

WHO – GOI – ILEP - NIHFW

**ORIENTATION TRAINING PROGRAMME  
FOR  
LEM MONITORS**

**TRAINING MODULE  
2004**



**National Institute of Health and Family Welfare  
New Mehrauli Road, Munirka, New Delhi – 110 067**

## Content

1.	Introduction	2
2.	Objective	3
3.	Methodology	4
4.	Tentative Monitors Workshop Schedule	5
5.	Schedule for LEM Exercise	7
6.	Sessional Objectives	8
7.	Annexure-I	
i.	Guideline for Resource Persons for Survey Instrument-I	10
ii.	Guideline for Resource Persons for Survey Instrument-II	11
iii.	Guideline for Resource Persons for Survey Instrument-III	12
	Exercise-I	13
	Exercise-II	15
iv.	Guideline for Resource Persons for Survey Instruments-IV&V	18
v.	Guideline for Resource Persons for Summary Sheets	19
vi.	Sampling methodology for selection of Rural Health Facilities	20
	Exercise-III	22
8.	Annexure-II	
i.	NLEP Patient Card	23
ii.	NLEP-PHC Treatment Record	24
iii.	NLEP-Leprosy MDT Drug Stock Record	25
iv.	NLEP Monthly Reporting Form PHC/Block PHC Report	26
v.	NLEP-Monthly Reporting Form District/State	27
vi.	Sample of District Report	28
vii.	Quarterly Performance Assessment	29
viii.	MDT Indent Form for PHC	30

## **INTRODUCTION**

The Government of India in 1983, introduced Multi Drug Therapy (MDT) in the programme and renamed it as National Leprosy Eradication Programme (NLEP). Due to the impact of this strategy disease prevalence has decreased and has lead to the concept of eliminating leprosy as a public health problem with the assumption that below a given level of prevalence, disease transmission will be partially or totally interrupted.

With the reduction in disease prevalence rate, Government has started integration of vertical services for leprosy control with the general health care system. The integration is expected to improve access to diagnosis and treatment.

NIHFW has been assigned the task of monitoring the progress in integration and disease control activities through an independent network of Leprosy Elimination Monitors (LEMs) identified in various states. These monitors, with public health background, experience of carrying out surveys and having orientation to NLEP, are expected to complete the survey in the allotted districts once in a year on the given survey instruments.

The present training programme is meant to orient the monitors to the survey methodology and survey instruments so that they are able to complete the LEM exercise satisfactorily.

## **GENERAL OBJECTIVE**

To orient the participants to the leprosy elimination exercise, so that they are able to carry out the survey in the allotted districts.

**Specific Objectives:** The participants should be able to

- i) Describe major activities under NLEP
- ii) Describe the survey methodology
- iii) Demonstrate their skills in compilation of data on various survey instruments and in calculation of monitoring indicators.

## **Main Content Areas**

1. NLEP activities
2. Leprosy elimination monitoring exercise and methodology
3. Compilation of data on various survey instruments and summary sheets

## **Number and Nature of Participants**

The participants will be public health experts from community medicine departments of medical colleges and training institutions with experience in community surveys and leprosy control activities. The number of NIHFV monitors will be 38. WHO and ILEP agencies will also provide another 38 monitors.

## **METHODOLOGY**

The participants will be divided into 4-5 groups and each group will have facilitators. Group work exercises and demonstration will be used as methods of training.

On Day 2, a field visit to a sample of health facilities in Delhi will be made. Participants will practice – in real field conditions – the LEM methodology as well as the survey instruments.

### **Background materials**

The participants will be provided with records and reports related to leprosy cases and programme available at district and in the health institutions. The document on LEM exercise containing guidelines for conducting the survey will also be provided to them.

### **Evaluation**

The exercises and group work will be used to assess the competencies acquired by the participants.

