APPENDIX 1

IMCI Knowledge Measurement for Pre- and Post-Test

Candidate name: _____ Date: _____

IMCI KNOWLEDGE PRE AND POST-TEST

Instructions: Check the correct answer(s). REMEMBER that for some questions there may be more than one correct answer.

1) What is the dose and schedule of amoxicillin for a 5-week-old infant who weighs 3.5 kilograms and has local bacterial infection

a) 1/2 adult tablet - 2 times a day - for 5 days

b) 1/2 pediatric tablet - 3 times a day - for 5 days

c) 1 teaspoon of syrup - 5 times a day - for 2 days

d) 1/4 pediatric tablet - 3 times a day - for 5 days

2) What is a child's classification if he is 10 months old, has had a cough that lasted two days, has a breathing rate of 46 breaths per minute and chest indrawing?

a) No pneumonia: cough or cold

b) Pneumonia

c) Severe pneumonia or very severe disease

d) Very severe febrile disease

3) What are the four main symptoms for which every sick child should be checked?:

a) Malnutrition, cough, vitamin A status, ear problem

b) Anemia, fever, diarrhea, ear problem

c) Cough, diarrhea, malnutrition, ear problem

d) Cough, diarrhea, fever, ear problem

4) A 2-year-old child has had diarrhea for several days. He is not dehydrated, but the mother is alarmed because she saw blood in his stool this morning. Your treatment includes

a) Start antibiotic for dysentery and ORS in the clinic, re-assess in 4 hours, give the mother ORS to continue at home, advise on feeding and fluids, and tell her to return in 5 days

b) Start antibiotic for cholera, advise on feeding and fluids and send home

c) Start antibiotic for dysentery, give antibiotic to take home, advise on feeding and fluids and tell her to return in 2 days

d) Start antibiotic for cholera, give vitamin A, give antibiotic to take home, advise on feeding and fluids and tell her to return in 3 days

5) Feeding should be assessed in a child who: *(tick all that apply)*

a) Need urgent referral

b) Is less than 2 years old and does not need urgent referral

c) Is classified as having anemia or very low weight

d) Is classified as having persistent diarrhea

6) For each of the following cases, select Yes if urgent referral is needed or select No if urgent referral is not needed.

a) A 6-month-old boy does not have general danger signs. He is classified with:
MASTOIDITIS

NO ANEMIA AND NOT VERY LOW WEIGHT

Does he need an urgent referral? Yes No

b) A 7-month-old girl does not have general danger signs. She is classified with:
NO PNEUMONIA: COUGH OR COLD

DIARRHEA WITH NO DEHYDRATION

PERSISTENT DIARRHEA

NO ANEMIA AND NOT VERY LOW WEIGHT

Does she need an urgent referral? Yes No

c) A 9-month-old boy is lethargic. He is classified with:

DIARRHEA WITH SEVERE DEHYDRATION

NO ANEMIA AND NOT VERY LOW WEIGHT

Your clinic can give IV fluids.

Does he need an urgent referral? Yes No

d) A 2-year-old girl does not have general danger signs. She is classified with:

DIARRHEA WITH SEVERE DEHYDRATION

SEVERE MALNUTRITION OR SEVERE ANEMIA

Your clinic can give IV fluids.

Does she need an urgent referral? Yes No

7) If a child did not receive immunization for PENTA at the recommended age, it is necessary to:

a) Increase the dose of the vaccine prescribed for that age

b) Not immunize at all - because it is too late

c) Immunize the child any time after reaching recommended age, and give the remaining doses 4 weeks apart

8) A follow-up visit in 5 days should take place if a child is classified as having which of the following conditions *(tick all that apply)*:

a) Persistent diarrhea
b) Pallor
c) Pneumonia
d) Low weight-for-age
e) Feeding problem
f) Measles

9) A 14-month-old child with cough is brought to an outpatient clinic. You will assess this child for *(tick all that apply)*:

a) General danger signs
b) Common symptoms such as diarrhea, cough or difficult breathing, fever and ear problems
c) Trauma
d) Malnutrition and anemia
e) Immunization status
f) Developmental milestones
g) Feeding problems

