

Galitaanka Baadhis Caafimaad

(Staying Healthy Assessment)

9 – 11 Sano (9 – 11 Years)

Magaca ilmaha (kan koobaad iyo kan ugu danbeeya)	Taariikhda Dhalashada	<input type="checkbox"/> Dhidig <input type="checkbox"/> Lab	Taariikhda Maanta	Fasalka Iskuulka:
Qofka Foomka Buuxinaya	<input type="checkbox"/> Waalid <input type="checkbox"/> Qaraabo <input type="checkbox"/> Saaxiib <input type="checkbox"/> Masuul <input type="checkbox"/> Wax kale (Sheeg)			Xaadiritaanka Iskuulka Joogto? <input type="checkbox"/> Haa <input type="checkbox"/> Maya

Fadlan uga jawaab dhamaan su'aalaha foomkan ku qoran sida ugu fiican eed awooddo. Goobo gali "Kanoqo" haddii aadan aqoon jawaab ama aadan rabin inaad ka jawaabto. Xaqiiji inaad la hadasho dhakhtarka haddii aad qabto su'aal ku saabsna wax ku qoran foomkan. Jawaabahaaga waxaa loo ilaalin doonaa sida inay qayb ka yihiin qoraalka caafimaadkaaga.

Turjumaan ma u Baahantahay?
 Haa Maya

Clinic Use Only:

					Nutrition
1	Ilmahaagu ma cabbaa ama ma cunaa 3 cunto oo ay kalshiyaam ka buuxdo maalin kasta, sida caano, farmaajo, yogarti, caanaha soy, ama tafu? <i>Child drinks/eats 3 servings of calcium-rich foods daily?</i>	Haa <i>Yes</i>	Maya <i>No</i>	Ka noqo <i>Skip</i>	
2	Ilmahaagu ma cunaa furuudka iyo qudaarta ugu yaraan laba goor maalintii? <i>Child eats fruits and vegetables at least two times per day?</i>	Haa <i>Yes</i>	Maya <i>No</i>	Ka noqo <i>Skip</i>	
3	Ilmahaagu ma cunaa cuntada ay duxdu ku badantahay sida cuntada la dubay, jibista, jalaataa, biisaha inkabadan hal mar asbuucii? <i>Child eats high fat foods more than once per week?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
4	Ilmahaagu ma cabbaa wax kabadan hal koob oo juus ah (8 oz.) maaliinkii? <i>Child drinks more than one cup of juice per day?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
5	Ilmahaagu ma cabbaa soodho, cabitaanada juuska, cabitaanada ciyaartoyda/tabarta, ama cabitaanada kale ee la macaaneeyay in kabadan hal mar asbuucii? <i>Child drinks soda, juice/sports/energy drinks, or other sweetened drinks more than once per week?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
					Physical Activity
6	Ilmashaagu ma sameeyaa jimicsi ama ma ciyaaraa ciyaraaha inta badan maalamaha asbuuca? <i>Child exercises or plays sports most days of the week?</i>	Haa <i>Yes</i>	Maya <i>No</i>	Ka noqo <i>Skip</i>	
7	Ma ka walwalsantahay culayska ilmaahaga? <i>Concerned about child's weight?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
8	Ilmahaagu ma daawadaa TVga ama ma ciyaaraa gaymamka fiidyowga wax ka yar 2 saac maalin kasta? <i>Child watches TV or plays video games less than 2 hours per day?</i>	Haa <i>Yes</i>	Maya <i>No</i>	Ka noqo <i>Skip</i>	
					Safety
9	Gurigaagu ma leeyahay qiiq dareeme shaqaynaya? <i>Home has a working smoke detector?</i>	Haa <i>Yes</i>	Maya <i>No</i>	Ka noqo <i>Skip</i>	
10	Gurigaagu ma haystaa lambarka telefoonka ee Xarunta Koontaroolidda Sunta (800-222-1222) oo uu soo qoroyo telfoonkaagu? <i>Home has phone # of the Poison Control Center posted by phone?</i>	Haa <i>Yes</i>	Maya <i>No</i>	Ka noqo <i>Skip</i>	
11	Ilmahaagu markasta ma isticmaalaa suunka kurisga marka uu fadhiyo kursiga danbe (ama suunka caruurta hadduu ka yaryahay 4'9")? <i>Child always uses a seat belt in the back seat (or booster seat) if under 4'9"?</i>	Haa <i>Yes</i>	Maya <i>No</i>	Ka noqo <i>Skip</i>	

