



IDHealth

AN INITIATIVE BY
HAPPEE HEARTS
MOVEMENT

Visual Supports for Communication

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Hello I am...



Angie



Pei Ing



Grace



Nad



Hello I am...



Justin



Ilham



Soo Wen



Norman



Caleb



Hello I am...



Joy



Euan



Chris



Dr See



Dr Chen



Hello I am...



Deborah



Sadhana

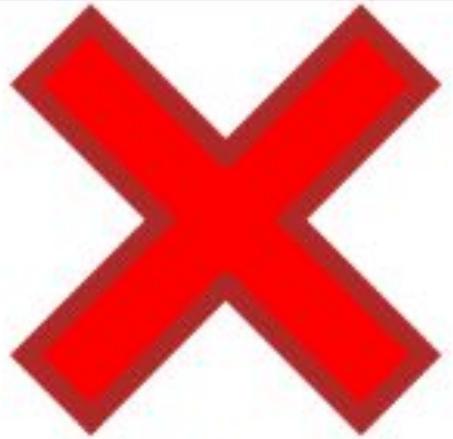


Amanda

Is your name?...



yes



no

Boy or Girl?



Boy



Girl



Where are you?



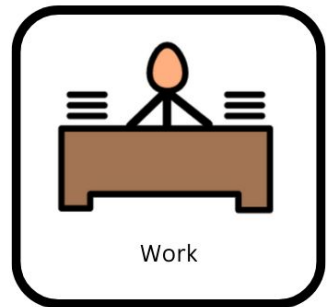
Home



Hospital



Hawker Center



Work



ID Health clinic



Outside



Coffee Shop



KFC



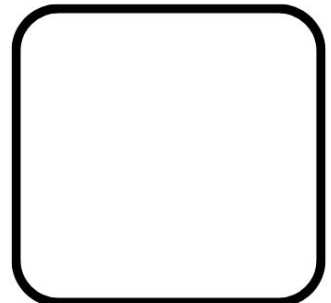
DAC



Shopping centre



McDonalds





How did you come here?



Walk



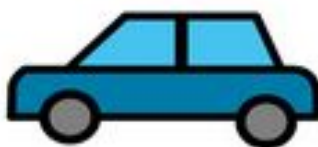
Bus



Taxi



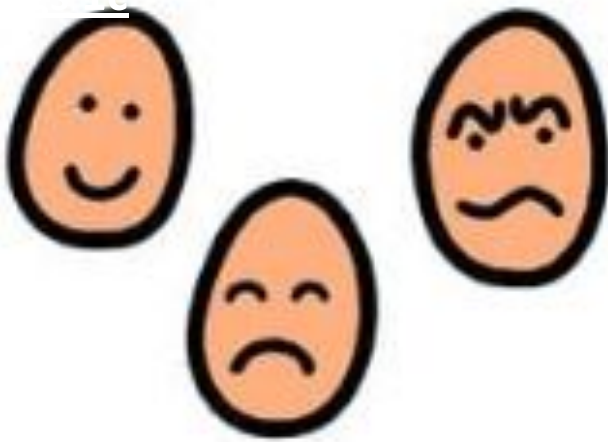
Bicycle



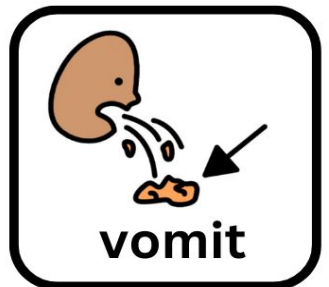
Car

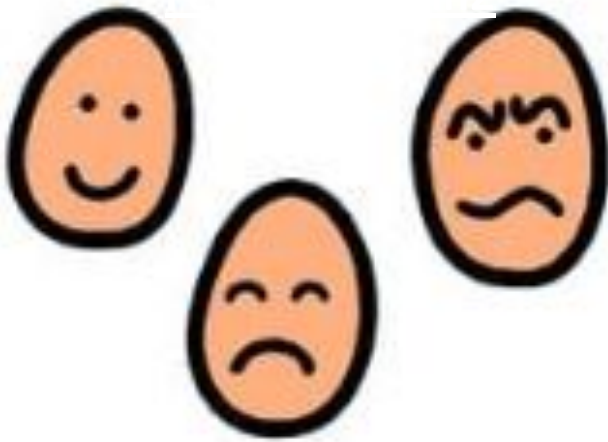


Train



How are you feeling?



