Annexure 12 A

Line-List Of Persons Referred From ICTC To RNTCP

	T(E)	PORTING MOI TO BE COMI		DBYI	YEAR CTC COUNS	NAME O SELLOR	1 1010.	TO BE CO	OMPLETED BY t	he STS			
l	2	3	4	5	6	7	8	9	10	11	12	13	14
Sr. Vo.	PID NO	Complete Name & Complete Address	Age	Sex	HIV status (R / NR / Unknown)	Date of referral to RNTCP	Name of facility referred to	Is patient diagnosed as TB –Yes or No	If diagnosed as TB, specify type of TB and basis of diagnosis	Is patient initiated on RNTCP treatment	Date of Starting Treatment	TB No.	Remarks
		Sign of Counse Date of comple	ellor etion:			Sign of MC)- ICTC	Name of th Signature of Date of Co	of STS	Sign	ature of DT	 O/CT()/MO-TU

Basis of diagnosis – Microbiologically confirmed, Clinically diagnosed

Type of TB – Pulomary, Extrapulomary

ICTC TB-HIV monthly report

REPORTING MONTH:	YEAR			
NAME OF ICTC:	DISTRICT:			
I. TOTAL NUMBER OF GENERAL CLIENTAL a) Total no. of clients who attended (excluding PPTCT clients)		D:		
II.REFERRAL OF PRESUMPTIVE TUBERO	CULOSIS CASES FRO	M IC	CTC TO RI	NTCP
			HIV positive	HIV Negative
a) No. of persons presumptive diagnostic services				
b) Of the referred presumptive TB patie having:	ents, No. diagnosed	as		
(i) Pulmonary TB (Microbiologically confirme	ed)			
(ii) Pulmonary TB (Clinically diagnosed)				
(iii) Extra-Pulmonary TB (Microbiologically co	onfirmed)			
(iv) Extra Pulmonary (Clinically diagnosed)				
c) Out of above (b), diagnosed TB pa	atients, number receivi	ing		

Signature of Medical Officer – In charge ICTCName of Medical Officer In-charge ICTC

Annexure 13 A

HIV-TB Line List (Referrals)

21	Place of	registratio n			
20	TB // Tamper	NIKSHAY ID			
20	Type of	/y (Category NIKSHAY registratio			
19	Date of starting	ATT (dd/mm/y yyy)			
21	Name of DRTB center where the	been been eferred for treatment			
20	If drug resistant TB, then D date of	DRTB Center? r (dd/mm/y yyy)			
19	Date of final	(dd/mm/yw referral to patient has ATT (edd/mm/yw) (MMMy Center? referred for ywy) (dd/mm/y treatment ywy)			
18	Tvoe of TB	diagnosed			
17	Drug Resistance status ⁴	Mention drug to wich the TB resistant to y			
16		Date of test dd/mm/ yyy)			
15	Testing details	Type of test & Date of Result test (Enter all test (dd/mm/y results) yyy)			
14	Date of	sample			
13	Type, Name of acility where	referred to (Give code ind name of ill facilities) ²			
12	Date of referral for TB fr	Examinatio n idd/mm/yy a yy) a			
11	Whether any	District, (Pre- at time of them one State ART/ART) referred symptoms (Y/N) (dod/mm/ty) and name of yy) all facilities) ²			
10	Symptoms Present [†] (You con	select more than one symptoms)			
6	ART	(If on ART at time of referral)			
8	Status at the time	of referral (Pre- ART/ART)			
7	Address - Block.	District, State			
9	Contact	(M/F/TG) Number District, State			
2	ģ	(M/F/TG)			
4	Date of	Birth (or Age)			
3		Маж			
2	HIV Registrati	Care on (dd/mm/y Number yyy)			
1	Date of Registrati	Care (dd/mm/y yyy)			

1. (A)Cough of any duration, (B)Low grade fever, (C)Weight Loss, (D)Night sweats, (E)Lymph Nodes, (F) Anorexia, (G)Others: Specify
2. (A)DMC, (B)CBMAAT, (C)DST, (D)Radiosay, (Ell-Rospathology, (F)RAT Center, (G)Others
3. For type of test details enter code of test and corresponding test-results.
(G)Invalid*(d)Erro**(e)No result* (**not conclusive results, need repeat test), (ii)CBMAAT (Rif Resistance) - (a)RR(b)RS(c)Indeterminate, (iii)Smear-(a)Positive(b)Negative

