

REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME
Quarterly Report on Programme Management and Logistics

State Level

Name of the State: _____ Quarter and year: _____
 Name and address of STO: _____

1. Basic RNTCP services

Stake- holders	Public Sector (including Govt. / Corporation Medical Colleges, Govt. health dept., other Govt. dept. and PSUs)	Private Sector (Private Medical College, Medical Practitioner, Private Clinics/Nursing Homes and Corporate sector)	NGOs	Community Volunteers	Total
Number of Districts					
Number of STDCs					
Number of State drug stores					
Number of TB Units					
Number of DMCs					
Number of RNTCP accredited culture and DST labs					
Number of DOTS plus sites					
Number of DOT Centres/providers					
Number of Sputum collection centres					

The following reports are enclosed (Tick to indicate that report is enclosed)

- Quarterly Report on Case Finding * : _____)
- Quarterly Report on Sputum Conversion* : _____)
- Quarterly Report on Results of Treatment* : _____)
- Quarterly Report on Programme Management and Logistics* : _____)
- Quarterly Report on Infrastructure and Activities of STDC:
- Quarterly Report on State Task Force on Medical Colleges
- Quarterly Report of State Drug Store
- Quarterly Report on the DOTS-Plus

(Unit – This would generally be the district, however in certain cases the district may have 2 or more separate reporting units like Municipal Corporation and rural areas. Each reporting unit should be counted for reporting purpose)

*If any unit did not submit reports, list name(s), report(s), reason(s) and action taken _____

2. Supervision and monitoring by the State

Number of RNTCP districts visited during the quarter (By STO, Dy STO, MO at STCS and/or STDC officials)	Number of RNTCP districts not visited, attach list of districts not visited with reason/s

Review meeting of all DTOs of RNTCP Districts held this quarter? Yes No
 If Yes: Is the approved minutes available Yes No
 If No; reason/s _____

Was TU-wise analysis done and distributed to all districts? Yes No
 If yes, has it been placed on the programme website? Yes No

Was individual district performance feedback provided to the districts? Yes No
 If yes, has it been copied to Central TB Division? Yes No

Number of districts for which an internal evaluation was performed in the quarter: _____
 Number of District Internal Evaluation reports sent to CTD in the quarter: _____

3. Referral Activities

a.	Number (%) of PHIs referring >2% of New Adult out patients for sputum examination		
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4. Microscopy Activities

b.	Number of chest symptomatic patients whose sputum was examined for diagnosis		
c.	Out of (b), number of smear positive patients diagnosed		
d.	Number of TB suspects subjected to repeat sputum examination for diagnosis		
e.	Out of (d), number of sputum smear positive patients diagnosed		
f.	Total number of sputum smear positive patients diagnosed (c+e)		

5. Treatment Initiation

g.	Of the smear-positive patients diagnosed (f), number put on DOTS within the district		
h.	Of the number of smear-positive patients diagnosed (f), number put on RNTCP Non-DOTS (ND1 and ND2) within the district		
i.	Of the smear-positive patients diagnosed (f), number referred for treatment outside the district		

6. MDR-TB case finding activity

Number of MDR-TB suspects identified	
Number of MDR-TB suspects from whom sputum was collected and transported to diagnostic lab	

7. Quality of DOTS implementation

7.1.	Number (%) of all smear positive cases started on RNTCP DOTS treatment within 7 days of diagnosis (Information from District PM report)		
7.2.	Number (%) of all smear positive cases registered within one month of starting RNTCP DOTS treatment (Information from District PM report)		
7.3.	Number (%) of cured all smear positive cases* having end of treatment follow-up sputum examination done within one week of last dose (Information from District PM report)		
7.4.	Number (%) of patients (all forms of TB) registered during the quarter receiving DOT through a community volunteer (Information from District PM report)		

* These cases should be from the same quarterly cohort which have been included in the report on Results of Treatment

8. Quality assurance of sputum microscopy

Sl. No.	Activity	Number during the reporting quarter	Cumulative number
	No. of districts visited by IRL team for the purpose of OSE and panel testing during the quarter and the year		
2	No. (%) of STLS failing the panel testing		
3	Number (%) of DMCs with High False Results (HFN and/or HFP results) till the previous quarter and in the year (January to December):		
4.	Number (%) of DMCs with High False Positive (HFP) Results till the previous quarter and in the year (January to December):		
5.	Number of districts who have submitted of EQA annex-E for all the 3 months of the previous quarter to IRL		

