INTEGRATED PREVENTION AND MANAGEMENT OF SELECTED ACUTE AND CHRONIC ILLNESS
(IPMSACI)

USE ALL BOXES THAT MATCH THE SYMPTOMS TO DIAGNOSE THE ILLNESS (For children under 5 years use the IMCI job aide)

1. **Greet** the patient in a warm and welcoming manner so as to put the patient at ease
2. **Check** for emergency signs (especially if the patient looks very unwell)
3. **Ask** about the problem. During the first ‘golden’ minute, let the patient speak freely and ask open questions to find out more details: ‘How long has it been going on’; ‘Where is the pain’ Also ask if there is cough, fever or diarrhoea?
4. **Identify** the relevant box relating to the presenting problem, e.g. if cough, look at the ‘cough/difficult breathing’ box.
5. **Look, listen and feel** for signs relevant to the presenting problem (as shown in the first column)
6. Assess ‘IF’ signs are present: start from the top looking for ‘pink signs’; if there are no ‘pink signs’, look at the orange row; if there are no orange signs, look at the yellow row; if there are no yellow signs, look at the green row.
7. **Diagnose** then, if there are other symptoms, look at other relevant boxes – there may be more than one illness.

**Give Treatments** according to the rightmost `treatment` column and explain. Adult doses are given below, **for children over 5 years see the CC drug guide**. Refer to Upazila Health Complex or nearest government hospital urgently if any patient classified in a pink box. The orange column is for non urgent referral. Follow up in 2 days if any patient classified in a yellow box (unless different follow-up specified in the box)

7. **Give preventive care and advice** and consider screening for common diseases: e.g. ask all women if they want FP advice; if age>40 years, check BP and if overweight, check blood glucose, If female and age>30 years ask for VIA check. (see box at the last page)

<table>
<thead>
<tr>
<th>SYMPTOMS ASK:</th>
<th>IF</th>
<th>DIAGNOSE AS:</th>
<th>TREATMENTS and explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Emergency signs/symptoms</td>
<td>One or more emergency signs present</td>
<td>EMERGENCY CONDITION</td>
<td>• If obstructed breathing, prop patient up or help to position of best breathing</td>
</tr>
<tr>
<td>• Airway and Breathing: airway obstructed, blue lips (central cyanosis) or severe breathing distress</td>
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<td></td>
<td>• Lay the patient to one side to make it easy for drooling saliva or vomit</td>
</tr>
<tr>
<td>• Shock: excessive sweating cold hands and feet, very fast pulse (&gt;110) or low systolic BP (&lt;90),</td>
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<td>• If unconscious, manage to keep the airway open</td>
</tr>
<tr>
<td>• Heavy bleeding?</td>
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<td>• If wheezing give salbutamol, if can take</td>
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<tr>
<td>• Pain: where? type, duration?</td>
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<td></td>
<td>• In case of shock put their feet higher than their head, and keep them warm</td>
</tr>
<tr>
<td>- If in chest: chest ‘heavy’ or ‘tight’?,</td>
<td></td>
<td></td>
<td>• Give glucose or a sweet drink, if can take</td>
</tr>
<tr>
<td>- If in abdomen: abdomen hard ? Vomiting/Defication?</td>
<td></td>
<td></td>
<td>• Give first dose of amoxicillin 4 x 250mg capsules or Cotrimoxazole 480x2mg, if can take</td>
</tr>
<tr>
<td>-If in neck: severe or neck trauma, or severe</td>
<td></td>
<td></td>
<td>Refer URGENTLY to Upazila Health Complex or nearest government hospital (in case of difficult breathing or neck trauma, help to keep neck straight.</td>
</tr>
</tbody>
</table>
### 2. COUGH OR DIFFICULT BREATHING?

