can cause death or disability in young children if they are not treated.

The chart *ASSESS AND CLASSIFY THE SICK CHILD AGE 2 MONTHS UP TO 5 YEARS* describes how to assess and classify sick children so that signs of disease are not overlooked. According to the chart, you should ask the mother about the child's problem and check the child for general danger signs. Then ask about the four main symptoms: cough or difficult breathing, diarrhoea, fever and ear problem. A child who has one or more of the main symptoms could have a serious illness. When a main symptom is present, ask additional questions to help classify the illness. Check the child for malnutrition and anaemia. Also check the child's immunization status and assess other problems the mother has mentioned.

{Module 01 – page 001.jpg}

LEARNING OBJECTIVES

This module will describe and allow you to practice the following skills:

- * Asking the mother about the child's problem.
- * Checking for general danger signs.
- * Asking the mother about the four main symptoms:
 - cough or difficult breathing
 - diarrhoea
 - fever
 - ear problem.
- * When a main symptom is present:
 - assessing the child further for signs related to the main symptom
 - classifying the illness according to the signs which are present or absent.
- * Checking for signs of malnutrition and anaemia and classifying the child's nutritional status.
- * Checking the child's immunization status and deciding if the child needs any immunizations today.
- * Assessing any other problems.

Your facilitator will tell you more about the *ASSESS & CLASSIFY* chart.

1.0 ASK THE MOTHER WHAT THE CHILD'S PROBLEMS ARE

A mother (or other family member such as the father, grandmother, sister or brother) usually brings a child to the clinic because the child is sick. But mothers also bring children for well-child visits, immunization sessions and for treatment of injuries. The steps on the *ASSESS & CLASSIFY* chart describe what you should do when a mother brings her child to the clinic because he is sick. The chart should not be used for a well child brought for immunization or for a child with an injury or burn.

When patients arrive at most clinics, clinic staff identify the reason for the child's visit. Clinic staff obtain the child's weight and temperature and record them on a patient chart, another written record, or on a small piece of paper. Then the mother and child see a health worker.

When you see the mother and her sick child:

- * **Greet the mother appropriately** and ask her to sit with her child.

You need to know the child's age so you can choose the right case management chart. Look at the child's record to find the child's age.

- If the child is age 2 months up to 5 years, assess and classify the child according to the steps on the *ASSESS & CLASSIFY* chart.
- If the child is 1 week up to 2 months, assess and classify the young infant according to the steps on the *YOUNG INFANT* chart. (You will learn more about managing sick young infants later in the course.)

Look to see if the child's weight and temperature have been measured and recorded. If not, weigh the child and measure his temperature later when you assess and classify the child's main symptoms. Do not undress or disturb the child now.

- * **Ask the mother what the child's problems are.**

Record what the mother tells you about the child's problems.

An important reason for asking this question is to open good communication with the mother. Using good communication helps to reassure the mother that her child will receive good care. When you treat the child's illness later in the visit, you will need to teach and advise the mother about caring for her sick child at home. So it is important to have good communication with the mother from the beginning of the visit.

To use good communication skills:

- **Listen carefully to what the mother tells you.** This will show her that you are taking her concerns seriously.
- **Use words the mother understands.** If she does not understand the questions you ask her, she cannot give the information you need to assess and classify the child correctly.
- **Give the mother time to answer the questions.** For example, she may need time to decide if the sign you asked about is present.
- **Ask additional questions when the mother is not sure about her answer.** When you ask about a main symptom or related sign, the mother may not be sure if it is present. Ask her additional questions to help her give clearer answers.

* **Determine if this is an initial or follow-up visit for this problem.**

If this is the child's first visit for this episode of an illness or problem, then this is an *initial* visit.

If the child was seen a few days ago for the same illness, this is a *follow-up* visit.

A follow-up visit has a different purpose than an initial visit. During a follow-up visit, the health worker finds out if the treatment he gave during the initial visit has helped the child. If the child is not improving or is getting worse after a few days, the health worker refers the child to a hospital or changes the child's treatment.

How you find out if this is an initial or follow-up visit depends on how your clinic registers patients and identifies the reason for their visit. Some clinics give mothers follow-up slips that tell them when to return. In other clinics the health

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