



Mother and Child Health Handbook



Name-Surname of Child _____

**Please keep
this handbook safe**

**Please bring this handbook with you every time you receive a service
at the government and private hospitals.**

This handbook can be used as a reference for obtaining your baby's Birth Registration Certificate,
and adding your child's name into the household record.

Ministry of Public Health 2558 (2015)

Good Practice of Mother for Bringing up a Healthy Child

1. Having children at the ages between 20-35 years.
2. Spacing between each child for at least 2 years.
3. Together with the husband, having ANC visit soonest before 12 weeks of gestational age, following every appointment of ANC visits, and having the delivery by medical and health personnel.
4. Receiving completed doses of T.T.vaccine. Having self-practice during the pregnancy.
5. Delivery, and postpartum periods as recommended in MCH handbook.
6. The child's birth-weight is 2,500 grams or more.
7. Having the baby suck breastmilk instantly after birth with exclusive breastfeeding for at least 6 months, continuing breastfeeding for at least 24 months along with other food for appropriate ages.
8. Bringing up a healthy child without malnutrition and obesity.
9. Promoting the child's age-appropriate development as recommended in MCH handbook.
10. Bringing the child to receive vaccinations on appointments.

Mother and Child Health Handbook

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1

ID

Identification Number
 (pregnant woman)
 Identification Number (Child).....
 Issued at.....
 Surname of pregnant woman.....
 Identification Number ----
 Occupation..... Religion.....
 Education (Highest educational attainment).....
 Telephone number.....
 Surname of the husband.....
 Identification Number ----
 Occupation..... Religion.....
 Education (Highest educational attainment).....
 Telephone number.....
 Post address No..... Moo.....Name of village.....
Street.....Sub-district.....
 Province.....Zip Code
 Surname of the child..... Blood group.....
 Date of birth.....Month..... Year 20..... Time of delivery..... hrs.
 Identification Number ----

Child's
Photograph

If you pick up or finds this handbook, please return it to the above address.

Introduction to the Use of MCH Handbook

This MCH handbook is a personal health record for the mother during pregnancy, intra-partum, and post-partum periods, and for the child since birth until 6 years of age.

Advantages

- ♥ A source of knowledge and health record of mother and child since pregnancy up until the child is 6 years old.
- ♥ Helping the father and mother to take appropriate care for their child since birth up until 6 years olds.
- ♥ Providing an evidence for notification of birth and obtaining a birth certificate by using the T.R.1/1 form signed by the birth attendant presented in this handbook.

Instructions

- ♥ Read through and follow all the contents in this handbook.
- ♥ Bring along this book whenever you receive services at any health facilities.
- ♥ Record information by yourself and have your husband record information on the pages as identified.
- ♥ When your child attends the school, hand over this book to the teacher for continuous care of the child's health.
- ♥ If the book is torn or lost, obtain the new one from health personnel.



If you have any doubts or questions about this handbook, please ask the health personnel.



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PART 1: PREGNANCY

Health History of Pregnant Woman and Family

(recorded by pregnant woman)

Having been married for.....yrs. Use.....as a contraceptive method for....years/.....months.

Most recently stop using contraception before pregnancy for....yrs./.....months.

Pregnancy History

Pregnancy	D/M/Y delivery/ abortion	Gestational age (wks)	Delivery/ Abortion	Method of delivery/ abortion	Birth- weight	Sex	Place of delivery/ abortion	Compli- cations	Current Status of infant
1									
2									
3									
4									
5									
6									

History of Illnesses

- Diabetes Hypertension Heart Disease Thyroid
 Anemia Thalassemia Others.....

History of surgeriesin the year.....at.....Hospital
in the year.....at.....Hospital

History of drug allergy Name of the drug.....Symptom.....
 Name of the drug.....Symptom.....

History of illnesses and pregnancies of family members

- Seizure Diabetes Hypertension Congenital anomaly
 Multiple pregnancy Mental retardation Others.....

History of menstruation cycle Regular/Irregular menstruation.....and at every.....days

Risk Assessment Criteria for
Pregnant Woman at the 1st ANC Visit

(assessed by health personnel)

Item	Criteria for Assessment	No	Yes
	Past History		
1.	Stillbirth or neonatal death (first 1 month)		
2.	3 consecutive abortions		
3.	Having baby with birth-weight < 2,500 g.		
4.	Having baby with birth-weight > 4,000 g.		
5.	Hospitalized for hypertension treatment during pregnancy or toxemia of pregnancy		
6.	Undergone surgery of reproductive system organ such as myoma, mypmecomy, cervical cerclage, etc.		
	Current History		
7.	Multifetal pregnancy		
8.	Age < 17 years (up to EDC)		
9.	Age > 35 years (up to EDC)		
10.	Rh Negative		
11.	Vaginal bleeding		
12.	Pelvic myoma		
13.	Diastolic pressure ≥ 90 mmHg		
14.	Diabetes		
15.	Kidney disease		
16.	Heart disease		
17.	History of substance use (tobacco, alcohol and drugs)		
18.	Other diseases of internal medicine such as anemia, thyroid, SLE, etc. (please specify).....		

If any of the responses fall into "Yes", the new approach of pregnancy care is not applicable to the pregnant woman and special care and/or additional assessment should be employed.

Assessor.....Date.....

History of Current Pregnancy

(recorded by health personnel)

Pregnancy #.....Last menstrual period.....Expected due date.....
Weight before pregnancy.....kgs. Height.....cms. BMI before pregnancy.....
Number of C/S.....Number of living children.....Age of the last child.....yrs.....months

Laboratory Test

- STIs (VDRL) 1st time Date..... Result.....
2nd time Date..... Result.....
- Blood test for HBsAg 1st time Date..... Result.....
- Blood test for Hematocrit 1st time Date..... Result.....
2nd time Date..... Result.....
- Screening for Thalassemia (Wife) Date.....
Result OF.....DCIP.....MCV.....
(Husband) Date.....
Result OF.....DCIP.....MCV.....
- Blood group and Hemoglobin type (Wife) Blood group.....Rh.....Hemoglobin type....
(Husband) Blood group.....Rh.....Hemoglobin type....
- Other examination results.....
- Couple counseling Pre-blood test Date.....
Post-blood test Date.....
- Participation in parental school activities 1st time at gestational age.....months
2nd time at gestational age.....months

Tetanus Toxoid Vaccination

(Recorded by health personnel)

Received vaccination before pregnancy.....times.

Date of most recent vaccination.....

Vaccination is not given for this pregnancy as the 3rd dose was given no more than 10 years or with previous tetanus vaccinations for 5 times.

1st Dose, date.....

2nd Dose, date.....

Booster Dose, date.....

Stories and tales promote your child's intelligence with the sense of morality.



Record of Pregnancy

(recorded by health personnel)

Result of U/S exam, day.....

BPD.....FL.....

Fetal position.....Gestational age.....

Date of Exam	Weight (Kg.)	Urine Exam (Bacteria/ Protein/Sugar)	Blood Pressure (mm.Hg.)	Size of Uterus (cm.)	Fetal position/presentation	Fetal heart sound	Fetal movement

Diabetes screening.....

.....

Physical Examination

Corrected EDC.....

By LMP PV U/S Ut Size

GA.....wks Sign.....Date.....

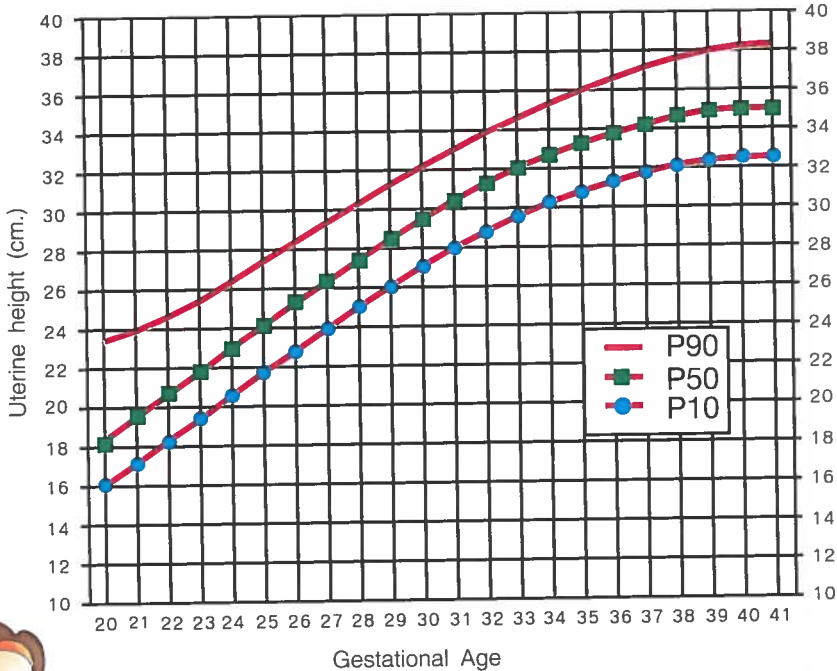
(Recorded by health personnel)

Client Name	Gestational age (wks.)	General physical exam and risks assessment	Diagnosis and Treatment	Appointment	Officer Place

Other special exam.....

Uterine Height Graph
 (recorded by health personnel)

Figure 4 : Uterine height values by weeks of gestation



Oral Health Exam
 (recorded by health personnel)

Record of oral health exam at ANC visit	Record of oral health service at prenatal
<ul style="list-style-type: none"> • Tooth decay <input type="checkbox"/> Yes (number....) <input type="checkbox"/> No • Gingivitis <input type="checkbox"/> Yes <input type="checkbox"/> No • Calculus <input type="checkbox"/> Yes <input type="checkbox"/> No 	<ul style="list-style-type: none"> <input type="checkbox"/> Teaching on oral germ control <input type="checkbox"/> Number of filling teeth..... <input type="checkbox"/> Number of removing teeth <input type="checkbox"/> Scaling
Examiner	Attendant
Date of Exam/...../.....	Date of Exam...../...../.....

Talk to the baby in your womb everyday.

Fetal Movement Count

(Recorded by pregnant woman)

- Counting fetal movement is to prevent fetal death (possibly occurs especially in the mothers with complications such as diabetes, hypertension, toxemia of pregnancy) approaching or beyond the due date of delivery.
- Begin to observe and count the frequency of fetal movement from 6 months of gestational age up until delivery.
- Observe fetal movement everyday and record at least 3 times a day.
- Observe fetal movement when you are free from work such as after a meal, before bedtime, or getting up in the morning, etc.
- Fetal movement is when you feel your baby moves in your abdomen, if you only feel abdominal tense or your baby stretches up, it is not considered a fetal movement.
- If you are doubtful, not understand or unable to do so, consult your doctor or nurse immediately.
- During 1 hour of observation, you should feel fetal movement at least 3 times, if not or less than 3 times in 1 hour, see your doctor or nurse promptly for additional exam to check fetal heart rate with modern device.

Month.....

Date	Morning (time)	Daytime (time)	Before bedtime (time)	Date	Morning (time)	Daytime (time)	Before bedtime (time)
1				17			
2				18			
3				19			
4				20			
5				21			
6				22			
7				23			
8				24			
9				25			
10				26			
11				27			
12				28			
13				29			
14				30			
15				31			
16							

Month.....

Date	Morning (time)	Daytime (time)	Before bedtime (time)	Date	Morning (time)	Daytime (time)	Before bedtime (time)
1				17			
2				18			
3				19			
4				20			
5				21			
6				22			
7				23			
8				24			
9				25			
10				26			
11				27			
12				28			
13				29			
14				30			
15				31			
16							

Month.....

Date	Morning (time)	Daytime (time)	Before bedtime (time)	Date	Morning (time)	Daytime (time)	Before bedtime (time)
1				17			
2				18			
3				19			
4				20			
5				21			
6				22			
7				23			
8				24			
9				25			
10				26			
11				27			
12				28			
13				29			
14				30			
15				31			
16							

When your baby moves 1 time, mark / in the grid.

More than 3 /// should be marked in 1 hour of observation.

Record of Fetal Movement Count (continued)

Month.....

Date	Morning (time)	Daytime (time)	Before bedtime (time)	Date	Morning (time)	Daytime (time)	Before bedtime (time)
1				17			
2				18			
3				19			
4				20			
5				21			
6				22			
7				23			
8				24			
9				25			
10				26			
11				27			
12				28			
13				29			
14				30			
15				31			
16							

Abnormal signs during pregnancy to be promptly seen by the doctor or health personnel:

- Headache, blurred vision
- Stomachache, abdominal pain
- Vaginal discharge
- Irritable Bowel Syndrome
- Fever
- Vaginal bleeding
- Fluid from vagina
- Less fetal movement
- Convulsions and coma



Maternal Delivery Record (record by health personnel)

Place of delivery.....by

() Doctor () Nurse

() Others (specify).....

Gestational age.....weeks Mode of delivery.....

Intrapartum complication

Yes (specify) No

Postpartum complication

Yes (specify) No

Record of Postpartum Check-up

Date of exam	Blood Pressure	Level of Uterus	Lochia	Breast and Nipple	Flow of Breast-milk	Hygiene of Umbilical cord	Name of examiner

Postpartum Check-up: Week 1 - 2, at least 1 time

Week 6, at least 1 time

Abnormal signs during postpartum period to be promptly seen by the doctor or health personnel:

- Postpartum hemorrhage, blood clot
- High fever for 2 days
- Lochia with foul smell, turbid, or red color for more than 2 weeks
- Urethritis, obstructed urine, retention of urine
- Perineum pain, edema, or broken wound
- Sore nipples or mastitis

Postpartum check-up, safe motherhood

Record of the Newborn (recorded by health personnel)

Date/Month/Year of birth.....Sex.....Birth-weight.....grams

Length.....cms. Head circumference.....cms.

Apgar Score (1 minute)..... (5 minutes).....

Congenital anomaly Yes (specify).....
 No

Health condition at birth Healthy Abnormal (specify).....

Date of hospital discharge.....Weight at the date of discharge.....

Vitamin K injection Yes No

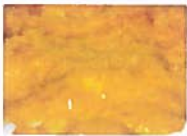
Newborn screening Date.....

- Thyroid deficiency Normal Abnormal

- PKU Normal Abnormal

The newborn should be promptly seen by the doctor or health personnel if displays the following abnormal signs:

- Jaundice
- Raised body temperature, fever, drowsiness
- Rapid breathing over 60 breaths/minute or difficult breathing
- Swelling, redness, leaking pus at the umbilicus, eyes or skin
- Diarrhea and/or vomiting
- Refusal to suck at breast
- No urination within 24 hrs.



Yellow stool is normal in a child.

If your child had white or pale yellow stool as in the picture below, bring your child to see the doctor immediately as he or she may have liver or bile duct disease that needed to be treated before 2 months old.



PART 2: CHILD CARE

Assessment of Risks in Mother and Newborn (prior to hospital discharge) (recorded by health personnel)

Maternal History	Yes	No	Uncertain	Unknown
1. Risk group for 6-month exclusive breastfeeding	<input type="checkbox"/>	<input type="checkbox"/>		
2. History of illness effecting child raising	<input type="checkbox"/>		<input type="checkbox"/>	
3. Less than 17 years of age (mother)	<input type="checkbox"/>	<input type="checkbox"/>		
4. Father or mother or relative raising the child alone	<input type="checkbox"/>	<input type="checkbox"/>		
5. Blood test - HBsAg+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. History of a genetic disease about hearing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. BMI < 18.5 before pregnancy	<input type="checkbox"/>	<input type="checkbox"/>		
8. Malnutrition from 20 weeks of gestation and beyond	<input type="checkbox"/>	<input type="checkbox"/>		
9. Other risk conditions				

Additional details

- Item 1.** Risk group for 6-month exclusive breastfeeding refers to the mothers with abnormal nipples/working outside the home.
- Item 2.** History of illness effecting child raising refers to requirement of regular medication or mental illness.
- Item 9.** Other risk conditions such as undesirable pregnancy, tobacco, alcohol, and substance use, etc.

Child History	Yes	No	Uncertain	Unknown
1. Premature birth (gestational age < 37 weeks)	<input type="checkbox"/>	<input type="checkbox"/>		
2. Birth-weight < 2,500 grams.	<input type="checkbox"/>	<input type="checkbox"/>		
3. Hypoglycemia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Hyperbilirubinemia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Birth Asphyxia at 5 mins \leq 4 and with complication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Sepsis	<input type="checkbox"/>	<input type="checkbox"/>		
7. Convulsion, Meningitis	<input type="checkbox"/>	<input type="checkbox"/>		
8. Difficulties in suckling-swallowing, poor suckling	<input type="checkbox"/>	<input type="checkbox"/>		
9. Down Syndrome	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Congenital Anomaly (as determined by the doctor)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Anemia Central Hct < 40% (at < 7 days of age)	<input type="checkbox"/>	<input type="checkbox"/>		
12. Others (specify).....	<input type="checkbox"/>	<input type="checkbox"/>		
Family history	Yes	No	Uncertain	Unknown
- History of genetic diseases, hearing, mental retardation in the family	<input type="checkbox"/>	<input type="checkbox"/>		

Remarks: If with more than 1 risk, indicating the high risk case, make an appointment to see the doctor at 1 month old.
If none of risks, make an appointment at 2 months old at well-baby clinic.

Oral Health Record for Children Aged 6 Months-5 Years (recorded by health personnel)

Age	6 months	9 months	1 year	1 1/2 years	2 years	2 1/2 years	3 years	4 years	5 years
D/M/Y of									
Check up									
Having sweetened milk									
Using bottle feeding									
Having sweet time/day									
Brushing teeth everyday by parents									
Using fluoride toothpaste									
Having plaque									
Initial stage of tooth decay									
Having tooth cavities (number)									
Advice tooth treatment									
Attendant									

Source: Bureau of Dental Health, Department of Health



Child Development at 1 Month Old (± 7 Days)

(recorded by parents or caregiver)

	Yes	No
■ Child development		
Stares at faces	<input type="checkbox"/>	<input type="checkbox"/>
Follows objects with eyes along the body midline	<input type="checkbox"/>	<input type="checkbox"/>
Makes sound (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Lifts head (ask)	<input type="checkbox"/>	<input type="checkbox"/>
■ Food and nutrition		
Exclusive breast-milk	<input type="checkbox"/>	<input type="checkbox"/>
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if the child tends to exhibit poor development or any of the following signs.

