

**AFGHAN REFUGEE HEALTH
PROGRAMME**

Name.....

Form AR/18

Signature

Form AR/21

Page-2

	Requested	Supplied	Received/Remarks
<u>Analgesics/Spasmolytics</u>			
Acetylsalicylic acid	Tabl		
"	Paed tabl		
Paracetamol	Tabl		
"	Syr		
Buscopan/Beralgin	Tabl		
Sosegon	Inj		
<u>Respiratory</u>			
Salbutamol (Ventolin)	Tabl		
Ammonium Chloride	Syr		
Diphenhydramine/Ephedrine	paed Syr		
<u>Cardiovascular</u>			
Propranolol	Tabl		
Digoxin	Tabl		
<u>Diuretics</u>			
Furosemide	Inj		
<u>Antiallergic & Shock</u>			
Diphenhydramine	Caps		
"	Inj		
Dexamethasone	Tabl		
Hydrocortison	Inj		
Adrenaline 1/1000	Inj		
<u>Sedatives and Anticonvulsants</u>			
Diazepam 2mg	Tabl		
" 5mg	Tabl		
" 5mg	Inj		
<u>Anaesthetics (Local)</u>			
Lidocaine	Inj		
<u>Ophthalmological</u>			
Sulphacetamide	Drops		
Tetracycline	Ointm		
Boric Acid	Powder		
<u>Otological</u>			
Lidosporn	Drops		
Choramphenicol	Drops		

AR-21

Form : AR/21
Page-3

	Requested	Supplied	Received/Remarks
Obst/Gynaecological			
Ergometrine	Tabl		
"	Inj		
Oxytocin	Inj		
Nistate Vag supp			
Metronidazole Vag supp			
Dermatological			
Gentian Violet	Crystals		
Benzylbenzoate 25%	Lotion		
Neomycin	Oint		
Nistate	Oint		
Tineafax	Oint		
Other			
Aluminium Hydroxide (Gelulil)	Tabl		
Bisacodyl (Laxative)	Tabl		
Ferrous sulphate/Folic Acid	Tabl		
Multivitamin	Tabl		
Infusions			
Glucose/Sodium Chloride 5%			
Glucose 5%			
Vaccines			
BCG			
Polio			
Measles			
DPT			
DT			
TT			
Snake Venom			
Non drug items			
Spirit			
Dettol			
Sevlon			
Distilled water			
Paraffin gauze dressing			
Cotton			
Bandages			
Sutures			
Plester (Sticking Plester)			
Syringes (disposable)			
Needles ()			

APPENDIX D

**SALARY SCALE 1984
(OTHER THAN GOVERNMENT EMPLOYEES)**

TITLE	MONTHLY SALARY
Deputy Director	Rs. 5,500
Field Supervisory Medical Officer	Rs. 5,500
Medical Officer	Rs. 5,000
Lady Health Visitor Supervisor (prov)	Rs. 3,250
Lady Health Visitor Supervisor (dist)	Rs. 3,000
Lady Health Visitor	Rs. 2,750
Motivator/Health Educator	Rs. 2,000
Sanitary Inspector Supervisor	Rs. 3,000
Sanitary Inspector	Rs. 2,800
Dispenser	Rs. 2,750
X-ray Technician	Rs. 2,750
Laboratory Technician	Rs. 2,750
Microscopist	Rs. 1,650
EPI Supervisor	Rs. 1,650
Malaria Supervisor	Rs. 1,300
Community Health Worker Supervisor	Rs. 1,250
Vaccinator	Rs. 1,200
Midwife (TBA)	Rs. 1,100
Lady Attendant	Rs. 1,100
Driver	Rs. 1,000
Sanitarian	Rs. 800
Watchman	Rs. 600
Labourer	Rs. 600
Community Health Worker	Rs. 250

APPENDIX E

JOB DESCRIPTIONS OF STAFF MEMBERS OF
BASIC HEALTH UNITS

(The Descriptions are being developed)

