





Job Aid: Documenting Post Natal Follow up Form (PNC)

(Last Update -Jul 2023)

Tasks:	Complete MCH Postnatal visit encounter
Objective:	Comprehensive follow-up of mothers who have delivered
When:	At Point of Care
Who:	Users' working at MCH
Required Materials:	Username, password, computer with KenyaEMR installed

Steps	Actions	Screenshot
Step 1	From the patient Home page ensure the patient is checked-in	Image: Seguration Logged in as Fellock: VIRCINIA Fellock My Profile Log Out Image: Help Image: Hilliop, Maneno Patient Choice Num Der 9E94949 Image: Choice Num Der 9E94949 Image: Choice Num Der 9E94949 Image: Segurate 27 year(b): 00 How 10013 Image: Choice Num Der 9E94949 Image: Choice Num Der 9E94949
		Information Step 1. Check-in Provider Actions Next of lin contact: 07010123456 Image: Check in for visit Provider Actions Next of lin contact: 0700123456 Image: Check in for visit Provider Actions Next of lin name: Gate Hindu Image: Check in for visit Provider Actions Image: Check in feature Image: Check in for visit Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature Provider Actions Image: Check in feature Image: Check in feature
		Home Registration Logged in as Feltivic VVICINIA Feltix My Profile Log Out P Help Hilltop, Maneno Patient Clinic Number 9594949 Clinic Number 9594949 Clinic Number 9594949 content wild Obtpatient/Since 1983
		Information Telephone contact: 0711123456 Next of kin contact: 0700123456 Next of kin name: Gate Hindu Confirmation of a checked-in visit Available Visit Forms Confirmation of a checked-in visit Available Visit Forms Available Visit Forms Triage Triage
		Refationships FTS Screening Form
		MCH - Mother Services Referral and Linkage Form
Step 2	From the patient home page and navigate to the Clinician page by clicking the icon "Clinician" to reveal available forms	Home Fatient Clinic Number 9E94949 Female, 27 year(s) (04-Nov-1991)
		Registration Friage Clinician Chart Chart Reports
		Admin Developer

Step 3	Navigate to the available forms to access MCH Postnatal visit form	Home Clinician Hilltop, Maneno Crystals, 27 year(s) E4 See 1000	Logged Patient Clair: Number 9594949
	Double Click MCH Postnatal icon to access PNC form A check-in dialogue box pops' up with a start date and time	Information Information Previous contact: 0700123456 Main contact: 0700123456 <th>Wisht Summary Check out of visit MCH Care MCH Care Mr Y Status: Positive On Prophysicis: Not specified Available Visit Forms MCH Antennatal Visit Double Click MCH Postnatal form Mr Triage Medications Medications Eab Results Ti Screening Forgress Note MTS Screening Form HTS Screening Form MTS Initial Form HTS Screening Form MTS Initial Form HTS Screening Form</th>	Wisht Summary Check out of visit MCH Care MCH Care Mr Y Status: Positive On Prophysicis: Not specified Available Visit Forms MCH Antennatal Visit Double Click MCH Postnatal form Mr Triage Medications Medications Eab Results Ti Screening Forgress Note MTS Screening Form HTS Screening Form MTS Initial Form HTS Screening Form MTS Initial Form HTS Screening Form
Step 4	Visit Details Type in the <i>PNC register</i> <i>Number</i> on the it's field <i>PNC Visit Number</i> of PNC this is the frequency number of visit	Visit details PNC Register Number:	* indicates a required field PNC Visit Number:



Step 7	Post Natal Observations From the drop down menus select; General Condition, Pallor, Breast Examination, PPH, C/S Scar For Haemoglobin fill in the numerical value on the digit field	Seneral Condition: Breast:	Cood • Good Fair Poor Normal Cracked nipple Engorged hipple Mastitis	Pallor: PPH: Ha	No Yes No Not applicable Absent Present Absent emoglobin: Digit:
	if the client delivered through a vaginal delivery then the CS Scar field will be inactive. If the client delivered through CS then the episiotomy field will be inactive	Aother's observations Deneral Condition: ireast: :reast: :/S Scar: nvolution of Uterus: :ondition of Episiotomy: :ounselled on infant eeding?	▼ ▼ ▼ ▼	Pallor: PPH: Haemoglobin: Lochia: Counseling on Family Planning?	 ✓ ✓ ✓ ✓ ✓ ✓



