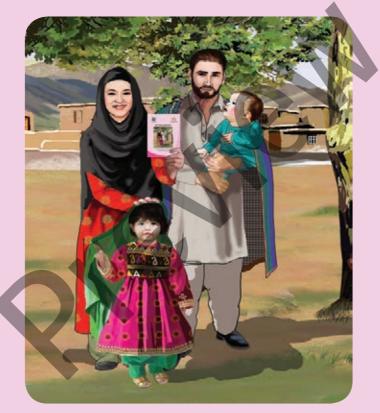




#### Mother and Child Health Handbook



Please keep this handbook safe and carry it each time you visit health facility

#### Dear Parents,

I am happy to introduce the Maternal and Child health (MCH) Handbook to you. The MCH Handbook contains maternal health (before pregnancy, Childbirth and post-partum) and child health records (from newborn until the child age of 5 years old) and contains information on how to maintain health care for mother and child. Maternal and child mortality is a big burden on families, communities and at country level. It affects the wellbeing of coming generation and the country as whole. We hope that by introducing this MCH handbook, pregnant mothers and their children seek preventive and curative services that are available around the country.

Every pregnant mother receives one MCH Handbook if a mother had a multiple pregnancy, she will receive the number of MCH Handbooks according to the numbers of newborns she delivered.

The MCH Handbook is available at all health facilities providing maternal and child health services.

I request you to:

• Read and understand the MCH Handbook with your family. If you have any question, for any help please ask health care providers

- Bring the book with you every time you go to the health facility for provision of care during Pregnancy, Delivery, After Delivery, Family planning services, Vaccination, Growth Monitoring, Child Health and other health Services.
- The role of this book in health promotion and protection is very vital and we hope to keep it safe.

I also request the health care providers to provide enough information about the handbook to mothers and fill the records correctly.

**Sincerely yours** Jun J Ferozuddin Feroz MD, MPH, **Minister of Public Health** 

Serial Number:
Name of Health Facility :
Code of Health Facility :
Phone Number (if available):

#### FAMILY IDENTITY

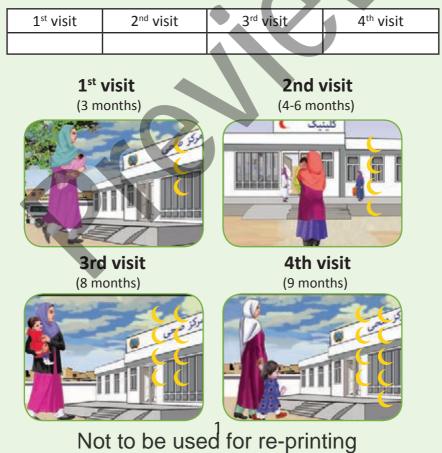
# **Maternal Health**

# **1. Antenatal Care**

Care during Pregnancy is important for early detection and treatment of danger signs, and can play important role in mother and their child health

## **Remember!**

If your menses period is late go to the health care provider. Attend at least 4 visits during pregnancy, preferably at the following times. if required, visit the health care provider more frequently.



### **Dear Pregnant mother!**

You will receive the following services during ANC visits:

**Height measurement:** Make sure your height is measured during the first ANC visit, if your height is shorter than 145cm; you are highly recommended to deliver in a health facility, to reduce short stature related pregnancy risk.

Weight measurement: Make sure your weight is measured during each ANC visit and you gain at least 1 kg/month weight after 4th month of pregnancy.





**Blood pressure checkup:** Make sure that your blood pressure is checked during each ANC visit, because high blood pressure is a risk factor.

**Iron- folic acid tablet**: take iron-folic acid tablets as per the health care provider advice preferably during night to reduce nausea. Taking tablet will prevent anemia and neonatal malformation.





**Tetanus Toxoid:** Make sure you receive TT vaccine as per maternal immunization schedule. It will protect you and your newborn baby against tetanus.

**Calcium Tablet:** Take Calcium tablets as per health care provider advice preferably during meal time from 5month up to delivery. This helps in prevention of high blood pressure.



**Deworming medicine:** Take deworming medicine as per health care provider advice after first trimester of pregnancy

# **Nutrition During Pregnancy**

- Take balanced and diverse food daily, there is no food restriction during pregnancy.
- Take at least one time additional meal each day.
- Ensure you take iodized salt in your food.
- Drink enough water and fluid every day two times between meals (10 glasses or 2-3 liters daily).