(iv)Culture-(a)Positive(b)Negative, (ii)Culture-(a)Positive(b)Negative, (vii)Others (Specify)-(a)Positive(b)Negative (vii)Culture, Carle only (ii)Second Line DST-Ofloxacin, Capreomycin, Kanamycin, Ethamutoi, Levofloxacin, Moxifloxacin (ii)Second Line DST-Ofloxacin, Capreomycin, Kanamycin, Ethamutoi, Levofloxacin, Moxifloxacin (iii)Second Line DST-Ofloxacin, Capreomycin, Kanamycin, Ethamutoi, Levofloxacin, Moxifloxacin (iii)Second Line DST-Ofloxacin, Capreomycin, Kanamycin, Ethamutoi, Levofloxacin, Moxifloxacin, Mox

192

Annexure 13 B

	3 b. HIV/TB -Intensified TB Case Finding	Se Finding		
	TB Diagnosis & Treatment	ent lent		
	(From Completed HIV/TB Line-List- 1 month prior to reporting month)	prior to reporting mo	nth)	
3b.1) N _L	3b.1) Number of PLHIV attending ART Centre during the month (Pre ART and ART)			
3b.2)Ou	3b.2)Out of above number of PLHIV screened for 4 symptoms			
3b.3) Or	3b.3) Out of above, number of PLHIV with presumptive TB (those with anyone/more symptoms out of 4S)			
3b.4) O	3b.4) Out of above, number of PLHIV with presumptive TB referred from ART centre for TB diagnosis			
3b.5) Ou	3b.5) Out of above, number of PLHIV with presumptive TB, tested for TB diagnosis			
3b.6) ⊙∟	3b.6) Out of the above number of PLHIV diagnosed as having TB :	In Pre ART Care at time of TB diagnosis	Already on ART at time of TB diagnosis	Total
	(i) (Microbiologically confirmed)			0
	(ii) Pulmonary TB (Clinically diagnosed)			0
	(iii) (Microbiologically confirmed)			0
	(iv) Extra Pulmonary (Clinically diagnosed)			0
3b.7) To	3b.7) Total PLHIV Diagnosed with TB	0	0	0
3b.8) Ou	3b.8) Out of (3b.7),, number of TB patients receiving RNTCP treatment			
3b.9) O	3b.9) Out of (3b.7),, number of TB patients receiving Non-RNTCP treatment			
3b.10) C	3b.10) Out of (3b.7), number of TB patients with RRTB (Rif Resistant TB)			
3b.11) C	3b.11) Out of (3b.10), number of TB patients with RRTB (Rif Resistant TB) receiving Cat IV treatment			
	3 c. Treatment of HIV in HIV TB co-infected PLHIV	ected PLHIV		
	(FIOHERING FIVE TO REGISTER WARA -Z HIOHERS PHOLENG HIOHER)	r to reporting month)		
3c.1) To	3c.1) Total number of TB patients enrolled in HIV/TB register 2 months prior to reporting month			
3c.2) Ou	3c.2) Out of (3c.1) number of TB patients initiated on CPT			
3c.3) Or	3c.3) Out of (3c.1) number of TB patients initiated on ART			
	3 d. IPT Status (From Master Line List of Reporting Month)	(eporting Month)		
3d.1) Nu	3d.1) Number of PLHIV newly initiated on IPT during this month			
3d.2) Nu	3d.2) Number of PLHIV completed IPT during this month			

	lf not i reasor
29	CD 4 Count (ABs seline (ABs seline B) at the time of diagnosis At the time of completion (Provide oil time counts) Count Date
38	(A)Ba (A)Ba (B)At the time (C)At the time (Provide all 1
27	ART Registrati on Number
36	Date of ART infilation
52	Is the patient on CPT? (Y/N)
24	Treatment
23	If discontinued, date of discontinued and reason for discontinuation and discontinuation.
22	If patient faced any side effects please mention (A)Toxicity (B)Others: Specify
21	Date of treatment completion
20	NIKSHAY Number/ TB Number PMDT Number (#gappkcable) Any one of these
13	Type of treatment (Category I/II/N/N)
18	weight band
17	Type, Name of facility for TB treatment
16	If not Initiated on Taylin reason or for the Taylin same
15	F DRTB, then Date of anti initiation date of the date
14	f DRTB, then date of referral to DRTB center
13	Patient category*
12	Date of final dagnosis
Ħ	Type of TB diagnosed ²
	Drug resistant Status
10	letails Date of test
6	Texting details Type of text 8. Passult Comment of text Day
8	From where the patient has been referred? (Pick appropriate code and provide name of facility)*
7	Address - Block, District, State
9	Contact Number
ıs	Sex (M/F/TG)
4	Date of Birth (or Age)
m	Name
2	HIV Registration Number
	Date of Registration HIV In HIV Care Registration (64/mm/byy Number