## TENTATIVE MONITORS WORKSHOP SCHEDULE

### DAY I

9.00 - 9.30 A.M.		Registration
9.30 – 10.00 A.M.	1.	Brief on NLEP activities
10.00 -10.15 A.M.		TEA
10.15 – 11.00 A.M.	2.	Brief on LEM exercise
11.00 - 12.30 P.M.	3.	Review of survey instruments-I, II & III
		<b>Resource Persons</b>
12.30 -1.00 P.M.		Review of survey instruments-IV & V Day-wise itinerary by teams
1.00 – 1.45 P.M.		LUNCH
1.45 – 3.15 P.M.	4.	Group Work & discussion on exercises I & II
		<b>(Resource persons)</b>
3.15 - 3.30 P.M.		TEA
3.30 - 5.00 P.M.	5.	Group Work & discussion on Summary Sheets
		<b>(Resource persons)</b>
5.00 - 5.30 P.M.		Briefing about field visit

## DAY 2

- |                       |    |  |
|-----------------------|----|--|
| 8.30 AM – 1.30 P.M.   | 6. | Field visit to health facilities in Delhi<br><b>(Resource persons)</b>                     |
| 1.30 – 2.00 P.M.      |    | LUNCH  |
| 2.00 P.M. – 3.15 P.M. | 7. | Feedback on field visit  |
| 3.15 P.M. - 3.30 P.M. |    | TEA  |
| 3.30 P.M. - 5.30 P.M. | 8. | Group Work for practice on survey instruments and Summary Sheets <b>(Resource persons)</b> |

## DAY 3

- |                  |     |   |
|------------------|-----|---|
| 9.00 – 1.00PM    | 9.  | Sampling of health facilities & discussion on exercises III & issues/ problems related to data collection in field<br><b>(Resource persons)</b> |
| 1.00 – 2.00 P.M. |     | LUNCH   |
| 2.00 – Onwards   | 10. | Briefing on Administrative & logistics aspects  |

## **Schedule for 2004 LEM Exercise**

**First Batch for  
states AP, TN,  
Maharashtra,  
Karnataka,  
Orissa and West  
Bengal**

- Orientation-Training 17-19 May 2004
- Data collection 20 May –10 June, 2004
- Debriefing on 11 June 2004

**Second Batch  
for states of MP,  
Chhattisgarh,  
Delhi, Bihar,  
Jharkhand, UP &  
Uttaranchal**

- Orientation-Training 20-22 May, 2004
- Data collection: 23 May to 13 June, 2004
- Debriefing on 14 June, 2004

## **Sessional Objectives**

### **Session-1 Brief on NLEP activities**

The participants after the session should be able to describe the organization structure and functioning under the National Leprosy Eradication Programme at State and District level.

### **Session-2 LEM Exercise**

The participants should be able to describe the purpose, methodology sampling technique and data collection technique under the LEM exercise in the country.

### **Session-3 Survey Instruments**

The participants should be able to describe how to complete the various survey instruments which will be used for LEM exercise form various data sources available at state/district health facility.

### **Session-4 Group work on exercises on survey instruments**

The participants should be able to describe items in survey instruments, the sources of data for completing these instruments, and should be able to demonstrate their skills in the information compiling.

### **Session-5 Group work on exercise on summary sheets**

The participants should be able to describe the items, sources of the data and demonstrate their skills in compiling the information on summary sheets.

### **Session-6&7 Field visit to health facilities**

The participants will be divided into three to four groups and each group will visit one health facilities (hospital/dispensary) and observe the records and reports related to leprosy, interview leprosy cases and have discussion with leprosy staff. They will be exposed to the real field situation so as to know the difficulties which may arise during monitoring. The field observation will be presented & discussed at plenary session.

### **Session-8 Group work for practice on survey instruments and Summary Sheets**

Based on field observations, the participants during the session will be practice on survey instruments & summary sheets, and have discussion on difficulties and possible solutions.

### **Session-9&10 Sampling of health facilities**

During the sessions the participants will work in teams as per the districts allotted to them and will practice on sampling of health facilities in their respective districts. They will also have discussion on issues related to data collection in the field.

