



DHIS Training Manual for Participants (Revised Edition)



Ministry of National Health Services,
Regulations & Coordination
March 2022

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Acknowledgment

The Participant's Manual of DHIS was developed during 2006 by JICA study team with collaboration of Ministry of Health and Provincial Health Departments of all the four provinces of the country.

The Manual was revised by Health Information System (HIS) team of Ministry of National Health Services, Regulations & Coordination with the Technical Support of development partners in March 2022.

Training Schedule

Three Days Training Workshop

TRAINING OF FACILITY STAFF on DHIS**Day-1**

Time	Session	Responsible
9.00 AM	Session - 01: Welcome & Introduction	
9.30 AM	-Registration	
9.35 AM	-Recitation of Holly Quran	
9.45 AM	-Introduction of participants	
9.50 AM	-Welcome note	
10.00 AM	-Objectives of workshop	
10.15 AM	Session- 02: Overview of DHIS -History of Health Information System in Pakistan. ---- --About Routine Health Information System (RHIS). -DHIS mission and objectives -Patient flow and DHIS instruments -DHIS SOPs for HF, District & Provincial level. --Processing, analysis and decision making	
11.00	TEA BREAK	
11.30 AM	Session-3: OPD Data -CRP Register -OPD Ticket and Medicine Slip -OPD Register -OPD Abstract Form	
1.15 PM	Prayer & Lunch Break	
2.00 PM	Session-4: Hospital Indoor Data -Indoor Register -Indoor Abstract Form -Daily Bed Statement Register	
4.00 PM	Day Close	
Day-2		
9.00 AM	Re-cap of previous day	
9.15 AM	Session-5: Stock Data -Stock Register (Medicines/Supplies) -Stock Register (Equipment/Furniture/Linen) -Daily Medicine Expense Register	
11-00 AM	Tea Break	

11-30 AM	Session-6: Date collection for Catchment Population and Community Meetings -Catchment Area Population Chart -Community Meeting Register -Health Facility Staff Meeting Register	
1.00 PM	Prayer & Lunch Break	
2.00 PM	Session-7: Maternal Health Data -Maternal Health Register -ANC Card	
3.30 PM	Session-8: Family Planning Data -FP Register & Card	
04.00	Day Close	
DAY-03		
09.00	Re-cap of previous day	
09.15 PM	Session-9: Obstetric Register -Obstetric Register	
10.30 AM	Session-10: Hospital-Other Data -Laboratory Register -Radiology Register O.T Register	
10.30	Tea Break	
10.45 AM	Session-11: Monthly Reports -PHC-Report form. -Secondary Report Form	
01.00	Pray & Lunch Break	
02.00 PM	Session-12: Ensuring Data Quality -Lot Quality Assurance Sampling (LQAS)	
02.30 PM	Closing Session	
03.00 PM	Day Close	

Overview of Training DHIS for Facility Staff

Participants' manual is organized to train health staff for understanding the benefits of the DHIS instruments and filling them. For each session objective, training method, and exercises are attached.

Purpose

- Provide learning activities to health staff to practice DHIS Trainer's training manual

Objectives of the training

By the end of the training, the trainee will be able to:

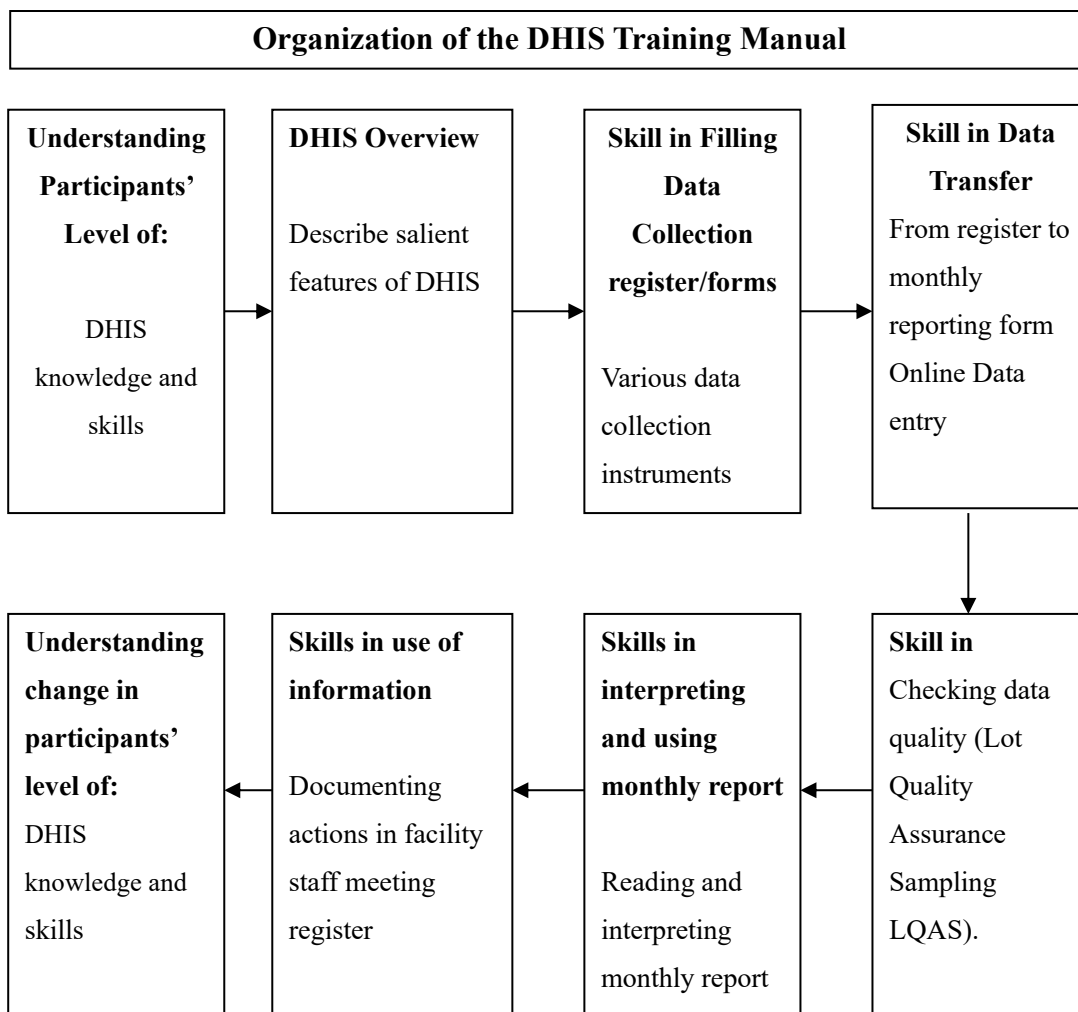
- Describe the objectives of DHIS and its added value
- Explain DHIS management structure and functions
- Fill DHIS instruments, forms and tools
- Explain data quality assurance techniques
- Feel motivated to implement learned knowledge and skills related to DHIS activities

Methodology

The training will be based on adult learning principles and techniques, building on existing experiences, emphasizing dialogue, relevance of information, immediate results, respect, recognition and appreciation, and using feeling, thinking and actions for learning. It will include discussion, questions and answers, individual and group activities, role plays etc.

Materials

The materials include Computer, Multimedia, Screen, Power point Presentation, exercise handouts, flip charts and markers



Session 1: Welcome and Introduction**Objectives**

By the end of the session, participants will be able to:

- Introduce themselves to one another
- Review the goals and objectives of the Training
- Compare their expectations with the workshop objectives

Time : 15minutes

Material : flip charts, markers

Method : Discussion, Dialogue

Session 2: Overview of DHIS**Objectives**

By the end of the session, participants will be able to

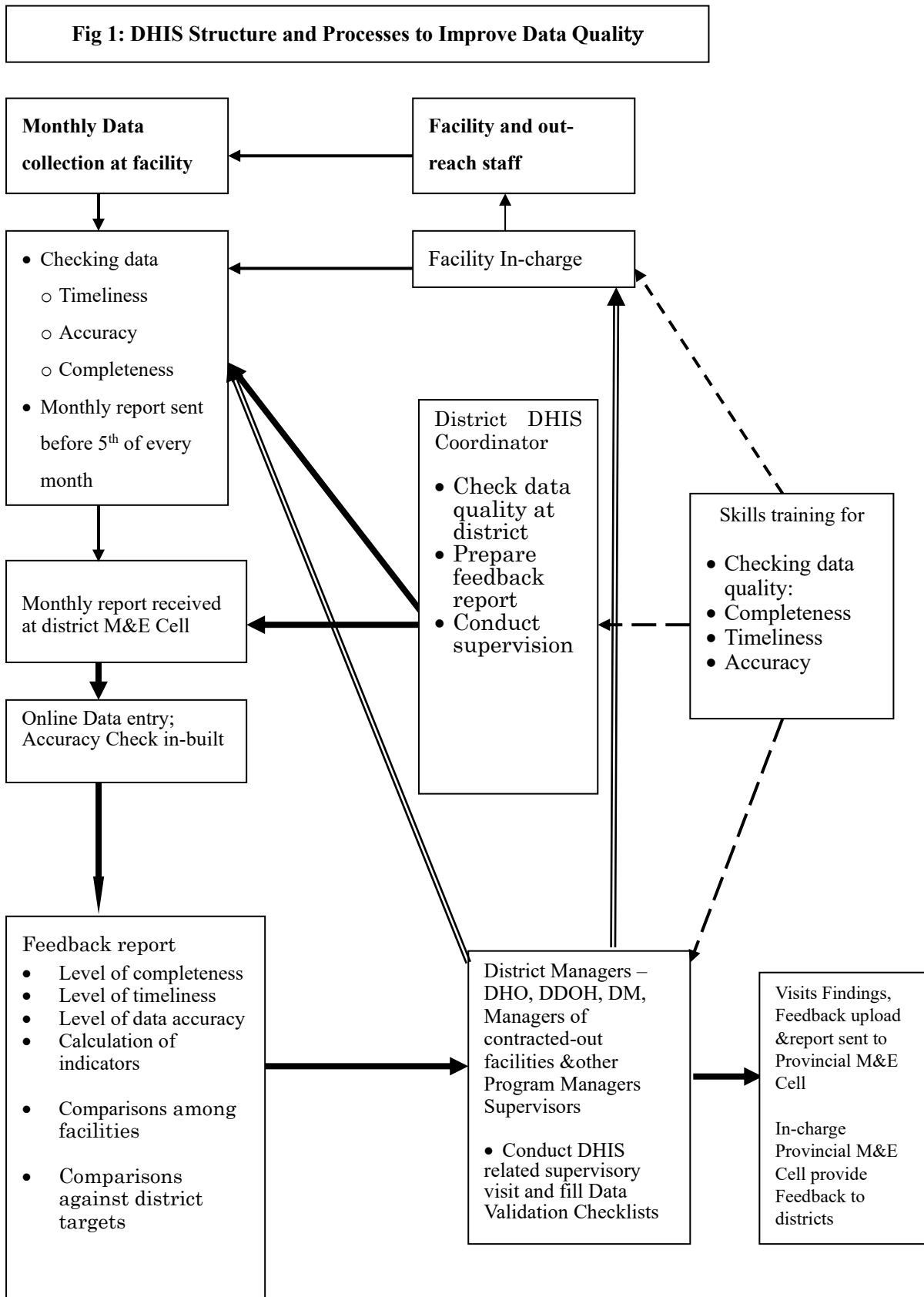
- Specify their role in improving health information system
- Demonstrate salient features of DHIS
 - Mission and objectives of DHIS
 - Roles and responsibilities/management structure of DHIS
 - Data collection and reporting mechanism of DHIS

Time : 30 minutes

Material : Computer, Multimedia, Screen, Power point Presentation, flip chart, markers, DHIS Procedures Manual

Method : Dialogue, discussion, listing and categorization

Before starting, inform about objectives and methodology of the session



Session 3: OPD Data**Objectives**

By the end of the session the participants will be able to:

- Describe the benefits of the following instruments
 - CRP register DHIS-01(R)
 - OPD ticket DHIS-02(F)
 - OPD register DHIS-03(R)
 - OPD Abstract Form DHIS-04(F)
- Fill the instruments correctly

Time : **75 minutes**

Material : Computer, Multimedia, Screen, Power point Presentation, Handout of the instruments, exercise, flipchart, Procedures Manual

Method : Discussion, individual and group exercise

Session 3: Handout No: 3.1 – Central Registration Point Register (DHIS-01-R)

Central Registration Point Register <i>(To be maintained at facility Central Registration Point by designated staff)</i>				
Monthly CRP Serial Number (New case)	Follow-up Case <i>(Tick only)</i>	Name with Father/Husband	Purchase Fee (Rs.)	Sent to
1	2	3	4	5

Session 3: Handout No: 3.2. Sample Filled CRP Register (DHIS-01-R)

Central Registration Point Register

(To be maintained at facility Central Registration Point by designated staff)

Monthly CRP Number (New case)	Follow-up Case (Tick only)	Name with Father/Husband	Purchase Fee (Rs.)	Sent to
1	2	3	4	5
01-Feb-2017				
1		Asma Bibi d/o Atif	1	OPD 1
2		Muhammad Sharif s/o Ejaz	1	OPD 2
3		Manzooran w/o Wali	Free	LHV
4		Rukhsana w/o Pervez	Free	LHV
5		Fatima Begum w/o M. Malik	1	OPD 1
6		Ghulam Hussain s/o Hamid Hussain	1	OPD 2
7		Muhammad Ibrahim s/o Iqbal Ahmed	1	OPD 1
8		Hameeda w/o Ramzan	Free	LHV
9		Khalid s/o Gulzar Shah	1	OPD 2
10		Allah Bakhash s/o Suleman	1	OPD 1
11		M. Amjad s/o M. Asraf	1	OPD 2
12		Mariam D/o Arif	1	OPD 2
13		Nazia Maqbool d/o Maqbool Ahmed	1	OPD 1
14		Obaid-ullah s/o Saif-ullah	1	OPD 1
15		Raheeman w/o Mohammad Afzal	Free	LHV
02-Feb-2017				
16		Munir Ahmad s/o Zubair Ahmad	1	OPD1
	√	Ghulam Hussain s/o Hamid Hussain	Free	OPD 2
17		Kabir Ahmad s/o Tufail Ahmad	1	OPD2
	√	Asim s/o Abrar Hussain	1	OPD1

Session 3: Handout No: 3.3. Central Registration Point Register

Monthly Summary

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
Total Patients Registered Total of col. 1 and 2													
Total Purchee Fee in Rs. Collected Total of col. 4													

Session 3: Handout No: 3.4.Out-Patient Department (OPD) Ticket DHIS – 02 (F)

OUT DOOR PATIENT TICKET	
<div style="border: 1px solid black; width: fit-content; padding: 2px; margin-bottom: 5px;">Sent To:</div> <p>District.....CRP. No.....</p> <p>Facility Name.....</p> <p>Name: _____ Age: _____ Sex: _____</p> <p>Father's / Husband's Name: _____</p> <p>_____</p> <p>Monthly OPD Serial No.: _____</p> <p>Provisional</p> <p>Diagnosis: _____</p>	
Date	Clinical Findings / Investigation/ Treatment/ Referral/ Test Findings

Session 3: Handout No: 3.5. Filled OPD Ticket

Sent To: OPD 1		OUT DOOR PATIENT TICKET
District Islamabad CRP. No... 01		
Facility Name... RHC Tarlai		
Name: <u>Asma Bibi</u> Age: <u>4y 11m</u> Sex: <u>F</u>		
Father's / Husband's Name: <u>Atif</u>		<div style="border: 1px solid black; border-radius: 10px; padding: 5px; display: inline-block;"> <i>Fill this blank according to the OPD Register.</i> </div>
Monthly OPD Serial No.: _____		
Provisional Diagnosis: <u>Acute (Upper) Respiratory Infections</u>		
Date 1/Feb.	Clinical Findings / Investigation/ Treatment/ Referral /Test Findings Moderate fever for 2 days with mild cough Rx. Syp. Paracetamol 1 TSF SoS	

Session 3: Handout No: 3.5. Filled OPD Ticket

Sent To: OPD 2	OUT DOOR PATIENT TICKET
District Islamabad CRP. No. 02	
Facility Name... RHC Tarlai	
Name: Muhammad Sharif Age: 68y Sex: M	
Father's / Husband's Name: Ejaz	
<div style="border: 1px solid black; border-radius: 10px; padding: 5px; display: inline-block; margin-left: 400px;"> <i>Fill this blank according to the OPD</i> </div>	
Monthly OPD Serial No.: _____	
<div style="border: 1px solid black; border-radius: 10px; padding: 5px; display: inline-block; margin-left: 400px;"> <i>Give a diagnosis according to clinical /investigation findings.</i> </div>	
Provisional Diagnosis: _____	
Date	Clinical Findings / Investigation/ Treatment/ Referral
1/Feb	H/O Fall from stairs Pain and swelling at Rt. Ankle <u>Advice: X-rays Rt. Ankle AP/Lat</u> <div style="text-align: right;">Dr. Farman/MO</div>
1/Feb	Findings: Fracture of Rt. Calcaneum Referred to hospital Islamabad <div style="text-align: right;">Dr. Farman/MO</div>