HIV TB Register (Confirmed)

Remarks

Annexure 13 C

Interdencing and Contract entition (DIORT). Retrained others

(A) ASTE certer (B) RIVE (Context entition (DIORT). (Context Contract Contra

MONTHLY STOCK STATEMENT (MSS)

(REPORT SHOWING RECEIPTS & ISSUES OF ANTI-TB DRUGS AS AT)

State:

State Drug Store:

S.	Drug	MON	Opening	Receipts	pts	Total	ISSUES	JES	Balance
No.			Balance	Receipts During the Month	Drugs Trfd. In	Stores	Store Supplied	Drugs Trfd. Out	Stores with DOE
(a)	(q)	(c)	(p)	(e)	(f)	(g = d+e+f)	(h)	(i)	[j = g- (h+i)]
_	PC-1 Treatment box for New Cases	BWB							
7	PC-1 D-I Daily regimen treatment Box for New Cases (25-39kg)	PWB							
က	PC-1 D-II Daily regimen treatment Box for New Cases (40-54kg)	PWB							
4	PC-1 D-III Daily regimen treatment Box for New Cases (55-69kg)	PWB							
5	PC-1 D-IV Daily regimen treatment Box for New cases (≥70 Kg)	PWB							
9	PC-2 Treatment box for Re-Treatment Cases	PWB							
7	PC-2 D-I Daily regimen treatment Box for Re- Treatment Cases (25-39kg)	BWB							
∞	PC-2 D-II Daily regimen treatment Box for Re-Treatment Cases (40-54kg)	PWB							
O	PC-2 D-III Daily regimen treatment Box for Re-Treatment Cases (55-69kg)	PWB							

Annexure 14 A

10	PC-2 D-IV Daily regimen treatment Box for Re-Treatment Cases (≥70 Kg)	PWB	
7	Prolongation Pouches	Ponch	
12	PC-5 Inj. Streptomycin 750 mg	Vials	
13	PC-5D-I Inj. Streptomycin 500 mg	Vials	
14	PC-5D-II Inj. Streptomycin 750 mg	Vials	
15	PC-5D-III Inj. Streptomycin 1 gm	Vials	
16	Pyrazinamide 750 mg	Tablet	
17	Rifampicin 150 mg	Caps	
18	Rifampicin 450 mg	Caps	
19	Isoniazid 100 mg	Tablet	
20	Ethambutol 800 mg	Tablet	
21	Isoniazid 300 mg	Tablet	
22	PC-13 Pediatrics Drug	PWB	
23	PC-14 Pediatrics Drug	PWB	
24	PC-15 Pediatrics Drug	Ponch	
25	PC-16 Pediatrics Drug	Ponch	

KEY: UOM: Unit of Measurement

Note: In the case of Inj. SM, please maintain stock at the rate of 24 injections for each PC-2 box and 56 injections for each PC-2 D-II / PC-2 D-III / PC-2 D-I

QUARTERLY REPORT ON PROGRAMME MANAGEMENT AND LOGISTICS DTC Level: Medication

ADULT PATIENT WISE BOX

Item	Unit of Measure ment	Stock on first day of Quarter	Stock received during the quarter	Stock transfe rred in	Reconstitu tion of boxes during Quarter	Stock Transf erred Out *	Patients started on treatment	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)= (c+d+e+f) - (g+h)	(j)= (h/3 x 7) - i
PC-1 Treatment box for New Cases	PWBs								
PC-2 Treatment box for Re-Treatment Cases	PWBs								