### **Session-11 Briefing on Administrative & logistics**

The participants will be briefed on contingency expenditure, receipts and records, stay arrangements, travel guidelines etc.

## **ANNEXURE-I**

### **GUIDELINES FOR RESOURCE PERSONS FOR SURVEY INSTRUMENTS – I**

1. The resource persons should explain the items in survey instrument-1 & give the relevant data/reports/records.
2. Ask the participants to complete the survey instruments-1 by referring to the records/reports.
3. Generate discussion in the group on various items listed in the survey instrument and how these will be useful for monitoring.
4. Discuss in group various items of survey instrument-1.
5. Generate discussion on possible difficulties likely to be faced during data collection and what could be possible solutions.

## **GUIDELINES FOR RESOURCE PERSONS FOR SURVEY INSTRUMENT – II**

1. The resource persons should explain the items in survey instrument-II & give the relevant data/reports/records.
2. Ask the participants to complete the survey instruments-II by referring to the records/reports.
3. Generate discussion in the group on various items listed in the survey instrument and how these will be useful for monitoring.
4. Discuss in group various items of survey instrument-II.
5. Show them Blister Packs.
6. Show them SIS formats LF-04 and LF-05

### **GUIDELINES FOR RESOURCE PERSONS FOR SURVEY INSTRUMENTS – III**

1. The resource person should explain the items in survey instrument-III and give the relevant reports and records.
2. Ask the participants to complete the survey instrument.
3. Generate discussion on various items in the survey instrument
4. Show them the SIS format LF-04, and insist on the MDT stock data & expiry dates

**Exercise-I** : Calculation of prevalence rate for leprosy as reported and after applying standard definitions

**Expected Outcome** : The trainees should be able to calculate prevalence rate as reported and after applying standard definitions for leprosy from the data provided to them.

### **Instruction to Trainees**

1. Please refer to the leprosy related information for a Primary Health Centre, given in Table 1
2. Mark the number of leprosy cases as reported and after applying standard definitions as on 31<sup>st</sup> March, 2004 and write the number below:
3. Calculate the prevalence of leprosy as on 31<sup>st</sup> March, 2004 as reported and after applying standard definition:

Prevalence Rate:

$$\frac{\text{No. of leprosy cases as on 31}^{\text{st}} \text{ March, 2004}}{\text{Population of PHC as on 31}^{\text{st}} \text{ March, 2004} \times 10,000}$$

4. Discuss the value so obtained with your group members and the facilitator.



**Exercise-II**

Cohort analysis of leprosy cases for case holding.

**Expected Outcome**

The trainees should be able to identify MB & PB cohort from treatment records and calculate cure rates & defaulter rates for MB & PB.

**Instructions to trainees:**

1. Mark the reference period for
  - a. MB Cohort
  - b. PB Cohort

(Note: For reference period of MB cohort leprosy cases registered between 1<sup>st</sup> May, 2001 to 30<sup>th</sup> April, 2002 and for PB cohort leprosy cases registered between 1<sup>st</sup> January 2002 to 31<sup>st</sup> December 2002. Discuss in group reasons for doing so.)
2. Mark the leprosy records on Table 2, of this exercise, which fall within the reference period.
3. Write the total number of MB & PB leprosy cases registered for treatment during the reference period by referring to the record given in Table 2.
4. Write the total number of MB cases
  - a) Cured (who completed 12 doses of MDT)
  - b) Defaulted (who did not take MDT consecutively for 12 months)
  - c) Others (who died or left the area)
  - d) Continued treatment after 12 doses of MDT
6. Write the total number of PB cases
  - a) Cured (who completed 6 doses of MDT)
  - b) Defaulted (who did not take MDT consecutively for 12 months)
  - c) Others (who died or left the area)
  - d) Continued treatment after 6 doses of MDT