Session 3: Handout No: 3.5. Filled OPD Ticket

Sent To: ODP 1	OUT DOOR PATIENT TICKET
District Islamabad CRP. No..... 05	
Facility Name..... RHC Tarlai	
Name: Fatima Begum Age: 42y Sex: F	
Father's / Husband's Name: M. Malik	
<div style="border: 1px solid black; border-radius: 15px; padding: 5px; display: inline-block; margin-left: auto;"> <i>Give her an OPD No. according to the OPD Register.</i> </div>	
Monthly OPD No.: _____	
<div style="border: 1px solid black; border-radius: 15px; padding: 5px; display: inline-block; margin-left: auto;"> <i>Give a diagnosis according to clinical /investigation findings.</i> </div>	
Provisional Diagnosis: _____	
Date	Clinical Findings / Investigation/ Treatment/ Referral
1/Feb	<p>Referred from LHW.</p> <p>C.C.: Multiple joint pain of fingers Since 2 months Swan-neck deformity</p> <p>Investigations: X-ray , Rt. Hand Blood count, ESR R/A Factor</p> <p style="text-align: right;">Dr. Sadia/WMO</p>
1/Feb	<p>Results: ESR= 80 (1 h)</p> <p style="text-align: right;">Riaz/ Lab In-charge</p>

Session 3: Handout No: 3.5. Filled OPD Ticket

Sent To: OPD 2	OUT DOOR PATIENT TICKET
District..... IslamabadCRP. No 06	
Facility Name: RHC Tarlai	
Name: Ghulam Hussain Age: 1y 2m Sex: M	
Father's / Husband's Name: Hamid Hussain	
<div style="border: 1px solid black; border-radius: 10px; padding: 5px; display: inline-block; margin-left: 200px;"> <i>Give him an OPD No. according to the OPD Register.</i> </div>	
Monthly OPD Serial No.: _____	
Provisional Diagnosis: Diarrhea	
Date	Clinical Findings / Investigation/ Treatment/ Referral/ Test Findings
1/Feb	C.C.: Watery diarrhea 5-6 times in the last 24 hours urination 3 times skin turgor not decreased Rx.:ORS 3 sachets
<div style="border: 1px solid black; border-radius: 10px; padding: 5px; margin-left: 100px;"> On the following day, mother of Hussain brings the newly produced Ticket and this Ticket as well. You may add today's consultation record here. </div>	
2/Feb	C.C.: Lethargy Decreased fluid intake & urination Skin turgor decreased Dx.: Severe dehydration Rx.: Admission to Children Ward & start i.v. fluid

Session 3: Handout No: 3.5. Filled OPD Ticket

OUT DOOR PATIENT TICKET	
Sent To: OPD 1	
District Islamabad CRP. No. 10	
Facility Name..... RHC Tarlai	
Name: Allah Bakhsh Age: 57y Sex: M	
Father's / Husband's Name Suleman	
Monthly OPD Serial No.: <u> 7 </u>	
Provisional Diagnosis: <u> Bronchial asthma </u>	
Date	Clinical Findings / Investigation/ Treatment/ Referral/ Test Findings
1, Feb.	C.C.. Cough continuing for 20 days. Past Hx. A Heavy smoker x 35 years Wheeze +ve Rx. Theodur 400mg b.i.d. x 7 days
<div style="border: 1px solid black; border-radius: 15px; padding: 10px; width: fit-content; margin: 0 auto;"> Two days later, this patient visits your OPD again. He has newly produced Ticket and this Ticket as well. Is he a new case or a follow-up case? </div>	
3, Feb.	C.C: Cough continuing for 3 wks. Not responded to Theodur Advised for Chest X-ray → PA view shows a coin lesion in Lt. lung field Dx. Suspected pulmonary TB Advice: Sputum Smear examination

Session 3: Handout No: 3.6. OPD Medicine Requisition Slip DHIS -02-A

Medicine Requisition from dispensary

Monthly OPD Serial No.....

Sign: _____ Date: _____

Session 3: Handout No: 3.7 OPD OUT-PATIENT DEPARTMENT (OPD) REGISTER

Month:

Year:

Monthly OPD Serial No. (New cases)	Follow-up Cases (Put tick only)	Name with Father / Husband Name	Address	SEX & AGE CATEGORY (Tick in appropriate column)												MALNUTRITION (Only for <5 Years Children) Tick if			Referred from (if applicable)	Diagnosis	Action Taken/ Special Remarks	
				Male						Female						Acute		Chronic				
				<1 month	1-11 months	1- 4 Yrs	5-14 Yrs	15-49 Yrs	50+	<1 month	1-11 months	1- 4 Yrs	5-14 Yrs	15-49 Yrs	50+	Low weight for- Age	MUAC <12.5c m	short Height- for-Age				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	
		<<Total Brought from Pervious Page>>																				

Session 3: Handout No: 3.7 Filled OPD OUT-PATIENT DEPARTMENT (OPD) REGISTER

Month: Feb Year: 2017

Monthly OPD Serial No. (New cases)	Follow-up Cases (Put tick only)	Name with Father / Husband Name	Address	SEX & AGE CATEGORY (Tick in appropriate column)												MALNUTRITION (Only for <5 Years Children) Tick if			Referred from (if applicable)	Diagnosis	Action Taken/ Special Remarks		
				Male						Female						Acute		Chronic					
				<1 month	1-11 months	1-4 Yrs	5-14 Yrs	15-49 Yrs	50+	<1 month	1-11 months	1-4 Yrs	5-14 Yrs	15-49 Yrs	50+	Low weight for-Age	MUAC <12.5cm	short Height-for-Age					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		
		<< Total Brought from Pervious Page >>																					
			01-Feb																				
1		Asma Bibi D/o Atif	Tarlai									✓										Acute URI	Syp.Paraceta mol 1 TSF SoS
2		MuhammadSharif s/o Ejaz	Tarlai						✓													Fracture of Rt. Calcium	X-rayRt. AnkleAP/Lat
3		Fatima Beghum w/O M. Malik	Jhang Syedan											✓					LHW Asia			Rheumatoid arthritis	
4		Ghulam Hussain s/o HamidHussain	Ghagri		✓												✓					Diarrhoea	
5		Rabia w/O M. Aslam	Koral					✓														Amoebic dysentery	
6		M. Khalil s/o Ikram	Humak					✓														Enteric Fever	
7		Allah Bakhash S/o Suleman	Pind bagwal						✓													Bronchial asthma	
8		M. Amjad s/o M. Asraf	Tramri					✓														Acute URI	
9		Shahida D/o Qamar Idrees	Tarlai									✓					✓					Pneumonia	Admission to the Female Ward
10		Obaid-ullah s/o Saif-ullah	Ali Pur				✓															Acute Flaccid Paralysis	Reporting & stool Sampling

			02-FEB																					
11		Parveen w/o Ghulam	Sawan Humak																	✓		Hypertension		
	✓	Saima Bibi d/o Rafiq	Bhimbar Trar																				Paracetamol 150 mg	
12		Ehsan	Gokina			✓																Suspected meningitis	Referred to the hospital	
13		Fahim	Simli dam road					✓														BHU Jhang Sayedan	Suspected Pulmonary TB	Sputum smear
	✓	Ghulam Hussain s/o Hamid	Ghagri																				Admission to the hospital	
14		Saleem	Bani saran Rawat						✓														Diabetes Mellitus	
15		Waheed	Gagri Sihala					✓															suspected viral Hepatitis	HBV / HCV antigen
16		Yasin	Dhok Parcha Tarnol				✓																Laceration	Suturing
17		Zaheed	Ghuri town		✓																		Suspected Pertussis	Referred to the hospital
18		Ismat w/o Javed	Phul Gran																		✓		Goiter	
18	2	<< Transfer Total to Next Page >>		0	2	1	2	5	3	0	0	3	1	1	0	2	0	0	2				<< Transfer Total to Next Page >>	

Session 3: Handout No: 3.8OPD Register

Monthly Summary for the year.....

	January	February	March	April	May	June	July	August	September	October	November	December	Year Total
Total New Cases From Column No. 1													
Follow Up Cases The total count of all the ticks for the given month in Column No. 2 of OPD Register													
Malnutrition < 5 Years Children Acute (Low Weight for Age) The total count of all the entries for the given month in Column No 17 of OPD Register													
Malnutrition < 5 Years Children Acute (MUAC < 12.5cm) The total count of all the entries for the given month in Column No 18 of OPD Register													
Malnutrition < 5 Years Children Chronic (Short Height for Age) The total count of all the entries for the given month in Column No 19 of OPD Register													
Referred from (Cases referred from other health facilities or LHW/ CMW)													

Session 3: Handout No: 3.9OPD Abstract Form at _____ OPD Month: ____ Year: 20____

Dates:1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

Priority Health Problems		Tally	Total
1		2	3
Respiratory Diseases			
1	Acute (upper) respiratory infections		
2	Pneumonia < 5 yrs.		
3	Pneumonia > 5 yrs.		
4	TB Suspects		
5	Chronic Obstructive Pulmonary Diseases		
6	Asthma		
Gastro Intestinal Diseases			
7	Diarrhea < 5 yrs		
8	Dysentery < 5 yrs		
9	Diarrhea / Dysentery > 5 yrs		
10	Enteric/Typhoid Fever		
11	Worm Infestations		
12	Peptic Acid Diseases		
13	Biliary Disorder *		
Urinary Tract Diseases			
14	Urinary Tract Infections		
15	Renal Calculi		
16	End Stage Renal Disease (ESRD) *		
17	Sexually Transmitted Infections (STIs)		
18	Benign Enlargement of Prostrate *		
Vector Borne Diseases			
19	Suspected Malaria		
20	Suspected Dengue Fever		
21	Suspected Chikungunya		
22	Suspected Cutaneous Leishmaniasis		
Vaccine Preventable Diseases			
23	Suspected Measles		
24	Suspected Viral Hepatitis		
25	Suspected Neonatal Tetanus		
Cardiovascular Diseases			
26	Ischemic heart disease		
27	Hypertension		
Skin Diseases			
28	Scabies		
29	Dermatitis		
30	Fungal Infection		
31	Impetigo		
Endocrine Diseases			
32	Diabetes Mellitus		
33	Goiter		
34	Hyper Thyroidism *		
35	Hypo Thyroidism*		

Neuro-Psychiatric Diseases			
36	Depression		
37	Drug Dependence		
38	Epilepsy		
39	Children/adolescent with abnormal behavior		

Eye & ENT			
40	Cataract		
41	Trachoma		
42	Glaucoma *		
43	Conjunctivitis		
44	Otitis Media		
Oro - Dental Diseases			
45	Dental Caries		
46	Periodontitis		
47	Sub Mucosal Fibrosis		
48	Oral Ulcers		
Injuries / Poisoning			
49	Road traffic accidents		
50	Fractures		
51	Burns		
52	Dog bite		
53	Snake bite (with signs/ symptoms of poisoning)		
Neonatal Diseases			
54	Birth Asphyxia		
55	Neonatal Sepsis		
Miscellaneous Diseases			
56	Fever due to other causes		
57	Suspected Meningitis		
58	Acute Flaccid Paralysis		
59	Suspected HIV/AIDS		
Any Other Unusual Disease (Specify)			
60			
61			
62			

* Applicable for Secondary Level Health Facilities only.

Note-I: Fever due to other causes in Serial No. 56 count all cases of fever due to causes other than those mentioned in the abstract form.

Note-II: In Serial No. 60 to 62 record any unusual disease occurring during reporting month, if directed by the Department of Health, ICT.

Session 4: Hospital Indoor Data**Objectives****By the end of the session the participants will be able to:**

- Describe the benefits of the following instruments
 - Indoor register -DHIS-07(R)
 - Indoor Abstract form -DHIS-08(F)
 - Daily Bed Statement Register – DHIS-09(R)
- Fill the register and form correctly

Time 60 minutes

Material Computer, Multimedia, Screen, Power point Presentation, Handouts of the copy of registers and form, Procedure manual

Method Exercises

Session 4: Handout No: 4.1

INDOOR PATIENT REGISTER
(To be filled by Head Nurse /Charge Nurse)

Ward _____

Month: _____ Year: _____

Monthly Indoor Serial No.	Name with Father/ Husband's Name	Address	Sex (M/F)	Age	Bed No.	Diagnosis	Any operative procedure done	Dialysis	Tick in appropriate Column				Date of Discharge/ DOR/LAMA/ Death/ Referred	MLC
									Discharged /DOR	LAMA	Referred	Death		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

Session 4 – Handout No:4.2**Indoor Patient Register****Exercise**

- ✓ Divide participants in groups
- ✓ Fill the information provided in the given scenarios in indoor register columns.
- ✓ You have 10 minutes to fill to complete the exercise.

Scenarios:

1. Patient named Mr. Mohammad Ramzan s/o Mr. Bashir aged 38 years r/o Sohan District Islamabad is admitted in Male Medical Ward on Bed no. 05 by Medical Specialist with the diagnosis of Bronchial Asthma on October 06, 2016. He was discharged from hospital on October 09, 2016.
2. Mr. Afzal s/o Mr. Abdullah aged 62 years r/o Bukhar was admitted unconscious on bed no 10 in Male Medical Ward from Prison on October 07, 2016 with diagnosis of Diabetes Mellitus. He died next day.
3. Mr. Mohammad Latif s/o Mr. Mohammad Sharif aged 28 years r/o Shah Allah Ditta is admitted in Male ward at bed no. 08 as patient of Schizophrenia on October 09, 2016. On October 12, 2016 Charge Nurse of the ward found that the patient along with his belongings is missing from his bed.
4. Mst. Kosaur w/o Mr. Khuda Bux aged 22 years r/o Tumair District Islamabad was admitted in Female ward on bed no. 04 on October 12, 2016 with provisional diagnosis of Clinical Malaria. At the time of discharge on October 16, 2016, she was finally diagnosed as a patient of Acute Urinary Tract Infection.

Session 4 – Handout No:4.3

INDOOR PATIENT REGISTER														
<i>(To be filled by Head Nurse /Charge Nurse)</i>														
<i>Ward</i> _____										<i>Month:</i> _____ <i>Year:</i> _____				
Monthly Indoor Serial No.	Name with Father/ Husband's Name	Address	Sex (M/F)	Age	Bed No.	Diagnosis	Any Operative Procedure done	Dialysis	Tick in appropriate Column				Date of Discharge/ DOR/ LAMA/ Death/ Referred	MLC
									Discharged /DOR	LAMA	Referred	Death		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

Session 4 – Handout No:4.4

Indoor Patient Register

Monthly Summary

Year:- _____

Months	Total patients admission	Total Dialysis	Total Discharge	Total LAMA	Total Referred	Total Deaths	Total MLC
January							
February							
March							
April							
May							
June							
July							
August							
September							
October							
November							
December							
Grand Total							

Session 4: Handout No:4.5 Indoor Abstract Form**DHIS- 08**

(To be filled from Indoor Register and Obstetric Register)

Month: _____ Year: _____

Priority Health Problems		Tally	Total Admissions	Total Deaths
1		2	3	4
Medical				
1.	Diarrhea < 5			
2.	Dysentery < 5			
3.	Diarrhea/Dysentery > 5			
4.	Pneumonia < 5			
5.	Pneumonia > 5			
6.	Malaria			
7.	Dengue Fever			
8.	Dengue Hemorrhagic Fever			
9.	Chikungunya			
10.	Asthma			
11.	Chronic Obstructive Pulmonary Disease (COPD)			
12.	Pulmonary Tuberculosis			
13.	Extra Pulmonary Tuberculosis			
14.	Enteric / Typhoid Fever			
15.	Diabetes Mellitus			
16.	Viral Hepatitis A & E			
17.	Viral Hepatitis B			
18.	Viral Hepatitis C			
19.	Meningitis			
20.	Chronic Liver Diseases			
21.	End Stage Renal Diseases (ESRD)			
Cardiac Diseases				
22.	Congestive Cardiac Failure (CCF)			
23.	Hypertension			
24.	Ischemic Heart Diseases (IHD)			
Vaccine Preventable Diseases				
25.	Measles			
26.	Neonatal Tetanus			
27.	Acute Flaccid Paralysis (AFP)			
Surgical				
28.	Acute Appendicitis			
29.	Burns			
30.	Cholelithiasis / Cholecystitis			
31.	Hernias			
32.	Hyperplasia of Prostate			
33.	Urolithiasis			
Orthopedic Diseases				
34.	Arthropathies			
35.	Fractures			
Eye				
36.	Cataract			
37.	Conjunctivitis			
38.	Glaucoma			

ENT				
39	Chronic Otitis Media			
40	DNS			
41	Tonsillitis			
Neurological/Neurosurgical				
42.	CVA/Stroke			
43.	Head Injuries			
Mental Behavioral Disorder				
44.	Drug Abuse (Psycho-Active substance use)			
45.	Mental Disorder			
Neo-natal Diseases / Problems				
46.	Birth Trauma			
47.	Birth Asphyxia			
48.	Bacterial Sepsis			
49.	Congenital Abnormality			
50.	Prematurity			
51.	Hypothermia			
52.	Pneumonia < 1 month			
53.	Low Birth Weight			
Gynecological				
54.	Fibroid Uterus			
55.	Pelvic Inflammatory Diseases (PID)			
56.	Uterine Prolapse			
57.	Obstetrical Fistula			
Obstetrics/Maternal Complications (to be filled from Obstetric Register)				
58.	Ante partum Hemorrhage (APH)			
59.	Abortion			
60.	Complications of Abortion			
61.	Ectopic Pregnancies			
62.	Postpartum Hemorrhage (PPH)			
63.	Pre-Eclampsia/ Eclampsia			
64.	Prolonged/ Obstructed Labour			
65.	Puerperal Sepsis			
66.	Rupture Uterus			
67.	Other Obstetric Complications			
Any Other Unusual Disease (Specify)				
68.				
69				
70				

Note: In Serial No. 68 to 70 record any unusual disease occurring during reporting month, if directed by the Department of Health, ICT.