- At 3 months, no eye contact, no smiling back, no head lifting when lying on stomach
- Red or inflamed umbilicus
- Self-rolling over before 3 months, may be due to tight muscle

Start having your breastmilk pressed and keep in the fridge, when your child is 1 month old.

Service Activities for Children at 1 Month Old (± 7 Days)

(Recorded by health personnel)

- Date of examination.....
- Weight..... kg. Length..... cm. Head circumference.....cm.
- Nutritional status
-
- Check physical appearance, eyes, ears, mouth, heart, abdomen, sexual organ, legs, arms, anterior fontanelle, posterior fontanelle (check thoroughly), if not possible to complete all, check for the heart sound
- Additional check with the child's development in case with doubts
-
- Problems with child raising and health (ask from the caregiver) include:
-
- Parental school arrangement Yes No
- Advices given:
- How to use MCH handbook
 - Exclusive breastfeeding
 - Food for mothers
 - Promoting child development in subsequent ages
 - Accident prevention.....
 - Refrain the child from wearing gloves, sucking finger, using pacifier, traditional medicine, throat paint.
 - Others
- Referral in case of abnormalities and for care and treatment
- No Yes, specify.....

Do not use bottle milk supplementation with an idea that you have less breastmilk because our body can produce sufficient milk supply for the baby. Supplemented bottle milk will lead to amount of breastmilk and eventually any the milk.

Child Development at 2 Months Old (± 7 Days)

(recorded by parents or caregiver)

	Yes	No
■ Child development		
Social smile (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Follows through with eyes along the body midline	<input type="checkbox"/>	<input type="checkbox"/>
Babbles (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Lifts the head 45 degrees	<input type="checkbox"/>	<input type="checkbox"/>
■ Food and nutrition		
Exclusive breast-milk	<input type="checkbox"/>	<input type="checkbox"/>
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if the child tends to exhibit poor development or any of the following signs.

- At 3 months, no eye contact, no smiling back, no head lifting in prone position
- Red or inflamed umbilicus
- Self-rolling over before 3 months, may be due to tight muscles

Teach the caregiver to feed the baby with your breastmilk by drinking from the glass.

Service Activities for Children at 2 Months Old (± 7 Days)

(Recorded by health personnel)

Date of examination.....

Weight..... kg. Length..... cm. Head circumference.....cm.

Nutritional status

.....

Check physical appearance, eyes, ears, mouth, heart, abdomen, sexual organ, legs, arms, anterior fontanelle, posterior fontanelle (check thoroughly), if not possible to complete all, check for the heart sound

.....

Additional check with the child's development in case with doubts

.....

Problems with child raising and health (ask from the caregiver) include:

.....

Parental school arrangement Yes No

Advices given:

- How to use MCH handbook
- Exclusive breastfeeding
- Food for mothers
- Promoting child development in subsequent ages
- Accident prevention suckling as drowning, scalding
- Refrain the child from wearing mittens, sucking finger, using pacifier, traditional medicine, throat paint
- Others

Referral in case of abnormalities and for care and treatment

No Yes, specify.....

Do not use false nipple, or let the child suck finger as he or she will stick to it, and it is hard to give up in the future, and your child may develop malocclusion and flatulence.

Child Development at 6 Months Old (± 15 Days)
(recorded by parents or caregiver)

	Yes	No
■ Child development		
Gets things to feed him/herself (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Follows falling objects with eyes	<input type="checkbox"/>	<input type="checkbox"/>
Turns toward the calling voice	<input type="checkbox"/>	<input type="checkbox"/>
Holds head steady, not flop	<input type="checkbox"/>	<input type="checkbox"/>
■ Food and nutrition	<input type="checkbox"/>	<input type="checkbox"/>
Breast-milk		
Other food include.....		
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if the child tends to exhibit poor development or the child displays any of the following signs.

- At 6 months, does not follow objects with eyes, does not turn toward voice, does not pay attention to the one who plays with, does not roll over either front to back or back to front.

Do not use baby walker as it induces the child's delayed walking and easily falls from a height.

Service Activities for Children at 6 Months Old (± 15 Days)
(Recorded by health personnel)

Date of examination.....

Weight..... kg. Length..... cm. Head circumference.....cm.

Nutritional status

.....

The values of Hematocrit or Hemoglobin.....
(Test performed when the child was.....months)

Check physical appearance, eyes, ears, mouth, heart, lung, abdomen, sexual organ, legs, arms, skin
If time is not allowed, check for cross-eyes, tight muscles, and hearing.

.....

Additional check with the child's development in case with doubts

.....

Problems with child raising and health (ask from the caregiver) include:

.....

Giving iron supplementation Yes No

Parental school arrangement Yes No

Advices given:

- How to use MCH handbook
- Breast-milk and age appropriate food
- Promoting child development in subsequent ages
- Reading pictorial books, playing with child
- Accident prevention such as drowning, electric shock, scalding, aspiration
- No use of baby-walker
- Oral health care
- Try to avoid feeding the baby after bedtime during 8.00 pm.-6.00 am.
and never put the baby to bed with breastfeeding

Referral in case of abnormalities and for care and treatment

No Yes, specify

Watch out for the child's domestic drowning, turn over water bucket and basin after use.

Child Development at 9 Months Old (± 15 Days)

(recorded by parents or caregiver)

	Yes	No
■ Child development		
Waves hands to say bye bye (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Holds a cube in each hand	<input type="checkbox"/>	<input type="checkbox"/>
Copies talking voices (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Sits up (ask)	<input type="checkbox"/>	<input type="checkbox"/>
■ Food and nutrition		
Breast-milk	<input type="checkbox"/>	<input type="checkbox"/>
Other food include.....		
Number of meals per day.....meals		
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if the child tends to exhibit poor development or the child displays any of the following signs.

- Stretched and tense legs when creeping and crawling or sitting in W position.
- At 9-10 months, does not turn toward the actual noise.



Do not use baby walker as it frequently causes accidents and the child may walk on tiptoe.

Service Activities for Children at 9 Months Old (± 15 Days)

(Recorded by health personnel)

Date of examination.....

Weight..... kg. Length..... cm. Head circumference.....cm.

Nutritional status

.....

Physical check-up (If with doubts, check thoroughly)

.....

Dental check-up

.....

Additional check with the child's development in case of doubts

.....

Problems with child raising and health (ask from the caregiver) include:

.....

.....

Giving iron supplementation Yes No

Advices given:

How to use MCH handbook

Breast-milk and 2 meals of food for ages

Promoting child development in subsequent ages

Reading pictorial books and playing with child

Accident prevention such as drowning, electric shock, scalding, aspiration

Dental health care

No milk feeding after bedtime

No use of baby-walker

No watching TV, CD, DVD until 2 years old

Referral in case of abnormalities and for care and treatment

No Yes, specify.....

Never let the child play with small toy less than 2 cms. as the child may put it into the mouth and be choked by it.

Child Development at 12 Months Old (± 15 Days)

(recorded by parents or caregiver)

	Yes	No
■ Child development		
Expresses the need (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Puts a cube in a container	<input type="checkbox"/>	<input type="checkbox"/>
Says meaningful words Pa-Ma (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Says 1 meaningful word (ask)	<input type="checkbox"/>	<input type="checkbox"/>
■ Food and nutrition		
Breast-milk	<input type="checkbox"/>	<input type="checkbox"/>
Other food include.....		
Eat snack food	<input type="checkbox"/> Yes	<input type="checkbox"/> No
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if the child tends to exhibit poor development or the child displays any of the following signs.

- At 1 year, unable to walk holding something, unable to feed him/herself with fingers, unable to imitate posture or voice, unable to say a single word.

Telling stories for your child everyday or at least 3 times a week.

Service Activities for Children at 12 Months Old (± 15 Days)

(Recorded by health personnel)

Date of examination.....

Weight..... kg. Length..... cm. Head circumference.....cm.

Nutritional status

.....

Check physical appearance, eyes, ears, mouth, heart, lung, abdomen, legs, arms, skin (if not possible to complete all, check the heart, abdomen, interior fontanelle)

.....

Oral and dental check-up (advice given by dental officer)

.....

Additional check with the child's development in case with doubts

.....

Autism screening Normal Suspicious

Problems with child raising and health (ask form the caregiver) include:

.....

Giving iron supplementation Yes No

Parental school arrangement Yes No

Advices given:

How to use MCH handbook

Giving the child 3 meals, continuing breastfeeding, no milk feeding after going to bed

Promoting child development in subsequent ages

Reading pictorial books and playing with child

Accident prevention such as drowning, electric shock, scalding, aspiration

No watching TV, CD, DVD until 2 years old

Effects of television on the child

Referral in case of abnormalities and for care and treatment

No Yes, specify.....

Initiate the potty training and give up disposable diapers.

Child Development at 18 Months Old (± 1 Month)

(recorded by parents or caregiver)

	Yes	No
■ Child development		
Uses spoon to feed him/herself	<input type="checkbox"/>	<input type="checkbox"/>
Follows objects with eyes along the body midline	<input type="checkbox"/>	<input type="checkbox"/>
Makes sound (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Lifts the head (ask)	<input type="checkbox"/>	<input type="checkbox"/>
■ Food and nutrition		
Exclusive breast-milk	<input type="checkbox"/>	<input type="checkbox"/>
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if your 18-month-old child tends to exhibit poor development or cannot follow simple instructions such as saying hello and walking toward the mother.

Raise and play with your child on gender suitability. The father should participate in raising the child especially the son.

Service Activities for Children at 18 Months Old (± 1 Month)

(Recorded by health personnel)

Date of examination.....

Weight..... kg. Length..... cm. Head circumference.....cm.

Nutritional status
.....

Physical check-up especially the anterior fontanelle (if with doubts, check thoroughly)
.....

Additional check with the child's development in case with doubts
.....

Problems with child raising and health problems (ask from the caregiver) include:

Giving iron supplementation Yes No

Advices given:

How to use MCH handbook

Giving the child 3 meals, continuing breastfeeding, no milk feeding after going to bed, allowing the child to self-feed from a plate

Promoting child development in subsequent ages

Reading pictorial books and playing with child

Accident prevention such as drowning, electric shock, scalding, aspiration, and falling over the height

Caring for the child's teeth twice a day in the morning and before bedtime

Toilet training, give up disposable diapers

No watching TV/CD/DVD until the child is 2 years old

Effects of television on the child

Referral in case of abnormalities and for care and treatment

No Yes, specify.....

Train the child to help with easy household chores such as collecting toys, sweeping the floor.

Child Development at 2 Years Old (± 1 Month)

(recorded by parents or caregiver)

	Yes	No
■ Child development		
Removes clothes (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Stacks 4 cubes	<input type="checkbox"/>	<input type="checkbox"/>
Points at 6 parts of body organs	<input type="checkbox"/>	<input type="checkbox"/>
Says 2 words together (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Throws a ball		
■ Food and nutrition		
Food intake.....		
Number of meal per day.....meals		
Eating crunchy/crispy snacks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Drinking soft drinks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if your 2-year-old child tends to exhibit poor development or cannot speak 2 meaningful words together.

Teach the child about morality such as thoughtfulness, making merit, giving alms to monks, praying to the Lord Buddha, telling stories, teaching moral and ethics.

Service Activities for Children at 2 Years Old (± 1 Month)

(Recorded by health personnel)

Date of examination.....

Weight..... kg. Length..... cm. Head circumference.....cm.

Nutritional status
.....

Physical check-up (if with doubts, check thoroughly)
.....

Additional check with the child's development in case with doubts
.....

Problems with child raising, health, and behavioral problems
.....

Giving iron supplementation Yes No

Parental school arrangement Yes No

Advices given:

How to use MCH handbook

Giving the child 3 meals, allowing the child to self-feed, and drinking milk from the glass or box about 2-3 times/day

Promoting child development in subsequent ages

Reading pictorial books and playing with child

Accident prevention such as electric shock, scalding, aspiration by food particles, falling from the stairs

Allowing the child to watch TV no more than 1 hour/day

Toilet training, give up disposable diapers

Participation in religious activities

Referral in case of abnormalities and for care and treatment

No Yes, specify.....

Do not allow your child to play computer games, and parents do not play them in presence of the child.

Child Development at 3 Years Old (± 1 Month)

(record by parents or caregiver)

	Yes	No
■ Child development		
Puts on T-shirt by him/herself (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Stacks 8 cubes	<input type="checkbox"/>	<input type="checkbox"/>
Knows at least 2 adjectives	<input type="checkbox"/>	<input type="checkbox"/>
Stands on one leg for 1 second	<input type="checkbox"/>	<input type="checkbox"/>
Imitates in drawing a vertical line	<input type="checkbox"/>	<input type="checkbox"/>
■ Food and nutrition		
Food intake.....		
Number of meal per day.....meals		
Eating crunchy/crispy snacks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Drinking soft drinks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if your child tends to exhibit poor development or delayed development for age.

- Cannot follow simple instruction.

Parents play good role model without drinking alcohol, smoking, gambling, insulting, and using domestic violence.

Service Activities for Children at 3 Years Old (±1 Month)

(Recorded by health personnel)

Date of examination.....

- Weight..... kg. Length..... cm. Head circumference.....cm.
- Nutritional status
.....
- Physical check-up (if with doubts, check thoroughly)
.....
- Additional check with the child's development in case with doubts
.....
- Autism screening result
.....
- Emotional intelligence screening result
.....
- Problems with child raising, health, and behavioral problems
- Parental school arrangement Yes No
- Advices given:
 - How to use MCH handbook
 - Giving the child 3 meals, no crispy and crunchy snacks and soda drinks.
 - Promoting child development in subsequent ages
 - Reading pictorial books and playing with child
 - Teaching the child to help him/herself
 - Teaching the child to collect the toys every time after playing them
 - Participation in religious activities
 - Accident prevention such as electric shock, scalding, aspiration of food particles, falling from the stairs
 - Allowing the child to watch TV no more than 1 hour/day
- Referral in case of abnormalities and for care and treatment
 - No Yes, specify.....

Do not allow your child to eat candies, soft drinks, crispy/crunchy snacks as they are less nutritious and cause tooth decay, including feeling full and refusing to eat.

Child Development at 3 Years Old (\pm 1 Month)

(record by parents or caregiver)

	Yes	No
■ Child development		
Puts on T-shirt by him/herself (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Stacks 8 cubes	<input type="checkbox"/>	<input type="checkbox"/>
Knows at least 2 adjectives	<input type="checkbox"/>	<input type="checkbox"/>
Stands on one leg for 1 second	<input type="checkbox"/>	<input type="checkbox"/>
Imitates in drawing a vertical line	<input type="checkbox"/>	<input type="checkbox"/>
■ Food and nutrition		
Food intake.....		
Number of meal per day.....meals		
Eating crunchy/crispy snacks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Drinking soft drinks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if your child tends to exhibit poor development or delayed development for age.

- Cannot follow simple instruction.

Parents play good role model without drinking alcohol, smoking, gambling, insulting, and using domestic violence.

Service Activities for Children at 3 Years Old (\pm 1 Month)

(Recorded by health personnel)

Date of examination.....

<input type="checkbox"/> Weight..... kg.	Length..... cm.	Head circumference.....cm.
<input type="checkbox"/> Nutritional status		
.....		
<input type="checkbox"/> Physical check-up (if with doubts, check thoroughly)		
.....		
<input type="checkbox"/> Additional check with the child's development in case with doubts		
.....		
<input type="checkbox"/> Autism screening result		
.....		
<input type="checkbox"/> Emotional intelligence screening result		
.....		
<input type="checkbox"/> Problems with child raising, health, and behavioral problems		
<input type="checkbox"/> Parental school arrangement	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Advices given:		
<input type="checkbox"/> How to use MCH handbook		
<input type="checkbox"/> Giving the child 3 meals, no crispy and crunchy snacks and soda drinks.		
<input type="checkbox"/> Promoting child development in subsequent ages		
<input type="checkbox"/> Reading pictorial books and playing with child		
<input type="checkbox"/> Teaching the child to help him/herself		
<input type="checkbox"/> Teaching the child to collect the toys every time after playing them		
<input type="checkbox"/> Participation in religious activities		
<input type="checkbox"/> Accident prevention such as electric shock, scalding, aspiration of food particles, falling from the stairs		
<input type="checkbox"/> Allowing the child to watch TV no more than 1 hour/day		
<input type="checkbox"/> Referral in case of abnormalities and for care and treatment		
<input type="checkbox"/> No <input type="checkbox"/> Yes, specify.....		

Do not allow your child to eat candies, soft drinks, crispy/crunchy snacks as they are less nutritious and cause tooth decay, including feeling full and refusing to eat.

Child Development at 4 Years Old (± 1 Month)

(recorded by parents or caregiver)

	Yes	No
■ Child development		
Dresses by him/herself (ask)	<input type="checkbox"/>	<input type="checkbox"/>
Copies a picture	<input type="checkbox"/>	<input type="checkbox"/>
Tells 4 colors	<input type="checkbox"/>	<input type="checkbox"/>
Stands on one leg for 3 seconds	<input type="checkbox"/>	<input type="checkbox"/>
Copies a circle	<input type="checkbox"/>	<input type="checkbox"/>
■ Food and nutrition		
Food intake.....		
Number of meal per day.....meals		
Eating crunchy/crispy snacks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Drinking soft drinks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
■ Record of parents about the child and problems that require counseling		
.....		
.....		
.....		
.....		

Consult the doctor or health personnel if your child exhibits delayed development, nutritional disorder or tends to have poor development.

Train your child to do more things by him/herself such as putting on clothes, scooping rice, putting the dish into the basin, washing his/her dish, and cleaning up the bedroom.

Service Activities for Children at 4 Years Old (± 1 Month)

(Recorded by health personnel)

Date of examination.....

Weight..... kg. Length..... cm. Head circumference.....cm.

Nutritional status
.....

Physical check-up (if with doubts, check thoroughly)
.....

Urine exam

Eye exam

Hearing exam

Check blood pressure

Emotional intelligence screening.....

Additional check with the child's development in case with doubts
.....

Problems with child raising, health and behavioral problems
.....

Parental school arrangement Yes No

Advices given:

How to use MCH handbook

Giving the child 3 meals and 2 boxes of milk per day, no soda drinks and crispy and crunchy snacks

Promoting child development in subsequent ages

Reading pictorial books and playing with child

Accident prevention such as drowning, electric shock, scalding, falling from the heights, domestic toxicants

Allowing the child to watch TV no more than 1 - 2 hours per day.