**Ask about:**
- For how long?
- Breathlessness lying flat?
- Chest pain?
  - Is it new?
  - Occasional?
  - Old?
- Type of pain
  - Severe? -- Mild?
- Coughing up blood?
- Previous episodes? If so, do these episodes wake you at night or early in the morning?
- Night fever and sweats?
- Hoarseness > 2 weeks
- Smoking history
- Treatment for a chronic lung or heart problem (asthma, COPD, heart failure, TB, Cancer of Lung)
- Excessive weight gain or loss

**Take the temperature**
Take pulse, very high is more than 100 (if above 12 years) or more than 120 if 5-12 years old

**Look and listen for:**
- Wheezing
  - Count breaths for one minute

<table>
<thead>
<tr>
<th>Age</th>
<th>Fast breathing</th>
<th>Very fast breathing</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-12 years</td>
<td>30 or more breaths/min</td>
<td>40 or more breaths/min</td>
</tr>
<tr>
<td>&gt;12 years</td>
<td>20 or more breaths/min</td>
<td>30 or more breaths/min</td>
</tr>
</tbody>
</table>

**If wheezing and fast breathing:**
Give 2 salbutamol tablets and after 30 mins count the breaths and reassess

#### One or more of:
- Very fast breathing
- Fever > 102°F
- Pulse > 120, or
- Lethargy or not able to walk unaided
- Breathless lying flat
- Severe chest pain
- Coughing up blood

#### SEVERE PNEUMONIA OR VERY SEVERE DISEASE
- Give first dose of amoxicillin 4x250 mg or Cotrimoxazole 2x480mg (if can take)
- If wheeze give salbutamol 4 mg, (If possible give salbutamal inhaler)
- If fever, give first dose of Paracetamol AND
- Refer URGENTLY to Upazila Health Complex or nearest government hospital

#### POSSIBLE CHRONIC LUNG/HEART PROBLEM
- If cough > 3 weeks, send to Upazila Health Complex or nearest government hospital to detect the cause
- If wheezing treat with salbutamol, and if has had episodes previously – refer to Upazila Health Complex or nearest government hospital to assess for asthma or chronic lung disease (COPD)
- Advise when to return immediately
- If a smoker, counsel to stop

#### PNEUMONIA
- Give amoxicillin 500mg capsule(2x250mg) x3 a day for 5 days
- If wheezing also give salbutamol 4 mg tablets x 3 a day for 5 days
- Advise when to return immediately
- Follow up in 2 days
- If persists or recurs then refer to Upazila Health Complex or nearest government hospital

#### NO PNEUMONIA COLD/COUGH, OR ACUTE BRONCHITIS
- No signs of pneumonia or chronic lung disease (none of the above)

#### NO PNEUMONIA
- Soothe throat/cough with safe remedy
- Advise when to return immediately
- Say to return in 2 days ‘if not improving’
- If a smoker, advise to stop

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**Note:** If breathing rate not fast, no antibiotic needed. If cough > 3 weeks, send to the Upazila Health Complex or nearest government hospital to detect the cause.
### FEVER (NON MALARIA AREA)

(Fever by history, or feels hot, or temperature more than 99.5°F)

**For how long?**

### Check the following:
- Neck stiff
- Temperature 102°F or more
- Fast breathing rate, (as the table above)
- Signs of dehydration, as below
- Confusion, agitation, lethargy?
- Very week, not able to walk unaided?
- Not able to drink
- Rash – non blanching
- Runny nose, dry cough or red throat
- Swelling, and/or not using an arm, leg or joint
- Abdominal/ loin pain
- Passing urine often
- Pain on passing urine
- Red, inflamed or oozing skin, or wound Jaundice
- Convulsion, vomiting

### FEVER / SEVERE FEBRILE DISEASE

- Any of these signs:
  - Confusion, agitation, lethargy or
  - Neck stiff
  - Temperature 102°F or more
  - Fast / deep breathing or
  - Cannot walk unaided or
  - Not able to drink or
  - Rash, non-blanching/petechial