 If you feel nauseous, or vomit and have no appetite, eat food in small portion frequently, non fatty foods such as Fruit, vegetable and bread are preferred and should be eaten more.



#### Daily care during pregnancy

Protect yourself and baby from malaria by using insecticide treated bednets especially in Maleria endemic areas.



Avoid heavy lifting for the safety of your-self and your baby.



Sleep at least 1-2 hours during the day preferably on your left side, to have a healthy pregnancy.



Do not take any medicines without health care provider advice.



Avoid taking Narcotics, tobacco, hashish, opium, snuff and cigarette smoking.



# **Hand Washing**

Wash your hands with soap and clean water at the following times:



- After contact with animals. after defecation
- After disposal of child feces, before meals
- Before giving meals to the child, before preparing food
- Take baths at least 1-2 times in a week, and keep yourself and your cloths clean.
- Brush your teeth with toothpaste regularly after each meal.



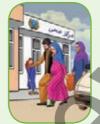


# **Birth Preparedness**

1. Save some money for delivery and other expenses.



3. Select who will accompany you for delivery.



5. Select a health facility for de-

livery.



7. Identify means of transporta-

tion.



2. Know your expected date of delivery.



4. Identify a blood donor.

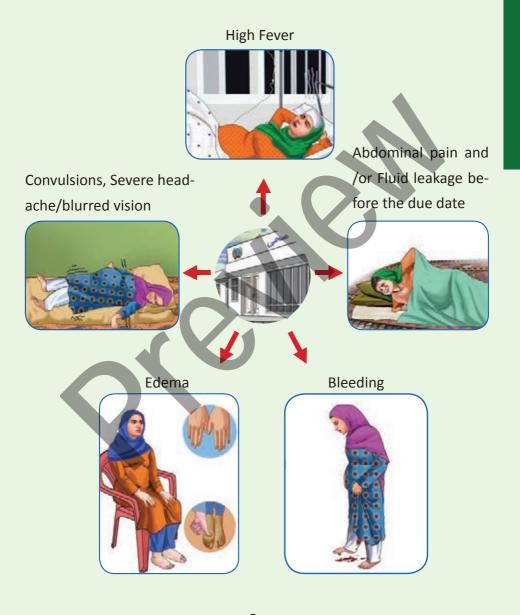


6. Identify a person who can care of your home and children while you are visiting a health facility.

8. Prepare a clean delivery kit, if you will not have access to a health facility (delivery should be done in presence of SBA).



# **Danger Signs during Pregnancy**



# 2. Intra-partum care Labor Signs

- 1. Bloody sticky discharge
- 2. Painful uterus contractions every 20 minutes or less
- 3. Amniotic membrane rupture

# Self-care during labor

- Take a comfortable position and feel free to move around
- 2. Take notice of onset of labor signs
- 3. Drink plenty of fluid



# Danger signs during labor

If you experience any of the following signs immediately go to doctor /midwife.



# Severe headache Blurred vision Convulsions Edema Unpleasant smell of the amniotic fluid Severe abdominal pain Retention of placenta for

more than one hour.

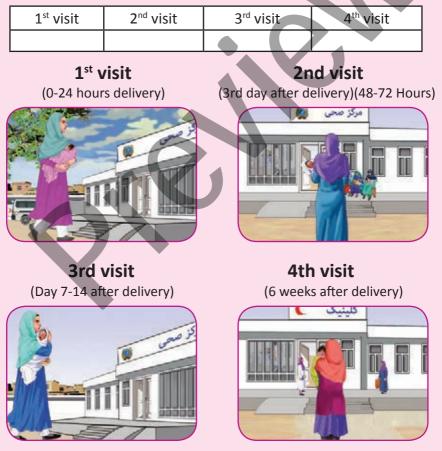


# **3.Post-natal Care**

Care during post-natal period is important for early detection and treatment of danger signs of mother and child.

### **Remember!**

Go to doctor or midwife approximately 4 times after delivery, preferably at the following times. if required visit health care provider more frequently.



