Tool M2 **HEALTH FACILITY FORM**

REPUBLIC OF KENYA - MINISTRY OF HEALTH

NATIONAL INTEGRATED FORM FOR REPRODUCTIVE HEALTH, HIV/AIDS, MALARIA, TB and CHILD NUTRITION

DISTRICT: _____ NAME OF FACILITY: _____

MONTH: _____

YEAR: _____

Α:	FAMILY PLANNING		NEW CLIENTS	RE-VISITS	TOTAL
1.	PILLS	Microlut			
••		Microgynon			
2.	INJECTIONS	INJECTIONS			
3.	I.U.C.D.	Insertion			
4.	IMPLANTS	Insertion			
5.	STERILIZATION	B.T.L.			
5.		Vasectomy			
6.	CONDOMS	No. of Clients receiving			
7.	ALL OTHERS: (specify)				
8.	TOTAL NO. OF CLIENTS				
j	9. REMOVALS:	IUCD	IMI	PLANTS	

B: N	ICH - ANC / PMCT	New	Re-visit	TOTAL
1.	No. of ANC Clients			
2.	No. of Clients with Ht			
3.	No. of Clients given I	PT (1 st dose)		
4.	No. of Clients given I	PT (2 nd dose)		
5.	No. of Clients comple	eted 4th Ante	natal Visit	
6.	No. of ITNs distribute	d to ANC clie	ents	
-		Counselled		
7.	No. of ANC clients	Tested for H		
		HIV+		
8.	No. of clients	Tested for S		
0.	No. of clients	Found +ve		
9.	No. of clients issued	with preventi	ve ARVs	
10.	No. of infants	At 6 wks		
10.	tested for HIV	After 3 Mon	ths	
11.	HIV+ referred for	Mothers		
•••	follow up	Partners		
12.	No. of infants issued	with prevent	ive ARVs	
13.	No. of mothers couns options	selled on infa	nt feeding	
		Counselle	d	
14.	No. of partners	Tested		
		HIV+		

D:	STI	Type of visit	Females	Males	Total
	11	Initial visit			
1.	Urethral Discharge	Re-att			
		Referrals			
	Cases of Genital ulcer disease	Initial visit			
2.		Re-att			
	(GUD)	Referrals			
	Cases of	Initial visit			
3.	Ophthalmia	Re-att			
	Neonatorum	Referrals			
4.	Cases of Syphilis S	erology			
5.	Grand Totals				

C: N	IATERNITY- PMCT		TOTAL
1.	No of Women coun	selled	
2.	Women tested for I	HIV	
3.	Women found HIV+		
4.	No. of Women issu preventive ARVs	ed with	
5.	No. of infant Prever ARVs administered		
6.	Total Deliveries fro	m HIV+ women	
7.	No initiated	Women	
	cotrimoxaxole	Infants	

E: M	ATERNITY / SAFE DELIVERIES	NUM	BER		
1.	Normal Deliveries				
2.	Caesarean Sections				
3.	Breech Delivery				
4.	Assisted vaginal delivery				
5.	TOTAL DELIVERIES				
6.	Live Births				
7.	Still Births				
8.	Under Weight Babies (Weight below 2500 grams)				
9.	Pre-Term babies				
10.	No. of babies discharged alive				
11.	Referrals				
12.	Neonatal Deaths				
13.	Maternal Deaths				
Mate	ernal complications	Alive	Dead		
14.	A.P.H. (Ante Partum Haemorrhage)				
15.	P.P.H. (Post Partum Haemorrhage)				
16.	Eclampsia				
17.	Ruptured Uterus				
18.	Obstructed labour				
19.	Sepsis				

Tool M2

FACILITY: ______ MONTH: ______ YEAR: _____

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F:	PAC SERVICES	TOTAL
1.	No. of MVA	
2.	No. of D & C	
3.	No. of FP Up take	

ш.	VCT		15-24	years	≥ 25 ⊻	years	TOTAL
•••			F	М	F	М	IOTAL
	VOT	Counselled					
1.	VCT Clients	Tested					
		HIV+					
		Counselled					
_	No of	Tested					
2.	couples	Both HIV+					
		With discordant					

I: DTC		Children (0-14 yrs)			ults lyrs)	TOTAL	
			F	М	F	М	
1.	No.	Outpatient	•				
	counselled	In-Patient					
2.	No. tested	Outpatient					
2.	No. lested	In-Patient					
3.	No. HIV+	Outpatient					
з.	NO. HIV+	In-Patient					

G: T	В	New	Re-att	Total
1.	No. of TB cases detected			
2.	No. of smear positive			
3.	No. of smear negatives			
4.	No. of Extra-pulmonary TB patients			
5.	No. of Re-treatment TB patients			
6.	Total No. of TB Patients tested for HIV			
7.	Total No. of TB Patients HIV+			
8.	No. of TB HIV patients on CPT			
9.	No. of defaulters			
10.	Total No. completed treatment (all forms of TB) who started treatment this month last year			
11	No of TB deaths (who started treatment this month last year)			

J: CHILD HEALTH AND NUTRITION INFORMATION SYSTEM (CHANIS)								
Children Needing Follow up F M TOTAL								
1.	Marasmus							
2.	Kwashiorkor							
3.	Anaemia							
4.	Faltering Wt							
0	Others e.g. Vitamin A deficiency, etc. (Specify):							
5.								

K: ART		Children 0-14yrs		Adults >14yrs		Totals		Grand Totals	
			F	Μ	F	М	F	М	
		PMCT clients							
	No of new patients	VCT clients							
	enrolled within the	TB patients							
1.	month for HIV care by	In patients							
	entry point	CŴC							
		All others							
		Sub-total							
2.	Cumulative No. of persons this facility at end of the m								
	, , , , , , , , , , , , , , , , , , ,	WHO stage 1							
	Number of patients starting ARVs within the month by WHO stage	WHO stage 2							
3.		WHO stage 3							
		WHO stage 4							
		Sub-total							
4.	Cumulative No. of persons facility at end of the month	started on ARVs at this							
	Total No. of notionto	Pregnant women							
5.	Total No. of patients currently on ARVs	All others							
	currently of ARVS	Sub-total							
6.	No. of persons who are en ART but have not been sta	rolled and eligible for rted on ART							
		Sexual assault							
7.	Post exposure	Occupational							
1.	prophylaxis(PEP)	All others				1			
		Sub-total							
	Total No. of nationto	Cotrimoxazole							
8.	Total No. of patients currently on prophylaxis	Fluconazole				1			
	currently on prophylaxis	Sub-total							

L: E	BLOOD SAFETY	NUMBER	BLOOD SAFETY (cont.)		NUMBER
1.	Blood units collected from Regional Blood Transfusion Centers		5.	Blood units screened found HIV+	
2.	Blood units collected from other sources Other than Regional Blood		6.	Blood units screened for Hepatitis B	
3.	Blood units screened at health facility		7.	Blood units screened for Hepatitis C	
4.	Blood Units transfused		8.	Blood Units screened for Syphilis	

Prepared By:	Designation:	
Date:	Signature:	