

consultations for “pneumonia or bronchopneumonia” or “malaria”.

F7. Does the facility have a logbook where outpatients’ diagnoses are recorded?

If you find a register, logbook or similar book where cases are registered with the diagnosis, then tick **[Yes]**; otherwise tick **[No]** and stop here.

R1 – R8. Soon after your arrival at the facility, ask for this information to be prepared for you. All the data are collected on cases coming to the facility during the month agreed during training. Review the routine outpatient attendance records. All these data are usually included in the outpatient case register - used for recording the name of the child, age, sex, diagnosis, treatment and follow-up provided. This register is usually completed by the health provider seeing sick children or a nurse or other support staff.

If no one at the facility can help with the tally or no monthly summary report is available, go back to the beginning of the one-month period yourself and count cases in each of the categories, in order to fill in the numbers.

- **R1. Total number of visits for OUTPATIENT services (ALL AGES)** - Write the total number of outpatient visits (all ages) for insured and uninsured patients in the 1st and 2nd columns, respectively.
- **R2, R3, R4.** – This is the breakdown for R1: write total number of outpatient visits for children below five years old, female children below five years old and children below two months old as applies to R2, R3 and R4, respectively. For R2 and R3, write also the total number of “well child” visits (immunisation and growth monitoring).
- **R5, R6.** – Check personally how many of the OUTPATIENT (ALL AGES) visits were diagnosed as “Pneumonia” or “Bronchopneumonia” during the same month and how many of these visits were in children under-five.
- **R7, R8.** – Do the same as in R5 and R6 for cases classified as malaria or cases reported as fever but given an antimalarial.

5. OBSERVATION SHEET

The survey team will fill in this form together. Include additional qualitative observations on the items listed, if any, that the team has made during the visit and/or have emerged in the discussions during the feedback meeting with the facility staff at the end of the visit. Do NOT repeat what already is in the forms. Use this form only to record any qualitative observations that otherwise would be missed by the other forms. Some suggestions have been included in the Sheet. You can add any other observation and comment, whether or not it is listed on the form. Write at the back of the page if you need more space.