Item	Unit of Measur ement	Stock on first day of Quarter	Stock received during the quarter	Stock transf erred in	Reconstit ution of boxes during Quarter	Stock Trans ferre d Out	Patients started on treatment	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)= (c+d+e+f) - (g+h)	(j)= (h/3 x 5) - i
PC-1 D-I Daily regimen treatment Box for New Cases (25-39kg)	PWBs								
PC-1 D-II Daily regimen treatment Box for New Cases (40-54kg)	PWBs								
PC-1 D-III Daily regimen treatment Box for New Cases (55-69kg)	PWBs								
PC-1 D-IV Daily regimen treatment Box for New cases (≥70 Kg)	PWBs								
PC-2 D-I Daily regimen treatment Box for Re- Treatment Cases (25- 39kg)	PWBs								
PC-2 D-II Daily regimen treatment Box for Re-Treatment Cases (40-54kg)	PWBs								
PC-2 D-III Daily regimen treatment Box for Re-Treatment Cases (55-69kg)	PWBs								
PC-2 D-IV Daily regimen treatment Box for Re-Treatment Cases (≥70 Kg)	PWBs								

Prolongation Pouches and Inj SM

Item	Unit of Measure- ment	Stock on first day of Quarter	Stock received during the quarter	Stock transferr ed in	Reconstit ution during Quarter	Stock Transfe rred Out *	Consumpti on during the Quarter	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)= (c+d+e+f)- (g+h)	(j)= (h/3 x 7) - i
PC-4 (Prolongation Pouches)	Pouches each with 12 blister strips								
PC-5 Inj. Streptomycin 750 mg	Vials								
PC-5D-I Inj. Streptomycin 500 mg	Vials								
PC-5D-II Inj. Streptomycin 750 mg	Vials								
PC-5D-III Inj. Streptomycin 1 gm	Vials								

Paediatric Patient Wise Boxes (Including PWBs for Adult Patients <30kgs)

Ітем	Unit of Measure- ment	Stock on first day of Quart er	Stock receive d during the quarter	Stock transf erred in	Reconsti tution during Quarter	Stock Transf erred Out *	Consum ption during the Quarter	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)= (c+d+e+f)- (g+h)	(j)= (h/3 x 7) - i
Paediatric PC 13	Paediatric PWB								
Paediatric PC 14	Paediatric PWB								
Paediatric PC 15	Paediatric Prolongati on Pouches								
Paediatric PC 16	Paediatric Prolongati on Pouches								

RNTCP Loose drugs

Ітем	Unit of Measure -ment	Stock on first day of Quarter	Stock received during the quarter	Stock transf erred in	Stock Transfer red Out *	Consumption during the Quarter	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)= (c+d+e)- (f+g)	(i)= (g/3 x 7) - h
INH 300 mg	Tablets							
INH 100 mg	Tablets							
Rifampicin 150mg	Capsules							
Pyrazinamide 750 mg	Tablets							
Ethambutol 800 mg	Tablets						`	

Annexure 14 C

QUARTERLY REPORT ON PROGRAMME MANAGEMENT AND LOGISTICS

TU Level: Medications

Adult Patient Wise Boxes

<u>ltem</u>	Unit of Measurement	Stock on first day of Quarter	Stock received during the Quarter	Patients started on treatment	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)=(c+d)-e	(g)=(e/3 x 4) - f
PC-1 Treatment box for New Cases	PWBs					
PC-1 D-I Daily regimen treatment Box for New Cases (25-39kg)	PWBs					
PC-1 D-II Daily regimen treatment Box for New Cases (40-54kg)	PWBs					
PC-1 D-III Daily regimen treatment Box for New Cases (55-69kg)	PWBs					
PC-1 D-IV Daily regimen treatment Box for New cases (≥70 Kg)	PWBs					
PC-2 Treatment box for Re- Treatment Cases	PWBs					
PC-2 D-I Daily regimen treatment Box for Re- Treatment Cases (25-39kg)	PWBs					
PC-2 D-II Daily regimen treatment Box for Re- Treatment Cases (40-54kg)	PWBs					
PC-2 D-III Daily regimen treatment Box for Re- Treatment Cases (55-69kg)	PWBs					

PC-2 D-IV Daily regimen treatment Box for Re- Treatment Cases	PWBs			
(≥70 Kg)				

Prolongation Pouches and Inj SM

<u>ltem</u>	Unit of Measurement	Stock on first day of Quarter	Stock received during the Quarter	Patients started on treatment	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)=(c+d)-e	(g)=(e/3 x 4) - f
PC-4 (Prolongation Pouches)	Pouches each with 12 blister strips					
PC-5 Inj. Streptomycin 750 mg	Vials					
PC-5D-I Inj. Streptomycin 500mg	Vials					
PC-5D-II Inj. Streptomycin 750mg	Vials					
PC-5D-III Inj. Streptomycin 1 gm	Vials					

