

## MCH Mother Services KenyaEMR

[ Last updated: July 2023]

<b>Tasks:</b>	Enter patient data into the KenyaEMR and enroll them for Mother Services in the MCH program
<b>Objective:</b>	Successfully Login to KenyaEMR and successfully Record all MCH Mother enrollment data and make MCH-related KenyaEMR forms available.
<b>Who:</b>	All facility staff responsible for enrolling patients into the MCH program.
<b>Required Materials:</b>	Username, password, computer with KenyaEMR(18.6.1+ installed, patient name, ID, and/or age

**Step 1**

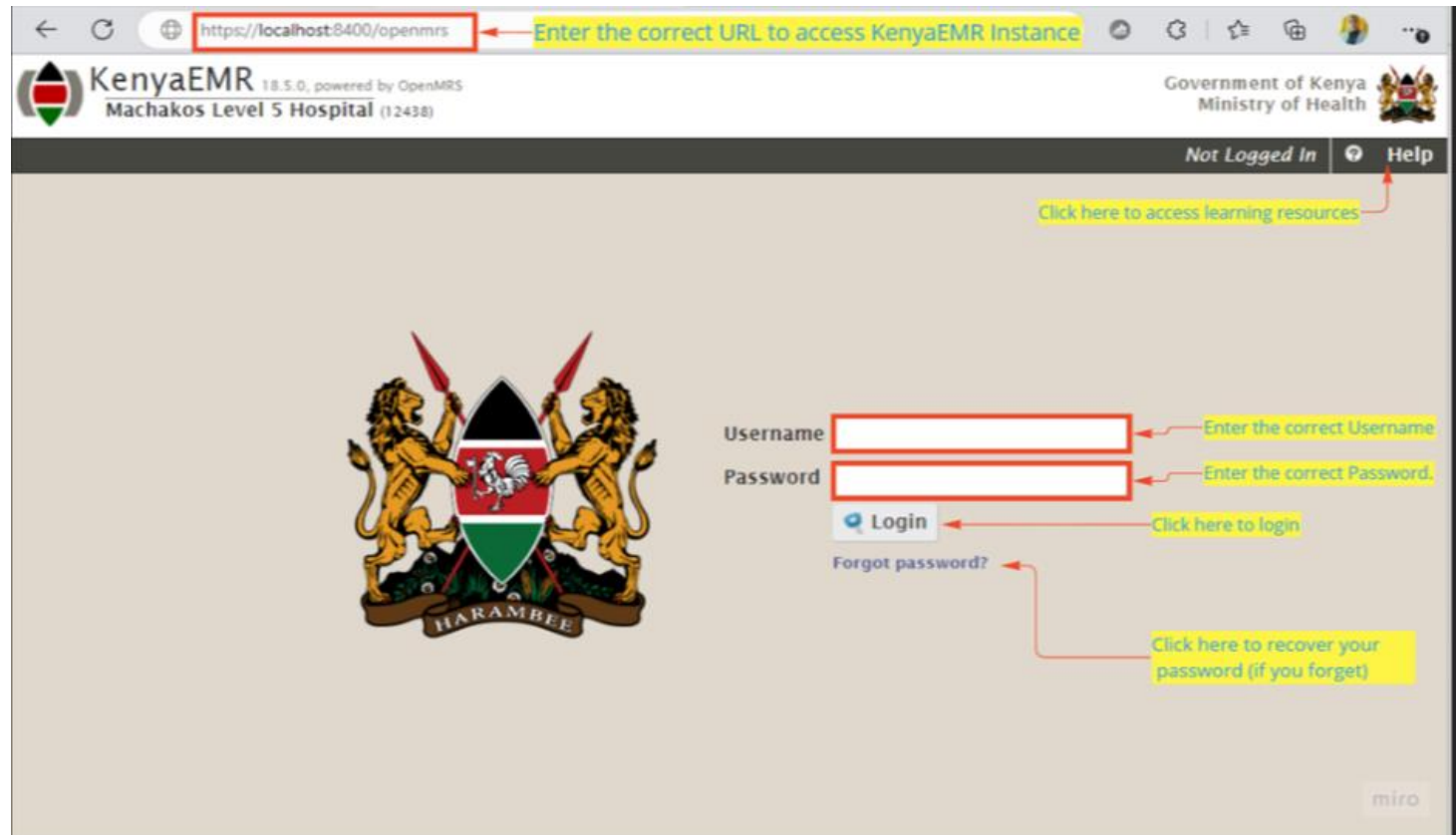
Login to KenyaEMR.

