POST-NATAL REGISTER

Ministry of Health
Republic of Botswana

Prepared by PMTCT/SRH Unit
Ministry of Health
Private Bag 00451
Gaborone, Botswana
# Post-Natal Register

<table>
<thead>
<tr>
<th>No</th>
<th>Name</th>
<th>Date of Birth</th>
<th>New Born Baby</th>
<th>1st Physical Check</th>
<th>Infant Feeding</th>
<th>L.P.T</th>
<th>Counselling</th>
<th>Family Planning</th>
<th>Condition at 6-4 Months</th>
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- **Nationality**: 1 = Indian, 2 = Non-Indian
- **I.F. Test Result**: 0 = Positive, 1 = Negative
- **Infant Feeding**: 1 = Breast feeding, 2 = Mixed feeding, 3 = None
- **L.P.T**: 1 = Completed, 2 = Incomplete
- **Counselling**: 1 = Supposory counselling, 2 = Lactation counselling
- **Family Planning Method**: 1 = Contraceptive, 2 = Surgical
- **Condition at 6-4 Months**: 1 = Healthy, 2 = Stunted, 3 = Underweight

*If NO Response, please write "null"*