Session 4: Handout No: 4.6 Daily Bed Statement Register

- ✓ Distribute the handout of exercise on the Register.
- ✓ Ask participants fill the register using the scenarios provided.
- ✓ Give them five minutes to complete the exercise.

Scenario:

Surgical Ward consists of 40 beds with 20 beds reserved for female patients.

- On day one of October 2016, there were already 07 (04 M + 03F) patients. Two new male patients were admitted and one male patient was discharged.
- On October 02, 2016, seven new (all male) patients were admitted with firearm wounds. Two of them were serious, out of which one was referred. None was discharged.
- On October 03, 2016, two new females were admitted. Four male and two female patients were discharged. One serious patient died.

Session 4: Handout No:4.6 Daily Bed Statement Register

DHIS-09

Daily Bed Statement Register																				
Ward: -----										Month: _____ Year: _____										
Total Beds: _____					Male Beds: _____					Female Beds: _____										
Date	Previous Patients		New Admissions		Discharged/ DOR (not on same day of admission)		Discharged/ DOR on same day of admission		LAMA		Referred		Deaths		Daily Patient Count (Col. 2+3) – (Col. 4+6+7+8)		Critically ill		MLC	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
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21																				
22																				
23																				
24																				
25																				
26																				
27																				
28																				
29																				
30																				
Total																				

Session 5: Stock Data

Objectives

By the end of the session the participants will be able to:

- Describe the benefits of the following registers
 - Stock Register (Medicines/ Supplies) DHIS-17(R)
 - Stock Register(Equipment/Supplies/Linen) DHIS-18(R)
 - Daily Medicine Expense Register DHIS-16(R)
- Fill the registers correctly

Time 60 minutes

Material Computer, Multimedia, Screen, Power point Presentation, copy of the registers, Procedures Manual

Method Exercise

Session 5: Handout No: 5.1 **Stock Register**

DHIS-17

STOCK REGISTER						Page No. _____				
Medicines/ Supplies										
Name of Article: _____						Unit / Strength _____				
Minimum Recommended Stock Level: _____										
<i>(Take action for replenishment if the minimum level is reached)</i>										
Date	Received From / Issued to, with Reference No.	Quantity				Batch No.	Store Keeper Signature	Counter Signature	Remarks <i>(Tick if balance '0')*</i>	
		Received	Issued	Discarded	Balance					
1	2	3	4	5	6	7	8	9	10	
	<i>Balance brought forward</i>									

* Immediately inform the in-charge or appropriate authority in case balance is 0.

Minimum Recommended Stock Level: *(If, for example, the average monthly consumption of the medicine for the last three months is 500 capsules and it takes on average almost 2 months for getting the replenishment, then the minimum stock balance that must be available is $500 \times 2 = 1000$ capsules. If the stock balance is near to this level, the store keeper must initiate the process for getting replenishment of the stock).*

Session 5: Handout No: 5.2 - Stock Register, Medicine/Supplies**Exercise**

Fill the stock register using the information provided. You have 10 minutes to complete the exercise.

Injection Gentamycin 80 mg

Average monthly consumption of Injection **Gentamycin** is 20

01-10-05	Balance brought forward from previous page No. 16	20
01-10-05	Received from EDOH vide voucher no. 302/M Dated 25-09-05	50
05-10-05	Issued to Female Surgical Ward	25
10-10-05	Issued to Casualty Outdoor	20
12-10-05	Issued to Male Surgical Ward	25
05-11-05	Received from EDOH vide voucher no. 415/M Dated 02-11-05	75
12-11-05	Found Broken	05
01-01-06	Balance Brought Forward from year 2005	
05-01-06	Issued to Male Surgical Ward	30

Session 5: Handout No: 5.3 DHIS-18

STOCK REGISTER
(Equipment/ Furniture / Linen)

Name of Article: _____ Specification: _____

Date	Received From / Issued to with Reference No.	Quantity					Status		Store Keeper Signature	Counter Signature	Remarks
		Received	Issued	Returned	Struck Off	Balance	Repairable	Unserviceable			
1	2	3	4	5	6	7	8	9	10	11	12
	<<Balance brought Forward>>										

Session 5: Handout No: 5.4 – Stock Register

Exercise on Stock Register (Equipment / Furniture / Linen)

Fill the stock register using the information provided. You have 10 minutes to complete the exercise.

Office Chair (All Wooden, with arms, canned)

01-12-05	Received from EDOH vide voucher no. 512/F Dated 30-11-05	20
03-12-05	Issued to SMO Room	04
03-12-05	Issued to WMO	03
03-12-05	Received back from MO Room	01 (Broken/Repairable)
01-01-06	BBF year 2005	
05-01-06	Issued to Dispensary	02

Session 6: Data Collection for Catchment Population and Community Meetings

Objectives

By the end of the session the participants will be able to:

- Describe the benefits of the following instruments
 - Catchments Area Population Chart DHIS-24(YR)
 - Community Meeting register DHIS-19(R)
- Fill the instruments correctly

Time 30 minutes

Material Computer, Multimedia, Screen, Power Point Presentation, Handouts, Procedures Manual

Method Group Exercise

Session 6: Handout No: 6.1: Data collection for catchment population

The district office has sent you the following information about your villages in Section I. Please calculate the total population. Fill out the empty columns. In Section III for calculating target group, you have to multiply standard percentage with total population to get the target group. For example, expected pregnancies standard percentage is 3.4 and total population is 1000, then the target expected pregnancies in a year would be $3.4/100 \times 1000 = 34$ pregnancies.

You have 10 minutes to fill all the columns and calculate target groups.

CATCHMENT AREA POPULATION CHART

DHIS-24

CATCHMENT AREA POPULATION CHART							
Section I:							
Facility name: _____		Facility I.D. No.: <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				Year: _____	
Union Council name: _____ District: _____ Province: _____							
Section II:							
Sr. No	Name of Villages	Population	Distance from Facility (km)	No. of LHWs	Population covered by LHWs	No. of CMWs	No. of Skilled Birth Attendants
1	2	3	4	5	6	7	8
1	Phulgran	6130	0km	10			4
2	Humak	8974	1km	3			2
3	Sohan	9540	1.5km	1			1
4	Tumair	4571	2km	1			0
5	Golra sharif	2217	6km	1			0
6	Ali Pur	4698	8km	2			0
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

Section III:

Target Groups	Standard Demographics Percentages	Estimated Yearly Target Population	Estimated Monthly Target Population
1	2	3	4
Expected Pregnancies	3.4%		
Expected Births	2.9%		
0-11 months	2.7%		
0-23 months	5.2%		
0- Less than 5 years	13.4%		
CBA's (15 to 49 years)	22%		
Married CBA's (15 to 49 years)	16%		

Section IV:

Private Practitioners	Male	Female
No. of Registered Allopathic Medical Practitioners		
No. of Registered Homoeopathic Medical Practitioners		
No. of Qualified Hakims		

Session 6: Handout No: 6.2 : DHIS-19

COMMUNITY MEETINGS REGISTER										
Month: _____ Year: _____										
Date	Activity		Place			Number of Participants		Topics Discussed	Recommendation	Sign of Facility In-charge
	Meeting	H E session	At Facility	Community	LHW Houses	Male	Female			
1	2	3	4	5	6	7	8	9	10	11
<<TOTAL>>										

Session 7: Maternal Health Data

Objectives

By the end of the session the participants will be able to:

- Describe the benefits of the following instruments
 - **Maternal Health Register** DHIS-13(R)
 - ANC card DHIS-14(C)
- Fill the register and card correctly

Time 30 minutes

Material Computer, Multimedia, Power point Presentation, handout of the copy of **maternal health register and ANC card, Procedures Manual**

Method Exercise

Session 7: Handout No: 7.4: – Maternal Health Register and ANC card**Exercise**

- Read the all scenario and fill the maternal health register and ANC card
- Use blank sheet draw columns of maternal health register and ANC cards to fill them. Use marker to fill the sheet with involvement of participants.
- Take 10 minutes for filling out the maternal health register and ANC card for all six scenarios.
- Each group will present one case scenario and use filled scenario to provide feedback to the presenting group.

Scenario 1:

Mrs. Farzana w/o Frazand Ali age 22 years resident of Ali Pur district Islamabad visit antenatal clinic of RHC Tarlai and given Yearly No. 30 for the first time on 15-02-2016. She is four months pregnant. She has **no history** of abortion or miscarriage. Her menstrual cycle started at the age of 13 years, which is 28 days cycle and regular. Her last menstrual cycle was on 12th October 2015. There is no medical or gynecological history. Vomiting during morning was reported. Her weight was 60 kg and BP was 120/70 mm Hg. No edema of ankle or feet was found. The fundal height was found to be 20 weeks. On checking her MUAC was 18.5cm. Her Hb was 8.7g/dl and urine showed no abnormality. Her Blood Group is B+ve and that of her husband is also B+ve. She was give first TT dose and advised to come back on 14/03/2016.

Scenario 2:

Sughran Bibi w/o Irshad Ahmed aged 31 resident of **Ali Pur visited antenatal clinic for the** third time on 16/02/2016 and brought her ANC card with yearly number 235. She has four children and married 8 year back. Her last menstrual cycle was in September 2015. She has no history of medical or gynecological disease. She received TT2 in her previous visit. One examination, her weight was 62 kg and BP was 120/70 mm Hg. The fundal height was 26 weeks. Urine examination showed no sugar or albumin. Her Hb was 11 g/dl. She was advised to come after one month.

Scenario 3:

Ms. Farzana w/o Frazand Ali age 22 years resident of Ali Pur district Islamabad visited antenatal clinic for the second time with yearly No.30 on 18-02-2016. She is five months pregnant. Since last three days, she developed headache and edema of ankle/feet. Her weight was 65 kg and BP was 150/96 mm Hg. Edema of ankle/feet was found. The fundal height was found to 24 weeks. Her Hb was 8.7g/dl and urine showed trace of albumin. She was give second TT dose and referred.

Scenario 4:

Manzooran w/o Wali aged 30, living in Sohan came to the clinic on 20/02/2016 with yearly No. 31. She delivered 3 days back and came for the first time. She has no history of TT vaccination.

Scenario 5:

Shabiran w/o Ramzan aged 30 years with yearly No. 19 living in Kanyal Humak. She delivered 30 days back come to clinic for the second time on 20/02/2016. On checking her MUAC was 23cm. She had 2 TT injections during pregnancy somewhere else.

Scenario 6:

Raheela w/o Mohammad aged 35 is a resident Sadat Colony , Jhangi Sayedan. She delivered 40 days back and came for the first time with yearly No. 32 on 21/02/2016. She complained of low backache. She received 2 TT injections in her earlier pregnancies.

Session 7: Hand out No: 7.1

Maternal Health Register

MATERNAL HEALTH REGISTERDHIS-13 (R) Month: _____ Year: _____																		
Yearly MH Serial No. (New cases)	Follow-up Cases (Previous yearly No./Year of registration)	Name with Husband Name	Age (in years)	Address	EDD	Hb (circle if <10 gm/dl)	ANC Services				PNC Services				Nutrition Status of women (MUAC) Tick if <21 cm		TT Vaccination Advice (Tick only)	Other Services (Investigations Referrals)
							ANC1	ANC2	ANC3	ANC4 OR MORE	PNC1	PNC2	PNC3	PNC4 OR MORE	During pregnancy	During Lactation		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
		<<Total brought from previous page>>																
		<< Transfer Total to Next Page>>																

Session 7: Hand out No: 7.2

**Maternal Health Register
Monthly Summary**

Year: _____

	January	February	March	April	May	June	July	August	September	October	November	December	Year Total
ANC 1 Total monthly count from Column No. 8													
ANC 2 Total monthly count from Column No. 9													
ANC 3 Total monthly count from Column No. 10													
ANC 4 or more Total monthly count from Column No. 11													
PNC 1 Total monthly count from Column No. 12													
PNC 2 Total monthly count from Column No. 13													
PNC 3 Total monthly count from Column No. 14													
PNC 4 or more Total monthly count from Column No. 15													
Malnourished Pregnant women Total monthly count from Column No. 16													
Malnourished Lactating women Total monthly count from Column No. 17													
TT Vaccination Advice Total monthly tick counts from Column No 18													

Session 7: Hand out No: 7.3

Antenatal Card DHIS- 14 (C)

Antenatal Card									
Yearly Serial No.						Date:			
Hospital/Health center's Name:						District:			
Name:						Age:			
Husband's Name:									
Address:									
LMP:			EDD:			Gravida:		Para:	
Years Married:			Blood Group:			Husband's Blood Group:			
Section 1. Obstetric History									
Year of Delivery	Outcome			Mode of deliveries			Complications (if any)		
	Live birth	Still birth	Abortion	NVD	Forceps / Vacuum	CS	Pregnancy	Labor	Puerperium
1	2	3	4	5	6	7	8	9	10
Section 2. Menstrual History									
1. Menarche					2. Cycle				
3. Regular/Irregular									
Section 3. Past History: Medical /Surgical/Gynecological, etc.									
Section 4. Details of ANC & PNC Visits									
ANC Visit Number	ANC-1 visit		ANC-2 visit		ANC-3 visit		ANC-4 or more visit		
	Date:		Date:		Date:		Date:		
PNC Visit Number	PNC-1 visit		PNC-2 visit		PNC-3 visit		PNC-4 or more visit		
	Date:		Date:		Date:		Date:		
Doctor:									
Signature:									
Date:									

Section 5. Present Pregnancy Antenatal Record																		
ANC/PNC Visit	Date	Weeks Pregnant	Fundal Height.	Fetal Heart Sound/Fetal Movements	Presentation	Engaged / Not Engaged	Hb%	HBV/ HCV	Urine		Blood Sugar	BP	Weight	Edema	Malnourished (Y/N)	Next visit	Counseling for FP	Signature
									Sugar	Albumin								
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
1																		
2																		
3																		
4																		
5																		
Section 6 . USG Findings/ Findings of other Test																		
1																		
2																		
3																		
4																		
Section 7 . Remarks / Special Instructions During ANC Visits																		
1																		
2																		
3																		
4																		
Section 8 . Findings During Postnatal Care Visits																		
1																		
2																		
3																		
4																		
Section 9 . Management plan (To be ticked after 24 weeks)																		
	<input type="checkbox"/> Await Spontaneous <input type="checkbox"/> Induction of Labor <input type="checkbox"/> Trial of Labor <input type="checkbox"/> C-Section <input type="checkbox"/> Deliver at Tertiary Level Hospital																	

Session 8: Family Planning Data

Objectives

By the end of the session the participants will be able to:

- Describe the benefits of the following instruments
 - Family Planning Register DHIS-11(R)
 - Family Planning Card DHIS-12(C)
- Fill the instruments correctly

Time 30 minutes

Material Computer, Multimedia, Power Point Presentation, Procedures Manual, copy of the register and card

Method Listing, Role play

Session 8:Handout No:8.1. Family Planning Register & Family Planning Card

DHIS-11 (R)

Family Planning Register Month: _____ Year: _____																		
Yearly FP Client No. (New client)	Follow-up Client No. (Previous Yearly No./ Year of registration)	Client Name with Spouse Name	Age	Address	Clients by Method (Tick appropriate column)													Others
					Pills		Condom (clients)	Injections		IUCD		Implant	PP Implant	Tubal Ligation	Vasectomy	Counseling		
					Combined Oral Contraceptives (COC)	Progestrone only Pills (POP)		NET-EN	DPMA	Cu-T 380A	PPIUCD							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	
<<Total Brought From Previous Page>>																		
<<Transfer Total to Next Page>>																		

Session 8: Handout No:8.2 Family Planning Register


Monthly Summary

Year: _____

Description: Number of clients by method	January	February	March	April	May	June	July	August	September	October	November	December	Year Total
New FP clients (Total of col. No. 1)													
Follow-up FP clients (Total of col. No. 2)													
Combined Oral Contraceptive (COC) Pills (Total of col. No. 6)													
Progesterone Only Pills (POP) Total of col. No. 7													
Condoms (Total of col. No. 8)													
Injection Net-En (Total of col. No. 9)													
Injection DPMA (Total of col. No. 10)													
IUCDs (Total of col. No. 11)													
PPIUCD (Total of col.No.12)													
Implant (Total of col. No. 13)													
PP Implant (Total of col No. 14)													
Tubal Ligation (Total of col. No. 15)													
Vasectomy (Total of col. No.16)													
Counseling (Total of col. No.17)													

Session 8: Handout No:8.3

DHIS-12 (C)



FAMILY PLANNING CARD

Name & Address of Service Outlet: _____

Name of Client: _____

Name of Spouse: _____

Client No. _____

Registration Date: _____

Sr. No.	Date of Visit	Contraceptive Method Adopted	Date of Next Visit	Signature

Session 9: Obstetric Register Data

Objectives**By the end of the session the participants will be able to:**

- Describe the benefits of the :
Obstetric Register DHIS-15(R)
- Fill the register correctly

Time 45 minutes

Material Computer, Multimedia, Power Point Presentation, handout, copy of the register,
Procedures Manual

Method Individual Exercise

Session 9: Handout No:9.1

Obstetric Register Filled

DHIS-15 (R)