### **Dear mothers**

You will receive the following services during post natal visits

- 1. Assessment general condition
- 3. Examination for bleeding

- Measurement of blood pressure, body temperature, breathing and pulse
- 4. Examination of birth canal and signs of infection



5. Examination of uteruscontraction and fundal heightmeasurement7. Postnatal contraception

 Examination of breast, nipple and initiation breast feed

8. Management of danger signs

9. Counselling on; taking rest, exclusive breastfeeding ,selfhygiene (plus cleanliness of surgeric wound if the baby is born by caesarean)

# Daily care during post-natal

Keep yourself and genital area clean and change your sanitary napkin regularly

### **Post-natal nutrition:**

- Take iron folic acid tablets for three months after delivery.
- 2. Eat a balanced diet
- 3. Get sufficient rest/sleep and drink plenty fluid







### Postpartum danger signs

- 1. Excessive bleeding
- Foul-smelling vaginal discharge
- Edema of face, hands and foot, or headache and convulsion
- Fever of more than 2 days
- Swollen breasts, which are redness and painfull
- Postpartum depression
- Uncontrolled Urine and faeces discharge from the Vagina

Note: In presence of the above signs visit the nearest health facility





# 4. Birth spacing (Family Planning)

Use family planning methods and consider a 3 year interval between pregnancies this will provide enough time to replenish nutrients lost during pregnancy, anemia and it will also prevent unwanted pregnancies, preterm, low birth weight neonates, it will also reduce maternal, neonatal and child mortality.

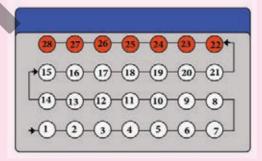
# Types of family planning methods:

**Lactational amenohrrea:** exclusive breastfeeding for the first 6 months after birth may delay menstruation and prevent pregnancy.

Male condom: This is a plastic cover used by male during sexual intercourse to prevent pregnancy.



**Oral contraceptives:** You take 1 pill every day (as per doctor's advice). The pill is most effective when you take the pill at the same time every day.



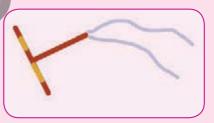
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**Injectable (DMPA)**: This is an injection once every 2 or 3months (as per doctor advice).



**IUD or loop:** This is a safe and effective method for almost all women. It can provide protection about five years. This method can be implemented immediatly after birth and mensturation

**Implant:** This is a small rod or capsule (about the size of a matchstick) placed under the skin. This prevents pregnancy for up to 3-5 years.



Precaution: Minor side effects are most common in the first three months after use of the contraceptives. These disappear with continued use of the contraceptives



#### **ANC Card**

#### **Registration No.:**

Last menstruation period LMP (specify date)			Expected date	e of Delivery (EDD) (sp	pecify date)	
Pregnancy History	Gravida		Parity		any problems during previous pregnancy and delivery	

#### **Medical History**

In case of pi	resence of	the condit	ions below tick the re	elevant bo	(
Tuberculosis	Yes	No	Malaria	Yes	No
Hypertension			Liver/Hepatitis		
Chronic renal disease			Allergies (specify)		
Epilepsy		$\mathbf{\Sigma}$	Surgeries (specify)		
Diabetes			Blood transfustion		
RTIs/STI (specify)			Current use of medications		
HIV/AIDS (specify)			Other		
Cardiovascular			Mental disorder		