PAEDIATRIC PATIENT WISE BOXES (INCLUDING PWBs FOR ADULT PATIENTS < 30KGS)

<u>ltem</u>	Unit of Measurem ent	Stock on first day of Quarter	Stock received during the Quarter	Patients started on treatment	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)=(c+d)-e	(g)=(e/3 x 4) - f
Paediatric PC 13	Paediatric PWB					
Paediatric PC 14	Paediatric PWB					
Paediatric PC 15	Paediatric Prolongation Pouches					
Paediatric PC 16	Paediatric Prolongation Pouches					

RNTCP Loose drugs

<u>ltem</u>	Unit of Measurem ent	Stock on first day of Quarter	Stock received during the Quarter	Patients started on treatment	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)=(c+d)-e	(g)=(e/3 x 4) - f
INH 300 mg	Tablets					
INH 100 mg	Tablets					
Rifampicin 150mg	Capsules					
Pyrazinamide 750 mg	Tablets					
Ethambutol 800 mg	Tablets				`	

Annexure 14 D

MONTHLY REPORT ON PROGRAMME MANAGEMENT AND LOGISTICS

PHI Level: Medications

Adult Patient Wise Boxes

Item	Unit of Measure ment	Stock on first day of month	Stock received during month	Patients initiated on treatment	Stock on last day of month	Quantity Requested
(a)	(b)	(c)	(d)	(e)	f= (c+d)-e	g= (e X 2) - f
PC-1 Treatment box for New Cases	PWBs					
PC-1 D-I Daily regimen treatment Box for New Cases (25-39kg)	PWBs					
PC-1 D-II Daily regimen treatment Box for New Cases (40-54kg)	PWBs					
PC-1 D-III Daily regimen treatment Box for New Cases (55-69kg)	PWBs					
PC-1 D-IV Daily regimen treatment Box for New cases (≥70 Kg)	PWBs					
PC-2 Treatment box for Re- Treatment Cases	PWBs					
PC-2 D-I Daily regimen treatment Box for Re- Treatment Cases (25-39kg)	PWBs					
PC-2 D-II Daily regimen treatment Box for Re- Treatment Cases (40-54kg)	PWBs					
PC-2 D-III Daily regimen treatment Box for Re- Treatment Cases (55-69kg)	PWBs					
PC-2 D-IV Daily regimen treatment Box for Re- Treatment Cases (≥70 Kg)	PWBs					

Prolongation Pouches and Inj SM

<u>ltem</u>	Unit of Measurem ent	Stock on first day of month (a)	Stock received during month (b)	Consumption during the month (c)	Stock on last day of month (d)= (a+b)-c	Quantity Requested (e) = (c X 2) – d
PC-4 (Prolongation Pouches)	Pouches					
PC-5 Inj. Streptomycin 750 mg	Vials					
PC-5D-I Inj. Streptomycin 500mg	Vials					
PC-5D-II Inj. Streptomycin 750mg	Vials					
PC-5D-III Inj. Streptomycin 1 gm	Vials					

PAEDIATRIC PATIENT WISE BOXES (INCLUDING PWBs FOR ADULT PATIENTS < 30KGS)

<u>I ALDIAII</u>	CO I ATTENTI TOTO	L BOXEO (INOE	ODING! WBO!	ON ADULT I ATT	<u>Livio (outoo)</u>	
<u>ltem</u>	Unit of Measurement	Stock on first day of Quarter	Stock received during the Quarter	Patients started on treatment	Stock on last day of Quarter	Quantity Requested
(a)	(b)	(c)	(d)	(e)	(f)=(c+d)-e	(g)=(e/3 x 2) -f
Paediatric PC 13	Paediatric PWB					
Paediatric PC 14	Paediatric PWB					
Paediatric PC 15	Paediatric Prolongation Pouches					
Paediatric PC 16	Paediatric Prolongation Pouches					

RNTCP Loose Drugs

<u>ltem</u>	Unit of Measurement	Stock on first day of month (a)	Stock received during month (b)	Consumption during the month (c)	Stock on last day of month (d)= (a+b)-c	Quantity Requested (e) = (c X 2) – d
INH 300 mg	Tablets					
INH 100 mg	Tablets					
Rifampicin 150 mg	Capsules					
Ethambutol 800 mg	Tablets					

For MRPML of PHI-level, all information is available from the stock register of the PHI stores.