APPENDIX F

AFGHAN REFUGEE HOSPITALS

HOSPITALS FOR AFGHAN REFUGEES
IN BALUCHISTAN
31 DECEMBER, 1985

(Additional to Government Hospitals)

- | | |
|--|--|
| <p>1. Al Khidmat Hospital
Sariab Road
Quetta</p> <p>24 beds
Med. Supt. :
Dr. Atta ur Rehman</p> | <p>3. Ittehad Hospital
Archer Road
Quetta</p> <p>60 beds
Med. Supt. :
Surgeon Dr. Saeed
Asadullah</p> |
| <p>2. Al Jihad Hospital
Railway Colony
P.O. Box 314
Quetta</p> <p>15 beds
In charge :
Engineer Ayubi</p> | <p>4. Islamic Aid Health
Centre for Afghan
Refugees
near UNICEF Office
New Quetta</p> <p>In charge :
Dr. Abdul Haqani
Clinic for out-patients
only</p> |

- | | |
|---|--|
| <p>5. Ansari Hospital
Sariab Road
Quetta</p> <p>50 beds
Chairman :
Haji Syed Abdul Rehman
Shah Agha</p> | <p>7. SRC — Al Salam Hospital
Saranan</p> <p>30 beds
Surgeon : Dr. Chiragh
SRC President:
Dr. Al Jabreen</p> |
| <p>6. Hakim Sanai Hospital
Sabzi Market
Kasi Road
Quetta</p> <p>20 beds
In charge :
Med. Supt. Dr. Abdul Rehman</p> | <p>8. ICRC
International Committee
of Red Cross Surgical
Hospital for Afghan
Refugees
Sheikh Mandah
Quetta</p> |

**HOSPITALS FOR AFGHAN REFUGEES IN NWFP
31 DECEMBER, 1985
(Additional to Government Hospitals)**

1. Idara Ahya-ul-Uloom — Pakistan (Jamaat-i-Islami)
 - (i) Afghan Surgical Hospital = 100 beds
Nishterabad, Peshawar City
 - (ii) Afghan Gynae Hospital = 80 beds
Jamrud Road, Peshawar
2. The Islamic Alliance for the Liberation of
Afghanistan — (3 party)
 - (i) Ibn-Sina Surgical Hospital = 40 beds
 - (ii) Ibn-Sina Medical Hospital = 20 beds
Jamrud Road, Peshawar

3. The Islamic Alliance – (7 party)
 - (i) Ittehad Surgical Hospital - I = 100 beds
Kohat Road, Peshawar
 - (ii) Ittehad Surgical Hospital - II = 50 beds
Jamrud Road, Peshawar
 - (iii) Jihad Hospital = 50 beds
Jallozai – Surgical & Medical
4. LORCS – The League of Red Cross Societies
& Pakistan Red Crescent
Eye Hospital, Mardan District = 50 beds
Treats both ARs and locals
5. IRC-International Committee of the Red Cross
 - (i) Surgical Hospital = 110 beds
 - (ii) Paraplegic Centre = 110 beds
 - (iii) Orthopaedic Centre
University Town, Peshawar
Workshop: capacity upto 50 artificial legs per
month

6. The Kuwait Red Crescent Society

The Kuwait Red Crescent is constructing a 150 bed surgical and orthopaedic hospital at Peshawar which is expected to be operational during 1984.

Orthopaedic Workshop – Under construction
Near Khyber View Plaza, Jamrud Road

UK Government/Health Department, NWFP

7. A 100 bed gynaecological/obstetric and a 50 bed paediatric hospital is being planned in Peshawar.

8. GTZ – German Agency for Technical Cooperation

The Agency provides artificial limbs to AR's and technical orthopaedic assistance to the Khyber Teaching Hospital, Peshawar.

Workshop : Capacity 22 artificial limbs monthly for both AR's and locals.

9. CARITAS Pakistan

The relief agency has provided equipment for the orthopaedic workshop at Lady Reading Hospital, Peshawar for AR's and locals.

10. The Afghan Doctors Society

The society has a dispensary at their Peshawar office for refugees. They run first aid training courses.