12	Ilmahaagu wakhti ma ku lumiyaa meelaha u dhow barkadda lagu dabaasho, wabiga, ama harada? <i>Child spends time near a swimming pool, river, or lake?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
13	Ilmahaagu wakhti ma ku lumiyaa guri uu yaallo gori? <i>Child spends time in home where a gun is kept?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
14	Ilmahaagu wakhti ma la qaataa qof iska wata qori, toori, ama hub kale? <i>Child spends time with anyone who carries a gun, knife, or other weapon?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
15	Ilmahaagu markasta ma wuu xidhaa hamlet marka uu mootada wadayo, uu wadayo afar lugoodka ama mootada iskuutarka loo yaqaanno? <i>Child always wears a helmet when riding a bike, skateboard, or scooter?</i>	Haa <i>Yes</i>	Maya <i>No</i>	Ka noqo <i>Skip</i>	
16	Ilmahaagu waligii ma usoo joogay ama isaguba ma noqday dhibane waxyeello ama qalalaase? <i>Has child ever witnessed or been a victim of abuse or violence?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
17	Ilmahaaga waligii wax ma lagu dhuftay ama isagu cid wax ma ku dhuftay sanadkii lasoo dhaafay? <i>Has child been hit or has he/she hit someone in the past year?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
18	Ilmahaaga waligii ma la hagar daameeyay, iskuulka ma ku dareemay amni darro ama dariskaaga (ama ma la hagar daameeyay)? <i>Has child ever been bullied, felt unsafe at school/neighborhood (or been cyber-bullied)?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
19	Ilmahaagu ma cadayaa ilkihiisa/ilkaheeda maalin kasta? <i>Child brushes and flosses teeth daily?</i>	Haa <i>Yes</i>	Maya <i>No</i>	Ka noqo <i>Skip</i>	Dental Health
20	Ilmahaagu inta badan ma wuxuu u muuqdaa mid murugaysan? <i>Child often seems sad or depressed?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	Mental Health
21	Ilmahaagu wakhti ma la qaataa qof sigaarka cabba? <i>Child spends time with anyone who smokes?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	Alcohol, Tobacco, Drug Use
22	Ilmahaagu waligii sigaar ma cabbay ama tubaako ma ruugay? <i>Has child ever smoked cigarettes or chewed tobacco?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
23	Ma ka walwalsantahay in laga yaabo in ilmahaagu tubaako isticmaaloo ama waxyaalaha maandooriyaha ah, sida koolada, lagu doorsoomo? <i>Concerned that child may be using drugs or sniffing substances to get high?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	
24	Ma ka walwalsantahay in laga yaabo in ilmahaagu khamro cabbo, sida biirta, waynta, wayn kuulariska, ama likwarta ? <i>Concerned that child may be drinking alcohol?</i>	Maya <i>No</i>	Haa <i>Yes</i>	Ka noqo <i>Skip</i>	

25	Ilmahaagu ma leeyahay saaxiibbo ama xubno qoys kuwaas oo ay dhibaato ka haysato darooggo ama khamro ? <i>Child has friends/family members who have problems with drugs or alcohol?</i>	Maya No	Haa Yes	Ka noqo Skip	Sexual Issues
26	Ilmahaagu ma bilaabay shukaansiga “la sheekaysashada” wiil ama gabar? <i>Child started dating or “going out” with boyfriends or girlfriends?</i>	Maya No	Haa Yes	Ka noqo Skip	
27	Ma u malaynaysaa in laga yaabo in ilmahaagu uu galmo ahaan firfircoonyahay? <i>Thinks child might be sexually active?</i>	Maya No	Haa Yes	Ka noqo Skip	
28	Wax su’aalo ah oo kale ama walwal ah ma ka qabtaa habdhaqanka caafimaad ee ilmahaaga? <i>Questions or concerns about child’s health or behavior?</i>	Maya No	Haa Yes	Ka noqo Skip	Other Questions

Haddii ay haa tahay, fadlan qeex:

<i>Clinic Use Only</i>	Counseled	Referred	Anticipatory Guidance	Follow-up Ordered	Comments:
<input type="checkbox"/> Nutrition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Physical Activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Dental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Mental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Alcohol, Tobacco, Drug Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Sexual Issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PCP’s Signature: _____ Print Name: _____ Date: _____					<input type="checkbox"/> Patient Declined the SHA
SHA ANNUAL REVIEW					
PCP’s Signature: _____ Print Name: _____ Date: _____					
PCP’s Signature: _____ Print Name: _____ Date: _____					