Enter the application server URL system.

**"[ServerIpAddress:8080/openmrs]"** and click on the load button or Enter key from the keyboard. On successful loading, you should be navigated to the system login page.

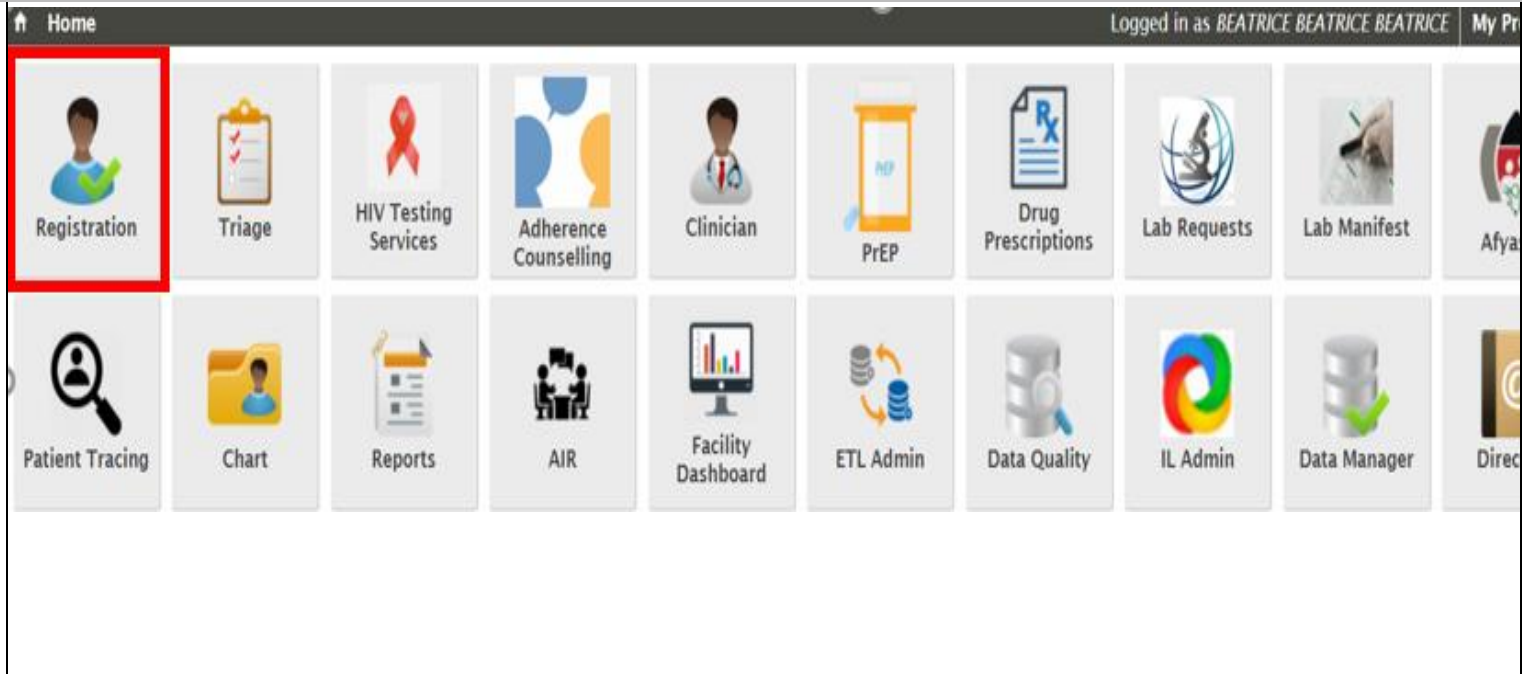
Authenticate entry by providing username and password on the fields and click **"Login"** Upon successful login, you shall be navigated to KenyaEMR Home Page.

Successful login will direct you to the KenyaEMR Home Page where the facility dashboard will be displayed.