11. SERVE

Ophthalmic Clinic.

12. Afghan Gynae & Obstetric Clinic

An OPD facility financed by IRC and private US sources. To be expanded to a 10 bed hospital.

OTHER SERVICES

ICRC International Committee of the Red Cross
Surgical Hospital for Afghan warwounded

Quetta : 60 beds (extendable to 80)

Peshawar : 100 beds (extendable to 150)

Paraplegic Centre : 100 beds

Orthopaedic Centre

APPENDIX G**CRITERIA FOR REFUNDING INDIVIDUAL
MEDICAL CLAIMS**

1. Reimbursement of medical bills may be considered from the date of registering the claimant as a refugee (only the bills dated and accruing at or after registration). Payment will be made directly to the third parties concerned rather than to the refugees themselves.
2. The patient must be referred for specialist care by a member of the BHU staff authorized to do so. Recognised medical practitioner's or dentist's bills and prescriptions are considered for reimbursement. The Refugee Form, AR-8, must be completed.
3. Doctor's fees are to be refunded up to the recommendations of the Government and the Pakistan Medical Association (visit to a specialist Rs. 60/-, visit to a general practitioner Rs. 20/-; home visits to patients double, treatment to be considered by case).
4. Medicaments, dressings, etc., prescribed by doctors or hospitals and procured at pharmacies are to be refunded up to 70 per cent of the total cost.
5. Hospital treatment in most of the Government hospitals is free. Treatment in private hospitals is refundable against the hospital bill if Government hospital treatment has not been available; inpatient treatment is refundable, provided that the patient is treated as a regular, not private patient (exceptions to be reviewed individually).
6. If there is any evidence or suspicion about mismanagement (by the patient or doctor), no payments will be

made, but the case referred to the UNHCR/WHO Senior Health Coordinator or to the Programme Officers Health (Peshawar/Quetta), i.e. if there are several visits to different doctors or if there are large and frequent bills from one doctor or hospital.

7. Self-referral will not be considered for reimbursement.
8. Receipts are required for payment. No bill will be paid without a receipt describing the services rendered.

APPENDIX H

AFGHAN REFUGEE HEALTH PROGRAMME
LABORATORIES

(TB + MALARIA) IN NWFP 31.12.1984

DISTRICT/ AGENCY	EXISTING	PLANNED
1. Bajaur	1 – Khar	1 – Nawagai
2. Bannu	1 – F.S.M.O. Office	
3.a Dir	1 – F.S.M.O. Office	
3.b Chitral	1 – Daroqsh	
4.a D.I. Khan	1 – F.S.M.O. Office	
4.b South Waziristan		1 – Wana
5. Hazara	2 – F.S.M.O. Office 1 – Inter Aid Comm. Mansehra 1 – The Salvation Army Ghazi	
6. Kohat	1 – F.S.M.O. Office 1 – IRC Office Hangu 1 – Orakzai	
7. Kurram	1 – Alizai	1 – Muzaffar Kot 1 – Sadda
8. Mardan	2 – F.S.M.O. Office 2 – Austrian Relief Comm. in Baghicha & Gandaf 1 – Union Aid in Barakai	

9. North Waziristan	1 – F.S.M.O. Office	1 – Mir Ali
10. Peshawar	1 – Shaboadar	
	1 – TB Office Jamrud Road	
	1 – Saudi Red Crescent	
	1 – Save the Children Fund	
	1 – Pak. Red Crescent	
	1 – Jalozei	

Total :	25	

In Baluchistan (TB + Malaria) 31-12-1984

DISTRICT

Quetta	Mohd. Khel II
Chaman	
Pishin	Surkhab II
Gulistan	Pir Alizai II Nalak
Zhob	Malgagai II
Loralai	Zar Karez I Chazgai Manara
Chagai	Okar Chagai Posti