Effects of television on the child

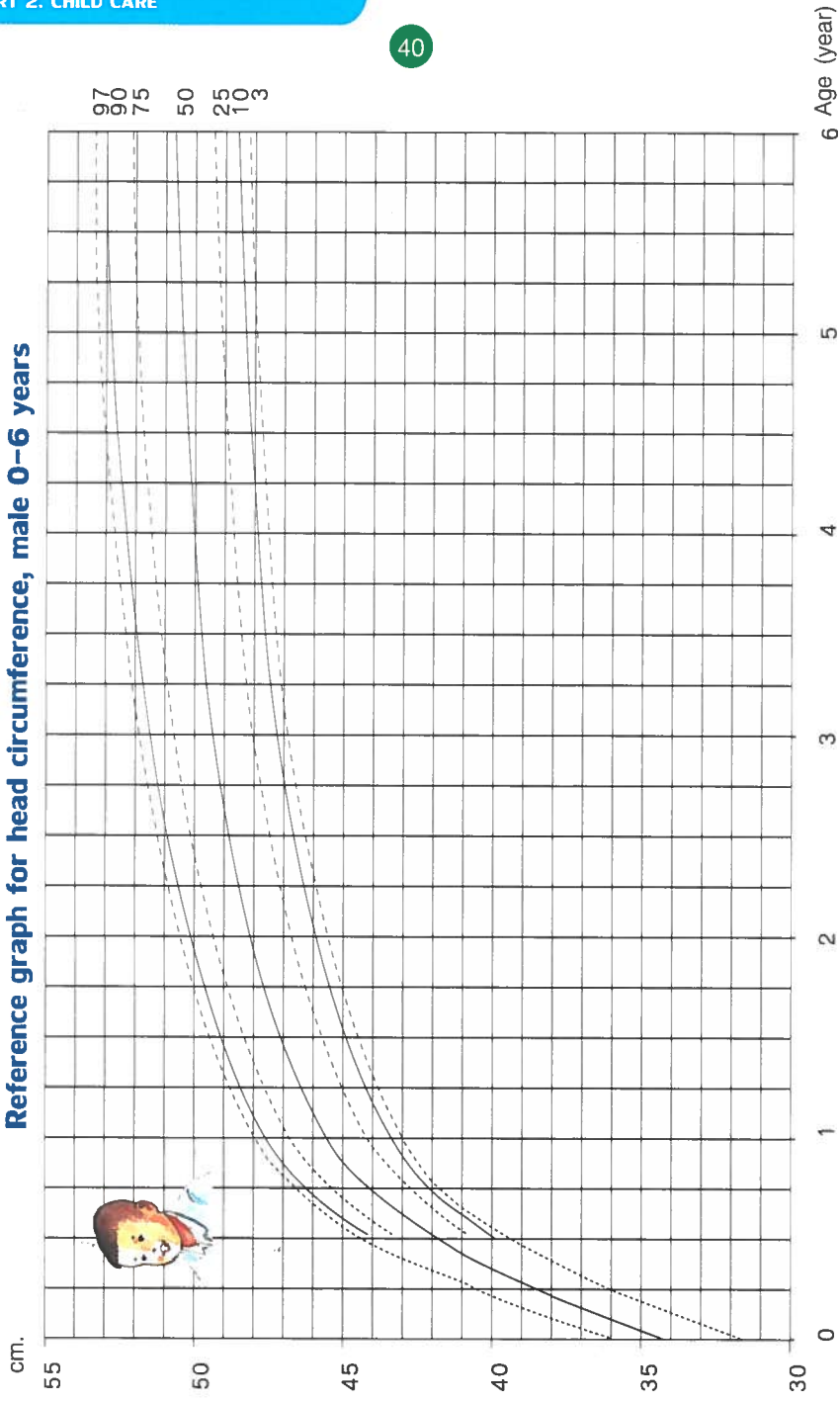
Referral in case of abnormalities and for care and treatment

No Yes, specif.....

Teach your child about disciplines such as eating, reading and doing homework on regular time everyday.

HEAD CIRCUMFERENCE GRAPH (male and female separated)

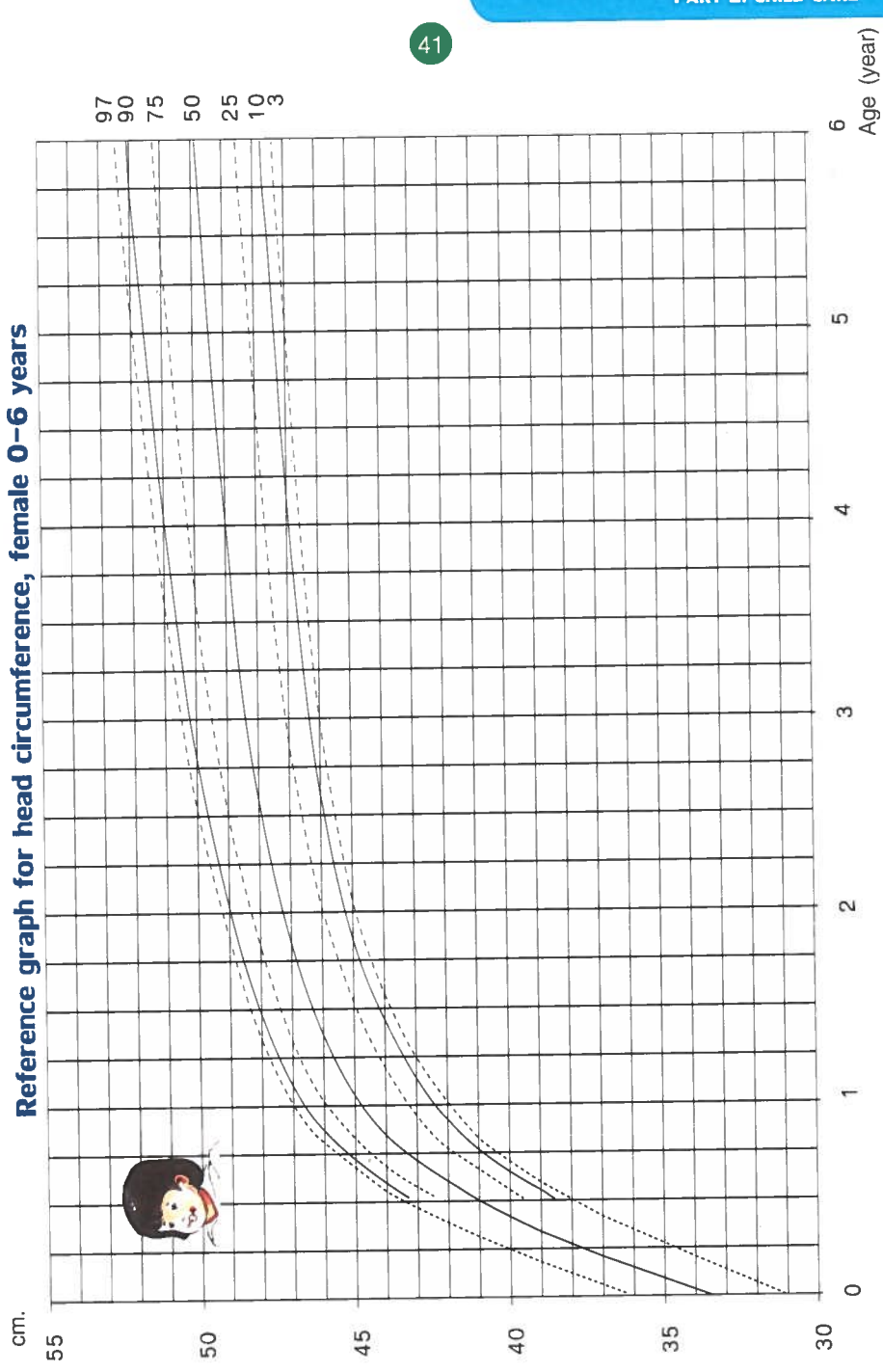
Reference graph for head circumference, male 0–6 years



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HEAD CIRCUMFERENCE GRAPH (male and female separated)

Reference graph for head circumference, female 0–6 years



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Guide to the Use of Child Nutritional Graph (can be recorded by parents or guardian)

Child nutritional graph is used to continuously monitor the change of child's weight and height whether the trends of child's growth follow the standard criteria. The graphs are presented in 3 types:

1. Weight for age graph presents 5 levels of growth status:

- 1) **Under standard weight** refers to having malnutrition.
- 2) **Relatively low weight** refers to risk of having malnutrition, a warning sign, if without appropriate care, underweight for age is likely.
- 3) **Standard weight** refers to well growth. It should be promoted to maintain the weight at this level.
- 4) **Relatively high weight** refers to risk of having over standard weight. It should be check against the weight for height graph.
- 5) **Over standard weight** does not identify whether the child is obese. It needs to check for obesity against the weight for height graph.

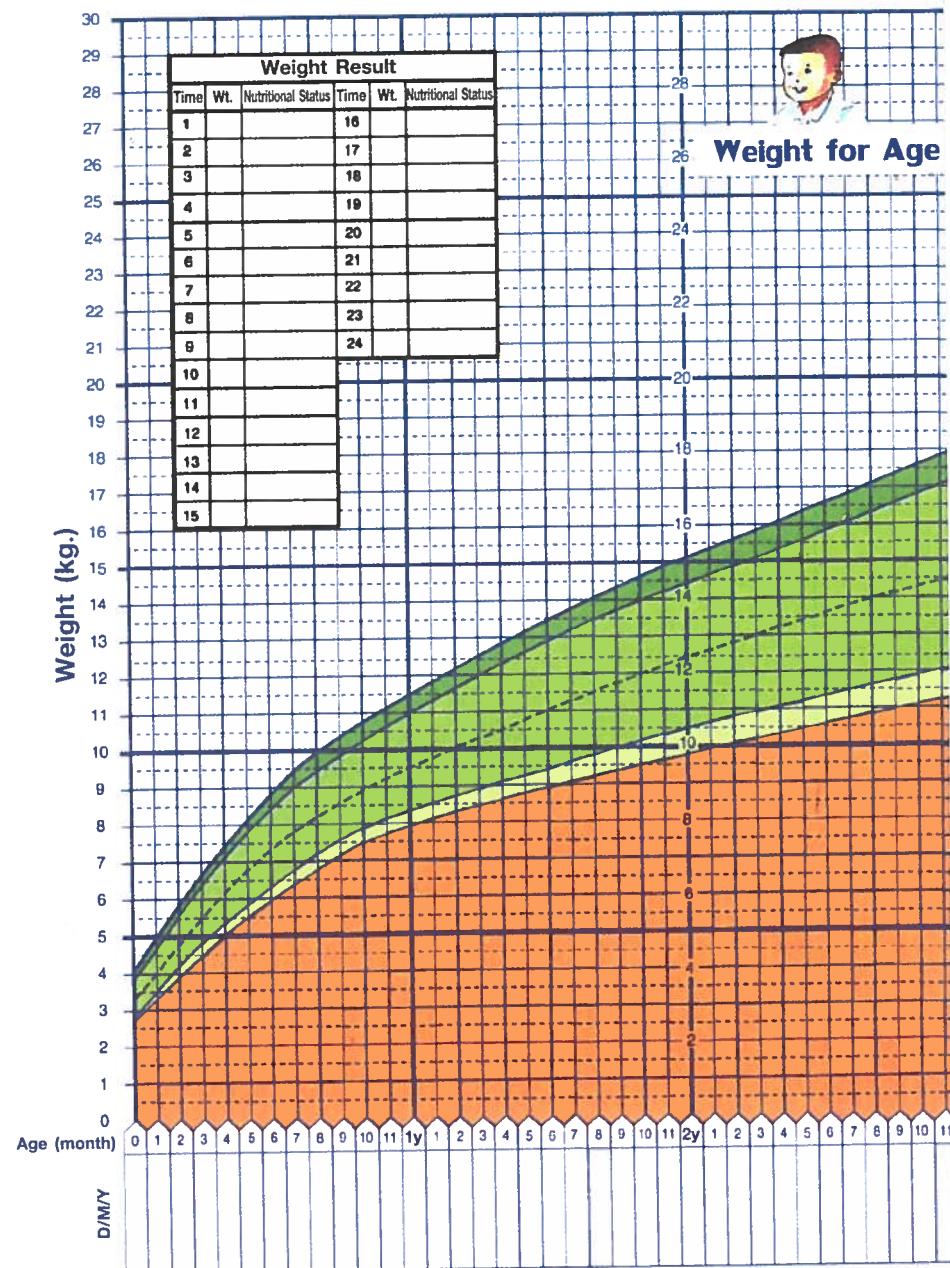
2. Height for age graph presents 5 levels of growth status:

- 1) **Short** refers to having chronic malnutrition, reflecting inadequate food intake for a prolonged period or frequent illnesses, with minor or no increase of height, affecting low intelligence, more frequent illnesses. It requires immediate improvement.
- 2) **Relatively short** refers to risk of having chronic malnutrition, a warning sign, if without appropriate care, the height discontinues and the child is likely to become short.
- 3) **Standard height** refers to well growth, reflecting adequate food intake, so it should be promoted to continue at this level.
- 4) **Relatively tall** refers to very well growth. It should be promoted to maintain at this level.
- 5) **Over standard Height** refers to excellent growth. It should be promoted to continue at this level.

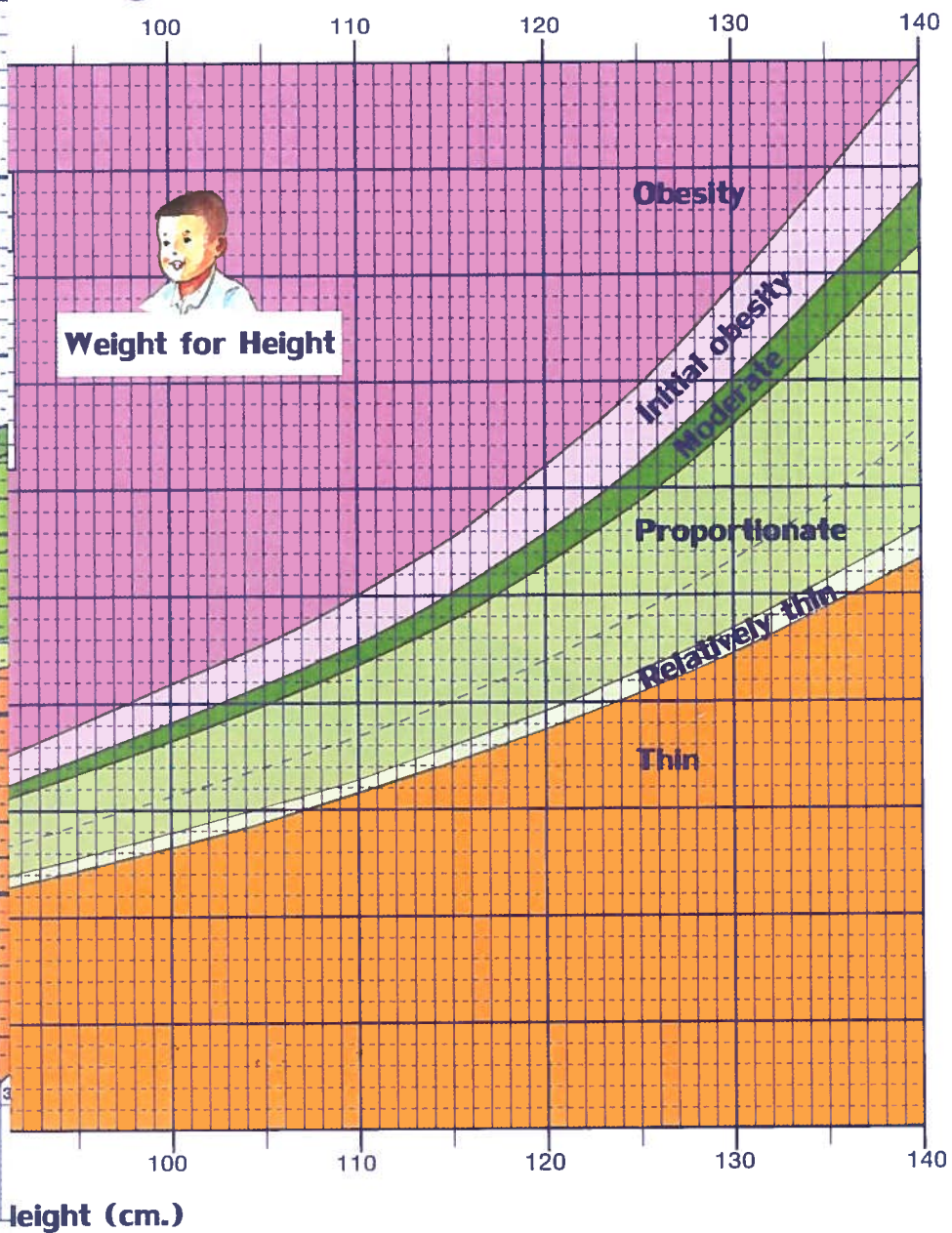
3. Weight for height graph represents 6 levels of growth status:

- 1) **Thin** refers to having short-term malnutrition.
- 2) **Relatively thin** refers to risk of having malnutrition, a warning sign, if without appropriate care, the weight will not increase or decrease to the thin level.
- 3) **Proportionate** refers to well growth, reflecting appropriate weight for height. The child should be promoted to continue at this level of growth.
- 4) **Moderate** refers to risk of having obesity, a warning sign, if without appropriate care, the weight will increase to the level of initial fat.
- 5) **Initial fat** refers to the first degree of obesity. The child is likely to become a fat adult in the future if without weight control.
- 6) **Fat** refers to the second degree of obesity. The child has highly inappropriate weight for height, with risk opportunity to having diabetes, hypertension, hyperlipidemia, bowlegs, sleep apnea, and become even fatter adult in the future if without weight control.