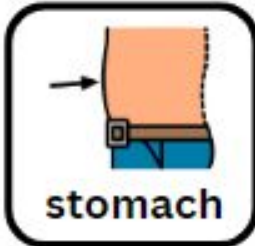
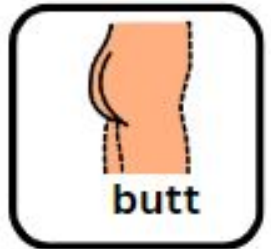
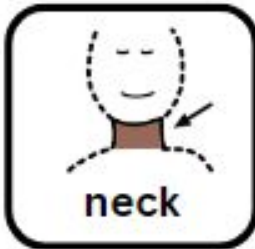


How are you feeling?





Where is the pain?





When do you feel the pain?

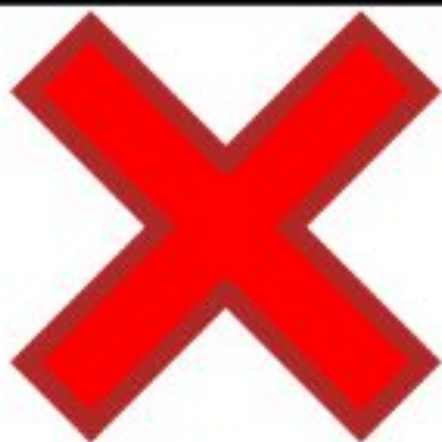




Did you **pass motion?**



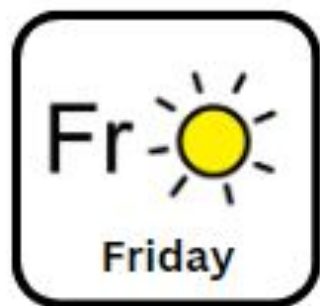
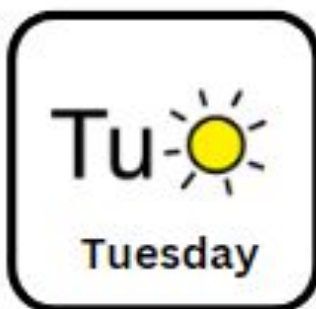
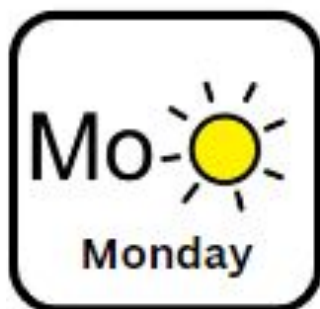
yes



no



When did you pass motion?









What is your stool/motion
/poop/pangsai like?

1	
2	
3	
4	
5	
6	
7	






What colour is your stool/motion
/poop/pangsai ?

Brown	
Green	
Yellow	
Red	
Grey/ White	
Black	



How much stool/motion
/poop/pangsai?

0	
a little	
a lot	



Did you urine?



yes



no



What is your urine like?