OBSTETRIC REGISTER																				
<i>(To be maintained at Obstetric Ward/Female Ward/Labor Room) Month: _____ Year: _____</i>																				
Monthly Obs Serial Number	Time of Admission	Name with Husband's Name	Address	Age (in Years)	Parity	Diagnostics (Complication or illness if any, tick appropriate column)										Preventive and Management				
						Ante partum Hemorrhage (APH)	Complications of Abortion	Ectopic Pregnancies	Postpartum Hemorrhage (PPH)	Pre-Eclampsia/Eclampsia	Prolonged/Obstructed Labors	Puerperal Sepsis	Rupture Uterus	Intrauterine Death	Other	Misoprostol given (Tick) if given	Nature of Delivery (Tick)			Other procedure done (Specify)
																	Normal	Assisted	Cesarean	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
<<Total brought from Previous Pages>>						06-February-2017														
21	10:00	Mahnoor w/o M. Baloch	Tarlai Kalan	21	0												√			
22	14:00	Noreen w/o M. Zubair	Tarlai Kalan	37	4	√											√			
23	17:00	Nazia w/o Khadim Hussain	Sohan	35	5												√			
24	20:00	Akhtar w/o M. Raza	Bhara Kahu	19	0														√	
25	23:00	Farida w/o M. Tahir	Sohan	22	2												√			
26	21:00	Jannat bibi w/o Safiullah	Tarlai Kalan	26	3												√			
<<Total>>						04-February-2017														
27	8:00	Khaleda w/o Wali Muhammad	Tarlai Kalan	20	1												√			
28	11:00	Nasreen w/o Afzal	Tarlai Kalan	33	7				√									√		
29	15:00	Salma w/o Khan Muhammad	Bhara Kahu	34	6												√			
30	16:00	Amna w/o M. Zulfiqar	Bhara Kahu	31	5								√				√			
<< Total >>																				

Obstetric Register Filled

Outcome of Pregnancy																(Tick appropriate column)				Date and time of death/discharge/ DOR/LAMA	Delivery Conducted by (Name / Signature)	Remarks
Delivery			Live Birth					Neonatal Deaths (Tick appropriate column)								Discharged/ DOR	LAMA	Referred	Maternal Death			
Date	Time	Still Birth (Tick)	Sex (Number of Babies)		Weight in KG(Circle if less than 2.5 Kg)	Preterm (Tick)	Birth Asphyxia	CHX applied (Tick if given)	Birth Trauma	Birth Asphyxia	Bacterial sepsis	Congenital Abnormality	Prematurity	Hypothermia	Complications after delivery (None/ Specify)							
22	23	24	M	F	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44
6/2	23:00		01		2.8											√				2/7 10:00	Sabeen	
6/2	22:00		01		3.4												√			2/7 10:00	Sabeen	
7/2	04:00			01	3.2											√				2/8 14:00	Sabeen	
7/2	08:00		02		2.2											√				2/12 10:00	Sabeen	
7/2	05:00			01	2.9											√				2/8 14:00	Sabeen	
8/2	04:00			01	3.1											√				2/9 10:00	Meena	
8/2	18:00			01	4.0												√			2/9 10:00	Meena	
8/2	21:00		01		3.8											√				2/11 14:00	Meena	
																					<i><< Transfer Total to Next Page</i>	

Session 9: Handout No:9.2 Obstetric Register**Exercise**

- ✓ Divide participants in groups
- ✓ Fill the information provided in the scenarios in the obstetric register columns. .
- ✓ You have 10 minutes to fill to complete the exercise.

Scenario 1:

- Bushra Bibi w/o Mohammad Azhar,
- Date and time of admission: 3rd Feb 2017 at 1500 hrs
- Age 25 yrs
- Monthly serial: 414
- Para 2
- Cesarean section for Obstructed labor
- Transfusion of 2 bottles of A+ blood
- Baby boy >2.5 kg on 3rd Feb 22hrs by Dr. Shazia
- Discharged on 10th Feb at 900 hrs.

Scenario 2:

- Afroze w/o Noor Mohammad
- Monthly serial 430
- Age 27 years
- Para 0
- Normal Vaginal Delivery with Episiotomy
- Admission on 06-02-2017 at 1400 hrs.
- Baby boy delivered on 7-2-2017 at 1000 hrs.
- Weight at birth 2.9 kg, died at 7-2-06 of hypothermia
- Mother LAMA on 7-2-2017
- Delivery conducted by LHV Farida.

Scenario 3:

- Shazia w/o Lal Mohammad
- Age 18 years
- Para0
- Ante partum hemorrhage
- Monthly serial number 460
- Admission on 12-02-2017 at 10:00 hrs
- Delivered on 12-02-2017 at 1800 hrs
- Baby boy weight 2.6 kg
- Normal vaginal delivery
- Mother died on 13/02/17 at 1:00 pm
- Delivery conducted by LHV Sadia

Scenario 4:

- Kosar w/o Jamshed
- Para 04
- History of caesarian section
- Age 28 years
- Delivered on 19-02-2017 at 1800 hrs
- Baby boy weight 2.0 kg
- Normal vaginal delivery
- Monthly serial number 501 admitted on 18/02/17 at 10:00 hrs.
- baby died on 19/02/17 at 1900 pm, birth asphyxia

Session 9: Handout No: 9.3 Obstetric Register

OBSTETRIC REGISTER (To be maintained at Obstetric Ward/Female Ward/Labor Room)																				
Monthly Obs Serial Number	Time of Admission	Name with Husband's Name	Address	Age (in Years)	Parity	Diagnostics (Complication or illness if any, tick appropriate column)											Preventive and Management			
						Ante Partum Hemorrhage age (APH)	Complications of Abortion	Ectopic Pregnancies	Postpartum Hemorrhage age (PPH)	Pre-Eclampsia/ Eclampsia	Prolonged/ Obstructed Labours	Puerperal Sepsis	Rupture Uterus	Intrauterine Death	Other	Misoprostol given (Tick) if given)	Nature of Delivery (Tick)			Other procedure done (Specify)
																	Normal	Assisted	Cesarean	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
<<Total brought from Previous Pages>>																				
<< Total >>																				

Month:

Year:

Outcome of Pregnancy																(Tick appropriate column)				Date and time of death/discharge/ DOR/LAMA/	Delivery Conducted by (Name / Signature)	Remarks			
Delivery			Live Birth						Neonatal Deaths (Tick appropriate column)						Discharged/ DOR	LAMA	Referred	Maternal Death							
Date	Time	Still Birth (Tick)	Sex (Number of Babies)		Weight in KG (Circle if less than 2.5 Kg)	Preterm (Tick)	Birth Asphyxia	CHX applied (Tick if given)	Birth Trauma	Birth Asphyxia	Bacterial sepsis	Congenital Abnormality	Prematurity	Hypothermia					Complications after delivery (None/ Specify)						
22	23	24	M	F											27	28	29	30		31	32	33	34	35	36
																							<i><< Transfer Total to Next Page</i>		

Session 10: Hospital Other Data

Objectives

By the end of the session the participants will be able to:

- Describe the benefits of the following forms
 - Laboratory Register DHIS-05 (R)
 - Radiology Register DHIS-06 (R)
 - OT Register DHIS-10 (R)
- Fill the forms correctly

Time 60 minutes

Material Computer, Multimedia, Power Point Presentation, handout, copy of the register, Procedures Manual

Method Exercises

Session 10: Handout No: 10.1 Laboratory Register Filled

DHIS- 05 (R) Page No.

Laboratory Register						
Name of Examination: <u>Blood Smear for Malaria</u>				Month: <u>01</u> Year: <u>2017</u>		
Monthly Lab Serial No.	Name with Father/Husband's Name	Age	Fee Paid (Rs.)	OPD	Indoor	Results
				Monthly OPD No.	Ward/Unit/Bed No.	
1	2	3	4	5	6	7
26	Hameed s/o Gull Muhammad	35	10	87		positive P. Falciparum
27	Rab Nawaz s/o Ahmad Ali	20	10	121		Negative
28	Hussain Munir s/o Munir	11	10	133		Negative
29	Mariam Bibi w/o Zahid Ali	9	10	148		Negative
30	Kaloom Bagam w/o Abdul Razzaq	12			Female ward bed no.05	positive P. Falciparum
31	Meeran Baloch w/o Hadi Buksh	45	10	170		positive P. Falciparum
32	Imran s/o Mehmood Ahmad	55	10	181		Negative
33	Babar Ali s/o Ali Khan	6	10	199		Negative
34	Anwar s/o Kabir Ahmed	35	10	202		Negative
35	Sameera w/o Muhammad Yousif	41	10	205		positive P. Falciparum

Session 10: Handout No:10.2 - Laboratory Register

- ✓ Fill the register using the scenarios provided.
- ✓ You have five minutes to complete the exercise

Scenario:

1. On October 04, 2016, Medical Officer advised Mr. Mohammad Sabir s/o Mohammad **Nazir age 50 years with** OPD No.46 for Haemoglobin % estimation and Urine Complete Examination. Laboratory Assistant charged him Rs. 15/- for Blood and Rs.20/- for Urine Examination. Health Facility gave the result next day with Haemoglobin % at 13.1 Gms and No abnormality was detected in Urine examination.
2. On October 05, 2016 Mst. Shakila w/o Mr. Manzoor Ahmad age 16 years admitted on Bed no 11 in Female Ward gave sample of Blood for Hb estimation, ESR and Urine for detailed report. Examination revealed that her Hb was 9.0 Gms and ESR turned out to be at 40 mm / first hour. Few RBCs and 4-5 pus cells were found in her urine.

Session 10: Handout No:10.3 Laboratory Register

Monthly Summary Table

SUMMARY					
Month: January Year: _____					
S.No	Test Name	Total Patients	Free	Paid	Receipt
		(Count from Column No. 1 for each test)	Count from Col. No. 4)	Count from Col. No. 4)	(Total of fee paid recorded in Col. No. 4)

Session 10: Handout No:10.5 Radiology/Ultrasonography/CT Scan/ECG Register Filled

DHIS-06 (R)

Radiology/Ultrasonography/CT Scan/ECG Register													
Name of Examination: <u>X-ray</u>										Month: <u>JAN</u> Year: <u>2017</u>			
Monthly Serial No.	Patient's Name	Age	Investigation Requested	Fee Paid (Rs.)	OPD	Indoor	Size of X-ray Films <i>(Only in case of X-ray)</i>						Findings/Remarks
					Monthly OPD No.	Admission No. with Ward/ Unit /Bed No.	6 X 8	8 X 10	10 X 12	12 X 14	14 x 17 "	Dental (3X1.5)	
1	2	3	4	5	6	7	8	9	10	11	12	13	14
<<Total Brought From Previous Page>>													
Date 02-01-2006													
1	Ahmed s/o Ejaz Ahmed	51	Rt. Leg	10	2			2					Fracture
2	Ghulam Ali s/o Hamid Ali	60	Chest	10	7				2				Pulmonary TB
3	Perviz s/o Muhammad Malook	25	Head	10	21				2				Fracture
4	Aamir s/o Rashid	11	Lt. upper arm	10	28		1						Fracture
Date 03-01-2006													
5	Rukhsana w/o Abdul Jabbar	12	Abdomen			FS02			1				Stone in Rt. kidney
6	Suhail s/o Dilawar khan	44	Rt. wrist	10	39		1						Fracture
7	Fawad s/o Ibrahim	10	Neck	10	54			1					NAD
Date 04-01-2006													
8	Seema d/o Abdullah	10	Rt. ankle	10	59		1						Fracture
9	Roshan Ali s/o Muhammad Juman	12	Lt. index finger	10	63		1						Fracture
10	Fazallulah s/o Saeed Ahmed	70	Hip	10	71				2				Fracture
<< Total >>													<< Transfer Total to Next Page >>

Session 10: Handout No:10.6 - Radiology/Ultrasonography/CT Scan/ECG Register (21)

- ✓ Fill the register using the scenarios provided.
- ✓ You have five minutes to complete the exercise

Scenario :

October 02, 2017

1. Mr. Faqir Mohammad s/o Mr. Nazir Ahmad 25 years old was brought from Emergency Department with Monthly No. 564 splints on his (R) thigh. X-Ray AP/Lat views (R) thigh were advised.
2. Mr. Amir Bux s/o Mr. Allah Dino age 25 years with OPD no. 584 was advised X-Ray Chest PA view by the Doctor. He was complaining of cough more than two weeks. He was charged Rs. 50/-
3. Mst. Sakina Khatoon w/o Mr. Mohammad Moosa 25 years old was sent from Bed No. 02 Female Surgical Ward for X-Ray KUB after full preparation. A radio opaque shadow 1.5 x 1.0 cm was seen in the pelvic region.

Session 10: Handout No:10.7:

Radiology/Ultrasonography/CT Scan/ECG Register

DHIS-06 (R)

Radiology /Ultrasonography/CT Scan/ECG Register													
Name of Examination: _____										Month: _____ Year: _____			
Monthly Serial No.	Patient's Name	Age	Investigation Requested	Fee Paid (Rs.)	OPD	Indoor	Size of X-ray Films <i>(Only in case of X-ray)</i>						Findings/Remarks
					Monthly OPD No.	Admission No. with Ward/ Unit /Bed No.	6 X 8	8 X 10	10 X 12	12 X 14	14 x 17 "	Dental (3X1.5)	
1	2	3	4	5	6	7	8	9	10	11	12	13	14
<i><<Total Brought From Previous Page>></i>													
<i><< Total >></i>													<i><< Transfer Total to Next Page>></i>

Session 10: Handout No:10.8: OT Register Filled DHIS-10 (R)

OT Register														
Specialty Name: <u>General Surgery</u>					Month: <u>JAN</u> Year: <u>2017</u>									
Monthly OT Serial No.	Patient's Name with Father/Husband's Name	Age	Sex	Referred from		Diagnosis	Name of Operation	Type of Anesthesia				Name/Sign of Operating Surgeon	Name of Anesthe tist	Remarks
				OPD	Indoor (Bed No.)			General	Spinal	Local	Without Anesthesia			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
<<Total brought from previous page>>														
1	Yasin s/o Rajab	24	M	14		Laceration	Suture			√				
2	Munir s/o Abdullah	29	M	19		Acute appendicitis	Appendectomy	√						
3	Shaista w/o Jahangir	43	F		F-16	Lymph nodes swelling	Lymph node biopsy			√				
4	Jamil s/o Ahmed	10	M	22		Skin abscess	Incision & drainage			√				
5	Abdul Waheed	54	M		M-20	Rt. Inguinal hernia	Herniorraphy		√					
6	Naheed d/o Shafiq	0	F	27		Perianal abscess	Incision & drainage				√			Ketamine i.m.
7	Khadim Shah	41	M	31										
8	Raheema bibi	52	M		M-3									
9	Ayesha d/o Umer	19	F	39										
10	Shahid s/o Ghulam Nabi	31	F	42										
<<Total >>												<< Transfer Total to Next Page >>		

Session 10: Handout No:10.9: OT Register**Exercise**

- ✓ Distribute the handout of the quiz on OT Register.
- ✓ Answer the questions under each scenario provided.
- ✓ You have 10 minutes to complete the exercise

Scenario:

1. October 04, 2016. Mr. Kashif s/o Mr. Mohammad Nawaz aged 15 years from Bed no 05 Male Surgical Ward was brought to Operation Theatre with diagnosis of Acute Appendicitis. Dr. Zulfikar under General Anesthesia performed Appendectomy.

Quiz:

- a. Write down the column No.s that you will fill for this case: _____
 - b. In which column you will fill the name of the Surgeon performing the operation?

2. October 04, 2016. Mst. Surrayia Begum w/o Haji Noor Mohammad aged 40 years from Bed no 01 of Female Ward was suffering from Chronic Cholecystitis. Dr. Nasreen under General Anesthesia operated upon her. Gall Bladder was removed and sent to Laboratory for biopsy.

Quiz:

- a. In which column you will enter the diagnosis of this case? _____
 - b. In which column you will enter the information that the specimen was sent for biopsy?

3. October 05, 2016. Mr. Naiz Hussain s/o Mr. Jamal Din aged 22 years from OPD with ticket no 10507 is brought to OT with Ingrowing Nail (L) Toe. Dr. Khalid removed ingrown Toe Nail under Local Anesthesia.

Quiz:

- a. Write down the Column No.s that you will fill for this case: _____
 - b. In which column you will write from where the patient has been sent to the OT for operation? _____
 - c. In which column you will fill the name of the operation? _____
4. October 06, 2016. Mr. Kamran s/o Mr. Ali Hassan with OPD ticket no. 10544 suffering from Injection Abscess (R) Buttock was operated upon by Dr. Khalid. Incision & Drainage was performed with Anesthesia with Injection Ketamine.

Quiz:

- a. In which column you will enter the procedure performed? _____
- b. In which column you will enter the information the type of anesthesia used?

Session 10: Handout No:10.11:

**OT Register
Monthly Summary**

Year: _____

	January	February	March	April	May	June	July	August	September	October	November	December	Year Total
General Anesthesia Total of Col. No. 9													
Spinal Anesthesia Total of Col. No. 10													
Local Anesthesia Total of Col. No. 11													
Without Anesthesia Total of Col. No. 12													
Total Total of the above rows													

Session11: Monthly Reports & Facility Staff Meetings

Objectives

By the end of the session the participants will be able to:

- Describe the benefits of the Monthly report form
- Transfer data from registers and special program forms to monthly report
- Describe differences between
PHC Monthly Report - DHIS-21(MR)
Secondary Hospital Monthly Report. DHIS-22(MR)
- Calculating performance indicators
- Interpreting monthly report
- Documenting DHIS based decisions in
Facility Staff Meeting Register DHIS-20(R)

Time 105 minutes

Material Computer, Multimedia, Power Point Presentation, handouts, copy of the registers, Procedures Manual.

