

SMC TRAINING ASSESSMENT FORM

NAME _____

DATE _____

INSTRUCTIONS

For each question put a cross in the box next to the correct answer. Only mark one box per question.

Q1 WHAT DOES SP STAND FOR?

- A1 Sulfadoxine piperazine Sulfadoxine pyrimethamine Sulfadoxine proguanil

Q2 WHAT DOES AQ STAND FOR?

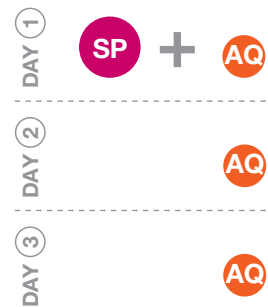
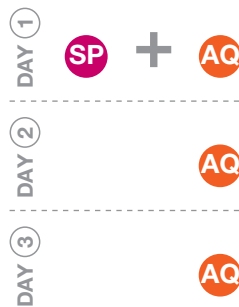
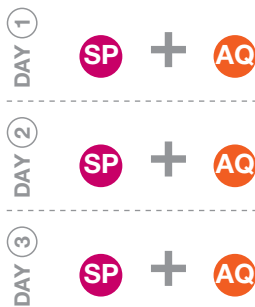
- A2 Artemisinin quinine Artesunate quinine Amodiaquine Atovaquone

Q3 WHAT AGE OF CHILD SHOULD BE GIVEN SMC?

- A3 Between 0 and 12 months Between 3 and 59 months Between 0 and 59 months Between 12 and 71 months

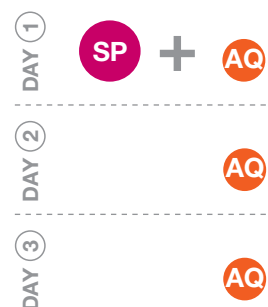
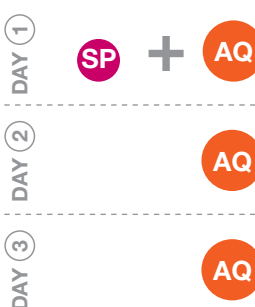
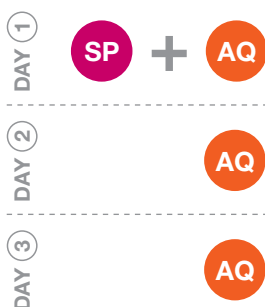
Q4 HOW MUCH DRUG IS GIVEN TO AN INFANT 3-11 MONTHS OLD?

- A4 250/12.5mg of SP and 75mg of AQ base given once daily for 3 days A single dose of 250/12.5mg tablet of SP on day 1 and 75mg of AQ base given once daily for 3 days A single dose of 500/12.5mg tablet of SP on day 1 and 75mg of AQ base given once daily for 3 days



Q5 HOW MUCH DRUG IS GIVEN TO AN INFANT 12- 59 MONTHS OLD?

- A5 A single dose of 500/25mg SP on day 1 and 153mg AQ base given once daily for 3 days A single dose of 250/12.5mg SP on day 1 and 153mg AQ base given once daily for 3 days A single dose of 500/25mg SP on day 1 and 75mg AQ base given once daily for 3 days



Q6 WHO SHOULD NOT BE GIVEN SMC?

- A6** A child with severe acute illness or unable to take oral medication
- An HIV-positive child receiving co-trimoxazole
- A child who has received a dose of either AQ or SP drug during the past month
- A child who is allergic to either drug (AQ or SP)
- A child less than 3 months old
- A child less than 5kg
- All of the above

Q7 WHICH ARE EXPECTED BENEFITS OF SMC?

- A7** Prevents most malaria cases, probably reduces severe anaemia and has very few serious adverse events
- Probably reduces severe anaemia and has some serious adverse events

Q8 WHEN SHOULD SMC BE GIVEN?

- A8** Monthly interval before the rainy season when malaria incidence is high
- Once during the rainy season when malaria incidence is high
- Monthly intervals during the rainy season when malaria incidence is high

Q9 WHAT HAPPENS IF A CHILD VOMITS?

- A9** If a child vomits, spits or regurgitates the medicines do not give a second dose
- If a child vomits, spits or regurgitates the medicines within 5 minutes, give a replacement dose after allowing the child to rest for about 10 minutes

Q10 IF A CHILD VOMITS A SECOND TIME SHOULD A REPLACEMENT DOSE BE GIVEN?

- A10** Yes
- No

Q11 IF A CHILD COMES TO CLINIC HAVING MISSED TREATMENT FROM THE PREVIOUS MONTH WHAT SHOULD YOU DO?

- A11** Treat the child if he is well
- Not treat the child with SMC at all
- Treat the child if he is present

Q12 WHAT ARE THE MOST IMPORTANT MESSAGES FOR A CHW TO GIVE THE CAREGIVER?

- A12** Give the child a tablet on Days 2 and 3
- Give the child a tablet depending on their age, on Days 2 and 3 and report all adverse events
- Give the child a tablet (correct dose depending on their age) on Days 2 and 3, come back in one month and report all adverse events.