Step 8	If HIV test for the patient was Not Done/Unknown during	HIV Testing											
	MCH enrollment then HIV	Kit Name	Lot	Number		Expiry	Date				HIV T	est 1 Res	ults: 🔍 🗸
	on the screenshot.	Determine			_	0	May		~ 20	20	~	0	Positive
	Conduct the test and complete	Final Results	Res	ults given to client?		H Su	Мо	Tu	We	Th	Fr	Sa	Invalid
	the HIV test form	Dual Kit		and green to entitle		Fi 2	27	28	29	30	1	2	
	Refer to the guide on filling	Provide State				-	4	5	6	7	8	9	
	the HIV Form and partner	Partner Testing				1	18	12	20	14	22	23	
	i.e. Antenatal and Delivery	Has the client's partner been tested for HIV?	V Partne	r HIV Status:		2	25	26	27	28	29	30	
	Form					3	1	2	3	4	5	6	
Step 9	ART and Prophylaxis								_				
Step 9	ART and Prophylaxis Select from the radio button if prophylaxis was given during	ART and Prophyla	ixis —										
Step 9	ART and Prophylaxis Select from the radio button if prophylaxis was given during the visit Select if AZT or NVP was dispensed to the Baby, N/A	ART and Prophyla	ixis during ti	nis visit?	Ú Co	trim	oxa	zole	. O	Da	ipso	one	© None
Step 9	ART and Prophylaxis Select from the radio button if prophylaxis was given during the visit Select if AZT or NVP was dispensed to the Baby, N/A applies if there is no baby	ART and Prophyla Prophylaxis given AZT for the baby	ixis n during th dispensed	his visit? 1?	⊙ ¢e	trim	oxa No	zole	•, ⊙ \/A	Da	ipsi	one	None
Step 9	ART and Prophylaxis Select from the radio button if prophylaxis was given during the visit Select if AZT or NVP was dispensed to the Baby, N/A applies if there is no baby	ART and Prophyla Prophylaxis given AZT for the baby NVP for the baby	ixis n during th dispensed dispensed	his visit? J? J?	© ¢es ⊙ ýes	trim s G	oxa No No	zole ©j	9, O 1/A 1/A	Da	ipsi	one	None
Step 9 Step	ART and Prophylaxis Select from the radio button if prophylaxis was given during the visit Select if AZT or NVP was dispensed to the Baby, N/A applies if there is no baby Client Monitoring	ART and Prophyla Prophylaxis given AZT for the baby NVP for the baby	ixis n during th dispensed dispensed	ils visit? 1? 1?	O Yes	trím	oxa No No	zole Oj	9, © N∕A N⁄A	Da	ipso	one	© None

the client has undergone postnatal

Drop down selection on the Maternal condition, Iron Supplementation and Fistula screening Select Cervical Cancer Screening findings.

Select *Modern Contraceptives* drop down option if YES, the various family method options are displayedselect from the respective checkbox. If NO, the family planning options disappear

If the finding is either; **Normal/Presumed/Confirmed,** then CaCX Screening method appears select the method used from the respective radio button

Maternal condition		Has the client been screene	d for CaCx ? " Normal
	Alive In good health Maternal Death Patient condition fair/satisfacto Patient condition poor	лу.	Normal Presumed Confirmed Not Done N/A
	Perineal Laceration Puerperal sepsis	CaCx screening method? * (Pap Smear OVIA OOthe
Cistula screenico	Yes No	On modern FP Method (less than or o If on modern FP Method specify whic	equals to 6 weeks)? Yes • th method(s) Yes No
istula screening.	Vesicovaginal Fistula Rectovaginal fistula	Emergency contraceptive pills Oral Contraceptives Pills Injectible	Diaphram/Cervical Cap Fertility Awareness Tubal Ligation
	Not done	Intrauterine Device Lactational Amenorhea Method	Vasectomy(Partner)
	Instable	 Intrauterine Device Lactational Amenorhea Method 	Vasectomy(Partner)

But if the finding is ether; Not Done or N/A then CaCX screening method disappears	Has	s the client been scree	ned for CaCx ?*	Not Done Normal Presumed Confirmed Not Done N/A
Select <i>Modern Contraceptives</i>				
drop down option if YES the various family method options are displayedselect from the	Referrals			
drop down option if YES the various family method options are displayedselect from the respective checkbox. If NO the family planning options	Referrals Referred from?	*	Referred to?	
drop down option if YES the various family method options are displayedselect from the respective checkbox. If NO the family planning options disappear Select from the drop down	Referrals Referred from?	▼ Another Health Facility Community Unit N/A	Referred to?	Another Health Facility Community Unit N/A

Step 11	Next Appointment date Select from the calendar menu starting with the Year/Month/Date	Next Appointment	
	Teary Monthy Dute	Next appointment date: *	
		Nov 2018 O Jan 2008 Sa Su Feb 2009 Sa 28 Mar 2010 3 4 Apr 2012 10 11 Jun 2013 17 18 Jul 2015 24 25 Aug 2015 1	
		Oct 2017 2018 Dec	
Step 12	Clinical Notes and submitting ANC follow- up form Write notes in the clinical notes field once done	Clinical Notes Notes Field	
	Click <i>Enter Form</i> button to submit form, There's a <i>Discard</i> <i>Changes</i> button to cancel and deter submissionif errors have been committed	Enter Form O Discard Changes	

Step 13	Confirmation of a completed Postnatal Visit form	Hose Clinician Hilltop, Maneno Prmair, 27 year(s) (54 Nov 1991)	Logged in as Felixic VIRCINIA Felixic My F Patient Clinic Number 9094949
		Information	Visit Summary
		Telephone contact: 0711123456 Next of kin contact: 0700123456	MCH Care
		Next of kin name. Gate Hindu	HIV Status: Positive On Prophylaxis: Not specified On HAART, Not specified
		All Latines Mail Latines	Available Visit Forms
		Allergies & Chronic Illnesses	Triage
		Allergens None Chronic Illnesses	Medications
		None	Lab Results
		Relationships	Completed Visit Forms
		🕂 Add Relationship 🤌 Family/Partner Tree	MCH Postnatal Visit (09 Nov-2018 19:33) by Felixik VIIICINIA Felixik Entered by Felixike VIIICINIA Felixik (adment to 11-Rev-2018 11-12
		MCH - Mother Services	

THE END