Ist visit         2 <sup>nd</sup> visit         3 <sup>nd</sup> visit           Date						Recomme	nded visits
Weight In Kg         ImmHG           BP In mmHG         ImmHG           Edema (y/n)         ImmHG           Anemia (y/n)         ImmHG           Abdominal exam (normal or else)         ImmHG           Hearth and lung auscultation (normal or else)         ImmHG           Hearth and lung auscultation (normal or else)         ImmHG           Hearth and lung auscultation (normal or else)         ImmHG           Uterus High (cm above publc)         ImmHG           Uterus High (cm above publc)         ImmHG           Uterus High (cm above publc)         ImmHG           Juriare stound (if yes tick)         Immet (ym)           Hearth and sound (if yes tick)         Immet (ym)           High blood pressure         Immet (ym)           High blood pressure         Immet (ym)           Severe headache/burred yiston         Immet (ym)           Severe headache/burred yiston         Immet (ym)           Convulsion /lose of consclousesist         Immet (ym)           Urine scale         Sugat (+or -)           Bacteria (+or -)         Immet (ym)           Bacteria (+or -)         Immet (ym)           Virine scale         Immet (ym)           Services         Forein (+or -)           Biod Group and RH(specify) <td></td> <td></td> <td></td> <td></td> <td>1st visit</td> <td>2<sup>nd</sup> visit</td> <td>3<sup>rd</sup> visit</td>					1st visit	2 <sup>nd</sup> visit	3 <sup>rd</sup> visit
BP in mmHG     Image: Second Sec	Date						
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Anemia (y/m)     Anemia (y/m)       Abdominal exam ( normal or else)     Image: state in the state in th		BP in mmH	IG				
Abdominal exam ( normal or else)     Image: constraint of else)       Hearth and lung auscutation ( normal or else)     Image: constraint of else)       BreastNipple (normal or else)     Image: constraint of else)       Uterus High ( cm above publc)     Image: constraint of else)       Uterus High ( cm above publc)     Image: constraint of else)       Image: constraint of else     Image: constraint of else       Vaginal bleding     Image: constraint of else       Danger algne and bleeding     Image: constraint of else       Image: constraint of else     Image: constraint of else       Severe abdominal pain     Image: constraint of else       Severe headache/burred vision     Image: constraint of else       convulsion /lose of consciousness     Image: constraint of else       Image: convulsion /lose of consciousness     Image: constraint of else       Image: convulsion /lose of consciousness     Image: constraint of else       Image: convulsion /lose of consciousness     Image: convulsion /lose of consciousness       Image: convulsion /lose of consciousness     Image: convulsion /lose of consciousness       Image: convulsion /lose of consciousness     Image: convulsion /lose of consciousness       Image: convulsion /lose of consciousness     Image: convulsion /lose of consciousness       Image: convulsion /lose of consciousness     Image: convulsion /lose of consciousness       Image: convulsion /lose of consciousness		Edema (y/n	1)				
Medica       Hearth and lung auscultation (normal or else)       Image: state of the s		Anemia (y/i	n)				
Medica       Breast/Nipple (normal or else)       Image: state intervent inte		Abdominai	өха	m ( normal or else)			
Exam       Breast/Nipple (normal or else)	Medica	Hearth and	llun	g auscultation ( normal or else)			
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Fetus       Movement ( y/m) Heart sound ( if yes tick)       Image: source of the source of t		Uterus Higi	h ( c	m above publc)			
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Birth plan (emergency plan if yes tick )		Other servi	ice li	any specify			
Birth plan (emergency plan if yes tick )		referred (Y	.N)				
Birth plan (emergency plan if yes tick )	referral						
Counseling ( specify)	Birth pla	n (emergen	су р	lan if yes tick )			
	Counsel	ing ( specify	y)				

		Other	visit		
4th visits	5th visit	6th visit	7th visit	8 <sup>th</sup> visit	Other
				TION	
8					
	-				
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#### **Delivery Card**

Date of delivery		Time of delivery	
Place of Delivery	Home ( )	Heath Facility ( )	
Health care giver	Doctor ( )	Midwife ( )	Other
Type of labor	Spontaneous( )	Assisted ( )	( ) SC
Complication during and after delivery	Yes ( )	No ( )	

#### **Newborn Card**

Name			
Birth Weight	Кд	Sex: Male/Female	
Apgar score	At 1 Minute	At 5 Minutes	
Malformations	Yes ( )	No ( )	
Maturity	Premature (	Mature ( )	Post Mature ( )

		1st visit (0-6 hrs)	2nd visit (1 week)	Other visits
	Date of visits			
	Difficulty in breathing (abnormal breathing, chest indrawing , grunt- ing wheezing )			
assessment of newborn	Convulsion/spasm /unconscious- ness			
f nev	Cyanosis			
ent o	Fever/warmness			
ssme	Hypothermia/coldness			
asse	Jaundice			
Rapid	Poor suckling			
	Presence of pus/redness of cord/ skin or other areas			
	Presence of pus or red eye			

#### **PNC Card**

			1	
	First visit (first 24 (hour	Second visit (second day of delivery ( 48-72 (hour	Third visit (7 to 14 days after (delivery	Forth visit ( 6 weeks after delivery
Date				
History (any significant (point				
(Temperature (®C				
Blood pressure mmHG				
Anemia	( ) Yes ( ) No HB	( ) Yes( ) No HB	( ) Yes ( ) No HB	( ) Yes ( ) No HB
Edema	( ) Yes ( ) No	( ) Yes ( ) No	( ) Yes ( ) No	( ) Yes ( ) No
Breast/Nipple				
Height of uterus				
Vaginal bleeding				
Perineal/vagina/cervix tears				
Other complaints				
Iron and foliate supple- mentation				
Consultation on breast- /feeding/nutrition Hygiene				
Birth spacing /FP				
Post-partum proble	m			
Thromboembolic prob- lems		UTI		
Postpartum depression		Postpartum psychosis		
Other problems				