Urine



Blood



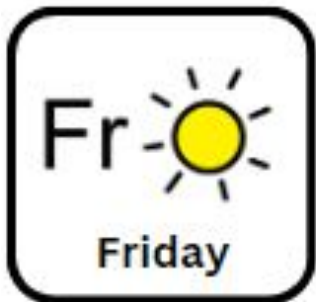
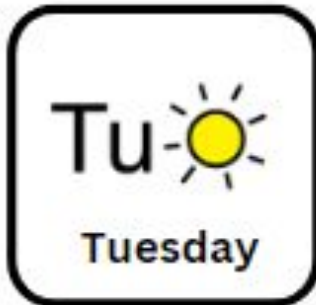
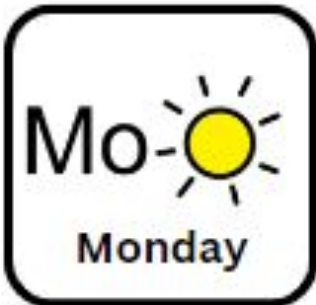
Pain



Good/Ok



When did you pass urine?





Did you sleep?



yes



no



Did you **sleep**?



Good



Bad



Did you take **medication**?



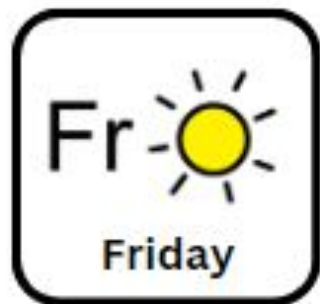
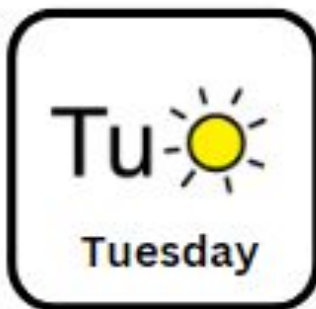
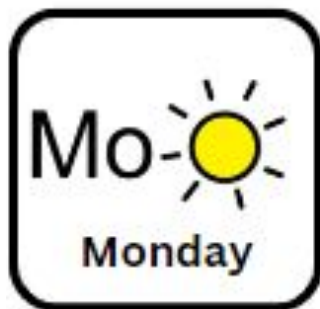
yes



no



When do you take your medication?





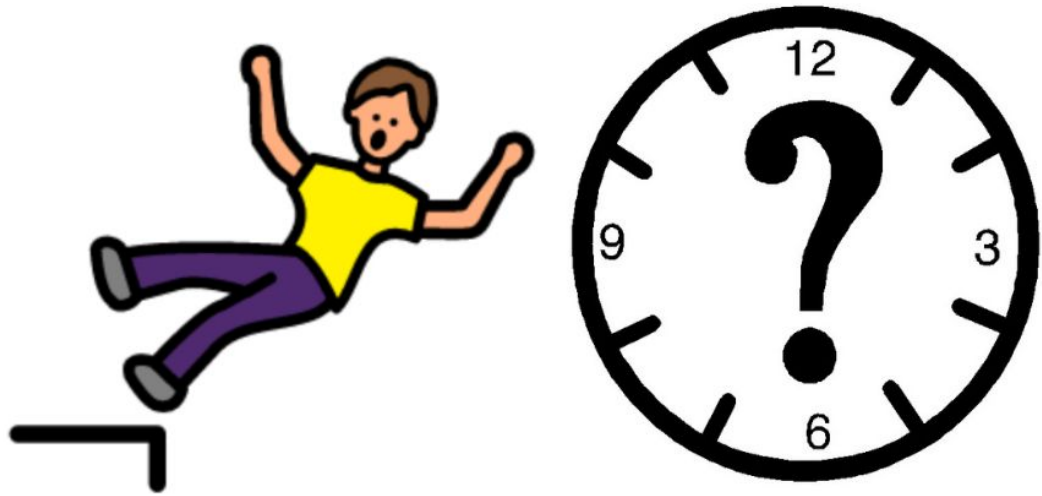
Did you fall?



