

# Annual Report

**Department of Health Services**  
2068/69 (2011/2012)



GOVERNMENT OF NEPAL  
MINISTRY OF HEALTH AND POPULATION  
**DEPARTMENT OF HEALTH SERVICES**  
KATHMANDU

## Table of Contents

<b>EXECUTIVE SUMMARY</b> -----	<b>i</b>
<b>1. INTRODUCTION</b> -----	<b>1-5</b>
1.1 BACKGROUND-----	1
1.2 DEPARTMENT OF HEALTH SERVICES (DoHS)-----	2
1.3 SOURCES OF INFORMATION-----	5
1.4 STRUCTURE OF THE REPORT-----	5
<b>2. CHILD HEALTH</b> -----	<b>6-54</b>
2.1 IMMUNIZATION-----	6
2.2 NUTRITION-----	22
2.3 CB-IMCI AND NEWBORN CARE-----	40
<b>3. FAMILY HEALTH</b> -----	<b>55-90</b>
3.1 FAMILY PLANNING-----	55
3.2 SAFE MOTHERHOOD AND NEWBORN HEALTH-----	66
3.3 FCHV-----	77
3.4 PRIMARY HEALTH CARE OUTREACH-----	81
3.5 DEMOGRAPHY AND REPRODUCTIVE HEALTH RESEARCH-----	84
3.6 ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH-----	88
<b>4. DISEASE CONTROL</b> -----	<b>91-158</b>
4.1 MALARIA-----	92
4.2 KALA-AZAR-----	99
4.3 LYMPHATIC FILARIASIS-----	103
4.4 DENGUE-----	108
4.5 TUBERCULOSIS-----	110
4.6 LEPROSY-----	125
4.7 HIV/AIDS AND STI-----	144
4.8 EYE CARE-----	154
<b>5. CURATIVE SERVICES (Inpatients/OPD)</b> -----	<b>159-168</b>
<b>6. SUPPORTING PROGRAMS</b> -----	<b>168-227</b>
6.1 HEALTH TRAINING-----	169
6.2 HEALTH EDUCATION, INFORMATION AND COMMUNICATION-----	178
6.3 LOGISTICS MANAGEMENT-----	183
6.4 PUBLIC HEALTH LABORATORY SERVICES-----	193
6.5 PERSONNEL ADMINISTRATION MANAGEMENT-----	201
6.6 FINANCIAL MANAGEMENT-----	204
6.7 MANAGEMENT-----	212
6.8 PRIMARY HEALTH CARE REVITALIZATION-----	221
<b>7. MONITORING AND EVALUATION</b> -----	<b>228-241</b>
<b>8. OTHER DEPARTMENT</b> -----	<b>242-252</b>
8.1 DRUG ADMINISTRATION-----	242
8.2 AYURVEDA-----	245
8.3 HOMEOPATHIC-----	251
<b>9. DEVELOPMENT PARTNERS</b> -----	<b>253-264</b>
9.1 MULTILATERAL ORGANIZATIONS-----	253
9.2 BILATERAL ORGANIZATIONS-----	254
9.3 INTERNATIONAL NON GOVERNMENT ORGANIZATIONS (INGOs)-----	257
9.4 NON GOVERNMENTAL ORGANIZATIONS-----	263
<b>ANNEXES</b> -----	<b>265-420</b>
ANNEX 1 ACTIVITIES CARRIED OUT IN FY 2068/69-----	265
ANNEX 2 TARGET FOR FY 2069/70-----	275
ANNEX 3 HEALTH SERVICES (Target Population, Raw/Analysed Data)-----	282
ANNEX 4 ACRONYMS-----	414





**Government of Nepal**  
**Ministry of Health and Population**



262987  
262590  
262802  
Phone: 4. 262706  
262935  
262862

**Ramshahpath, Kathmandu**  
**Nepal**



## Message

It is matter of satisfaction for me to introduce this comprehensive annual report of the Department of Health Services for FY 2068/69 based on performance reviews carried out at all levels of the health care delivery system.

Regular reviews of progress are important to track achievements against the set targets and to monitor the progress on achieving health-related goals as well as to identify the gaps and actions needed for future improvements.

By improving and expanding services the Ministry of Health and Population is striving to ensure that all Nepalese people, especially women, children, adolescents, senior citizens, vulnerable groups, and under privileged, indigenous and marginalized populations in rural and urban areas, have greater access to quality health care. The ministry is committed to the 'Health for All' goal and is formulating pro-people plans and policies and strengthening implementation, monitoring and evaluation in collaboration with the public and private sector and external development partners.

I am sure that this eighteenth DoHS annual report will help planners, researchers, managers, decision-makers and health service providers to analyze the health situation and gauge progress in the health sector.

To conclude, I would like to extend my sincere thanks to DoHS and all those involved in preparing and publishing this report.

Vidyadhar Mallik  
Minister

April 2013





Government of Nepal  
**Ministry of Health and Population**



262987  
262590  
262802  
Phone: 4. 262706  
262935  
262862

Ramshahpath, Kathmandu  
Nepal




## Preface

It is very rewarding for me to witness the publication of this annual report of the Department of Health Services for 2068/69. I am sure that this report be a great help for improving the planning, monitoring and evaluation of health services in the country and to increase understanding of the important health issues.

This report covers all the major activities of the Department of Health Services and the services rendered by other departments of the Ministry of Health and Population, external development partners and some non-governmental and private sector organisations. It systematically presents and analyses data on the performance of the different divisions and centres of the department in the last fiscal year. The data is presented alongside comparative figures from previous years. It serves as a very useful reference tool to identify the many positive achievements, which should be replicated, and the lessons learned from the weak performances.

I would like to offer my sincere appreciation for the efforts made by all DoHS divisions and centres, regional health directorates, district health offices, district public health offices, health facilities and female community health volunteers to improve the health of the people of Nepal. I also extend my sincere thanks to all the development partners, INGOs, NGOs, media, professionals and other health sector institutions for their assistance to improve the country's health services.

Finally, I would like to extend my appreciation and thanks to the Director General of DoHS, the Director of the Management Division and his team along with the personnel involved in information management and the other contributors who helped bring out this annual report.

  
Dr Praveen Mishra  
Secretary

April 2013





Government of Nepal  
Ministry of Health and Population  
Department of Health Services

Phone: 01-4262063

4251242

Fax: 01-4262802



Kathmandu, Nepal



## Foreword

It is my great pleasure to present the Annual Report of the Department of Health Services 2068/69 (2011/12), the 18<sup>th</sup> in a consecutive series. The annual report is a major outcome of the annual performance review workshops conducted at national, regional and district levels. It reflects and documents the performance of all the major programs and activities carried out by various health institutions at all levels, from the community to the center.

The facts presented in the report are mainly based on the information managed by the Health Management Information Section (HMIS) as well as other sources within the health system. The report provides comprehensive information about health care activities, programs, policies, strategies, achievements, as well as issues emerged during the fiscal year 2068/69. The report also covers the progress of activities carried out by other departments under the Ministry of Health and Population and external development partners, INGOs and NGOs during the reference year.

I am pleased to note that most of the activities planned by different Divisions and Centers have been carried out successfully and the trend of service coverage for most health indicators is satisfactory. During the national review period, many health services coverage indicators showed improved. The remarkable achievement of community-based programs, progress in control and prevention of epidemics, and numbers of new OPD visits gives satisfaction. Strengthening and expansion of safe motherhood services: comprehensive abortion care, the maternity incentive scheme, and basic and comprehensive Emergency Obstetric Care (EOC) services have been carried out successfully. However, more collaborative efforts are required for improvement to meet the aspirations of the people and to deliver quality health care services as envisaged by the Nepal Health Sector Program.

I would like to extend my appreciation to Female Community Health Volunteers (FCHVs), grassroots level health workers, PHCC/HP/SHP and district level staff members for their tireless efforts in providing primary health services at the community level. I thank the Regional Health Directors, Directors of Divisions and Centers, and Section Chiefs for their support to the district teams to execute their activities in a timely manner. I also wish to offer my appreciation to the NGOs, INGOs, external development partners and private health sector for contributing significantly to improve the health status of people in all the corners of the country.

Finally, I would like to extend my appreciation and thanks to the Director and his Management Division team, especially the Management Information Section team for their meticulous and hard work in bringing out this Annual Report.

Dr. Mingmar Gyelzen Sherpa  
Director General

April, 2013





Government of Nepal  
Ministry of Health and Population  
Department of Health Services  
Management Division

Phone: 01-4262063  
4251242  
Fax: 01-4262802

Kathmandu, Nepal



**Acknowledgement**

It is my immense pleasure to offer the 18<sup>th</sup> Annual Report of the Department of Health Services for the fiscal year 2068/69 (2011/2012). Apart from the routine and non-routine information providers, this report is also an outcome of the annual performance review workshops conducted at various levels of health service delivery. It is a compilation of all the major activities carried out by health institutions at all levels. The data presented in this report is based on the information submitted by the institutions to the Health Management Information System (HMIS) as well as other sources.

The report reflects information about health care services and activities of public and other institutions providing health care to the people. The report also highlights the trend and pattern in service coverage and continuum of care. Furthermore, it also informs us about the program target and achievements with respect to budget allocation and expenditure. The report not only identifies pertinent issues, problems and constraints, but also suggests actions to be taken to address these issues in order to improve the services in the days to come.

