

Name:		Date:	
Age:	Months or Years	Male	Female
Pregnant? Yes		No	
Malnourished?	Yes	No	Type
	Moderate	Severe	
Haemoglobin	BS:	Haematuria: 0 to 4+	Proteinuria: 0 to 4+
Estimate:			
Recommendations:			

Name: _____ Date: _____				Name: _____ Date: _____			
Age: _____ Months or Years _____ Male Female Pregnant? Yes No				Age: _____ Months or Years _____ Male Female Pregnant? Yes No			
Malnourished? Yes No Moderate Severe Type				Malnourished? Yes No Moderate Severe Type			
Haemoglobin Estimate:	BS:	Haematuria: 0 to 4+	Proteinuria: 0 to 4+	Haemoglobin Estimate:	BS:	Haematuria: 0 to 4+	Proteinuria: 0 to 4+
Recommendations:				Recommendations:			
Name: _____ Date: _____				Name: _____ Date: _____			
Age: _____ Months or Years _____ Male Female Pregnant? Yes No				Age: _____ Months or Years _____ Male Female Pregnant? Yes No			
Malnourished? Yes No Moderate Severe Type				Malnourished? Yes No Moderate Severe Type			
Haemoglobin Estimate:	BS:	Haematuria: 0 to 4+	Proteinuria: 0 to 4+	Haemoglobin Estimate:	BS:	Haematuria: 0 to 4+	Proteinuria: 0 to 4+
Recommendations:				Recommendations:			

