

# Karata ya botsogo jwa ngwana

Welfare Clinic Card



### GENERAL INFORMATION

GENTERAL IN ORMATION	<b>V</b>				
Child's Name / Leina la ngwana	Sex			Present Postal Address:	
Child's welfare card number  ANC Number  Mother's Name / Leina la ga Mmaagwe:  Mother's Age/Dingwaga tsa ga Mmaagwe:  Father's Name / Leina la ga Rraagwe:	Date of Birth	Facility / Kokelo	ng 🗀	Physical Address:  Ward / Kgotla:  Village / Town:  Tel / Mogala  Permanent Address:  Home Village / Legae  Ward / Kgotla:  Home address / Legae  Home address / Legae	
Guardian / Motlhokomedi:	Date first seen at the He	aith racility		Reasons for special care / mabaka a tlhok e e faphegileng	
***************************************				Twin or more	
Dirth Dogistration Number				Destitute	
Birth Registration Number				Orphan	100
				Teen mother	
Date of Registration/				Alcohol	
				Disabled	2012
	APGAR Score	T:	- AMARIA	Underweight(<2.5kg)	1
	Ardan Score	Time		Disabled parent	
		1 min 5 min	10 min	TB	
			(model)	Others (eg: allergy)	
Schedule Of Imi	munisation / L	enaneo	la Ti	hulaganyo ya Mekento	

Did the mothe	er get TT	Yes No	What dose:	TT1	TT2	TT3	TT4	TT5
At birth/	B.C.G Mokento wa kgotlholo e tona	1 dose/	BCG Sca	r (tick) Yes	] No [	If no, Reva	ccinate imn	nediately
At birth, 2 & 9 months	Hepatatis B  Mokento wa bolwetse jwa sebete	1st dose (at birth)  Date/	2nd dose			3rd dose (9		
At 2,3,4 months & booster at 18 months	D.P.T.  Mokento wa dikodu tse di tshweu, sehuba sa monganganyego, kitlano ya ditlhaa	1st dose (2 mths) Date/	2nd dose			3rd dose (4 Date/	mths)	Booster (18 mths)
	Polio Mokento wa go swa mhama	1st dose (2 mths) Date/	2nd dose			3rd dose (4	,	Booster (18 mths) Date//
9 months	Measles Mokento wa mmokwane	dose (9 mths) Date/	and d					

Minimum interval between 1st, 2nd and 3rd DPT, Polio and Hepatitis B doses is 4 weeks (28 days)

## Special Immunisation Campaigns / Letsholo la Mekento e e Faphegileng

Name of campaign		Name of campaign
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## Vitamin A Supplementation Schedule / Lenaneo la Kotla ya Vitamin A

	MOTHERS AFTER DELIVERY	CHILDREN 0 -36 MONTHS						
Vitamin A dose	200,000 I.U.	Below 6 mths**	At 9 mths 100,000 i.u	At 18 mths 200,000 i.u	At 24 mths 200,000 i.u	At 30 mths	At 36 mths 200,000 i.u	
Date / Letsatsi	100,000 1.0			//				
	rval between doses is 6 months  A SA AMUSIWENG/ONLY THOSE WHO A	RE NOT BREA	STFED.	At 42 mths 200,000 i.u	At 48 mths 200,000 i.u	At 54 mths 200,000 i.u	The state of the s	

