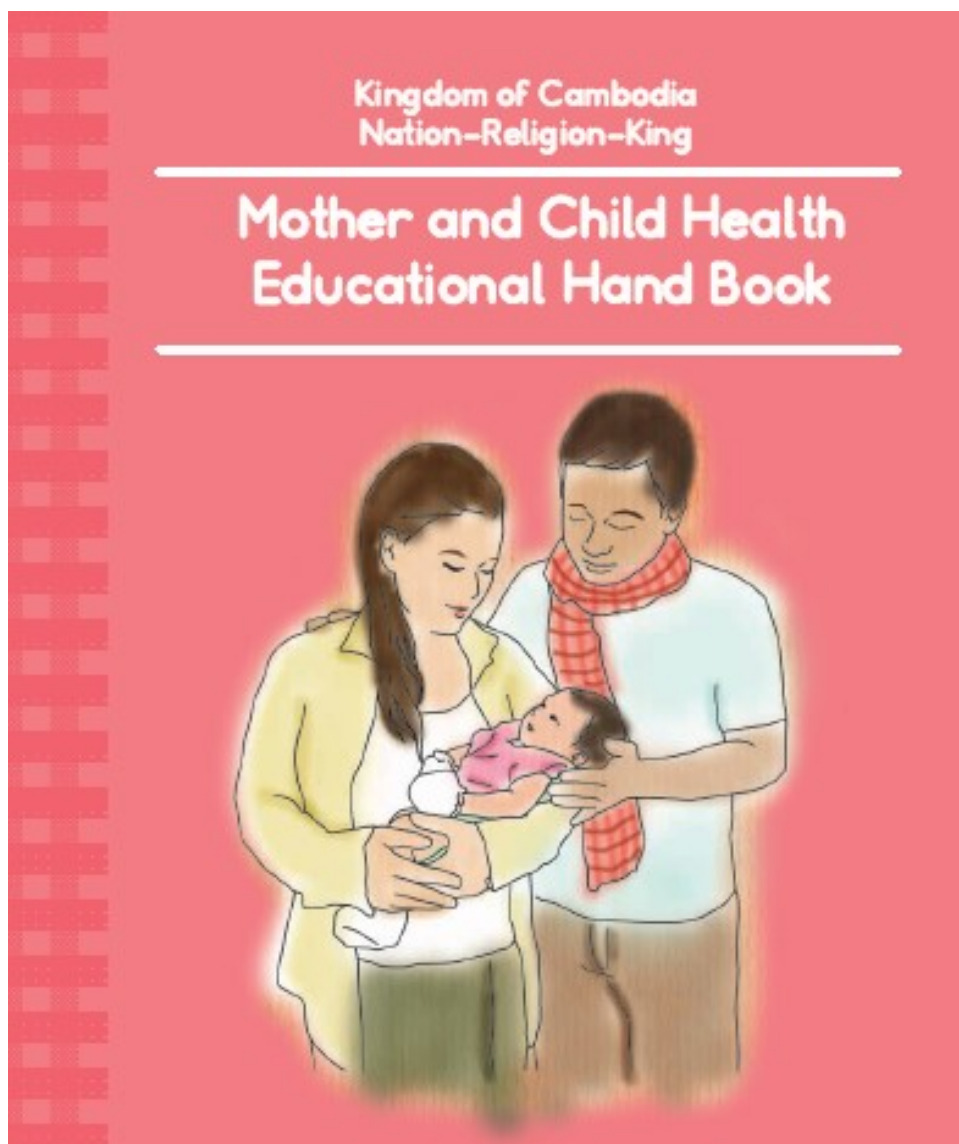


Technical Guideline for using the Maternal and Child Health Educational Handbook



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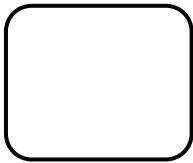
How to use this book

Balloon/ Mark

Meaning



Explained a hint in more detail in this balloon as the MCH handbook has minimum essence only. Please follow the instruction or give mothers more information if needed.



Supplement
This content is not described in the MCH handbook but midwife/nurse should know it.

Chapter 1 Introduction

The Maternal and Child Health (MCH) educational handbook has been developed to provide the better MCH services to pregnant mother and family with the National Maternal and Child Health Center (NMCHC) based on Safe motherhood protocol for health center since 2017.

This book is a Cambodian version of health educational handbook as an information part which will be distributed with mother health card (Pink card) and immunization card (Yellow card). The MCH educational handbook contains maternal health information during pregnancy, during delivery and after delivery and also newborn/infant health information on how to maintain health for mother and child. This MCH educational handbook is an important tool which contains of mother and child health essential information for mother and child. The MCH handbook should be kept at home by mother or family and use as communication tool between mother and health provider during MCH services.

This technical guide will give health providers the references of how to use, how to distribute and how to monitor the MCH educational handbook. Besides, this book also leads health providers for the better MCH services including better health education. We hope that this MCH educational handbook will promote the better knowledge and health seeking behavior for all mothers and families.

Chapter 2

Overview of the MCH educational handbook

2.1 Purpose

- To enhance mother/family's knowledge for Newborn, Maternal and Child Health
- To promote adequate health seeking behavior for mother and family
- To guide health workers to provide adequate health education to mother/family using the MCH educational handbook

2.2 The target of MCH educational handbook

1. Every pregnant mother will get the MCH educational handbook with mother health card (Pink card).
2. Husbands and other family member, the caretaker of newborn/infant

2.3 The role of health provider

1. Health provider should read and understand the messages inside MCH educational handbook to facilitate mother's understanding of handbook.
2. Facilitate to bring MCH educational handbook with Mother health card (Pink card) to health facilities during all visit
3. Give a check (✓) on the parts that have been understood and explained. Health provider can recognize which parts was explained to mother/ family.
4. Make sure that the understanding of mother, husbands, families or caretakers about messages in MCH educational handbook. For the things that

haven't been understood, mother/ family can ask to health providers to get a more detailed explanation.

2.4 Contents

The handbook is composed of three sections: During pregnancy, Intrapartum period, and Postpartum period.

If you are pregnant...

1. Antenatal care Visit
2. Tetanus Vaccination
3. Sexual transmitted infections
4. Nutritious Food
5. Daily Activities during pregnancy
6. Danger Signs for mother
7. Signs of Labor
8. Birth preparation

During Delivery

9. Important points to do during delivery

After delivery

10. Taking Care of Yourself after delivery
11. Danger Signs for mother after delivery
12. Breast feeding
13. How to take care of your baby
14. Danger signs for your baby
15. Postnatal care for check-up at health center
16. How to give Complementary Food to your child

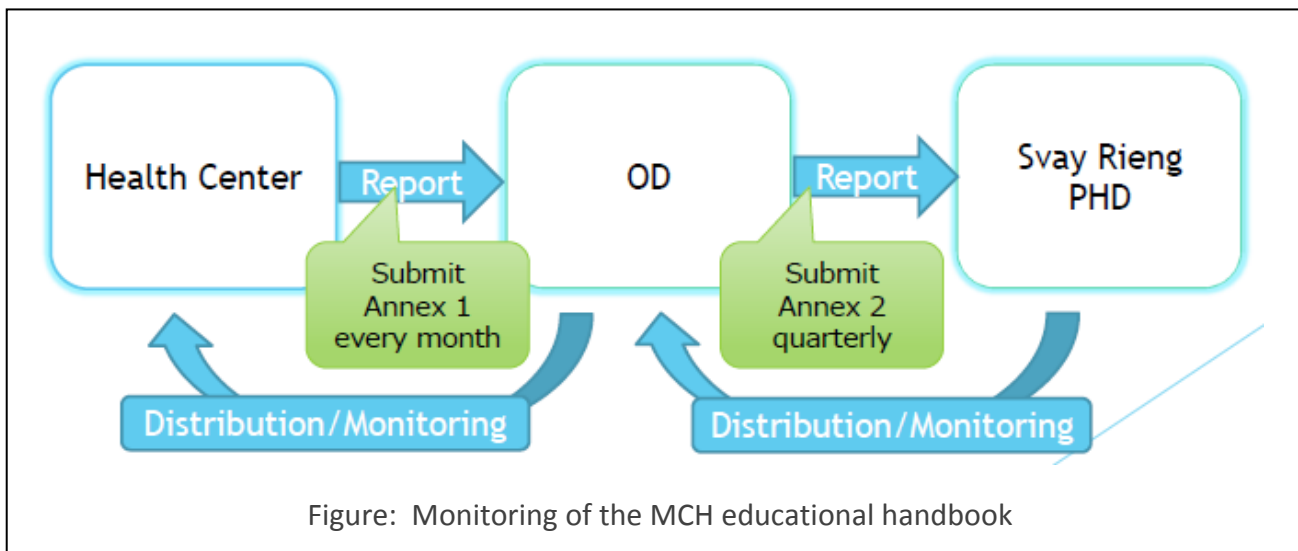
CONTENTS	
If you are pregnant ...	
Why Antenatal Care Visit is important ?.....	1
Don't forget to take Tetanus Vaccination	2
Be aware of Sexual Transmitted Infections	2
What types of Nutritious Food that mother needs to eat during pregnancy?....	3
You should take care of yourself in Daily Activities	4
Watch out! These Danger Signs you need to know	5
Delivery is close! Here are the sign of Labor.....	6
Let's prepare for welcoming your baby!	6
During delivery ...	
Baby is coming soon! These are important points to do during delivery	7-8
After you give birth...	
Health Tips for Taking Care of Your Self after delivery	9
Danger Signs for mother after delivery	10
Breastmilk is the best food for your baby	11
Let's Take Care of your baby.....	12-13
Danger Signs for your baby	14-15
Let's go to Postnatal Care for check-up you and your baby at health center.....	16-17
How to give Complementary Food to your child	18-19

i For family planning and Immunization, please refer to Mother health card (Pink card) and Immunization card (Yellow card). These topics are included