Method Discussion, group exercise

Session 11: Handout No:11:Monthly Reports

Exercise: Divide the participants in 4- 5 groups.

- Following registers are included for the exercise. This is not the complete list but provides technique how to transfer data from register to monthly report form.

1. PHC Facility Monthly Report	11.1
2. Outpatient Register	11.2
3. OPD Abstract Form	11.3
4. Family Planning Register	11.4
5. Maternal Health Register	11.5
6. Community Meeting Register	11.6
7. Stock Register	11.7
8. Secondary Hospital Monthly Report	11.8

- You are supposed to calculate total number in different registers and transfer data from registers and abstract forms to monthly report form

Please note that when you transfer data for hospital monthly report then use indoors registers. The forms are provided for hospital based staff and not necessary to use during this exercise.

You have 15 minutes to complete this exercise

Month : Year: 20 _____
 Total Working Days _____

PHC Facility Monthly Report
 Date of Submission _____
 District _____

Date: _____

Section I: Identification								
1.	Facility ID					4.	Name & Signature of Facility In-charge:	
2.	Facility Name							
3.	Taluka						5.	Designation:

Section II: Monthly Performance (Number or % as appropriate)		Monthly Target	Performance
1.	Total OPD Attendance		
2.	Children <12 months received 1st Measles vaccine		
3.	Antenatal Care (ANC-1) coverage		
4.	Total FP clients (New + Follow-up)		
5.	Delivery coverage at facility		
6.	Monthly report data accuracy		

Section III: Outpatients Attendance (From OPD Register)			01 month	01-11 months	01-4 years	05-14 years	15-49 years	50+ years	Total
1.	Male (New Cases)								
2.	Female (New Cases)								
Grand Total									
3.	Follow-up cases.		4.	Referred cases attended					
5.	No. of cases of Malnutrition < 5 Yrs children (Acute-low weight for Age)		6.	No. of cases of Malnutrition < 5 Yrs children (Acute -MUAC <12.5 cm)					
7.	No. of cases of Malnutrition < 5 Yrs children (Chronic-short height for age)		8.	Total Homeo cases					
9.	Total Tibb/Unani								

Section IV: Cases Attending OPD (From OPD Abstract Form)			
Respiratory Diseases		Endocrine Diseases	
1	Acute (upper) respiratory infections	32	Diabetes Mellitus
2	Pneumonia < 5 yrs.	33	Goiter
3	Pneumonia > 5 yrs.	34	Hypo Thyroidism
4	TB Suspects	35	Hyper Thyroidism
5	Chronic Obstructive Pulmonary Diseases	Neuro-Psychiatric Diseases	
6	Asthma	36	Depression
Gastro Intestinal Diseases		37	Drug Dependence
7	Diarrhea < 5 yrs	38	Epilepsy
8	Dysentery < 5 yrs	39	Children/adolescent with abnormal behavior
9	Diarrhea / Dysentery > 5 yrs	Eye & ENT	
10	Enteric/Typhoid Fever	40	Cataract
11	Worm Infestations	41	Trachoma
12	Peptic Acid Diseases	42	Glaucoma
13	Biliary Disorders	43	Conjunctivitis
		44	Otitis Media

Urinary Tract Diseases			
14	Urinary Tract Infections	Oro - Dental Diseases	
15	Renal Calculi	45	Dental Caries
16	End Stage Renal Disease (ESRD)	46	Periodontitis
17	Sexually Transmitted Infections (STIs)	47	Sub Mucosal Fibrosis
18	Benign Enlargement of Prostrate	48	Oral Ulcers
Vector Borne Diseases		Injuries /Poisoning	
19	Suspected Malaria	49	Road traffic accidents
20	Suspected Dengue Fever	50	Fractures
21	Suspected Chikungunya	51	Burns
22	Suspected Cutaneous Leishmaniasis	52	Dog bite
Vaccine Preventable Diseases		53	Snake bite (with signs/ symptoms of poisoning)
23	Suspected Measles	Neonatal Diseases	
24	Suspected Viral Hepatitis	54	Birth Asphyxia
25	Suspected Neonatal Tetanus	55	Neonatal Sepsis
Cardiovascular Diseases		Miscellaneous Diseases	
26	Ischemic Heart Disease	56	Fever due to other causes
27	Hypertension	57	Suspected Meningitis
Skin Diseases		58	Acute Flaccid Paralysis
28	Scabies	59	Suspected HIV/AIDS
29	Dermatitis	Any Other unusual Diseases (Specify)	
30	Fungal Infection	60	
31	Impetigo	61	

Section V: Immunization (From EPI Monthly Report of HF)

1	Children <12 months received 3rd Pentavalent vaccine		3	Pregnant Women received TT-2 vaccine	
2	Children <12 months received 1st Measles vaccine				

Section VI: TB-DOTS (From TB Register, TB Card TB-01)

1	Number of diagnosed cases AFB+ve / clinical/extra Pulmonary		3	Number of TB cases completed treatment during the month	
2	Number of TB cases started treatment during the month				

Section VII: Family Planning Services (From FP Register)

1.	Total FP new clients		6.	Net-En Inj clients		11.	Vasectomy Clients	
2.	Total FP follow-up clients		7.	Condom clients		12.	Implant clients	
3.	COC clients		8.	IUCD clients		13.	PP Implant clients	
4.	POP clients		9.	PPIUCD clients		14.	Counseling provided on FP	
5.	DMPA Inj. Clients		10.	Tubal Ligation clients				
Contraceptive Commodities (From Stock Register)			Balance during the month					
			Opening	Received	Consumed	Closing		
1	Condom (pieces)							
2	Oral pill-COC (cycles)							
3	Oral pill-POP (cycles)							
4	IUCD (pieces)							
5	Injection DMPA (vials)							
6	Injection Net-En							
7	Implant							
8	Any other (Specify)							

Section VIII: Maternal and Newborn Health *(From Maternal Health & Obstetric*

1	ANC-1		13	Normal Vaginal Deliveries	
2	ANC-1 women with Hb. <10 g/dl		14	Assisted Deliveries	
3	ANC-2		15	Cesarean Sections	
4	ANC-3		16	Total Live births	
5	ANC-4 or More		17	Live births with LBW (< 2.5kg)	
6	PNC-1		18	Preterm Live births	
7	PNC-2		19	Birth Asphyxia	
8	PNC-3		20	Neonatal sepsis	
9	PNC-4		21	Stillbirths	
10	Malnourished Pregnant women (ANC-1)		22	Neonates received Chlorohexidine (CHX)	
11	Malnourished Lactating women (PNC-1)		23	Neonatal deaths in the facility	
12	PW given Misoprostol Tables		24	Women Referred for PPIUCD	

Section IX: Community Meetings*(From Community Meeting Register)*

			Number of Participants	
			Male	Female
1.	No. of community meetings			
2.	No. of Health Education Sessions			

Section X: Diagnostic Services *(From Laboratory Register / TB Lab Register/ Radiology Register)*

	Services Provided	OPD	Indoor		Services Provided	OPD	Indoor
1.	Total Lab Investigations			3.	Total Ultra Sonographies		
2.	Total X-Rays			4.	Total ECGs		

Laboratory Investigation for Communicable Diseases

Malaria		T.B		Viral Hepatitis	
1.	Slides examined	1.	Slides for AFB Diagnosis (New)	1.	Patients screened
2.	Slides MP +ve	2.	Slides diagnosed cases (AFB+ve)	2.	Hepatitis B +ve
3.	Slides P. falciparum +ve			3.	Hepatitis C +ve
4.	Sides of P. Vivax +ve				
5.	Rapid Diagnostic Test (RDT)				

Section XI-A: Stock out Report: Stock out of tracer drugs for any number of days this month *(From Stock Register For Medicine/Supplies)* Write 0 (Zero) for available and 1 (One) for not available

1.	Cap. Amoxicillin		9.	Tab. Diclofenac		17.	Tab. Iron/Folic Acid	
2.	Tab. Amoxicillin Dispersible		10.	Syp Paracetamol		18.	ORS (low Osmolarity)	
3.	Syp. Amoxicillin		11.	Inj. Diclofenac		19.	Chlorohexidine (CHX)	
4.	Tab. Cotrimoxazole		12.	Tab. Chloroquin		20.	Tab. Misoprostol	
5.	Syp Cotrimoxazole		13.	Syp. Salbutamol		21.	Inj. Magnesium Sulfate	
6.	Tab. Metronidazole		14.	Syp. Anthelmintic		22.	Syp. Zinc Sulphate	
7.	Syp. Metronidazole		15.	I/V infusions		23.	Zinc Tablet (DT)	
8.	Inj. Ampicillin		16.	Inj. Dexamethasone		24.	Anti-Snake Venom	

Section XI-B: Stock out Report: Vaccines. (write 0 (Zero) for available & 1 (One) for not available)

1.	BCG Vaccine		5.	Hepatitis -B		8.	Rota virus vaccine	
2.	Pentavalent vaccine		6.	Measles vaccine		10.	Anti-Rabies vaccine	
3.	OPV		7.	Tetanus Toxoid		11.	Vaccine syringes	
4.	IPV vaccine		8.	PCV-10 vaccine				

Section XII-A: Indoor Services (From Daily Bed Statement Register)										
	Allocated Beds	Admissions	Discharged/DOR (not on the same day of admission)	Discharged/DOR on same day of admission	LAMA	Referred	Deaths	Total of Daily Patient Count	Bed Occupancy	Average Length of Stay (ALS)
1.	Male								%	
2.	Female								%	

Section XII-B: Cases Attending Indoor (From Indoor Register / Obstetric Register)			
		Total Number of Admissions	Total Number of Deaths
1	Diarrhea < 5 yrs.		
2	Dysentery < 5 yrs.		
3	Pneumonia <5 yrs.		
4	Malaria		
5	Pulmonary Tuberculosis		
6	Obstetric / Maternal Complication		
7	Other cases		
	Total		

Section XIII: Surgeries (From OT Register)			
1.	Operations under GA		3. Operations under LA
2.	Operations under Spinal Anesthesia		4. Procedures done without Anesthesia

Section XIV: Human Resource Data (From Facility Records)				
	Post Name/Category	Sanctioned	Vacant	Contract
1	Medical Superintendent			
2	Senior Medical Officer			
3	Pediatrician			
4	Gynecologist			
5	Medical Officer			
6	Women / Lady Medical Officer			
7	Dental Surgeon			
8	Staff Nurse (Female)			
9	Staff Nurse (Male)			
10	Lab Technician			
11	Dental Technician			
12	X-Ray Technician			
13	Health Technician			
14	Lady Health Visitor			
15	Dispenser			
16	EPI Vaccinator			
17	Midwife			
18	Others			
19	Number of LHWs reporting at HF			

Section XV-A: Revenue Generated (From Receipt Register)				Total Receipt	Deposited
		Total Receipt	Deposited		
				5. X-Ray	Rs.
1.	OPD	Rs.		6. Ultrasound	Rs.
2.	Indoor	Rs.		7. Dental Procedures	Rs.
3.	Laboratory	Rs.		8. Ambulance	Rs.
4.	ECG	Rs.		9. Others	Rs.

Section XV-B: Financial Report-for the Current Fiscal Year (From Budget and Expenditure Statement) (For RHC ONLY)					
		Total Allocation for the fiscal year	Total Budget Released to-Date	Total Expenditure to-Date	Balance to Date
1.	Salary & Allowances (Establishment charges)	Rs.	Rs.	Rs.	Rs.
2.	Non-Salary (Operating Expenses)	Rs.	Rs.	Rs.	Rs.
3.	Utilities	Rs.	Rs.	Rs.	Rs.
4.	Medicine	Rs.	Rs.	Rs.	Rs.
5.	General Stores	Rs.	Rs.	Rs.	Rs.
6.	M&R Equip/Transport/Furniture	Rs.	Rs.	Rs.	Rs.
7.	M&R Building Dept	Rs.	Rs.	Rs.	Rs.
8.	O t h e r s	Rs.	Rs.	Rs.	Rs.
9.	Annual Development Plan	Rs.	Rs.	Rs.	Rs.

Section XVI: Ambulance Service (Source facility record)			
Total Number	On Road	Off Road	
		Repairable	Condemn

Section XVII-A: Waste Disposal (Source facility record)								
Daily Hospital Waste (kg)	Method of Waste Disposal (Write ZERO (0) if method is in use & One (1) if method is Not in use)					Incinerator		
	Pit Hole	Disposal Through Municipality	Burnt	Incineration	Any Other Method	Number	Functional	Non-
								Page 5

Section - XVII-B Source of Drinking Water (Source facility record) (Write Zero (0) for Yes and One (1) for No)									
Municipality water Supply	Hand Pump	Well	Filter Plant	Electric Water Cooler with Filter	Mineral Water	R.O Plant		Safe Drinking Water (Certified / Tested)	
						Total Number	Functional Number	Yes	No.
1	2	3	4	5	6	7	8	9	10

Section XVIII: Availability of Services at Primary Health Care (Source facility record) (Write ZERO (0) if service is Functional, One (1) if service is Non-functional & Two (2) if service is Not Applicable)					
	Service Type	Status		Service Type	Status
1	OPD		21	Hb Measurement	
2	EPI		22	Sputum AFB	
3	ANC		23	Dengue RTD	
4	PNC		24	Malaria Microscopy	
5	FP		25	Malaria RTD	
6	BEmONC		26	TB Treatment	
7	CEmONC		27	Nutrition Services	
8	Health education		28	Measurement of Nutrition Status of Children <5	
9	Indoor		29	Measurement of Nutrition Status of Pregnant Women	
10	Labour Room		30	Measurement of Nutrition Status of Lactating Women	
11	Minor OT		31	Blood Transfusion	
12	Major OT		32	Dental Services	
13	Delivery		33	Public Toilets	
14	C-Section		34	Water Supply	
15	Laboratory		35	Safe Drinking Water	
16	Ultrasound		36	Electricity / Transformer	
17	X-Ray		37	Generator	
18	Dental X-Ray		38	Solar System	
19	ECG		39	Waste Management	
20	Blood screening (Hepatitis B&C, HIV)		40	Ambulance	

Section XIX – Achievements/ Issue

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Session 11: Handout No: 11:2

OUT PATIENT DEPARTMENT (OPD) REGISTER

DHIS-03 (R)

Month: Feb Year: 2017

Monthly OPD Serial No. (New cases)	Follow-up Cases (Put tick only)	Name with Father / Husband Name	Address	SEX & AGE CATEGORY (Tick in appropriate column)												MALNUTRITION (Only for <5 Years Children) Tick if			Referred from (if applicable)	Diagnosis	Action Taken/ Special Remarks		
				Male						Female						Acute		Chronic					
				<1 Month	1-11 Months	1-4 Yrs	5-14 Yrs	15-49 Yrs	50+	<1 Month	1-11 Months	1-4 Yrs	5-14 Yrs	15-49 Yrs	50+	Low weight for- Age	MUAC <12.5cm	Short Height- for-Age					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		
		<<Total Brought from Pervious Page>>																					
			01-Feb																				
1		Asma Bibi D/o Atif	Tarlai									✓										Acute URI	Syp.Paracetamol 1 TSF SoS
2		MuhammadSharif s/o Ejaz	Tarlai						✓													Fracture of Rt. Calcium	X-rayRt. AnkleAP/Lat
3		Fatima Beghum W/O M. Malik	Jhang Syedan											✓					LHW Asia		Rheumatoid arthritis		
4		Ghulam Hussain s/o HamidHussain	Ghagri		✓												✓					Diarrhoea	
5		Rabia W/O M. Aslam	Koral					✓														Amoebic dysentery	
6		M. Khalil s/o Ikram	Humak					✓														Enteric Fever	
7		Allah Bakhsh S/o Suleman	Pind bagwal						✓													Bronchial asthma	
8		M. Amjad s/o M. Asraf	Tramri					✓														Acute URI	
9		Shahida D/o Qamar Idrees	Tarlai									✓					✓					Pneumonia	Admission to the Female Ward
10		Obaid-ullah s/o Saif-ullah	Ali Pur				✓															Acute Flaccid Paralysis	Reporting & stool Sampling

Session 11: Handout No: 11.3 Abstract Form DHIS-03 (F)

OPD Abstract Form at _____ OPD Month: _____ Year: 20 _____

Dates: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

Priority Health Problems		Tally	Total
1		2	3
Respiratory Diseases			
1	Acute (upper) respiratory infections		
2	Pneumonia < 5 yrs.		
3	Pneumonia > 5 yrs.		
4	TB Suspects		
5	Chronic Obstructive Pulmonary Diseases		
6	Asthma		
Gastro Intestinal Diseases			
7	Diarrhea < 5 yrs		
8	Dysentery < 5 yrs		
9	Diarrhea / Dysentery > 5 yrs		
10	Enteric/Typhoid Fever		
11	Worm Infestations		
12	Peptic Acid Diseases		
13	Biliary Disorder *		
Urinary Tract Diseases			
14	Urinary Tract Infections		
15	Renal Calculi		
16	End Stage Renal Disease (ESRD) *		
17	Sexually Transmitted Infections (STIs)		
18	Benign Enlargement of Prostrate *		
Vector Borne Diseases			
19	Suspected Malaria		
20	Suspected Dengue Fever		
21	Suspected Chikungunya		
22	Suspected Cutaneous Leishmaniasis		
Vaccine Preventable Diseases			
23	Suspected Measles		
24	Suspected Viral Hepatitis		
25	Suspected Neonatal Tetanus		
Cardiovascular Diseases			
26	Ischemic heart disease		
27	Hypertension		
Skin Diseases			
28	Scabies		
29	Dermatitis		
30	Fungal Infection		
31	Impetigo		
Endocrine Diseases			
32	Diabetes Mellitus		
33	Goiter		
34	Hyper Thyroidism *		