**Table 2 (Contd.) :Please refer to the following data from the treatment register of PHC Rampur for the period**

Name	Age	Sex	Type of Leprosy	Date of detection and date of first dose	Pulses Received																			Remarks
					1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	
37	12	M	PB	1/1/2002	P	A	P	P	P	P	A	P											RFT	
38	14	F	MB	3/1/2002	P	P																	died	
39	25	M	PB	2/2/2002	P	P	P																LCA	
40	28	F	PB	3/2/2002	P	P	P	A	A	P	P	P											RFT	
41	48	M	MB	3/3/2002	P	A	P	P	P	A	A	P	A	A	A	A	P	P	P	P	P		RFT	
42	50	F	MB	4/3/2002	P	P	P																DIED	
43	42	M	PB	4/4/2002	P	A	A	A	A	A	A	A	A	A	A	A							DROP OUT	
44	40	M	PB	8/4/2002	P																		LCA	
45	34	F	MB	8/5/2002	P	P	P	A	A	A	A	A	A	A	A	A	A	A						
46	18	M	MB	8/5/2002	P	A	A	A	P	A	A	P	A	P	P								LCA	
47	22	F	PB	9/5/2002	P	P	A	A	P	P	P	A	P	P									RFT	
48	17	M	MB	12/5/2002	P	A	P	A	A	A	P	P	P	A	P	P	P	A	P	P			RFT	
49	30	M	PB	8/6/2002	P																		RFT	
50	32	F	PB	18/7/2002	P	A	P	A	A	A	A	A	A	A	A	A	A	A					DROP OUT	
51	18	F	PB	28/7/2002	P																		RFT	
52	22	M	PB	2/8/2002	P	A	A	A	A	A	A	A	A	A	A	A							DROP OUT	
53	14	M	MB	4/8/2002	P	P	A	P	P	A	P	A	A	A	A	A	A	A	A	A	A	A	DROP OUT	
54	32	F	PB	23/8/2002	P	A	A	A	A	A	P	P	P	P									RFT	
55	28	M	PB	3/9/2002	P	A	A	P	A	P	A	P	P	P	P								RFT	
56	31	M	MB	8/9/2002	P	A	P	P	P	P	P	P	P	A	P	P							RFT	
57	52	F	PB	17/9/2002	P	P																	RFT	
58	48	F	MB	11/10/2002	P	P	P	P	P	P	A	P	P	P	A	P	P						RFT	
59	42	M	PB	18/10/2002	P																		RFT	
60	19	M	MB	19/10/2002	P	A	P	A	A	A	A	A	A	A	A	A	A	A					DROP OUT	
61	21	F	PB	2/11/2002	P	P	P	P	P	P	P												RFT	
62	27	F	PB	8/11/2002	P	P	A	P	A	P	P	P											RFT	
63	37	M	PB	9/11/2002	P																		RFT	
64	40	F	PB	21/11/2002	P	P	A	P	P	P	P												RFT	
65	38	M	MB	27/11/2002	P	P	P	P	P	A	A	P	P	P	A	P	A	A	P	P	P		RFT	
66	28	M	PB	2/12/2002	P	A	P	P	P	P	P	P											RFT	
67	43	F	PB	8/12/2002	P	P	P	P	P	P													LCA	
68	44	M	PB	7/1/2003	P	P	P	P	A	P													DIED	
69	39	F	SSL	2/2/2003	P	P	P																RFT	
70	32	F	MB	8/12/2003	P	P	P	A	A	A	A	A	A	A	A	A	A	A					RFT	
71	14	M	PB	3/3/2003	P	P	A	A	A	A	A	A	A	A	A	P	P	P					RFT	
72	22	M	PB	31/3/2003	P	P	A	A	A	P	A	A	P	P									RFT	

## **GUIDELINE FOR RESOURCE PERSONS FOR SURVEY INSTRUMENTS – IV & V**

Ask some members of the group to play the role of a leprosy case and highlight the issues like social stigma & not revealing correct information, difficulties in understanding of technical words by leprosy cases like MDT, assessing distance in kilometers, money spent for travel etc. as given in survey instrument-IV. The difficulties and possible solutions should be discussed.