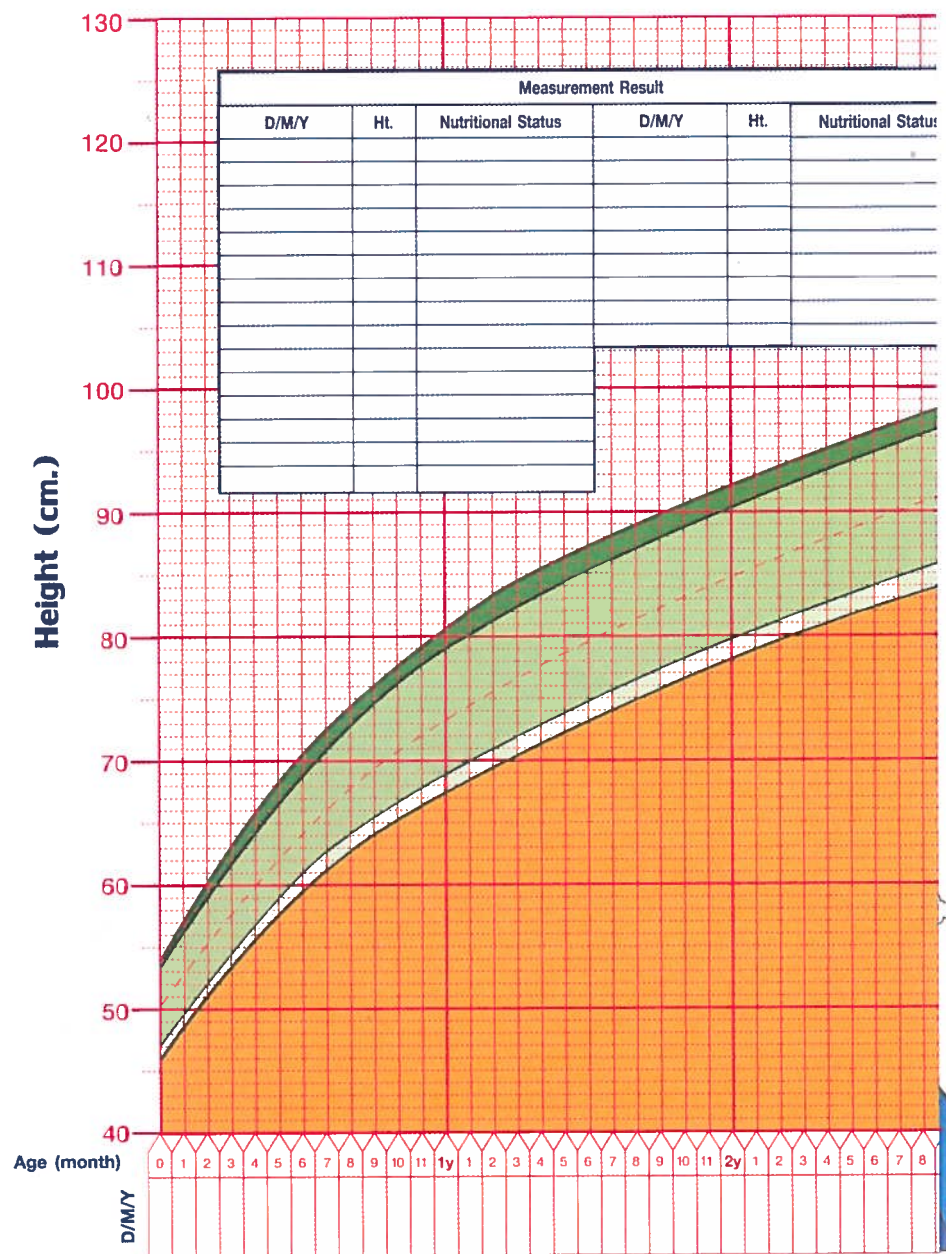
Male's Weight For Age Graph For Parent



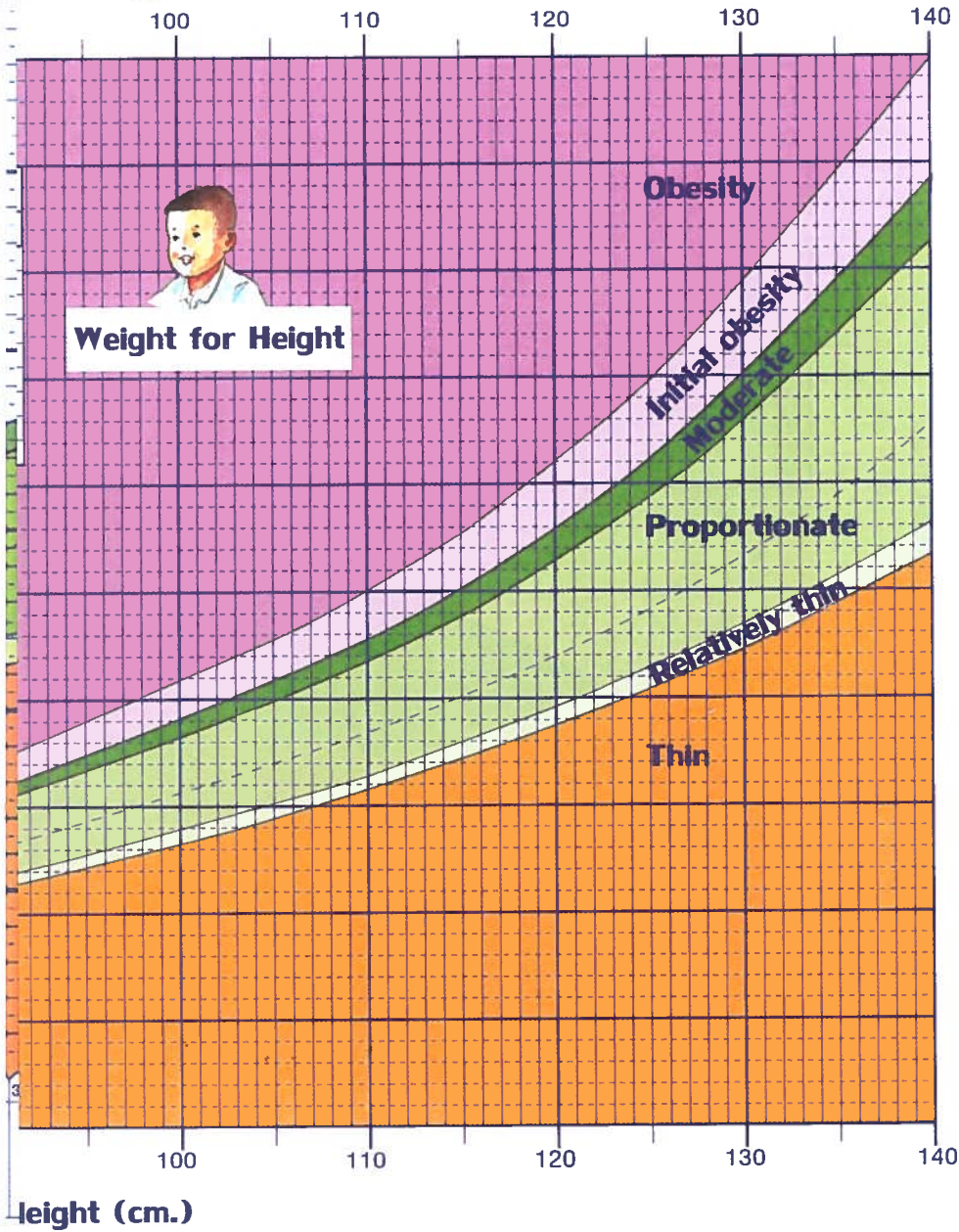
For Height Graph Monitoring The Child's Growth



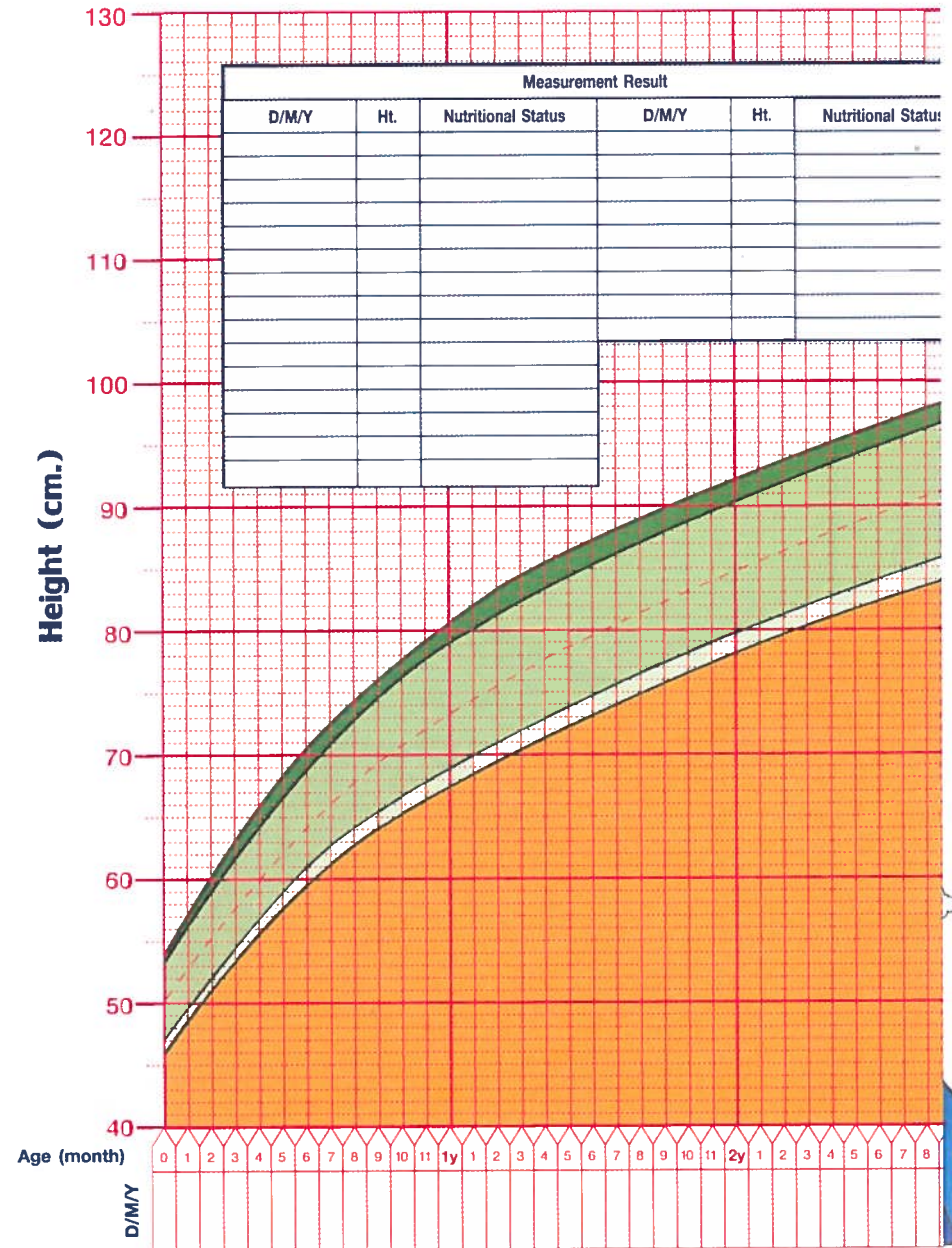
Female's Height For Parents' Use In M



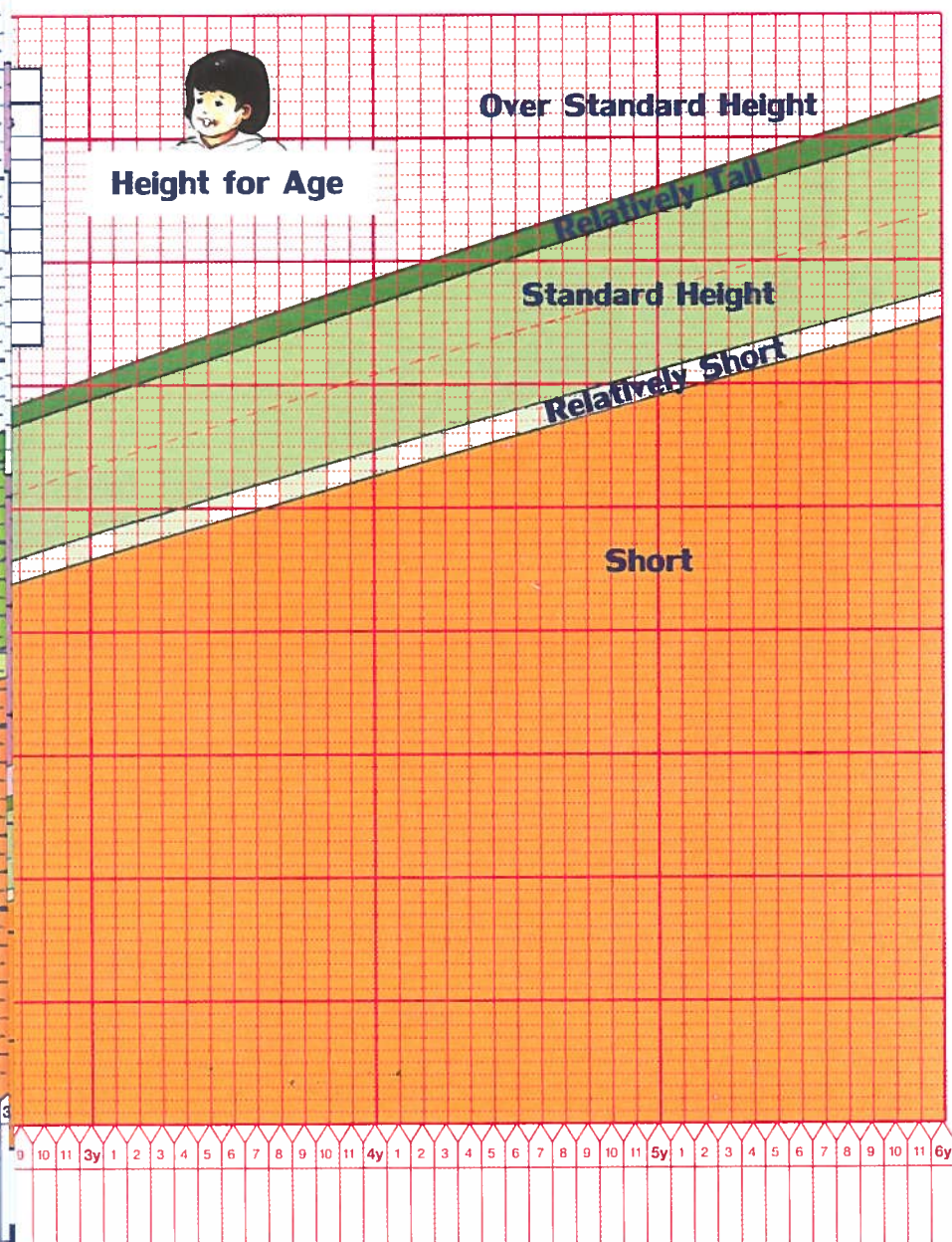
For Height Graph Monitoring The Child's Growth



Female's Height For Parents' Use In M



Height For Age Graph Monitoring The Child's Growth



PART 3 ESSENTIAL KNOWLEDGE FOR SAFE AND QUALITY PREGNANCY

- Discomforts during pregnancy
- Maternal practices during pregnancy
- Minimum weight for pregnant women to give birth to a newborn of 2,500 grams. (VALLOP WEIGHT LOG)
- Self care during pregnancy through pregnancy pathway
- Minimum weight for pregnant women to give birth to a newborn of >2,500 gram.
- Advantage of the nutritional graph
- Nutritional graph for pregnant woman
- Nutrition for pregnant woman: Table for comparison of percentage of standard BMI values (BMI 21 = 100)
- Illustration of food substitute sets for pregnant woman
- Fetal development
- Thalassemia
- Risk opportunity to have a child with Thalassemia
- What is congenital hypothyroidism?
- Prevention of mother-to-child transmission of HIV
- Family planning
- Self-assessment and analysis of stress



Discomforts During Pregnancy

Morning sickness is commonly experienced in early period of pregnancy, with nausea and vomiting in the morning. The symptoms can be improved by mental adjustment, avoiding unfavorable food, eating small meal each time but several times, or having soft food and warm drinks. The symptoms will disappear at 4 months of gestation.

Vaginal discharge will commonly increase during pregnancy. Take a usual bath, except if accompanied with itching and smelling, please see the doctor.

Constipation is found in some pregnant women and can be lessened by drinking more water and eating more vegetables and fruits, if it is not improved, see the doctor.

Frequent urination is caused by the expansion of uterus which places more pressure on the bladder. If experiencing burning pain or obstructed urinating, see the doctor.

Fatigue and drowsiness is common early in pregnancy with feeling tired and sleepy.

Varicose veins usually disappear after delivery. Always change your posture properly, avoid long period of walking or standing, sit with your feet elevated for 15 – 20 minutes every day after walking or working and use legs support hose to provide compression.

Stretch Masks should be applied gently with cream and avoid scratching.

Pigmentation or darkening skin is due to the change of hormone. Try to avoid sunlight. It will fade after delivery.

Heartburn is caused by the stomach acid refluxing into the esophagus, and delayed functioning of digestive system. Consult the doctor for the use of antacid.

Maternal Practice During Pregnancy

1. Have complete 3 main meals a day for breakfast, lunch, and dinner, including 2–3 nutritious light meals such as milk, fruits or less sweeten Thai dessert.
2. Receive completed 2 doses of tetanus toxoid vaccination.
3. Take one tablet of iodine, iron, and folate everyday.
4. See the dentist or have dental check-up by health personnel at least 1 time.
5. If the following signs display, see health personnel immediately.

<input type="radio"/> High fever	<input type="radio"/> Excessive morning sickness
<input type="radio"/> Anxiety or depression	<input type="radio"/> Excessive abdominal pain or distension
<input type="radio"/> Obstructed urination	<input type="radio"/> Vaginal discharge with itching and smelling
<input type="radio"/> Dizziness, fatigue	<input type="radio"/> Swelling dorsum of feet
<input type="radio"/> Less fetal movement	<input type="radio"/> Fluid leaking from the vagina
6. ANC Visit

1st Visit	First ANC visit before 12 weeks of gestation
2nd Visit	At 20 weeks of gestation
3rd Visit	At 26 weeks of gestation
4th Visit	At 32 weeks of gestation
5th Visit	At 38 weeks of gestation
7. Exercise is possible but avoid to become too tired. General household chores are allowed but hard work should be avoided.
8. Seek postnatal visit at 6 weeks.
9. Make yourself at ease and relax during pregnancy for the baby. The father's staying close and attention will help the mother become cheerful.



Table of Minimum Weight for Pregnant Women to Give Birth to a Newborn of 2,500 Grams. (VALLOP WEIGHT LOG)

Objective

To provide surveillance for monitoring the weight of each gestational age of pregnant women so as to give birth to a newborn with no less than 2,500 grams of birth-weight.

Instruction (page 61-62)

The figures in the left and right columns illustrate gestational ages from 12 - 40 weeks.