<table>
<thead>
<tr>
<th>Condition</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Swelling of, or not using, an arm, leg or joint</td>
<td>Refer to Upazila Health Complex or nearby government hospital.</td>
</tr>
<tr>
<td>SEPTIC JOINT or BONE</td>
<td>Refer to Upazila Health Complex or nearby government hospital.</td>
</tr>
<tr>
<td>FEVER CAUSE UNKNOWN</td>
<td>Refer to Upazila Health Complex or nearby government hospital.</td>
</tr>
<tr>
<td>SKIN INFECTION</td>
<td>Refer to Upazila Health Complex or nearby government hospital.</td>
</tr>
<tr>
<td>POSSIBLE UTI</td>
<td>Give Cotrimoxazole 960mg (2 tablets) twice daily for 5 days</td>
</tr>
<tr>
<td>PERSISTENT FEVER</td>
<td>Treat if an apparent cause, and review in 2 days</td>
</tr>
<tr>
<td>MILD VIRAL ILLNESS</td>
<td>Give Paracetamol</td>
</tr>
</tbody>
</table>

### FEVER (IF LIVES IN OR VISITED A MALARIA AREA)

Chittagong, Cox’s Bazar, Rangamati, Bandarban, Khagrachari

(Fever by history, or feels hot, or temperature more than 99.5°F)

- Do a rapid diagnostic test (RDT) or blood slide for malaria

<table>
<thead>
<tr>
<th>Condition</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>RDT positive and: Any of the above 'very severe febrile' signs</td>
<td>Give oral anti-malarial medicine and Paracetamol, AND Refer URGENTLY Upazila Health Complex or nearby government hospital.</td>
</tr>
<tr>
<td>RDT positive</td>
<td>Give oral anti-malarial medicine</td>
</tr>
</tbody>
</table>

### DIARRHOEA?

Any of these signs: SEVERE

- Refer URGENTLY to Upazila Health Complex or nearby government hospital.
### ASK:
- For how long?
  If > 14 days is ‘persistent’; see below
- Is there blood in the stool?
- Is there fever?
- Not able to drink or drinks poorly?

### LOOK AND FEEL:
- Lethargic or unconscious?
- Sunken eyes?
- Skin pinch goes back very slowly (>2 seconds)
- Skin pinch goes back slowly
- Dry lips and tongue
- Drinks eagerly, thirsty

<table>
<thead>
<tr>
<th>DEHYDRATION</th>
<th>COMPLEX OR NEARBY GOVERNMENT HOSPITAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complex or nearby government hospital. Advise frequent sips of ORS if can drink.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SOME DEHYDRATION</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Give ORS in clinic for 4 hours and reassess</td>
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<tr>
<td>Give ORS to take home</td>
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</tr>
<tr>
<td>Ask to continue drinking a little and often and to take normal food</td>
<td></td>
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<tr>
<td>Advise when to return immediately</td>
<td></td>
</tr>
<tr>
<td>Follow up in 5 days if not improving</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NO DEHYDRATION</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Counsel on home treatment:</td>
<td></td>
</tr>
<tr>
<td>Give extra fluid</td>
<td></td>
</tr>
<tr>
<td>Continue eating</td>
<td></td>
</tr>
<tr>
<td>Advise when to return immediately</td>
<td></td>
</tr>
<tr>
<td>Follow up in 5 days if not improving</td>
<td></td>
</tr>
</tbody>
</table>

**Use this box if persistent**

- 14 days or more and dehydration present
  - SEVERE PERSISTANT DIARRHOEA
    - Refer URGENTLY to Upazila Health Complex or nearby government hospital. Advise frequent sips of ORS if can drink.
    - Give Metronidazole 400mg thrice daily for 5 days
    - Advise extra fluids and to continue eating
    - Follow up in 5 days – if not improved

- 14 days or more and no dehydration
  - PERSISTANT DIARRHOEA
    - Give Metronidazole 400mg thrice daily for 5 days
    - Advise extra fluids and to continue eating
    - Follow up in 5 days – if not improved

- Blood in stool
  - BLOOD DYSENTERY
    - Give Cotrimoxazole 960mg x 2 for 5 days
    - Advise extra fluids/ORS, hand washing with soap
    - Follow up in 2 days

- For diarrhoea only give antibiotics if blood, persistent (>14 dys) or fever (also go to the fever box)

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**6. WEIGHT LOSS, ANAEMIA, MALNUTRITION ?**

- Weight loss of unknown cause, or visible wasting/loose clothing?