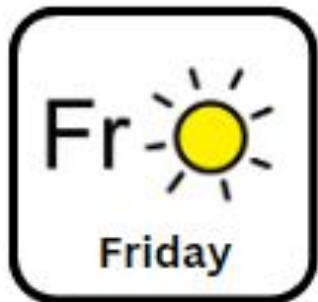
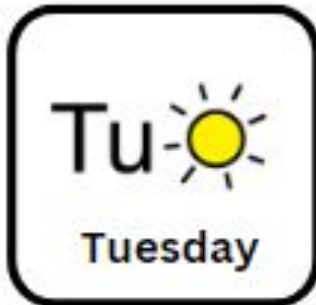
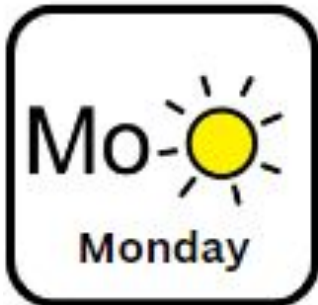
yes



no



When did you fall?





Where did you **fall**?



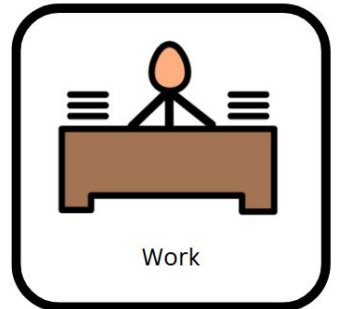
Home



Hospital



Stairs



Work



ID Health clinic



Outside



Kitchen



Road/Pavement



Center/School



Shopping centre



Toilet



Bedroom



Did you eat?



yes



no



What do you eat?



Brown rice



Rice



Wholemeal Bread



Bread



Soba



Noodles



Prata



Chapati



Sushi



Potato



Bao



What do you eat?



Ice-cream



Muffin



Chips



Cracker



Cake



Kueh



Chendol



Ice Kacang



Chocolate



Oreo



Chocolate biscuit



Soy bean curd



What do you eat?



Mee Goreng



Fried bee hoon



Porridge



Bak kuh teh



Burger



Char Kway Tiao



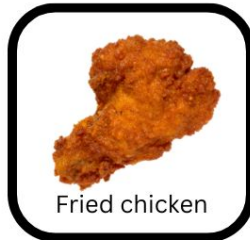
Fishball noodles



Chicken rice



Fish soup



Fried chicken



Mee siam



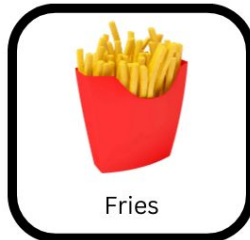
Laksa



Nasi lemak



Curry



Fries



Mee rebus



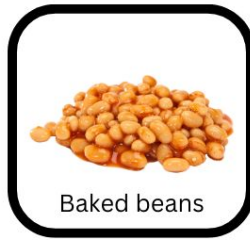
Mee soto



Carrot cake



Soup



Baked beans



What do you eat?



Fish



Fried fish



Tofu



Fried Egg



Chicken



Braised duck



Egg



Steamed egg



Beef



Roast pork



Prawn



Sausage



Char siew



Tempura prawn



What do you eat?



Leafy vegetable



Long bean



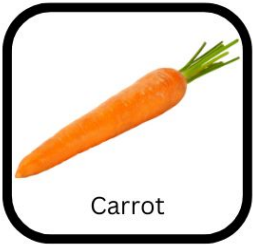
Rockmelon



Mango



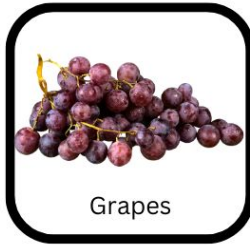
Pear



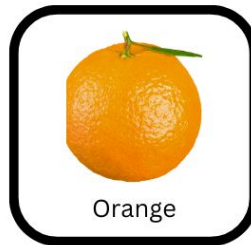
Carrot



Okra



Grapes



Orange



Honeydew



Cucumber



Cauliflower



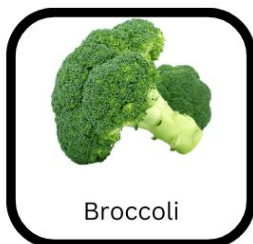
Brinjal



Apple



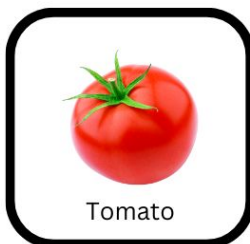
Durian



Broccoli



Cabbage



Tomato



Banana



Papaya



How much do you eat?



a lot



little



Where do you eat?



