

NIEPMD

Client Management System – Software

NIEPMD Client Manager x

localhost/niepmnew/edit_ind_client.php?id=2974

Admin Home Add Client Edit Client Delete Client Reports Filter Search

National Institute for Empowerment of Persons with Multiple Disabilities Client Management System

Home 1 Home 2 Logged as NIEPMD Logout

Information

Total Number of clients	2974
Income slab 1	1827
Income slab 2	130
Income slab 3	994

Add client details

Identification Data Demographic Data Case History Social Work Assessment

Please enter the client basic information

Name * Rohith Chidambaram

DOB * 06.06.2011

Age * 6 yrs 8mon

Gender * Male

Reg. Date * 07 / 07 / 18

Reg. No. * 45/18

Ref by

Aadhar No

EN 11:43 13/04/2018

Reg. No. *

Ref by

Aadhar No

Income Slab I II III

Caste SC ST BC MBC OBC FC OC GEN OTHER

Category

<input type="checkbox"/> ADD	<input type="checkbox"/> HI	<input type="checkbox"/> Muscular Dystrophy
<input type="checkbox"/> ADHD	<input type="checkbox"/> LD	<input type="checkbox"/> MILD MR
<input type="checkbox"/> ASD	<input type="checkbox"/> Learning Disability	<input type="checkbox"/> OH
<input type="checkbox"/> Average	<input type="checkbox"/> Leprosy Cured	<input type="checkbox"/> Others
<input type="checkbox"/> Boarder Line	<input type="checkbox"/> LV	<input type="checkbox"/> PDD
<input type="checkbox"/> CP	<input type="checkbox"/> Medical	<input type="checkbox"/> SDD
<input type="checkbox"/> DD	<input type="checkbox"/> MI	<input type="checkbox"/> Slow Learner
<input type="checkbox"/> Down Syndrome	<input type="checkbox"/> MR	<input type="checkbox"/> Speech Impairment
<input type="checkbox"/> VI	<input type="checkbox"/> MS	<input type="checkbox"/> Superior Intelligent

Submit

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Please enter the client basic information

Father/Spouse/Guardian Name
 Mother
 Age of the Father/Spouse/Guardian
 Age of the Mother
 Father's/Spouse/Guardian Education
 Mother's Education
 Father/Spouse/Guardian Occupation
 Mother Occupation
 Mailing Address

District	Chennai
State	Taminadu
Pin	600095
Mobile Number	9176677451
Phone No	
Email - ID	
Religion	Hindu
Language of Communication	Tamil
Monthly Income	30,000/-
Locality	Chennai
Presenting complaints	Hyperactivity, Behavior Issues Adament for car toy and jauk food

Submit



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- Identification Data
- Demographic Data
- Case History
- Social Work Assessment

Antenatal

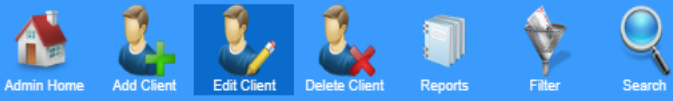
- Antenatal Checkup Yes No
- Illness Yes No
- Bleeding Yes No
- Hypertension Yes No
- Irradiation Yes No
- Medications Yes No
- Diabetes Yes No
- Trauma Yes No
- Abortion Yes No

Blood group of father

Blood group of mother

Any other significant complications being reported





Intranatal

Labour: Normal

Delivery: Hospital

Type of Delivery: Normal

Birth cry: Normal

Birth Weight: 3.25Kgs

Activity of the baby: Yes

Congenital anomalies (if any): Nil

Postnatal

NICU: Yes No

Convulsions: Yes No



Postnatal

NICU Yes No

Convulsions Yes No

Jaundice Yes No

Infection Yes No

Trauma Yes No

Physical deformity Yes No

Seosory Impairment

Immunization History BCG Polio DPT Measles MMR Pentavalent vaccine

Previous Consultation or treatment Undertaken

At the age of 4 years when they joined in Normal School, teachers identified hyperactivity and adviced special school and then took assessment at apollo and Joined special school

[Submit](#)

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[Social Work Assessment](#)

FAMILY HISTORY

Type of family

Status of family

No. of persons in the family

Consanguinity Yes No

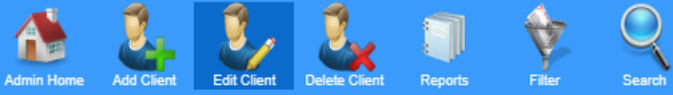
Home Environment

Accommodation

No. of Rooms

Ownership

Attitude of the neighbours



No. of persons in the family

Consanguinity Yes No

Home Environment

Accommodation

No. of Rooms

Ownership

Attitude of the neighbours

Family dynamics, ways of coping & problem solving capacities

Health of the Family members

Socio - Economics status





Home 1

Home 2

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DEVELOPMENTAL HISTORY

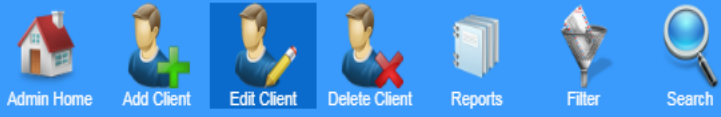
Milestones	Normal Age range	Age at which attained
Smiles at Others	(1 - 4)	3 months
Head Control	(2 - 4)	5 months
Sitting	(5 - 10)	8 months
Walking	(9 - 14)	1 1/2 years
First Words	(7 - 12)	1 1/2 years
Two word phrases	(16 - 30)	4 years
Toilet control	(3 - 4 years)	5 years

Does the client has any seizure Yes No

If yes, then whether on medications Yes No

REASON FOR THE CONDITION OF THE CLIENT AS PERCEIVED BY THE INFORMANT

Do not know



SCHOOL HISTORY

School	Attending
If attending	Special
Name of the School	Humming Birds
Present class	
Problems in School	Nil
Scholastic Backwardness	Nil
History of Aids and appliances used (If any)	Nil

Submit





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Dashboard

Welcome to NIEPMD Client Management System

Some of the features may activated from the next update