# Family Planning Card

					n.1			
History of abortion				Ľ	Goller			
Last delivery date		Die	1000		Gardíac			
Abnormal bleeding				P	Slin			
		_		Ŀ				
Duration of menses					18			
cycle(normal/abnormal and period Pelitic examination only if Loop are		_		h	High block		-	
administered/breast ecomination				!'		i pressure	2	
Servere side effects of one of		-		h	iner			
methods				!'				
Addiction to smoking and Segar				h	Diabetic			
Weight/KG					Renal			
Pator		-			piepsyl	forzine		
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	and a char			!'		naradi.		
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	administration du	rina						
	48 hrs after nom							
	delivery							
	Family planning m	ethods a	d visits					
Visits		1	2	3	4	5	8	Remarks
Selection of Family planning	Oral tablets							
methods	Oralitablet pure							
	progesterone							
	Genden							
	Injectable							
	ND							
	Implant							
	Permanent methods							
	Other methods							
Laboratory investigation	Pregnancy test							
	Urine test							
	西耳							

# **Child Health**

# A. Newborn (0-28 days)

#### 1. Signs of healthy newborn:

- Cries immediately after birth
- Whole body is red Pink
- Moves actively
- Birth weight is between 2.5 and 4 KG
- Strongly sucks mother's breast



**2. Danger signs of newborns:** If one or more of the following signs are observed, immediately take the new-born to the health facility/healthcare provider.

Convulsion



High fever



Refuses to suck



Severe yellowish skin and eyes



# Keep baby warm

- Don't bath the baby until 24 hours after birth.
- Skin to skin contact helps with: better thermal protection, increased milk production and reducing respiratory tract infections, improves weight of the baby, it also improves emotional bonding, Uterine contractions and prevents bleeding.
- Wrap baby in dry and soft cloths and cover head of baby all the time.

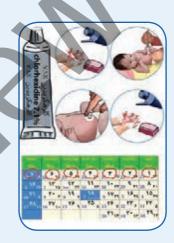
# **Umbilical Cord Care**

- Wash hands with soap and clean running water before and after caring for the baby
- Make sure newborn's cord is tied well and is not bleeding
- If gel chlorhexidine 7.1% is available apply it on newborn's cord one hour after birth for seven days

Do not apply anything such as dust, snuff, Surma etc ...on the cord and keep it dry and open







# Vaccination

- Vaccination prevents diseases, hence fully immunize your children as per the immunization schedule.
- Your child may develop fever, restlessness and swelling in the area of the injection. These are normal signs and will gradually disappear. If continued for more than 48 hours go to health care provider.
- Polio vaccine is safe, vaccinate your newborn and children under 5 years in each round of the polio campaign
- Vaccinate your child under age of 18 months against childhood deadly diseases as per the vaccination schedule



#### **Nutrition**

Exclusively breastfeed your child and start in the first hour after birth. It is important until 24 months for your childs growth.

- Initiate breastfeeding within one hour after birth. (The first yellow milk)
- Colostrum protects your baby against disease, do not waste it.
- Exclusively breastfeed your baby until the age of six months on demand, as long as the baby wants, at least 8 times during the day and not less than 4 times during night
- Breastfeeding should be started from both breasts, it stimulates milk production and provides enough breast milk for the child
- Never feed your child with powder or bottled milk. Bottled milk is the causes of many diseases including diarrhea, malnutrition, growth delay, mental retardation, malformation of teeths and family economic problems.







# **During breastfeeding**

### **Position and attachment**

- Take a comfortable position and assure attachment
- Baby's head and body is in one line position
- Hold baby close to you
- Baby's face is against your breast, chin touches your breast and nose is facing the nipple
- Baby's mouth is wide open with lower lip stretched out



• Most of the areola (dark part around the nipple) must insert to baby's mouth



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# In the following situations mothers may need to express breast milk

- Having sick new-born or low-birth-weight baby
- Being at work
- To relieve symptoms, such as engorgement, or leaking

#### Method of expressing breast milk:

- Wash your hands thoroughly
- Place finger and thumb to each side the areola and press inwards towards the chest wall
- Press behind the nipple and areola between your finger and thumb, Press and release, press and release.