9.1 Staff position at the state level

Category of staff	Sanctioned	In Place		Total in place and Trained	Number trained/retrained during reporting period
		State Government Staff/staff from other programmes	Contractual under RNTCP		
State TB Cell					
STO					
Deputy STO					
MO State TB Cell					
Epidemiologist					
TB HIV co-ordinator					
Urban TB Coordinator					
IEC Officer					
Accountant					
Data entry operator					
Secretarial Assistant					
State TB Training and Demonstration Centre					
STDC Director					
IRL Microbiologist					
STDC Medical Officers					
Epidemiologist					
IRL LTs					
DOTS Plus site					
DOTS Plus site MO					
DOTS Plus site statistical Assistant					
State drug stores					
SDS Pharmacist					

9.2. Staff position at the district level (All districts combined)

Category of staff	Sanctioned	In Place		Total in place and Trained	Number trained/retrained during reporting period
		State Government Staff/staff from other programmes	Contractual under RNTCP		
District Level Staff					
District TB Officer					
Second Medical Officer of the DTC					
Communication facilitators					
Designated Medical Officer (MO-TC) of the TB Unit					
DOTS Plus and TB-HIV Supervisors					
Senior Treatment Supervisor (STS)					
Senior Tuberculosis Laboratory Supervisor (STLS)					
TB Health Visitor					
DMC LTs/ Microscopist					
Data Entry Operators					
Medical Officer (at BPHC / PHC / CHC/other)					
Paramedical staff including health workers					
DOT providers/Community Volunteers including ASHAs (or equivalent)*					

9.3. Details of training activities held at STDC/State level during this quarter

Category of trainees (specify if re-training)	No. of trainees batch-wise	From (Date)	To (Date)	Duration (Days)
	(a)			
	(b)			
	(c)			
	(d)			
Total training days				

10. Equipment in place

Item	Number in place			In working condition		
	State HQ	STDC	All RNTCP Districts	State HQ	STDC	All RNTCP Districts
Binocular microscopes						
X-ray machine of DTC						
Photocopier						
Fax machine						
Computer						
Internet connection						
LCD projector						
Overhead projector						
Vehicles						
Jeep / Four-Wheelers						
10 seater bus						
Two-wheeler						

Is there an AMC in place for binocular microscopes? Yes No

Is there an AMC in place for IRL equipment supplied by RNTCP? Yes No

Any IRL equipment for culture and DST on solid media not working/not available Yes No

If yes then attach details.

Has the state done the annual procurement of Culture and DST lab consumables for the current financial year? Yes No

State Drug Store Status

Arrangement in place for transport of drugs from SDS to districts

- Contract at State level with a transport agency
- Collection by individual districts using DTC vehicles
- Any other (attach details)

11. Medications

11.1. Adult Patient Wise Boxes

Item	Unit of Measurement	Stock on first day of Quarter	Stock received during the quarter	Stock transferred in	Reconstitution of boxes during Quarter	Stock Transferred Out *	Patients started on treatment	Stock on last day of Quarter (a+b+c+d) - (e+f)	Quantity Requested [(f/3) x 10] - g
		(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Category I	Boxes								
Category II	Boxes								
Category III	Boxes								

11.2. Prolongation Pouches and Inj SM

Item	Unit of Measurement	Stock on first day of Quarter	Stock received during the quarter	Stock transferred in	Reconstitution during Quarter	Stock Transferred Out *	Consumption during Quarter	Stock on last day of Quarter (a+b+c+d) - (e+f)	Quantity Requested [(f/3) x 10]-g
		(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Prolongation pouches	Pouches each with 12 blister strips								
Streptomycin 0.75 g	Vials								

11.3. Paediatric drugs (Including drugs for Adult Patients <30kgs)

Item	Unit of Measurement	Stock on first day of Quarter	Stock received during the quarter	Stock transferred in	Reconstitution during Quarter	Stock Transferred Out *	Consumption during Quarter	Stock on last day of Quarter (a+b+c+d) - (e+f)	Quantity Requested [(f/3) X 10]-g
		(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Paediatric PC 13	Boxes								
Paediatric PC 14	Boxes								
Paediatric PC 15	Pouches each with 12 blister strips								
Paediatric PC 16	Pouches each with 12 blister strips								

11.4. RNTCP Loose Drugs

Item	Unit of Measurement	Stock on first day of Quarter	Stock received during the quarter	Stock transferred in	Stock Transferred Out *	Consumption during Quarter	Stock on last day of Quarter (a+b+c) - (d+ef)	Quantity Requested [(e/3) X 10]-f
		(a)	(b)	(c)	(d)	(e)	(f)	(g)
INH 300 mg	Tablets							
INH 100 mg	Tablets							
Rifampicin 150 mg	Capsules							
Pyrazinamide 750 mg	Tablets							
Ethambutol 800 mg	Tablets							