Annexure 14 E

Monthly Stock Statement for stocks at SDS Level (To be submitted to CTD each month by SDS)

				Receipt the n	Receipts during the month	senss	Issues during the month	month				
Sr. No.	Nomenclature	A/U	Openin g Balance	Receip t from Mfrs	Transfe r In / Return s	Qty issued for boxes	Qty Issued to DRTB centre	Transfe r Out	Balance Stock	DOM (One row for each drug)	DOE (One row for each drug)	Remarks
			(a)	(q)	(0)	(p)	(e)	Œ	(g)=(a+b+c-d-e-f)			
	Loose Drugs											
_	KANAMYCIN (Km) - 500 mg	Vials										
7	KANAMYCIN (Km) - 1000 mg	Vials										
က	LEVOFLOXACIN (Lfx)-250mg	Tabs										
4	LEVOFLOXACIN (Lfx)-500mg	Tabs										
	CYCLOSERINE (Cs) -250 mg	Caps										
9	ETHIONAMIDE (Eto) - 125 mg	Tabs										
	ETHIONAMIDE (Eto) - 250 mg	Tabs										
	PYRAZINAMIDE (Z) - 500 mg	Tabs										
	PYRAZINAMIDE (Z) - 750 mg	Tabs										
10	ETHAMBUTOL(E) - 200 mg	Tabs										
11	ETHAMBUTOL(E) - 400 mg	Tabs										
12	ETHAMBUTOL(E) - 800 mg	Tabs										
13	PYRIDOXIN-50mg	Tabs										
14	PYRIDOXIN - 100 mg	Tabs										
	SODIUM PARA-											
	AMINOSALICYLATE(NA PAS) 4gm	Sachet										
2	Sachets (Box of 250 sachets)	ဟ										
	SODIUM PARA-AMINOSALICYLATE											
	(NA PAS) 10gm Sachets (Box of 100	Sachet										
16		S										
	SODIUM PARA-AMINOSALICYLATE	Box										
17	(NA PAS)-100gm jars	(100g)										
	Substitute Drugs											
18	CAPREOMYCIN (Cm)-750 mg	Vials										
19	CAPREOMYCIN (Cm)-1000 mg	Vials										
20	MOXIFLOXACIN (Mfx)-400mg	Tabs										

No.	Nomenclature	A/U	Opening Balance	Receipt during the month	Qty issued	Closing Balance	D.O.E (One row for each box)
			(A)	(B)	(0)	(D = A+B-C)	
	Monthly Patient Wise Boxes						
_	Type-A(<16 Kg Body Weight Patient)	Drug Boxes					
2	Type-A (16-25 Kg Body Weight Patient)	Drug Boxes					
က	Type-A (26-45 Kg Body Weight Patient)	Drug Boxes					
4	Type-A (46-70 Kg Body Weight Patient)	Drug Boxes					
5	Type-A (>70 Kg Body Weight Patient	Drug Boxes					
9	Type-B (<16 Kg Body Weight Patient)	Drug Boxes					
7	Type-B(16-25 Kg Body Weight Patient)	Drug Boxes					
ω	Type-B (26-45 Kg Body Weight Patient)	Drug Boxes					
တ	Type-B (46- 70 Kg Body Weight Patient)	Drug Boxes					
10	Type-B (> 70 Kg Body Weight Patient)	Drug Boxes					
1	Type-C (Na PAS)	Drug Boxes					

Weight Band	< 16 kg	16-25 kg	26-45 kg	45-70 kg	>70 kg
Number of MDR TB patients initiated on treatment during the month					

Monthly Stock Report for Stocks & Indenting of Cat IV drugs at DR-TB Centre (To be submitted to SDS/STO by DOTS- PMDT Site)