### Screening Scheme for Developmental Delay/ Tshekatsheko ya go gola ga ngwana

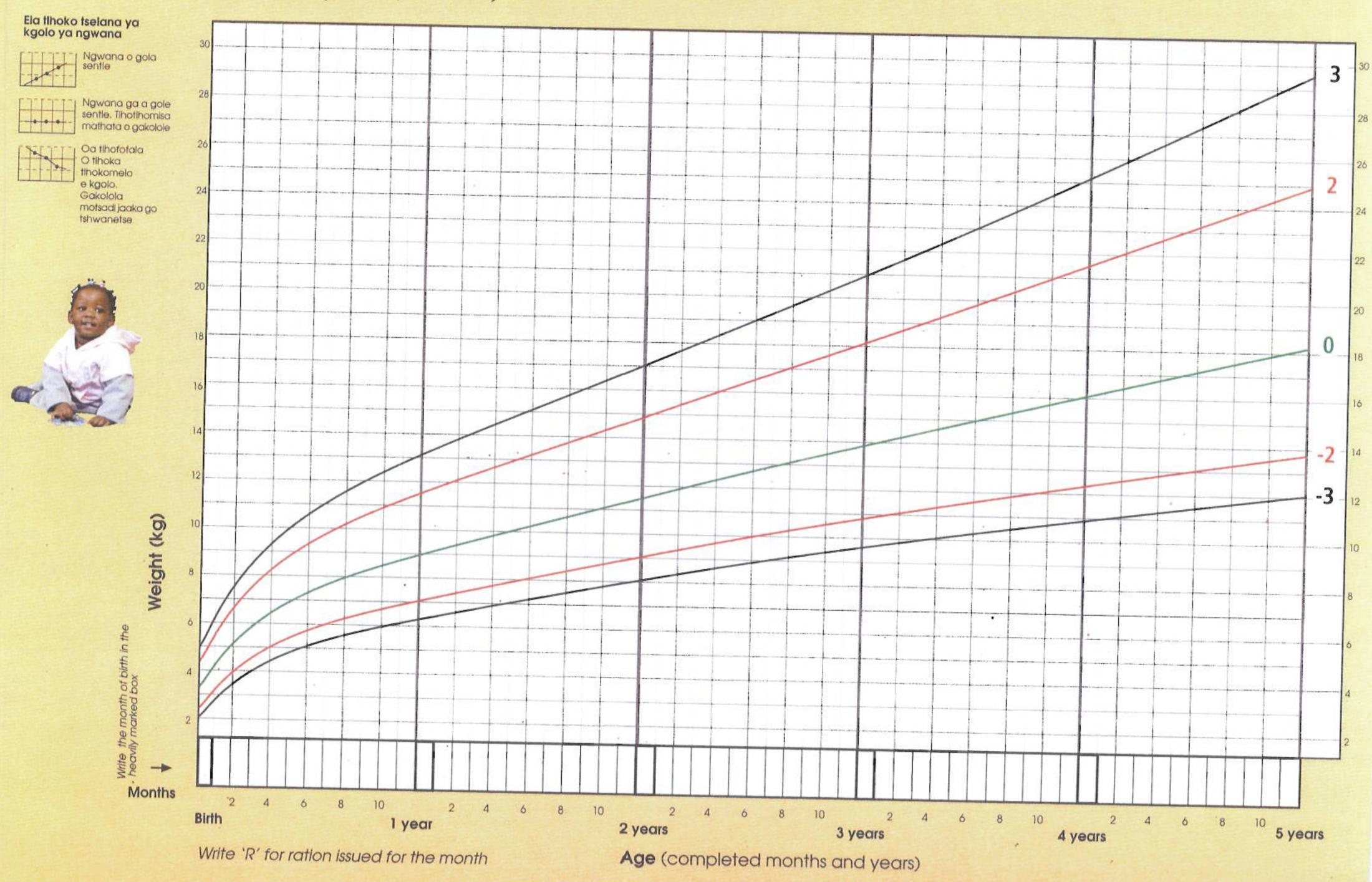
Age (Months)	Gross motor	Fine motor	Social skills	
				Language
3	Supports own weight on forearms	Opens hands spontaneously	Smiles appropriately	Coos Laughs
	YES NO	YES NO	YES NO	YES NO
			nicasian de processors de	MARKATON NEEDNESTANDES
6	Sits momentarily without support	Transfers objects from one hand to the other	Shows likes and dislikes	Babbles
	YES NO	YES NO	YES NO	YES NO
9	Pulls to stand	Pincer Grasp (able to pick objects with thumb and middle finger)	Enjoys game whereby adult repeatedly shows and hides face with a cloth(peek - a boo)	Imitates sounds
	YES NO	YES NO	YES NO	YES NO
12	Walks with support	Releases an object on demand	Comes when called	Says 1 -2 meaningful words
	YES NO	YES NO	YES NO	YES NO
18	Climbs stairs or walks up sloping ground with support	Feeds self from a spoon	Mimics actions of other words	Says at least six words
	YES NO	YES NO	YES NO	YES NO
24	Runs	Builds a tower of six blocks or cans	Plays with others	Says 2-3 word sentence
	YES NO	YES NO	YES NO	YES NO

This table provides guidelines regarding the upper range of normal skills.