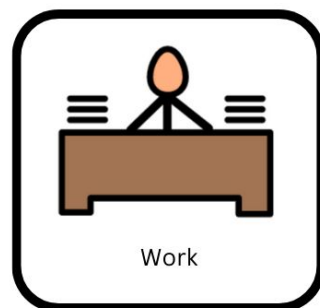
Home



Hospital



Hawker Center



Work



ID Health clinic



Outside



Coffee Shop



KFC



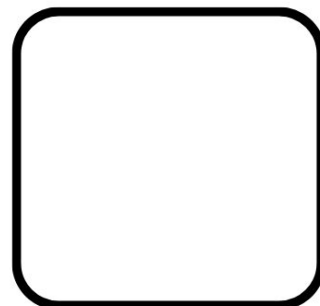
DAC



Shopping centre



McDonalds





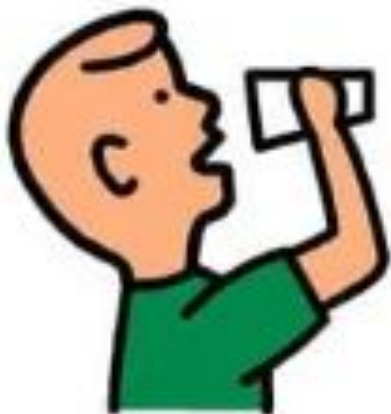
Did you drink?



yes



no



What do you drink?



Water



Milk



Fruit juice



Grass Jelly



Tea



Coffee



Coke



Soya milk



Milo



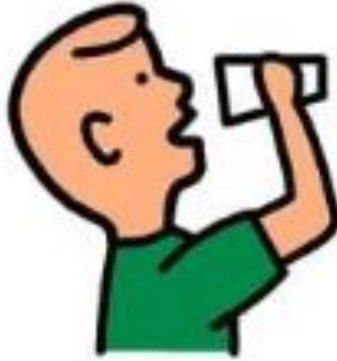
Sugar



Ice lemon tea



Green tea



What do you like to drink?



Water



Milk



Fruit juice



Grass Jelly



Tea



Coffee



Coke



Soya milk



Milo



Sugar



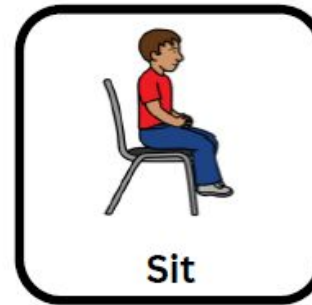
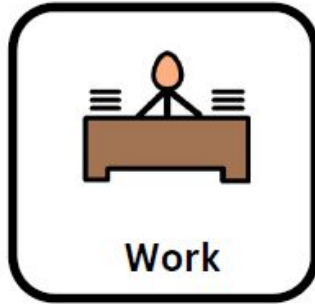
Ice lemon tea



Green tea

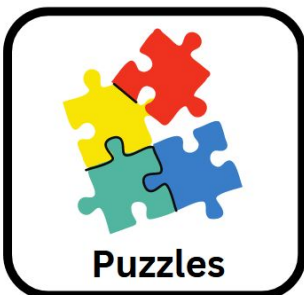
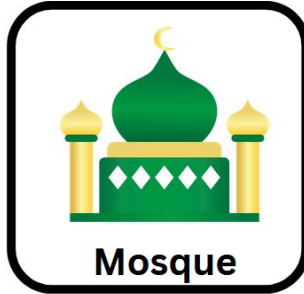
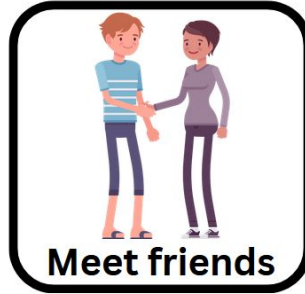