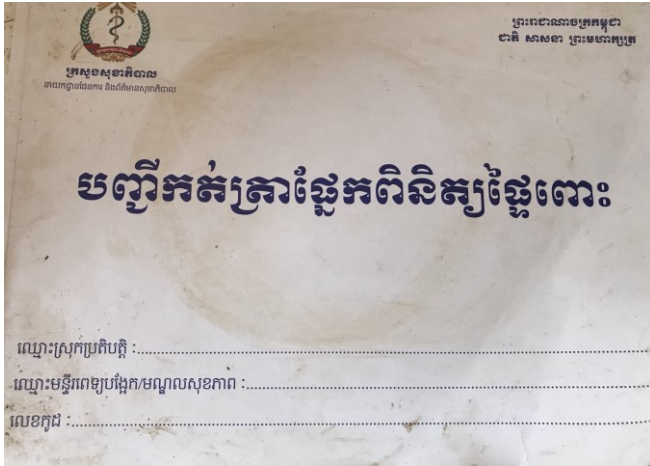
in the both cards. Health provider should explain to mothers using the both cards.

2.5 How to distribute

The MCH educational handbook will be printed according to the annual number of estimated pregnant mothers at health center will distribute the number of pregnant mothers and an additional 10 % of handbooks and card holders. As the below figure, Svay Rieng Provincial Health Department (PHD) will distribute all materials to each Operational District (OD), then each OD will distribute to health centers based on the number of estimated pregnant women. Health center will submit the monthly report of the MCH educational handbook (Annex 1) every to OD MCH chief monthly. OD MCH chief will report Quarterly Report of the MCH educational handbooks Distribution to (Annex 2) to Svay Rieng PHD quarterly.



If the health provider distributes the MCH health booklet and card holder to pregnant mother at ANC, she should record "DISTRIBUTED" at the column of remarks in ANC register book as the below picture.



- Please fill in here, if midwife/nurse distributes the MCH handbook to pregnant mother.
- If the mother loses the handbook and give 2nd handbook, please note it. (ex: lost)

Picture : ANC register book

Chapter 3

How to use the MCH educational handbook

3.1 How to use this book and Important Information

Please explain when you give it to pregnant mother.

How to use this book

.....

This book helps your health and baby's health during pregnancy and after birth. Let's read with your family!!

- ★ Please ask midwife/nurse if you don't understand.
- ★ Please make sure to bring it with MCH Book/Yellow card to health center/hospital.
- ★ Please keep this book away from children and take care not to lose it.
- ★ For baby's father, please support your wife and take care of your baby together!!

Important Information

Mother		Father	
Name	: <u>Ms. XXXX</u>	Name	: <u>Mr. XXXX</u>
Date of birth	: <u>04 / 11 / 1984</u>	Date of birth	: <u>28 / 05 / 1980</u>
Occupation	: <u>Housewife</u>	Occupation	: <u>Farmer</u>
Address	: <u>Thnoul Village, Sambath Mean</u> <u>Romeas Haek District</u> <u>Svay Rieng Province</u>		

Name of Health Facility	: <u>Chrey Thom health Center</u>
Chief of Health facility Tel:	<u>Mr. XXX(OXX-XXX-XXX)</u>
Name of Midwife	: <u>Ms. XXXX</u>
Tel:	<u>OXX-XXX-XXX</u>
Emergency Transportation	: <u>Mr. XXXX</u>
Tel:	<u>OXX-XXX-XXX</u>

Date of birth registration : 15 / 03 / 2019 (Place : Chrey Thom)

Please fill in the date of submission birth registration to commune (Sangkat) office by mother/family. Make sure to facilitate mother/family to register her newborn.

Please fill in blank (Mother/ Father) .

- 1) Name
- 2) Date of birth: day/ month / year
- 3) Occupation
- 4) Address

Fill in the name of Village, Commune, District, and Province

Please fill in blank.

- 5) Name of chief of health center and phone number

Fill in the name of health center chief and phone number that will be expected to take MCH services including labor.

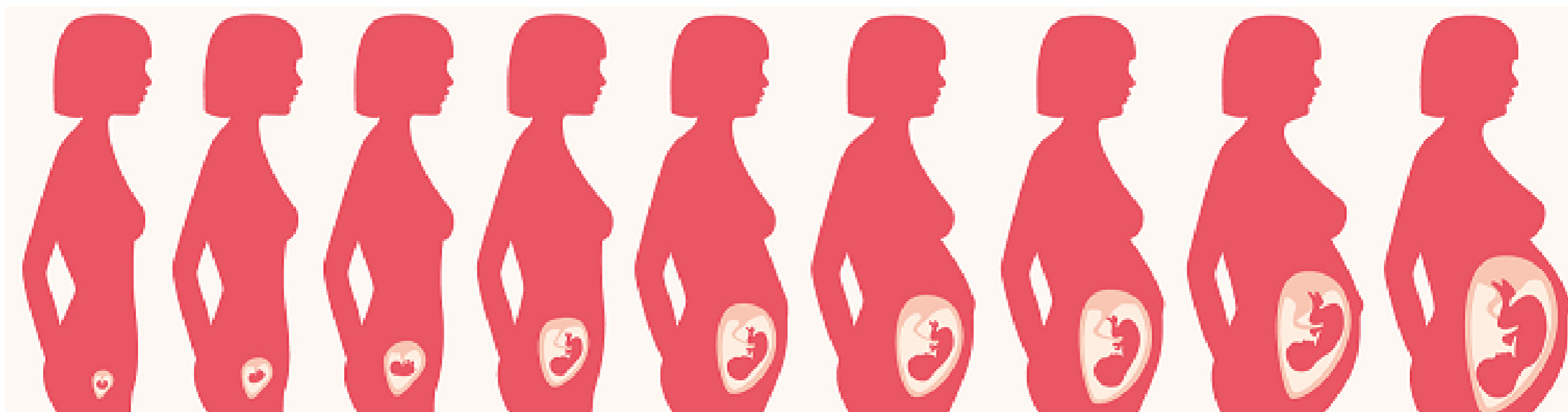
- 6) Name of midwife and phone number

Fill in the name of midwife and phone number that will be expected to help during labor. It could be fill in more than 1 person.

- 7) Emergency contact number:

Mention name and phone number of the person who is confirmed to be ready in labor's expected date or emergency of your pregnant. It could be more than 1 person.

3.2 Pregnant Process



Week	0-3	4-7	8-11	12-15	16-19	20-23	24-27	28-31	32-35	36-39	40-	
Month	1	2	3	4	5	6	7	8	9	10	After delivery	
Ideal ANC timing	ANC 1						ANC2		ANC3		ANC4	PNC 1-4 (See page 38-39)
Mother's change		<ul style="list-style-type: none"> Morning Sickness starts 		<ul style="list-style-type: none"> Morning sickness disappears Increase pulse /respiration 	May have common discomforts: backaches, indigestion, heartburn, headaches, dizziness, constipation, breath shortness, palpitation etc.			May feel short of breath because the lungs have less room to expand	May have common discomforts: pelvic pressure, difficulty sleeping	Sign of labor appears		
Fetus development			<ul style="list-style-type: none"> Baby will start to have fluttering heartbeat Arm, legs and finger start to develop 	<ul style="list-style-type: none"> Fetus head is enlarge, eyes, ears and nose develop Sex can be determined Fetus muscle can movement Complete the development of placenta (15weeks) 	<ul style="list-style-type: none"> All part of fetus body is complete development The hair covered the body and has the finger nail Can listen the heart rate and movement 		<ul style="list-style-type: none"> Baby can recognize your voice Almost all organs develop during this month. 	<ul style="list-style-type: none"> Skin is pink color and wrinkle without tiny hair If baby is born within this week, he can survive under close control and special care. 	<ul style="list-style-type: none"> Minor wrinkle on face and have the finger nail Baby can survive outside of uterus 	<ul style="list-style-type: none"> Baby complete development Skin is pink color, smoothly and covered with some tiny hair and fat substance white color Baby can survive outside of uterus 		
Points of Health Education (Page)	<ul style="list-style-type: none"> Antenatal care Visit (P1) Tetanus Vaccination (P2) Sexual transmitted infections (P2) Nutritious Food (P3) Daily Activities (P4) Danger Sign (P5) 				<ul style="list-style-type: none"> Nutritious Food (P3) Daily Activities (P4) Danger Sign (P5) Birth preparation (P6) 			<ul style="list-style-type: none"> Danger Sign (P5) Birth preparation (P6) Signs of Labor (P6) 		<ul style="list-style-type: none"> Important points to do during delivery (P7-9) 	<ul style="list-style-type: none"> Taking Care of Yourself after delivery (P10) Danger Signs for mother after delivery(P11) Breast feeding (P12) How to take care of baby(P13-14) Danger signs for baby(P15-16) Postnatal care for check-up (P17-18) Complementary Food(P19-20) 	

