

School Level Health Data Entry Form

1. Financial Year: _____

2.

School Details				
2.1	School Code		2.6	School Name
2.2	School Type(Govt/ LB/ GA/ EGS-AIE Centers/ NCLP/ Madarasas-Maqtab)		2.7	Category (Primary/ Upper Primary)
2.3	State		2.8	District
2.4	Area (Urban/Rural)		2.9	Block/ Taluka/ Mandal
2.5	Village/ Ward			

3.

Number of children whose anthropometric measurements (height and weight) have been done			
Boys		Girls	

4.

Number of Children stunted (height <-2-SD for age)		
	Primary	Upper Primary
Boys		
Girls		

5.

Number of Children wasted (BMI <-2-SD for age)		
	Primary	Upper Primary
Boys		
Girls		

6.

Number of over Nourished Children (BMI >+2SD for age)		
	Primary	Upper Primary
Boys		
Girls		

7. Anemia HB Level (>12gms -normal, between 10 -11.9 mild, 8.00-9.9 moderate, < 8 gms Severe)

Anemia HB Level (Optional)		
	Primary	Upper Primary
Number of Children having HB Level < 8gms		

8.

Number of children whose anthropometric measurements (height and weight) have been done			
		Primary	Upper Primary
8.1	Number of Children diagnosed with refractive errors		
8.2	Number of Children provided spectacles		

9.

Number of Children with Health Problems detected during School Health Checkup			
		Primary	Upper Primary
9.1	Number of Children Problems treated during School Health Checkup		
9.2	Number of Children Problems detected during School Health Checkup and were referred		

10.

Number of Children wasted (BMI <-2-SD for age)			
		Primary	Upper Primary
10.1	Number of Children received weekly Iron and Folic acid tablets in the last 3 months		
10.2	Number of children received deworming tablets		

MDM Teacher
Master
Name:
Signature

MDM Principal/Head
Name:
Signature