The figures in the upper row illustrate the heights from 140 - 170 cms.

The figures within the table corresponding to the heights in each row illustrate the weights in kilogram.

How to use the table

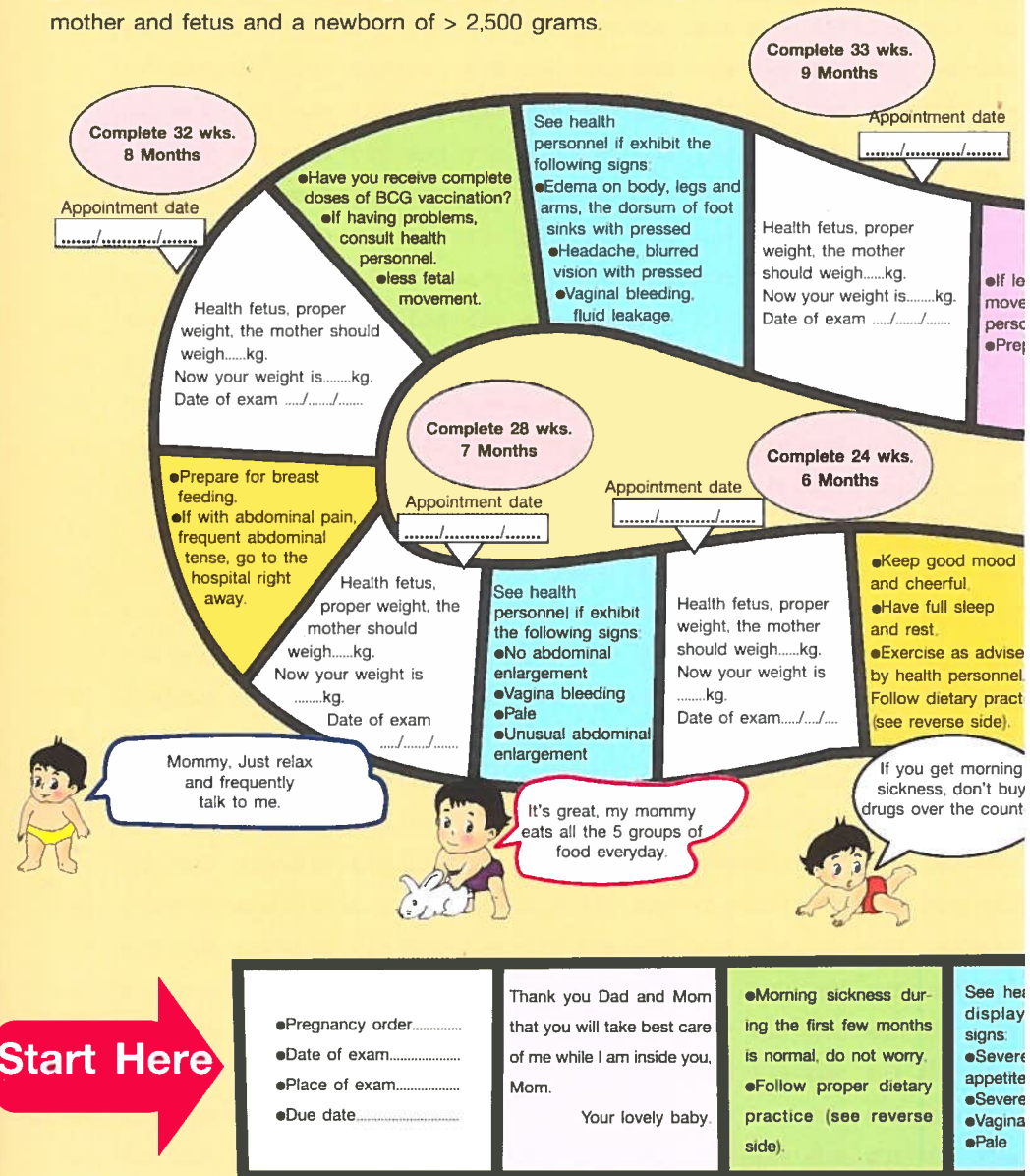
- Place the ruler onto the column corresponding to the height of pregnant woman, then look for the weight in the column to match the gestational age from 12 to 38 weeks, and mark it.
- Record the weight obtained for each gestational age in the **Pregnancy Pathway Chart** in the box "Healthy fetus, proper weight, the mother should weigh.....kg." corresponding to the current gestational age (or approximate) from the first ANC visit up until 38 weeks.
- Compare the actual weight at the check-up date with the weight obtained from the table. If the actual weight equals to or higher than the weight recorded in the Pregnancy Pathway Chart, your baby is likely having the birth-weight 2,500 grams or more.

Your baby is healthy with the birth-weight > 2,500 grams.



Self Care During Pregnancy through Pregnancy Pathway

This pregnancy pathway is used by pregnant women to practice self care during pregnancy to delivery. Following every step in this pathway will help to achieve healthy mother and fetus and a newborn of > 2,500 grams.





Concept and Artwork by Taweesak Sawetserani
Institute for Population and Social Research,
Mahidol University

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Mother's Name-Surname.....
Father's Name-Surname.....
Address No..... Moo..... Name of Village.....
District..... Province.....

Complete 38 wks.

Due Date

Appointment date

Appointment date

ss fetal
ment, see health
nnal right away
pare for delivery.

Health fetus, proper
weight, the mother
should weigh.....kg.
Now your weight is.....kg.
Date of exam...../...../.....

Thank you Mommy
to make me healthy
with birth-weight
more than 2,500
grams.

Happy Birthday my dear
baby. Your name is
.....
weight.....kg.
Length.....cm.
Date of exam...../...../.....

**Your
baby's
Photo**

Mommy, have you
check your teeth?



Appointment date

Complete 20 wks.
5 Months

●If with abdominal
itching, apply olive
oil or cream.
●Check the nipples
to prepare for
breastfeeding. If the
nipples inverse,
consult health
personnel.

Health fetus,
proper weight, the
mother should
weigh.....kg.
Now your weight is.....kg.
Date of
exam...../...../.....

Complete
recommended
doses of BCG
vaccination.

For the
first pregnancy,
you will fell of
quickenning at the 5th
month, and for
subsequent
pregnancies at the 4th
month.

Complete 12 wks.
3 Months

Appointment date

Health fetus,
proper weight,
the mother should
weigh.....kg.
Now your weight is.....kg.
Date of exam...../...../.....

Appointment date

Health personnel if
the following
vomiting, lost
abdominal pain
bleeding

Health fetus, proper
weight, the mother
should weigh.....kg.
Now your weight
is.....kg.
Date of
exam...../...../.....

●Drink 2-3
glasses of milk a
day.
●Take iron supplement
everyday.
●Brush your teeth after meals and
before bedtime.
●Have dental check-up and
dental/gum treatment.

Complete 16 wks.
4 Months

Mommy,
Daddy Please
don't smoke!



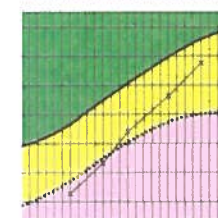
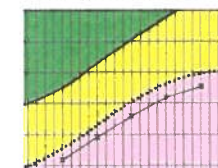
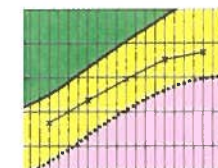
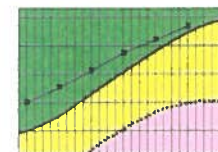
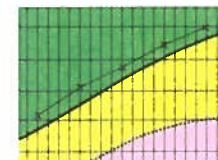
Mommy, you have to
talk with Daddy what
the doctor said.

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Advantage of the nutritional graph: The mother uses it for monitoring nutritional status and monitoring the trend of mother's weight change during pregnancy, for the baby to have between 3,000 - 3,900 grams of birth-weight.

Interpretation

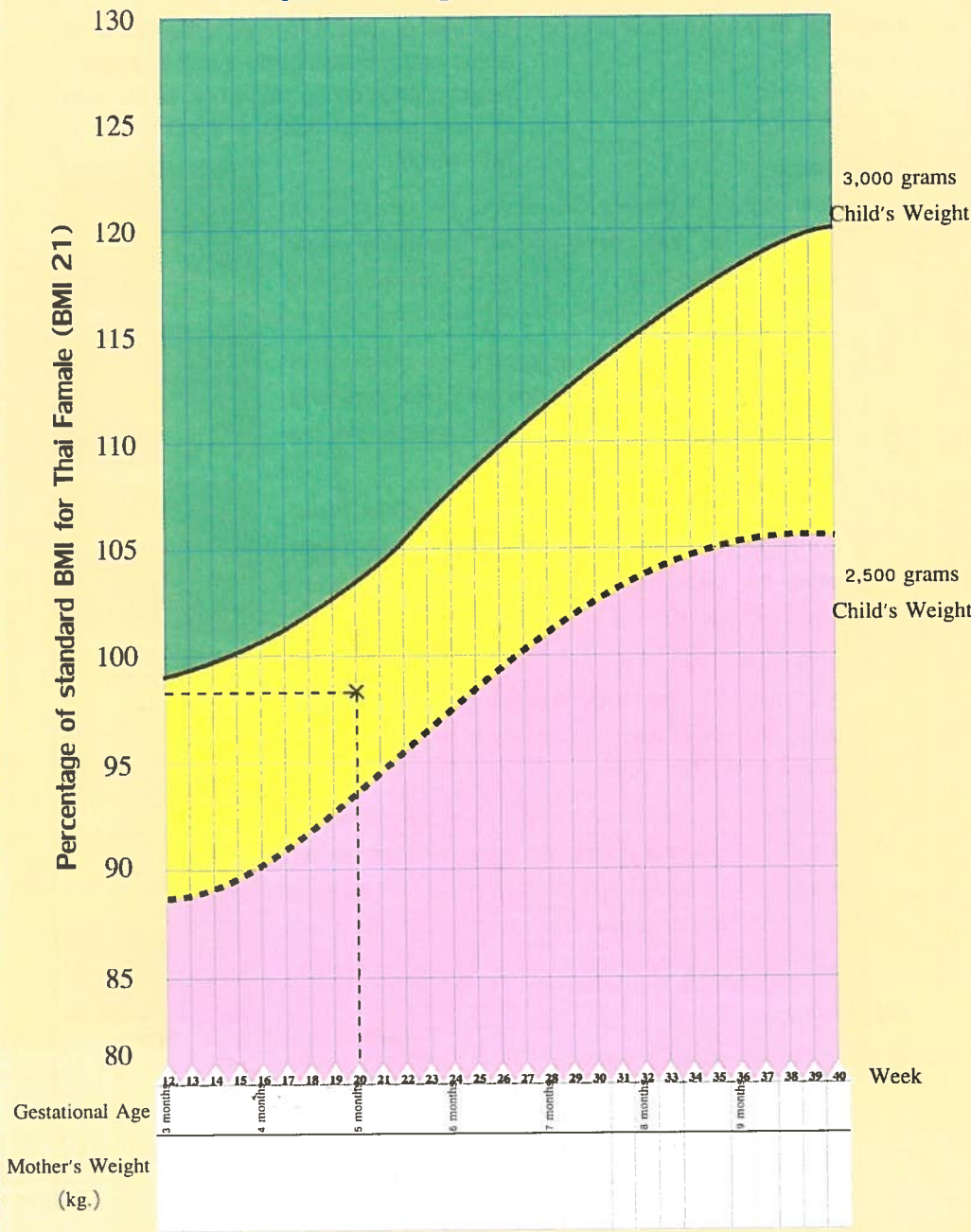
1. If throughout the pregnancy period, the cross marks are within the **green stripe and with increasing weight along the solid line**, it is expected that the child's weight is > 3,000 grams.
2. If throughout the pregnancy period, the cross marks are within the **green stripe and with less increasing weight, not along the solid line**, it is expected that the child's weight is > 3,000 grams.
3. If throughout the pregnancy period, the cross marks are within the **yellow stripe and with increasing weight along the dash line**, it is expected that the child's weight is between 2,500-3,000 grams.
4. If throughout the pregnancy period, the cross marks are within the **pink stripe and with increasing weight along the dash line**, it is expected that the child's weight is > 2,500 grams.
5. If in the early pregnancy period, the cross marks are within the **pink stripe and with very steep increasing weight**, it is expected that the child's weight may be > or < 2,500 grams due to poor nutritional status of the mother before pregnancy.



Suggestions

- Normal weight during pregnancy: Follow the dietary practice in the illustration of food substitute sets.
- Low weight during pregnancy: Increase food intake for rice-starch, meat, milk, egg, vegetables, and fruits.
- Obesity before pregnancy (percentage of standard value over 120): Control the weight gain over the pregnancy period to be within approximately 9 kgs.

Nutritional Graph for Pregnant Woman (VALLOP CURVE)



Use this graph to record BMI

TABLE 3.1 Comparison of Percentage of Standard BMI Values (BMI 21=100)

% Of Value	Ht. (cm)	Ht. (kg)	Ht. (cm)	Ht. (kg)	Ht. (cm)	Ht. (kg)	Ht. (cm)	Ht. (kg)	Ht. (cm)	Ht. (kg)	Ht. (cm)	Ht. (kg)	Ht. (cm)	Ht. (kg)	Ht. (cm)	Ht. (kg)	Ht. (cm)	Ht. (kg)																																																																																																																																																																																																																																																																																																																																
80	135	31.1	137	31.5	139	32.0	141	32.5	143	33.0	144	33.5	146	34.0	147	34.5	148	35.0	149	35.5	150	36.0	151	36.5	152	37.0	153	37.5	154	38.0	155	38.5	156	39.0	157	39.5	158	40.0	159	40.5	160	41.0	161	41.5	162	42.0	163	42.5	164	43.0	165	43.5	166	44.0	167	44.5	168	45.0	169	45.5	170	46.0	171	46.5	172	47.0	173	47.5	174	48.0	175	48.5	176	49.0	177	49.5	178	50.0	179	50.5	180	51.0	181	51.5	182	52.0	183	52.5	184	53.0	185	53.5	186	54.0	187	54.5	188	55.0	189	55.5	190	56.0	191	56.5	192	57.0	193	57.5	194	58.0	195	58.5	196	59.0	197	59.5	200	60.0	201	60.5	202	61.0	203	61.5	204	62.0	205	62.5	206	63.0	207	63.5	208	64.0	209	64.5	210	65.0	211	65.5	212	66.0	213	66.5	214	67.0	215	67.5	216	68.0	217	68.5	218	69.0	219	69.5	220	70.0	221	70.5	222	71.0	223	71.5	224	72.0	225	72.5	226	73.0	227	73.5	228	74.0	229	74.5	230	75.0	231	75.5	232	76.0	233	76.5	234	77.0	235	77.5	236	78.0	237	78.5	238	79.0	239	79.5	240	80.0	241	80.5	242	81.0	243	81.5	244	82.0	245	82.5	246	83.0	247	83.5	248	84.0	249	84.5	250	85.0	251	85.5	252	86.0	253	86.5	254	87.0	255	87.5	256	88.0	257	88.5	258	89.0	259	89.5	260	90.0	261	90.5	262	91.0	263	91.5	264	92.0	265	92.5	266	93.0	267	93.5	268	94.0	269	94.5	270	95.0	271	95.5	272	96.0	273	96.5	274	97.0	275	97.5	276	98.0	277	98.5	278	99.0	279	99.5	300	100.0	100.5	101.0	101.5	102.0	102.5	103.0	103.5	104.0	104.5	105.0	105.5	106.0	106.5	107.0	107.5	108.0	108.5	109.0	109.5	110.0	110.5	111.0	111.5	112.0	112.5	113.0	113.5	114.0	114.5	115.0	115.5	116.0	116.5	117.0	117.5	118.0	118.5	119.0	119.5	120.0	120.5	121.0	121.5	122.0	122.5	123.0	123.5	124.0	124.5	125.0	125.5	126.0	126.5	127.0	127.5	128.0	128.5	129.0	129.5	130.0

Fetal Development

1st Month

Zygote develops in a shrimp-like shape, an early stage of development of all major body organs.



13 Weeks (91 Days)

2nd Month

Major organs begin to form with the heart as an important structure beating strong and fast, the head is larger than other organs, and the body is 4 cm. long.



17 Weeks (119 Days)

3rd Month

Development of all major organs is completed with differentiated gender, the body is 9 cm. long and weighs 15 g. 13 Weeks (91 Days).

4th Month

Legs and arms are at equal length, skin is transparent with blood vessels, the fetus begins to swallow amniotic fluid, begins to hear the mother's voice and heartbeat, the body is 16 cm. long.

5th Month

Fine hairs are developed to cover the body and over the head, the nervous system is completed, immune system begins to develop, the body is 16 cm. long. 17 Weeks (119 Days).

6th Month

Fetal movement is stronger, the muscles are completed, legs are at proportionate length, the fetus is able to recognize the father-mother's voices, the body is 30 cm. long and weigh around 600 grams.



21 Weeks (147 Days)

7th Month

The nervous system develops rapidly, fetal kick and movement are strong to respond loud noise, the body is 35 cm. long and weigh 1,000 - 1,200 grams. 21 Weeks (147 Days).

8th Month

Weight is around 2,500 grams, the body is pinkish, the fetus is able to sense of dark and light, opens eyes to observe around in the amniotic fluid, the body is 40-45 cm. long and weigh 2,000 grams.



35 Weeks (245 Days)

9th Month

The fetus is preparing for birth, lung and skin completely developed, preparing for the first breath, the head is moving down toward the birth canal, the body is 45-50 cm. long. 35 Weeks (245 Days).

$$\text{Percentage of Standard BMI Value} = \frac{\text{Weight (kilogram)} \times 100}{\text{Height}^2 \text{ (meters)}^2}$$

(21 is BMI value defined as standard value for Thai woman equal to 100)

109	41.7	42.3	42.9	43.5	44.1	44.7	45.3	45.9	46.5	47.1	47.7	48.3	48.9	49.5	50.1	50.7	51.3	51.9	52.5	53.1	53.7	54.3	54.9	55.5	56.1	56.7	57.3	57.9	58.5	59.1	59.7	60.3	60.9	61.5	62.1	62.7	63.3	63.9	64.5	65.1	65.7	66.3	66.9	67.5	68.1	68.7	69.3	69.9	70.5	71.1	71.7	72.3	72.9	73.5	74.1	74.7	75.3	75.9	76.5	77.1	77.7	78.3	78.9	79.5	80.1	80.7	81.3	81.9	82.5	83.1	83.7	84.3	84.9	85.5	86.1	86.7	87.3	87.9	88.5	89.1	89.7	90.3	90.9	91.5	92.1	92.7	93.3	93.9	94.5	95.1	95.7	96.3	96.9	97.5	98.1	98.7	99.3	99.9	100.5	101.1	101.7	102.3	102.9	103.5	104.1	104.7	105.3	105.9	106.5	107.1	107.7	108.3	108.9	109.5	110.1	110.7	111.3	111.9	112.5	113.1	113.7	114.3	114.9	115.5	116.1	116.7	117.3	117.9	118.5	119.1	119.7	120.3	120.9	121.5	122.1	122.7	123.3	123.9	124.5	125.1	125.7	126.3	126.9	127.5	128.1	128.7	129.3	129.9	130.5	131.1	131.7	132.3	132.9	133.5	134.1	134.7	135.3	135.9	136.5	137.1	137.7	138.3	138.9	139.5	140.1
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Thalassemia

Thalassemia is one type of anemia caused by blood disorder genetically inherited from parents.