  **Ask:**
  - How much? and how long?
  - About diet

  **Look for:**
  - Oedema of both feet?
  - Sunken eyes?
  - Look at the palms and conjunctiva for pallor
  - If pallor ask:
    - Severe palmar and conjunctival pallor
    - Pallor and breathlessness at rest or ≥20 breaths per minute
    - Black stools
    - Blood in stools or urine
    - Weight loss reported, or loose clothing or visible wasting
    - Pitting oedema of legs
    - Sunken eyes
    - Unable to stand

  **SEVERE ANAEMIA, WEIGHT LOSS OR UNDER NUTRITION**
  - Refer to treat the anaemia and/or
  - Assess for weight loss; exclude TB, diabetes, cancer or other serious disease
  - **If a malaria area, do RDT, and if positive, give treatment**
    - Check random blood glucose
- Black stools (faeces)?
- Blood in stools?
- Blood in urine?
- In women heavy menstrual periods, abnormal or post-menopausal bleeding?

CHECK the breathing rate

<table>
<thead>
<tr>
<th>Palmar or conjunctival pallor</th>
<th>ANAEMIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Give Ferrous fumarate/folic acid x 2 daily, counsel to adhere (3 months)</td>
<td></td>
</tr>
<tr>
<td>Advise locally available foods rich in iron</td>
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<tr>
<td>Give albendazole if none in last 6 months</td>
<td></td>
</tr>
<tr>
<td>If malaria area do RDT - if positive treat and follow up in 14 days</td>
<td></td>
</tr>
<tr>
<td>If diarrhoea, treat as above, see in 14 days</td>
<td></td>
</tr>
<tr>
<td>If heavy periods see “Stomach pain/genito-urinary” section below.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No pallor</th>
<th>Little weight loss (&lt;5%)</th>
<th>NO ANAEMIA NOR SIGNIFICANT WEIGHT LOSS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advise on healthy eating and energy and nutrient rich food</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>STOMACH PAIN/ GENITO-URINARY PROBLEM?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men and Women</td>
</tr>
<tr>
<td>Ask:</td>
</tr>
<tr>
<td>For how long?</td>
</tr>
<tr>
<td>Pain, 'point to where it is'</td>
</tr>
<tr>
<td>Passing urine often?</td>
</tr>
<tr>
<td>Burning on urination?</td>
</tr>
<tr>
<td>Blood in urine?</td>
</tr>
<tr>
<td>Vomiting? Blood?</td>
</tr>
<tr>
<td>Constipation?</td>
</tr>
</tbody>
</table>

Look and feel:
Lie patient flat, press gently with the flat part of your fingers (not finger tips), Is the abdomen:
- Tender (painful when touched)?
- Soft or hard?
- Is pain worse when you quickly lift the examining hand off?
- Swollen?
- Is there a mass felt?
- Jaundice (yellow eyes)

Measure temperature and heart rate. If fever: see section above.

If 50 years or above, ask about:
- a change in their usual stool (more or less frequent?); if present for a month or more – refer.

