

0838

CBA ID no. 102206-19.

Community Based Newborn and Maternal Health Care Initiative
(CBNB & MCHI)

Form 1: Maternal and Newborn Visit and Follow up Form

Full Name of Mother: Elizabeth Mwappe Age of mother: 29

Village: Mumbolo

Part 1: Antenatal

- a) LMP 20/8/2008
- b) EDD 27/5/2009

	Danger Signs Seen <i>Refer to Chart booklet</i>	Action Taken <i>(Refer to Chart Booklet)</i>
Visit 1 Date <u>16/5/09</u>	<u>Fiber Prevalence</u>	<u>Adm to deli delivery to the Hospital</u>
Visit 2 Date <u>26/5/09</u>		
Visit 3 Date _____		

- 1) Does client go to Antenatal clinic? Yes No
- 2) If yes how many antenatal visits has she gone to during the whole pregnancy? 111
- 3) Did she get malaria prevention? Yes No
- 4) Did she get iron and folate? Yes No
- 5) Did she get Tetanus Toxoid injection? Yes No
- 6) Did she get RPR (Syphilis Test)? Yes No , what was the result? Positive Negative
- 7) Is client going for VCT? Yes No
- 8) If yes does male partner also go for VCT? Yes No
- 9) Was the Oraquick rapid HIV test used? Yes No
- 10) Was Oraquick Rapid Test done by CBA? Yes No If no who did test _____
- 11) If client is HIV positive, is she on PMTCT? Yes No
- 12) When did she start PMTCT? week _____
- 13) Did she start PMTCT with CBA? _____
- 14) Is male partner involved in the pregnancy? Yes No
- 15) Has she filled in birth plan you the CBA? Yes No

Mama PI