**Step 2** To access MCH – Mother Services Module

Click **Home** and then click **registration**



Home Logged in as BEATRICE BEATRICE BEATRICE My Pr

Registration Triage HIV Testing Services Adherence Counselling Clinician PrEP Drug Prescriptions Lab Requests Lab Manifest Afya

Patient Tracing Chart Reports AIR Facility Dashboard ETL Admin Data Quality IL Admin Data Manager Direc

**Step 3**

If the client **doesn't exist** in the system, click on find or create a client to register them in the system

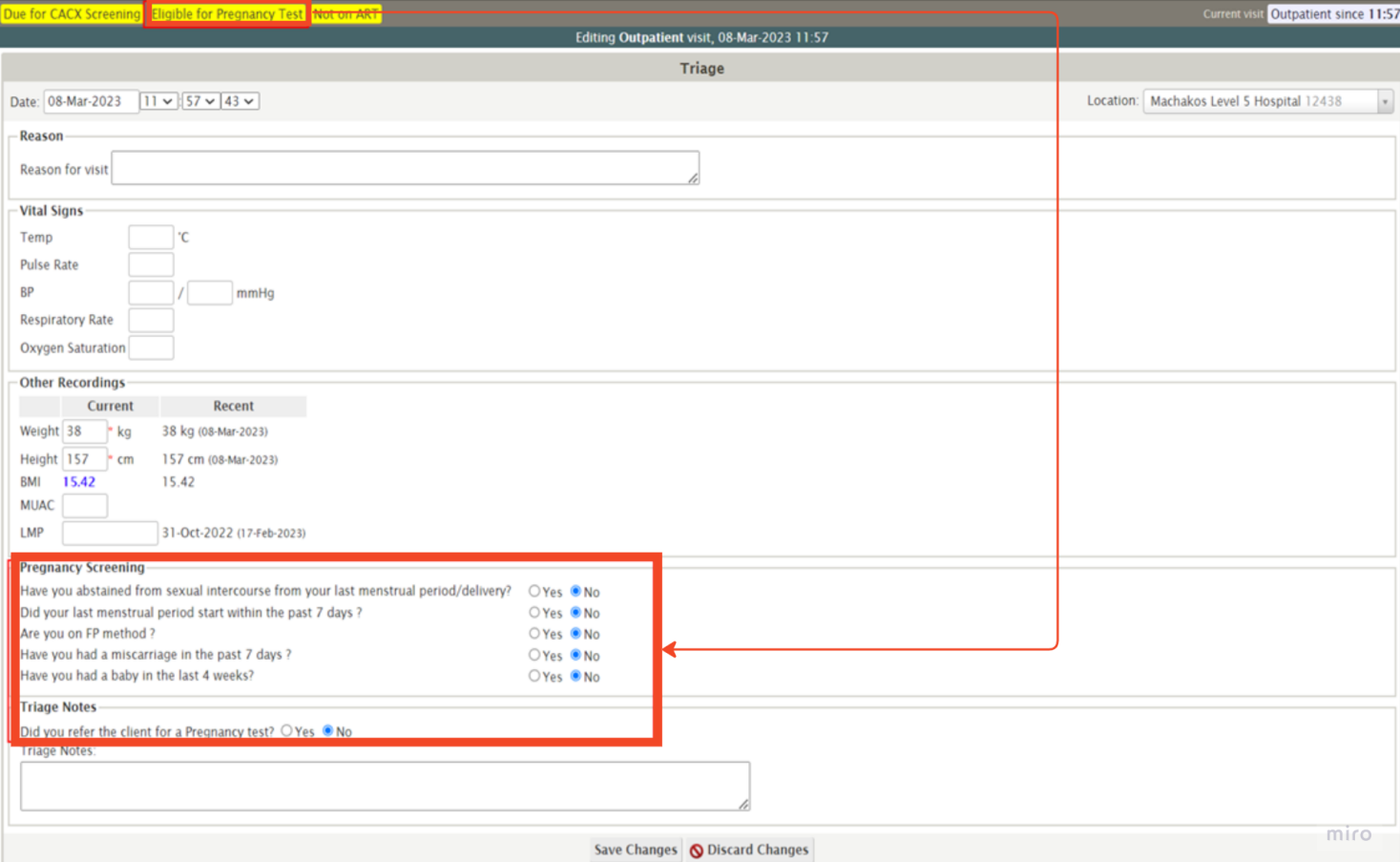
If the client **already exists** in the system, find and select the client

Check the patient in for the visit and Start with the Triage form

**Pregnancy screening questions** are available in the Triage form to track clients eligible for pregnancy.

**An alert** to show clients eligible for pregnancy test will be displayed.

For Eligible Patients, once you have the patient's record open,



Due for CACX Screening | **Eligible for Pregnancy Test** | Not on ART | Current visit: Outpatient since 11:57