Women only ask:
- Menstrual pain or
- Missed period or
- Irregular bleeding
- Bleeding when have sex
- 45 year old, ask if post

Severe abdominal pain, or Abdomen tender and any of:
- Fever > 100.4°F
- Pulse > 110 (adult) or
- Stomach muscles feel hard, or pain is worse as lift hand off, or
- Mass
- Not able to drink, or
- Jaundice (yellow eyes)

SEVERE ABDOMINAL PROBLEM
- Refer URGENTLY to Upazila Health Complex or nearby government hospital
- Say take no food or drink until seen by doctor (surgery may needed)

<table>
<thead>
<tr>
<th>Lower abdomen tender on touch, in women</th>
<th>PELVIC INFLAMMATORY DISEASE (PID)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refer URGENTLY to Upazila Health Complex or nearby government to Gynaecologist hospital</td>
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</tbody>
</table>

| Recent missed period or abnormal bleeding or |
| Bleeding during pregnancy |
| Anaemia |
| Can’t urinate, or testis pain |
| Blood in urine |
| KIDNEY DISEASE |
| Refer URGENTLY to Upazila Health Complex or nearby government hospital |

| Diarrhoea and/or vomiting |
| Constipation |
| Abdomen soft and no fever and none of the above |
| DIARRHEA, VOMITING OR CONSTIPATION |
| If diarrhoea, see diarrhoea above |
| If also fever, see fever above |
| If constipation advise more fluids, vegetables and fruits |

<p>| Burning pain mid central upper abdomen, but abdomen is soft |
| GASTRITIS |
| Give an antacid; say if persists or recurs to go to Upazila Health Complex or nearby government hospital |</p>
<table>
<thead>
<tr>
<th><strong>menopause bleeding?</strong>, if so refer</th>
<th><strong>Passing urine often and burning (but no discharge)</strong></th>
<th><strong>URINE INFECTION</strong></th>
<th><strong>Give Cotrimoxazole 960mg for 5 days</strong></th>
<th><strong>Advise to drink more water</strong></th>
<th><strong>Review in 2 days</strong></th>
<th><strong>If not improved refer to Upazila Health Complex of nearby government hospital for urine test and treatment</strong></th>
<th><strong>If 40 years or more do glucose test</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt; 30 years, ask if has had or knows about VIA test? If available locally refer for a test</td>
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</tbody>
</table>

**Men** only ask:
- Do you have pain in your scrotum (if yes, trauma? refer)
- Discharge? Burning/irritation?

<table>
<thead>
<tr>
<th><strong>In Women</strong></th>
<th><strong>Any one of:</strong></th>
<th><strong>POSSIBLE GONORRHOEA OR CHLAMYDIAL INFECTION</strong></th>
<th><strong>Refer to the UH Upazila Health Complex of nearby government hospital C</strong></th>
<th><strong>If husband has urethral burning and discharge refer him also to Upazila Health Complex or nearby government hospital</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt; 45 years, Post menopausal bleeding</td>
<td></td>
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<tr>
<td>Itchy</td>
<td></td>
<td><strong>CANDIDA</strong></td>
<td><strong>Apply gentian violet locally</strong></td>
<td><strong>Review in 5 days</strong></td>
</tr>
<tr>
<td>White curd-like vaginal discharge</td>
<td></td>
<td></td>
<td></td>
<td><strong>If no improvement, refer to UHC for treatment</strong></td>
</tr>
<tr>
<td>Whitedischarge and Fishy odour</td>
<td></td>
<td><strong>BACTERIAL VAGINOSIS</strong></td>
<td><strong>Metronidazole single dose 2g</strong></td>
<td><strong>Review in 5 days</strong></td>
</tr>
<tr>
<td>No signs of the above</td>
<td></td>
<td></td>
<td></td>
<td><strong>If no improvement, refer to UHC for treatment</strong></td>
</tr>
<tr>
<td>Menstrual bleeding heavier or more painful than usual</td>
<td></td>
<td><strong>HEAVY or PAINFUL PERIODS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Missed period</td>
<td></td>
<td><strong>POSSIBLE PREGNANCY</strong></td>
<td><strong>Start check according to pregnancy guideline</strong></td>
<td></td>
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<tr>
<td>Eligible couple</td>
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</tbody>
</table>

