



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



## ASSESS

### ASK THE MOTHER WHAT THE CHILD'S PROBLEMS ARE

- Determine if this is an initial or follow-up visit for this problem.
- If follow-up visit, use the follow-up instructions on **TREAT THE CHILD** chart.
- If initial visit, assess the child as follows:

### CHECK FOR GENERAL DANGER SIGNS

- ASK:**
- Is the child able to drink or breastfeed?
  - Does the child vomit everything?
  - Has the child had convulsions?
- LOOK:**
- See if the child is lethargic or unconscious.

A child with any general danger sign needs **URGENT** attention; complete the assessment and any pre-referral treatment immediately so referral is not delayed.

## CLASSIFY

## IDENTIFY TREATMENT

USE ALL BOXES THAT MATCH THE CHILD'S SYMPTOMS AND PROBLEMS TO CLASSIFY THE ILLNESS.

### THEN ASK ABOUT MAIN SYMPTOMS:

#### Does the child have cough or difficult breathing?

##### IF YES, ASK:

- For how long?

##### LOOK, LISTEN:

- Count the breaths in one minute.
- Look for chest indrawing.
- Look and listen for stridor.

CHILD MUST BE CALM

#### Classify COUGH or DIFFICULT BREATHING

- If the child is:
- 2 months up to 12 months: **Fast breathing is: 50 breaths per minute or more**
  - 12 months up to 5 years: **40 breaths per minute or more**

#### Does the child have diarrhoea?

##### IF YES, ASK:

- For how long?
- Is there blood in the stool?

##### LOOK AND FEEL:

- Look at the child's general condition. Is the child:
- Lethargic or unconscious? Restless and irritable?
  - Look for sunken eyes.
  - Offer the child fluid. Is the child:
    - Not able to drink or drinking poorly?
    - Drinking eagerly, thirsty?
  - Pinch the skin of the abdomen. Does it go back:
    - Very slowly (longer than 2 seconds)?
    - Slowly?

#### Classify DIARRHOEA

#### For DEHYDRATION

and if diarrhoea 14 days or more

and if blood in stool

#### Does the child have fever?

(by history or feels hot or temperature 37.5°C\* or above)

##### IF YES:

Decide Malaria Risk: High Low

##### THEN ASK:

- Fever for how long?
- If more than 7 days, has fever been present every day?
- Has the child had measles within the last 3 months?

##### LOOK AND FEEL:

- Look or feel for stiff neck.
- Look and feel for bulging fontanelle.
- Look for runny nose.
- Look for signs of MEASLES
  - Generalized rash and
  - One of these: cough, runny nose, or red eyes.
- Look for mouth ulcers. Are they deep and extensive?
- Look for pus draining from the eye.
- Look for clouding of the cornea.

#### Classify FEVER

High Malaria Risk

Low Malaria Risk

If the child has measles now or within the last 3 months:

\* This cutoff is for axillary temperatures; rectal temperature cutoff is approximately 0.5°C higher.  
\*\* Other causes of fever include cough or cold, pneumonia, diarrhoea, dysentery and skin infections.  
\* Other important complications of measles - pneumonia, stridor, diarrhoea, ear infection, and malnutrition - are classified in other tables.

# If referral is not possible, see the section **Where Referral Is Not Possible** in the module **Treat the Child**.

#### Does the child have an ear problem?

##### IF YES, ASK:

- Is there ear pain?
- Is there ear discharge? If yes, for how long?

##### LOOK AND FEEL:

- Look for pus draining from the ear.
- Feel for tender swelling behind the ear.

#### Classify EAR PROBLEM

# If referral is not possible, see the section **Where Referral Is Not Possible** in the module **Treat the Child**.

### THEN CHECK FOR MALNUTRITION

#### LOOK AND FEEL:

- Look for visible severe wasting.
- Look for oedema of both feet.
- Determine weight for age.

#### Classify NUTRITIONAL STATUS

### THEN CHECK FOR ANAEMIA

#### LOOK:

- Look for palmar pallor. Is it: Severe palmar pallor? Some palmar pallor?

#### Classify ANAEMIA

### THEN CHECK THE CHILD'S IMMUNIZATION \*, PROPHYLACTIC VITAMIN A & IRON-FOLIC ACID SUPPLEMENTATION STATUS

IMMUNIZATION SCHEDULE:	AGE	VACCINE
	Birth	BCG + OPV-0
	6 weeks	DPT-1+ OPV-1(+ HepB-1**)
	10 weeks	DPT-2+ OPV-2(+ HepB-2**)
	14 weeks	DPT-3+ OPV-3(+ HepB-3**)
	9 months	Measles + Vitamin A
	16-18 months	DPT Booster + OPV + Vitamin A
	60 months	DT

PROPHYLACTIC VITAMIN A
Give a single dose of vitamin A:
100,000 IU at 9 months with measles immunization
200,000 IU at 16-18 months with DPT Booster
200,000 IU at 24 months
200,000 IU at 30 months
200,000 IU at 36 months

PROPHYLACTIC IFA
Give 20 mg elemental iron + 100 mcg folic acid (one tablet of Pediatric IFA or 5 ml of IFA syrup or 1 ml of IFA drops) for a total of 100 days in a year after the child has recovered from acute illness. If:
> The child 6 months of age or older, and
> Has not received Pediatric IFA Tablet/syrup/drops for 100 days in last one year.

\* A child who needs to be immunized should be advised to go for immunization the day vaccines are available at AW/SC/PHC  
\*\* Hepatitis B to be given wherever included in the immunization schedule

### ASSESS OTHER PROBLEMS

MAKE SURE CHILD WITH ANY GENERAL DANGER SIGN IS REFERRED after first dose of an appropriate antibiotic and other urgent treatments.  
Exception: Rehydration of the child according to Plan C may resolve danger signs so that referral is no longer needed.

# If referral is not possible, see the section **Where Referral Is Not Possible** in the module **Treat the Child**.