3.3 Antenatal Care Part - Why Antenatal Care Visit is important? -



The recommended visits are scheduled as follows:

1. 1st visit: might be before 16 weeks
2. 2nd visit: should be between 24-28 weeks
3. 3rd visit: should be between 30-32 weeks
4. 4th visit: should be between 36-38 weeks



It is recommended that all pregnant women have 4 routine antenatal visits. The woman should be asked to return if she does not give birth within 2 weeks after her expected date of birth. More frequent visits or different schedules may be required based on the woman's needs.

If you are pregnant...

Why Antenatal Care Visit is important??

Mother should go to health center for antenatal care at least 4 times during pregnancy.

1st ANC: Before 4 months (16weeks) 2nd ANC: 7 Months (24-28 weeks)
3rd ANC: 8-9 months (30-32 weeks) 4th ANC: 10 Months (36-38 weeks)

1. Merit of ANC

1. To know about health condition of mother and baby.
2. To detect the danger signs and treat pregnant mother earlier.
3. To receive tetanus immunization and the iron-folic tablet.
4. To get advice from health workers on how to keep your health such as nutrition, hygiene, breastfeeding, family planning, expected date of delivery and place for delivery, etc.

2. What do midwife and nurse check at ANC?



1. Check your weight
You can gain weight 1kg /month.



2. Check Blood pressure, Pulse and temperature.
Reduce workload if you have high blood pressure or other health problems.



3. Check blood test and urine test.
To detect anemia, HIV/AIDS, syphilis, protein and glucose in urine.



4. Check fundal height and fetal presentation and movement
Check if baby grows well or not.



5. Check fetal heart rate after 4 months.
To monitor health condition of your baby.



6. Check for abnormal symptoms like cyst, goiter and abnormal vaginal discharge.
Take medication for each symptom if you have.



Please check up mother in All Visits

- ✓ Measure weigh
- ✓ Take vital signs (BP, pulse, temperature, breathing)
- ✓ Check for goiter
- ✓ Check for anemia, edema
- ✓ Breast examination
- ✓ Check for kidney pain and pelvic inflammatory disease by tapping the waist and check reflex by tapping the knee
- ✓ Check fundal height
- ✓ Check for fetal presentation and movement
- ✓ Listen to fetal heart beat (after 4 months of gestation)
- ✓ Check vulva for cyst or tumor or abnormal vaginal discharge, etc.
- ✓ Urine test: protein
- ✓ Other tests as needed.



First Visit (in addition to the above)

- ✓ Measure height
- ✓ Calculate for expected delivery date
- ✓ Look for caesarean and other surgery scar on abdomen.
- ✓ Check vulva for tear
- ✓ Blood test: blood group, hemoglobin/hematocrit (if any), syphilis, HIV test, malaria if needed
- ✓ Urine pregnancy test (if any) in case clinical examination is not clear.



Third Trimester (in addition to the above)

- ✓ Feel for obvious multiple pregnancy
- ✓ Feel for transverse lie or malpresentation
- ✓ Listen to fetal heart

Pregnant woman weight gain

Body Mass Index (BMI)	Gain weight
Low (<18.5)	11.5-16kg
Normal (18.5-24)	12,5-18kg
High (≥25)	7-11.5kg

* BMI= kg/m²

3.4 Antenatal Care Part

- Don't forget to take Tetanus Vaccination / Be aware of Sexual transmitted Infection -

- ✓ Check tetanus toxin (TT) immunization status.
- ✓ If immunization status unknown, give TT1.
- ✓ If giving TT1 at first visit, plan to give TT2 at next visit.
- ✓ Counsel a woman to get a total of 5 TT injections.

Please encourage woman to bring her Mother Health Card (Pink card) and TT card to every visit.



Don't forget to take Tetanus Vaccination

Please take Tetanus Toxioid vaccination. All women 15-44 years should receive 5 doses of tetanus vaccination to protect you and your baby from tetanus.



If you are pregnant...

TT	Minimum Interval	Length of protection
TT 1	Initial Step to develop antibody against tetanus	0 year
TT 2	1 month after TT 1	3 years
TT 3	6 month after TT 2	5 years
TT 4	1 year after TT 3 (or next antenatal visit)	10 years
TT 5	1 year after TT 4 (or next antenatal visit)	Lifetime

Be aware of sexual transmitted infections

1. Check for sexual transmitted diseases such as HIV/AIDS and syphilis at first antenatal visit voluntarily.
2. Encourage your partner to test for HIV/AIDS, syphilis and other relevant diseases.

If you are HIV positive...

1. Use condom every time you have sex.
2. Transmission of HIV from mother to child can occur during pregnancy, delivery and through breastfeeding.
3. Take antiretroviral therapy (ART) as prescribed by your doctor during your pregnancy and breastfeeding.



2



Tip!

- ✓ All women receiving antenatal care should be offered confidential counseling and rapid testing for HIV as a standard part of ANC, preferably at the first ANC visit.
- ✓ Counselors should encourage the partners of pregnant women (particularly of women found to be HIV-infected, women with STIs and women whose partners have a history of high risk behaviors) to participate in counseling and rapid testing.
- ✓ Pregnant women, whose HIV status at delivery is unknown, should be offered counseling and rapid testing during labor.



Tip!

Pre-test counseling:

- The following topics should be covered in the pre-test counseling:
- Basic HIV/AIDS information, including HIV transmission and prevention
 - Advantages of routine HIV counseling and rapid testing
 - Risks of contracting of HIV and risk reduction options
 - MTCT and available options for prevention, including infant feeding options
 - Test results are confidential and will not be shared with anyone other than health care workers directly involved in providing services to the patient
 - With regard to negative test results, including an explanation of the "window period"
 - With regard to a positive test, refer to a hospital with Pre-ART/ART services for test confirmation
 - Availability of HIV treatment and support services



Tip!

If HIV Test is Positive:

In case of rapid HIV test positive, the counselor must not give the test result to the woman, but advise her to have a confirmation test at VCCT service of a nearby referral hospital with Pre-ART/ART service.

3.5 Antenatal Care Part

- What types of nutritious food that mother needs to eat during pregnancy? -



Tip!

Pregnancy is the important time for woman because it is when the fetus is growing up in the mother's womb. Explain the importance of nutrition during pregnancy for the below reason:

1. Improve mother's health
2. Development of fetus
3. Prevent abnormal case and severe diseases such as: anemia, epilepsy
4. Make the body strong and energetic during labour
5. Increase secretion of breast milk

Calcium Deficiency

1. Intrauterine growth retardation.
2. Muscle pain in arms and legs, tiredness

Vitamin A Deficiency

Night blindness and woman with dry eyes. To increase the absorption of vitamin A, it is recommended to consume it with fat and oil.

- ✓ Pregnant women should have as much water as possible to facilitate the good circulation of blood vessel and prevent the constipation.
- ✓ Pregnant woman should not drink tea and coffee because it contains acid and addicted components which prevent the absorption of iron and protein.

If you are pregnant...

What types of nutritious food that mother needs to eat during pregnancy?

1. Eat nutritious food

During pregnancy, mother should eat 4 meals daily that include vitamins and minerals such as calcium, iron, zinc, folic acid and iodised salt, etc. as shown in the below.

