

NATIONAL TUBERCULOSIS CONTROL PROGRAMME
 Directorate General Health Services, Bangladesh
 Tuberculosis Laboratory Register

Lab Serial No.	Date of specimen received	Name in full	Address in full	Occupation	Age	Sex (Tick)		Name of treatment/referring facility	Reason for examination		Result of Smear Examination		*** Result of Xpert MTB/RIF Examination	TB Registration No./e-TBM No.	Referred by**	Signature	Remarks	
						M	F		Diagnosis (Tick)	*Follow up	1	2						

*Enter Month of follow-up

**Enter the appropriate code:

GPP=Graduate Private Practitioner, NGPP=Non-graduate Private Practitioner, GFS=Government Field Staff, SS=Shastha Shebika, NGFS=Nongovernment Field Staff, VD=Village Doctor, CV=Community Volunteer, GH=Government Hospital, PH=Private Hospital, CHCP=Community Health Care Provider, TBP=TB Patient, Self=Self, Other (specify)=

***Xpert MTB/Rif test result reported as follows:

T=MTB detected, Rif resistance not detected; RR=MTB detected, Rif resistance detected; TI=MTB detected, Rif resistance indeterminate; N=MTB not detected; I=invalid/no result/error.