I wish to express my sincere gratitude to the Hon'ble Minister for Health and Population Mr. Vidyadhar Mallik for his worthy message and directions. I am also thankful to the respected Secretary for Health and Population Dr. Praveen Mishra for providing a meaningful preface about the report. Dr. MG Sherpa, Director General of the Department of Health Services deserves special thanks for his thoughtful message and guidance. I also extend my thanks to the Directors of the different Divisions and Centers, and other officials for providing their analytical reports. Mr. Paban Kumar Ghimire (erstwhile HMIS Chief) and Mr. Mukti Nath Khanal (HMIS Chief) and their team members Mr. Dhruva Raj Ghimire, Mr. Girish Jha, Mr. Pushpa Lal Shrestha, Mr. Deepak Dahal, Mr. Surya Bahadur Khadka, Mr. Gopal Adhikari, Mr. Navaraj Bhatta and Mr. Pradeep Poudel (M & E Specialist, NHSSP) deserve special appreciation for their hard and sincere work and persistent efforts to produce this Annual Report in time. I also feel grateful to all Section chiefs and staff of the Management Division as well as all those who worked without rest for recording, reporting, compiling, processing and analyzing service delivery and progress reports. Without your efforts, publication of this report would not have been possible.

I take this opportunity to offer my sincere appreciation to all the concerned INGOs, NGOs, multilateral and bilateral development partners who have joined us in the preparation of this report.

Finally, I hope that this report will be of enormous help in improving the health services status of Nepal. I also hope the report will provide valid information to all those who work for the progress and welfare of all Nepali citizens.

Dr. Bhim Acharya  
Director  
April, 2013



# Executive Summary

## A. INTRODUCTION

The Annual Report of the Department of Health Services (DoHS) for fiscal year 2068/69 (2011/2012) is the 18<sup>th</sup> consecutive report of its kind. This report analyses the performance of different programmes over the preceding three fiscal years and presents problems and constraints, actions taken to overcome them and suggested actions for further improvements.

This report is mainly based on information collected by DoHS's Health Management Information System (HMIS) from health institutions across Nepal. A total of 95 public hospitals, 205 primary health care centres (PHCCs), 822 health posts (HPs) and 2,987 sub health posts (SHPs) reported to HMIS in 2068/69. This report also includes service coverage by 12,821 primary health care/outreach clinics (PHC/ORC), 16,646 Expanded Programme of Immunisation (EPI) clinics and 48,897 Female Community Health Volunteers (FCHVs). A total of 445 NGO and 476 private health institutions also reported to HMIS this year. This implies that all 75 district health office/district public health offices (DHO/DPHO), 97.9% of public hospitals, 99.5% of PHCCs, 99.1% of HPs, 98.8% of SHPs, 85.2% of PHC outreach clinics, 92.6% of EPI clinics, 90.7% of female community health volunteers (FCHVs), 72.7% of NGO hospitals, and 61.4% of private hospitals reported to HMIS in 2068/69.

## B. CHILD HEALTH

### IMMUNIZATION

National immunization coverage decreased for all antigens except Japanese encephalitis in the regular National Immunization Programme (NIP) in 2068/69 compared to the previous year. Coverage was not uniform. Thirty-one districts (41%) had more than 90% coverage for all antigens. There was 96% coverage for BCG, 90% for polio 3, 90% for DPT-Hep B-Hib 3, 86% for measles and 74% for TT-2 to pregnant women. The BCG-measles dropout rate remained constant at 10%. The vaccine wastage rate for DPT-HepB-Hib was 8%, which is higher than the recommended rate of 5% (single dose vial), and for oral polio vaccine (OPV) it was 22%, which is higher than the recommended rate of 15%. The National Immunization Programme and intensified National Immunization Days (NID) have

substantially contributed towards the goal of eliminating polio.

### NUTRITION

There was a slight increase in growth monitoring coverage. The percentage of malnourished children remained almost constant at 3% in 2068/69. The coverage of iron folic acid (IFA) tablets reduced by 5% in 2068/69 compared to the previous fiscal year. Two rounds of Vitamin A capsules were distributed to children aged 6 to 59 months. Micro nutrient powder (Baal Vita) was distributed to 6-23 month old children in Rupandehi, Parsa, Gorkha, Rasuwa, Palpa and Makawanpur districts.

### COMMUNITY BASED INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS (CB-IMCI) AND NEWBORN CARE

There was a substantial increase in the number of infants under two 2 months of age treated at health facilities compared to the previous two years (from 33,751 in 2066/67, 48,669 in 2067/68 to 54,601 in 2068/69). The incidence of diarrhoea per 1,000 under-5 year olds increased from 500 in 2067/68 to 528 in 2068/69. However, there was a slight decrease in cases of severe dehydration from 0.4% in 2067/68 to 0.3% in 2068/69. Reported acute respiratory infection (ARI) cases per 1,000 under-five year olds increased from 824/1,000 in 2067/68 to 880/1,000 in 2068/69.

## C. FAMILY HEALTH

### FAMILY PLANNING

The contraceptive prevalence rate (CPR) for modern family planning method is 43% the same rate reported by the Nepal Demographic Health Survey, 2011 (NDHS). The Central Development Region reported the highest CPR (49%) and the western region reported the lowest (32%). Achieving the NHSP-2 goal of 67% by 2015 thus remains a large challenge. However, there has been a decline in the total fertility rate (TFR) from 3.1 per women of child bearing age in 2006 to 2.6 in 2011 (NDHS 2011) and it is expected that the NHSP-2 target of 2.5 will be met by 2015. In 2068/69, only 18% of the CPR comprised birth spacing methods, much lower than the NDHS 2011 estimate of 47%.

### SAFE MOTHERHOOD

While 83% of all mothers received antenatal care services, less than three fifths had four antenatal care check-ups indicating that more than two fifths of mothers did not complete the recommended

four check-ups. There was a large increase in skilled birth attendance at deliveries from 32% in 2066/67 to 44% in 2068/69. There was also a large increase in institutional deliveries from 31% of all deliveries in 2066/67 to 44% in 2068/69. Postnatal care check-ups remained almost the same as in the previous fiscal year.

More than two-fifths of pregnant women (43.3%) benefited from free institutional delivery care under the Aama Programme and 43% received its transport incentive in 2068/69. There was a substantial increase in the budget allocated to the Aama Programme and also in the absorption capacity of DoHS over the last couple of years. Expenditure amounted to more than 90% of the allocated amount in 2068/69; an increase from the 42% expenditure rate in 2062/63.

#### **FEMALE COMMUNITY HEALTH VOLUNTEERS**

There are 48,897 FCHVs in Nepal. They distributed 791,637 cycles of oral contraceptive pills (48% of total national distribution), 8.9 million packets of condoms and 1.4 million packets of oral rehydration salts in 2068/69. More than a half (58%) of diarrhoea and 54% of acute respiratory infection cases were treated by FCHVs. FCHVs also contribute significantly to counselling and referring mothers and children to health facilities for service utilization.

#### **PRIMARY HEALTH CARE OUTREACH CLINICS**

Primary health care outreach clinics (PHC/ORC) extend basic health care services to the community level. This year 85% of the targeted PHC/ORC clinics were conducted. On average 21 clients were served per clinic per month.

### **D. DISEASE CONTROL**

#### **MALARIA**

A total of 146,917 blood smears were collected against the targeted 150,000. However, only 91% (133,730) of collected smears were examined. The annual blood slide examination rate (ABER) decreased slightly from 0.66% in 2067/68 to 0.65 in 2068/69. The annual parasite incidence (API) rate decreased from 0.14 per 1,000 in 2066/67 to 0.11 in 2068/69. The proportion of *P. falciparum* in people with malaria had decreased from 21% in 2066/67 to 16 in 2067/68, but significantly increased to 46% in 2068/69. The proportion of imported malaria cases was very high in 2068/69 indicating the need for more attention to the cross-border monitoring and surveillance of malaria. Two

rounds of indoor residual spraying were carried out in 2068/69 in 15 high risk malaria districts.

#### **KALA-AZAR**

Kala-azar is a major problem in 12 districts of the eastern and central Terai. The incidence of kala-azar decreased from 1.33 per 10,000 at-risk-people in 2066/67 to 0.14 in 2068/69 (excluding foreign cases). None of the 12 districts has an incidence of more than 1 case per 10,000 at-risk people. Only 118 kala-azar cases were recorded in 2068/69 of which 115 (97.5%) cases improved after treatment while 3 native patients (2.5%) died in this year. However, the Epidemiology and Disease Control Division (EDCD) recorded 742 cases, including 148 foreigners, while 15 native patients died in 2068/69 (source: July 2011 to June 2012 weekly reports, Early Warning Reporting System). This shows that improvement is needed in the completeness of kala-azar reporting through HMIS. EDCD has started to 'line list' all kala-azar cases from 2012.

#### **LYMPHATIC FILARIASIS**

Lymphatic filariasis is a public health problem and a cause of morbidity in the many endemic areas in rural and slum areas. The government initiated mass drug administration (MDA) in Parsa district in 2003. Since then this programme has been expanded to other endemic districts. A total of 28,855 cases were detected during the MDA campaign, which was conducted in 46 districts in 2068/69.

