



नेपाल सरकार

स्वास्थ्य व्यवस्थापन सूचना प्रणाली

सम्भावित क्षयरोग दर्ता रजिष्टर
PRESUMPTIVE TUBERCULOSIS REGISTER

स्वास्थ्य संस्थाको नाम:

जिल्ला:

नगरपालिका/गाउँ पालिका:

वडा नं.:

प्रयोग मिति:

आर्थिक वर्ष:

देखि

सम्म

Presumptive TB Register

SN	RN	Screened Date	Name of Patient		Age		Address		Screened By		Requested/ Referred for Diagnosis					TB Diagnosis					Treatment Status				Remarks							
		DD/YY	Name	Ethnic Code	Female	Male	District	M/RM	X-ray	Symptom	Tests type					Lab result					PBC	PCD	EP	Hr TB		RR/DR TB	Enrolled	Died	LFU	Referred	Referred HF Name	
		YYYY	Surname				Ward No	Contact no																							Address	S
		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
	RN	DD /MM	Name	Ethnic Code	1	2	District	M/RM	1	2	S	X	C	L	O	Name of HF / Hospital	Result	Result	Result	Result	Result	1	2	3	4	5	1	2	3	4	Referred HF Name	
		YYYY	Surname				Ward No	Contact no			Date	Date	Date	Date	Date	Address	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date
	RN	DD /MM	Name	Ethnic Code	1	2	District	M/RM	1	2	S	X	C	L	O	Name of HF / Hospital	Result	Result	Result	Result	Result	1	2	3	4	5	1	2	3	4	Referred HF Name	
		YYYY	Surname				Ward No	Contact no			Date	Date	Date	Date	Date	Address	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date
	RN	DD /MM	Name	Ethnic Code	1	2	District	M/RM	1	2	S	X	C	L	O	Name of HF / Hospital	Result	Result	Result	Result	Result	1	2	3	4	5	1	2	3	4	Referred HF Name	
		YYYY	Surname				Ward No	Contact no			Date	Date	Date	Date	Date	Address	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date
	RN	DD /MM	Name	Ethnic Code	1	2	District	M/RM	1	2	S	X	C	L	O	Name of HF / Hospital	Result	Result	Result	Result	Result	1	2	3	4	5	1	2	3	4	Referred HF Name	
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		YYYY	Surname				Ward No	Contact no			Date	Date	Date	Date	Date	Address	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date

जाती कोड: १ दलित, २ जनजाती, ३ मधेशी, ४ मुस्लीम, ५ ब्राह्मण/क्षेत्री,

S= Sputum, X=GeneXpert, C=Culture, L=LPA, O= Others (Define In Remarks)