APPENDIX I ISLAMIC CALANDER TO ASSIST IN DETERMINING AGE

ISLAMIC AND WESTERN CALENDER

SECTION A DETERMINING THE YEAR OF BIRTH

EVENTS IN AFGHANISTAN FROM 1979 1984
 16 September 1979 Taraki is replaced by Amin
 27 December 1979 Amin is killed and Babruk Karmal becomes President
 December 1979 Soviet Invasion of Afghanistan

SECTION B DETERMINING THE MONTH OF BIRTH

SEASON CROPS	CALENDER		FESTIVAL AND LOCAL EVENTS	EXPLANATION	1979	1980	1981	1982	1983	1984	1985	1986*
	ISLAMIC	WESTERN										
Rice Cotton Harvest	Safar Rabi Ul Awwel Rabi ul Sani	December January February	Akhti Char Shamba (Last Wednesday of Safar) Eid Milad ul Nabi (12 day of R. Awwel)	Holy Prophet recovered from illness Birth & Death of Holy Prophet	24 Jan 10 Feb	16 Jan 31 Jan	7 Jan 19 Jan	15 Dec 29 Dec	30 Nov 18 Dec	21 Nov 6 Dec	13 Nov 26 Nov	3 Nov 16 Nov
Wheat Harvest	R. Sanr J. Awwel J. Sani	March April										
Rice Cotton	J. Sani, Rajab Rajab, Shaban	May June	Shabe Meraj	Holy Prophet travelled (spiritually) from Mecca to Jerusalem to the seven Heavens and beyond (paradise). He returned on the same night God gives food to the people People's destinies decided. Last Friday of Ramazan before Eid.	22 June	10 June	2 June	21 May	10 May	29 April	17 April	7 April
	Shaban Ramzan	July	Shabe Barat (14th night of Shaban) Jums tul Wida		10 July 24 Aug	28 June 8 Aug	17 June 31 July	7 June 16 July	28 May 8 July	16 May 29 June	5 May 14 June	25 April 6 June
	Ramzan Shawwal Ziqad	August Sept	Eid ul Fitr	Eid marking the end of Ramazan	25 Aug	13-14 Aug	23 Aug	23-24 July	12-13 July	30-1-2 July	20-22 June	9-11 June
Wheat Sowing	Zil Haj Moharram Moharram Safar	October November December	Haj Eid ul Azha (10 day of Zil Haj) Aithura (10th day of Moharram)	Pilgrimage to Mecca To commemorate Sacrifice of Ibrahim's son-Ismail. The son and grandson of Hazrat Fatima (daughter of Prophet) killed on this day	31 Oct 1-2 Nov 1 Dec	19 Oct 20 Oct 19 Nov	9 Oct 10 Oct 8 Nov	28 Sept 28 Sept 28 Oct	17 Sept 18-19 Sept 16-17 Oct	6 Sept 7, 8 & 9 Sept 5-6 Oct	26 Aug 27-28 Aug 26 Sept	15 Aug 16-18 Aug 15 Sept

* The dates for 1986 are estimated dates and exact dates to be determined from Calendar 1986.

APPENDIX J

ESTIMATION OF A CHILD'S WEIGHT
FROM LENGTH OR HEIGHTWEIGHT FOR LENGTH (Supine) FOR BOTH
BOYS AND GIRLS

Length	Median	Percents of Median			
		85%	80%	75%	70%
49.0cm	3.2kg	2.7kg	2.6kg	2.4kg	2.3kg
49.5	3.3	2.8	2.6	2.5	2.3
50.0	3.4	2.9	2.7	2.5	2.4
50.5	3.4	2.9	2.7	2.6	2.4
51.0	3.5	3.0	2.8	2.6	2.5
51.5	3.6	3.1	2.9	2.7	2.5
52.0	3.7	3.1	3.0	2.8	2.6
52.5	3.8	3.2	3.0	2.8	2.6
53.0	3.9	3.3	3.1	2.9	2.7
53.5	4.0	3.4	3.2	3.0	2.8
54.0	4.1	3.5	3.3	3.1	2.9
54.5	4.2	3.6	3.4	3.2	2.9
55.0	4.3	3.7	3.5	3.2	3.0
55.5	4.4	3.8	3.5	3.3	3.1
56.0	4.6	3.9	3.6	3.4	3.2
56.5	4.7	4.0	3.7	3.5	3.3
57.0	4.8	4.1	3.8	3.6	3.4
57.5	4.9	4.2	3.9	3.7	3.4
58.0	5.1	4.3	4.0	3.8	3.5
58.5	5.2	4.4	4.2	3.9	3.6

