Northern Territory Government

Healthy Kids

www.nt.gov.au/**health**
January 2009

Under 5s Program

9 Month Assessment

Child Health Nurse, RAN or AHW to complete

Discussion points are in a black box. Tick as completed

Child details

First Name Surname DOB / / Age (Weeks)	HRN Date Review / / Carer attending	**Immunisation** ☐ Given (record on immunisation sheet) ☐ Up to date ☐ Unable to give - placed on recall

Problems identified at previous check

Nutrition

Weight	**Growth satisfactory?** Yes No Plot on growth chart	**Action plan needed?** Yes No

Since this time yesterday has the baby had

Breast milk Formula Other milk Tea Water Soft drink/cordial/fruit juice Other
(these can damage teeth)

Is the child eating solids regularly? Yes No
What foods

Nutritional information and advice given? Yes No Use NT Infant feeding guidelines

Examination

R ear ☐ NAD ☐ AOM ☐ AOM w Perf. ☐ CSOM ☐ OME
☐ Dry Perf. ☐ Otitis Ext. ☐ Other *(specify)*

L ear ☐ NAD ☐ AOM ☐ AOM w Perf. ☐ CSOM ☐ OME
☐ Dry Perf. ☐ Otitis Ext. ☐ Other *(specify)*

Treatment

Recurrent otitis media? (3 or more episodes in 6 months) Yes No
Persistent otitis media? (more than 3 months with perforation) Yes No
Hearing referral required? Yes No *(if yes record below)*

Skin Clear Scabies Sores Ringworm
Other *(specify)*

Treatment

Oral health **"lift the lip"** and check for colour changes in baby's teeth
white, brown or black spots

Spots seen? Yes No
Referred to dental therapist? Yes No
Referred to dentist? Yes No

General appearance and comments

☐ ***PLAY*** *GIve your child clean safe household things to handle, bang and drop*

☐ ***COMMUNICATE*** *Respond to your child's sounds and interests. Tell your child the names of things and people. Read books to your child and talk about the pictures*

☐ ***NUTRITION*** *Introduce lumpier food (Use the flipchart* ***'A story about feeding babies'*** *nutrition advice from NT Infant Feeding Guidelines)*

☐ ***HYGIENE*** *Keep face/hands clean to stop germs spreading from pus affected ears and runny noses. Use tissue spears to clean ears. Bath baby regularly - at least every second day*

☐ ***ORAL HEALTH*** *Start caring for baby's new teeth when they first come through. Clean with a damp clean cloth (don't use toothpaste until 18 months). Check teeth and gums regularly for any colour changes. It is important for mum and dad and baby to clean teeth twice a day*

Home

Domestic and family violence (DFV) assessment. *Has a DFV screen been done in the last 6-12 months? If not offer to do a screen today with the mother or carer. Do not force people to participate in the screen if they do not want to.*
If the mother/carer agrees to the screen, ensure privacy and reassure them that all people are asked the same questions.
Offer to follow up and support mother/carer with any problems identified.

Was DFV screen done at this visit? Yes No Referral made Yes No **Use S&E Assessment form**

Action and follow up

Make a note on the 12 month form of any problems that need follow up

Issue or problem	Referral or action made	Referred to
		MO Paed Other *(specify)*
		MO Paed Other *(specify)*
		MO Paed Other *(specify)*

☐ **Prompt for 12 month check**
☐ **Monthly recall for GAA**
☐ **Weekly recall if concerns and engage community supports (eg SWSBSC, community liaison, family workers)**

Name of person completing check	Signature	AHW RN	Date / /