COMMUNITY PATIENT REGISTER

VILLAGE: DISTRICT:

NAME OF ORT VOLUNTEER:

INITIAL STOCK	
ORS	
300	

DATE	TIME	PATIENT #	NAME	SEXE M	SEXE F	AGE < 5 (Year and month)	AGE > 5 (year)	ADRESS - Phone (when available)	TIME SINCE ONSET OF SYMPTOMS: TODAY (< 12H)	TIME SINCE ONSET OF SYMPTOMS: YESTERDAY (< - 24H)	TIME SINCE ONSET OF SYMPTOMS: BEFORE YESTERDAY (>24H)	DEHYDRATION (NO, MILD, SEVERE): NO	DEHYDRATION (NO, MILD, SEVERE): MILD	DEHYDRATION (NO, MILD, SEVERE): SEVERE	OUTCOME: HOME TREATMENT	OUTCOME: REFERRAL	OUTCOME: DEATH	ORS SACHETS USED / GIVEN	ORS Stocks	Observation
04 MAR. 2019	08:00	#01	Mohamed Abdou	M		1 year		Near the church, Block B	X	-	-	-	X	-	-	X	-	1	299	
04 MAR. 2019	09:00	#02	Asmaha Djimla		F		5 years	Near the bridge	X	-	-	X	-	-	X	-	-	3	296	
05 MAR. 2019	16:00	#03	Djibril Cisse	M		1 year and 3 months		Near the bridge (278 88 25)	-	-	X	-	-	X	-	X	-	1	295	
05 MAR. 2019	17:00	#04	Djoly Djumper		F		10 years	Near the school	X	-	-	X	-	-	-	X	-	1	294	Not able to drink ORS - vomiting
05 MAR. 2019	17:30	#05	Leila Hassane		F		82 years	Near Bus station	-	-	X	-	-	X	-	-	X	0	294	Died at home after suffering 3 days of diarrhea & vomiting (information from family member)
		5		**2**	**3**	**2**	**3**		**3**	**0**	**2**	**2**	**1**	**2**	**1**	**3**	**1**	**6**	**294**	