Ask some members of the group to play the role of a community member and highlight the issues related to leprosy awareness and about MDT services (survey instrument-V).

Insist on a standardized way to ask the questions to the community members. The monitors must ask questions in a neutral way, without prompting the answers.

## **GUIDELINE FOR RESOURCE PERSONS FOR SUMMARY SHEETS**

1. Discuss the need for summary sheets.
2. Introduce the summary sheets for compiling information of survey instruments and discuss important points to be kept in mind.

## Sampling methodology for selection of Health Facilities (at District Level)

The selection of health facilities/blocks at district level must be carried out by the Monitors by using a Random sampling proportional to the size of the population AND number of registered leprosy cases.

To correctly do the sampling the 10 step-by-step procedure must be followed:

1. List all the health facilities/blocks in the district.
2. Arrange them in Alphabetical order with respective population and number of registered leprosy cases.
3. Fill-up the cumulative population column as shown in exercise III, page 22.
4. Calculate the Sampling Interval (SI):

$$SI = \frac{\text{Final cumulative population}}{\text{Number of units to be selected}} \quad (\text{units} = \text{health facilities/blocks})$$

(3 units for high endemic districts (PR =3.5) and 5 for low endemic districts)

5. Select the first unit by using a bank note, and selected a random number which is between 1 (one) and the Sampling Interval  
  
Use this first random (No. 1) by looking in the cumulative population column in which this random number (No.1) falls. This is your first random selected unit/block.
6. Select the second unit/block by adding the Sampling Interval to the random No. 1. You get random No. 2. Look at the cumulative population column and select the second unit/block, in which the random No. 2 falls.
7. Select the third unit/block by adding the Sampling Interval to the random No. 2. You get random No. 3. Look at the cumulative population column and select the third unit/block, in which the random No. 3 falls.
8. Repeat the same process (by adding the Sampling Interval) until you have selected the adequate No. of blocks/units.
9. When the required numbers of blocks have been selected, look at the No. of leprosy cases in the selected blocks. In case a selected block has a very small

number of leprosy cases replace it by the block above, only if it has a significant number of cases otherwise retain the original block.

<b>Block by alphabetic order</b>	<b>Population</b>	<b>Cumulative population</b>	<b>No. of Leprosy cases</b>

10. After you have completed the selection of blocks, you may select 2 or 3 extra block by using simple random sampling from the remaining (non already selected) blocks.

**EXERCISE-III** Sampling Methodology for Selection of Rural Health Facilities in the District

Please refer to the following data related to rural health facilities in district XXX. Select five (5) health facilities using sampling proportion to population.

<b>Health Facility</b>	<b>Population</b>	<b>Cumulative Population</b>	<b>Number of Leprosy cases as on 31<sup>st</sup> March 2004</b>
Dayalpur	25000		20
Chansa	22000		18
Bahalno	19000		15
Dighal	30000		21
Asond	28000		35
Chimri	60000		10
Chamanpur	26000		18
Assim	29000		22
Moia	31000		34
Souna	28000		15
Dandhlan	9000		10
Beri	24000		25
Jahajgarh	21000		30
Chini	26000		10
Malhghar	19000		15
Ackej	20000		42
Paripur	75000		9