**Remember:** if milk is not coming easily out of the breast, wash your breasts with warm water or apply warm compress

#### 6-9 months

- Initiate feeding for the child from the age of six months.
- Feed the child with small quantities 3 times a day and gradually increase, on a daily basis the types and quantity of food to 3-5 times a day.
- Give child with additional food 3 times or ½ cup a day at each meal as well as breastfeeding.

#### 9-12 Months

 Give child additional food 4 times a day or ½ cup a day at each meal beside breastfeeding.

### 12-24 Months

- Give child additional food 5 times or ½ cup a day at each meal as well as breastfeeding.
- Prepare food in separate bowel to ensure the child eats all of the food

- Try to feed your baby variety of foods at each meal, for example, animal source food (meat, eggs, and dairy products) staple food (grains, roots, maize, rice and tubers) legumes and seeds (beans, lentils, peas) Vitamins and mineral rich food (banana, watermelon, grapes)
- Be patient and actively encourage your baby to eat
- Do not force your child to eat



 Wash your hands and use a clean spoon or cup to give food or liquids to your baby.



#### Potato and Milk Mash

#### Ingredients:

- 1 Medium size potato (about 100 grams or ½ cup of chopped pieces of potatoes)
- ¼ cup milk
- ½ cup water
- 1 teaspoon oil
- 1 teaspoon pounded leafy vegetables or mashed carrots lodized salt to taste (preferably one light 2-finger pinch of salt)
- 1. Peel potato, cut it into small pieces and cook in water until soft and the water is almost finished.
- 2. Mash potato pieces
- 3. Add milk and mix well
- 4. Cook for 3-5 minutes and add oil
- 5. Add the pounded vegetables and cook for 2-3 minutes
- 6. Add iodized salt

#### Firni

#### Ingredients:

- 1 cup milk
- 2 tablespoons of rice or rice flour or noshohesta
- 2 tablespoon of sugar





- 2 three grains of cardamom
- 1 teaspoon chopped pistachios or nuts (if available)
- 1 teaspoon of chopped fruit, such as banana, apple, or raisin
- 1. Mix the flour, sugar and cardamom in the milk and boil it for 5 minutes
- 2. Serve in flat plate and sprinkle the pistachio and fruits on the dish; leave to become cold

# Key messages

- Do not give sweets before meal time, as it makes the child is appetite less
- Give food in a separated bowl
- Give finger food between each meal
- Use oil in the food of children for releasing of energy
- Use more local ingredients for complimentary food
- Maintain food hygiene and cleanliness
- Do not use plastic utensils for feeding of your child.









#### Monitor the child growth and development

- Take your baby to growth monitoring and promotion monthly during the first two years.
- Growth monitoring and promotion sessions can help you identify nutrition problems, your child may have.



## B. Child (1 month- 5 years) Child parenting

- Spend time with child by playing and telling stories etc.
- Pay attention and listen to child's opinion, and assist the child in solving his/her problems
- Train and familiarize yourself with child's positive and negative sides and do not compare the child with others
- Appreciate positive behaviors and actions of the child

Keep the child away from hot items (stove, iron, and hot utensil),

dangerous items (knife, scissors, and electric cord) and places (well, pool, river and highway).

 Treat girls and boys equally and protect them from all forms of violence and abuse.



#### Eye care

Do not put traditional eye medicines in the eyes



- In case of foreign body in the eyes just wash it
- Take child to the health facilities when he/she has red eyes or any other eye problems



#### **Oral care**

- Teach your child to brush his/her teeth after each meal
- Sit or stand behind your child in a brightly light place, ideally in front of a mirror.
- Assure each child has a separate toothbrush/Maswak and it should be replaced when its shape is changed.
- Teach your child to not break any hard things and dried fruit with teeth
- Provide children's toothpaste for your children, because the child may swallow it







### **Disabled child parenting**

- Give love, affection, spirit and motivation
- Provide toys for children
- Provide security to disabled child
- Take the disabled child to health facility when he/she is ill
- Provide support based on the child's needs such as Eye-glasses, supporting tools, sticks, special shoes, wheelchair etc.
- Train child to perform routine activities independently.