**In Men**
- Burning/irritation and/or
- Discharge, white or yellow

**GENITAL OR ANAL PROBLEM**
- Wound or blisters or Ulcer
- Tender groin lump or Warts
- Genital or Anal problem

**Referral of his/her wife/husband also**

**SKIN, MOUTH OR BREAST PROBLEM**
- Wound, blisters, ulcer, wart, or tender lump in groin in men or women

**DRUG REACTION? or SEVERE TISSUE INFECTION**
- Generalised wide-spread; redness, with small bumps or blisters, or
- Skin lesions which are growing, irregular shape, irregular colour, ulcerated
- Red, warm, tender area or wound with spreading red

**Stop medications they've taken**
- Give one Chlorpheniramine Maleate 4mg tablet
- Refer URGENTLY to Upazila Health Complex or nearby government hospital
<table>
<thead>
<tr>
<th>Area</th>
<th>Problem</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has it spread out gradually, or new separate areas appear?</td>
<td>Breast lump or</td>
<td>Refer URGENTLY to Upazila Health Complex or nearby government hospital</td>
</tr>
<tr>
<td>Itchy? or tender?</td>
<td>Discharge from nipple</td>
<td></td>
</tr>
<tr>
<td>Are family members also affected?</td>
<td>Nipple turned in</td>
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</tr>
<tr>
<td>Taking any medicine?</td>
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<td></td>
</tr>
<tr>
<td>LOOK</td>
<td>portraits of areas</td>
<td></td>
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<tr>
<td>Enlarged lymph nodes:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&gt; 2 cm diameter, more than 3, increasing in size or present &gt;6 weeks</td>
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<tr>
<td>Is it infected, such as:</td>
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<tr>
<td>red, tender, warm, pus or crusts, or wet ‘oozing’?</td>
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</tr>
<tr>
<td>Is the centre different to the edge?</td>
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<td></td>
</tr>
<tr>
<td>Is the surface scaly?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If BREAST problem – look for:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nipple discharge? or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nipple turned in? or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lump felt ?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If MOUTH problem look for of:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ulcer (not by injury)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White or red patch</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lump which won’t move</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Painful opening of mouth?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Numbness</td>
<td></td>
<td></td>
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<tr>
<td>LYMPH NODES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lymph node &gt;2 cm diameter, more than 3, increasing in size or present &gt;6 weeks</td>
<td></td>
<td>Refer to Upazila Health Complex or nearby government hospital</td>
</tr>
<tr>
<td>INFECTED SKIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tender, red, wet, oozing or crusts</td>
<td></td>
<td>Give antibiotic, After the infection has been cured, treat for scabies according to next box</td>
</tr>
<tr>
<td>SCABIES</td>
<td></td>
<td>Apply Benzyl Benzoate (BB), all skin from neck down, keep it whole day, then bath for consecutive 3 days. For children same lotion should be used adding half amount of water</td>
</tr>
<tr>
<td>Pale, round, bald scaling patches on scalp, or round patches with a thicker edge on body, or between toes</td>
<td>RINGWORM (Tinea)</td>
<td>Apply Benzoic and salicylic acid (Whitfield) ointment to affected area 3 times a day for 3 weeks.</td>
</tr>
</tbody>
</table>
9. HEADACHE OR NEUROLOGICAL OR MENTAL HEALTH PROBLEM

Ask and look for:
- Reduced level of consciousness
- Recent head trauma or
- Behavioural changes or
- Loss of body function e.g. Speech change, vision loss, new weakness/numbness of face, arms or legs
- Neck stiffness
- Memory problem
- Recent confution
- Recent convulsion
- Prolonged headache >2 weeks
- Recent convulsion or
- If recent illness with fever:
  - Tender above or below eyes?
- If repeated/recurrent headache:
  - Visual symptoms?
  - Vomiting?
  - One-sided?
  - Migraine diagnosis previously?
- If 40 years or more - do BP
- If pregnant for 5 months - do BP and refer if raised.
- If patient or relative says, or they look depressed or anxious, ask if:
  - Low mood/ depressed
  - Loss of interest in things previously enjoyed
  - Has suicidal intention or
  - Very anxious, or gets panic feelings