59.0	5.3	4.5	4.3	4.0	3.7
59.5	5.5	4.6	4.4	4.1	3.8
60.0	5.6	4.8	4.5	4.2	3.9
60.5	5.7	4.9	4.6	4.3	4.0
61.0	5.9	5.0	4.7	4.4	4.1
61.5	6.0	5.1	4.8	4.5	4.2
62.0	6.2	5.2	4.9	4.6	4.3
62.5	6.3	5.4	5.0	4.7	4.4
63.0	6.5	5.5	5.2	4.8	4.5
63.5	6.6	5.6	5.3	5.0	4.6
64.0	6.7	5.7	5.4	5.1	4.7
64.5	6.9	5.9	5.5	5.2	4.8
65.0	7.0	6.0	5.6	5.3	4.9
65.5	7.2	6.1	5.7	5.4	5.0
66.0	7.3	6.2	5.9	5.5	5.1
66.5	7.5	6.4	6.0	5.6	5.2
67.0cm	7.6kg	6.5kg	6.1kg	5.7kg	5.3kg
67.5	7.8	6.6	6.2	5.8	5.4
68.0	7.9	6.7	6.3	5.9	5.5
68.5	8.0	6.8	6.4	6.0	5.6
69.0	8.2	7.0	6.6	6.1	5.7
69.5	8.3	7.1	6.7	6.2	5.8
70.0	8.5	7.2	6.8	6.3	5.9
70.5	8.6	7.3	6.9	6.4	6.0
71.0	8.7	7.4	7.0	6.5	6.1
71.5	8.9	7.5	7.1	6.6	6.2
72.0	9.0	7.6	7.2	6.7	6.3
72.5	9.1	7.7	7.3	6.8	6.4
73.0	9.2	7.9	7.4	6.9	6.5
73.5	9.4	8.0	7.5	7.0	6.5
74.0	9.5	8.1	7.6	7.1	6.6

74.5	9.6	8.2	7.7	7.2	6.7
75.0	9.7	8.2	7.8	7.3	6.8
75.5	9.8	8.3	7.9	7.4	6.9
76.0	9.9	8.4	7.9	7.4	6.9
76.5	10.0	8.5	8.0	7.5	7.0
77.0	10.1	8.6	8.1	7.6	7.1
77.5	10.2	8.7	8.2	7.7	7.2
78.0	10.4	8.8	8.3	7.8	7.2
78.5	10.5	8.9	8.4	7.8	7.3
79.0	10.6	9.0	8.4	7.9	7.4
79.5	10.7	9.1	8.5	8.0	7.5
80.0	10.8	9.1	8.6	8.1	7.5
80.5	10.9	9.2	8.7	8.1	7.6
81.0	11.0	9.3	8.8	8.2	7.7
81.5	11.1	9.4	8.8	8.3	7.7
82.0	11.2	9.5	8.9	8.4	7.8
82.5	11.3	9.6	9.0	8.4	7.9
83.0	11.4	9.6	9.1	8.5	7.9
83.5	11.5	9.7	9.2	8.6	8.0
84.0	11.5	9.8	9.2	8.7	8.1
84.5	11.6	9.9	9.3	8.7	8.2