<p>Calcium</p> <p>It helps to form the bone of a fetus (Small fishes with bone, milk, peanuts, beans, egg, Brohoik (fermented fish))</p>	<p>Iron</p> <p>It helps to form blood (Meat, liver, animal internal organ, heart, kidney, shells, beans, dark green vegetable and fruits)</p>
<p>Zinc</p> <p>It develops the leg of fetus and immune system (Shell, meat, liver, animal internal organ such as heart)</p>	<p>Folic Acid</p> <p>It forms blood and neural tube (Liver, dark green vegetable, egg, beans, avocado)</p>
<p>Vitamin A, D, B1</p> <p>It prevents from anaemia and enhance immune system (Dark green vegetable, dark yellow vegetable, fish liver and animal liver, and egg)</p>	<p>Vitamin C</p> <p>It improves immune system and support the iron absorption to prevent anaemia (Orange, lemon, mango, guava, salt, tomato, pineapple)</p>

2. Please drink a lot of water at least 8 cups/day (2 litres)

<p>Morning</p>	<p>Noon</p>	<p>Afternoon</p>	<p>Night</p>
-----------------------	--------------------	-------------------------	---------------------

3



Tip!

- ✓ She should eat 4 meals a day which are locally available such as meat, fish, oils, cereals, dark green vegetables and yellow fruits to make her and fetus healthy and strong.
- ✓ Spend more time on nutrition counseling with very thin women and adolescents.
- ✓ Advise the woman that she should gain weight at least 1 kg per month in the 2nd and 3rd trimesters of pregnancy.
- ✓ Talk to family members to encourage them to help ensure the woman eats enough and avoids hard physical work during pregnancy.

Iodine Deficiency

1. Goiter
2. Spontaneous abortion
3. Abnormal newborn
4. Premature

Advise the use of small amount of iodized salt when cooking foods.

Iron Deficiency (Anemia)

1. Spontaneous abortion
 2. Premature
 3. Bleeding during delivery or placenta delivery
- The absorption of iron is best if consumed along with food rich in vitamin C.



Tip!

Take iron tablets as directed:

- Take at bedtime or with meal if side effect.
- Do not worry about black stools. This is normal.
- If constipated, drink more water

3.6 Antenatal Care Part - You should take care of yourself in daily activities -

You should take care of yourself in daily activities

If you are pregnant...

1. Take a shower with soap every day. Brush your teeth regularly and change your clothes everyday.
2. Mother can continue to work as usual. However, do not work hard and have enough rest and sleep.
3. Talk to your baby frequently with your husband. Your baby could listen to you
4. Smoking, using drug, drinking alcohol or herbal medicine are very dangerous for you and your baby.
5. You should go to consult at health center when you have any problem.
6. Sleep in insecticide impregnated bed net, especially in malaria endemic areas.
7. You may have sexual intercourse, but frequent having sex before 4 months (16 weeks) can cause to miscarriage.

Advise the woman to avoid medication that is not prescribed.

Sleep under insecticide impregnated bed net, wear long shirts and trousers to prevent mosquito bites, eliminate shelters for aedes and anopheles mosquitoes, which are the agents of transmission of dengue fever, malaria and zika virus.

Practice safer sex (correct and regular use of condoms; remaining faithful in a relationship with an uninfected partner with no other risk behavior)

3.7 Antenatal Care Part

- Watch out! There Danger Signs during Pregnancy -



Emergency Preparation

Discuss emergency issues with the woman and her husband/family:

- ✓ Where to go
- ✓ Transportation means
- ✓ How much will it cost for the services and transport
- ✓ Who will go with her and who will help at home while she is away



Advise to go to health facility immediately, day or night, without delay for the following danger signs:

- ✓ Vaginal bleeding
- ✓ Fever and too weak to get out of bed
- ✓ Shortness of breath or difficult breathing
- ✓ Severe abdominal pain
- ✓ Severe headache with blurred vision
- ✓ Convulsions



Advise to go to health facility as soon as possible for the following danger signs:

- ✓ Fever
- ✓ Abdominal pain
- ✓ Feels ill
- ✓ Swelling of face, hands, legs

3.8 Antenatal Care Part

- Delivery is close! Here are the Signs of Labor-



Advise when to go for delivery:

- ✓ If near the facility, go at the first signs of labor
- ✓ If far from the facility, go before baby is due or stay near the facility or at waiting house, if possible
- ✓ Ask for help from the community, if needed (remind her to bring along a ID Poor card, if any).



Delivery is close! Here are the Signs of Labor

Please go to health facility or contact midwife if the following labor signs present.

If you are pregnant...

1. Bloody sticky discharge from your vagina

2. Painful uterus contraction every 20 minutes or less

3. Amniotic fluid comes out from the birth canal







Advise how to prepare:

- ✓ Ask woman to prepare transport and money for transportation to appropriate facility
- ✓ Ask woman to prepare money for delivery care at the facility
- ✓ Prepare who will go with her as support during labor and delivery
- ✓ Prepare who will help at home while she is away at the facility

Let's prepare for welcoming your baby!!

1. Please plan the delivery at health center or hospital.



2. Please make advanced arrangement for transportation to health center or hospital.



3. Please save money and prepare for National ID, Equity fund card, and national social security fund card (NSSF) for delivery.



4. Please discuss who will go with pregnant mother and who will help at home while she is away.



5. Please prepare to take mother health card, 2 set of clothes, sanitary pads for yourself, 4 clean towels and 2 set of clean clothes for the baby.





Explain why birth in a health facility is recommended:

- ✓ Complications in pregnancy are not always predictable
- ✓ A facility has staff, equipment, supplies and drugs available, and a referral system
- ✓ If HIV positive, she will need ARV treatment for herself and baby
- ✓ Complications are more common in HIV positive women and newborns

Advise what to bring:

- ✓ Mother Health Book
- ✓ Four clean and highly water absorbent cloths, each at least one square meter, two for the resuscitation surface, one for drying and one for covering the baby
- ✓ Additional clean cloths and sanitary pads for after birth
- ✓ Clothes for mother and baby, especially a hat to cover newborn's head
- ✓ Food and water for mother and support person

3.9 Intrapartum Care Part

- Baby is coming soon! There are important points to do during delivery-

Encourage the woman to walk around freely during labor

Encourage the woman to eat and drink as she wishes throughout labor

Nutritious liquid drinks are important, even in late labor

Encourage the woman to empty her bladder every 2 hours

Support the woman's choice of appropriate position for each stage of labor. (See page 8)

- ✓ Clean the vulva and perineal area before each examination
- ✓ Wash hands with soap and water/alcohol hand rub before and after each examination
- ✓ Use clean gloves for every vaginal examination
- ✓ Ensure cleanliness of birthing areas and clean up any spills or stains immediately



Baby is coming soon!
There are important points to know during delivery.

1. After you find the sign of labor, your cervix will open gradually with regular contraction

1. You may feel the contraction pains in your abdomen or lower back. A lower back massage will reduce your pain.
2. Let's try to relax! Distract yourself with a relaxing activity such as watching TV, listening to music or going for a walk.
3. Please try to eat, drink and sleep if you can. These may give you energy to give birth. Go to restroom if you want. This helps your baby move down and makes your baby's birth more easier.
4. You can change your position freely as leaning forward using chair, standing, lying on the side, etc. These also help your baby's birth.
5. Midwife will check your baby's heart rate or vaginal examination to confirm your status of labour. If you have any questions and worries about delivery, don't hesitate to ask midwife!



2. When your cervix is fully opened, the birth of your baby follows.

1. It is usual to feel a strong urge to go to the toilet as the baby's head pushes. The birth of your baby will occur soon.
2. Please follow midwife's instruction of how to breath and how to push in order to have safe delivery.



- 7
 - ✓ Count frequency of contractions over 10 minutes and duration of each contraction
 - ✓ Count fetal heart rate for 1 minute
 - ✓ Check for thin and bulging perineum
 - ✓ DO NOT leave the woman alone



Communication

- ✓ Explain all procedures, seek permission, and discuss findings with the woman
- ✓ Encourage her partner or relative to stay with her throughout labor
- ✓ Keep her informed about the progress of labor
- ✓ Praise her, encourage and reassure her that things are going well
- ✓ Ensure and respect privacy during examinations and discussions



Breathing Technique

- ✓ Teach the woman to notice her normal breathing
- ✓ Encourage her to breath out more slowly and to relax with each breath
- ✓ To prevent pushing at the end of first stage, teach her to pant, to breathe with an open mouth, to take short breaths followed by a long breath out
- ✓ During delivery of the head, ask her not to push, but to breathe normally



Pain and Discomfort

- ✓ Suggest change of position
- ✓ Encourage birth companion to massage the woman's back if she finds this helpful, and hold the woman's hand and sponge her face between contractions
- ✓ Encourage woman to apply breathing technique
- ✓ Encourage warm bath or shower, if available



For mother

- ✓ Check that the uterus is well contracted and there is no heavy bleeding
- ✓ If bleeding from a perineal tear, repair if required or refer to a hospital
- ✓ Keep mother and baby together; DO NOT separate them unless emergency care needed
- ✓ Transfer mother and baby to ward when mother and baby are stable (after 2 hours of observation), keeping in direct skin to skin contact
- ✓ Encourage her to eat, drink and move freely
- ✓ Encourage her to pass urine
- ✓ Ask birth companion to stay with mother



For newborn

- ✓ Health workers SHOULD NOT take baby from the mother or handle the baby unless there is a medical need.
- ✓ After birth, let baby rest comfortably on the mother's chest in direct skin-to-skin contact for at least first 60 minutes after birth. Do not separate baby from the mother unless necessary. Maintain direct skin-to-skin contact throughout hospital stay.
- ✓ Assess breathing: look/listen for fast breathing, chest in-drawing, grunting and cyanosis
- ✓ Keep baby warm: check to see if feet are cold to touch
- ✓ Encourage mother to initiate breastfeeding as soon as the newborn shows feeding cues indicating readiness to breastfeed: drooling, mouth opening, tonguing, licking, rooting and biting of fists. Do not force the baby to breast feed without any feeding cues, which typically occurs between 20 and 60 minutes of birth.