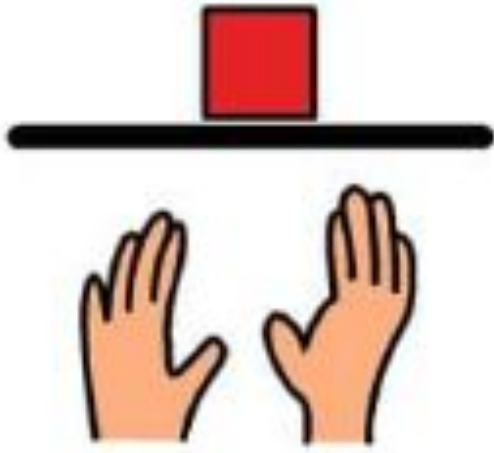
What do you like to do?



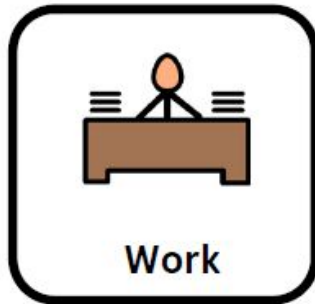


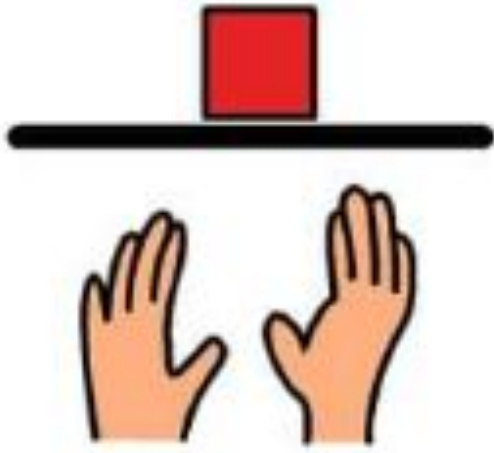
What do you **like** to do?



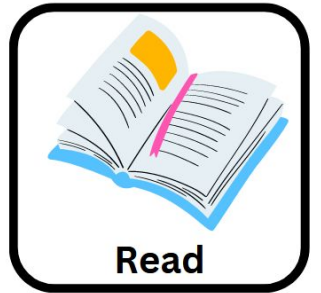
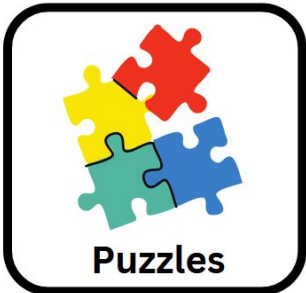
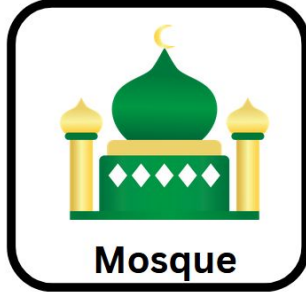
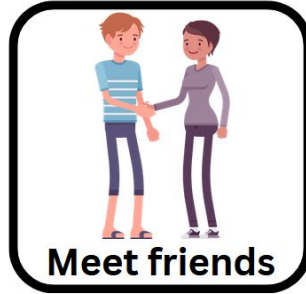


What do you want to do?





What do you want to do?





What do you do at home?



Walk



Exercise



Laundry



Eat



Work



Clean House



Shower



Cook



Watch TV



Tablet/ iPad



Sit



Rest



Did you exercise?