**WEIGHT FOR HEIGHT (STATURE) FOR BOTH
BOYS AND GIRLS**

Height	Median	Percents of Median			
		85%	80%	75%	70%
85.0cm	12.0kg	10.2kg	9.6kg	9.0kg	8.4kg
85.5	12.1	10.3	9.7	9.1	8.5
86.0	12.2	10.4	9.8	9.1	8.5
86.5	12.3	10.5	9.8	9.2	8.6
87.0	12.4	10.6	9.9	9.3	8.7
87.5	12.5	10.6	10.0	9.4	8.8
88.0	12.6	10.7	10.1	9.5	8.8
88.5	12.8	10.8	10.2	9.6	8.9
89.0	12.9	10.9	10.3	9.7	9.0
89.5	13.0	11.0	10.4	9.7	9.1
90.0	13.1	11.1	10.5	9.8	9.2
90.5	13.2	11.2	10.6	9.9	9.2
91.0	13.3	11.3	10.7	10.0	9.3
91.5	13.4	11.4	10.8	10.1	9.4
92.0	13.6	11.5	10.8	10.2	9.5
92.5	13.7	11.6	10.9	10.3	9.6
93.0	13.8	11.7	11.0	10.3	9.7
93.5	13.9	11.8	11.1	10.4	9.7
94.0	14.0	11.9	11.2	10.5	9.8
94.5	14.2	12.0	11.3	10.6	9.9
95.0	14.3	12.1	11.4	10.7	10.0
95.5	14.4	12.2	11.5	10.8	10.1
96.0	14.5	12.4	11.6	10.9	10.2
96.5	14.7	12.5	11.7	11.0	10.3
97.0	14.8	12.6	11.8	11.1	10.3

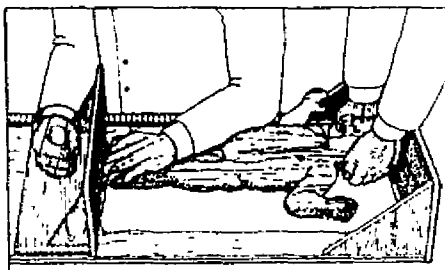
97.5	14.9	12.7	11.9	11.2	10.4
98.0	15.0	12.8	12.0	11.3	10.5
98.5	15.2	12.9	12.1	11.4	10.6
99.0	15.3	13.0	12.2	11.5	10.7
99.5	15.4	13.1	12.3	11.6	10.8
100.0	15.6	13.2	12.4	11.7	10.9
100.5	15.7	13.3	12.6	11.8	11.0
101.0	15.8	13.5	12.7	11.9	11.1
101.5	16.0	13.6	12.8	12.0	11.2
102.0	16.1	13.7	12.9	12.1	11.3
102.5	16.2	13.8	13.0	12.2	11.4
103.0	16.4	13.9	13.1	12.3	11.5
103.5	16.5	14.0	13.2	12.4	11.6
104.0	16.7	14.2	13.3	12.5	11.7
104.5	16.8	14.3	13.4	12.6	11.8
105.0	16.9	14.4	13.6	12.7	11.9
105.5	17.1	14.5	13.7	12.8	12.0
106.0	17.2	14.6	13.8	12.9	12.1
106.5	17.4	14.8	13.9	13.0	12.2
107.0	17.5	14.9	14.0	13.1	12.3
107.5cm	17.7kg	15.0kg	14.1kg	13.3kg	12.4kg
108.0	17.8	15.2	14.3	13.4	12.5
108.5	18.0	15.3	14.4	13.5	12.6
109.0	18.1	15.4	14.5	13.6	12.7
109.5	18.3	15.5	14.6	13.7	12.8
110.0	18.4	15.7	14.8	13.8	12.9
110.5	18.6	15.8	14.9	14.0	13.0
111.0	18.8	16.0	15.0	14.1	13.1
111.5	18.9	16.1	15.1	14.2	13.3
112.0	19.1	16.2	15.3	14.3	13.4

