## logo of the Government of MalawiOTP Monitoring Card

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| **ADMISSION: Outpatient Care for the Management of SAM without Medical Complications** | | | | | | | | | | | | | |
|  | | **Name** |  | | | | |  | | **Reg. No.** |  | | |
| **Date of admission** | | |  | | | |  | |  | | **NRU Admission** | **Yes** | **no** |
| **Village and T/A** | | |  | | | | |  | |  | **Readmission** | **Yes** | **no** |
| **Address details** | | |  | | | | |  | |  | **NRU refused** | **Yes** | **no** |
|  | **Sex (M/F)** | |  | | **Age (Months)** |  |  | |  | | **Main carer** |  | |
| **Distance to home (time travelled)** | | |  | |  |  |  | |  | | **Mother alive** | **Yes** | **no** |
| **Received general ration** | | | **yes** | **no** | **# brothers and sisters** | | |  | |  | **Father alive** | **Yes** | **no** |
| **ADMISSION ANTHROPOMETRY** | | | | | | | | | | | | | |
| **Admission criteria** | | |  | | | **Oedema** | No | | + | | ++ | +++ | |
| **Height (cm)** | | |  | **Weight (kg)** |  | **W/H**  **z-score** |  | | **MUAC (cm)** | | |  | |
| **MEDICAL HISTORY** | | | | | | | | | | | | | |
| **Appetite** | | | **good** | **poor** | **none** |  |  | | **Vomiting** | | **yes** | **no** | |
| **Diarrhoea** | | | **yes** | **no** |  | **Stools/day** | | | **1–3** | | **4–5** | **>5** | |
| **Breastfeeding** | | | **yes** | **no** |  |  | **Passing urine** | | | | **yes** | **no** | |
|  | | **Fever** | **yes** | **no** |  | **Family history of tuberculosis** | | | | | **yes** | **no** | |
|  | | **Cough** | **none** | **1 week** | **>2 weeks** |  |  | |  | |  |  |  |
|  | | **Swelling** | **none** | **feet** | **legs** | **other** | **How long swollen** | | | | **Days** | **weeks** | |
| **PHYSICAL EXAMINATION** | | | | | | | | | | | | | |
| **Temperature ͦC** | | |  |  |  | **Respir. Rate *(# min)*** | | | **<30** | | **30–39** | **40–49** | **50+** |
| **Palmar pallor** | | | **normal** | **pale** |  |  |  | | **Chest in drawing** | | | **Yes** | **No** |
|  | | **Mouth** | **normal** | **sore** | **candida** |  |  | | **Eyes** | | **normal** | **Sunken** | **discharge** |
| **Lymph nodes** | | | **normal** | **groin** | **neck** |  |  | |  | | **Ears** | **Normal** | **discharge** |
| **Skin changes** | | | **none** | **ulcers / abscesses** | **raw** | **peeling** |  | |  | | **Peripheries** | **Normal** | **cold** |
| **Dehydration** | | | **none** | **mild** | **moderate** | **severe** |  | | **Radial pulse** | | | **Present** | **absent** |
| **VACCINATIONS** | | | | | | | | | | | | | |
|  | | **BCG** | **yes** | **no** | **Measles** | **yes** | **No** | | **Polio** | | **yes** | **no** |  |
|  | | **ROTA** | **yes** | **no** | **PCV** | **yes** | **No** | | **Pentavalent** | | **yes** | **no** |  |
| **INVESTIGATIONS** | | | | | | | | | | | | | |
|  | | **HIV** | **reactive** | **non-reactive** | **EXPOSED** | **not tested** |  | |  | | **Malaria (RDT)** | **positive** | **negative** |
| **ROUTINE MEDICATION** | | | | | | | | | | | | | |
|  | |  | **date** | **dosage** | |  |  | | **date** | | **Dosage** | | |
| **Amoxycillin\*** | | |  |  | | **Albendazole**  **(2nd visit)** | | |  | |  | | |
| **Started on ART?** | | |  |  | |  | | |  | |  | | |
| **OTHER MEDICATIONS (SPECIFY)** | | | | | | | | | | | | | |
|  | | |  |  | |  | | |  | |  | | |
|  | | |  |  | |  | | |  | |  | | |
| **Outcome from stabilisation in NRU (Phase 1/Transition)** | | | | | | | | | | | | | |
| **Discharge outcome** | | | **OTP** | **defaulter** | **died** | **non-cured** | **transfer hospital** | |  | | **Days in NRU** |  | |
| **Date of discharge** | | |  | | **Name of NRU** |  | | |  | | | | |
| *\*Give Cotrimoxazole if Amoxycillin is not available* | | | | | | | | | | | | | |

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| **FOLLOW UP: Outpatient Care for the Management of SAM without Medical Complications** | | | | | | | | | | | | | | | | |
| **NAME** |  | | | | |  |  |  | **REG Nᵒ** | | | |  | | | |
| **Weeks in the programme** | Admission day | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| **Date** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **ANTHROPOMETRY** | | | | | | | | | | | | | | | | |
| **Weight** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **\*Weight loss (Y/N)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Height (cm)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **WFH/L z-score** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **MUAC (cm)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Oedema**  **(0, +, ++, +++)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **\*WEIGHT CHANGES FOR MARASMUS CASES If below admission WT on week 3 refer to NRU. If no WT gain by week 5 refer to NRU.** | | | | | | | | | | | | | | | | |
| **HISTORY** | | | | | | | | | | | | | | | | |
| **Diarrhoea (# days)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Vomiting (# days)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Fever (# days)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Cough (# days)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Extra HC visits (#)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **PHYSICAL EXAMINATION** | | | | | | | | | | | | | | | | |
| **RUTF Test (Passed or Failed)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Temp ͦC** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Respiratory Rate *(#/min)*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Dehydrated *(Y/N)*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Anaemia *(Y/N*)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **SUPERFICIAL Infection *(Y/N)*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Other problems/ other medication given** |  | | | | | | | | | | | | | | | |
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| **RUTF (# sachets)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **OUTCOME \*\*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **\*\*OUTCOME: DC = discharged cured, D = defaulter (absent on 2 consecutive visits), X = died, NRU = Transferred to NRU, NC = discharged/non-cured \*\*\*Y/N should be recorded on the week when the activity is performed** | | | | | | | | | | | | | | | | |
|
| **Name of health worker** | |  | | | | | | | | | | | | | | |