नेपाल सरकार

स्वास्थ्य व्यवस्थापन सूचना प्रणाली

औषधी प्रतिरोधी क्षयरोग उपचार रजिस्टर

DR TUBERCULOSIS TREATMENT REGISTER

स्वास्थ्य संस्थाको नाम:

जिल्ला: **नगरपालिका/गाउँ पालिका:** **वडा नं.:**

प्रयोग मिति: **आर्थिक वर्ष:** **देखि** **सम्म**

DR TB Treatment Register

DRTB Reg. No:	Registration Date: dd/mm/yyyy			Patient under CBDOT	
Patient Name:	Ethinic Code:	Age:	Sex: F M	Weight (kg):	Height:…. .CM
Province	Districts:	M/RM:		Ward No Tole	
Co-Morbidity:		Guardian's Name:			
Phone no:. Guardian/Patient		DOT Provider:			
No.of Household Member: ……	No.of <5 years children :……	No.of HH members screened for TB:…			

DST Result	H	R	Z	E	Mfx	Mfxh	Lfx	Bdq	Lzd	Cs	cfz	AM	Eto	Dlm			TB HIV Status		
Base line/ Date																	HIV Infection	Patients on	
Follow up Date																	1.Positive 2.Negative 3.Unknown	ART	CPT
Follow up Date																			

Registraion Category	1. New 2. Relapse 3.1 TAF*(New_FLD) 3.2 TAF(Retreatment_FLD) 3.3 TAF(Ret_Hr TB) 3.4. TAF (2nd line) 4. TALF** 5. OPT*** 6. UPTH****

Type	RR/MDR (SSTR)			RR/ MDR (LTR)			Pre- XDR			XDR		
Month	Lab No/date	SR	CR	Lab No/date	SR	CR	Lab No/date	SR	CR	Lab No/date	SR	CR
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Outcome: 1.cured 2. Completed 3. Failed 4. Died 5. Loss to follow-up 6 Not Evaluated **Date:**

H=Isoniazid, R=Rifampicin, Z=Pyrazinamide, E=Ethambutol, Mfx=Moxifloxacin, CM=Capreomycin, Lfx=Levofloxacin, Eto=Ethionamide, Cfz=Clofazimine, Lzd= Linezolide, CS=Cycloserine, Del=Delamanid, Bdq=Bedaquiline, AM=Amikacin

After Treatment Completion follow-up

6 Month	Lab No/date	SR	12 Month	Lab No/date	SR	18 Month	Lab No/date	SR	24 Month	Lab No/date	SR

*TAF = Treatment After Failure **TALF= Treatment After Loss to follow up ***OPT =Other Perviously Treatmentfollowup ****UPTH = Unknown Previous TB Treatment History

जाती कोडः १ दलित, २ जनजाती, ३ मधेशी, ४ मुस्लीम, ५ ब्राह्मण/क्षेत्री, ६अन्य