Recently, any one of:
- Reduced level of consciousness
- Any kind of weakness/numbness of any part of body
- Neck stiffness
- Speech problem
- Recent head trauma
- Behavioural change
- Recent confution
- Recent convulsion
- Headache 2 weeks or more
- Diastolic blood pressure >120
- Strange thoughts, or
  - Can hear or see things which others cannot, or
  - Suicidal intent or
  - Does not know where he is/ confused, or reduced consciousness

Has these 2 symptoms:
- Low mood/ depressed and loss of interest in things previously enjoyed or,
- Has suicidal intention or
- Very anxious, or gets panic feelings

- Tender over the sinuses (above or below the eyes)

- Repeated headaches with:
  - Visual symptoms or
  - Vomiting or
  - One-sided or
  - Migraine diagnosis

- None of the above
- Not high blood pressure

- Refer URGENTLY to Upazila Health Complex or nearby government hospital

- Refer URGENTLY to Upazila Health Complex or nearby government hospital

- Refer to UHC to Upazila Health Complex or nearby government hospital

- Give Amoxicillin 250mg x3 for 5 days
- Give Paracetamol 2 x 4 times a day

- Give Paracetamol 2 x 4 times a day
- Explain keep Paracetamol ready to start to take early if headache, and to rest in a dark room.

10. EYE PROBLEM

Ask for how long?
Less than 2 weeks (acute):
- Any pain due to injury
- Sight reduced? or
- Red? or Painful?
- White pupil
- Squint

Longer than 2 weeks (chronic):
- Reduced sight,

Recently, any one of:
- Injury to Cornea
- Recent reduced vision or
- Red and painful eye
- Vision problem with headache 2 or more weeks
- White pupil
- Squint

- Red irritated (not painful) eye, no loss of sight

- Apply Chloramphenicol eye drops, 2 drops, 6 times a day for 5 days

- None of the above and

POOR EYESIGHT
- Refer to Upazila Health Complex
Keep this job-aide on your desk where you can look at it during consultations. Read your “How to diagnose and treat in primary care” and use W.E.L.L - to improve your communication skill during consultations. For all patients, think of screening and prevention.

**SCREENING & PREVENTION**

**Diabetes glucose test and BP test** if 40+ years and look over-weight (or waist is > 102cm men or > 88cm women):
- If BP > 140/90 repeat reading and if also high, refer for treatment.
- If random blood glucose is > 11 mmol/L, repeat - say to return in morning after no food/breakfast. If over 7 mmol/L, diagnose diabetes and refer to UHC NCD corner, BADAS clinic or nearby government hospital.

**Known diabetes or high BP or overweight :**
- counsel patient and family member about cooking with less oil and salt,
- Advise to avoid sugary drinks or foods. Counsel about how they can increase daily activity or to walk minimum 30 minutes.
- **Counsel all patients** to keep appointments and take prescribed medications regularly.
- **Advise when to return urgently** Upazila Health Complex or nearby government hospital

**Anaemia and/or under nutrition:** discuss what healthy foods are available and affordable.

**Drug doses** and details: see your CC drug guide. Always ask if an allergy e.g. to an antibiotic. Ask a woman if pregnant or if breast feeding; if so, do not use oral drugs, except Paracetamol or Amoxicillin.

**Women’s health:** If pregnant arrange antenatal care. If not, discuss contraception wishes: pill, injectable, IUD, implant? Send to FWA. If married and > 30 years and not had cervical cancer VIA check in the last 3 years, arrange VIA check and if is not available locally, refer for VIA to Upazila Health Complex or nearby government hospital.