3. After your baby is born, placenta comes out

1. During 2 hours after delivery, you may be easy to bleed. Midwife checks your status such as the amount of bleeding and your womb.
2. Let's put the baby on your chest for skin to skin and start to breast feed your baby.

During delivery...



For Father and Family...

Let's support mother!!

The birth of your baby is a very special time for you and your family.

You can:

1. Massage her
2. Stay close to her
3. Help to make her physically comfortable
4. Hold her hand
5. Encourage her
6. Give water to her if she is thirsty
7. Place cool face washers on her forehead
8. Place a hot pack or hot water bottle on her back or abdomen.



Birth Companion

- ✓ Encourage woman to choose a birth companion throughout labor
- ✓ Describe to birth companion what he or she should do:
 - help her to breathe and relax
 - rub her back, wipe her with a wet cloth
 - give support using local practices that do not disturb labor and delivery
 - encourage woman to move around freely as she wishes and to adopt the position of her choice
 - encourage her to drink and eat as she wishes
 - assist her to the toilet when needed
 - ask the birth companion to call for help from midwife if:
 - the woman is bearing down with contractions
 - there is vaginal bleeding
 - she is suddenly in much more pain
 - she loses consciousness or has fits
 - there is any other concern
- ✓ Tell the birth companion;
 - NOT to encourage the woman to push
 - NOT to give the woman advice other than that outlined by the health care provider
 - NOT to keep the woman in bed if she wants to move around

3.10 Postnatal Care Part

- Health Tips for taking care of yourself after delivery-



Tip!

Ensure the room is maintained at over 25°C and that there are no drafts in the room. Monitor mother and baby every 15 minutes for 1st hour after delivery of placenta, every 30 minutes during the 2nd hour, every hour in the 3rd and 4th hours and then every four hours until discharge



Tip!

Harmful practices

1. It is dangerous for mother and baby to be roasted.
2. Don't drink alcohol (traditional medicine) following delivery
3. Don't get injections to try to make the woman hot or try to give her strength
4. Don't place ice or stones on the abdomen



Health Tips for taking care of yourself after Delivery

1. Breastfeed as often as possible.
2. Take enough rest.
3. Have someone near mother for the first 24 hours after birth. Take nutritious and variety foods such as fish, meat, vegetable, fruit and rice. Drink more water at least 8 cups per day (2 liters).
4. Keep yourself clean, including genital area, change sanitary napkin 4 to 6 hours or more frequently if needed.
5. If you are healthy, you can carefully start to stand and walk. After that, you can walk and do physical activities gently.
6. Avoid sexual intercourse within 6 weeks after delivery (until the perineal wound heals) because it may cause injury and reproductive infections.



After you give birth...



Tip!

Nutrition for mother

- ✓ Advise the woman to eat many times per day (at least 4 times) and as much as needed and all types of food such as meat, fish, oils, nuts, seeds, beans, vegetables, to help her feel well and strong
- ✓ Reassure her that she can eat any foods as normal; these foods will not harm the breastfeeding baby



Tip!

Points to explain to mother and family

- ✓ Make sure woman and family know what to watch for and when to seek care
- ✓ Advise on postpartum care and hygiene and counsel on nutrition
- ✓ Counsel on birth spacing
- ✓ Counsel on breast feeding
- ✓ Dispense 42 day supply of iron/folate and counsel on compliance
- ✓ Give TT immunization if due
- ✓ Give mebendazole 1 tablet of 500mg
- ✓ Promote use of insecticide-treated bed net for mother and baby (if in malaria infection risk area)
- ✓ Record in Mother Health Record
- ✓ Advise when to return for routine and follow-up visits
- ✓ Instruct mother to register her baby at commune office

3.11 Postnatal Care Part

- Danger Signs for mother after delivery -



Discuss preparation for emergency issues with the woman and her partner/family

- ✓ Advise always to have someone nearby for at least 24 hours after delivery
- ✓ Discuss:
 - where to go if danger signs arise
 - how to get there
 - costs involved
 - family and community support and ask for help from community if necessary

- ✓ Look at the vulva and perineum for Tears, Swelling and Pus
- ✓ Look at pad for bleeding and lochia:


- ✓ Measure blood pressure, temperature and pulse
- ✓ Check pallor

Check history of preeclampsia or eclampsia in pregnancy, delivery or after delivery? Measure blood pressure.

- **Moderate hypertension (Diastolic blood pressure ≥ 90 mmHg on 2 readings)**
- **Severe hypertension (Diastolic blood pressure ≥ 110 mmHg):**
→ Give proper treatment. Refer urgently to hospital.

Check for vaginal trauma that may occur during the urge to deliver baby. Any leakage from the bladder to vagina is a diagnosis worth of consideration.

i For treatment, please refer to Safe Motherhood Protocol and follow instruction.



Danger Signs for mother after delivery

Please go to midwife or doctor immediately if you have any of the following signs.


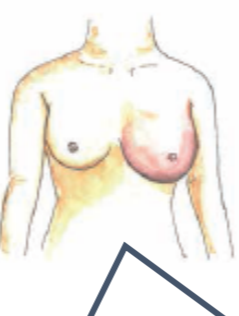

- 1 Fever
- 2 Severe Abdominal pain
- 3 Smelly lochia
- 4 Large amounts vaginal bleeding (more than 2 pads soaked in 20-30 mins)
- 5 Severe headache
- 6 Convulsions
- 7 Fast or difficult in breathing
- 8 Breasts swollen, red or tender breasts or sore nipples
- 9 Swelling of the face, arms or legs
- 10 Urine dribbling or pain on passing urine
- 11 Pain in the perineum or draining pus
- 12 Feeling unhappy and crying easily

Large amounts vaginal bleeding

Abdominal pain

Breasts swollen

Feeling unhappy and crying

Please bring mother health card with you

After you give birth...

Check breast and nipples for Engorgement, Fissures redness at any area

✓ **Postpartum Depression** (usually after first week), (2 or more symptoms during 2-week period: inappropriate guilt or negative feelings towards self, cries easily, decreased interest or pleasure, feels tired, agitated all the time, disturbed sleep, diminished ability to think, loss of appetite):

- Provide emotional support
- Refer woman to facility with psychological treatment service

✓ **Postpartum Blues** (usually in first week) (any of the above symptoms for less than 2 weeks):

- Reassure the woman that this is common
- Listen to her concerns
- Give emotional support
- Counsel partner and family to provide support to the woman
- Follow up in 2 weeks
- If no improvement, refer woman to facility with psychological treatment service.

3.12 Postnatal Care Part

- Breastmilk is the best food for your baby-



Explain to mother **the importance of colostrum breastfeeding**

1. Encourage breastfeeding on demand, day and night, as long as the baby wants. 24 hours following the birth, a baby needs to be fed 8 or more times per day.
2. The breast milk produced within the first few days after delivery is called colostrum, yellow and thick milk.
3. Colostrum is very important for newborn as it contains proteins and calories much more than normal milk and full of vitamin A and antibodies that can help protect the baby from infection.
4. A newborn's stomach is very small so just little amount of colostrum is quite enough for the newborn and provides him/her with many benefits.
5. If the mother keeps breastfeeding exclusively, the more milk will be produced within a few day.

Check if position is correct:

1. Make sure baby's head and body are in a straight line
2. Make sure baby is facing the breast, with nose opposite nipple
3. Mother should hold baby's body close to her body
4. Support baby's whole body and buttocks, not just neck and shoulders



Breastmilk is the best food for your baby

Exclusive breastfeeding your baby for first 6 months.

1. Benefit

- 1 Provide immune for your baby
- 2 Provide perfect nutrition for your baby
- 3 Decrease the risk of malnutrition
- 4 Reduce allergies and asthma in babies
- 5 Easy to digest for baby
- 6 Enhance the emotional relationship between mother and baby
- 7 Avoid pregnancy
- 8 Free of charge

Start to breastfeed your baby within the first 1 hour after birth. First breastmilk is rich in protein and vitamin A which prevent from infection.

Wash your hands before you give breastfeeding.

Breastfeed your baby as often as possible (every 2-3 hours). Breastfeeding will help you produce more milk.