10) According to IMCI, a mother of a sick child should be counseled about what topics *(tick all that apply)*:

a) Importance of the fluids and feeding
b) Why she needs to come to clinic
c) When to immediately return to clinic
d) Food and feeding problems
e) Her own health
f) Immunization
g) When to return for a follow-up visit

11) If a child has measles now or has had it within the last three months, and has fever and any general danger sign, he or she will be classified as having *(tick all that apply)*:

a) Malaria
b) Severe complicated measles
c) Very severe febrile disease
d) Measles with eye or mouth complication

12) What are two signs that are used to classify severe malnutrition? *(tick all that apply)*

a) Small arm circumference

b) Visible severe wasting

c) Edema of both feet

d) Severe dehydration

e) Severe dehydration

13) A boy is 11 months old. He weighs 8 kg. His temperature is 37ºC. His mother says he has had a dry cough for the last 3 weeks. He does not have any general danger signs. The breathing rate is 41 breaths per minute. There is no chest indrawing. You can hear wheezing noise when the child breathes out. There is no stridor when he is calm. There is no diarrhea, fever or ear problem. He does not have visible severe wasting. His palms are very pale and appear almost white. There is no edema of both feet. The child should be classified as having *(tick all that apply)*:

a) Pneumonia

b) Severe anemia

c) No pneumonia: cough or cold

d) Severe pneumonia or very severe disease

e) Anemia or very low weight

14) Where can the IMCI guidelines be used? *(tick all that apply)*

a) In the inpatient ward of a hospital

b) In a neonatal ward

c) In the outpatient ward of a hospital

d) At first-level health facilities

e) At a community clinic

15) What is the dose and schedule of cotrimoxazole for a 2-year-old child who weighs 12 kilograms and is classified as having pneumonia?

a) 1 adult tablet - 2 times a day - for 5 days

b) 1 pediatric tablet - 3 times a day - for 5 days

c) 3 pediatric tablets - 2 times a day - for 3 days

d) 1 teaspoon of syrup - 5 times a day - for 2 days

16) A child with fever plus any general danger sign should be classified as:

a) Malaria

b) Acute ear infection

d) Very severe febrile disease

e) Mastoiditis

c) Measles

17) If a caretaker brings an 18-month-old child with a cough to a health facility, what do you need to do? *(tick all that apply)*

a) Ask the duration of the cough

b) Count the number of breaths in one minute

c) Look for chest indrawing

d) Check for sore throat

e) Look and listen for stridor

f) Take the child's pulse rate

g) Check for other main symptoms (e.g. fever, diarrhea, ear problem)

h) Check for malnutrition and anemia

i) Check the child's immunization status

j) Check for other problems

18) A boy is 20 months old. He has had fever for 5 days, cough for 3 days; he is able to drink, does not have convulsions, and is not lethargic or unconscious. His breathing rate is 51 per minute, there is no chest indrawing or stridor. The boy does not have diarrhea, but has generalized rash and a runny nose. There is no clouding of the cornea or mouth ulcers. The boy should be classified as having *(tick all that apply)*:

a) No pneumonia: cough or cold

b) Pneumonia

c) Severe pneumonia or very severe disease

d) Very severe febrile disease

e) Malaria

f) Measles

g) Measles with eye or mouth complications

19) A mother brought her 16-month-old child back to clinic after 2 days of ORS treatment for diarrhea with no dehydration. The mother says that the child still has diarrhea and now is coughing and has fever. What is the proper course of action? *(tick all that apply)*

a) Immediately refer the child to hospital

b) Reassess the child for diarrhea

c) Continue current treatment and ask mother to return later

d) Disregard diarrhea, treat cough

e) Assess and classify child's cough

f) Treat diarrhea, it's more important than cough

g) Assess and classify diarrhea as if it is initial visit

20) Which of the following statements are true? *(tick all that apply)*

a) A 3-month-old child should be exclusively breastfed

b) A 5-month-old child should be breastfed as often as s/he wants, day and night

c) Children should be given fewer feedings during illness