ALMANACH:
A new ALgorithm for the MANAge ment of CHildhood illnesses
For children aged 2 months up to 5 years

PeDiAtrick project 2009 - 2012
Schematic representation for e-POCT study (control arm)
MANAGEMENT OF VERY SEVERE DISEASES

CHECK FOR GENERAL DANGER SIGNS

Is the child:

- convulsing now?
  - Yes: Give: Anticonvulsant (Diazepam)
  - No

- having any General Danger sign?
  - Yes: The child needs URGENT REFERRAL TO HOSPITAL
    - Give PRE-REFERRAL TREATMENT:
      - First dose of IM ceftriaxone
      - IM artesunate
      - Low blood sugar prevention
  - No

Does the child have some Pallor?
  - Yes
  - No

Does the child have Fever?
  - Yes: Duration of fever?
    - Less than 7 days: Go to: Assessment of acute non-febrile illnesses
    - 7 days or more: Anemia
  - No

If you reach this sign, you should refer the child without completing the entire assessment. If nothing is specified you have to complete the entire assessment before prescribing appropriate treatment.
ASSESSMENT OF FEBRILE CHILDHOOD ILLNESSES

After this assessment if the child has fever with no identified cause, perform the following:

For children aged 2 months up to less than 2 years:
- Urine dipstick
  - Leucocytes OR Nitrites positive: Urinary tract infection (UTI)
  - Leucocytes AND Nitrites negative: No Urinary tract infection
  - If dysuria:
    - Typhoid rapid diagnostic test
      - Positive: Possible intestinal bacterial disease
      - Negative: Bacterial disease unlikely

For children aged 2 years up to 5 years:
- Typhoid rapid diagnostic test
  - Positive: Possible intestinal bacterial disease
  - Negative: Bacterial disease unlikely

FOR ALL CHILDREN WITH FEVER OR HISTORY OF FEVER: CONSIDER MALARIA

CONSIDER MALARIA: Perform a malaria RAPID DIAGNOSIS TEST (mRDT)
If mRDTs are not available, perform a blood-slide.

- Positive: Malaria (oral antimalarial treatment)
- Negative: No Malaria

If you answered NO to all the questions, the child has fever with no obvious cause, no danger sign, and the malaria test is negative. The child is likely to have a Viral infection. S/he does NOT need neither antibiotic nor antimalarial. Prescribe symptomatic treatment for fever. Reassure the caretaker and advise him/her to return immediately if the child is not able to drink or becomes sicker. Advise him/her to come back after 2 days if fever persists.