#### **DENGUE**

Confirmed dengue cases increased from 79 in 2011 to 82 in 2012 in the endemic districts. These districts lie throughout the Terai from west to east.

#### **TUBERCULOSIS**

The treatment of TB by the Directly Observed Treatment Short course (DOTS) is being implemented in all 75 districts of the country. The expansion of this cost effective and highly successful treatment strategy has reduced TB mortality and morbidity in Nepal. The National Tuberculosis Programme (NTP) has coordinated with the public and private sectors, local government bodies, I/NGOs, social workers, educational institutes and other sectors to expand DOTS and sustain the results achieved by NTP. There are 1,141 DOTS treatment centres and 3,110 sub centres. In 2068/69 the treatment success rate (TSR) was 90% and the case finding rate (CFR) 73%. Nationally, 36,764 TB patients were registered in

2068/69 and of them 15,059 infectious (sputum smear positive new cases) cases were being treated under the DOTS strategy under NTP.

### LEPROSY

Nepal declared the elimination of leprosy as a public health problem (defined as reducing the prevalence <1 case/10,000 populations) in January 2010 and since then has successfully sustained elimination at the national level. However, there has been a recent increase in the number of new cases and registered prevalent cases and a resulting increase in the overall prevalence rate. At the end of 2068/69, 2,430 leprosy cases were receiving multi drug therapy (MDT), which converts to a registered prevalence rate of 0.85/10,000 population nationally. Although this rate is below the cut-off point of <1/10,000 population set by WHO to indicate the elimination of leprosy as a public health problem, this is an increase compared to the previous year.

A total of 3,481 new leprosy cases were detected in 2068/69. More than a half (52%) of the new cases were multibacillary and the rest were paucibacillary leprosy. Nearly a third (32%) of new cases were among females and 6.3% among children. There is thus on-going new transmission.

### HIV/AIDS AND STIs

Nepal has a concentrated HIV epidemic, with the majority of infections (87.9%) transmitted sexually. The key programmatic strategies are preventing HIV among key populations and providing quality treatment, care and support for infected and affected people. Since the detection of the first AIDS case in 1988, the HIV epidemic in Nepal has evolved from a low prevalence to a concentrated epidemic. As of 2012, national estimates indicate that approximately 50,288 adults and children are infected with HIV in Nepal. A total of 20,583 cases of HIV were reported as of Asar 2069 (July 2012) and out of them 7,142 were advanced HIV infection cases. The estimated prevalence of HIV in the adult population is 0.3%.

## E. SUPPORTING PROGRAMMES

### HEALTH TRAINING

A total of 1,029 doctors, auxiliary nurse midwives and staff nurses were trained on skilled birth attendance (SBA) in 2068/69. This will help fill the gap of the required number of SBA service providers in PHCCs and health posts. The National Health Training Centre (NHTC) also conducted

family planning training for family planning service providers. NHTC achieved 43% of its target of training health personnel to carry out vasectomies, 51% for minilaps, 91% for IUCDs and 100% for implants. NHTC provided FCHVs with basic training through DHOs/DPHOs using their own trainers with the support of regional health training centres.

### HEALTH EDUCATION, INFORMATION AND COMMUNICATION

The National Health Education, Information and Communication Centre (NHEICC) is responsible for planning, implementing, monitoring and evaluating awareness raising, education and communication related to all health services and programmes under the Ministry of Health and Population (MoHP). The health education and communication section in the regional directorates and training and health information sections in DHOs/DPHOs implement related activities using various media and methods according to local needs. Local media and languages are used in districts to disseminate health messages.

### LOGISTICS MANAGEMENT

The major function of the Logistics Management Division (LMD) is to forecast, procure, store and distribute health commodities, equipment and instruments to districts and health facilities to enable the provision of basic health care services. It is also responsible for repairing and maintaining bio-medical equipment, instruments and transport vehicles. LMD has been implementing and monitoring the 'pull system' for contraceptives, programme commodities, vaccines and essential drugs at central, regional, district and health facility levels.

The web-based Logistics Management Information System (LMIS) and Inventory Management System have facilitated decision making and initiatives such as the quarterly national pipeline review meetings, the consensus forecasting of health commodities and the implementation of the pull system.

LMD coordinates with the Management Division to build district storerooms, with NHTC to build the capacity of storage personnel and with the National Centre for AIDS and STD Control (NCASC) to develop capacity on HIV and AIDS logistics management and in integrating the supply chain management of HIV and AIDS commodities. LMD has so far implemented the Rural Telemedicine Programme in 30 hill and mountain districts.

### **HEALTH LABORATORY SERVICES**

The National Public Health Laboratory (NPHL) is a nodal institute for developing policies, guidelines and the overall framework for capacity building in health laboratories. Attention is focussed on strengthening laboratory procedures and communication between national, regional and district levels and in strengthening the system to ensure the availability of equipment, logistics and human resources. There are 8 central, 3 regional, 2 sub-regional, 11 zonal, 66 district hospital and 204 PHCC-based laboratories. The private sector has more than 2,064 laboratories. These laboratories require strengthening with respect to quality assurance, human resource recruitment, competencies, the range of services provided and physical infrastructure.

### **PRIMARY HEALTH CARE REVITALIZATION**

The Primary Health Care Revitalization Division (PHCRD) aims to revitalize primary health care in Nepal by addressing emerging health challenges. More than three quarters of the people of Nepal used public health services in 2068/2069. Eighty-one percent of registered morbidity cases used free health care services. Ninety-eight percent of the population who accessed free health services used out-patient (OPD) services.

Ninety-one percent of the population who used free health care services in 2068/69 did so at health posts and sub health posts, 5% at hospitals and 4% at PHCCs.

Key achievements in 2068/69 included running integrated public health campaigns in 28 districts, holding peer group discussions on the rational use of drugs in 22 districts, submitting the Urban Health Policy for approval, strengthening district coordination committees, including the reports of urban clinics in HMIS, implementing the Equity and Access Programme (EAP) in 21 districts, recommending multiyear contracts for EAP implementation partners, developing comprehensive social audit guidelines and implementing them in 147 health facilities, and revising the guidelines of the model healthy village programme. Community health insurance piloting activities were continued.

### **PERSONNEL ADMINISTRATIVE MANAGEMENT**

The Personnel Administration Section of DoHS is responsible for managing Nepal's health workforce to deliver health services. This section manages the

posting, transfer, upgrades and disciplining of staffs. MoHP has 27,300 personnel including 6,300 administrative staff. It also manages medical officers who have studied under government scholarships and contracts other employees as per institutional requirements under the Contract Act. The section is conducting an organisation and management survey for structural change and for upgrading DoHS's health institutions.

### **FINANCIAL MANAGEMENT**

Of the total national budget of NPR 385 billion, NPR 25 billion (7%) was allocated for the health sector in 2068/69. Of the health sector budget, NPR 16 billion (65%) was allocated to execute programmes under DoHS.

### **F. MONITORING AND EVALUATION**

The HMIS is undergoing revision based on the recommendations of regular reviews at different levels, the mismatch assessment, an information technology review, a review of the Health Sector Information System (HSIS) pilot, and the needs of monitoring the NHSP-2 logical framework indicators and addressing the specific needs of programmes.

The revised HMIS aims to:

- address NHSP-2 and programme specific data needs;
- generate data disaggregated by caste/ethnicity for selected indicators;
- generate facility and VDC level data;
- cover all public and non-public health facilities;
- enable electronic data entry at district level and web-based reporting;
- integrate vertical reporting systems (Aama Programme, EOC monitoring, CB-NCP, nutrition, HIV/AIDS and TB programmes) into HMIS;
- improve hospital recording and reporting;
- improve data quality and minimize the burden on staff and reduce duplication of work; and
- strengthen HMIS across all 75 districts.

The revised HMIS needs to be urgently rolled out across all 75 districts to enable NHSP-2 to be effectively monitored and to generate disaggregated data to help plan NHSP-3.