Editing Outpatient visit, 08-Mar-2023 11:57

**Triage**

Date: 08-Mar-2023 | 11:57 | 43 | Location: Machakos Level 5 Hospital 12438

**Reason**  
Reason for visit

**Vital Signs**  
Temp: °C  
Pulse Rate  
BP: / mmHg  
Respiratory Rate  
Oxygen Saturation

**Other Recordings**

	Current	Recent
Weight	38 kg	38 kg (08-Mar-2023)
Height	157 cm	157 cm (08-Mar-2023)
BMI	15.42	15.42
MUAC		
LMP		31-Oct-2022 (17-Feb-2023)

**Pregnancy Screening**

Have you abstained from sexual intercourse from your last menstrual period/delivery?  Yes  No

Did your last menstrual period start within the past 7 days?  Yes  No

Are you on FP method?  Yes  No

Have you had a miscarriage in the past 7 days?  Yes  No

Have you had a baby in the last 4 weeks?  Yes  No

**Triage Notes**  
Did you refer the client for a Pregnancy test?  Yes  No

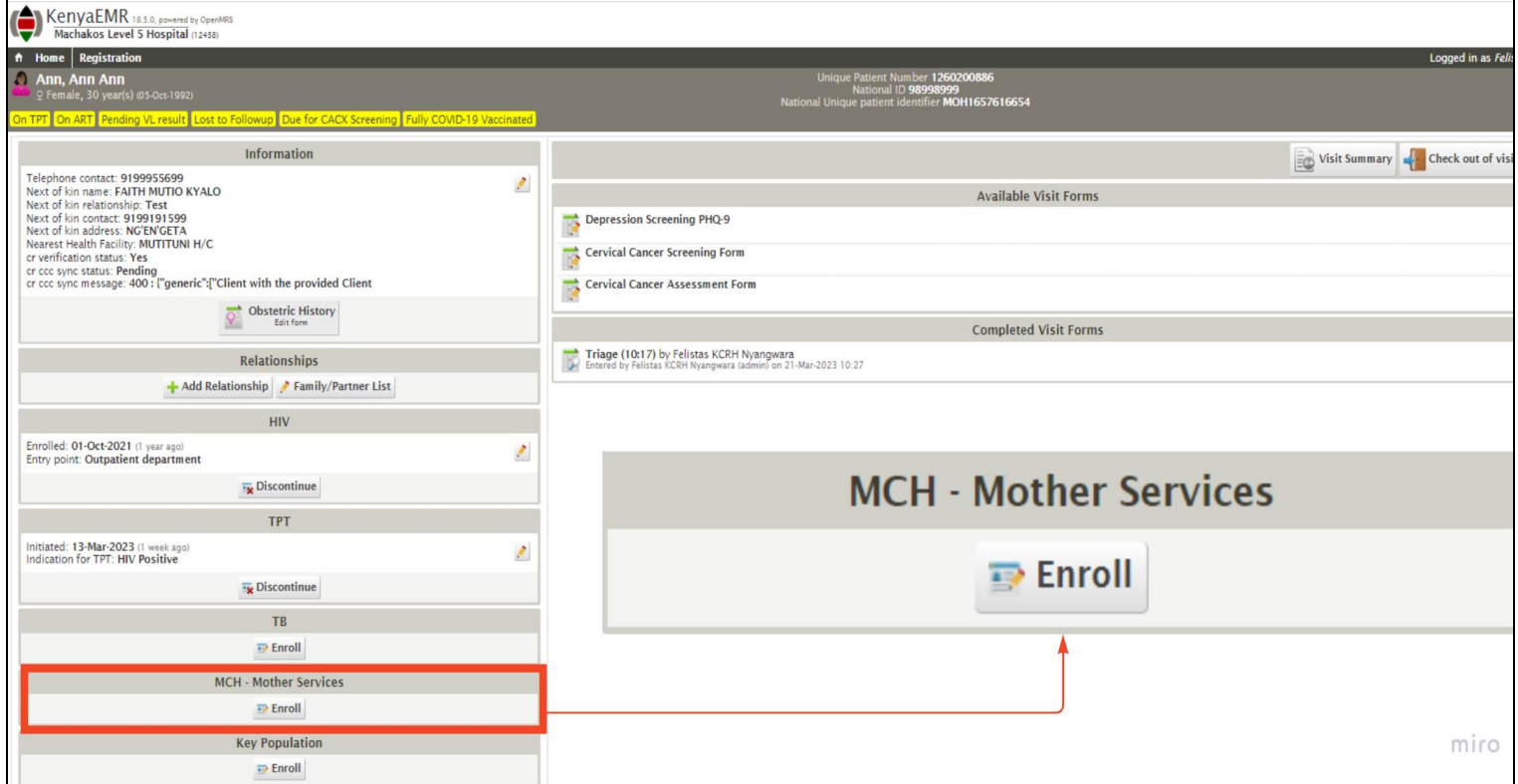
Triage Notes

Save Changes | Discard Changes | miro

**Step 4**

click on the **Enroll** icon in the **MCH – Mother Services** section

**NB: This section is at the bottom of the page on the left hand side.**



KenyaEMR 1.8.5.0, powered by OpenMRS  
Machakos Level 5 Hospital (12458)

Home Registration Logged in as Felista

**Ann, Ann Ann**  
Female, 30 year(s) (05-Oct-1992)  
Unique Patient Number 1260200886  
National ID 98998999  
National Unique patient identifier MOH1657616654

On TPT On ART Pending VL result Lost to Followup Due for CACX Screening Fully COVID-19 Vaccinated

**Information**  
Telephone contact: 9199955699  
Next of kin name: FAITH MUTIO KYALO  
Next of kin relationship: Test  
Next of kin contact: 9199191599  
Next of kin address: NG'ENGETA  
Nearest Health Facility: MUTITUNI H/C  
or verification status: Yes  
or ccc sync status: Pending  
or ccc sync message: 400: ["generic"]Client with the provided Client  
Obstetric History  
Edit form

**Relationships**  
Add Relationship Family/Partner List

**HIV**  
Enrolled: 01-Oct-2021 (1 year ago)  
Entry point: Outpatient department  
Discontinue

**TPT**  
Initiated: 13-Mar-2023 (1 week ago)  