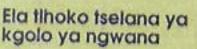
Please refer any child who fails to attain any of these milestones to a doctor for further evaluation and neuro - development assessment

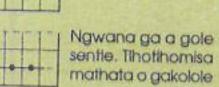
# Weight-for-age GIRLS

Birth to 5 years (z-scores)



Birth to 5 years (z-scores)

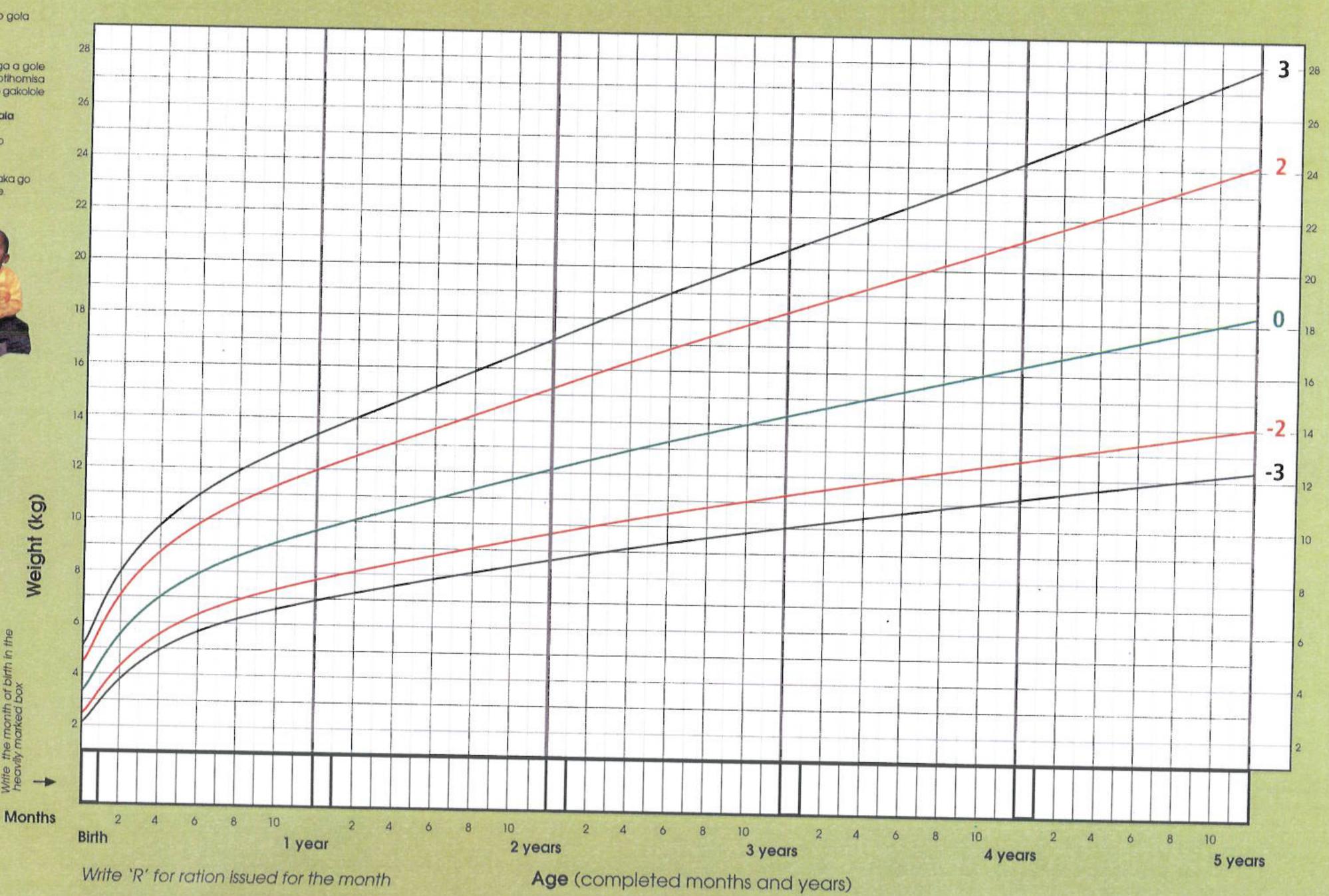




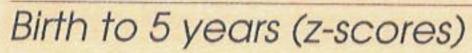
Oa tihotofala O tihoka tihokomelo

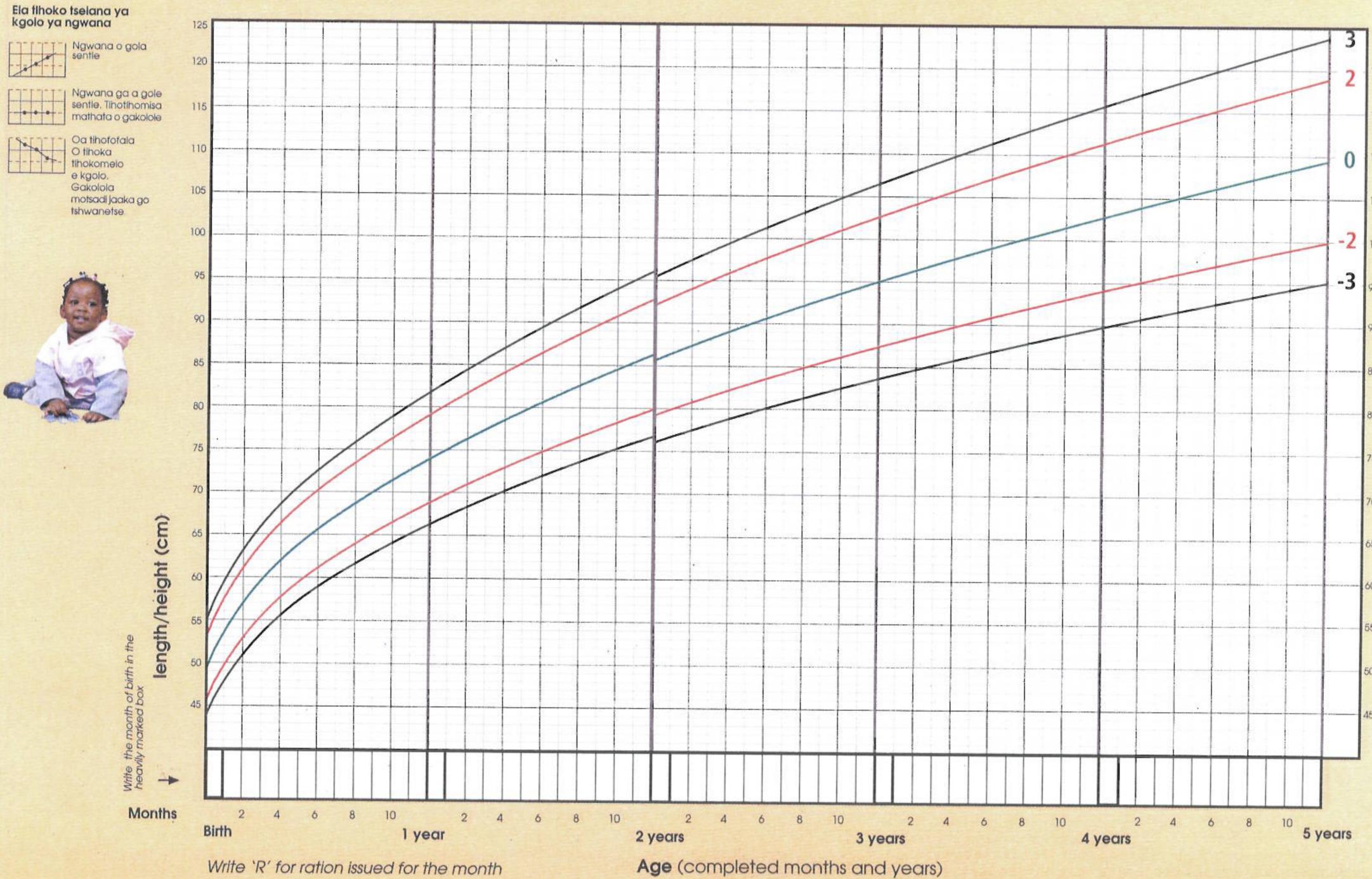
tihokomelo e kgolo. Gakolola motsaal jaaka go tshwanetse