# Health Service Coverage Fact Sheet

## Fiscal Year 2066/67-2068/69 (2009/10-2011/12)

INDICATORS	2066/67 (2009/10)	2067/68 (2010/11)	2068/69 (2011/12)
<b>A. REPORTING STATUS</b>			
% of public hospitals reporting to HMIS	83	98	98
% of primary health care centers reporting to HMIS	93	99	100
% of health posts reporting to HMIS	95	99	99
% of sub health posts reporting to HMIS	93	99	99
% of PHC-ORC clinics reporting to HMIS	81	86	85
% of EPI clinics reporting to HMIS	87	93	93
% of Female Community Health Volunteers (FCHVs) reporting to HMIS	85	90	91
% of NGO and private health facilities reporting to HMIS	65	67	67
<b>B. CHILD HEALTH</b>			
<b>IMMUNIZATION COVERAGE</b>			
% of children under one year immunized with BCG	94	97	96
% of children under one year immunized with DPT-HepB-Hib3	82	96	90
% of children under one year immunized with Polio 3	83	95	90
% of children aged 9-11 months immunized with Measles/Rubella	86	88	86
<b>NUTRITION</b>			
% of children under five years growth monitored	46	39	40
% of malnourished children under five years among new growth monitored cases	4	3	3
<b>ACUTE RESPIRATORY INFECTION (ARI)</b>			
Incidence of acute respiratory infection (ARI) per 1,000 children under five years (new visits)	882	824	880
Incidence of Pneumonia (mild + severe) per 1,000 children under five years (new visits)	255	246	239
Proportion of severe Pneumonia among new cases	0.48	0.40	0.40
% of ARI cases treated with antibiotics among children under five years with pneumonia	28	41	41
ARI case fatality rate per 1,000 under five years children	0.01	0.01	0.01
<b>DIARRHEA</b>			
Incidence of diarrhea per 1,000 under five years children (new cases)	598	500	528
% of severe dehydration cases among children under five years (new cases)	0.38	0.37	0.26
% of diarrheal cases treated with Zinc and ORS among children under five years with diarrhea	48	88	79
<b>C. FAMILY HEALTH</b>			
<b>SAFE MOTHERHOOD</b>			
% of pregnant women who received TT2	43	41	38
% of pregnant women who received TT2+	35	38	36
% of pregnant women who received iron folic acid (IFA) tablets	92	73	68
% of postpartum mothers who received Vitamin A supplements	59	55	56
% of pregnant women attending first ANC among estimated number of pregnancies	87	85	83
% of institutional deliveries among estimated number of live births	31	37	44
% of institutional deliveries among estimated number of pregnancies	28	33	39
% of deliveries at B/CEOC sites among estimated number of live births	11	16	18
% of deliveries at B/CEOC sites among total institutional deliveries	36	43	42
% of deliveries at birthing centers (SHP & HP) among total institutional deliveries	NA	17	22
% of deliveries attended by a skilled birth attendant (SBA) at health facilities among estimated number of pregnancies	26	31	37

Progress against previous year

Same of previous year

Decline from previous year



INDICATORS	2066/67 (2009/10)	2067/68 (2010/11)	2068/69 (2011/12)
% of deliveries attended by a skilled birth attendant (SBA) at health facilities and home among estimated number of pregnancies	29	33	39
% of deliveries attended by a skilled birth attendant (SBA) at health facilities and home among estimated number of live births	32	36	44
% of deliveries attended by a SBA at home among estimated number of pregnancies	3	2	2
% of deliveries attended by health worker other than SBA at health facility among estimated number of pregnancies	2	2	2
% of deliveries attended by health workers other than SBA at home among estimated number of pregnancies	10	8	7
% of deliveries attended by SBA and health workers other than SBA at health facilities and home among estimated number of pregnancies	41	43	48
% of women who had first post natal care (PNC) visit among estimated number of pregnancies	50	51	51
<b>FAMILY PLANNING</b>			
Contraceptive prevalence rate (CPR) (modern method) ( <i>unadjusted</i> )	43.5	43.7	43.1
CPR Method Mix – Condom	2.9	3.1	3.2
CPR Method Mix - Pills	3.2	3.0	3.1
CPR Method Mix - Depo	8.6	8.2	7.9
CPR Method Mix - IUCD	1.4	1.7	1.9
CPR Method Mix - Implant	1.5	1.8	1.9
CPR Method Mix - Sterilization	25.8	25.9	25.1
<b>FEMALE COMMUNITY HEALTH VOLUNTEERS (FCHV)</b>			
Total number of FCHVs	48489	48680	48897
% of pills distributed by FCHVs among total distribution	49	44	48
% of diarrheal cases treated with ORS and Zinc by FCHVs among diarrhea cases in children under five years	53	55	58
% of ARI cases managed by FCHVs among ARI cases in children under five years	52	55	55
<b>D. MALARIA / KALA-AZAR</b>			
Annual blood slide examination rate (ABER) per 100	0.68	0.66	0.65
Annual parasite incidence (API) per 1,000	0.15	0.16	0.11
Clinical malaria incidence (CMI)/1000	5.41	4.10	3.28
Incidence of Kala-azar /10,000 risk population	0.95	0.75	0.14
<b>E. TUBERCULOSIS</b>			
TB case finding rate	76	73	73
Treatment success rate	90	90	90
Sputum conversion rate	89	89	89
<b>F. LEPROSY</b>			
New case detection rate (NCDR) /10,000	1.15	1.12	1.01
Prevalence rate (PR) /10,000	0.77	0.79	0.85
Disability rate Grade 2 among new cases	2.72	3.50	3.41
<b>G. HIV/AIDS AND STI</b>			
Estimated HIV cases	70,000	56,000	50,300
Cumulative HIV reported cases	16,138	18,396	20,583
<b>H. CURATIVE SERVICES</b>			
Outpatient (OPD) new visits	20,894,118	19,708,800	21,670,572
% of outpatient (OPD) new visits among total population	76	70	76

Progress against previous year

Same of previous year

Decline from previous year

## NHSP2 logical framework (LF) indicators to be monitored by HMIS

The following 34 indicators in the NHSP2 logical framework are monitored by HMIS

NHSP2 LF Code	Indicator	Achievement 2011/12	NHSP2 Target 2013	NHSP2 Target 2015	
G8	Malaria annual parasite incidence (per 1000 population)	0.11	Halt & reverse		
P3	% of one-year-old children immunized against measles	86	90	90	
P4	% of children aged 6-59 months that have received vitamin A supplements		≥90	≥90	
P7	Contraceptive prevalence rate - modern methods	43	52	67	
P8	% of pregnant women attending at least four ANC visits	47	65	80	
P9	% of pregnant women receiving IFA tablets or syrup during their last pregnancy		86	90	
P10	% of deliveries conducted by a skilled birth attendant	39	40	60	
P11	% of women who had three postnatal check-ups as per protocol (1st within 24 hours of delivery, 2nd within 72 hours of delivery and 3rd within 7 days of delivery, as % of expected live births)		43	50	
P12	% of women of reproductive age (15 - 49) with complications from safe abortion (surgical and medical)	1.2	10	7	
P13	Prevalence rate of Leprosy (%)	0.85	Halt & reverse		
P14	Obstetric direct case fatality rate (%)		<1	<1	
OC1.2	% population utilizing outpatient services at SHP, HP, PHCC and district hospitals - disaggregated by sex, and caste/ethnicity				
OC1.3	% population utilizing inpatient services at district hospitals (all level of hospitals)	1.51			
OC1.4	% population utilizing emergency services at district hospitals (all level of hospitals)	0.14			
OC1.5	Met need for emergency obstetric care (%)		43	49	
OC1.6	% of deliveries by Caesarean Section	5.8	4.3	4.5	
OC1.7	Tuberculosis treatment success rates (%)	90	90	90	
OC2.1	% of children under 5 with diarrhea treated with Zinc and ORS	79	25	40	
OC2.2	% of children under 5 with pneumonia, who received antibiotics	41	40	50	
OC2.4	% of institutional deliveries	37	35	40	
OC2.5	% of women who received contraceptives after safe abortion (surgical or medical)	33	60	60	
OC2.7	Tuberculosis case detection rate (%)	73	80	85	
OP1.1	% of women utilizing FCHV fund (among women of reproductive age)	0.5	8	10	
OP3.4	Number of Female Community Health Volunteers (FCHVs)	48897	52000	53514	
OP4.2	Number of HPs per 5,000 population	0.8	0.5	1	
OP4.3	Number of PHCCs per 50,000 population	0.35	0.7	1	
OP4.4	Number of district hospital beds per 5,000 population (all hospitals)	0.8	0.6	1	
OP4.5	% of districts with at least one public facility providing all CEONC signal functions		68	76	
OP4.6	% of PHCCs providing all BEONC signal functions		50	70	
OP4.7	% of health posts with birthing centre		≥80		
OP4.8	% of safe abortion (surgical and medical) sites with long acting family planning services		≥90		
OP4.9	% of health posts with at least five family planning methods		35	60	
OP6.3	% of tertiary and secondary hospital (public and private) implementing ICD 10 and reporting coded information to health information system (public hospitals only)	100	75	100	
OP6.4	% of health facilities (public and private) reporting to national health information system (by type or level) (public hospitals only)	100	80	100	

Achieved 100% of 2013 target

Achieved at least 90% of 2013 target

Not achieved at least 90% of 2013 target

Data not available

No target for 2013

# INTRODUCTION

## 1.1 BACKGROUND

The Annual Report of Department of Health Services for the fiscal year 2068/69 (2011/2012) is the 18<sup>th</sup> consecutive report of its kind. This report analyses the performance and achievements of Department of Health Services (DoHS) in the fiscal year 2068/69 (2010/11). It mainly deals with the program specific policies, goal, objectives, strategies, major activities and achievement. It also presents the problems/issues/constraints raised by different divisions of DoHS and stakeholders and recommendation for actions to be taken in order to improve performance and targets for the next fiscal year.

Furthermore, this report also provides information on contributions from other departments, partners and stakeholders, contemporary issues in the health sector as well as progress status of major programs implemented through DoHS, RHDs, D/PHOs and health institutions under DoHS.

Preparation of this report followed the Regional Annual Performance Review Meetings conducted in all five development regions which culminated in the National Annual Performance Review Meeting. These review meetings were attended by the Regional Directorates, Divisions of DoHS, Centres, Central hospitals, and representatives from External Development Partners and NGOs/INGOs at each level.