Indication for TPT: HIV Positive  
Discontinue

**TB**  
Enroll

**MCH - Mother Services**  
Enroll

**Key Population**  
Enroll

**Available Visit Forms**  
Depression Screening PHQ-9  
Cervical Cancer Screening Form  
Cervical Cancer Assessment Form

**Completed Visit Forms**  
Triage (10:17) by Felistas KCRH Nyangwara  
Entered by Felistas KCRH Nyangwara (admin) on 21-Mar-2023 10:27

Visit Summary Check out of visit

**MCH - Mother Services**  
Enroll

miro

**Step 5**

Once you click on enroll, MCH Enrollment will appear

**Enrolled by** is picked automatically by the system referencing to the user account in use.

Check the radio button to select either **ANC, Delivery or PNC** depending on the services being sought by the client

Select **enrollment date** using the date picker provided.

**MCH-MS Enrollment**

Enrollment date: 21-Mar-2023 | 10 | 35 | 52

Enrolled by: Nyangwara, Felistas KCRH

Enrolled at: Machakos Level 5 Hospital 12438

\* indicates a required field

**Maternal/Antenatal Profile**

Service Type:  ANC  Delivery  PNC\* Select service Type as required

ANC No:  (xxxx/yy)      Gestation in weeks:

Parity:  +       EDD (Calculated from L.M.P):

Gravida:       EDD (Ultrasound):

Age at Menarche:       TB Screening results:

L.M.P:   Estimated      Date of first ANC visit:   Today

HIV Status before first ANC Visit:  Positive  Patient is enrolled in HIV program      HIV Test Date:  01-Oct-2021

Partner HIV Status:       Partner HIV Test Date:

**Laboratory investigations**

Syphilis serology:       BS for MPS:

HIV Test Recorded Recently

Final results:  Positive      Date: 01/Oct/2021

On HAART:  Yes      Regimen: **TDF/3TC/DTG**

Blood Group/Rhesus:

**Urinalysis**

Urine Microscopy:

Urinary Albumin:  mg/dL      Urine Leukocyte Esterase Test:

Glucose Measurement (Qualitative):       Urinary Ketone:  mg/dL

Urine pH:       Urine Bile Salt Test:  mg/dL

Urine Specific Gravity:       Urine Bile Pigment Test:

Urine Nitrite Test:       Urine Color:

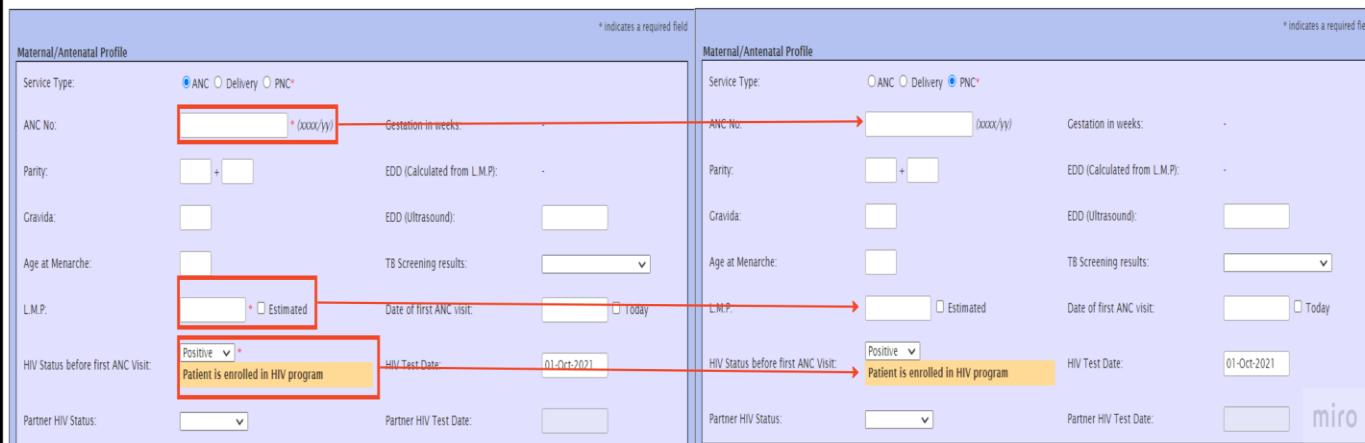
Urine Dipstick for Blood:       Urine Turbidity:

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**Step 6** When **delivery or PNC** is selected, all fields marked with an asterisk on ANC are no longer mandatory.

**For ANC Client** ensure all mandatory fields as highlighted below are filled.

Note that this fields must be filled in order to save the enrollment record.



**Step 7** The MCH enrollment form includes the **ART status** for a client coming for ANC services to a facility that is different from where he/she receives the ART services.

If the patient **HIV status is Positive** and they have been enrolled in HIV care at the facility, an alert will be available showing the patient is enrolled in the HIV Program.

\* indicates a required field

### Maternal/Antenatal Profile

Service Type:  ANC  Delivery  PNC\*

ANC No:  (xxxx/yy)      Gestation in weeks:

Parity:  +       EDD (Calculated from L.M.P):

Gravida:       EDD (Ultrasound):

Age at Menarche:       TB Screening results:

L.M.P:   Estimated      Date of first ANC visit:   Today

HIV Status before first ANC Visit:

HIV Test Date:

Partner HIV Status:       Partner HIV Test Date:  miro



**Step 8**

**Laboratory investigations**

Fill in all the **tests** (if available). If not available at enrollment, they shall be updated in the consecutive visits once they are available

Upon entry of all available and required data, **Click Save Changes.**

If you do not wish to save the form, click **discard changes.**

**Laboratory investigations**

Syphilis serology:  BS for MPS:

HIV Test Recorded Recently

Final results:  Date: 01/Oct/2021

On HAART:  Regimen: **TDF/3TC/DTG**

Blood Group/Rhesus:

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**Urinalysis**

Urine Microscopy <input type="text"/>	Urine Leukocyte Esterase Test <input type="text"/>
Urinary Albumin <input type="text"/> mg/dL	Urinary Ketone <input type="text"/> mg/dL
Glucose Measurement (Qualitative) <input type="text"/>	Urine Bile Salt Test <input type="text"/> mg/dL
Urine pH <input type="text"/>	Urine Bile Pigment Test <input type="text"/>
Urine Specific Gravity <input type="text"/>	Urine Color <input type="text"/>
Urine Nitrite Test <input type="text"/>	Urine Turbidity <input type="text"/>
Urine Dipstick for Blood <input type="text"/>	

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**MCH Program enrollment is successfully completed when:**

- A summary of enrollment data appears in the MCH – Mother Services section.
- A Discontinue icon appears in the MCH – Mother Services section. On the Clinician page: An MCH Care section appears on the right-hand side of the page.
- The Preventive Services icon is displayed The Delivery icon is displayed.

