

INITIAL ASSESSMENT

<p>1st Assessment</p>	<p><u>Open SHIP Passport</u> <u>Clinical examination</u> should include at least: (<i>documentation in center file</i>) general condition body temperature weight, nutritional status & (de)hydration deformities head circumference to be put on chart (in case of HC) fontanel cele wound skin/pressure sores → Refer to pediatrician/treatment in case of fever or other diseases</p> <p><u>Decision taking flow chart:</u></p> <pre> graph TD SB[Spina Bifida] --> C[Check Cele:] C --> C1["1) Closed: referral to Hospital/Surgical Hospital for clinical examination and further decision making by specialist doctor"] C --> C2["2) Open: cover wound with non-adhering sterile dressing & saline instruct parents on wound care of cele contact SHIP coordinator referral to Hospital/Surgical Hospital for clinical examination and further decision making by specialist doctor"] C --> H[Check Hydrocephalus] H --> HC[Measure head circumference (and put on chart):] HC --> HC1["1) Progressive: emergency referral to Hospital/Surgical Hospital contact SHIP coordinator immediately"] HC --> HC2["2) No (progressive): measure head circumference regularly (and put on chart)"] </pre> <p>Antibiotics only in case of clinical signs of sepsis</p> <p><u>Counseling of parents (together with Parent Support Group)</u> Inform about condition and next steps in treatment & follow-up Discuss cost implications for transport and treatment Discuss available resources to help family Identify main contact person for family, i.e. SHIP coordinator Provide relevant leaflets</p> <p><u>Update SHIP Passport</u></p>
<p>Referral</p>	<p>Prepare referral note Ensure child is stable for travel Give SHIP Passport to parents Inform SHIP coordinator and/or hospital</p>



FOLLOW UP

<p>Pre-operative (immediate)</p>	
<p>Outreach Clinic</p>	<p>Outreach Clinics jointly organized by CBR service and Surgical Hospital Documentation in center file</p> <p>Patients to see: Nurse, PT, OT, Doctor, Social worker Surgeon/clinical officer, radiologist -> when at hospital</p> <p>Frequency: 1st year: after 1, 3, 6, 12 months 2nd year: twice Then once every year</p> <p>Also follow-up of children not operated</p> <p><u>Record/verify</u> all contact details of family <u>Clinical examination</u> includes at least: General condition Shunt functioning Neurological examination Skin problems GI Infections (urine/bladder test) Measure head circumference (put on chart)</p> <p><u>Assessment and Practical Training</u> * of parents and children (<i>together with Parent Support Group</i>) Bladder and bowel management Sensitization and Skin care Appliances Deformities Mobility and Physio-/ Occupational Therapy Development milestones Transition to adulthood Education/ Schooling/ Inclusion</p> <p>Provide <u>folic acid</u> <u>Update SHIP passport</u> during each clinic</p>
<p>Home visits</p>	<p>In case of families not attending outreach clinics Documentation in center file</p> <p>Same <u>assessments</u> as during outreach clinics, where possible <u>Assess home environment</u>: Accessibility, Family situation, Education, Environmental <u>Practical training</u> to family members <u>Create awareness</u>: Meet with local leader/ village chairperson/ health institutions/ schools/ neighbors <u>Update SHIP Passport</u> after each home visit</p>

* can be done during parent meetings