During the workshop, policy statements of each program were reviewed in the light of the present context and analysed to an extent. The data generated from the HMIS in the form of raw numbers, were carefully and critically analysed utilising the selected indicators along with data available from other sources. These data were interpreted during the presentations and discussions.

The National Annual Performance Review Meeting achieved the following objectives:

- Reviewed the achievement against the targets set for the FY 2068/69 (2011/2012) by Divisions/Centres/Sections of DoHS with respect to released budget and expenditure.
- Analysed the service coverage, continuity and quality services including comparing trend of service coverage of the FY 2068/69 with previous two successive fiscal years.
- Evaluated implementation of recommendations made by the previous National Annual Performance Review Meeting.
- Identified problems, constraints and management issues in implementing the health program and suggested recommendations and specific strategies and action plan to address those issues.
- Generated specific strategies for low coverage region and districts to boost up their coverage and moderating on specific action plan to scale up the level of achievement and highlight the best performing region & districts to be replicated to achieve most advantageous results.
- Interaction among regional health directorates, central hospitals, Department of Health Services, Department of Ayurveda, Department of Drug Administration, Ministry of Health & Population, and External Development Partners (EDPs).

The outcome of this workshop can be seen in the program specific chapters of this Annual Report. Detailed district-specific raw and analysed data are available in Annex.

Ministry of Health and Population has been delivering promotional, preventive, diagnostic, curative, and palliative health care services and other health system related functions such as policy and planning, human resource development and mobilisation, financing and financial management, and monitoring and evaluation. It has six Divisions: Administration Division, Policy, Planning and International Cooperation Division, Curative Services Division, Human Resources and Financial Management Division, Public Health Administration and Monitoring and Evaluation Division, and Population Division.

There are five Centres with a degree of autonomy in personnel and financial management: National Health Training Centre (NHTC), National Health Education, Information and Communication Centre (NHEICC), National Tuberculosis Centre (NTC), National Centre for AIDS and STD Control (NCASC) and National Public Health Laboratory (NPHL). The NHTC coordinates all training programs of the respective Divisions and implements training by sharing common inputs and reducing the travelling time of care providers. Similarly, all IEC/BCC-related activities are coordinated by NHEICC. These centres support the delivery of EHCS and work in close coordination with the respective Divisions. In addition to these, there are five professional councils to provide accreditation to health-related schools/training centres and to regulate care providers such as: (i) Nepal Medical Council (ii) Nepal Health Research Council (iii) Health Professional Council (iv) Ayurveda Council, and (v) Nursing Council.

There are three Departments under the MoHP: Department of Health Services (DoHS), Department of Ayurveda (DoA) and Department of Drug Administration (DDA). The DoHS and other departments are responsible for formulating programs as per policy and plans, implementation, use of financial resources and accountability, and monitoring and evaluation. DDA is the regulatory authority for assuring the quality and regulating the import, export, production, sale and distribution of drugs. Department of Ayurveda offer Ayurvedic care to the people and also implement health promotional activities.

## **1.2 DEPARTMENT OF HEALTH SERVICES (DoHS)**

Department of Health Services (DoHS) is responsible for delivering preventive, promotive, diagnostic and curative health services throughout Nepal. Director General (DG) is the organisational head of the DoHS. The current organizational structure of the DoHS includes seven Divisions: (i) Management Division with infrastructure, planning, quality of care and management information system (ii) Family Health Division with the responsibility of reproductive health care, including safe motherhood and neonatal health, family planning and Female Community Health Volunteers (FCHVs) (iii) Child Health Division covering nutrition, IMCI, and EPI (iv) Epidemiology and Disease Control Division with the responsibility of controlling epidemics, pandemic and endemic diseases as well as treatment of animal bites (v) Leprosy Control Division with the responsibility of controlling leprosy (vi) Logistics Management Division covers procurement, supplies and management of logistics, equipment and services required by DoHS and below levels (vii) Primary Health Care Revitalization Division with the responsibility of carrying out activities for primary health care (Figure 1.1).

Major functions of DoHS include:

- Provide GoN with necessary technical advice in formulating health related policies, develop and expand health institutions established in line with these policies;

- 
- Determine requirement of human resource for health institutions and develop such human resource by preparing short and long term plans;
  - Manage procurement and supply of drugs, equipment, instruments and other logistics at regional, district and below levels;
  - Co-ordinate the activities and mobilize resources in the implementation of approved programs;
  - Manage the immediate solution of problems arising from natural disasters and epidemics;
  - Establish relationships with foreign countries and international institutions with the objective of enhancing effectiveness and developing health services and assist the Ministry of Health and Population in receiving and mobilizing foreign resources by clearly identifying the area of cooperation;
  - Create a conducive atmosphere to encourage the private sector, non-governmental organizations and foreign institutions to participate in health services, maintain relation and coordination, control quality of health services by regular supervision and monitoring;
  - Manage information systems regarding health facilities, health services, logistics, training and finance to support planning, monitoring, and evaluation of health programs,
  - Systematically maintain data, statements and information regarding health services, update and publish them as required;
  - Financial management of DoHS, RHDs, D/PHOs and settlement of irregularities.

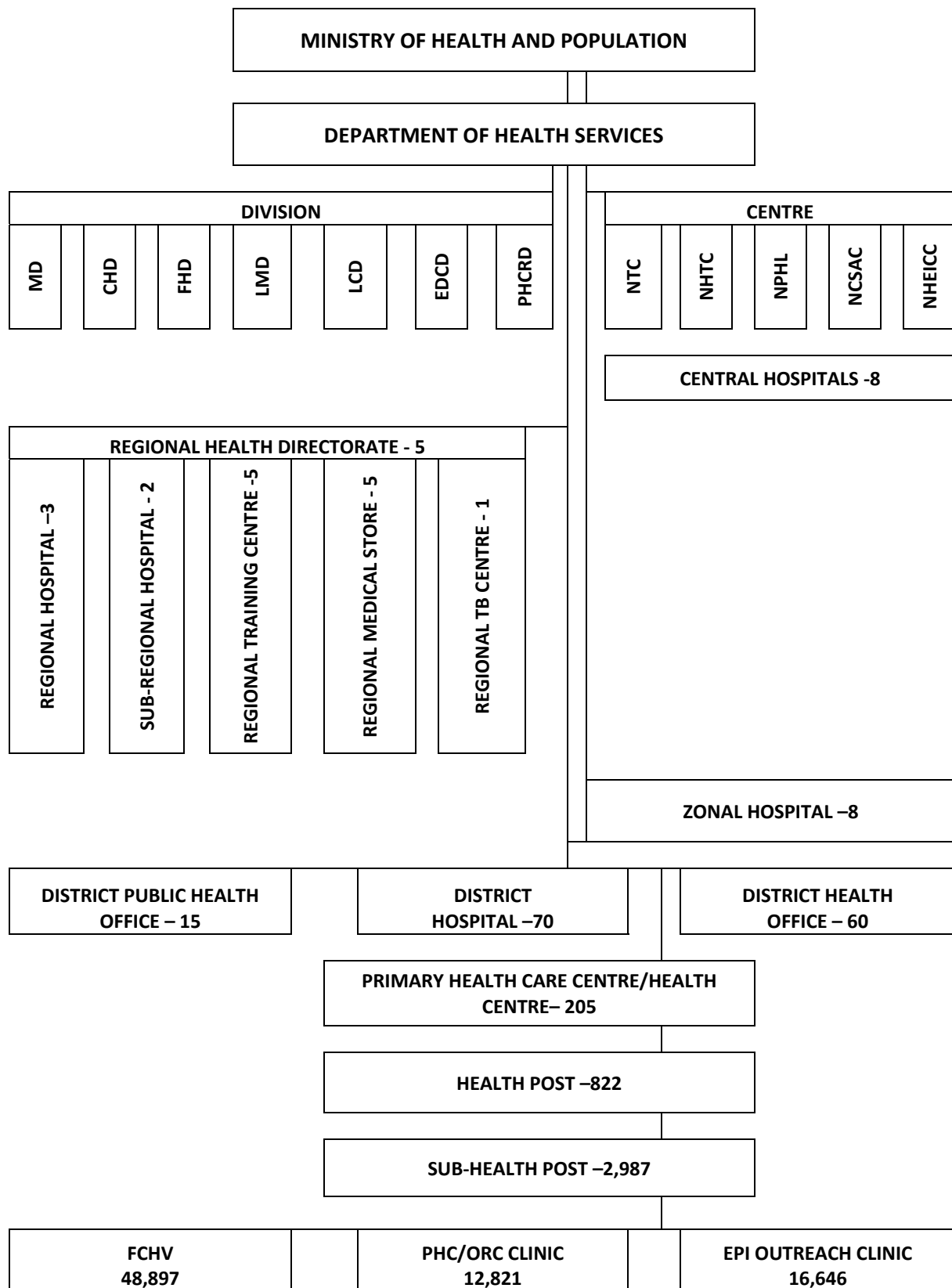
At the regional level there are five Regional Health Directorates (RHDs) providing technical backstopping as well as program monitoring to the districts. The RHDs are directly under the MoHP. There are regional, sub-regional and zonal hospitals, which have been given decentralised authority through the formation of Hospital Development Boards. In addition, there are training centres, laboratories, TB centres (in some regions) and medical stores at the regional level.