Thalassemia is of 2 types:

1. Being a carrier: Displays no symptoms, with normal physical health, except for abnormal hemoglobin, and inherits to offspring.

2. Having the disease: Present symptoms such as pale and yellow skin, enlarged liver or spleen, darken skin, slowed growth, required regular treatment, and inherits to offspring.

3 Types of Thalassemia cases:

- **Most severe:** Stillbirth or neonatal death
- **Severe:** exhibits no symptoms at birth but obvious at 3 - 6 months. Major symptoms include pale skin, fatigue, enlarged abdomen, enlarged liver and spleen, often with very pale skin that requires regular blood transfusion.
- **Moderate or mild:** Skin turns very pale if with fever.



A carrier



A Thalassemic



mild

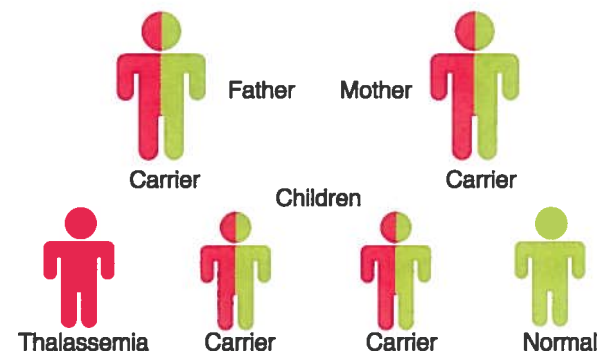
moderate

severe

Risk Opportunity to having a Thalassemia Child

If both the father and mother are carriers, the baby will have a 25% chance or 1 in 4 to have the disease, 50% chance or 2 in 4 to be a carrier, and the mother will have 25% chance or 1 in 4 to have a normal baby.

Both the father and mother are carriers



How to know if the fetus has thalassemia?

1. Seek ANC soon after recognizing of pregnancy.
2. Together with the husband, receive the advice and counseling from health personnel.
3. Receive the blood test, if with abnormal test result, bring the husband for the blood test immediately.
4. If the pregnant woman and the husband have a chance of having a fetus with severe and moderate thalassemia, the pregnant woman should undergo fetal examination to investigate if the baby is thalassemia.

“Thalassemia” examination is available free-of-charge at every government community health center and hospital.

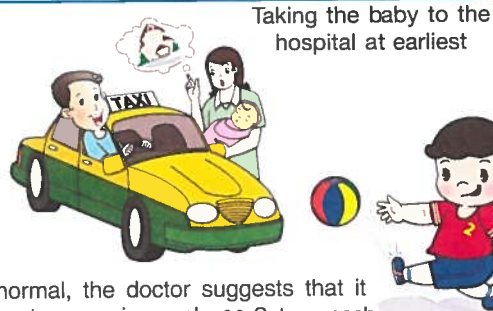
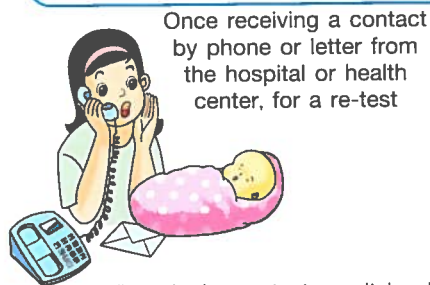
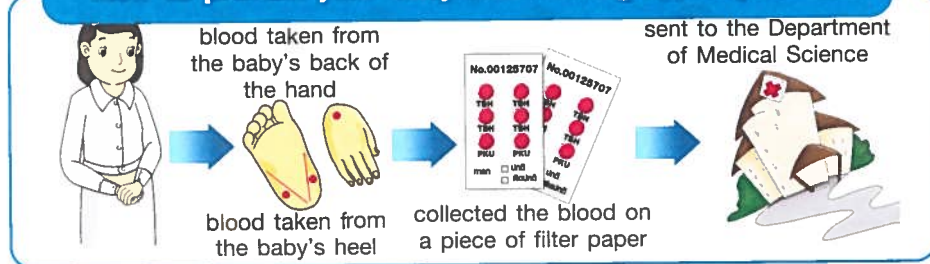
What is Hypothyroidism?



Hypothyroidism is a congenital disease caused by abnormal thyroid hormone level, posing a chance that the baby has mental retardation or dull brain or so called by people as "Roke Uer". Major causes are abnormal thyroid hormone level, iodine deficiency during pregnancy. In Thailand, about one in every 2,500– 3,000 newborns is with hypothyroidism.

How to know if the baby has hypothyroidism? It is difficult to observe the symptom in the newborn, and the only one method is the blood test. If left for a period of time, it may be observed that the baby displays exaggerated jaundice longer than in normal case, accompanied with drowsiness, excessive sleeping, less suckling, easy to care, no weeping, constipation, umbilical hernia, dry skin, and hoarse cry.

How to prevent your baby from having hypothyroidism



Though the re-test result is abnormal, the doctor suggests that it can be treated and the pills are not expensive, only 30 Satang each.

Important information that you should provide to the nurse are the current address and home/mobile phone number for convenient contact.

Hypothyroidism can be prevented by giving thyroid hormone to the baby within 1 month after birth.

Prevention of Mother-to-Child Transmission of HIV

Transmission of HIV (AIDS) can take place in 3 periods:

1. Pregnancy: HIV/AIDS is transmitted from the mother through the placenta into the blood circulation system of the fetus.
2. Delivery: The newborn can be infected with HIV through contact with the blood, amniotic fluid, and vaginal secretions of their HIV (AIDS) infected mother during delivery.
3. Postpartum: The baby is infected with HIV through breastfeeding from HIV (AIDS) infected mother.

Prevention of Mother-to-Child Transmission of HIV

1. Use condom at every sexual intercourse over the pregnancy period.
2. Take anti-HIV drugs as prescribed by the doctor.
3. Give anti-HIV drugs to the baby as prescribed by the doctor.
4. Avoid breastfeeding the baby.
5. Receive an examination on every appointment by the doctor.

Blood screening for HIV (AIDS) is helpful to mother and child

1. Receive advice on proper self-practice.
2. Receive knowledge on how to prevent HIV (AIDS) transmission.
3. Receive adequate services over the pregnancy, delivery, and postpartum periods.



Family Planning

A couple should plan in advance how many children to have, when to have, and how many years to space out between each child by using temporary or permanent contraception.

Temporary contraceptive methods

After stopping any of these methods, the mother can conceive more children.

1. **Oral pill:** Suitable for women already had or had no children. It has to be taken continuously everyday.
2. **Injection:** Suitable for the woman already had children or women during postpartum breastfeeding. Each shot offers 3 months of pregnancy prevention.
3. **Implant:** Suitable for women already had children, each implantation offers 5 years of pregnancy prevention.
4. **IUD:** Suitable for women already had children. Each insertion of IUD provides 5 years of pregnancy prevention.
5. **Condom:** For male use, easy and convenient, prevent pregnancy, STIs, and AIDS.



Oral pill



Injection



Implant



IUD



Condom

Permanent contraceptive methods

Female and male sterilizations are available for a couple who desire for no more children.

Does the mother have breast self-exam this month?

Self-Assessment and Analysis of Stress

During the past 2 months, to what extent have you experienced any of the following symptoms, behaviors or feelings?

Please mark "X" into the box corresponding to the level of occurrence of the symptoms you actually experienced.

Symptom, Behavior, or Feeling	Level of Occurrence			
	Never	Occasionally	Frequently	Regularly
1. Sleepless due to persistent thought or anxiety				
2. Irritable, annoyed				
3. Unable to accomplish anything due to tension				
4. Feeling nervous				
5. Antisocial				
6. Having either a migraine or a headache at both sides of the temporal				
7. Unhappy and sad				
8. Hopeless in life				
9. Losing sense of self-value				
10. Feeling disturbed at all time				
11. Unable to concentrate				
12. Fatigue, low-energy to do anything				
13. Feeling bored, uninterested to do anything				
14. Strong heartbeat				
15. Shaking voice, mouth, and hands when feeling dissatisfied				
16. Fear of mistake when doing things				
17. Painful and tight muscles around the occiput, back, and shoulder				
18. Easily excited with unfamiliar situation				
19. Confused and dizzy				
20. Reduced sexual pleasure				

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Scoring your responses

Once you complete responding to all of the 20 items, score each item as follows.

Your response is scored:

Never	= 0
Occasionally	= 1
Frequently	= 2
Regularly	= 3

Add up the scores of all 20 items to obtain the total scores ranged between 0 - 60. Your scores can be interpreted below.

Interpretation of the scores

Scores 0 - 5: Your stress is below average level. Your life goes smooth and easy without too much struggle. Ask yourself whether you are satisfied with what are going on, if yes and without suffering in life, you can go on living your happy life, but if no, you may make some adjustments in your lifestyle by such as reading books, meeting with friends, or planning for appropriate goals in life and move towards such goals.

Scores 6 - 17: Your stress is at average level. You cope well with stress in daily life and adjust properly with various situations. You should maintain this level.

Scores 18 - 25: Your stress is slightly higher than the average level. You might have faced some disturbing problems; hence, with somewhat unusual physical and mental expressions. Having some rest and relaxation, you will improve but if it does not work, you should talk or consult about the disturbing matters with trusted people.

Scores 26 - 29: Your stress is moderately higher than the average level. You might have some problems with obviously unusual physical and mental expressions. Despite rest and relaxation, the stress persists. You should find the cause of such disturbing problems, and seek for resolution and improvement.

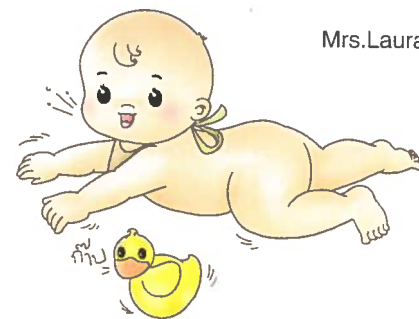
Scores 30 - 60: Your stress is extremely higher than the average level. You might have been facing with the crisis in life or your stress accumulated for a prolonged period. You should release the stress by placing your thought aside, then doing some stretching to relax your body, and going for relaxation such as seeing movies, listening to music. You should think about resolving and rectifying the problems, if without improvement, seek urgent counseling from health personnel.

PART 4 Related Knowledge For Bringing Up A Healthy, Brilliant, Good, And Happy Child

- ♥ Breast-milk is the first drop of family love bond
- ♥ Food for infant at birth to 12 months old
- ♥ Adequate amount of daily food intake for a child 1 - 5 years
- ♥ Caring for your child
- ♥ Caring for your child's teeth
- ♥ Vaccination guide
- ♥ Guide to bring up a brilliant, good, and happy child
- ♥ Instruction for recording child development by parents and guardian.
- ♥ Child development promotion
- ♥ Risks and guide to prevent injuries in early childhood
- ♥ Immunization record
- ♥ Appointment date for the next health exam

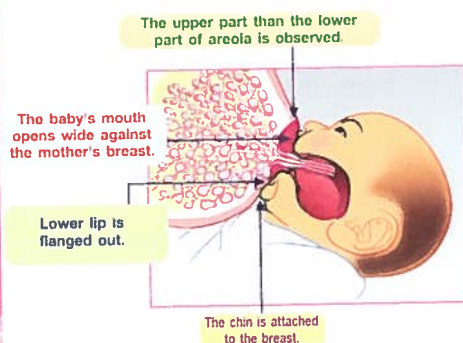


Mrs.Laura Sasithorn Wattanakul B.E.2004



Breast-milk is the First Drop of Family Love Bond

The first 6 months are important as the foundation for brain growth. Breast-milk is superb. It contains more than 200 nutrients, including elements to form brain cells, cranial nerve, retina, immune system that promotes healthy baby and prevents frequent illnesses. Breast-milk also fosters greater level of development, intelligence, and IQ than formula milk. All other food rather than breast-milk given to the baby are adulterated things as the baby is unable to digest them, and may cause diarrhea or allergy to cow's milk protein. The mother should exclusively breastfeed the baby for 6 months, and continue breastfeeding together with other age-appropriate food until the baby reached 2 years or more.



Working mother can feed the baby with breast-milk.
Consult Miss Breast-milk,
Breast-milk clinic at every hospital.

Feeding baby



Picture 1



Picture 2



Picture 3



Picture 4



Picture 5




Food for Infant, E Amount of Daily Food

Age (month)	Number of Meal/day	Types and Amount		
		Rice Group	Meat Group	Vegetable Group
Birth - 6 Months	-	Exclusively breastmilk without		
6 Months	1	3 tbs. of finely ground cooked rice	$\frac{1}{2}$ egg yoke or 2 tbs. of fish, or 1 tb. of liver paste	$\frac{1}{2}$ tb. of soft cooked vegetables such as pumpkin
7 Months	1	4 tbs. of ground cooked rice	$\frac{1}{2}$ boil egg alternated with 1 tb. of liver paste, or fish, or pork, or chicken	1 tb. of cooked vegetables such as spinach, liver, pumpkin
8-9 Months	2	4 tbs./meal of roughly ground, soft cooked rice	$\frac{1}{2}$ boil egg alternated with 1 tb./meal of liver paste, or fish, or pork, or chicken	1 tb./meal vegetable such as gooseberry, Chinese pumpkin
10-12 Months	3	4 tbs./meal of roughly ground, soft cooked rice	$\frac{1}{2}$ boil egg alternated with 1 tb./meal of liver paste, or fish, or pork, or chicken	1 $\frac{1}{2}$ tbs./meal vegetable such as gooseberry, Chinese pumpkin

Birth - 12 Months

Food Intake for Infant

80

Amount of Food			Guide to Food Management
Storable Group	Fruit Group	Oil Group	
			<p>Guide to Food Management</p> <ol style="list-style-type: none"> Starting with one type of food in very small amount at a time, when the baby eat with no problem of allergy, than gradually increase to the recommended amount of food. Arrange a variety of food in each group for the child to become familiar with them. It is not necessary to grind the food for children 7 months old or more, but provide them with more rough food to practice chewing. Do not prepare strong flavor but natural taste of food. Raw materials and utensil for food cooking and containing must be clean and safe.
other kinds of food even water			
finely ground, cooked vegetables such as Ivy gourd, pumpkin	1-2 pieces of ground fruits such as ripe Banana, papaya	$\frac{1}{2}$ teaspoon	
cooked vegetables such as star gooseberry, Ivy gourd, pumpkin	1-2 pieces/meal of ripe fruits such as 2 pieces of papaya or 2 pieces of ripe mango	$\frac{1}{2}$ teaspoon	
meal of cooked vegetables such as star gourd, Ivy gourd, brinjal, cabbage, pumpkin	2-3 pieces/meal of ripe fruits such as 3 pieces of papaya, 1 banana	$\frac{1}{2}$ teaspoon/meal	
meal of cooked vegetables such as star gourd, Ivy gourd, brinjal, cabbage, pumpkin, carrot	3-4 pieces/meal of ripe fruits such as 4 pieces of ripe mango, 1 orange	$\frac{1}{2}$ teaspoon/meal	

Source: Nutrition Division, Department of Health, Ministry of Public Health

Caring for your child suffering from respiratory tract infection

Children 1-5 years frequently get flu. Parents can take care by having the child drink water frequently, eat normally, and take antipyretic every 4-6 hours. For cough, give the child mucolytic but antibiotic (disinfectant/ anti-inflammatory) is not needed. Fever, nasal discharge, and cough are exhibited in the first few days, with cough continues for 1 - 2 weeks, then the child will be recovery.

If with persisting cough, abnormal breathing, fast and strong breathing, wheezing, apnea, inactive, refuse suckling, potential pneumonia, please bring the child to see the doctor promptly.

Caring for the child suffering from diarrhea

Having diarrhea means:

- ♥ Passing loose stools for 3 or more times a day
- ♥ Passing stools containing bloods or pus, for at least 1 time
- ♥ Passing watery stools more than once a day

For young children with diarrhea, if without proper care and prompt treatment, it may lead to sudden shock, coma, and loss of life.

Primary home treatment for the child with diarrhea.

1. Give oral rehydration solutions to replace lost fluids and electrolytes as follows.
 - ♥ Oral rehydration solutions or ORS (ORS produced by the Government Pharmaceutical Organization) is recommended, follow instruction on the sachet.
 - ♥ For children less than 2 years, give 50-100 cc. of ORS ($\frac{1}{4}$ to $\frac{1}{2}$ glass) every after passing stools.

Use a spoon in stead of feeding bottle, as too rapid intake may cause vomiting.

- ♥ For children 2 - 10 years, give 100-200 cc. of ORS ($\frac{1}{2}$ to 1 glass) every after passing stools.
2. Do not stop feeding the child during having diarrhea. If with breastfeeding, encourage the child for increased suckling.

Mommy, please tell stories for me again today.



Caring for Your Child's Teeth

Primary teeth are important for the child's health. Failure to take proper care, it will easily lead to tooth decay, and if it spreads, the child will suffer from toothache, sleeplessness, and eating problem. This affects the child's growth and development. Parents are encouraged to take care of your child's teeth as follow.

1. Breastfeed your child for 6 months exclusively, and after that breastfeeding cannot be continued, choose plain milk to feed your child. Never put the child to bed with a feeding bottle. Do not use feeding bottle for any sugary drinks. Wean off the bottle when your child reach 1 - 1 1/2 years.

2. About 6 months old when the primary teeth appears, brush the child's teeth with fluoride toothpaste twice a day in the morning and before bedtime.

