

## Orodha ya ukaguzi wa kiuavijasumu

Tusaidie ili tuweze kuhakikisha viuvijasumu vinaendelea kufanya kazi.

Tafadhali weka alama ya tiki.

Je, viuvijasumu hivi ni vyako? ndio  hapana

Ikiwa si zako, tafadhali jaza sehemu iliyosalia kwa fomu hii kwa niaba ya mwenye ametajwa kwenye maagizo ya dawa.

Je, kuna madawa zingine unameza? ndio  hapana  Sijui

Je, umetumia viuvijasumu sawa katika miezi tatu zilizopita? ndio  hapana  Sijui

Je, una mzio wa viuvijasumu vyovyote? ndio  hapana  Sijui

Kama jibu lako ni ndio, tafadhali tupe taarifa ifuatayo kuhusu mzio uliyonayo.

Jina la  
kiuavijasumu

Aina  
ya mzio

Je, una moja ya maambukizi haya ya kawaida? Weka alama ya tiki ikiwa jibu lako ni ndio

Kifua  Koo  Sikio  Mkojo  Jino  Ngozi

Au kitu nyingine

Tafadhali tueleze hapa.

Je, hii inakueleza? Weka alama ya tiki ikiwa jibu lako ni ndio.

Tatizo ya kazi ya figo  Tatizo ya kazi ya ini  Kunyonyesha  Mjamzito  zaidi ya 65

Je, umepata chanjo ya mafua mwaka huu? ndio  hapana  Sijui

Muuguzaji dawa wako anaweza kukueleza kuhusu mambo ambayo unaweza kufanya ili kupata nafuu na pia kukupa kipeperushi iliyo na maelezo ya ziada.

Tafadhali mueleze muuguzaji dawa wako ikiwa unahitaji taarifa hii kwa lugha nyingine.

Tafadhali endelea upande wa pili →

To access the TARGET Antibiotics patient leaflets, scan the QR code or visit:

[www.RCGP.org.uk/TARGET-patient-leaflets](http://www.RCGP.org.uk/TARGET-patient-leaflets)



I have given the following patient information leaflet:

- UTI  UTI for older adults  dental  
 RTI  RTI pictorial  other  
 managing common infections (self-care)

Administering the flu vaccine. Please tick as appropriate.

- I have discussed flu vaccine eligibility with the patient  
 I have given the flu vaccine on site

The Antibiotic Checklist has not been fully completed because:

- the patient's representative did not know the information  
 the antibiotics are supplied by delivery service. Consider including a patient information leaflet with the prescription.  
 the antibiotics are already dispensed  
 the patient declined  
 other reason. Please write the reason in the space below.