- Antenatal and Postnatal Visit Forms appear under Available Forms

**Step 9**

Having enrolled the client in MCH-ANC Service on consecutive visits, click on **Check in for Visit** button in order to access available forms

**The MCH Antenatal Visit form** will be available for consecutive visits.

**Check In**


Visit Type

Outpatient

Start date and time

21-Mar-2023  :

**Available Visit Forms**

 **MCH Antenatal Visit** miro

**Step 10**

**MCH-ANC VISIT Form Key features:**

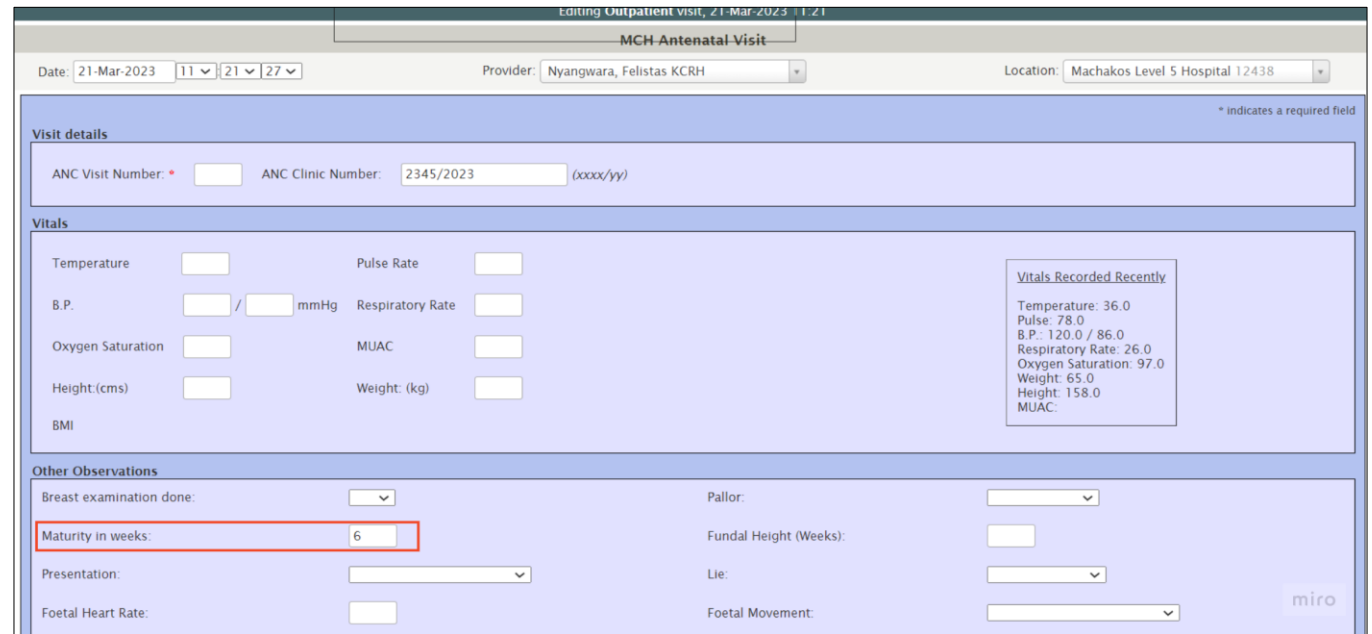
Enhanced the MCH Antenatal form to auto-populate maturity in weeks.

Provision of a variable to record syphilis results which shows when you select Dual kit for HIV testing.

Auto-populating syphilis serology results from the earlier collected results.

Added blood sugar testing for diabetes variable.

Added a flag to show High risk Client for both HIV negative and positive client



Editing Outpatient visit, 21-Mar-2023 11:21

**MCH Antenatal Visit**

Date: 21-Mar-2023 11 | 21 | 27 Provider: Nyangwara, Felistas KCRH Location: Machakos Level 5 Hospital 12438

\* indicates a required field

**Visit details**

ANC Visit Number: \*  ANC Clinic Number: 2345/2023 (xxxx/yy)

**Vitals**

Temperature  Pulse Rate   
 B.P.  /  mmHg Respiratory Rate   
 Oxygen Saturation  MUAC   
 Height (cms)  Weight (kg)   
 BMI

**Vitals Recorded Recently**

Temperature: 36.0  
 Pulse: 78.0  
 B.P.: 120.0 / 86.0  
 Respiratory Rate: 26.0  
 Oxygen Saturation: 97.0  
 Weight: 65.0  
 Height: 158.0  
 MUAC:

**Other Observations**

Breast examination done:  Pallor:   
 Maturity in weeks:  Fundal Height (Weeks):   
 Presentation:  Lie:   
 Foetal Heart Rate:  Foetal Movement:

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**Step 11**
**ANC VISIT Form Key features:**

A package of care is available for the high-risk clients.