If you have any problems in breastfeeding, please consult with health providers.




After you give birth

Your baby should be exclusively breastfed for the first 6 months. You should not give other food even water.

2. Diagrams of infant's mouth

Good attachment to the breast




Bad attachment to the breast






- ✓ Support exclusive breastfeeding on demand, day and night, for as long as the baby wants.
- ✓ If newborn stays asleep for a long time, he/she should be put to breastfeed. Newborn should not be awakened for breastfeeding. If baby wakes, the breast should be offered.
- ✓ Advise mother that a baby should be exclusively breastfed until 6 months of life. Exclusive breastfeeding is a diet of ONLY breast milk, including expressed breast milk. Do not give other fluids such as (formula milk, water, sugar water, condensed milk, borbor) and other food that might be dangerous to the baby. Breast milk contains of nutrients and fluids that a baby needs until 6 months of life, so it is not necessary to give any other additional food and fluids.
- ✓ If the mother is HIV-infected, measures for preventing HIV transmission from mother to baby must be taken. Provide counseling and treatment.

Check for 4 correct attachments:

1. Mouth wide open
2. Lower lip turned downward
3. Baby's chin touching breast
4. More areola visible above baby's mouth than below and the sucks are slow and deep with occasional pauses

Signs of ineffective attachment:

1. Baby's mouth not open wide; turned in
2. Lower lip turned outwards
3. Baby's chin not touching breast
4. More areola seen below than the above

3.13 Postnatal Care Part

- Let's take care of your baby!-



Hand hygiene

The most significant risk for babies born at a health facility is nosocomial infection caused by health workers.

Touching or holding a baby unnecessarily is the most common way of introducing infection.



Let's take care of your baby!!

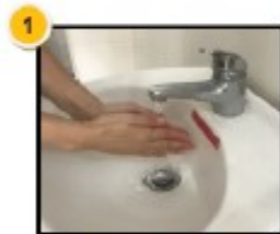
1. Keep your baby clean!!

1. Always wash your hands with soap and clean running water before and after caring baby
2. Change your baby's clothes frequently and wash your baby clothes dried out under the sun.
3. Let's your baby sleep in the clean place.
4. Bath with soap and clean water everyday except 24 hours after delivery

After you give birth...

HOW TO HANDWASH??

Wash your hand for 40-60 seconds.



Wet hands under running water



Apply soap on both hands



Rub and scrub both palms, each fingers and each thumbs.



Rub and scrub at the back of the hands, in between the fingers and each fingertips.



Rinse both hands thoroughly with running water



Dry both hands with clean towel or Kroma.

13



Health workers should touch a baby only when it is clinically required to do so. Health workers must wash their hands at the five moments of handwashing below:

1. Before touching a baby
2. After touching a baby
3. Before performing a procedure
4. After bodily fluid exposure
5. After coming in contact with the mother or newborn's surroundings



Health workers must take off their rings and jewelry and then wash their hands when arriving at the workplace, before and after wearing gloves, after toileting or before leaving for home.

All items that health workers touch may be sources of infection, including a stethoscope surface, medical materials and supplies, documents, pens and mobile phones.



Tip!

Kangaroo Mother Care (KMC)

KMC helps keep the baby warm, breathe effectively, breastfeed on demand, gain weight, has close bond with mother. Encourage other family members, including the father, to give KMC to the baby as well.

How to do KMC

1. Remove the baby's clothing except a nappy, a hat, and socks
2. Place the baby upright in skin-to-skin contact between the mother's breasts
3. Make sure the baby's hips and elbows are flexed into a frog-like position and the baby's head and chest are on the mother's chest. The baby's stomach is near the mother's upper stomach, with the head in a slightly extended position.
4. Keep the baby in place with a piece of cloth or scarf or sarong tied around the mother's and baby's body. The upper part of the cloth must be under the baby's ears.
5. Make sure it is tied firmly enough to prevent the baby from slipping out when the mother stands up, but not so firmly that the baby cannot move or breathe well
6. Explain to the mother that she can keep the baby in this position day and night, if possible
7. Tell her that shorter periods are also helpful, but the longer the better
8. Have the mother attempt to breastfeed whenever the baby wants to suckle
9. If the baby is not suckling effectively, do demonstration or tell the mother about proper positioning and attaching



Tip!

2. Keep your baby warm

1. Change diaper and cloth when wet
2. Don't put baby in cold and windy place
3. Keep baby warm by putting on hat, socks, gloves and warm cloth when not in your arms
4. Hold baby in chest of mother/father, skin to skin especially when baby's weight is less than 2.5kg or baby was born prematurely (before 37 weeks).



3. Umbilical Cord care

1. Wash your hand with soap and clean water
2. Keep the cord dry and clean
3. Don't apply anything on the cord stump
4. If the cord is dirty or wet, please bring your baby to health center.



4. Immunization

1. Baby should take BCG, Hepatitis B and Vit K 1 injection within 24 hours after birth.
2. Your baby must complete all immunizations before 1 year old according to the vaccination calendar (Please see and take care of Yellow Card)



ប្រតិទិនវ៉ាក់សាំងស្រី	
- ថ្ងៃ ០១ ខែ ០១ ឆ្នាំ ២០២០	វ៉ាក់សាំង BCG
- ថ្ងៃ ០៧ ខែ ០១ ឆ្នាំ ២០២០	វ៉ាក់សាំង Hepatitis B
- ថ្ងៃ ០៧ ខែ ០១ ឆ្នាំ ២០២០	វ៉ាក់សាំង Vit K 1
- ថ្ងៃ ០៧ ខែ ០១ ឆ្នាំ ២០២០	វ៉ាក់សាំង OPV1
- ថ្ងៃ ០៧ ខែ ០១ ឆ្នាំ ២០២០	វ៉ាក់សាំង DPT-HepB-Hib
- ថ្ងៃ ០៧ ខែ ០១ ឆ្នាំ ២០២០	វ៉ាក់សាំង PCV1
- ថ្ងៃ ០៧ ខែ ០១ ឆ្នាំ ២០២០	វ៉ាក់សាំង MR
- ថ្ងៃ ០៧ ខែ ០១ ឆ្នាំ ២០២០	វ៉ាក់សាំង JE



After you give birth...

Sleeping

1. Use a bed net day and night for the baby when not in direct skin-to-skin contact with the mother.
2. Let baby sleep on her/his back.
3. Keep baby away from indoor air smoke or people smoking.
4. Keep baby away from sick children and adults.

Cord Care

1. Do not touch, wrap or bandage around the cord stump and abdomen or apply anything on the cord stump.
2. Only clean dry clothes should be covered cord stump.
3. If stump is soiled, wash it with clean water and soap and dry it thoroughly with a clean cloth.
4. If umbilicus is bleeding, red draining pus, take the baby to a health facility.

Immunization

Encourage the woman to bring her baby to routine postnatal visits so as to receive vaccinations:

Vaccination based on a baby's age:

- **At birth:** Newborn will receive BCG and initial dose of Hepatitis B vaccines within 24 hours of birth,
- **6 weeks:** baby will receive OPV1, DPT-HepB-Hib1 and PCV1
- **10 weeks:** receive second dose of OPV, DPT-HepB-Hib and PCV2
- **14 weeks:** receive third dose of OPV, DPT-HepB-Hib, PCV3, IPV
- **9 months:** receive first dose of measles and rubella (MR) and JE vaccines
- **18 months:** receives second dose of measles and rubella (MR) vaccine

3.14 Postnatal Care Part

-Danger Signs for Newborn-

A baby who has breathing difficulty has one or more of the following problems: a respiratory rate >60 or <30 breaths per minute, chest in-drawing, grunting, or apnea (pause in breathing >20 seconds). Please follow the management in SMP(P137)

Any jaundice if age less than 24 hours or yellow palms and soles at any age → Refer urgently to referral hospital. Advise mother how to keep the baby warm on the way to the hospital.

Hyperthermia (>37.5 °C)
 Do not give antipyretic drugs to reduce the baby's temperature.
 If the baby's temperature is more than 39 °C:
 - Give appropriate drug(s) per IMCI guidelines before urgently referring to a hospital for appropriate care.
 Please follow the management in SMP(P138)

If the baby is currently having a convulsion /spasm, suspect neonatal tetanus or neonatal sepsis.
 Please follow the management in SMP(P139-)

Be Alert!! Danger Signs for Newborn
 If your baby has one of the danger signs, please take baby to health center or hospital **urgently, with delay!! You baby needs urgent treatment in health facility.**

- 1 Fever (>37.5°C) or cold (<36.5°C)**


 Cold: touch the foot and fingers and body if it is cold.
 Fever: lip and yes turn to be red and feel hot when touch baby's body
- 2 Difficult or fast breathing, severe chest in drawing or grunting**

 Fast breathing: >60 (breath/minute)
 Slow breathing: <30 (breath/minute)
- 3 Convulsions**

 The baby's arms and legs become stiff. Recurring movement of a part of the body occur.
- 4 Little or no movement**

 The baby only moves when stimulated, or doesn't move at all with stimulation.
- 5 Yellow skin, especially yellow on palm and soles**

 Yellow appears in first 24 hours of birth or on palms, soles and eyes at any age.
- 6 Not feeding well**

 The baby cannot suck and stop feeding when the mother tries to breastfeed.
- 7 Bleeding or pus from cord stump**

 Umbilicus is swollen and draining or bleeding.
- 8 Many(>10) skin pustules or swelling/redness of skin**

 Skin has pustules, especially around neck, armpit and inguinal area.
- 9 Eye(s) with redness and discharge pus**

 The eyelids become puffy, red, tender or has discharge pus.
- 10 Very pale or cyanosis**

 Baby's skin is very pale or cyanosis specially on palm, lip and eyelids.