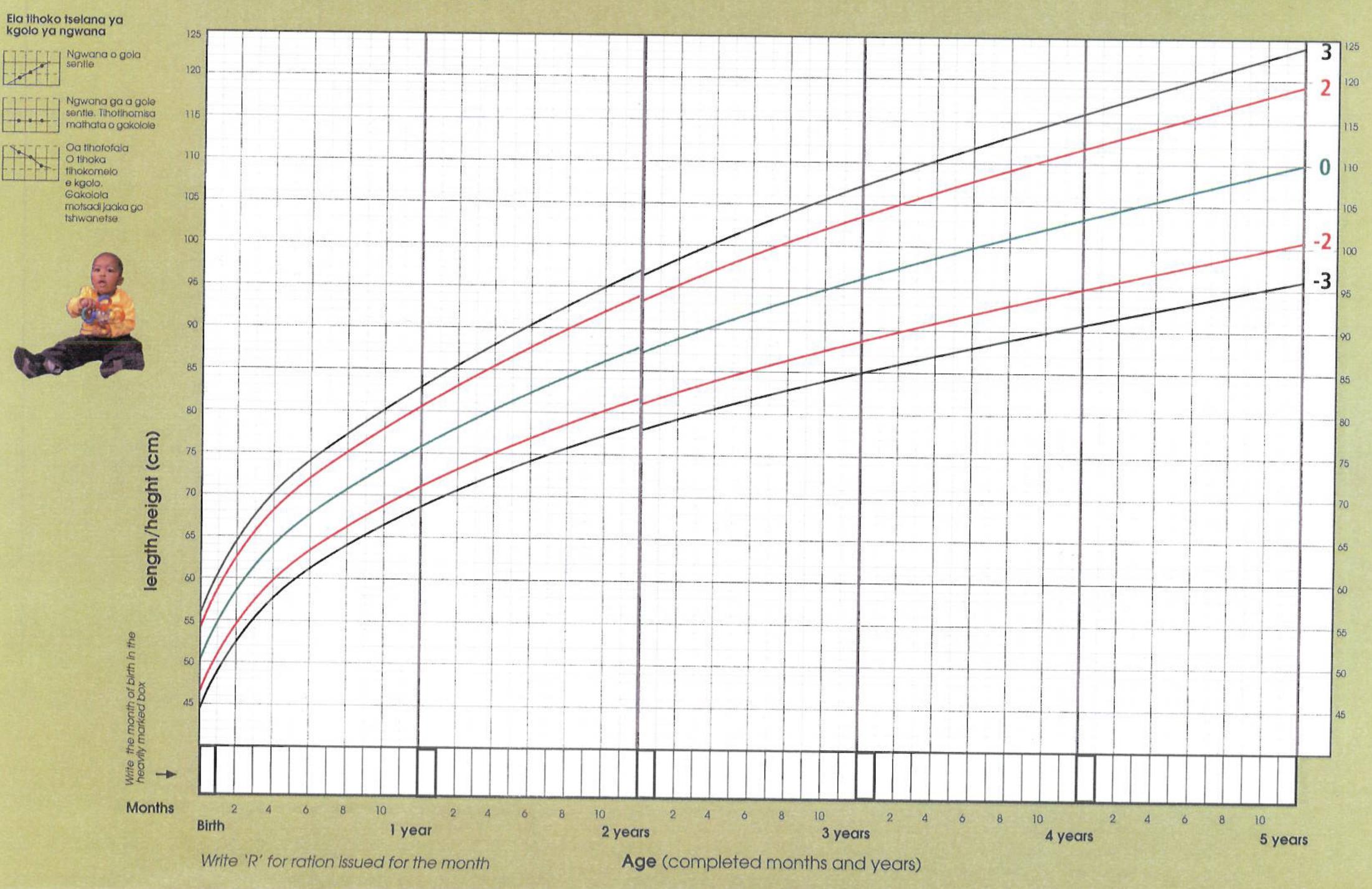
## Length/height-for-age GIRLS





## Length/height-for-age BOYS

Birth to 5 years (z-scores)



## LIST OF FINAL DIAGNOSIS (INTERCURRENT ILLNESS)

Date	Treatment Centre	Diagnosis, Impression	Full Name
			Barrier Charles Street

### PMTCT FOLLOW-UP RECORD

PMTCT No.	/	/	/			/
Distri	ct Facility Type	/ Facility Number	i	Mother's No. Year ogbook	Multiple	births
Mother*	2 - 1			Infant		
When did the mother have HI	2) Dur 3) At o	ring pregnancy delivery t delivery		ZDV start date / / Was ZDV Given within 48 hrs of b	oirth Yes	No 🔲
Results of HIV Test:	Negative	Positive		Was NVP given the first 72hrs of b	pirth Yes	No
ZDV start date//			HOP	Cotrimoxazole start date		
Duration of ZDV given (in wee	ks)					
Was the mother given NVP du	ring labour?	Yes No				
Duration of HAART (3- drug A	RV therapy)					
Did mother recieve infant feed	ing counselling?	Yes No				
Laboratory Testing Test						
PCR	Date due *	Date done		esults		
			P	ositive Negative		
Repeat PCR (Breastfed infants should return for a repeat test 6 weeks after last breastmilk)		1	P	ositive Negative		
Elisa or rapid test (Circle appropriate test)		11	Р	ositive Negative		
* Upon discharge, the healt that the infant/child shou			d write	in the actual date (DD/MM/YY)		
Date referred for ARV therapy		1 1				
Place referred						