3. At 6 months, begin to feed the child 1 meal a day and add to 3 meals at the age of 1 year. Between meals, give the child plain milk and fruits.

4. Parents should lift the child's lips at least once a month to check for whitish lines, if found, bring your child to the dentist or health personnel for application of fluoride to prevent cavities.



How to brush your child's teeth

Apply a small pea-sized amount of fluoride toothpaste on the toothbrush. Sit your child on your lap with the head facing you, then use your fingers to open the child's cheek pouch allowing you to see the teeth clearly. Place the toothbrush vertically onto the teeth, move gently and shortly to clean the teeth. If the teeth are clean, no yellow white spots remain on the teeth.

At 2 - 3 years of age, train your child how to brush the teeth by him/herself but parents have to repeat brushing the child's teeth to make sure they are clean until the child can do it well at the ages of 7 - 8.

Source : Bureau of Dental Health, Department of Health

Vaccination Guide

♥ **Some vaccines** have to be given more than once to activate the body to develop immunity at the level effective to prevent the disease. Parents are thus encouraged to **bring the child to receive vaccination on schedule** as described in this handbook.

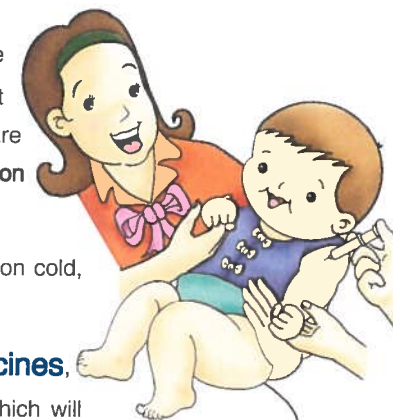
♥ **A child with minor illness** such as common cold, cough, or low temperature can **be vaccinated**.

♥ **After being injected with some vaccines**, the child may develop high body temperature, fever, which will be gone shortly. Sponge the child's body, have the child drink plenty of water, give antipyretic as guided by the doctor or health personnel.

♥ **If the child has a history of allergy** or experienced severe condition after being vaccinated such as convulsion, high fever, **please notify the doctor or health personnel** prior to vaccination.

♥ **The wound developed from BCG** vaccination may form a small abscess appearing for 3 - 4 weeks which requires no medication or dressing, just use a cotton pad soaked with cooled boiled water to clean around the wound.

♥ **Please keep this handbook** for your child's benefit to monitor what vaccines were given and whether the child received completed doses. This handbook can also be used as an important evidence for various occasions; for example, the **child's enrollment in primary school and travelling abroad**.



Miracle of Reading

In addition to physical food including breast-milk and age-appropriate food, your child needs intellectual food, mental food, and Dhamma food. Reading books with your child offers inclusively these 3 kinds of food.

Reading books for the child since 6-month-old everyday for at least 5 – 15 minutes a day will foster the development of the child's brain that contains 100 billion neurons at birth, with brain cell connection called neural synapses. This connection affects the child's intelligence at subsequent ages until adulthood, and best enhance the child's language development.

At the age of 6 months, the child is able to lift the neck steady. Hold the child on your lap, persuade him/her to see the pictures while you read out slowly and clearly, or lying together reading the book. Gentle touch and soft voice full of love and parents-child closeness will promote the child's mental and emotional security.

Good stories in the book enable the child to progressively learn things and subsequently accumulate good behaviors, and also a wise way to instill the child moral values and ethics. Importantly, the child should observe the good role model of parents and surrounding people.

Young children prefer books containing colorful, clear, large, pictures, but less content. The paper of book should be durable and allow for easy opening, without sharp corners harmful to the child. During the child's first year, persuade him/her to see the pictures while you read out slowly and clearly, talk to your child, allow him/her to touch and hold the book. After 1 year, your child will remember more contents, and better link the pictures with story. Try to read slowly and clearly for your child to imitate your voice. Pictorial books with rhymes are easy to remember. These books help extend the child's thought, imagination, and enjoyment during the grown-up years. Parents can insert more by teaching about the numbers, shapes, colors, moral and ethic, posing questions for creating imagery, etc.



Guide to Bringing up a Brilliant, Good, and Happy Child

Child's Age	DOs for Parents	DON'Ts for Parents
Fetus	<ul style="list-style-type: none"> ♥ Relax, make yourself at ease. ♥ The father gives close care and helps the mother. 	<ul style="list-style-type: none"> ♥ Become stressed, irritable, emotional. ♥ Become self-indulgent inattentive to your baby.
Birth- 1 Yr.	<ul style="list-style-type: none"> ♥ Gently hold, snuggle with, caress your child to form the sense of security. ♥ While holding, talk and sing a lullaby to your child to sleep. ♥ Frequent playing and talking to your child will make him/her become cheerful, and grow fast. ♥ If your child prefers to do things on his/her own, allow him/her to do so and learn from trial and error. 	<ul style="list-style-type: none"> ♥ Ignore, be inattentive, abandon, and be emotionally violent to your child. ♥ Be irritable with your child's crying. If unable to cope with it, try to relax and ask someone to take care of your child, and calm down for a while. ♥ Overprotect and spoil your child, making him/her immature, self-determined, impatient.
1 – 3 Yrs.	<ul style="list-style-type: none"> ♥ Allow your child to do more his/her own routines. ♥ If your child turns exaggerated, draw his/her attention to something else. ♥ Talk, tell stories, answer to your child's questions. ♥ If your child refuses, explain to him/her the reason. ♥ Teach you child to keep toys in place. 	<ul style="list-style-type: none"> ♥ Not allow your child to do things by him/herself. ♥ Deceive or scare your child to fear for no reasons. ♥ Irritable for the child's asking question or being naughty. ♥ Tease your child to get angry. ♥ Force the child to stay inactive.
3 – 6 Yrs.	<ul style="list-style-type: none"> ♥ Teach your child from right to wrong, and dare to say when making mistakes. ♥ Teach your child to be accustomed to using words of thank, apology, and kindness. ♥ Encourage your child to play with other children. ♥ Teach the child to refuse others from touching personal organ. 	<ul style="list-style-type: none"> ♥ Compare your child with those of other siblings, making him/her feel slighted and valueless. ♥ When children are in quarrel, do not determine who are right and wrong, as children will not get angry toward one another for too long. ♥ Teach your child while you are unable to be a good role model yourself. ♥ Make forceful quarrel between parents in front of your child.

Suggestion for Parents and Guardian In Recording the Child's Development



1. The parents should promote the child to grow up with quality in all physical, intellectual, mental, and social aspects for the child to be good, brilliant, and happy. The parents play good role model, provide care, love, understanding, and give the child opportunities to learn, practice, while observing and promoting the child's development as guided.

2. The parents or guardian should notice if the child exhibits according to developmental age, by recording your child's age into the dash space of corresponding developmental age.

3. The method to promote the child's age-appropriate development should be consistently and regularly practiced by parents.

4. The child development record in this handbook demonstrates some aspects of major developmental age of which rapid or delayed development may vary by each child. If particular age-appropriate development is not achieved, the child should be allowed for 1 month to practice.

5. If your child displays the following signs, consult the doctor or health personnel.

- 5.1 At 3 months old, displays no eye contact, smiling back, lifting neck in prone position.
- 5.2 At 6 months old, does not follow subjects by the eyes, turn toward the voice, pay attention to the one playing with, roll over front and back.
- 5.3 At 1 years old, does not walk holding, get thing into the mouth with fingers, imitate gestures and voices.
- 5.4 At 1 year and 3 months old, unable to follow simple instruction such as to sit down, say hello, walk toward the mother.
- 5.5 At 2 years old, unable to say 2 words together.
- 5.6 Delayed age-appropriate development for playing.
- 5.7 Underweight and frequent illnesses.



You can tell stories and read books with your child since birth.

Record of Child Development Parents should encourage child's development as follows:

Age	Child development	Methods which the parents can use to help the child develop appropriately
1 month	<input type="checkbox"/> Eye contact, looks at the mother's face. <input type="checkbox"/> Responds with noises, makes sound in his/her throat. <input type="checkbox"/> Moves arms and legs.	<ul style="list-style-type: none"> ♥ Hold your child, the child's face is on the same level as that of the mother's face. Smile at your child, make eye contact, frequently talk with your child during breast feeding time. ♥ Frequently talk with your child, or carry him/her and sing lullaby. ♥ Lay the child down, let the child move his/her arms and legs by him/herself. ♥ Touch the child's palm with your finger. Your child should not wear mitten all the time. ♥ Breastfeeding exclusively for 6 months.
1-2 months	<input type="checkbox"/> Smiles or smiles back <input type="checkbox"/> Shows excitement when he/she is holding onto his/her mother. <input type="checkbox"/> Makes cooing noises, listens and locates the mother's voice. <input type="checkbox"/> Looks and follows moving things. <input type="checkbox"/> Lifts head when lying on his/her stomach.	<ul style="list-style-type: none"> ♥ While the mother sits down, hold the child closely and turn his/her face to mother's face, talk to the child, smile to the child, frequently use eye contact with the child. Slowly move the mother's face and let the child follow the mother's face. Gently touch the child. ♥ While the child is wake up, lay the child on his/her stomach, talk to the child, or shake toys that make a lot of sounds over his/her head in order to make him/her lift his/her head and look at it.
3-4 months	<input type="checkbox"/> The child can say hello to a familiar person. <input type="checkbox"/> The child can move towards the laughing sound and make the sound back. <input type="checkbox"/> The child can hold his/her hands together. <input type="checkbox"/> The child can move his/her eyes from one side to the another side.	<ul style="list-style-type: none"> ♥ Say hello to the child, call his/her name whenever you meet the child. ♥ Always talk to your child, touch, play and laugh with your child. ♥ Talk back to the child, stop and listen to him/her, wait for the child to make a noise. ♥ Let the child hold your finger with both of his/her hands.



- ♥ Do not shake the child as it could be harmful to the child's brain.
- ♥ Avoid carry a child less than 2 years on motorbike.
- ♥ A child safety seat should be installed at the back seat in the car.
- ♥ Do not apply throat paint with the child.

Record of Child Development Parents should encourage child's development as follows:

Age	Child development	Methods which the parents can use to help the child develop appropriately
3-4 months	<input type="checkbox"/> When the child lies on his/her stomach, he/she can use both hands to push and lift his/her neck to 90 degrees angle.	<ul style="list-style-type: none"> ♥ Shake a colorful toy in front of the child. Let the child look at it. While the child looks at it, slowly move the toy from one side to the other side. Make sure that the child is following the toy with his/her eyes. After that, touch the child's back hand with the toy. Try to encourage the child to grab the toy.
5-6 months	<input type="checkbox"/> The child can show his/her feelings. For example, happiness, dislike, remembering his/her parents face. <input type="checkbox"/> Moves towards the voice calling out his/her name. <input type="checkbox"/> Responds with a babbling sound. <input type="checkbox"/> Grabs objects with one hand, and passes them from one to the other hand. <input type="checkbox"/> Able to roll over.	<ul style="list-style-type: none"> ♥ Smile, when talking to your child. Call your child with his/her name in several tones and pitch to train him/her to become familiar with the voices. Talk to your child about the things that you are doing or the things that he/she interested in; for example, taking a bath, etc. ♥ Find some colorful and noisy toys to interest your child so he/she will grab it. ♥ Prepare a clean, bare, and spacious place for your child to roll his/her body or crawl freely. The parents may call out to the child or use colorful toys to encourage the child to roll or crawl.
7-8 months	<input type="checkbox"/> Afraid of strangers. Bonds with the caregiver. <input type="checkbox"/> Shows his/her hand indicating the desires to be picked up. <input type="checkbox"/> Can say one word. For example, Ja, Pa, mum. The child can locate the voice correctly. <input type="checkbox"/> Looks at the falling object. <input type="checkbox"/> Holds one object in each hand. <input type="checkbox"/> Sits without using any hand for support.	<ul style="list-style-type: none"> ♥ Whenever your child encounters other people, you should hold your child closely for warmth and to let him/her know that he/she is safe. Give plenty of time to your child to become accustomed to other people. ♥ Use gestures or words to communicate to your child every time you want to hold him/her. ♥ Talk about the activities you are doing with your child or the activities that you child interest; for example, mum mum. Whenever, you talk to your child, you should call out his/her name.



- ♥ Do not use baby walker as it causes the child's delayed walking and easily turning over or falling from the height.
- ♥ Do not leave a child alone in a bath tub or near a water basin even for a short while, so to prevent the child from drowning.
- ♥ Do not leave a child alone in high places such as bed, table, couch, etc.

Record of Child Development Parents should encourage child's development as follows:

Age	Child development	Methods which the parents can use to help the child develop appropriately
7-8 months		<ul style="list-style-type: none"> ♥ Read a book with your child. Point to the pictures in the book. ♥ Hold your child in a sitting position, hold colorful toys or cotton at your child's eye level to attract him/her. Then, put the object down to encourage him/her to follow the falling object. Let the child hold or grab the toy. ♥ Reduce the number of times you carry your child. Allow your child to play with various objects which he/she can hold or grab on to. Carefully follow and watch your child as he/she plays. ♥ Teach your child to sit and move around to grab the objects.
9-10 months	<input type="checkbox"/> Can play peek-a-boo, clap your hand, locate object hidden. <input type="checkbox"/> Can hold small pieces of food with his/her hand. <input type="checkbox"/> When the child needs something, he/she will point out to the object or use his/her gesture. <input type="checkbox"/> Understands the language face's appearance and responses. <input type="checkbox"/> Makes several words. For example, mum mum, Jaja. <input type="checkbox"/> Uses pointing finger and thumbs to grab or locates the object. <input type="checkbox"/> Crawls, Can stand from sitting position while holding on to something.	<ul style="list-style-type: none"> ♥ Play peek-a-boo, make different gesture and clap your hands with your child frequently. ♥ Allow your child to put small pieces of soft foods into his/her mouth like cooked rice, and boiled pumpkin. Do not use peanuts or any other kinds of food that can induce choking in a child. Give small pieces of food so that your child can eat by him/herself. ♥ Teach your child to use his/her facial/body gestures. For example, points to the items he/she desires. ♥ Talk to your child with a soft tone. ♥ Prepare space for the child to crawl and stand while holding on to something safely. Encourage your child to stand from the sit position by placing an interesting object on the chair and allow him/her to hold the chair to stand as he/she grabs the object.



- ♥ Do not let the child play with small toys as he or she may put it into the mouth and may be choked by it.

Record of Child Development Parents should encourage child's development as follows:

Age	Child development	Methods which the parents can use to help the child develop appropriately
11-12 months	<ul style="list-style-type: none"> <input type="checkbox"/> Imitates varieties of posture; for example, pay respect, bye bye, kiss the cheek, move the body with a song. <input type="checkbox"/> Drinks water from glass with some help. <input type="checkbox"/> Can say one word correctly. <input type="checkbox"/> Understands when says "NO" and "Stop". <input type="checkbox"/> Can hold 2 items in both hands and knock it together. <input type="checkbox"/> Can stand alone for a while. 	<ul style="list-style-type: none"> ♥ The parents should be a model for the child to imitate the postures. For example, greeting (wai - in Thai), bye bye, kiss the cheek. The parents should praise the child whenever he/she can do it. ♥ Allow the child to hold a plastic cup with small amount of water to drink by him/herself. The parents can help by holding the cup. ♥ Teach your child to say short, correct words about people and the surrounding environment such as papa, mama, grandma etc. ♥ Parents should say "NO" to stop your child whenever he/she want to do something dangerous or serious misbehave. ♥ Allow your child to hold unbreakable item in both hands, one by one, and encourage him/her to knock the items together. You should show the child how to do it first. ♥ Prepare a safe place (flat and not slippery) for the child to crawl or stand. ♥ Pay careful attention and encouragement when the child is attempting to stand.
13-15 months	<ul style="list-style-type: none"> <input type="checkbox"/> Able to imitate easy activities. For example, comb his/her hair, able to give and take objects. <input type="checkbox"/> Able to hold a spoon and put food into his/her mouth. <input type="checkbox"/> Able to do some easy things. For example, able to point out his/her body part or picture, able to speak 1-3 correct words. <input type="checkbox"/> Able to catch 2-3 pieces of objects or boxes. <input type="checkbox"/> Able to walk by him/herself. 	<ul style="list-style-type: none"> ♥ Allow your child to imitate easy activities. For example, comb his/her hair, teach your child to pick some objects for you and praise him/her when she/he can do it. ♥ Allow your child to hold a spoon and help your child to put food into his/her mouth. The spoon should be small and should not be sharp. ♥ Teach your child about his/her face and body. Teach your child the name of the objects in the house. Sing a song while doing that. ♥ Expose the child with the objects of different size and surface. Teach the child to keep them in the box after playing. Provide closely care during the child playing.



- ♥ Install electric plugs at 1.5 metres higher from the floor or use covering device.
- ♥ Keep sharp objects out of reach of children, pad the edges of the furniture, use a device to prevent the hand pinched by the door and drawer.
- ♥ Limit a safe place for the child to play without access to water sources to prevent risk of drowning.

Record of Child Development Parents should encourage child's development as follows:

Age	Child development	Methods which the parents can use to help the child develop appropriately
13-15 months		<ul style="list-style-type: none"> ♥ Find some open area/place where the child can walk safely. Provide some toys for your child to pull on. When the child has learned to walk, sometimes he/she may stop talking.
16-18 months	<ul style="list-style-type: none"> <input type="checkbox"/> The child feels good when he/she is interested in something. <input type="checkbox"/> Knows how to say no. For examples, shakes his/her face or says "no". <input type="checkbox"/> Able to hold a cup of water or milk by him/herself and can spill some. <input type="checkbox"/> Able to do some easy things when ordered by the parents. <input type="checkbox"/> Can say 5 meaning words. <input type="checkbox"/> Able to put 2-3 blocks of wood on toys of each. Can find hidden items. <input type="checkbox"/> Able to run. Walk up the steps by holding on to something with one hand. 	<ul style="list-style-type: none"> ♥ Parents should have time to play with their child. Take care of him/her. ♥ While giving instruction using positive words (giving example). ♥ Learn the important of mom and dad say "no", which mean "stop". ♥ Allow your child to drink small amount of water from a cup. ♥ Allow your child to follow commands given by the parents. For example, tell him/her to keep the toys in the box. If he/she does not understand, parents can do it first as a model and always talk with your child. ♥ Prepare toys such as box, powder can, crayons for drawing, or unused objects for building over one another. Play with your child to find hidden items under pieces of fabric. ♥ Find some open area or safe place for your child to move, climb and run freely. Hold his/her hand when climbing up the stairs. Place objects on the top of the stairs and encourage him/her to walk up the stairs.