## **Child Hygiene and Sanitation**

• Wash children's hands with soap before eating, after defecation.

- Bath your child regularly at least once a week and change their clothes
- Put shoes on your child





• Cut the child's nails regularly and keep them clean

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• Encourage your child to use toilet



- Keep the child away from cigarette smoke
- Put the child to sleep under a bed net to avoid mosquito bites



# **Sick Child Care**

- Breastfeed sick children more frequently during and after illness, which will help the children recover more quickly.
- Give food and liquids in small quantities, but frequently to children above six months during and after sickness, avoid spicy and fatty food.



### Diarrhea

 Breastfeed sick children more frequently during and after illness, which will help the child recover more quickly.





- Give child 1/2-1 glass of ORS each time immediately after defecation, as well as Zinc tablets for 10 days; if ORS is not available, give the child boiled water, clean vegetable soup, doogh/buttermilk, yoghurt and cooked-rice water.
- Give food and liquids in small quantity, but frequently to children above six months during and after sickness, avoid spicy and fatty food.
- Do not give child any medicines unless advised by health personnel



#### Fever

 Breastfeed sick children more frequently during and after illness, which will help the baby recover more quickly. (If child still breastfeed)



- Give water frequently to the sick child age above 6 months
- Take the child to the health facilities for more investigations

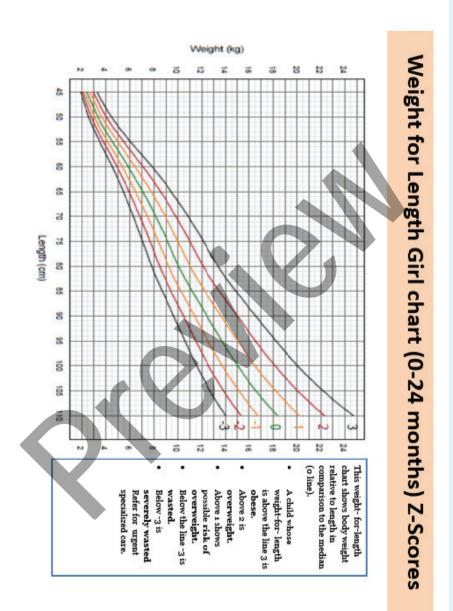


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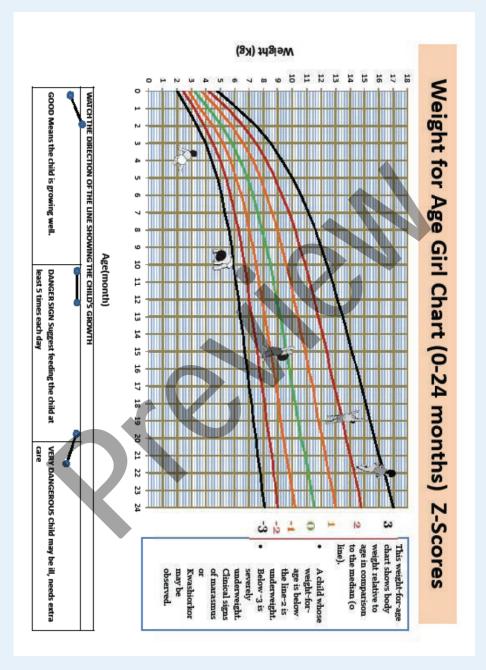
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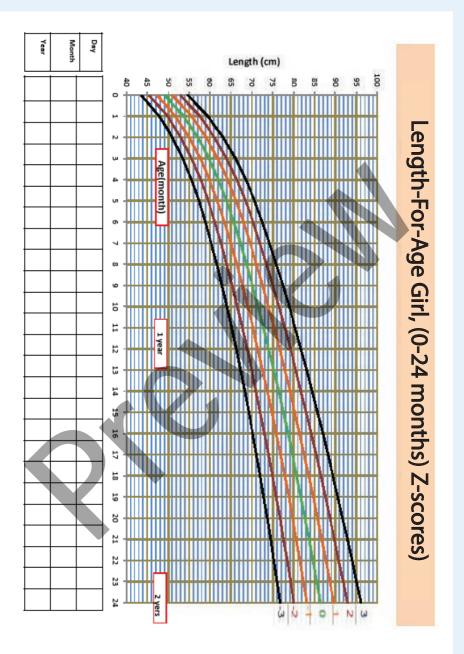
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Third round 14weeks of age	OPV-3	٥	/ /	/	When the child is 9 months old
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In 9 month of age	OPV-4	٥	/ /	/	When the child is 18 months old
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In 18 month age	Measles 2	1	/ /	/	/ /