Date ARV therapy Started

### Infant feeding (evaluate every month for at least 1 year)

Date	Age (months)	Feeding method*	Infant formula tins issued (if replacement feeding)	Problems noted	Comments / Action Taken
	LIGHT				
			Pro Charles States		TO BE THE REAL PROPERTY.
				MITHER TEXTS OF THE PARTY OF TH	
		DITENTIFE THE PARTY			
			THE REPORT OF THE PARTY OF THE		
	G. Yakana				
					AND THE REAL PROPERTY
	MA WAR				

ease write **EBF** for Exclusive breastfeeding, **EFF** for Exclusive formula feeding or **MF** for mixed feeding, and indicate when solid food was begun. HIV exted mothers who are breastfeeding are encouraged to exclusively breastfeed for up to 6 months with abrupt cessation and safe transition to formula ding.

eeding bottles can be dangerous to a child's health if they are not cared for properly as they are easily contaminated. Nothers are encouraged to use a cup to feed their babies

you decide to bottle-feed, clean feeding bottles in boiling water and soap, giving particular attention to the teat where germs are likely to collect. Use a brush to clean the teat and bottle. Both bottle and teat should be submerged covered in boiling water) for 10 minutes before use.

## **OUT PATIENT VISIT**

Date	Treatment	Complaint, diagnosis, treatment Investigations and referal	Full Name	
* 57.50	to and the name of the			

### FEEDING RECOMMENDATIONS FOR INFANTS AND YOUNG CHILDREN

### 0-6 MONTHS

6 MONTHS - 12 MONTHS

### 12 MONTHS - 2 YEARS

### 2 YEARS - OLDER

#### **HIV-NEGATIVE MOTHERS**

 Breastfeed as often as the child wants, day and night, at least 8 times in 24 hours without giving any other food or drink even water (exclusive breastfeeding)

### HIV-POSITIVE AND OTHER MEDICALLY INDICATED CONDITIONS

- Formula feed day and night at least 8 times in 24 hours without giving any other food or drink even water (exclusive formula feeding)
- Do not give other foods or fluids including water.

- Milk feed as often as the child wants.
- Introduce one food at a time to prevent confusion and help identify allergies
- Give adequate servings of nutritious foods e.g.
  - Tsabana
  - Soft porridge with peanut butter/ margarine/milk
  - Mashed pumpkin, potatoes with mashed vegetables, beans, soup, gravy, pounded meat
  - Milk products.
  - Fruits e.g banana and fruit juice

### Feed a child at least 5 times per day while continuing with milk feeds

 Give small frequent meals if the child is ill.



- Continue milk feeds at least two times a day
- Give five meals a day:
  - 3 from famliy meals and two additional servings.
  - Finger foods e.g. fruits and vegetables
  - If possible include eggs,meat and fish.



- Give family foods at least 3 meals each day
- Also, twice daily, give nutritious foods between meals, such as:
  - Foods available for the season
  - Groundnuts
  - Nyebu
  - Bread
  - Fruits e.g. melon, oranges etc.
  - Mageu/milk/sour milk

Note: Fruits should be given without seeds

#### NOTE

## DITSELANA TSA GO JESA MASEA LE BANA BA BANNYE

NGWANA YO E LENG GONE A
BELEGWANG GO YA A LE DIKGWEDI TSE
THATARO (0-6 months)



### BOMME BA BA SENANG MOGARE WA HIV

• Amusa ngwana nako tsotlhe fa a batla, mo amuse bosigo le motshegare. Mo amuse makgetlho a a seng ko tlase ga borobabodedi ka letsatsi o sa mofe sepe gape le one metsi tota

### BOMME BA BA NANG LE MOGARE WA HIV LE MAKOA A MANGWE.

- Siela ngwana mashi a dithini fela bosigo le motshegare makgetho a a seng ko tlase ga borobabobedi ka letsatsi. Se mofe sepe gape le one metsi tota.
- Se jese ngwana le fa e le go mo siela sepe fela kwa ntle ga mashi.

DIKGWEDI TSE THATARO GO YA KO NGWAGENG



- Siela ngwana mashi nako tsotlhe go ya ka keletso ya gagwe.
- Simolola go jesa ngwana mofuta
   o le mongwe wa dijo go hema
   ketsaetsego le gore o tle o lemoge
   tse di sa mo tseeng sentle.
- Jesa ngwana dijo ga tlhano ka letsatsi
- Tswelela go amusa ngwana kana go mo nosa mashi a thini
- Mo fe dijo tse di nang le dikotla jaaka:
  - Tsabana
  - motogo o o nontshitsweng ka botoro ya manoko (peanut butter) mafura le botoro (magarine) kgotsa mashi a lebele
  - Dijo tse di ritilweng jaaka maphutse, ditapole/ merogo/ dinawa.
- Seswaa/ mae/ tlhapi/ dijo tse di dirilweng ka mashi.
- Maungo jaaka dibanana le matute a maungo a mangwe.
- Fa ngwana yo o lwalang dijo tse dinnye
   kgapetsakgapetsa

NGWAGA GO YA DINGWAGENG TSE PEDI



- Tswelela go siela ngwana mashi ga bedi ka letsatsi
- Fa ngwana dijo ga tihano ka letsatsi (mo fe dijo tsa mo lapeng gararo ka letsatsi o ntse o mo fa tse dingwe fa gare, gore a seka a tshabelelwa ke tiala.