			Opening	Receipt during the	Q. Çt	Balance Stock	Balance Stock D.O.M (One row	D.O.E (One row	
Sr.No	Nomenclature	A/U	Balance	month	issued		for each drug)		Qty required
			(A)	(B)	(၁)	(D= A+B-C)			(E=C x 2)-D
-	KANAMYCIN (Km) - 500 mg	Vials							
2	KANAMYCIN (Km) - 1000 mg	Vials							
က	LEVOFLOXACIN (Lfx)-250mg	Tabs							
4	LEVOFLOXACIN (Lfx)-500mg	Tabs							
2	CYCLOSERINE (Cs) -250 mg	Caps							
9	ETHIONAMIDE (Eto) - 125 mg	Tabs							
7	ETHIONAMIDE (Eto) - 250 mg	Tabs							
∞	PYRAZINAMIDE (Z) - 500 mg	Tabs							
တ	PYRAZINAMIDE (Z) - 750 mg	Tabs							
10	ETHAMBUTOL(E) - 200 mg	Tabs							
11	ETHAMBUTOL(E) - 400 mg	Tabs							
12	ETHAMBUTOL(E) -800 mg	Tabs							
13	PYRIDOXIN-50Mg	Tabs							
14	PYRIDOXIN - 100 mg	Tabs							
	SODIUM PARA-								
	AMINOSALICYLATE(NA PAS) 4gm								
15	Sachets (Box of 250 sachets)	Sachets							
	SODIUM PARA-AMINOSALICYLATE								
	(NA PAS) 10gm Sachets (Box of								
16	100 sachets)	Sachets							
	SODIUM PARA-AMINOSALICYLATE								
17	(NA PAS)-100gm jars	Box (100g)							
	Substitute Drugs								
18	CAPREOMYCIN (Cm)-750 mg	Vials							
19	CAPREOMYCIN (Cm)-1000 mg	Vials							
٥	MOXIEI OXACINI (MW).400mg	Tahe							

Quarterly PMR for stocking & indenting of Cat IV drugs at DTC Level

اً. اجْد (To be submitted to CTD & STO/SDS by District) State: DTC:_

Quarterly PMR for stocking & indenting of Cat IV drugs at TU Level

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(To be submitted to DTC by DOTS-PMDT implementing TU)D.T.C.TU:

<u>Cat-IV Regimen - TU Level</u>	Stock on first received	day of the Qtr during the Qtr (c+d) —e	(a) (b) (c) (d) (e) (f) (g)	Kg Body Weight Patient) Drug Boxes	25 Kg Body Weight Patient) Drug Boxes	45 Kg Body Weight Patient) Drug Boxes	70 Kg Body Weight Patient) Drug Boxes	Kg Body Weight Patient Drug Boxes	Kg Body Weight Patient) Drug Boxes	25 Kg Body Weight Patient) Drug Boxes	45 Kg Body Weight Patient) Drug Boxes	70 Kg Body Weight Patient) Drug Boxes	0 Kg Body Weight Patient) Drug Boxes	Dring Boxes
Monthly Patient Wise Boxes	temple week		(a)	Type-A (<16 Kg Body Weight Patient)	Type-A (16-25 Kg Body Weight Patient)	Type-A (26- 45 Kg Body Weight Patient)	Type-A (46-70 Kg Body Weight Patient)	Type-A (>70 Kg Body Weight Patient	Type-B (<16 Kg Body Weight Patient)	Type-B (16-25 Kg Body Weight Patient)	Type-B (26-45 Kg Body Weight Patient)	Type-B (46-70 Kg Body Weight Patient)	Type-B (> 70 Kg Body Weight Patient)	Tyne-C (Na PAS)
Monthly	Z V	9.10		_	2	က	4	5	ဖ	7	∞	0	10	7

Monthly PMR for stocking & indenting of Cat IV drugs at PHI Level (To be submitted to TU by DOTS- PMDT implementing PHI)
D.T.C. Month-

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	Ca	Cat-IV Regimen - PHI	PHI Level		
		Monthly Patient Wise Boxes	ise Boxes		
S.No	Item	МОИ	Stock on first Day of the Month	Stock received during the Month	Consumption during the month
	(a)	(q)	(c)	(p)	(e)
_	Type-A (<16 Kg Body Weight Patient)	Drug Boxes			
2	Type-A (16-25 Kg Body Weight Patient)	Drug Boxes			
က	Type-A (26- 45 Kg Body Weight Patient)	Drug Boxes			
4	Type-A (46-70 Kg Body Weight Patient)	Drug Boxes			
S		Drug Boxes			
ဖ	Type-B (<16 Kg Body Weight Patient)	Drug Boxes			
	Type-B (16-25 Kg Body Weight Patient)	Drug Boxes			
∞	Type-B (26- 45 Kg Body Weight Patient)	Drug Boxes			
တ	Type-B (46- 70 Kg Body Weight Patient)	Drug Boxes			
10	Type-B (> 70 Kg Body Weight Patient)	Drug Boxes			
7	Type-C (Na PAS)	Drug Boxes			