- ♥ Pad the sharp corners and edges of the furniture.
- ♥ Tables, chairs, cabinets, and shelves are not strong enough for a baby to climb up, so they should be fastened or screwed to the wall to prevent from falling onto the baby.
- ♥ Do not carry a child less than 2 years on a motorbike.
- ♥ A child older than 2 years must always wear a standard helmet every time on a motorcycle.
- ♥ Limit a safe place for the child to play without access to water sources.

Record of Child Development Parents should encourage child's development as follows:

Age	Child development	Methods which the parents can use to help the child develop appropriately
19-24 months	<input type="checkbox"/> Shows emotions, such as, fear, anger, jealous and empathy. <input type="checkbox"/> Able to use spoon to dig into the food and eat by him/herself. Small amounts of food will spill out of the dish. <input type="checkbox"/> Can say 2-3 meaning words together or say 50-100 meaningful words. Can respond indicating that he/she understand. <input type="checkbox"/> Can open a book page by page. <input type="checkbox"/> Can draw a crossed line. <input type="checkbox"/> Can kick the ball. <input type="checkbox"/> Can stand up and pick up objects without falling down.	<ul style="list-style-type: none"> ♥ Talk to your child to let him/her express his/her feelings such as anger, and happiness. ♥ Train your child to help him/herself to the daily tasks, such as putting on his/her clothes, go to the toilet, wash his/her hand before eating, and brush his/her teeth. ♥ Always talk to your child clearly about the things that you are doing. Teach him/her how to greet, when to say "thank you", and when to say "sorry". ♥ Tell your child a short story with pictures. Encourage him/her to open the books and look at the pictures. Provide opportunities for the child to write and draw. ♥ Allow your child to play and exercise. Parents should exercise and be a good role model for the child to follow. Train your child to help him/herself to the daily tasks, such as putting on his/her clothes, go to the toilet, wash his/her hands before eating, and brush his/her teeth.
25-30 months	<input type="checkbox"/> Able to play tricks. He/she will resist when ordered to do certain things by the parents. <input type="checkbox"/> Able to help parents, do easy house chores. Able to take off his/her clothes by him/herself. <input type="checkbox"/> Able to talk in short sentences. <input type="checkbox"/> Able to point out or do things as told by parents; for example, points to 6 parts of the body, and or points to the pictures. <input type="checkbox"/> Able to draw a circle. <input type="checkbox"/> Able to walk up the steps by him/herself.	<ul style="list-style-type: none"> ♥ Give your child opportunities to make his/her own decisions. Allow your child to do things on his/her own but under the parents' close supervision. ♥ Whenever parents do the household chores, they should persuade the child to do it with them. ♥ Talk to your child, explain and compare the surrounding environment such as the hen is big or a chick is small. ♥ Tell your child a story. Sing a song to your child. ♥ Allow your child to write and draw freely. Talk to your child about the objects that he/she writes or draws. Talk to him/her about the figure of the objects such as the ball is round, and the box is square. ♥ Teach your child to walk up the steps holding a rail by him/herself with the adults' close supervision.



♥ Keep closely all the drugs and toxicants in the house out of reach of children.

Record of Child Development Parents should encourage child's development as follows:


Age	Child development	Methods which the parents can use to help the child develop appropriately
31-36 months	<input type="checkbox"/> Knows how to wait. Able to do role play. <input type="checkbox"/> Able to wear and remove his/her clothes with some help from the adult. Can tell when he/she wants to defecate. <input type="checkbox"/> The child can tell people his/her name. Can talk to others clearly. Can ask a question. He/she likes to listen to stories and understands it. <input type="checkbox"/> Can distinguish between big-small, short-long, much-little, and male-female. <input type="checkbox"/> Initiates drawing a vertical line. <input type="checkbox"/> Can jump up. Can throw the ball straight up with his/her hands.	<ul style="list-style-type: none"> ♥ Allow your child to stay nearby to learn and to play with family members. Don't allow playing near the roads. ♥ Train your child to help him/herself to eat, to bathe and to wear his/her own clothes until he/she can do it by him/herself. Tell the child to notify the adult when he/she wants to go to defecate. ♥ Talk to your child about the evidences. Allow your child to tell stories, listen and pay attention and also answer his/her questions. ♥ Allow your child to freely write or draw objects. Talk about his/her drawings. Parent should draw vertical line and teach the child to draw. Teach your child to join 3-4 pieces of a picture. Teach your child about the difference in size, such as big-small, short-long, much-little. ♥ Throw the ball with your child. ♥ Limit TV time to be within 2 hours/day. ♥ Mobile computer game should be avoid. ♥ Encourage child to help you to do the household chores. ♥ Tell children not to allow other people touch her breast and sex organ and not accept things from stranger without parent consent.
37-48 months	<input type="checkbox"/> The child shows his/her freedom. He/she wants to try to do things by him/herself. <input type="checkbox"/> Can play in groups with easy rules. <input type="checkbox"/> The child can tell when he/she wants to urinate. Can go to the toilet by him/herself. <input type="checkbox"/> Able to identify 1 color. Can tell a whole story so that people can understand him/her. <input type="checkbox"/> Can draw a circle following a template. Able to distinguish 1-3 pieces of items. <input type="checkbox"/> Can walk down the steps, alternating his/her feet. Can walk on one leg for a while.	<ul style="list-style-type: none"> ♥ Give your child opportunity trying to do things by him/her. Parents should pay closely attention to their child. Allow your child to play with other children. ♥ Teach your child to wait in queue, and help others. ♥ Train your child to go to the toilet by him/herself and wash his/her hands before and after using the toilet and eating. ♥ Talk to your child. Answer his/her questions. Encourage him/her to observe his/her surrounding environment and talk about it. ♥ Train your child to hold a pencil to draw a circle and other things in the surrounding environment which he/she can see. Praise him/her when he/she can do it. ♥ Teach your child how to distinguish between 1-3 pieces.



♥ Do not leave the child alone playing with dogs, cats or other pets.



♥ Children should wear life vest when traveling by water craft or when swimming.

Record of Child Development Parents should encourage child's development as follows:

Age	Child development	Methods which the parents can use to help the child develop appropriately
37-48 months		<ul style="list-style-type: none"> ♥ Train your child to hold a pencil to draw a circle and other things in the surrounding environment which he/she can see. Praise him/her when he/she can do it. ♥ Teach your child how to distinguish between 1-3 pieces. ♥ Train your child to walk down the steps by him/herself with close supervision. ♥ If there are victims, protect him/herself, not hitting back and inform parents and teacher. ♥ Tell your child not to hit, kick or bite another child. Intervene such activities, if happened, by grounding him/her to let the child calm down and explain later. ♥ Respect his/her rights and others'. ♥ Do not allow the child playing near the road. ♥ Explain the dangerous of the fire from matches. ♥ Train your child about social manners. ♥ Allow your child to play with others.
49-60 months	<ul style="list-style-type: none"> <input type="checkbox"/> Knows how to respect, says thank you, and shows sorrow. <input type="checkbox"/> Can use his/her imagination. <input type="checkbox"/> Can wear and button his/her own clothes. <input type="checkbox"/> Understands and able to answer questions. Likes to ask questions. <input type="checkbox"/> Can count and know the values of number 1-5. Knows 4 colors. Knows the alphabet. <input type="checkbox"/> Can hold the pencil correctly. <input type="checkbox"/> Can draw a person, or a square. <input type="checkbox"/> Can jump on one leg 2-3 times continuously. 	<ul style="list-style-type: none"> ♥ Train your child about social manners, norms and rules. Define limits clearly and have certain measures (grounding, or no sweet or candy) if the child went beyond the limit. ♥ Give your child opportunities to select, wear, and button his/her own clothes. Parents should be ready to explain to their child. For example, explain to him/her why you do not allow him/her to play. Parents should teach the child how to solve the problems. ♥ Practice counting the items. Pick up a number of items. Persuade your child to look at the things around and identify the color. Encourage your child to tell his/her feelings and read the book so he/she can listen to it.

- ♥ Do not leave a child alone in a car.
- ♥ The playground equipment should be safe to prevent injuries from the equipment's falling onto the child or the child's falling from the height.
- ♥ Do not leave the child play alone.

Record of Child Development Parents should encourage child's development as follows:

Age	Child development	Methods which the parents can use to help the child develop appropriately
49-60 months		<ul style="list-style-type: none"> ♥ Observe the way your child holds a pencil. Parents can hold the pencil to show the child how it is done. Draw a square and let the child follow. ♥ Play games using one leg to jump and let him/her jump with one leg and run after others. Play tang tae. ♥ Do not take others' personal belonging without permission.
61-72 months		<ul style="list-style-type: none"> <input type="checkbox"/> Can do easy household chores. Encourage the child to help household chores. <input type="checkbox"/> Can help to prepare the dining table such as pouring the water by him/herself. <input type="checkbox"/> Knows the difference between left, right, above, under, in front, and back. <input type="checkbox"/> Knows the value of 1-10 items. <input type="checkbox"/> Can read the alphabet and write. <input type="checkbox"/> Can draw a triangle and write the easy letter of the alphabets. <input type="checkbox"/> Able to use both hands to take the ball.

- ♥ Teach the child how to swim and water survival skills.
- ♥ The child must always wear a standard helmet every time on a motorcycle.
- ♥ The child must sit on a rear safety seat when in a car.
- ♥ Do not let the child cross the street by him/herself.

Risks and Guides for Prevention of Early Childhood Injuries

1. Falls and Hits

- ♥ Never leave the baby alone on high places such as bed, table, and couch.
- ♥ Baby walker is not necessary as it induces delayed walking, easily turns over and falls down from heights.
- ♥ Safety gate should be installed to the stairs, opened only inward to our body, and always locked.
- ♥ Rails of stairs and balconies should be no more than 9 cms. apart to prevent baby's head and body passing through.
- ♥ Windows should be 1 meter off the floor to prevent baby from climbing up.
- ♥ Sharp corners and edges of the furniture should be padded, instrument is in place to prevent the door pinching hands.
- ♥ Television, table, cabinet, and shelf are not strong enough for the baby to climb up so they should be fastened to the wall to prevent from falling onto the baby.
- ♥ Frequently check the fence gate especially the heavy sliding gate to prevent from falling onto the baby if climbing up.

2. Shaking and bouncing the baby

- ♥ Never shake the baby as it may cause bleeding around the brain and the retina of the eye, cognitive impairment, vision loss or even death.
- ♥ People who are angry or irritable should not take care of the baby alone.

3. Suffocation

- ♥ Do not leave the child playing alone with small toys even in a short while to prevent the child putting them into the mouth.
- ♥ Do not feed the child with hard food such as nuts, corns or large pieces of food hard to chew such as sausage.
- ♥ Do not place plastic bags near the child to prevent covering the head or swallowing.
- ♥ Pacifier or false nipples are not necessary to use, choose a standard one but without a string or cord as it might strangulate and cause suffocation.
- ♥ Tinkle toys must have both ends bigger than 3.5 x 5 cms. to prevent the child putting into the mouth that causes vomiting and choking.
- ♥ Choosing standard toys for chewing training, and cleaning it every time.
- ♥ The toys must not smaller than a cylinder of 3.17 cms. in diameter and 5.70 cms. long.
- ♥ Do not let a child less than 4 years playing unblown balloons or pieces of torn ballon.
- ♥ Do not let a child playing toys with long strings to wear around the neck that might cause strangulation.

4. Child sleeping

- ♥ Bedding or cribs should be provided separately for a child and the mattress should be not too soft.
- ♥ Using flat and fairly firm mattress with small flat pillow.
- ♥ If the child sleeps on the floor, make sure it is free of objects that could fall onto the child.
- ♥ The child should always sleep on the back not on the tummy as his/her mouth and nose may be pressed.
- ♥ Use the cradle with guard rails, each and no more than 3 cms. gap between the mattress and each side of the cradle.

5. Scalds and electrical hazard

- ♥ Do not hold or leave a child sit on the lap while carrying hot stuff.
- ♥ Electrical sockets should be installed 1.5 meters off the floor, out of reach of children or with covering device.
- ♥ Do not place hot stuff such as pots on the floor or on the table with tablecloth hanging edges.
- ♥ Safety gates should be installed to prevent the child entering kitchen by himself.
- ♥ Hot pot's electric wires should be kept out of reach of children.
- ♥ Having ground wire connection and automatic power cut.

6. Animal Bite

- ♥ Do not leave the child alone with dogs, cats or other pets.
- ♥ Pets should be received rabies vaccination on schedules.
- ♥ Teach the child not to disturb animals by holding ears and tails, grabbing food plate and toys.
- ♥ Teach the child not to play with unknown dogs, cats or puppies in presence of their mothers.
- ♥ Watch around the house against nestling of poisonous insects or animals such as bees wasp, hornet, centipede, and red ant.

7. Traffic Accident

- ♥ Do not carry a child less than 9 months on bicycle.
- ♥ Do not carry a child less than 2 years on motorcycle.
- ♥ Children aged 2 years or more must wear a helmet every time on motorcycle.
- ♥ A child seat should be installed at the rear seat (a child less than 2 years facing to the rear), if without rear seats, fasten the car seat on the side of the driver seat, do not use safety airbag.
- ♥ Do not leave a child alone in the car.
- ♥ Before moving the car every time, make sure that a child is not around.
- ♥ Choose the helmet that meets industrial standard.
- ♥ In case carrying a child older than 9 months on a bicycle, a special seat for the child must be firmly fastened to the bicycle, while the child wears seat belt and helmet, with footboard to protect the foot from the spokes.

8. Drowning

- ♥ Do not leave a child alone in a bathtub or basin even for a short while, as a child can be drown in the water only 5 cms. height.
- ♥ Limit a safe place for the child to play without access to water source.
- ♥ A child aged 1 year and 6 months can be taught about water hazard and to avoid approaching water source.
- ♥ A child aged 2 years onwards should be taught how to float when falling into the water and how to swim in a short distance.
- ♥ A child aged 6 years or 72 months should be able to swim with water survival skills.
- ♥ Pour the water out of the container and cover with a lid.

9. Drugs, chemical substances and toxicants

- ♥ Drugs, chemical substances and toxicants in the house that can be poisonous to the child must be kept completely, with safety lid, and out of reach of the child.
- ♥ Do not put toxicants in food or drink like containers such as soft drink or sport drink bottle, and never put the toxicants on the same place of food and drinks.
- ♥ The leftover toxicants should be discarded and never keep it in the house.

10. Related aids

- ♥ In case of choking by a particle, bring the child to the hospital immediately.
- ♥ First aid for the scalding, use cold or clean water to soak and clean the wound with lower temperature then dress the wound before bringing the child to see the doctor. Do not apply fish source, toothpaste or other things on the wound as it could be infected.
- ♥ First aid for drowning, apply mouth to mouth resuscitation and cardio-pulmonary resuscitation, then bring the child to the hospital immediately. Do not carry the child across the shoulder, or jump around the place, or put the child on the upside-down pan to let out the water, as the child will suffocate even longer.
- ♥ If the child swallowed a toxicant, contact the Poison Center at Tel. 02-201-1083, 02-246-8282 for an advice of proper first aid, and bring the child to the hospital immediately.

(Compiled from the document prepared by Asst.Prof. Adisak Plitpongpanpim, Faculty of Medicine, Ramathibodi Hospital).

Focus on Safety, No Injuries for Thai Children.

Child's Vaccination Record (recorded by health personnel)

Vaccine	Recommended Age for Vaccination	Date, Month, Year/ Place of Vaccination		
		1 st Time	2 nd Time	3 rd Time
♥ BCG	■ At Birth			
♥ Hepatitis B	■ At Birth ■ 1 month (specific for the child whose mother is a carrier)			
♥ OPV	■ 2 Months			
♥ Combined dose of DTP, Hepatitis B (DTP-HB)	■ 4 Months ■ 6 Months			
♥ MMR	■ 9 Months ■ 2½ Years			
♥ JE	1 Years (2 shots with 1 month apart from JE)			
♥ OPV	■ 1½ Years			
♥ Combined dose of DTP	■ 4½ Years			
♥ dT	■ 12 Years (grade 6)			
♥ Vaccine				
♥ Vaccine				
♥ Vaccine				
♥ Vaccine				
♥ Vaccine				

Notes

1. If unable to have the child for vaccination on schedule, please later bring the child along with this handbook to see health personnel soonest.
2. According to the program recommended by Ministry of Public Health, additional vaccination to the above table will be provided for every student as follows:
 - 2.1 The 1st grade students receive the 2nd dose of combined MMR vaccines.
 - 2.2 The 6th grade students receive combined dose of dT vaccines.
3. Please constantly keep this handbook for the use of disease prevention, school enrollment and employment application in the future.

Source: Bureau of General Communicable Disease, Department of Diseases Control



Appointment Date for the Next Health Exam

Date/Month/ Year	Time	Activities	Place
		■ Hepatitis B	
		■ OPV	
		■ Combined dose of DTP and Hepatitis B	
		■ Combined dose of MMR	
		■ OPV	
		■ Combined dose of DTP	
		■ JE	
		■ Combined dose of dT	
		■	
		■	
		■	
		■	
		■	
		■	
		■	
		■	

Make every visit on appointment date for your healthy, smart child.

Sample

Recommendation for practice

The birth certificate form (T.r. 1/1) in this handbook that is signed by health personnel to certify the birth of the child is neither an official birth certificate, nor a birth registration. Parents should contact the district or local registration officer at the district/sub-district office, municipality office, or Bangkok Metropolitan Administration Office to register the birth of the child in order to get an official Birth Certificate and to add the child's name into the household record within 15 days after birth. Parents should bring with them this handbook, a copy of the household record, and the identification card of the child's mother or father when registering for the official Birth Certificate. If you register later than 15 days, you as the parents, will be fined 1,000 baht by the law.

Documents required for official birth registration:

1. A copy of the household record.
2. Identification card of the child's mother or father.
3. Marriage license of the parents (if any).



For your child's well-being:



If the mother is physically and mentally healthy, then the child will be healthy and happy.

Good physical and mental health of mother comes from good care of the mother by the father.



World Health
Organization

The handbook is developed by Ministry of Public Health, Thailand with the support of World Health Organization (WHO) and European Union (EU).

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