Added variables.

- Deworming
- Intermittent presumptive treatment given during the visit.
- Female genital mutilation.
- Which postpartum family planning method was the client counselled on.
- Validated the next appointment date to be greater than the encounter date.

**Laboratory investigations**

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**HIV Testing**

HIV Test Recorded Recently

Final results:  Date: 21/Mar/2023

On HAART:  Regimen: **TDF/3TC/DTG**

**Urinalysis**

Urine Microscopy <input type="text"/>	Urine Leukocyte Esterase Test <input type="text" value="NEGATIVE (21-Mar-2023)"/>
Urinary Albumin <input type="text" value="mg/dL"/>	Urinary Ketone <input type="text" value="mg/dL NEGATIVE (21-Mar-2023)"/>
Glucose Measurement (Qualitative) <input type="text"/>	Urine Bile Salt Test <input type="text" value="mg/dL"/>
Urine pH <input type="text"/>	Urine Bile Pigment Test <input type="text"/>
Urine Specific Gravity <input type="text"/>	Urine Color <input type="text"/>
Urine Nitrite Test <input type="text"/>	Urine Turbidity <input type="text"/>
Urine Dipstick for Blood <input type="text"/>	

**Other tests**

Syphilis serology: <input type="text" value="NON-REACTIVE (21-Mar-2023)"/>	Has the client been treated for syphilis? <input type="radio"/> Yes <input type="radio"/> No
BS for MPS: <input type="text" value="NEGATIVE (21-Mar-2023)"/>	Haemoglobin: <input type="text"/>

Blood sugar testing for Diabetes:  No Diabetes  Has Diabetes  Not Done

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**Step 11 ANC VISIT Form Key features:**

A package of care is available for the high-risk clients.

Added variables;

- Deworming
- Intermittent presumptive treatment given during the visit.
- Female genital mutilation.
- Which postpartum family planning method was the client counselled on.
- Validated the next appointment date to be greater than the encounter date.

**Client monitoring**

Has the client undergone antenatal exercises?  Yes  No

TB Screening Results:

Has the client been screened for CaCx?

Hepatitis B Screening? :  Positive  Negative  Not Done

**ART and Prophylaxis**

Mother's prophylaxis given during this visit?  Cotrimoxazole  Dapsone  None

AZT for the baby dispensed?  Yes  No  N/A

NVP for the baby dispensed?  Yes  No  N/A

**Deworming Done?**  Yes  No

Intermittent Presumptive Treatment given during the visit?  Yes  No  Not Applicable

Intermittent Presumptive Treatment dose given?  First Dose  Second Dose  Third Dose  Fourth Dose  Fifth Dose  Sixth Dose  Seventh Dose  No

**Female Health related issues**

**Was FGM done?**  Yes  No

What were the FGM associated complications?  Scarring  Keloids  dyspareunia  UTI

Which Postpartum family planning method was the client counselled on?  IUD  Implants  BTL

**Other conditions**

Does the client have other illnesses?  Yes  No

**Client education**

Has the client received ANC counselling:  Yes  No

**Minimum Package of Care**

Has the client received the minimum package of Care:  Yes  No

- Identify a case manager (M2M/HCW)
- Pre appointment SMS
- Targeted home visits
- Psychosocial and disclosure support
- 3-monthly Enhanced ART adherence assessments optimize TLD
- Timely viral load monitoring, early ART switches
- Complex case reviews in MDT/Consultation with clinical mentors

- Enhanced longitudinal Mother-Infant Pair follow up
- Early HEI case identification
- Bi weekly random file audits to inform quality improvement
- Patient who default-LTFU root cause audit and return to care plan
- Screen and support - GBV, Disclosure and Stigma
- RH education and FP during breastfeeding period

**Referrals**

Referred from?

Referred to?

**Next Appointment**

Next appointment date:

**Clinical Notes**

**THE END**