35	Hypo Thyroidism*		
Neuro-Psychiatric Diseases			
36	Depression		
37	Drug Dependence		
38	Epilepsy		
39	Children/adolescent with abnormal behavior		
Eye & ENT			
40	Cataract		
41	Trachoma		
42	Glaucoma		
43	Conjunctivitis		
44	Otitis Media		
Oro - Dental Diseases			
45	Dental Caries		
46	Periodontitis		
47	Sub Mucosal Fibrosis		
48	Oral Ulcers		
Injuries / Poisoning			
49	Road traffic accidents		
50	Fractures		
51	Burns		
52	Dog bite		
53	Snake bite (with signs/ symptoms of poisoning)		
Neonatal Diseases			
54	Birth Asphyxia		
55	Neonatal Sepsis		
Miscellaneous Diseases			
56	Fever due to other causes		
57	Suspected Meningitis		
58	Acute Flaccid Paralysis		
59	Suspected HIV/AIDS		
Any Other Unusual Disease (Specify)			
60			
61			
62			

Session 11: Handout No:11.4

Family Planning Register

DHIS-11 (R)

Family Planning Register Year: _____ Month: _____																		
Yearly FP Client No. (New client)	Follow-up Client No. (Previous Yearly No./ Year of registration)	Client Name with Spouse Name	Age	Address	Clients by Method													Others
					Tick appropriate column													
					Pills		Condom (clients)	Injections		IUCD		Implant	PP Implant	Tubal Ligation	Vasectomy	Counseling		
Combined Oral Contraceptives (COC)	Progestrone only Pills (POP)	NET-EN	DPMA	Cu-T 380A	PPIUCD													
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	
<<Total Brought From Previous Page>>																		
121		Mahnoor w/o M. Baloch	21	Tumair	√													
122		Nazeeran w/o Zahoor	37	Phulgran			√											
	16/05	Afroze w/o Khadim Hussain	48	Ghagri		√												
123		Nazia w/o Riaz Ahmed	19	Shah Allah Ditta						√								
	256/05	Khalida w/o Tahir Ali	22	Humak		√												
124		Shamim w/o Saifullah	26	Tarlai					√									
	75/04	Tahira w/o Jamaludin	20	Ali Pur			√											
	165/05	Salma w/o Niaz Hussain	45	Karal		√												
	42/05	Ayesha w/o Zulfikar Ali	31	Ghauri										√				
	354/04	Abida w/o Ghulam Muhammad	34	Bhara Kahu			√											
<<Transfer Total to Next Page>>					1	3	3	0	1	1	0	0	0	1	0	0		

Session 11: Handout No:11.5

Maternal Health Register

MATERNAL HEALTH REGISTER Month: _____ Year: _____																		
Yearly MH Serial No. (New cases)	Follow-up Cases (Previous yearly No./Year of registration)	Name With Husband Name	Age (in years)	Address	EDD	Hb (circle if <10 gm/dl)	ANC Services				PNC Services				Nutrition Status of women (MUAC) Tick if <21 cm		TT Vaccination Advice (Tick only)	Other Services (Investigations / Referrals)
							ANC1	ANC2	ANC3	ANC4 OR MORE	PNC1	PNC2	PNC3	PNC4 OR MORE	During pregnancy	During Lactation		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
<<Total brought from previous page>>																		
834		Mahnor w/o M. Baloch	42	Sohan	1-7-06	11.2	✓										✓	Twins
	1001/05	Shakeela w/o Ahmed Ali	21	Humak	3-4-06				✓								✓	
		Nazia w/o Ghulam Muhammad	18	Rawat	5-3-06	10.8		✓									✓	
	987/05	Bushra w/o Wahid Buksh	17	Dhok Malyar							✓						✓	
835		Afhan w/o Khan Muhammad	33	Dhok Boota	2-8-06	9.6	✓										✓	
	1321/05	Fatima w/o Khadim Hussain	39	Tarnol									✓				✓	
836		Mehnaz w/o Abid Ali	24	Bhara Kahur	8-8-06	9.2	✓										✓	Breech Position
837		Khaleda w/o Akram	48	Jhang Sayedan	3-9-06	8.9	✓										✓	
	1102/05	Bashira w/o M. Raheem	19	Gokina										✓			✓	
838		Samina w/o Ali Hassan	28	Mohra Rajput	9-9-06		✓										✓	
5	5	<< Transfer Total to Next Page >>					3	5	1	1	0	1	0	1	1			10

Session 11: Handout No:11.6

Community Meeting Register

DHIS-19 (R)

COMMUNITY MEETINGS REGISTER											Month: _____	Year: _____
Date	Activity		Place			Number of Participants		Topics Discussed	Recommendation	Sign of Facility In-charge		
	Meeting	H E Session	At Facility	Community	LHW Houses	Male	Female					
1	2	3	4	5	6	7	8	9	10	11		
2/6	✓		✓			5		Sanitation		Fida Hussain		
2/13	✓			✓			10	Family planning	Meeting with male participants	Fida Hussain		
2/20	✓				✓		20	Immunization	Camp at LHWs house	Fida Hussain		
2/27		✓			✓		10	Maternal Health	More frequent meetings with community	Fida Hussain		
3/6	✓			✓		10		NID		Fida Hussain		
3/13	✓			✓		10		Nutrition	Availability of iodized salt	Fida Hussain		
3/20		✓			✓		20	Anti-Tobacco	Strict regulations at public places	Fida Hussain		
3/27	✓		✓			13		AIDS	More campaigns	Fida Hussain		
4/3	✓		✓				20	Maternal and newborn health	Meeting with husbands/male	Fida Hussain		
4/10	✓		✓				22	Breast feeding	Discourage formula milk sale near hospitals	Fida Hussain		

STOCK REGISTER Medicines/ Supplies								
Name of Article: <u>Tab. Cotrimoxazole</u> Unit/Strength <u>DS</u>								
Minimum Recommended Stock Level: <u>180</u> (Take action for replenishment if the minimum level is reached)								
Date	Issued to /Received From with Reference No.	Quantity				Store Keeper Signature	Counter Sign	Remarks (Tick if balance '0')*
		Received	Issued	Discarded	Balance			
1	2	3	4	5	6	7	8	9
	<i>Balance brought forward</i>							
½	Balance brought forward from previous page No. 3				400	<i>Aqeel</i>	<i>Amjad</i>	
6/2	Issued to Female Surgical Ward		30		370	<i>Aqeel</i>	<i>Amjad</i>	
12/2	Issued to Casualty Outdoor		30		340	<i>Aqeel</i>	<i>Amjad</i>	
15/2	Issued to Male Surgical Ward		30		310	<i>Aqeel</i>	<i>Amjad</i>	
25/2	Issued to Male Surgical Ward		30		280	<i>Aqeel</i>	<i>Amjad</i>	
28/2	Issued to Female Surgical Ward		30		250	<i>Aqeel</i>	<i>Amjad</i>	
2/3	Received from EDOH vide voucher no. 302/M dated 26-2-06	300			550	<i>Aqeel</i>	<i>Amjad</i>	
9/3	Issued to Casualty Outdoor		30		520	<i>Aqeel</i>	<i>Amjad</i>	
16/3	Issued to Female Surgical Ward		30		490	<i>Aqeel</i>	<i>Amjad</i>	

Session 11: Handout No: 11:8

DHIS – 22 (MR)

Secondary Hospital Monthly Report

Month: _____ Year: 20__
 Total Working Days _____

Date of Submission
 District _____

Section-I: Identification										
1.	Facility ID									4. Name & Signature of Facility In-charge:
2.	Facility Name									
3.	Taluka							5. Designation:		

Section-II: Monthly Performance (Number or % as appropriate)		Monthly Target	Performance	Indicator	Monthly Target	Performance
1.	Total OPD attendance			7	C-Section performed	
2.	Children < 12 months received 1st Measles Vaccine			8	Lab services utilization	
3.	Antenatal Care(ANC-D)coverage			9	Bed occupancy rate	
4.	Total FP clients (New +follow-up)			10	LAMA	
5.	Delivery coverage at facility			11	Hospital death rate	
6.	Obstetric complications attended			12	Monthly report data accuracy	

Section-III :Out patients Attendance (From OPD Register)

Specialty	New Cases										Total	Follow-up	No. of cases of Malnutrition < 5 Years			Referred Attended	
	MALE					FEMALE							Acute (Low Weight for Age)	Acute (MUAC <12.5 cm)	Chronic (short Height for Age)		
	< 1 Month	1-11 Months	1--4	5--14	15--49	50+	< 1 Month	1-11 Months	1--4	5--14							15--49
1. General OPD																	
2. Medicine																	
3. Surgery																	
4. Orthopedics																	
5. OB/GYN																	
6. Pediatrics																	
7. Chest Diseases																	
8. Hepatitis Sentinel Site																	
9. Cardiology																	
10. Eye																	
11. ENT																	
12. Dental																	
13. Skin																	
14. Psychiatry																	
15. Emergency/Casualty																	
16. Others																	

Grand Total																					
--------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Section IV: Cases Attending OPD (From OPD Abstract Form)	
Respiratory Diseases	
1	Acute (upper) respiratory infections
2	Pneumonia < 5 yrs.
3	Pneumonia > 5 yrs.
4	TB Suspects
5	Chronic Obstructive Pulmonary Diseases
6	Asthma
Gastro Intestinal Diseases	
7	Diarrhea < 5 yrs
8	Dysentery < 5 yrs
9	Diarrhea / Dysentery > 5 yrs
10	Enteric/Typhoid Fever
11	Worm Infestations
12	Peptic Acid Diseases
13	Biliary Disorders
Urinary Tract Diseases	
14	Urinary Tract Infections
15	Renal Calculi
16	End Stage Renal Disease (ESRD)
17	Sexually Transmitted Infections (STIs)
18	Benign Enlargement of Prostrate
Vector Borne Diseases	
19	Suspected Malaria
20	Suspected Dengue Fever
21	Suspected Chikungunya
22	Suspected Cutaneous Leishmaniasis
Vaccine Preventable Diseases	
23	Suspected Measles
24	Suspected Viral Hepatitis
25	Suspected Neonatal Tetanus
Cardiovascular Diseases	
26	Ischemic Heart Disease
27	Hypertension
Skin Diseases	
28	Scabies
29	Dermatitis
30	Fungal Infection
31	Impetigo
Endocrine Diseases	
32	Diabetes Mellitus
33	Goiter
34	Hypo Thyroidism
35	Hyper Thyroidism
Neuro-Psychiatric Diseases	
36	Depression
37	Drug Dependence
38	Epilepsy
39	Children/adolescent with abnormal behavior
Eye & ENT	
40	Cataract
41	Trachoma
42	Glaucoma
43	Conjunctivitis
44	Otitis Media
Oro - Dental Diseases	
45	Dental Caries
46	Periodontitis
47	Sub Mucosal Fibrosis
48	Oral Ulcers
Injuries /Poisoning	
49	Road traffic accidents
50	Fractures
51	Burns
52	Dog bite
53	Snake bite(with signs/ symptoms of poisoning)
Neonatal Diseases	
54	Birth Asphyxia
55	Neonatal Sepsis
Miscellaneous Diseases	
56	Fever due to other causes
57	Suspected Meningitis
58	Acute Flaccid Paralysis
59	Suspected HIV/AIDS
Any Other unusual Diseases (Specify)	
60	
61	

Section V: Immunization (From EPI Monthly Report of HF)			
1	Children <12 months received 3rd Pentavalent vaccine:	3	Pregnant Women received TT-2 Vaccine
2	Children <12 months received 1st Measles vaccine		

Section VI: TB-DOTS (From TB Card TB-01)			
1	Number of diagnosed cases AFB+ve / clinical/extra Pulmonary	3	Number of TB cases completed treatment during the month
2	Number of TB cases started treatment during the month		

Section VII: Family Planning Services (From FP Register)					
1.	Total FP new clients	6.	Net-En Inj clients	11.	Vasectomy Clients
2.	Total FP follow-up clients	7.	Condom clients	12.	Implant clients
3.	COC clients	8.	IUCD clients	13.	PP Implant clients
4.	POP clients	9.	PPIUCD clients	14.	Counseling provided on FP
5.	DMPA Inj. clients	10.	Tubal Ligation clients		

Contraceptive Commodities (From Stock Register)	Balance during the month			
	Opening	Received	Consumed	Closing
1. Condom (pieces)				
2. Oral pill-COC (cycles)				
3. Oral pill-POP (cycles)				
4. IUCD (pieces)				
5. Injection DMPA (vials)				
6. Injection Net-En				
7. Implant				
8. Any other (Specify)				

Section VIII: Maternal and Newborn Health (From Maternal Health & Obstetric registers)

1. ANC-1		13.	Normal Vaginal Deliveries	
2. ANC-1 women with Hb. <10 g/dl		14	Assisted Deliveries	
3. ANC-2		15	Cesarean Sections	
4. ANC-3		16	Total Live births	
5. ANC-4 or More		17.	Live births with LBW (< 2.5kg)	
6. PNC-1		18.	Preterm Live births	
7. PNC-2		19	Birth Asphyxia	
8. PNC-3		20	Neonatal sepsis	
9. PNC-4		21	Stillbirths	
10. Malnourished Pregnant women (ANC-1)		22	Neonates received Chlorhexidine (CHX)	
11. Malnourished Lactating women (PNC-1)		23	Neonatal deaths in the facility	
12. PW given Misoprostol Tables		24	Women Referred for PPIUCD	

Section-IX: Community Meetings (From Community Meeting Register)

		Number of Participants	
		Male	Female
1.	No. of community meetings		
2.	No. of Health Education Sessions		

Section X: Diagnostic Services (From Laboratory Register / TB Lab Register/ Radiology Register)

	Services Provided	OPD	Indoor		Services Provided	OPD	Indoor
2.	Total X-Rays			4.	Total ECGs		

Laboratory Investigation for Communicable Diseases

Malaria		T.B		Viral Hepatitis	
1.	Slides examined	1.	Slides for AFB Diagnosis (New)	1.	Patients screened
2.	Slides MP +ve	2.	Slides Diagnosed cases (AFB+ve)	2.	Hepatitis B +ve
3.	Slides P. falciparum +ve			3.	Hepatitis C +ve
4.	Sides of P. Vivax +ve			HIV	
5.	Rapid Diagnostic Test			1.	HIV +

Section XI-A: Stock out Report: Stock out of tracer drugs for any number of days

This month (From Stock Register for Medicine/Supplies) Write 0 (Zero) for available and 1 (One) for not available

1.	Cap.Amoxicillin	9.	Tab.Diclofenac	17.	Tab.Iron/Folic Acid
2.	Amoxicillin Dispersible Tablet	10.	SypParacetamol	18.	ORS (low Osmolarity)
3.	Syp.Amoxicillin	11.	Inj.Diclofenac	19.	Chlorohexidine (CHX)
4.	Tab.Cotrimoxazole	12.	Tab.Chloroquin	20.	Tab: Misoprostol
5.	Syp Cotrimoxazole	13.	Syp.Salbutamol	21.	Inj: Magnesium Sulfate
6.	Tab.Metronidazole	14.	Syp.Antihelminthic	22.	Syp: Zinc SulphateDTDDTDispersible
7.	Syp.Metronidazole	15.	I/Vinfusions	23.	Zinc Tablet (DT)
8.	Inj.Ampicillin	16.	Inj. Dexamethasone	24.	Anti-Snake Venom

Section XI-B: Stock out Report: Vaccines.(write 0 (Zero) for available & 1 (One) for not available)							
1.	BCG Vaccine		5	Hepatitis –B vaccine		8	Rota virus vaccine
2.	Pentavalent vaccine		6	Measles vaccine		10	Anti-Rabies vaccine
3.	OPV		7	Tetanus Toxoid		11	Vaccine syringes
4.	IPV vaccine		8	PCV-10 vaccine			

Section-XII-A: Indoor Services (From Daily Bed Statement Register)											
Specialty	Allocated Beds	Admissions	Discharged/ DOR (not on the same day of admission)	Discharged/ DOR on same day of admission	LAMA	Referred	Deaths	Total of Daily Patient Count	Bed Occupancy	Average Lengthof Stay(ALS)	
1.	Medicine								%		
2.	Surgery								%		
3.	Dialysis										
4.	Orthopedics								%		
5.	OB/GYN								%		
6.	Pediatrics								%		
7.	TB / Chest Diseases								%		
8.	Cardiology								%		
9.	Eye								%		
10.	ENT								%		
11.	Dental								%		
12.	Skin								%		
13.	Psychiatry								%		
14.	Others								%		
GrandTotal											%