112.5	19.3	16.4	15.4	14.4	13.5
113.0	19.4	16.5	15.5	14.6	13.6
113.5	19.6	16.7	15.7	14.7	13.7
114.0	19.8	16.8	15.8	14.8	13.8
114.5	19.9	16.9	16.0	15.0	14.0
115.0	20.1	17.1	16.1	15.1	14.1
115.5	20.3	17.3	16.2	15.2	14.2
116.0	20.5	17.4	16.4	15.4	14.3
116.5	20.7	17.6	16.5	15.5	14.5
117.0	20.8	17.7	16.7	15.6	14.6
117.5	21.0	17.9	16.8	15.8	14.7
118.0	21.2	18.0	17.0	15.9	14.9
118.5	21.4	18.2	17.1	16.1	15.0
119.0	21.6	18.4	17.3	16.2	15.1
119.5	21.8	18.5	17.4	16.4	15.3
120.0	22.0	18.7	17.6	16.5	15.4
120.5	22.2	18.9	17.8	16.7	15.5
121.0	22.4	19.1	17.9	16.8	15.7
121.5	22.6	19.2	18.1	17.0	15.8
122.0	22.8	19.4	18.3	17.1	16.0
122.5	23.1	19.6	18.4	17.3	16.1
123.0	23.3	19.8	18.6	17.5	16.3
123.5	23.5	20.0	18.8	17.6	16.5
124.0	23.7	20.2	19.0	17.8	16.6
124.5	24.0	20.4	19.2	18.0	16.8
125.0	24.2	20.6	19.4	18.2	16.9
125.5	24.4	20.8	19.6	18.3	17.1
126.0	24.7	21.0	19.7	18.5	17.3
126.5	24.9	21.2	19.9	18.7	17.5
127.0	25.2	21.4	20.1	18.9	17.6

127.5	25.4	21.6	20.4	19.1	17.8
128.0	25.7	21.8	20.6	19.3	18.0
128.5	26.0	22.1	20.8	19.5	18.2
129.0	26.2	22.3	21.0	19.7	18.4
129.5	26.5	22.5	21.2	19.9	18.6
130.0	26.8	22.8	21.4	20.1	18.7

DIRECTIONS FOR MEASURING CHILDREN WHO ARE LESS THAN 85 CM IN LENGTH

- Step 1. The measuring board is placed horizontally on the ground or on a table.
- Step 2. With the help of one or two assistants, place the baby, barefoot and without head covering on the measuring board with the head against the fixed (non-movable) end.
- Step 3. An assistant holds the baby's head so that the eyes are pointed straight up and applies gentle traction to bring the top of the child's head into contact with the fixed end of the measuring board.
- Step 4. The measurer holds the child's knees together and pushes them down against the tabletop with one hand or forearm, *fully extending the child*. With the other hand, the measurer slides the movable footboard to the child's feet until the *heels* of both feet touch the footboard.



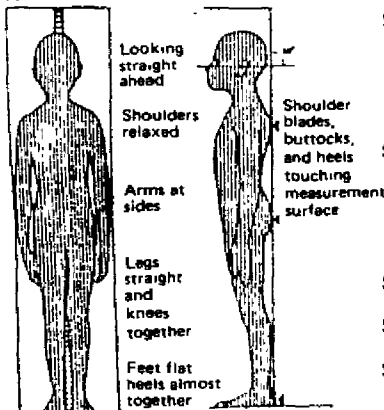
- Step 5. The measurer then immediately removes the child's feet from contact with the footboard with one hand (to prevent the child from kicking and moving the footboard) while holding the footboard securely in place with the other hand.
- Step 6. The measurer reads the measurement to the nearest 0.5 cm.
- Step 7. The recorder then writes the measurement clearly on the form.
- Step 8. The measurer then looks at the recorded value on the form to be sure that it is correct.

NCHS/CDC/WHO NORMALIZED REFERENCE
2/82

Prepared By
HHS, PHS, CDC, CHPE, Nutrition Division
Atlanta, Georgia 30333

DIRECTIONS FOR MEASURING CHILDREN WHO ARE 85 CM OR MORE IN HEIGHT

- Step 1. Place the measuring board in a vertical position on a flat surface.
- Step 2. Have the mother (or assistant) remove any footwear or headgear on the child and lead the child to the measuring board.
- Step 3. Place the child so that the shoulder blades, buttocks, and heels are touching the vertical surface of the measuring board. The feet must be flat on the floor, slightly apart, legs and back straight, and arms at sides. The shoulders must be relaxed and in contact with the measuring board. The head usually is not in contact with the measuring board. Tell the child to stand "straight and tall" and look straight ahead.