## Annexure-II

**L.F. 01**

<b>NATIONAL LEPROSY ERADICATION PROGRAMME (NLEP) PATIENT CARD</b>											
Sub centre					PHC						
Block/CHC				Districts				State			
Registration Number:							SC	ST	Others		
Name							Age	Female	Male		
Address											
Classification	PB	MB	New Case		Other Type (Specify)						
Visible Deformity	Yes	No	Remarks								
Date of First Dose											
<small>AFTER ENTERING ABOVE INFORMATION IN THE PHC TREATMENT RECORD, THIS PATIENT CARD IS TO BE TRANSFERRED TO SUB CENTER FOR DELIVERY OF SUBSEQUENT DOSES</small>							Signature of Medical Officer				
Date of subsequent doses:											
2	3	4	5	6 PB (Final)	7	8	9	10	11	12	
Date of discharge											
End Status	RFT			Others (specify)							
<small>THIS CARD IS TO BE MAINTAINED AT SUB CENTRE AFTER EVERY DOSE, UPDATE THE PHC TREATMENT RECORD. AFTER ACHIEVING END STATUS, THE MPW SHOULD SIGN THIS CARD AND RETAIN AT SUB CENTRE FOR FUTURE REFERENCE</small>							Signature of Sub centre MPW				
<b>Guidelines to fill-up this card</b>											
Registration Number	Running number for the fiscal year at PHC level										
Classification	PB- 1 to 5 patches and/or 1 nerve affected MB – 6 and more patches and/or 2 or more nerve affected										
New Case	A leprosy patient who has not taken MDT drugs anywhere earlier										
Other Type	Includes Immigrant, Relapse, Referral or Restart of treatment										
End Status	RFT – Released From Treatment										
	OTHERS – DEFAULTER (Case of PB or MB consecutively absent for a period of 12 months from the last dose)/DIED/MIGRATED/UNKNOWN										
<small>*In Urban situation, this same card I to be used. However, appropriate Health Unit, Area and Region may be Indicated in the place of Sub center/PHC/Block</small>											





<b>NLEP MONTHLY REPORTING FORM PHC / BLOCK PHC REPORT</b>				
<b>PHC</b> _____		<b>Block</b> _____		
<b>District</b> _____		<b>State</b> _____		
<b>Reporting Month</b> _____		<b>Year</b> _____		
1.	No. of cases at the beginning of the reporting month			
2.	Total New Leprosy Cases detected in the reporting month	PB		
		MB		
3.	Among the new leprosy cases detected during the reporting month, number of	Children		
		Female		
		Visible Deformity		
		SC		
		ST		
4.	Number of Cases deleted in the reporting month	RFT		
		Others		
5.	Number of Cases at the end of the reporting month (1+2-4)			
6.	Number of sub centers providing MDT services			
7.	Leprosy Drug Stock at the end of the reporting month			
	Blister	Quantity	Expiry Date	Total Stock
	MB (A)			
	MB (C)			
	PB (A)			
	PB (C)			
NB: Please calculate Patient – Month Blister Packs for MB (A), MB (C), PB(A) and PB (C) quarterly in the months of March, June, September and December and indicate the same in that respective Monthly Report.				
Date				Name and Signature of Medical Officer

<b>NLEP – MONTHLY REPORTING FORM</b>						
<b>District / State Report</b>						
(* Delete the level District/State whichever not applicable)						
District				State		
Population of the District / State				Total	SC	
					ST	
Reporting Month				Year		
1.	Number of Cases at the beginning of the month					
2.	Total New Leprosy Cases detected				During Reporting Month	Cumulative from 1 <sup>st</sup> April
				PB		
				MB		
				<b>Total</b>		
3.	Among the New leprosy cases detected			Children		
				Female		
				Visible Deformity		
				SC		
				ST		
4.	Number of Leprosy cases <b>deleted</b> during the month			RFT		
				Others		
				<b>Total</b>		
5.	Number of Leprosy Cases at the end of the reporting month (1+2-4)					
6.	Number of sub centers in the district / state					
7.	Number of sub centers providing MDT					
8.	Drug Stock at the end of the reporting month (if required use extra sheets):					
	Blister Packs	Compiled PHC/Dist. Stock		District / State Store Stock		Total in the District / State
		Quantity	Expiry Date	Quantity	Expiry Date	Quantity
	1	2	3	4	5	6
	MB (A)					
	MB (C)					
	PB (A)					
	PB (C)					
NB: Please calculate Patient-Month Blister Packs for MB(A), MB(C), PB(A), PB(C) quarterly in the months of March, June, September and December and indicate the same in the at respective Monthly Report						
9.	Statement of Expenditure (SOE) of DLS/SLS for the reporting month sent				(Tick)	Yes / No
Date:			District / State Officer - SIGNATURE			