Section XII - B: Cases Attending Indoors (From Abstract Form for Indoor)							
Diseases		Total Admission	Total Death			Total Admission	Total Death
Medical				ENT			
1	Diarrhea < 5			39	Chronic Otitis Media		
2	Dysentery < 5			40	DNS		
3	Diarrhea/Dysentery > 5			41	Tonsillitis		
4	Pneumonia < 5			Neurological/Neurosurgical			
5	Pneumonia > 5			42	CVA/Stroke		
6	Malaria			43	Head Injuries		
7	Dengue Fever			Mental Behavioral Disorder			
8	Dengue Hemorrhagic Fever			44	Drug Abuse (Psycho-Active substance use)		
9	Chikungunya			45	Mental Disorder		
10	Asthma			Neo-natal Diseases /Problems			
11	Chronic Obstructive Pulmonary Disease (COPD)			46	Birth Trauma		
12	Pulmonary Tuberculosis			47	Birth Asphyxia		
13	Extra Pulmonary Tuberculosis			48	Bacterial Sepsis		
14	Enteric / Typhoid Fever			49	Congenital Abnormality		
15	Diabetes Mellitus			50	Prematurity		
16	Viral Hepatitis A & E			51	Hypothermia		
17	Viral Hepatitis B			52	Pneumonia < 1 month		
18	Viral Hepatitis C			53	Low Birth Weight		
19	Meningitis			Gynecological			
20	Chronic Liver Diseases			54	Fibroid Uterus		
21	End Stage Renal Diseases (ESRD)			55	Pelvic Inflammatory Diseases (PID)		
Cardiovascular Diseases				56	Uterine Prolapse		
22	Congestive Cardiac Failure (CCF)			57	Obstetrical Fistula		
23	Hypertension						
24	Ischemic Heart Diseases (IHD)						

Vaccine Preventable Diseases			Obstetrics/ Maternal Complications		
25	Neonatal Tetanus		58	Ante partum Hemorrhage (APH)	
26	Measles		59	Abortion	
27	Acute Flaccid Paralysis (AFP)		60	Complications of Abortion	
			61	Ectopic Pregnancies	
			62	Postpartum Hemorrhage (PPH)	

Surgical			Any Other Unusual Disease (Specify)		
28	Acute Appendicitis		63	Pre-Eclampsia/ Eclampsia	
29	Burns		64	Prolonged/ Obstructed Labour	
30	Cholelithiasis / Cholecystitis		65	Puerperal Sepsis	
31	Hernias		66	Rupture Uterus	
32	Hyperplasia of Prostate		67	Other Obstetric Complications	
33	Urolithiasis		68		
			69		
Orthopedic			70		
34	Arthropathies				
35	Fractures				
EYE					
36	Cataract				
37	Glaucoma				
38	Conjunctivitis				

Section XII: Surgeries (From OT Register)

1.	Operations under GA	
2.	Operations under Spinal Anesthesia	
3.	Operations under LA	
4.	Procedures done without Anesthesia	

Section XIV: Human Resource Data (From Facility Records)

Post Name/Category	Sanctioned	Vacant	Contract	Post Name/Category	Sanctioned	Vacant	Contract
1 MS/AMS/ Deputy MS				17 Physiotherapist			
2 Physician				18 Staff Nurse (Male)			
3 Surgeon				19 Staff Nurse (Female)			
4 Cardiologist				20 Lab Technician			
5 Chest Specialist				21 Dental Technician			
6 Neurosurgeon				22 X-Ray Technician			
7 Orthopedic Surgeon				23 Health Technician			
8 Pediatrician				24 ECG Technician			
9 Gynecologist				25 Lady Health Visitor			
10 Ophthalmologist				26 Dispensers			
11 ENT Specialist				27 EPI Vaccinator			
12 Anesthetist				28 Midwives			
13 Pathologist				29 Sanitary Inspector			
14 Radiologist				30 Sweeper			
15 CMO/SMO/MO				31 Driver			
16 SWMO/WMO				32 Others			
17 Dental Surgeon				33 Number of LHWs Reporting at HF			

Section XV-A: Revenue Generated *(From Receipt Register)*

Services		Total Receipt	Deposited	Services		Total Receipt	Deposited
1.	OPD	Rs.		6.	CT Scan	Rs.	
2.	Indoor	Rs.		7.	Ultrasound	Rs.	
3.	Laboratory	Rs.		8.	Dental Procedures	Rs.	
4.	ECG	Rs.		9.	Ambulance	Rs.	
5.	X-Ray	Rs.		10.	Others	Rs.	

Section XV-B: Financial Report for the Current Fiscal Year *(From Budget and Expenditure Statement)*

		Total Allocation for the fiscal year	Total Budget Released to-date	Total Expenditure to-date	Balance to date
1.	Salary & Allowances (Establishment charges)	Rs.	Rs.	Rs.	Rs.
2.	Non-Salary (Operating Expenses)	Rs.	Rs.	Rs.	Rs.
3.	Utilities	Rs.	Rs.	Rs.	Rs.
4.	Medicine	Rs.	Rs.	Rs.	Rs.
5.	General Stores	Rs.	Rs.	Rs.	Rs.
6.	M&R Equip/Transport/Furniture	Rs.	Rs.	Rs.	Rs.
7.	M&R Building Dept	Rs.	Rs.	Rs.	Rs.
8.	O t h e r s	Rs.	Rs.	Rs.	Rs.
9.	Annual Development Plan	Rs.	Rs.	Rs.	Rs.

Section XVI: Ambulance Service *(Source facility record)*

Total Number	On Road	Off Road	
		Repairable	Condemn

Section XVII: A Waste Disposal *(Source facility record)*

Daily Hospital Waste (kg)	Method of Waste Disposal <i>(Write ZERO (0) if method is in use & One (1) if method is Not in use)</i>					Incinerator		
	Pit Hole	Disposal Through Municipality	Burnt	Incineration	Any Other Method	Number	Functional	Non-Functional

Section - XVII-B Source of Drinking Water *(Source facility record)**(Write Zero (0) for Yes and One (1) for No)*

Municipality water Supply	Hand Pump	Well	Filter Plant	Electric Water Cooler with Filter	Mineral Water	R.O Plant		Safe Drinking Water (Certified / Tested)	
						Total Number	Functional Number	Yes	No.
1	2	3	4	5	6	7	8	9	10

Section XVIII: Availability of Services at Secondary Health Care (Source facility record) (Write ZERO (0) if service is Functional, One (1) if service is Non-functional & Two (2) if service is Not Applicable)					
No.	Service Type	Status	No.	Service Type	Status
1	OPD		24	Dengue RTD	
2	EPI		25	Malaria Microscopy	
3	ANC		26	Malaria RTD	
4	PNC		25	TB Treatment	
5	FP		26	Nutrition Services	
6	BEmONC		27	Measurement of Nutrition Status of Children <5	
7	CEmONC		28	Measurement of Nutrition Status of Pregnant Women	
8	Health education		29	Measurement of Nutrition Status of Lactating Women	
9	Indoor		30	Blood Transfusion	
10	Labour Room		31	Dialysis	
11	Minor OT		32	Hepatitis Sentinel Site	
12	Major OT		33	HIV / AIDS Testing & Consoling Center	
13	Surgery		34	Dental Services	
14	Delivery		35	Public Toilets	
15	C-Section		36	Water Supply	
16	Laboratory		37	Safe Drinking Water	
17	Ultrasound		38	Electivity / Transformer	
18	X-Ray		39	Generator	
19	Dental X-ray		40	Solar System	
20	ECG		41	Waste Management	
21	Blood screening (HepatitisB&C,HIV)		42	Kitchen	
22	Hb Measurement		43	Ambulance	
23	Sputum AFB				

Section XIX – Achievements/ Issue					

Session 12: Ensuring Data Quality

Objectives:

By end of this module, participants will be able to:

- Describe characteristics of data quality
- Describe measurable data quality level
- Describe methods of checking data accuracy
- Use LQAS table for assessing level of data accuracy
- Assess data accuracy level at facility and district
- Monitor data accuracy level using LQAS table
- Sharing results in plenary and receiving feedback

Time: 60 minutes

Materials: Flip chart, markers, definitions on flip charts or Power point presentation

- | | |
|---|-----------------|
| 1. Data accuracy assessment Job aid | (Handout 12.1) |
| 2. Monthly reporting form | (Handout 12.2) |
| 3. Outpatient register | (Handout 12.3) |
| 4. EPI register | (Handout 12.4) |
| 5. Family planning register | (Handout 12.5) |
| 6. Maternal Health and Obstetric register | (Handout 12.6) |
| 7. LHW register | (Handout 12.7) |
| 8. Community Meeting register | (Handout 12.8) |
| 9. Stock register | (Handout 12.9) |
| 10. Lab register | (Handout 12.10) |

Method: Discussion, Group exercise

Exercise: Divide the group in a pair of two-three. Distribute the Handout 12.1, page Participants manual, monthly report Handout 12.2 and all registers (Handout 12.3-12.10).

Ask them to carry out the exercise using the given instructions in Handout 12.1, and determine the data accuracy level. Share the results in plenary and receive feedback.

You have 45 minutes to complete this exercise.

Ask group to take three minutes to present their findings – target, decision rule, obtained data accuracy, and whether target achieved? If not what is the gap between target and existing data accuracy?

Handout Session 12: Ensuring Data Quality Handout No:12.1

M/o NHR&C, Department of Health, Provincial DHIS/M&E Cell

JOB AID Self-assessment for Checking and Monitoring Data Accuracy at Facility level

1. Checking Data Accuracy of Monthly Report, Using LQAS Table

Selection of data elements is random, which means select data elements without any preference. A broad representation of the data elements from different sections of the monthly report form is required to assure all data elements are given equal opportunity for selection. A sample of 12 data elements is required based on LQAS table.

Select randomly one data element from each section of the previous monthly report. Write the selected data element in the first column of the data accuracy check sheet given below. Repeat the procedure till all data elements from different sections are entered in first column.

Copy the figures of the selected data elements as reported on the monthly report form in second column of data quality check sheet, under the heading of “figures from monthly report form”.

Pick the register which has the selected data element. Count the actual entries in the register related to a specific selected data element. Put the figure you counted in third column of check sheet, under the heading “figure from register”. Repeat this procedure for all data elements.

If the figures in column 2 and 3 are same, put a cross under YES in column four. If they are not the same (does not match), put a cross under NO in column four. Repeat this procedure for all data elements.

Count total crosses under “YES” and write in row of total of “YES”. Repeat the procedure for “NO” column. Both YES and NO total should be equal to sample size 12.

Data Accuracy Check Sheet Write down month for which data accuracy is Checked -----				
Randomly Selected Data Elements from the monthly reporting form	Figures from the Monthly report form	Figures counted from registers	Do figures from column 2 &3 Match?	
			YES	NO
1	2	3		
1. OPD monthly report section-				
2. OPD monthly report section –				
3. EPI monthly report section –				
4. Family planning monthly report section -				
5. Mother health monthly report section –				
6. LHW monthly report section –				
7. Community meeting monthly report section				
8. Stock monthly report section –				
9.				
10.				
11.				
12.				

- Total in “Yes” column corresponds to the percentage of level of data accuracy in the following LQAS table. For example, if total “yes” number is 2, the accuracy level is between 30-35%; if total “yes” number is 7, the accuracy level is between 65-70%.
- Circle the data accuracy percentage and write it in section 15 of monthly report in the monthly report and submit to district office.

LQAS Table: Decisions Rules for Sample Sizes of 12 and Coverage Targets/Average of 20-95%																	
Sample Size	Average Coverage (Baselines)/ Annual Coverage Targets (Monitoring and Evaluation)																
	Less than20%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%	80%	85%	90%	95%
12	N/A	1	1	2	2	3	4	5	5	6	7	7	8	8	9	10	11

- You could set a target for achievement in a specified period and use it for monitoring progress. The target can be broken down on monthly basis. For example, if data accuracy is improving by 5% on monthly basis, the correct match number should increase accordingly as shown in the LQAS table. As the correct match number increases compared to previous months, it reflects improvement in level of data accuracy.
- Achievement of data accuracy level at 95% means high level of accuracy and needs to be maintained at that level.

Note: Please note that with sample size of 12 data elements, the data accuracy ranges $\pm 15\%$. That means that if the data accuracy is 30%, the range is between 15% and 45%.

Handout No: 12. 2

PHC Facility Monthly Report

Page 1

Month : __Year: 20__

Date of Submission

Total Working Days

District _____

Section I: Identification

1.	Facility ID						4.	Name & Signature of Facility In-charge:
2.	Facility Name							
3.	Taluka						5.	Designation:

Section II: Monthly Performance(Number or % as appropriate)		Monthly Target	Performance
7.	Total OPD Attendance		
8.	Children <12 months received 1st Measles vaccine		
9.	Antenatal Care (ANC-1) coverage		
10.	Total FP clients (New + Follow-up)		
11.	Delivery coverage at facility		
12.	Monthly report data accuracy		

Section III: Outpatients Attendance (From OPD Register)			< 1 Month	1-11 Months	1-4 years	5 – 14 years	15 – 49 years	50 + years	Total
3.	Male (New Cases)								
4.	Female (New Cases)								
Grand Total									
3.	Follow-up cases.		4.	Referred cases attended					
5.	No. of cases of Malnutrition < 5 Yrs children (Acute-low weight for Age)		6.	No. of cases of Malnutrition < 5 Yrs children (Acute · MUAC <12.5 cm)					
7.	No. of cases of Malnutrition < 5 Yrs children (Chronic-short height for age)		8.	Total Homeo cases					
9.	Total Tibb/Unani								

Section IV: Cases Attending OPD (From OPD Abstract Form)

Respiratory Diseases		Endocrine Diseases	
1	Acute (upper) respiratory infections	32	Diabetes Mellitus
2	Pneumonia < 5 yrs.	33	Goiter
3	Pneumonia > 5 yrs.	34	Hypo Thyroidism
4	TB Suspects	35	Hyper Thyroidism
5	Chronic Obstructive Pulmonary Diseases	Neuro-Psychiatric Diseases	
6	Asthma	36	Depression
Gastro Intestinal Diseases		37	Drug Dependence
7	Diarrhea < 5 yrs	38	Epilepsy
8	Dysentery < 5 yrs	39	Children/adolescent with abnormal behavior
9	Diarrhea / Dysentery > 5 yrs	Eye & ENT	
10	Enteric/Typhoid Fever	40	Cataract
11	Worm Infestations	41	Trachoma
12	Peptic Acid Diseases	42	Glaucoma
13	Biliary Disorders	43	Conjunctivitis
		44	Otitis Media
Urinary Tract Diseases		Oro - Dental Diseases	
14	Urinary Tract Infections	45	Dental Caries
15	Renal Calculi	46	Periodontitis
16	End Stage Renal Disease (ESRD)	47	Sub Mucosal Fibrosis
17	Sexually Transmitted Infections (STIs)	48	Oral Ulcers
18	Benign Enlargement of Prostrate		

Vector Borne Diseases		Injuries /Poisoning	
19	Suspected Malaria	49	Road traffic accidents
20	Suspected Dengue Fever	50	Fractures
21	Suspected Chikungunya	51	Burns
22	Suspected Cutaneous Leishmaniasis	52	Dog bite
		53	Snake bite (with signs/ symptoms of poisoning)
Vaccine Preventable Diseases		Neonatal Diseases	
23	Suspected Measles	54	Birth Asphyxia
24	Suspected Viral Hepatitis	55	Neonatal Sepsis
25	Suspected Neonatal Tetanus	Miscellaneous Diseases	
Cardiovascular Diseases		56	Fever due to other causes
26	Ischemic Heart Disease	57	Suspected Meningitis
27	Hypertension	58	Acute Flaccid Paralysis
Skin Diseases		59	Suspected HIV/AIDS
28	Scabies	Any Other unusual Diseases(Specify)	
29	Dermatitis	60	
30	Fungal Infection	61	
31	Impetigo	62	

Section V: Immunization (From EPI Monthly Report of HF)

1	Children <12 months received 3 rd Pentavalent vaccine:		3	Pregnant Women received TT-2 Vaccine	
2	Children <12 months received 1st Measles vaccine				

Section VI: TB-DOTS (From TB Register, TB Card TB-01)

1	Number of diagnosed cases AFB+ve / clinical/extra Pulmonary		3	Number of TB cases completed treatment during the month	
2	Number of TB cases started treatment during the month				

Section VII: Family Planning Services (From FP Register)

1.	Total FP new clients		6.	Net-En Inj clients		11.	Vasectomy Clients	
2.	Total FP follow-up		7.	Condom clients		12.	Implant clients	
3.	COC clients		8.	IUCD clients		13.	PP Implant clients	
4.	POP clients		9.	PPIUCD clients		14.	Counseling provided on FP	
5.	DMPA Inj. Clients		10.	Tubal Ligation clients				

Contraceptive Commodities (From Stock Register)		Balance during the month			
		Opening	Received	Consumed	Closing
1.	Condom (pieces)				
2.	Oral pill-COC (cycles)				
3.	Oral pill-POP (cycles)				
4.	IUCD (pieces)				
5.	Injection DMPA (vials)				
6.	Injection Net-En				
7.	Implant				
8.	Any other (Specify)				

Section VIII: Maternal and Newborn Health (From Maternal Health & Obstetric registers)

1.	ANC-1		13	Normal Vaginal Deliveries	
2.	ANC-1 women with Hb. <10 g/dl		14	Assisted Deliveries	
3	ANC-2		15	Cesarean Sections	
4	ANC-3		16	Total Live births	
5	ANC-4 or More		17.	Live births with LBW (< 2.5kg)	
6.	PNC-1		18.	Preterm Live births	
7.	PNC-2		19	Birth Asphyxia	
8	PNC-3		20	Neonatal sepsis	
9	PNC-4		21	Stillbirths	
10.	Malnourished Pregnant women (ANC-1)		22	Neonates received Chlorohexidine(CHX	
11.	Malnourished Lactating women (PNC-1)		23	Neonatal deaths in the facility	
12.	PW given Misoprostol Tables		24	Women Referred for PPIUCD	

Section-IX: Community Meetings (From Community Meeting Register)			Number of Participants	
			Male	Female
1.	No. of community meetings			
2.	No. of Health Education Sessions			