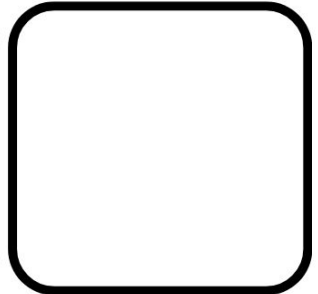
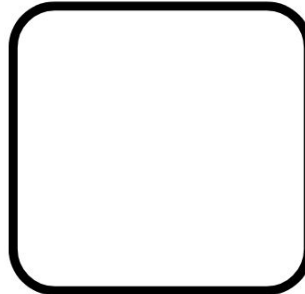
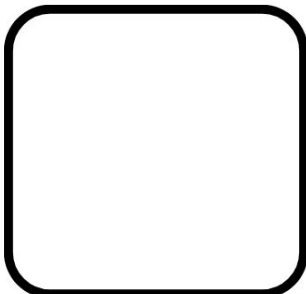
yes



no

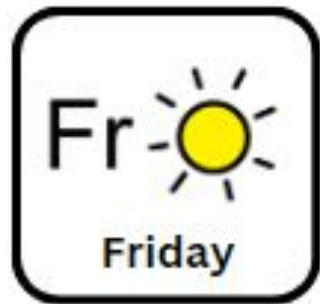
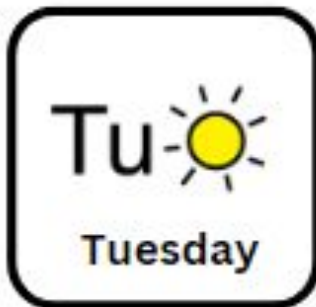
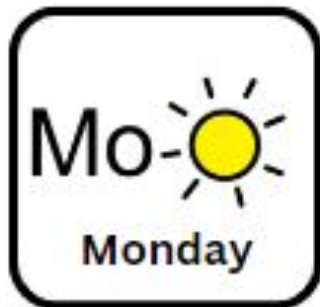


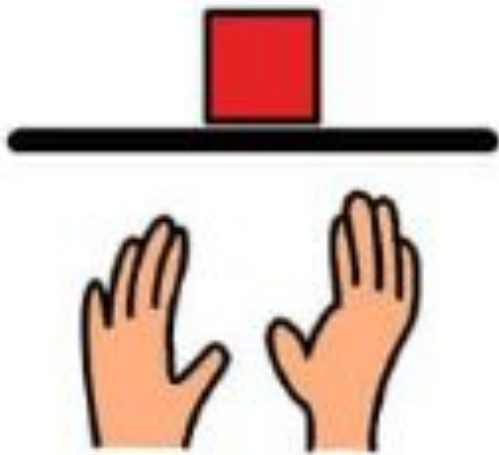
What exercise?



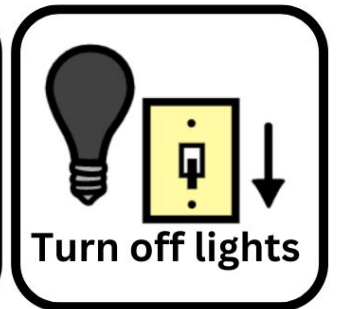
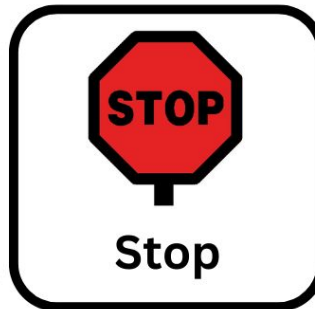
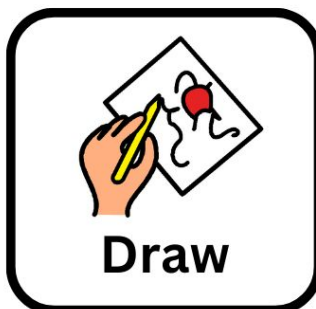


When did you exercise?





What do you want?





Who?



Family



Mother



Father



Brother



Sister



Grandmother



Grandfather



Friends