#### Dikai:

- Dijo tse di ritilweng le tse di boleta jaaka motogo wa mabele kgotsa phaletshe, dinawa, ditapole, letihodi le merogo.
- Fa go kgonega mo fe mae, nama le tihapi
- Maungo le merogo

DINGWAGA TSE PEDI LE GO FETA



- Fa ngwana dijo tsa mo lapeng gararo ka letsatsi
  - -Mo fe dijo tse dingwe tse di nang le dikotla gabedi ka letsatsi jaaka:
  - -Tsabana/phaleche
- -Dijo tse di bonwang ka nako ya letihafula
- -Manoko/dinawa tsa mefuta yotihe
- -Nyebu
- -Maungo a a tshwanang le magapu, dinamune le tse dingwe
- -Mageu/mashi/madila
- -Borotho

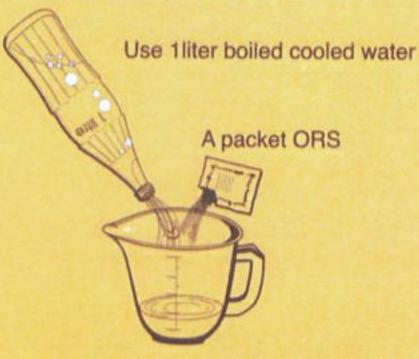
### FLUID RECOMMENDATION DURING SICKNESS

#### FOR ANY SICK CHILD

- Give milk feeds more frequently
- If taking other foods increase fluids.
   Give fruit juices, rice water, samp water, drinks, or clean water.
- Add other foods that the child can take



### FOR A CHILD WITH DIARRHOEA PREPARE THE ORS MIXTURE THIS WAY



- Dissolve the ORS mixture in the water and give the child
- Use within 24 hours

#### FOR A CHILD WITH DIARRHOEA

(the child must be seen by a health worker)

#### 0-6 months

- Breastfeed more frequently and longer day and night
- If formula feeding, give small frequent feeds.
- Give ORS Solution

#### 6 months - 5 years

- Milkfeed more frequently
- Give ORS Solution
- Give food based fluids, such as enriched soft porridge, milk, soup, rice/ samp water, fruit juice, yoghurt drinks
- · Give extra fluids as much as the child will take.
- Continue giving extra fluids until diarrhoea stops.

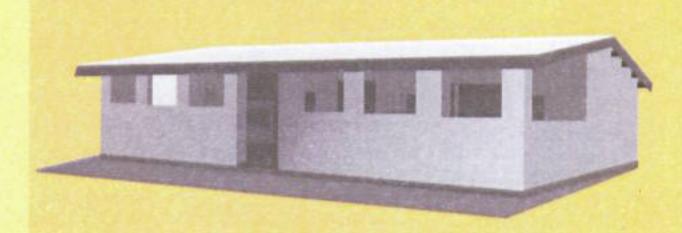
Note: If a child vomits, wait for 10 minutes then give fluids slowly e.g. a spoonful every two to three minutes.

### FOR A CHILD WITH PERSISTENT DIARRHOEA FOR MORE THAN 2 WEEKS

- The child must be seen by a doctor immediately
- If still breastfeeding, give more frequent, longer breastfeeds, day and night.
- If taking other milk:
  - replace with fermented milk products,
     such as sour milk, yoghurt OR
  - replace with fermented soft porridge, mageu,

OR

- replace half the milk with nutrient-rich semisolid food.eg soft porridge, mashed potatoes
- For other foods follow feeding recomendations for the child's age.



## WHEN TO TAKE A CHILD TO A HEALTH FACILITY IMMEDIATELY

#### FOR ANY SICK CHILD

- If not able to drink
- If becomes sicker
- If develops fever
  - If vomiting

### FOR A CHILD WITH COUGH

- Difficulty in breathingBreathing too fast
- NB: Do not give cough syrup without doctors advice.