At the district level, the structure varies between districts. Sixty districts are managed by the District Health Office (DHO), whereas the remaining 15 are managed solely by the DPHO. The DPHOs and DHOs are responsible for implementing essential health care services (EHCS) and monitor activities and outputs of District Hospitals, Primary Health Care Centres (PHCCs), Health Posts (HPs) and Sub Health Posts (SHPs).

The service delivery outlets in the country include 2,987 SHPs, 822 HPs, 205 PHCCs, 70 district level hospitals, 8 zonal hospitals, 2 sub-regional hospitals, 3 regional hospitals, and 8 central level hospitals.

A sub-health post is the first institutional contact point for basic health services. SHPs monitor the activities of FCHVs as well as community-based activities by PHC outreach clinics and EPI clinics. In addition, SHP also functions as the referral centre of FCHVs as well as a venue for community based activities such as PHCORC and EPI clinics. The health post offers the same package of SHPs plus birthing centres in the respective VDC. Each level above the SHP is a referral point in a network from SHP to Health Post (HP) to Primary Health Care Centre (PHCC), on to district, zonal sub-regional and regional hospitals, and finally to tertiary level hospitals. This referral hierarchy has been designed to ensure that the majority of population receive public health and minor treatment in places accessible to them and at a price they can afford. Inversely, the system works as a supporting mechanism for lower levels by providing logistical, financial, supervisory, and technical support from the centre to the periphery.

**Fig. 1.1: Organogram of Department of Health Services (DoHS)**



---

## **1.3 SOURCES OF INFORMATION**

Sources of health sector information in Nepal include management information systems (MIS), disease surveillance, vital registration, census, sentinel reporting, surveys, rapid assessments, and research. The MIS within the health sector include the Health Management Information System (HMIS); Logistical Management Information System (LMIS); Financial Management Information System (FMIS); Health Infrastructure Information System (HIIS); Planning and Management of Assets in Health Care System (PLAMAHS); Human Resource Information System (HuRIS); Training Information Management System (TIMS); Ayurveda Reporting System (ARS); and Drug Information Network (DIN). The Health Sector Information System (HSIS), being piloted in three districts (Rupandehi, Parsa and Lalitpur) proposes to integrate all of the MIS.

## **1.4 STRUCTURE OF THE REPORT**

This report has nine chapters. Chapter 1, this chapter, briefly presented the background to the practice of annual report preparation, organogram of the DoHS, and sources of information in health sector in Nepal. Chapter two to six cover the different programs within the DoHS; chapter seven presents the population programs; chapter seven presents the M&E program of health sector, chapter eight presents programs of other departments within the Ministry of Health and Population; and chapter nine presents a brief summary of development partners contributing to health sector in Nepal.

Annex one presents the target vs. achievement of the activities carried out in the last fiscal year by different programs; Annex two shows the program targets for next fiscal year 2069/70; and Annex three provides the raw and analyzed data of different programs disaggregated by ecological regions and districts.



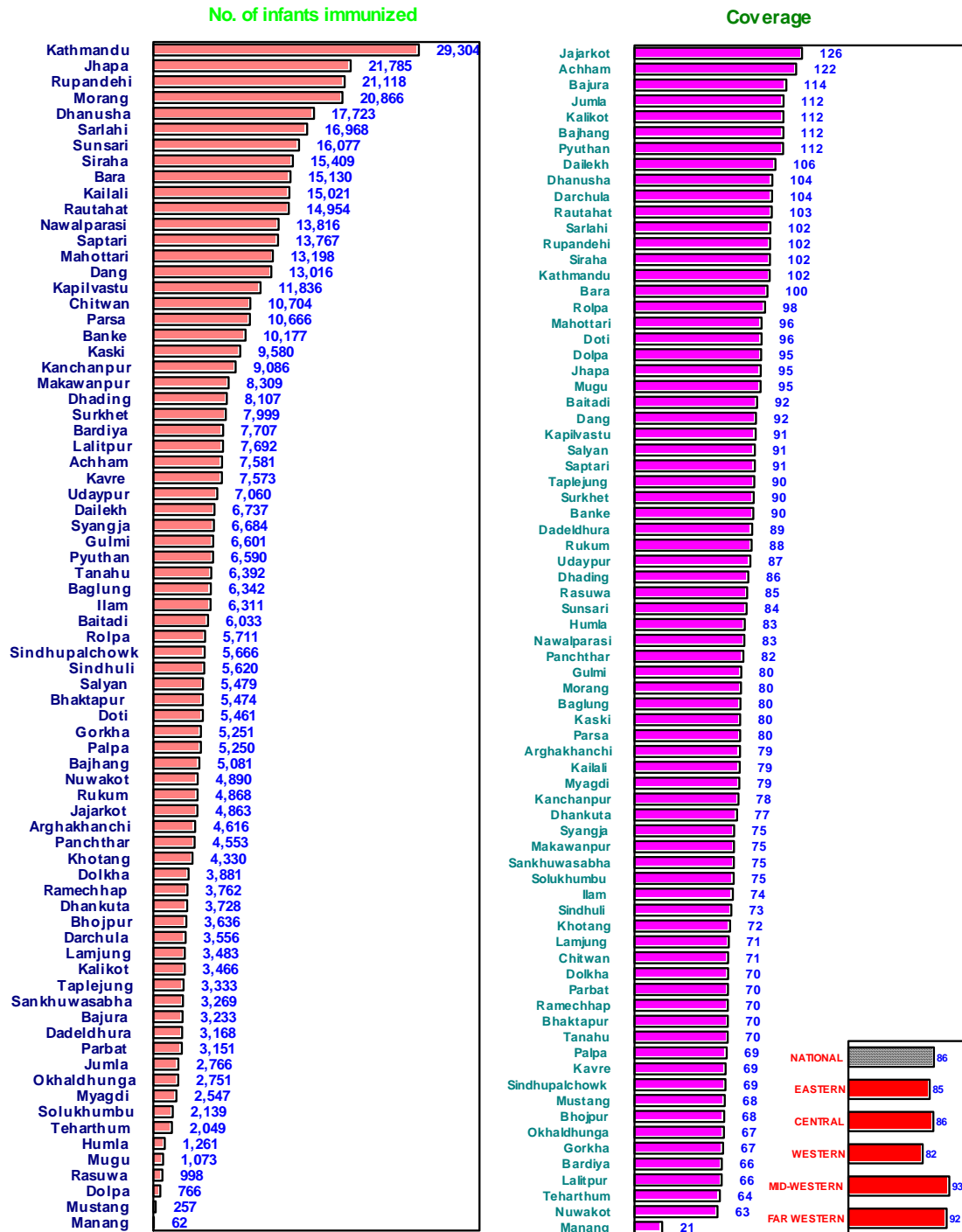
# Child Health Programme

2.1	Immunization .....	6
2.2	Nutrition.....	22
2.3	Community Based Integrated Management of Childhood Illness (CB-IMCI) and newborn care .....	40

# IMMUNIZATION

## Measles Vaccination and Coverage

Fiscal Year 2068/69 (2011/2012)



Source: HMIS

# CHILD HEALTH

## 2.1 IMMUNIZATION

### 2.1.1 Background

The National Immunization Program (NIP) is a high priority program (P1) of Government of Nepal. Immunization is considered as one of the most cost-effective health interventions. NIP has helped in reducing the burden of vaccine preventable diseases (VPDs) and child mortality and has contributed in achieving the Millennium Development Goal (MDG4) on child mortality reduction.

Currently NIP provides vaccination against TB (BCG), diphtheria-pertussis-tetanus-hepatitis B and haemophilus influenza (DPT-HepB-HiB), poliomyelitis (OPV) and measles throughout the country and JE vaccine in high risk post campaign districts through routine immunization. TT vaccination is provided to all pregnant women. The routine immunization services are provided through health facilities (fixed clinics), private, NGO or INGO clinics, urban clinics, outreach session and mobile teams in geographically inaccessible areas. All vaccines under NIP are provided free of cost. In last 10 years several new vaccines (HepB, Hib and JE) were introduced into routine immunization. In addition to routine immunization services, several supplementary immunization activities either to eradicate, eliminate or control vaccine preventable diseases (VPDs) have been carried out. The NIP has comprehensive Multiyear (5 years) Immunization Plan (cMYP) which outlines goal, objectives, activities with milestones and financial plan and is guided by Global Immunization Vision and Strategy (GIVS) and NHSP2. The current cMYP runs from 2011-2016.

The NIP under the Child Health Division has a lead role in all immunization related activities at national level. The NIP works closely in coordination with other divisions of DoHS, Regional Health Directorates (RHD) and Districts. The RHD acts as a facilitator between the centre and the districts and carries out periodic review of district performances and conduct supportive supervision to strengthen immunization services. It is the responsibility of the D/PHO to ensure that immunization program is successfully implemented at the district and below level. PHCCs, HPs, and SHPs implement immunization programs in their respective municipalities and Village Development Committees (VDCs) ensuring all target children receive immunization services especially marginalized and hard-to-reach population.