* Enclose copy of drug transfer out form

% (and names) of districts having drug stocks for less than one month at the end of quarter (from "Medications" section of District PM Report):

11. 5. RNTCP second line anti-TB drugs								
S.No.	Item	UOM	Stock on first day of the Qtr (SDS + DOTS Plus Site +DTCs)	Stock transferred In / received during the Qtr (From Suppliers + returned back incomplete IP/CP boxes from DTCs)	Consumption during the Qtr (Only at the DOTS Plus Site+DTCs after converting IP/CP boxes as in (X) below into loose drugs)	Transfer Out (From SDS only)	Stock on last day of the Qtr (SDS + DOTS Plus Site + DTCs)	Requirement/ Request for transfer of drugs
							E=(a+b)-(c+d)	
			(a)	(b)	(c)	(d)	(e)	(f)
	Loose Drugs (from SDS and DOTS Plus Sites)							
1	KANAMYCIN (Km) - 500 mg	Vials						
2	KANAMYCIN (Km) - 750 mg	Vials						
3	OFLOXACIN (Ofx) - 200 mg	Caps						
4	OFLOXACIN (Ofx) - 400 mg	Caps						
5	CYCLOSERINE (Cs) -250 mg	Tabs						
6	ETHIONAMIDE (Eto) - 250 mg	Tabs						
7	PYRAZINAMIDE (Z) - 500 mg	Tabs						
8	PYRAZINAMIDE (Z) - 750 mg	Tabs						
9	ETHAMBUTOL(E) - 200 mg	Tabs						
10	ETHAMBUTOL(E) - 800 mg	Tabs						
11	PYRIDOXIN - 100 mg	Tabs						
12	SODIUM PARA-AMINOSALICYLIC ACID (NA PAS)	Box of 100 gms						
	Patient Wise Boxes (From Compilation of District PMR Reports)				(X)			
1	IP (≤ 45 Kg Body Weight Patient)	PWB						
2	IP (> 45 Kg Body Weight Patient)	PWB						
3	CP (≤ 45 Kg Body Weight Patient)	PWB						
4	CP (> 45 Kg Body Weight Patient)	PWB						
5	NA PAS containing drugs for 1 month in 3 small boxes	Carton of 3 boxes						

Note: For filling in information in Column (c), the loose drugs in the IP/CP boxes as in (X) need to be accounted for purposes of compilation.

12. TB-HIV collaborative activities

Whether state level TB-HIV coordination committee met during the quarter Yes/ No
 If yes, are the approved minutes of the meeting available? Yes/No

No. of TB-HIV TWG meetings held during the quarter _____

Monthly ICTC reports from SACS received? Yes/No

13.1. Participation of Medical Colleges and TB Hospitals

(a) Nature of ownership

Health facility	Government		Private		Total	
	With RNTCP facility	Without RNTCP facility	With RNTCP facility	Without RNTCP facility	With RNTCP facility	Without RNTCP facility
Medical Colleges						
TB Hospitals						

(b) Staff provided on contractual basis to Medical Colleges

Category of Staff	Total number in the state
MO	
LT	
TBHV	

13.2. NGOs participating in RNTCP (signed as well as unsigned schemes) during the quarter*:

Number of NGOs/ private practitioners participating in RNTCP during the quarter*:

	RNTCP PPM Scheme											Total
	ACSM (IEC)	Sputum collection	Sputum Transport	DMC (a)	DMC (b)	LT	Culture & DST	Adherence	Slum	TU	TB-HIV	
NGO												
PPs												
Total												

13.3. Other sector involvement

Sector	Number in the state	Number implementing RNTCP
ESI		
Railways		
CGHS		
Prisons		
Corporate hospitals		
PSU/others (mining, shipping, defence)		

(Attach list of NGOs and private sector institutions, which have started participating in any of the above schemes in the most recent quarter including name, address, and scheme.)

14. IEC / ACSM activities

Activity	No. Implemented
Patient Provider Meetings	
Community Meetings	
School based activities	
Sensitizations: PRI / PPs/NGOs etc	
Outdoor publicity : Local folk/mass media campaign/mela	
Other activities (specify)	

15. Financial management

Financial Management	MM/YYYY
Latest month for which all RNTCP contractual staff at the state level has been paid remuneration	
Latest month for which all RNTCP contractual staff in all districts have been paid their remuneration	
Latest month for which all RNTCP contractual staff in all districts have been paid Vehicle maintenance / POL	
Period up to which payments to NGO/PPs under signed schemes in all districts have been made	
Period up to which payment to the eligible Community DOT Providers has been made in all the districts	

Name of officer reporting (in Capital Letters with designation): _____

Signature: _____

Date: _____