## ChildCount+ Form B: Household Visit Form

## To Record Each Household Visit

CHW	Number:	
CHW	Number:	

Notes	MANDATORY EVERY HH VISIT		MANDATORY EVERY HH VISIT			Conditional: If Necessary				Cond.		Optional: Routine					
				V1	V2	V3		E1	E2	E3	E4		L1		K1	K2	K3
Notes	Date [DD/MM]	Household Head HEALTH ID	HH Visit - All Households	Any HH Member Available (Y-N)	Number of Children Under-5 seen	Counseling and Advice (BF, BN, FP, IM, NUT, SH)	Other Sick Members Section [anyone not recorded in Form C]	Number of <b>other</b> sick members seen during visit?	Number of RDTs used on <b>other</b> sick members?	Number of RDT positive cases for other sick members?	Number of <b>other</b> sick members receiving anti-malarial treatment?	Birth Control Pill Given Section	Number of Women given birth control Pills by CHW during visit	Family Planning Section	Number of Women Aged 15-49 seen during this visit	Number of these Women currently using modern family planning	Primary Family Planning Method used  [Record primary method for each woman]  (CD, IUD, IJ, IP, PL, ST)
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COUNSELING CODES	NUT = Nutrition	FAMILY PLANNING CODES	PL = Pill
BF = Breast-feeding	SH = Sanitation & Hygiene	CD = Condom	ST = Sterilization
BN = Bednet		IJ = Injectable	
FP = Family planning		IP = Implant / Norplant / Jadelle	
IM = Immunizations		IUD = Intra-uterine Device	

ChildCount+ Hotline: 0755 947787