

Home Visit Form (High risk baby second month) Examination of Mother and Newborn

Supplementary Form 4
Use if needed

Ask/Examine	Day 35	Day 42	Day 49	Day 56	Other	Other	Action by the ASHA	Supervisory
Date of ASHA's visit	_____	_____	_____	_____	_____	_____		Check
A. Ask mother								Action taken ?
No of times mother takes full meals in 24 Hrs							If less than 4 times or meals not full advise mother to do so	Yes/No
Bleeding : How many pads are changed in a day							If more than 5 pads send the mother to hospital	Yes/No
During cold season is the baby being kept warm (near mother, clothed and wrapped properly)	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Advise the mother to do so if not being done	Yes/No
Is the baby being fed frequently (whenever hungry or atleast 7-8 times in 24 hours)	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Advise the mother to do so if not being done	Yes/No
Is baby crying incessantly or passing urine less than 6 times a day	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Advise mother to feed the baby every 2 hours	Yes/No
B. Examination of mother								
Temperature: Measure and record							Temperature up to 102° F (38.9° C) treat with paracetamol, Above 102° F (38.9° C) send to hospital	Yes/No
Foul-smelling discharge with fever more than 100° F (37.8° C)	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	If yes, send the mother to hospital	Yes/No
Is the mother speaking abnormally or having fits?	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	If yes, send the mother to hospital	Yes/No
Mother has no milk since delivery or mother perceives breast milk to be less	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	If yes, action as per breastfeeding management form	Yes/No
Cracked nipples/ Painful and/or engorged breasts	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	If yes, action as per breastfeeding management form	Yes/No

Supervisor's notes: Incomplete work? Incorrect work ? Incorrect record?

Name of the ASHA : _____	Date : _____
Name of the trainer : _____	Total score : _____
Block : _____	

Ask/Examine	Day 35	Day 42	Day 49	Day 56	Other	Other	Action by the ASHA	Supervisory
Date of ASHA's visit	_____	_____	_____	_____	_____	_____		Check
C. Examination of Baby								Action taken ?
Are the eyes swollen or with pus	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	If yes, ask mother to put into baby's eyes tetracycline ointment twice a day for 5 days	Yes/No
Weight: Measure and record On day 35, 42, 49 and, 56							If weight gain every week after 1 st week is less than 100 grams then action as per breastfeeding management form	Yes/No
Temperature Measure and record							- More than 99° F (37.2° C) treat with paracetamol - Between 95.1-97° F (35.1-36.1° C) ask mother to feed baby frequently, keep baby warm - Less than 95° F (35° C) hypothermia management	Yes/No
Skin : Pus filled pustules on skin	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Treat with gentian violet and observe for signs of sepsis	Yes/No
Cracks or redness in the skin fold (thigh/axilla/buttocks)	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Keep baby clean and dry. Use talcum powder or G.V. paint	Yes/No
Yellowness in eyes or skin (Jaundice)	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	If it is on the 1 st day or beyond 14 th day then it is abnormal jaundice refer baby to hospital	Yes/No

D. Sepsis Diagnosis : Check now for Sepsis: If sign is present mark ✓ If sign absent mark X

Record the observations on day 1 from the First Examination of Newborn : Form

Date of ASHA's visit	Day 35	Day 42	Day 49	Day 56	Other	Other	Action by the ASHA	Supervisory Check
Day 1								
1. All limbs limp							Consider the first three signs as criteria for diagnosing sepsis only if the sign was absent previously and then it newly developed	Yes/No
2. Feeding less/ stopped								
3. Cry weak/ stopped								
4. Distended abdomen or mother says 'baby vomits often'							If at least two criteria are present on same day, diagnose as sepsis, and proceed with sepsis management (using sepsis management form) Even if no sign is observed, ask the mother to keep a watch and call ASHA even if any one sign appears	Yes/No
5. Mother says 'baby is cold to touch' or temperature > 99° F (37.2° C)								
6. Chest in-drawing								
7. Pus on umbilicus								
Total no. of criteria present							If only one sign is present, check again by visiting every day for the appearance of another sign. Meanwhile, provide management for the one problem present. (See the box at the bottom)	Yes/No
Is it Sepsis	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No		

What management of sepsis was accepted by family? **No treatment** **Referral**
 (Circle the correct answer) **Treatment by ASHA** **Other treatment**

If treated by ASHA , fill the sepsis management form (Supplementary form 5)

- For feeding problem provide breast feeding management and fill the form (Supplementary form 1)
- For only chest indrawing treat with cotra syrup
- For the pus on umbilicus, treat with gentian violet paint
- For hypothermia provide hypothermia management and fill the form (Supplementary form 2)
- For fever provide fever management