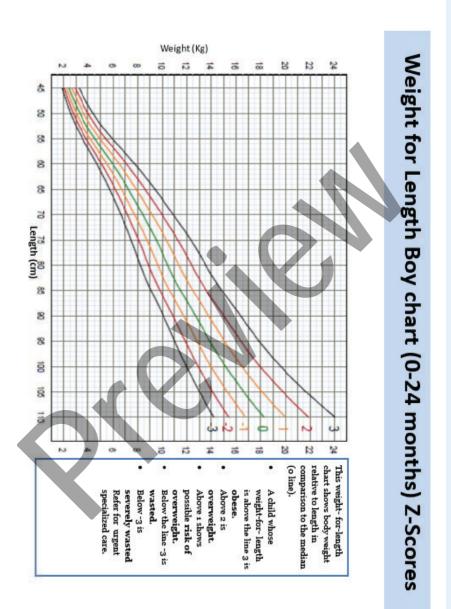




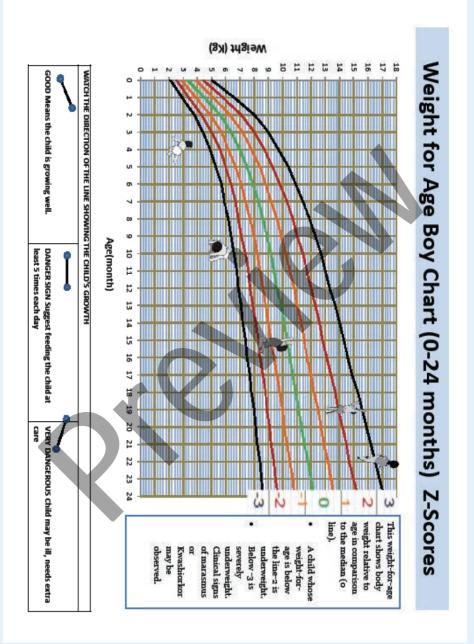
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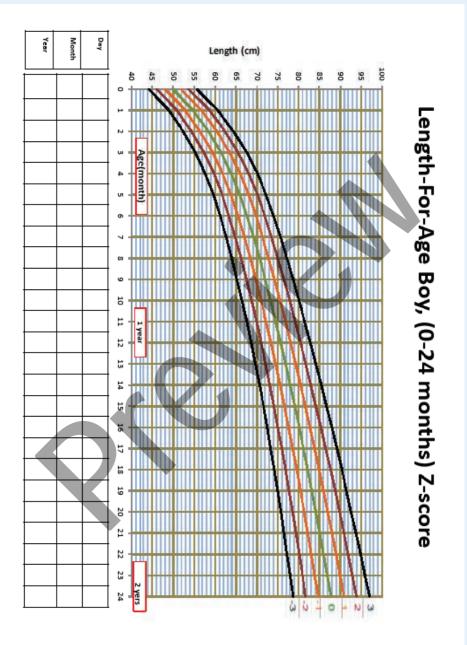


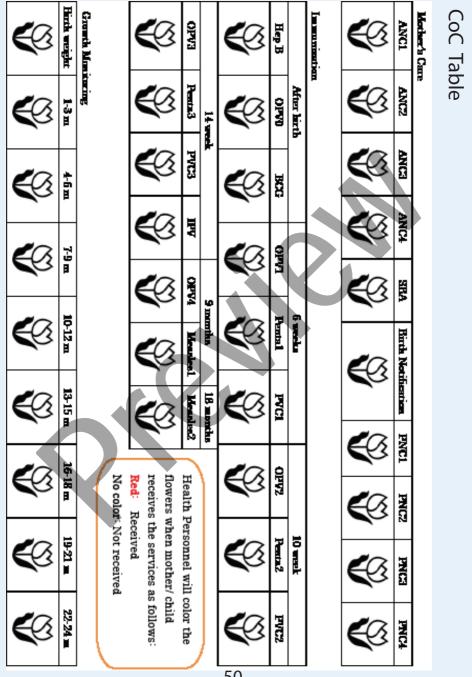




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### Notes