If not well attached or not suckling effectively, teach correct positioning and attachment. If not able to attach well, teach the mother to express breast milk and feed by a cup.
 If not attachment problem, please find out if the child is currently ill based on IMCI guidelines.

After you give birth...
 Look around the neck, armpit and groin
 Count <10 → Local skin infection
 Count >10 → Possible serious illness
 Please follow the management in SMP(P145-146)

Please follow the management in SMP (P144)

Please follow the management in SMP (P144)

3.15 Postnatal Care Part

- Let's go to Postnatal care for check up you and your baby at health center-



Growth Chart

The growth chart is helpful to assess the growth development of the child. The Child Health Card is used for recording health activities provided to the child until 5 years old.

HOW TO FILL IN THE GROWTH CHART

1. Assess the age of the child
2. Plot completed weeks, months or years and months on a vertical line not between vertical lines.
3. Plot weight on a horizontal line or in the space between the lines to the nearest 0.1kg
4. Now follow the line from the weight of the child until it crosses the line of today's date and today's age of the child.
5. Put the mark where the lines cross each other.
6. When points are plotted for two or more visits connect the points with a straight line to better observe trends.

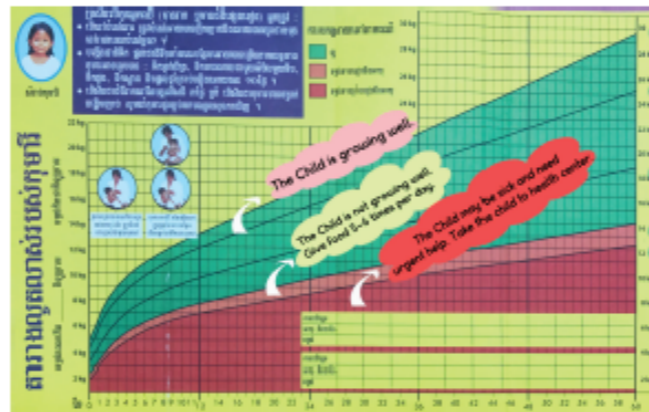
- If the child is in the **orange track** of the growth chart: → Find out if the child is currently ill – treat as IMCI guidelines, ask about recent changes in eating /or breastfeeding, Discuss age specific questions about the child's feeding, child's appetite, types and variety of foods given, frequency of feeding, family meal time habits.
- If the child's weight is in the **red track** → Refer child to the nearest hospital that provides treatment for malnourished children.

i Growth monitoring and promotion (GMP) must be performed for all children on a monthly basis until 2 years of age. Please keep monitoring up to 5 years old.



Let's go to Postnatal care for check-up you and your baby at health center

Weight your child every month from birth up to 2 years and quarterly from 2 years to 5 years of age.



1. Check the mother and newborn's health

1. Please visit Health Center to check up at least 4 times.
2. Please take baby to Health Facility immediately if baby has danger sign.



Ideal timing of Postnatal Care (PNC)

- PNC1:** Within 48 hours after birth, before leaving health facility
- PNC2:** Day 3 after birth, during the 1st week
- PNC3:** Day 7 to 14 after birth, during the 2nd week
- PNC4:** At 6 weeks after birth

	After Delivery						
	PNC1	PNC2	PNC3	PNC4	PNC5	PNC6	PNC7
1 week	1	2	3	4	5	6	7
2 week	8	9	10	11	12	13	14
3 week	15	16	17	18	19	20	21
4 week	22	23	24	25	26	27	28
5 week	29	30	31	32	33	34	35
6 week	36	37	38	39	40	41	42

Additional PNC visits during the 6 weeks if needed or if there is any problem related to mother and newborn.



Schedule of Postnatal Care

- PNC1:** within 48 hours after birth, check the mother and the newborn together (discharge before 24 hours is not allowed because it poses high risk and is not counted as PNC2 if performed before 48 hours)
- PNC2:** during the first week, preferably on day 3 (> 48 to 72 hours after birth, check the mother and the newborn together)
- PNC3:** during the second week after birth, check the mother and the newborn together (between day 7th -14th)
- PNC4:** at 6 weeks after birth, check the mother and the baby together (at the same time with baby vaccination schedule).

Additional PNC visits during the 6 weeks postpartum are conducted as needed if there is any problem related to mother and baby.



Please check how to check mother and baby in PNC using these posters: "Routine PNC monitoring" and "Contents of PNC"

ការតាមដានទារកទើបកើតជាប្រចាំនៅរាល់ពេលតាមដានម្តាយ

This poster provides a checklist for health workers to monitor the mother and newborn during PNC visits. It includes sections for 'មើល ក្បាល ក្បាល' (Check back) and 'ក្បាល ក្បាល ក្បាល' (Check front), with specific instructions on how to examine the baby's skin, head, and body.

ការដឹងពីគ្រោងសម្រួលសម្រាប់ម្តាយ និងទារក ចាប់ពីពេលកើតមកដល់ ៦ សប្តាហ៍

This poster details the specific health checks and advice provided during PNC visits. It lists various signs of illness in both mother and baby, such as fever, cough, diarrhea, and poor feeding, and provides guidance on when to seek further medical attention.

3.16 Postnatal Care Part

- How to give Complementary food to your child?-

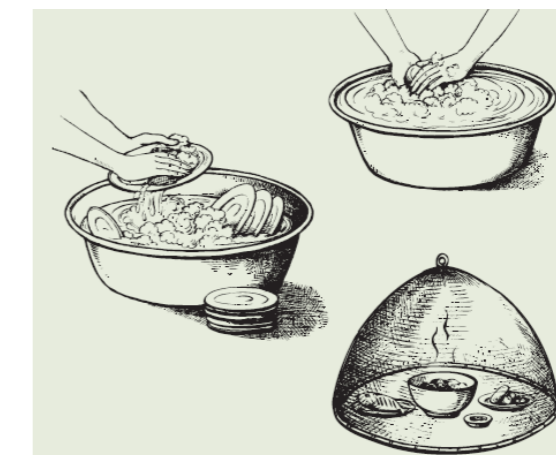


IMPORTANCE OF GOOD HYGIENE

Children often suffer because their food or water becomes contaminated with germs or parasites. It is easy for young children to get sick when beginning to introduce complementary feeding. To avoid giving contaminated food or water, parents should be careful when preparing and feeding complementary food to their children.

Parents should:

- Wash hand with soap before preparing the food or before touching the food
- Wash utensils with soap and keep them in the kitchen's utensil cabinet or a clean covered container
- Wash vegetables and fruits well with clean water before cooking or eating
- Keep the cooked food under a food net or in a cabinet to protect it from flies, dusts and germs
- Boil drinking water to kill the germs
- Only give freshly cooked food to children
- Cook fish and meat thoroughly to kill any germs or parasites that could infect your child



How to give Complementary food to your child?

1. From 6 months



1. Continue breastfeeding as much you can.
2. Introduce complementary foods, 2 times per day. Start with thick enriched porridge or well mashed food, 2-3 spoon at each meal, gradually add more.

2. From 7-8 months



1. Give thick enriched porridge or well mashed foods. Increase to 3 times per day and give breastfeeding frequently at least 8 times per day.
2. Increase to 1/2 of bowl at each meal gradually.

3. From 9-11 months



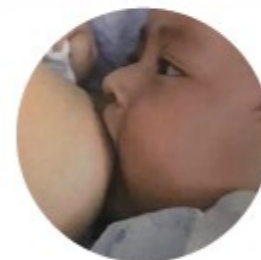
1. Give thick enriched porridge, finely chopped or mashed foods.
2. Give 3 meals and 1 healthy snack such as fruits (banana, mango, etc.) between meals. Additionally, breastfeed at least 6 times per day. Increase to 1 full bowl gradually.

4. From 12 to 24 months



1. Give family foods, well mashed or thick enriched porridge if necessary.
2. Give 3 meals and 2 healthy snacks between meals. Additionally, breastfeed whenever the baby wants at least 3 times per day. Increase to 1 full bowl gradually.