### FOR A CHILD WITH DIARRHOEA

- Blood in stool
- If drinking poorly
- Persistent diarrheoa

### FOR YOUNG INFANT

(Less than two months old)If breastfeeding poorly

If any of the above signs

Always remember to keep two packets of ORS at home and check when your child is due for immunisations and Vitamin A supplimentation.

### KAELO YA GO SIELA NGWANA YO O LWALANG

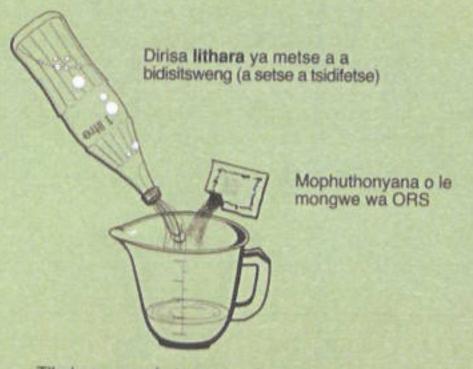
### NGWANA YO O LWALANG

- Mo siele mashi kgapetsakgapetsa
- Fa a simolotse go ja mo o keletse dijo tse di metsi jaaka: matute a maungo, kgodu ya raese, kgodu ya setampa, metsi.
- Mo lekise dijo tse dingwe tse a diratang.



### DIRA MOTLHAKANYO WA LETSHOLOL O JAANA

Motlhakanyo o o diretsweng ruri



- Tihakanya mophutonyana o le mongwe wa ORS le lithara ya metse
- Dirisa motihakanyo mo le tsatsing le le lengwe

NGWANA YO O TSHOLOLANG (O tshwanetse go bonwa ke ba bongaka)

Ngwana yo e leng gone a tsholwang go ya a le dikgwedi tse thataro (0-6 months)

- Mo amuse kgapetsakgapetsa bosigo le motshegare
- Fa a nwa mashi a dithini mosiele ka selekanyo se sennye kgapetsakgapetsa
- Mo siele motswako wa letshololo (ORS)

### Ngwana yo o dikgwedi di thataro go ya a le dingwaga tse tlhano (6months - 5 years)

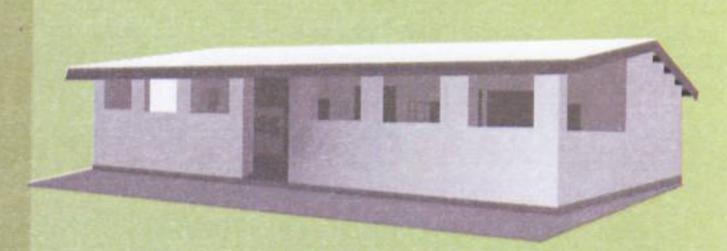
- Mo siele mashi kgapetsakgapetsa
- Mo siele motswako wa letshololo (ORS)
- Mofe dijo tse di metsi jaaka motogo o o nonotshitsweng ka botoro/ mafura, mashi, supu, matute a maungo, yoghurt le kgodu ya raese / setampa
- Nosa ngwana kgapetsakgapetsa fa a tsholola ka go ka somarela botshelo jwa gagwe
- Tswelela o mo siela metsi le matute/ kgodu go fitlhelela letshololo le ema.

#### Ela tlhoko:

Fa ngwana a a kgwa ema metsotso e le lesome pele ga o mo nosa gape. Mo fe go le go nnye morago ga metsotso e meraro.

### Ngwana yo otshololang ka lobaka

- Dira gore ngwana a bonwe ke a bongaka.
- Fa a sa amusiwe ka lebele, mo fe madila kgotsa yokate, motogo wa ting o kopantswe le mashi
- Mo fe dijo tse dingwe tsa ngwana wa dingwaga tsa gagwe



### O KA ISA NGWANA KWA KOKELWANENG KA POTLAKO LENG?

#### FA A LWALA

- A sa kgone go nwaA gataletswe
  - A gotela
  - · A kgwa

### FA A GOTLHOLA

A hema ka thataA hema ka pela

Ela tlhoko: Se fe ngwana molemo wa sehuba o sa laelwa ke ba bongaka

#### FA A TSHOLOLA

- A tsholola mantle a a nang le madi
  A sa kgone go nwa metsi sentle
- A tsholola lobaka la beke tse pedi

### FA A LE KO TLASE GA DIKGWEDI TSE PEDI

A sa anye sentle

 A supa dikai tsotlhe tse di boletsweng fa godimo

Ela tlhoko: Fa ngwana a a kgwa, leta sebakanyana sa metsotso e le lesome mme o mo siele ka bonya selekanyo sa leswana morago ga metsotso e mebedi kgotsa e le meraro