### Sample: Leprosy related information for State YYY

District	State	YYY			
<b>Population of the District as on March 2004</b>		<b>Total</b>	<b>SC</b>	<b>ST</b>	
		2540788	368414	194624	
<b>Reporting Month- March</b>		<b>Year 2004</b>			
1.	Number of Cases at the beginning of the month	3588			
2.	Total New Leprosy Cases detected	<b>During Reporting Month</b>	<b>Cumulative from 1<sup>st</sup> April 2003</b>		
		<b>PB</b>	440	4311	
		<b>MB</b>	130	2517	
		<b>Total</b>	570	6828	
3.	Among the New leprosy cases detected	<b>Children</b>	104	2251	
		<b>Female</b>	250	2009	
		<b>Visible Deformity</b>	6	56	
		<b>SC</b>	119	1433	
		<b>ST</b>	20	115	
4.	Number of Leprosy cases <b>deleted</b> during the month	<b>RFT</b>	170	4350	
		<b>Others</b>	60	1650	
		<b>Total</b>	<b>230</b>	<b>6000</b>	
5.	Number of Leprosy Cases at the end of the reporting month (1+2-4)	3928			
6.	Number of sub centers in the district	510			
7.	Number of sub centers providing MDT	250			
8.	Drug stock at the end of the reporting month (if required extra sheet):				
	Blister Pack	Compiled PHC/ Distt. Stock		District/State Store Stock	Total in District/State
		Quantity	Expiry Date	Quantity	Expiry Date
	1	2	3	4	5
	MB (A)	481	Sep-03	30000	Aug-05
		586	Nov-04	55172	Feb-5
		11017	Feb-05		
	MB (C)	372	Nov-05	1623	June-06
		428	May-06		
	PB (A)	682	Sep-04	14000	May-05
		99	Oct-04	1601	July-06
		6783	Feb-05		
	PB (C)	1241	Nov-05	462	Feb-05
		148	Feb-05		
		185	July-06		
<p><b>NB:</b> Please calculate Patient Month Blister Packs for MB(A), MB(C), PB(A), PB(C) quarterly in the months of March, June, September and December and indicate the same in the at respective Monthly Report</p>					
9.	Statement of Expenditure (SOE) of DLS/SLS for the reporting month sent (Tick)				Yes/ No
<p>Date <span style="float: right;">District / State Officer - SIGNATURE</span></p>					

**Quarterly Performance Assessment**

District \_\_\_\_\_ State \_\_\_\_\_

Quarter \_\_\_\_\_ Year \_\_\_\_\_

S. No	Block/District	PD Ratio	Female (%)	New Visible Deformity (%)	SC/ST Rate		Sub-Centre involvement (%)	Patient-Month BCP Stock				Corrective Action Taken
					SC	ST		MB(A)	MB(C)	PB(A)	PB(C)	
1												
2												
3												
4												
5												

## MDT Indent Form for PHC

PHC: \_\_\_\_\_

District: \_\_\_\_\_

Month of: \_\_\_\_\_ Year: \_\_\_\_\_

Following is the quantity of MDT required for the PHC (S. No. 6)

S. No	Items	MB(A)	MB(C)	PB(A)	PB(C)
1	No. of case under treatment for each category				
2	MDT BCPs required for providing treatment for one month (Item 1 x 1)				
3	MDT required to maintain three months stock (Item 1 x 3)				
4	Total MDT drugs required (Item 2 + 3)				
5	Quantity of MDT BCPs available at PHC				
6	Net demand of MDT drugs for keeping three Patient-Months stock (Item 4 – 5)				

Date: \_\_\_\_\_ Signature of the Pharmacist

Signature of Medical Officer

**NOTES:**

1) Count the No. of cases under treatment from the Master Patient Treatment Register maintained at the block PHC.

2) MDT indent form has to be submitted every month, along with the MPR.