- Step 4. One assistant (the recorder) checks that the child stands flat footed with the knees fully extended. The shoulders and buttocks should be in line with the heels.
- Step 5. The movable headboard is then brought to rest firmly on the crown of the child's head by the measurer while the head is held so that the child's eyes point straight ahead.
- Step 6. The measurer reads the measurement to the nearest 0.5 cm.
- Step 7. The recorder then writes the measurement clearly on the form.
- Step 8. The measurer then looks at the recorded value on the form to be sure that it is correct.

NCHS/CDC/WHO NORMALIZED REFERENCE
2/82

NOTE Children who are over 85 cm in height who are too sick to stand may be measured lying down, but 1 cm should be subtracted from the measured length before using this table.

APPENDIX K

HOW TO MAKE SALT AND SUGAR SOLUTION AT HOME

A special drink (salt, sugar and water) can be made at home to treat diarrhoea and prevent dehydration. There are many methods that can be used for measuring the correct amounts of sugar and salt.

The following shows a method for mixing one litre of special drink.

What you need:

A spoon. This should be a small spoon (a teaspoon) that holds 4-5 ml of fluid.

A clean container that will hold 1 litre or a little more.

Salt, as used on food or for cooking.

Sugar of any sort — unrefined lump sugar or purified sugar.

Drinking water (clean or boiled water).

What to do:

Measure one litre of drinking water into the container; this can be done, for example, by measuring out 5 cupfuls of about 200 ml each. Take salt in a teaspoon, level it with a knife or a flat object. Add one level spoonful of salt to the water and mix (See figure A1). Taste the salt and water. It should not be very salty. If it tastes more salty than tears, pour away this mixture and make it again with less salt.

Take 8 level teaspoonfuls of sugar. Put these in the water and mix.

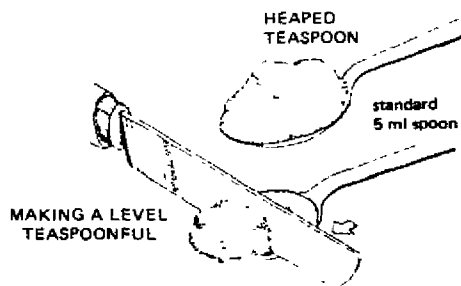


Fig. A1 When measuring salt and sugar, do not use a heaped teaspoon. Make a level teaspoonful by using a knife or other flat object (Fig. A1–A4 are reproduced from King, M. ETAL. *Primary child care. A manual for health workers*. Oxford: Oxford University Press, 1978)

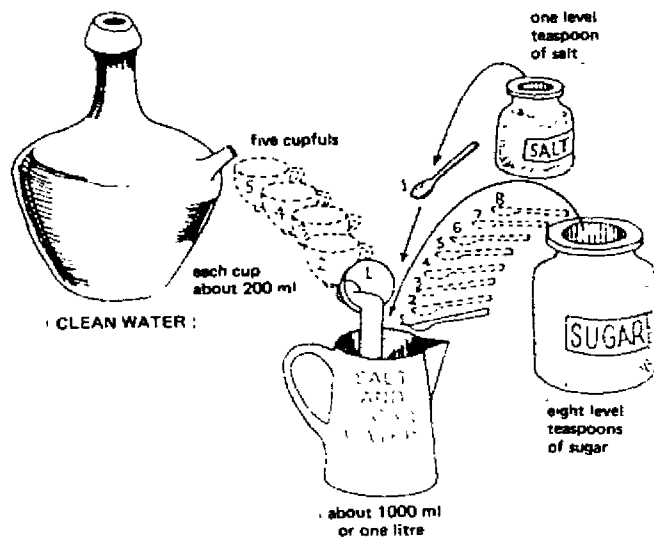


Fig. A2. How to make salt and sugar water.