Immunization data generated at the service level are reported to the district, regional and the central level (HMIS) on monthly basis. The information received is verified, analyzed followed and corrective actions are taken accordingly. D(P)HO and EPI section of CHD monitors the coverage by antigens, dropout rate for DPT-HepB-Hib1 vs. DPT-HepB-Hib3, BCG vs. Measles, and vaccine wastage rate (particularly for MDVP vaccines - DPT-HepB-Hib, OPV, TT) by health facilities and districts respectively and provides feedback periodically. In addition to HMIS, surveillance data on certain vaccine preventable diseases (AFP, Measles like illnesses, MNT, pneumonia for avian influenza and AES) are reported through integrated Acute Flaccid Paralysis (AFP) surveillance system from weekly zero reporting sites supported by WHO/IPD. Similarly outbreaks of VPDs are reported through both the HMIS and integrated AFP network.

## Child Health: Immunization

Several activities were carried out in achieving objectives and milestones set in cMYP (2011-2016) and NHSP2 in fiscal year 2068/69. Vaccination of every eligible child is important especially marginalized and hard-to-reach children. Access to routine vaccination has improved in villages and municipalities through Reaching Every Child (REC) micro planning, advocacy and social mobilization activities, capacity building trainings, logistics supply, data analysis review meetings at various level etc. Supplementary immunization activities were carried out to sustain eradication (polio), elimination (MNT) or control (measles & JE) of targeted VPDs. One round NID was carried out to sustain polio free status after the last case of wild polio virus detected in Rautahat in August 2010, Measles-Rubella campaign was carried out in 15 districts (9 districts of FWDR and 6 districts of MWDR), similarly campaign against JE was carried out in 2 districts of CDR (Dhading, Kavre) and 2 districts of WDR (Palpa and Kaski) based on the morbidity report of previous years. Similarly in other JE endemic districts there is substantial reduction in JE morbidity. MNT elimination status is sustained and measles morbidity and mortality have reduced significantly thus achieving the objective of reducing measles mortality by 90 percent compared to 2003.

The issues, challenges and recommendations made by the districts during the regional performance review meeting has guided NIP to better and organized immunization related activities in order to achieve its goal and objectives.

### **Goal**

The goal of National Immunization Program is to reduce child morbidity, mortality and disability associated with vaccine-preventable diseases.

### **Objectives**

The objectives of the National Immunization Programme as per cMYP: 2011/12-2015/16 is as follows.

- Achieve and maintain at least 90% vaccination coverage for all antigens at national and district level by 2016
- Ensure access to vaccines of assured quality and with appropriate waste management
- Achieve and maintain polio free status
- Maintain maternal and neonatal tetanus elimination status
- Achieve measles elimination status by 2016
- Accelerate control of vaccine-preventable diseases through introduction of new and underused vaccines
- Strengthen and expand VPD surveillance
- Continue to expand immunization beyond infancy

## MILESTONES OF NIP

Table 2.1.1: Milestones of National Immunization Programme (cMYP 2011/12-2015/16)

Objectives	2011/12	2012/13	2013/14	2014/15	2015/16
1. Achieve and maintain at least 90% vaccination coverage for all antigens at national & district level by 2016	Achieve and sustain 90% DPT3 coverage in 35 districts and all antigens in 20 districts	Achieve and sustain 90% DPT3 coverage in 50 districts and all antigens in 30 districts	Achieve and sustain 90% DPT3 coverage in 60 districts and all antigens in 50 districts	Achieve and sustain 90% DPT3 coverage in 75 districts and all antigens in 65 districts	Sustain 90% DPT3 coverage in 75 districts and achieve 90% coverage for all antigens in 75 districts
2. Ensure access to vaccine of assured quality and with appropriate waste disposal	At least 20 districts with AEFI monthly zero reporting	At least 60 districts with AEFI monthly zero reporting	All 75 districts with AEFI monthly zero reporting	-	-
3. Achieve and maintain polio free status	Zero cases of wild polio virus	Zero cases of wild polio virus	Zero cases of wild polio virus	Eradication of poliomyelitis	
4. Maintain maternal and neonatal tetanus elimination status	Conduct Td campaign in 10 high risk districts	Conduct Td campaign in 10 high risk districts	Conduct Td campaign in 10 high risk districts	Conduct Td campaign in 10 high risk districts	-
5. Achieve measles elimination status by 2016	1. Achieve and sustain at least 95% MCV-1 coverage in 35 districts	1. Achieve and sustain at least 95% MCV-1 coverage in 50 districts	1. Achieve and sustain at least 95% MCV-1 coverage in 60 districts	1. Achieve and sustain at least 95% MCV-1 coverage in 70 districts	1. Achieve and sustain 95% MCV-1 coverage in 75 districts
	-	-	2. Achieve and maintain elimination standard surveillance performance indicator		
	-	-	-	3. Achieve measles incidence of less than one confirmed case per million population per year	
6. Expand VPD surveillance with possibility of integration	Continue pneumo and rota sentinel sites, initiate typhoid & cholera sentinel surveillance	Continue pneumo, typhoid, cholera and rota sentinel sites, initiate CRS surveillance, conduct HepB sero survey	Continue pneumo, typhoid, cholera, rota & CRS sentinel surveillance	Continue pneumo, typhoid, cholera, rota & CRS sentinel surveillance	Continue pneumo, typhoid, cholera, rota & CRS sentinel surveillance
7. Accelerate control of vaccine-preventable diseases through introduction of new and underused vaccines	-	Introduce rubella vaccine into Routine Immunization	Introduce pneumococcal vaccine into Routine Immunization, Consider HepB birth dose	-	Introduce Rota vaccine into Routine Immunization

## Child Health: Immunization

Objectives	2011/12	2012/13	2013/14	2014/15	2015/16
8. Continue to expand immunization beyond infancy	Expand school based Td vaccination in 2 additional districts, Expand Td vaccination to grade 1 & 8 students	Expand school based Td vaccination in 2 additional districts,	Expand school based Td vaccination in 2 additional districts	Expand school based Td vaccination in 3 additional districts	Expand school based Td vaccination in 4 additional districts

### Immunization Schedule of National Immunization Program

Table 2.1.2 presents the immunization schedule of NIP. The target populations for NIP include:

- All infants (under 12 months) for BCG, DPT-HepB-Hib, OPV and measles vaccines
- 12-23 months children for JE vaccine
- All pregnant women for TT vaccine

**Table 2.1.2: Immunization Schedule of National Immunization Program**

Type of Vaccine	Number of Doses	Recommended Age
BCG	1	At birth or on first contact with health institution
OPV	3	6, 10, and 14 weeks of age
DPT - HepB – Hib	3	6, 10, and 14 weeks of age
Measles	1	9 months of age
TT	2	Pregnant women
JE	1	12-23 months of age

The key strategies to achieve the above objectives are:

1. Strengthen routine immunization through Reaching Every District (RED) strategies
  - RED micro planning in all districts
  - Supportive supervision and monitoring
  - Increase and promote public awareness and demand through social mobilisation for immunisation services and IEC/BCC interventions
  - Partnership with private, CBOs, NGOs and others
2. Strengthen municipality immunization services
  - Establishment of health infrastructure through PHCRD of DoHS in municipalities
  - Fulfilling vacant post of vaccinators
  - Ensuring availability of vaccine and other logistics
  - Supportive supervision and monitoring
3. Conduct supplementary immunization activities and surveillance for eradication of poliomyelitis and control of measles and JE.
4. Sustain MNT elimination status through high TT coverage
5. Strengthen and expand integrated surveillance of VPDs built on AFP Surveillance (AFP, Measles, Neonatal Tetanus and JE) and continue disease burden study of other vaccine preventable diseases like Hib and Rubella, Pneumococcal and Rota.
6. Conduct periodic meetings of National Committee for Immunization Practices (NCIP), Adverse Event Following Immunization (AEFI) and Inter-agency Coordination Committee (ICC).
7. Conduct capacity building for relevant health staff (Mid-Level Managers (MLM), refresher training, cold chain and vaccine management, maintenance training, in-country observation tour by EPI staff).
8. Control outbreak of VPDs through appropriate reporting, investigation and response.
9. Improve quality of immunization services practicing injection safety policy.
10. Introduction of new and underused vaccines based on disease burden.

## 2.1.2 Major Activities

The following were the major activities carried out during FY 2068/69. Achievement status of the major activities is presented in Annex 1.

