

# NATIONAL TUBERCULOSIS CONTROL PROGRAM

Directorate General of Health Services, Bangladesh

Quarterly report on case finding of tuberculosis

TB 10

<b>Name of District:</b> <b>Name of Upazila/ Centre/ Address:</b> <b>Name &amp; Signature of UH&amp;FPO/ In-charge of DOTS/ Health Unit:</b> Write here the Name of CS/ In-charge	Patients registered during	<b>Date of Completion of this Form:</b> Name, Designation, Signature & Contact no. of Person completed the Form:  Write here the Name & Desig. of Person com. the Form  Write here Contact no.						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">quarter</td> <td style="width: 33%;"></td> </tr> <tr> <td colspan="3" style="text-align: right;">Year</td> </tr> </table>			quarter		Year		
			quarter					
Year								
Population of the area: Bact. Confirm New Cases: Bact. Confirm CNR:								

**Block 1: All TB cases registered (excluding "Transfer in")**

Pulmonary														Extra-Pulmonary										Total (19)				
Bacteriologically Confirmed TB cases							Clinically Diagnosed							Bacteriologically Confirmed / Clinically Diagnosed TB cases														
Treatment History Unknown (1)	New (2)		Previously treated				Treatment History Unknown (7)	New (8)		Previously treated				Treatment History Unknown (13)	New (14)		Previously treated				Others (Treatment Outcome Unknown) (18)							
			Relapses (3)	Treatment after failure (4)	Treatment after loss to follow up (5)	Others (Treatment Outcome Unknown) (6)				Relapses (9)	Treatment after failure (10)	Treatment after loss to follow up (11)	Others (Treatment Outcome Unknown) (12)				Relapses (15)	Treatment after failure (16)	Treatment after loss to follow up (17)									
M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total
Age-groups																												
0-4																												
5-14																												
15-24																												
25-34																												
35-44																												
45-54																												
55-64																												
>=65																												
Total																												

*Comment (if any):* \*\*\*\*\*

District:

**TB 10**

Upazila/ Address & Ward No:

**Block 2: No. of Patients Referred by\*:**

PP (graduate)	Non-graduate PP	GFS	SS/ NGFS	VD	CV	Govt. Hospital	Private Hospital	CHCP	TB Patient	Self	Others (specify)	Total

Note: Like as treatment card

**Block 3: Laboratory Activity - Sputum smear microscopy\*\***

No. of Presumptive TB cases examined for diagnosis by sputum smear microscopy			No. of Presumptive TB cases with positive sputum smear microscopy result		
Male	Female	Total	Male	Female	Total

**Block 4: Laboratory Activity – GeneXpert test\*\***

No. of Presumptive TB cases examined by GeneXpert			No. of Presumptive TB cases with MTB positive and RIF susceptible result		
Male	Female	Total	Male	Female	Total

\*\* This information to be included in the Lab report form

**Block 5: TB/ HIV activities**

5 (A) Diagnosed TB cases (with high risk for HIV)	No. of TB patients tested for HIV before or during TB treatment			No. of patients found HIV positive before or during TB treatment		
	Male	Female	Total	Male	Female	Total
Bacteriologically Confirmed New/ treatment History Unknown Pulmonary TB cases						
Clinically diagnosed New/ treatment History Unknown Pulmonary TB cases						
New/ treatment History Unknown Extra Pulmonary TB cases						
All re-treatment cases						

5 (B) ***PLWHA suspect for TB	No. of PLWHA tested for AFB			No. of AFB positive result among tested PLWHA		
	Male	Female	Total	Male	Female	Total

**Block 6: IPT activities**

No. of eligible child			No. of child registered for IPT		
Male	Female	Total	Male	Female	Total

Age-groups (Registered child)						
<1 year		1 to <5 years		Total		
Male	Female	Male	Female	Male	Female	Total

**Block 7: Laboratory Activity- X-Ray test**

No. of X-Ray conducted			No. of X-Ray suggestive for TB			No. of X-Ray suggestive presumptive sent for Gene Xpert		
Male	Female	Total	Male	Female	Total	Male	Female	Total

No. of X-Ray suggestive presumptive sent for Gene Xpert found MTB Detected RR not detected			No. of X-Ray suggestive presumptive sent for Gene Xpert found MTB Detected RR detected		
Male	Female	Total	Male	Female	Total

Comment (if any):

\* PP-Private Practitioner, GFS-Govt. Field staff, SS-Shastha Shebika, NGFS-Nongovernment Field Staff, VD-Village Doctor, CV- Community Volunteer, CHCP- Community Health Care Provider

\*\*\*PLWHA-People living with HIV/AIDS