

Provider's name: _____

Observation ID # _____

.....

**RAPID ASSESSMENT OF MALARIA DURING PREGNANCY
TOOL 5: HEALTH-CARE WORKER OBSERVATION**

Observer name _____ Today's date: ____/____/____ Observer number _____ Day Month Year
Observation ID number: ____ -- ____ ____ ____ Digit 1 = facility number Digits 2, 3 & 4 = provider's consecutive number

1. Woman's arrival time: ____:____ AM/PM
2. Training of health care worker[]
Physician = 1
Health Officer = 2
Midwife = 3
Nurse = 4
Health assistant = 5
Sanitarian = 6
Other = 9 (specify) _____
3. Number of ANC visits during this pregnancy
(including this one)[]
Obtain information from ANC card. If no ANC card is available, skip this question.

3a. Check this box if woman's first ANC visit
4. Observation of health care worker with woman (check if behavior was performed by any of the clinic staff):

YES	NO
___	___
___	___
___	___
___	___
___	___

Observation ID # _____

YES NO

- Pregnancy symptoms
- Contraceptive history
- Reproductive history - prior deliveries/outcomes; complications
- Medical history
- Asks woman about HIV status
- Counsels women about HIV/AIDS during pregnancy, childbirth, postpartum

Physical examination (*during each ANC visit*):

- Measures blood pressure
- Measures fundal height (abdominal exam)
- Listens to fetal heart
- Screens for anemia (physical signs)
- Prescribes or dispenses iron/folate
- Prescribes or dispenses antimalarial prophylaxis
- Administers tetanus toxoid if needed

Laboratory examination:

- Orders urine test
- Orders hemoglobin
- Orders syphilis test
- Treats for syphilis, if positive _____
- Arranges partner follow up, if syphilis (+) _____

Procedure related to problems:

- Checks temperature, if reports fever _____
- Refer for blood smear, if reports fever and malaria is suspected _____
- Prescribes/dispenses antimalarial, if reports fever _____

General care during each ANC visit:

- Social history & support
- Assesses for woman's complaints
- Asks woman if has questions
- Answers questions, if woman has questions

- ___ ___ Discusses individualized birth plan (including clean and safe delivery)
 - ___ ___ Gives individual health education (*specify*) _____
 - ___ ___ Washes hands before touching patient
 - ___ ___ Uses gloves if genital examination performed, disposes of gloves properly
 - ___ ___ Fills out ANC card
 - ___ ___ Marks next visit
 - ___ ___ Reminds woman of next visit
 - ___ ___ Other (*specify*) _____
-

- 5. Time spent with woman for exam (**minutes**)....._____
- 6. Time seen by health-care worker (**minutes**)....._____
- 7. Time woman leaves clinic__:__AM/PM
- 8. Total time (**minutes**)....._____