Section X: Diagnostic Services (From Laboratory Register / TB Lab Register/ Radiology Register)							
	Services Provided	OPD	Indoor		Services Provided	OPD	Indoor
1.	Total Lab Investigations			3.	Total Ultra Sonographies		
2.	Total X-Rays			4.	Total ECGs		

Laboratory Investigation for Communicable Diseases							
Malaria			T.B			Viral Hepatitis	
1.	Slides examined		1.	Slides for AFB Diagnosis (New)		1.	Patients screened
2.	Slides MP +ve		2.	Slides diagnosed cases (AFB+ve)		3.	Hepatitis B +ve
3.	Slides P. falciparum +ve				3.	Hepatitis C +ve	
4.	Sides of P. Vivax +ve						
5.	Rapid Diagnostic Test (RDT)						

Section XI-A: Stock out Report: Stock out of tracer drugs for any number of days this month (From Stock Register for Medicine /Supplies Write 0 (Zero) for available and 1 (One) for not available

1.	Cap.Amoxicillin		9.	Tab.Diclofenac		17.	Tab.Iron/Folic Acid	
2.	Amoxicillin Dispersible Tablet		10.	SypParacetamol		18.	ORS (low Osmolarity)	
3.	Syp.Amoxicillin		11.	Inj.Diclofenac		19.	Chlorohexidine (CHX)	
4.	Tab.Cotrimoxazole		12.	Tab.Chloroquin		20.	Tab: Misoprostol	
5.	Syp Cotrimoxazole		13.	Syp.Salbutamol		21.	Inj: Magnesium Sulfate	
6.	Tab.Metronidazole		14.	Syp.Antihelminthic		22.	Syp: Zinc Sulphate	
7.	Syp.Metronidazole		15.	I/Vinfusions		23.	Zinc Tablet (DT)	
8.	Inj.Ampicillin		16.	Inj. Dexamethasone		24.	Anti-Snake Venom	

Section XI-B: Stock out Report: Vaccines. (write 0 (Zero) for available & 1 (One) for not available)								
1.	BCG Vaccine		5	Hepatitis -B vaccine		8	Rota virus vaccine	
2.	Pentavalent vaccine		6	Measles vaccine		10	Anti-Rabies vaccine	
3.	OPV		7	Tetanus Toxoid		11	Vaccine syringes	
4	IPV vaccine		8	PCV-10 vaccine				

Section XII-A: Indoor Services (From Daily Bed Statement Register)										
	Allocated Beds	Admissions	Discharged/ DOR (not on the same day of admission)	Discharged/ DOR on same day of admission	LAMA	Referred	Deaths	Total of Daily Patient Count	Bed Occupancy	Average Length of Stay (ALS)
1	Male								%	
2	Female								%	

Section XII-B: Cases Attending Indoor (From Indoor Register / Obstetric Register)			
		Total Number of Admissions	Total Number of Deaths
1	Diarrhea < 5 yrs.		
2	Dysentery < 5 yrs.		
3	Pneumonia <5 yrs.		
4	Malaria		
5	Pulmonary Tuberculosis		
6	Obstetric / Maternal Complication		
7	Other cases		
	Total		

Section XIII: Surgeries (From OT Register)

1.	Operations under GA		3.	Operations under LA	
2.	Operations under Spinal Anesthesia		4.	Procedures done without Anesthesia	

Section XIV: Human Resource Data (From Facility Records)

	Post Name/Category	Sanctioned	Vacant	Contract
1	Medical Superintendent			
2	Senior Medical Officer			
3	Pediatrician			
4	Gynecologist			
5	Medical Officer			
6	Women / Lady Medical Officer			
7	Dental Surgeon			
8	Staff Nurse (Female)			
9	Staff Nurse (Male)			
10	Lab Technician			
11	Dental Technician			
12	X-Ray Technician			
13	Health Technician			
14	Lady Health Visitor			
15	Dispenser			
16	EPI Vaccinator			
17	Midwife			
18	Others			
19	Number of LHWs reporting at HF			

Section XV-A: Revenue Generated (From Receipt Register)

		Total Receipt	Deposited			Total Receipt	Deposited
				5.	X-Ray	Rs.	
1.	OPD	Rs.		6.	Ultrasound	Rs.	
2.	Indoor	Rs.		7.	Dental Procedures	Rs.	
3.	Laboratory	Rs.		8.	Ambulance	Rs.	
4.	ECG	Rs.		9.	Others	Rs.	

Section XV-B: Financial Report for the Current Fiscal Year (From Budget & Expenditure Statement) (For RHC ONLY)

		Total Allocation for the fiscal year	Total Budget Released to-date	Total Expenditure to-date	Balance to date
10.	Salary & Allowances (Establishment charges)	Rs.	Rs.	Rs.	Rs.
11.	Non-Salary (Operating Expenses)	Rs.	Rs.	Rs.	Rs.
12.	Utilities	Rs.	Rs.	Rs.	Rs.
13.	Medicine	Rs.	Rs.	Rs.	Rs.
14.	General Stores	Rs.	Rs.	Rs.	Rs.
15.	M&R Equip/Transport/Furniture	Rs.	Rs.	Rs.	Rs.
16.	M&R Building Dept	Rs.	Rs.	Rs.	Rs.
17.	Others	Rs.	Rs.	Rs.	Rs.
18.	Annual Development Plan	Rs.	Rs.	Rs.	Rs.

Section XVI: Ambulance Service (Source facility record)

Total Number	On Road	Off Road	
		Repairable	Condemn

Section XVII: A Waste Disposal (Source facility record)

Daily Hospital Waste (kg)	Method of Waste Disposal (Write ZERO (0) if method is in use & One (1) if method is Not in use)					Incinerator		
	Pit Hole	Disposal Through Municipality	Burnt	Incineration	Any Other Method	Number	Functional	Non-Functional

Section - XVII-B Source of Drinking Water (Source facility record) (Write Zero (0) for Yes and One (1) for No)									
Municipality water Supply	Hand Pump	Well	Filter Plant	Electric Water Cooler with Filter	Mineral Water	R.O Plant		Safe Drinking Water (Certified / Tested)	
						Total Number	Functional Number	Yes	No.
1	2	3	4	5	6	7	8	9	10

Section XVIII: Availability of Services at Primary Health Care (Source facility record)
Write ZERO (0) if service is Functional, One (1) if service is Non-functional & Two (2) if service is Not Applicable

	Service Type	Status		Service Type	Status
1	OPD		21	Hb Measurement	
2	EPI		22	Sputum AFB	
3	ANC		23	Dengue RTD	
4	PNC		24	Malaria Microscopy	
5	FP		25	Malaria RTD	
6	BEmONC		26	TB Treatment	
7	CEmONC		27	Nutrition Services	
8	Health education		28	Measurement of Nutrition Status of Children <5	
9	Indoor		29	Measurement of Nutrition Status of Pregnant Women	
10	Labour Room		30	Measurement of Nutrition Status of Lactating Women	
11	Minor OT		31	Blood Transfusion	
12	Major OT		32	Dental Services	
13	Delivery		33	Public Toilets	
14	C-Section		34	Water Supply	
15	Laboratory		35	Safe Drinking Water	
16	Ultrasound		36	Electricity / Transformer	
17	X-Ray		37	Generator	
18	Dental X-Ray		38	Solar System	
19	ECG		39	Waste Management	
20	Blood screening (Hepatitis B&C, HIV)		40	Ambulance	

Section XIX – Achievements/ Issue

--

Monthly OPD Serial No. (New cases)	Follow-up Cases (Put tick only)	Name with Father / Husband Name	Address	SEX & AGE CATEGORY (Tick in appropriate column)												MALNUTRITION (Only for <5 Years Children) Tick if			Referred from (if applicable)	Diagnosis	Action Taken/ Special Remarks		
				Male						Female						Acute		Chronic					
				<1 month	1-11 months	1-4 Yrs	5-14 Yrs	15-49 Yrs	50+	<1 month	1-11 months	1-4 Yrs	5-14 Yrs	15-49 Yrs	50+	Low weight for-Age	MUAC <12.5cm	short Height-for-Age					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		
		<<Total Brought from Pervious Page>>																					
			01-Feb																				
1		Asma Bibi D/o Atif	Tarlai									✓										Acute URI	Syp.Paraceta mol 1 TSF SoS
2		MuhammadSharif s/o Ejaz	Tarlai						✓													Fracture of Rt. Calcium	X-rayRt. AnkleAP/Lat
3		Fatima Beghum w/o M. Malik	Jhang Syedan											✓					LHW Asia			Rheumatoid arthritis	
4		Ghulam Hussain s/o Hamid	Ghagri		✓											✓						Diarrhoea	
5		Rabia w/o M. Aslam	Koral					✓														Amoebic dysentery	
6		M. Khalil s/o Ikram	Humak					✓														Enteric Fever	
7		Allah Bakhsh S/o Suleman	Pind bagwal						✓													Bronchial asthma	
8		M. Amjad s/o M. Asraf	Tramri					✓														Acute URI	
9		Shahida D/o Qamar Idrees	Tarlai									✓					✓					Pneumonia	Admission to the Female Ward
10		Obaid-ullah s/o Saif-ullah	Ali Pur				✓															Acute Flaccid Paralysis	Reporting & stool Sampling

			02-FEB																					
11		Parveen w/o Ghulam	Sawan Humak																	✓		Hypertension		
	✓	Saima Bibi d/o Rafiq	Bhimbar Trar																				Paracetamol 150 mg	
12		Ehsan	Gokina			✓																Suspected meningitis	Referred to the hospital	
13		Fahim	Simli dam road					✓														BHU Jhang Sayedan	Suspected Pulmonary TB	Sputum smear
	✓	Ghulam Hussain s/o Hamid	Ghagri																				Admission to the hospital	
14		Saleem	Bani saran Rawat						✓														Diabetes Mellitus	
15		Waheed	Gagri Sihala					✓															suspected viral Hepatitis	HBV / HCV antigen
16		Yasin	Dhok Parcha Tarnol				✓																Laceration	Suturing
17		Zaheed	Ghuri town		✓																		Suspected Pertussis	Referred to the hospital
18		Ismat w/o Javed	Phul Gran																		✓		Goiter	
18	2	<< Transfer Total to Next Page >>		0	2	1	2	5	3	0	0	3	1	1	0	2	0	0	2				<< Transfer Total to Next Page >>	

Handout No:12.5

Family Planning Register

DHIS-11 (R)

Family Planning Register Year: _____ Month: _____																		
Yearly FP Client No. (New client)	Follow-up Client No. (Previous Yearly No./ Year of registration)	Client Name With Spouse Name	Age	Address	Clients by Method													Others
					Tick appropriate column													
					Pills		Condom (clients)	Injections		IUCD		Implant	PP Implant	Tubal Ligation	Vasectomy	Counseling		
					Combined Oral Contraceptives (COC)	Progestrone only Pills (POP)		NET-EN	DPMA	Cu-T 380A	PPIUCD							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	
		<<Total Brought From Previous Page>>																
121		Mahnoor w/o M. Baloch	21	Tumair	√													
122		Nazeeran w/o Zahoor	37	Phulgran			√											
	16/05	Afroze w/o Khadim Hussain	48	Ghagri		√												
123		Nazia w/o Riaz Ahmed	19	Shah Allah Ditta						√								
	256/05	Khalida w/o Tahir Ali	22	Humak		√												
124		Shamim w/o Saifullah	26	Tarlai					√									
	75/04	Tahira w/o Jamaludin	20	Ali Pur			√											
	165/05	Salma w/o Niaz Hussain	45	Karal		√												
	42/05	Ayesha w/o Zulfikar Ali	31	Ghuri										√				
	354/04	Abida w/o Ghulam Muhammad	34	Bhara Kahu			√											
		<<Transfer Total to Next Page>>			1	3	3	0	1	1	0	0	0	0	1	0	0	

Handout No:12. 6

Maternal Health Register

DHIS-13 R)

MATERNAL HEALTH REGISTER																			Month: _____	Year: _____
Yearly MH Serial No. (New cases)	Follow-up Cases (Previous yearly No./Year of registration)	Name With Husband's Name	Age(in years)	Address	EDD	Hb (circle if <10gm/dl)	ANC Services				PNC Services				Nutrition Status of women (MUAC) Tick if <21 cm		TT Vaccination Advice (Tick only)	Other services (Investigations / Referrals)		
							ANC1	ANC2	ANC3	ANC4 OR MORE	PNC1	PNC2	PNC3	PNC4 OR MORE	During pregnancy	During Lactation				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19		
		<<Total brought from previous page>>																		
834		Mahnoor w/o M. Baloch	42	Sohan	1-7-06	11.2	✓										✓	Twins		
	1001/05	Shakeela w/o Ahmed Ali	21	Humak	3-4-06				✓								✓			
		Nazia w/o Ghulam Muhammad	18	Rawat	5-3-06	10.8		✓									✓			
	987/05	Bushra w/o Wahid Buksh	17	Dhok Malyar							✓						✓			
835		Afhan w/o Khan Muhammad	33	Dhok Boota	2-8-06	9.6	✓										✓			
	1321/05	Fatima w/o Khadim Hussain	39	Tarnol									✓				✓			
836		Mehnaz w/o Abid Ali	24	Bhara Kahur	8-8-06	9.2	✓										✓	Breech Position		
837		Khaleda w/o Akram	48	Jhang Sayedan	3-9-06	8.9	✓										✓			
	1102/05	Bashira w/o M. Raheem	19	Gokina										✓			✓			
838		Samina w/o Ali Hassan	28	Mohra Rajput	9-9-06		✓										✓			
5	5	<< Transfer Total to Next Page>>					3	5	1	1	0	1	0	1	1			10		

Session 11: Handout No:12.8 **Community Meeting Register** DHIS-19 (R)

COMMUNITY MEETINGS REGISTER											Month: _____	Year: _____
Date	Acti vity		Place			Number of Participants		Topics Discussed	Recommendation	Sign of Facility In-charge		
	Meeting	H E Session	At Facility	Community	LHW Houses	Male	Female					
1	2	3	4	5	6	7	8	9	10	11		
2/6			✓			5		Sanitation		Fida Hussain		
2/13				✓			10	Family planning	Meeting with male participants	Fida Hussain		
2/20					✓		20	Immunization	Camp at LHWs house	Fida Hussain		
2/27					✓		10	Maternal Health	More frequent meetings with community	Fida Hussain		
3/6				✓		10		NID		Fida Hussain		
3/13				✓		10		Nutrition	Availability of iodized salt	Fida Hussain		
3/20					✓		20	Anti-Tobacco	Strict regulations at public places	Fida Hussain		
3/27			✓			13		AIDS	More campaigns	Fida Hussain		
4/3			✓				20	Maternal and newborn health	Meeting with husbands/male	Fida Hussain		
4/10			✓				22	Breast feeding	Discourage formula milk sale near hospitals	Fida Hussain		

Handout No:12.9: Stock Register (Medicines /Supplies)

DHIS-17 (R)

STOCK REGISTER									
Medicines/ Supplies									
Name of Article: <u>Tab. Cotrimoxazole</u> Unit/Strength <u>DS</u>									
Minimum Recommended Stock Level: <u>180</u> (Take action for replenishment if the minimum level is reached)									
Date	Issued to /Received From with Reference No.	Quantity				Store Keeper Signature		Counter Sign	Remarks (Tick if balance '0')*
		Received	Issued	Discarded	Balance				
1	2	3	4	5	6	7	8	9	
	<i>Balance brought forward</i>								
½	Balance brought forward from previous page No. 3				400	<i>Adeel</i>		<i>Amjad</i>	
6/2	Issued to Female Surgical Ward		30		370	<i>Adeel</i>		<i>Amjad</i>	
12/2	Issued to Casualty Outdoor		30		340	<i>Adeel</i>		<i>Amjad</i>	
15/2	Issued to Male Surgical Ward		30		310	<i>Adeel</i>		<i>Amjad</i>	
25/2	Issued to Male Surgical Ward		30		280	<i>Adeel</i>		<i>Amjad</i>	
28/2	Issued to Female Surgical Ward		30		250	<i>Adeel</i>		<i>Amjad</i>	
2/3	Received from EDOH vide voucher no. 302/M dated 26-2-06	300			550	<i>Adeel</i>		<i>Amjad</i>	
9/3	Issued to Casualty Outdoor		30		520	<i>Adeel</i>		<i>Amjad</i>	
16/3	Issued to Female Surgical Ward		30		490	<i>Adeel</i>		<i>Amjad</i>	

Laboratory Register						
Name of Examination: <u>Blood Smear for Malaria</u>				Month: <u>01</u> Year: <u>2017</u>		
Monthly Lab Serial No.	Name With Father/Husband's Name	Age	Fee Paid (Rs.)	OPD	Indoor	Results
				Monthly OPD No.	Ward /Unit/Bed No.	
1	2	3	4	5	6	7
26	Hameed s/o Gull Muhammad	35	10	87		positive P. Falciparum
27	Rab Nawaz s/o Ahmad Ali	20	10	121		Negative
28	Hussain Munir s/o Munir	11	10	133		Negative
29	Mariam Bibi w/o Zahid Ali	9	10	148		Negative
30	Kalsoom Bagam w/o Abdul Razzaq	12			Female ward bed no.05	positive P. Falciparum
31	Meeran Baloch w/o Hadi Buksh	45	10	170		positive P. Falciparum
32	Imran s/o Mehmood Ahmad	55	10	181		Negative
33	Babar Ali s/o Ali Khan	6	10	199		Negative
34	Anwar s/o Kabir Ahmed	35	10	202		Negative
35	Sameera w/o Muhammad Yousaf	41	10	205		positive P. Falciparum