5. From 24 months and beyond



1. You can start to decrease the frequency of breast feeding.
2. Give food 3 times per day and healthy snacks such as fruits 2 times per day.
3. Packaged snack and canned juice are not healthy food for your child.



※ If the baby won't breastfeed, give 1-2 extra meals per day.

After you give birth...

After you give birth...

3.17 Continuum of Care Card



It is important for women to take MCH services through ANC and PNC. This card aims to motivate mother to attend ANC&PNC visit.

Continuum of Care Card for Maternal and Child Health

Mother's name Ms. XXXXXX

Pregnancy



ANC1

12/01/2019
Ms. XXXXXX



ANC2

13/04/2019
Ms. XXXXXX



If mother attend Antenatal care, Delivery and Postnatal Care at health center, please write

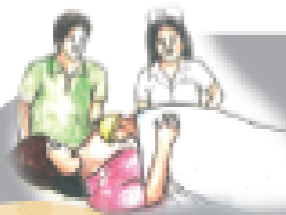
1. The actual attendance date of ANC/Delivery/PNC
2. Signature of midwife/nurse

ANC3

25/05/2019
Ms. XXXXXX

Delivery ❤️

03/08/2019
Ms. XXXXXX



ANC4

07/06/2019
Ms. XXXXXX

PNC1

Mother	Baby
04/08/2019	04/08/2019
Ms. XXXXXX	Ms. XXXXXX



PNC2

Mother	Baby
11/08/2019	11/08/2019
Ms. XXXXXX	Ms. XXXXXX



PNC3

Mother	Baby
18/08/2019	18/08/2019
Ms. XXXXXX	Ms. XXXXXX



PNC4

Mother	Baby
15/09/2019	15/09/2019
Ms. XXXXXX	Ms. XXXXXX



Let's encourage mother to come to check-up at health center!

Monthly Report of MCH educational handbook

Name of Health Facility: _____ Month: _____ Year: _____

Name of OD: _____

1. Total remaining Handbooks from previous month = _____ copies*

2. Total Handbooks received this month = _____ copies*

3. Total distribution:

a) Total Handbooks for pregnant women = _____ copies*

b) Total Handbooks for other purposes = _____ copies*

(Purpose: _____)

4. Total remaining Handbooks by the end of this month = _____ copies*

Reviewed by:

Reported by:

Name: _____

Name: _____

Title: _____

Title: _____

Signature: _____

Signature: _____

* write 0 (zero) if no handbooks remain/received/distributed.

Quarterly Report of the MCH educational handbook Distribution

Name of OD: _____ Month: _____ - _____ Year: _____

Name of health center	Number of Handbooks		Number of		Remarks
	Distributed ____Quarter ¹	Remaining ____Quarter ²	Pregnant women ³	Pregnant women received MCH handbooks ⁴	

- Note: 1) Total handbooks distributed based on monthly report from health facility
 2) Total handbooks remaining based on monthly report from health facility
 3) Total number of pregnant women visit ANC at that month
 4) Total number of pregnant women who received MCH handbooks based on monthly report

Reported by:
 Date: _____
 Name: _____
 Title: _____
 Signature: _____

DEMONSTRATION

CASE 1 ANC 1 (14WEEKS) 10 MARCH 2019

Mrs. Song Khema was born on August 25, 1998. She is a housewife and visited Chamlang Health Center on 10 March 2019 for antenatal care. Her husband's name is Mr. XXXXXXX, works as a driver. Their address is XXXXXXXXXXX.

This is her first pregnancy and she doesn't have a history of abortion or miscarriage. Her registration number is 41 in the ANC register book. She doesn't have any complications so far. She doesn't take any medication.

The findings: Mrs. Song Khema is 151 cm tall, the first day of her last menstrual period was Dec. 2, 2018. This pregnancy is primipara. Blood pressure 110/80 mmHg, weight 53kg, Hb 11gr %, no edema found. Today's Body temperature is 37.0°C, pulse 78 times/ min, respiratory rate 22 breaths/ min. No vaginal hemorrhage. No cough with mucus or any danger signs such as headache, dizzy.

She has never taken TT immunization and also HIV test. She said to midwife, " This is my first pregnancy, so I don't know how I should do during delivery and after delivery." " I don't have an appetite."

Chief's name at Chamlang Health Center is Mr. XXXX XXXX, and his mobile number is XXX-XXX-XXX. Her emergency transportation is taxi. she wants to ask the driver close to her house. His name is Mr. XXX XXXX (Tel XXX-XXX-XXX). The next appointment is 19 May 2019 (24weeks).

On 28 July 2019, Mrs. Song Khema visited Chamlang Health Center for antenatal care.

The findings: Blood pressure 120/80 mmHg, weight 59kg, Hb 11.2%, no edema found, today's Body temperature is 37.1°C, pulse 80 times/ min, respiratory rate 22 breaths/ min. No vaginal hemorrhage. No cough with mucus or any danger signs such as headache, dizzy. Fundus height 31.5cm, fetal location with head presentation and the fetus heart beat was 140/min.

Mrs. Song Khema said to midwife, " I have a headache sometimes." , " My baby moves frequently." , " I don't know how my delivery starts." , "What should I bring to health center when my delivery starts?" She looks nervous about her delivery because she doesn't have enough information about a delivery.

The next appointment is 11 August 2019 (36weeks).

On 4 September 2019, Mrs. Song Khema gave birth at Chamlang Health Center.

It was a spontaneous delivery of a boy. Weight at birth 3,100 grams, 51 cm in length, head circumference 33cm. The newborn immediately cried loudly with Apgar score 9/10.

On 5 September 2019, Mrs. Song Khema and her baby will discharge from Chamlang Health Center. Mrs. Song Khema didn't have postpartum complications.

Findings of the examination on the newborn: Weight 3,000grams, Temperature 37.2°C, Respiratory rate 40 times/minute, Umbilical cord is clean, there is no any sign of dangers. The baby moves actively and cried loudly. However, the baby cannot breastfeed well, although she tries to give breastfeeding to her baby based on midwife's instruction. The baby took Vit. K, Hep. B and BCG injection within 24 hours.

Findings of the examination on Mrs. Song Khema: blood pressure was 110/70 mmHg. pulse 76 times/ min, respiratory rate 20 breaths/ min, body temperature 37.0 °C, normal uterus contractions, hemorrhage <100ml/day, lochia doesn't smell. no urine or stool problems. No problem on her breasts such as swelling, burn and pain. She has discussed family planning with midwife.

Mrs. Song Khema said to midwife, " I am not sure about the next visit and immunization.", "If my baby has any problems, how should I do?"

The next appointment is 11 September 2019 (1week after delivery).

Skill Check list for case 1**Case 1** **Name:** _____ **Date:** ____/____/2019

	Check Point	Yes (2)	Partial (1)	No(0)
1	Give a frendly greeting to mother			
2	Using mother's name			
3	Explain cleary the objective and benefit of using the MCH educational booklet			
4	Explain sections of booklet			
5	Complete important information(family information etc.)			
6	Explain	ANC timing and how important it is		
7		TT		
8		STIs		
9		Nutrition		
10		Daily activities		
11	Advice mother to read with husband/ family			
12	Remind	mother to bring the card holder in every visit		
13		mother to keep the book properly		
14	Allow mother and family to ask any questions			
15	Tell mother/family thanks for cooperating and positive participation			
16	Tell mother the next appointment			
17	Record in ANC register book			
		Total		
		Total score	/34	

Skill Check list for case 2

Case 2 Name: _____ Date: ____/____/ 2019

	Check Point	Yes (2)	Partial (1)	No(0)	
1	Give a frendly greeting to mother				
2	Using mother's name				
3	Explain cleary the objective and benefit of using the MCH educational booklet				
4	Explain				
5					danger sign for pregnant mother
6					birth preparation
7					signs of labor
8	the some points during delivery				
8	Advicse mother to read with husband/ family				
9	Remind				
10					mother to bring the card holder in every visit
10	mother to keep the book properly				
11	Allow mother and family to ask any questions				
12	Tell mother the next appointment				
13	Tell mother/family thanks for cooperating and positive participation				
14	Record in ANC register book				
		Total			
		Total score	/28		

Skill Check list for case 3

Case 3 Name: _____ Date: ____/____/ 2019

	Check Point	Yes (2)	Partial (1)	No(0)
1	Give a frendly greeting to mother/baby			
2	Using mother/baby's name			
3	Explain cleary the objective and benefit of using the MCH educational booklet			
4	Explain how to take care of herself after delivery			
5				
6				
7				
8	Advise mother to read with husband/ family			
9	Remind mother to bring the card holder in every visit			
10	Allow mother and family to ask any questions			
11	Tell mother the next appointment			
12	Tell mother/family thanks for cooperating and positive participation			
13	Record in PNC register book			
Total				
Total score			/26	