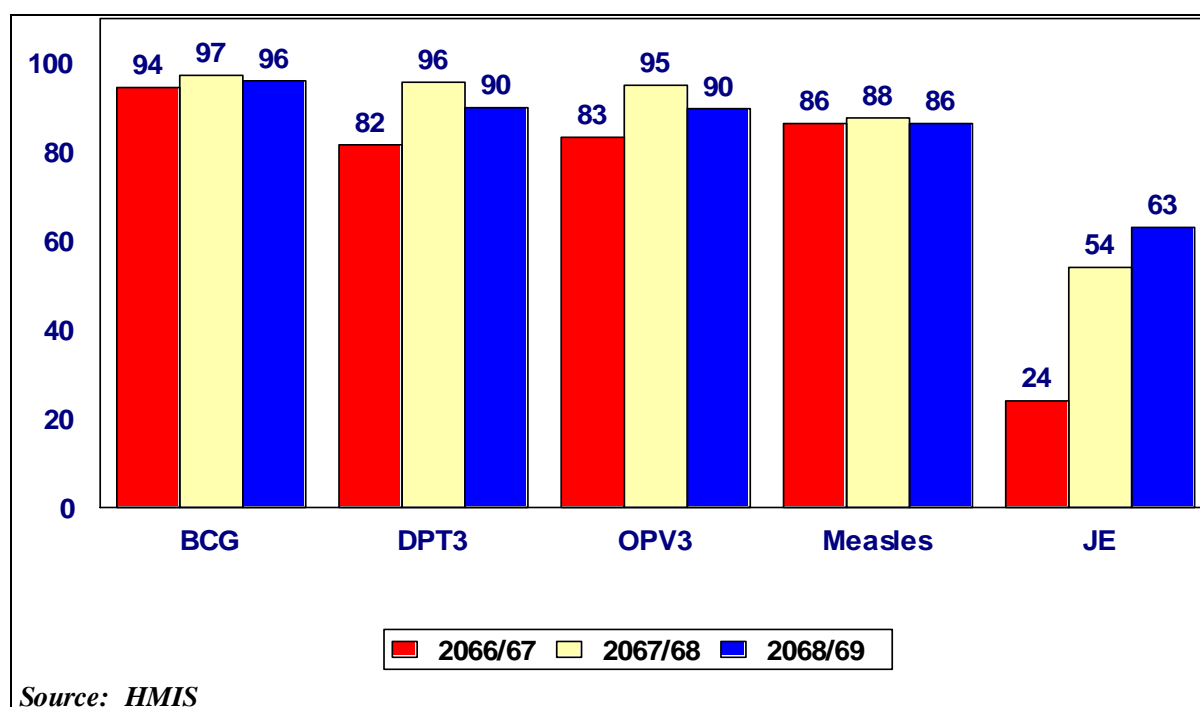
1. MToT was conducted on immunization micro plan based on RED strategies to the focal persons of immunization program of FWDR, MWDR and FWDR districts.
2. Districts of FWDR, MWDR & WDR updated health facilities and districts immunization micro plan based on RED.
3. Delivery of routine immunization through approximately 16,000 immunization sessions (fixed, outreach and mobile sessions)
4. Review of performance on immunization in low performing 6 districts (Udaypur, Parsa, Sarlahi, Sindhuli, Kapilvastu and Syangja)
5. Data Quality Self-Assessment (DQSA) was carried out in 15 districts (Kailali, Baitadi, Dailekh, Pyuthan, Rolpa, Bardiya, Mugu, Jajarkot, Kaski, Gulmi, Mahottari, Dhanusa, Rautahat, Kavre, and Saptari)
6. Effective vaccine management assessment was carried out to assess the gap in cold chain and management
7. Two batches of mid-level managers training was carried out to build up district immunization capacity.
8. NCIP, ICC and AEFI committee's members meetings were held to review and update immunization program.
9. One round (14<sup>th</sup>) NID was implemented in all 75 districts.
10. Measles Rubella campaign was carried out in 15 districts ( Achham, Baitadi, Bajhang, Bajura, Darchula, Dadeldhura, Doti, Kailali and Kanchanpur, Banke, Bardiya, Dailekh, Pyuthan, Rolpa and Surkhet)
11. JE campaign was carried out in 4 districts (Dhading, Kavre Palpa and Kaski) based on the morbidity report of previous years.
12. Integrated vaccine preventable diseases surveillance (AFP, Measles (case based), NT, AES, pneumonia for AI and Hib) was carried out.
13. Joint supervision and monitoring was conducted in poor performing districts.
14. Different activities in name of immunization month were carried out in districts.
15. In country exchange visits by EPI staff for sharing of experiences and monitoring of EPI program was carried out.

## 2.1.3 Analysis of Achievement

### Routine Immunization

The overall national immunization coverage for all antigens has decreased except of JE in FY 2068/69 compared to previous years (Figure 2.1.1). BCG coverage is 96 percent (97% in 2067/68), DPT-HepB-Hib 3 and OPV 3 - 90 percent (96% and 95% respectively in 2067/68) and Measles - 86 percent (88% in 2067/68). JE coverage (31 districts) has increased to 63 percent (54% in 2067/68). Ninety percent coverage against mile stone of 2011/12 (cMYP 2011-16) has been achieved in total 34 districts (against 35) for DPT-HepB-Hib 3 and 29 districts (against 20) for all antigens.

**Figure 2.1.1: Routine immunization coverage, FY 2066/67 to 2068/69**



Region wise coverage of BCG, DPT-HepB 3, and OPV 3 shows 2-9 percent decrease in regions. However, the measles coverage in EDR, CDR and WDR has increased. Furthermore, four districts of EDR, seven districts of CDR, two districts of WDR, fourteen districts of MWDR and seven districts of FWDR have achieved 90 percent coverage for DPT-HepB-Hib 3. Similarly, 90 percent coverage for Measles has been achieved in three districts of EDR, six districts of CDR, two districts of WDR, twelve districts of MWDR and six districts of FWDR.

*\*The coverage of JE is calculated based on the target population (12-23 months) of 31 districts where the JE immunization program has been implemented.*

**Table 2.1.3: Immunization coverage, by region, FY 2066/67 to 2068/69**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
BCG coverage	2066/67	90.4	96.9	86.1	104.7	99.1	94.5
	2067/68	92.9	100.7	90.7	104.4	99.4	97.2
	2068/69	90.9	99.9	89.9	101.9	98.4	95.9
DPT- HepB- Hib 3 Coverage	2066/67	80.1	82.0	75.8	88.1	86.5	81.6
	2067/68	92.2	97.0	88.0	104.5	103.3	95.7
	2068/69	87.8	90.5	84.6	96.5	94.7	89.9
Polio3 Coverage	2066/67	82.0	82.7	76.7	92.2	89.4	83.3
	2067/68	90.9	96.0	88.0	104.3	103.2	95.0
	2068/69	87.4	90.2	84.6	96.2	94.5	89.7
Measles Coverage	2066/67	83.8	86.0	80.2	97.4	91.5	86.4
	2067/68	87.7	87.0	80.9	96.1	92.8	87.7
	2068/69	84.6	86.1	81.6	93.0	91.8	86.4
TT2 & TT 2+ coverage (pregnant women)	2066/67	86.0	76.0	77.7	80.2	66.9	78.4
	2067/68	82.7	74.9	83.7	76.5	67.6	78.0
	2068/69	73.7	73.3	82.2	72.1	63.6	74.1

Source: HMIS



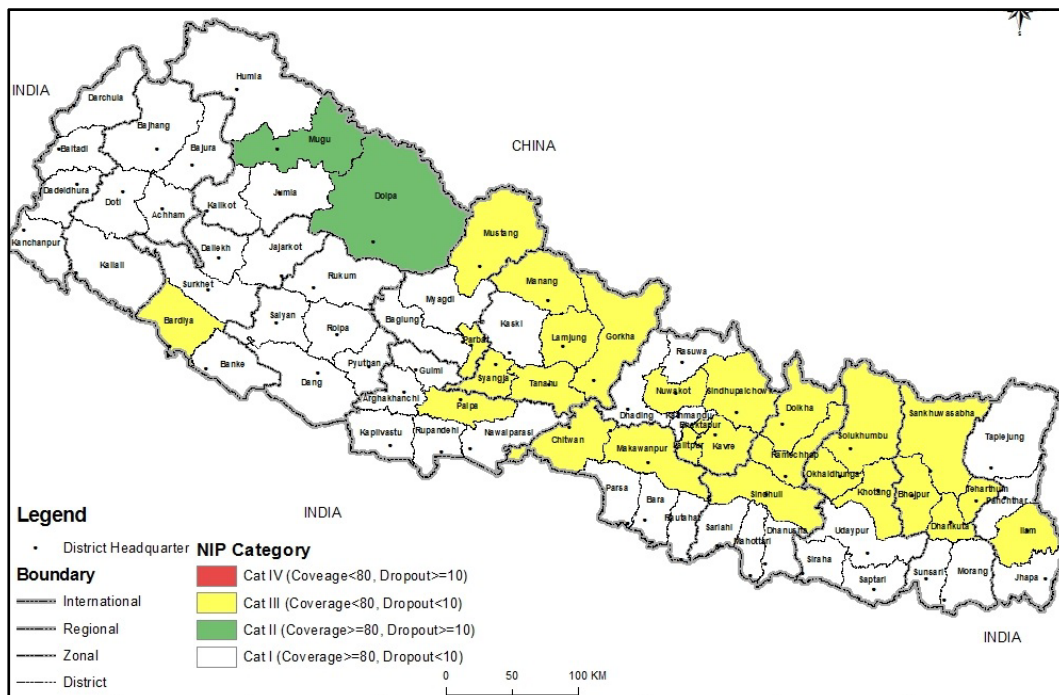
**1. Access and Utilization of Immunization Services**

Coverage of more than 80% of DPT-HepB-Hib 1 and drop out of DPT-HepB-Hib 1 Vs. DPT-HepB-Hib 3 is the globally recognized tool for the evaluation of “Access and Utilization” of immunization services. Districts and health facilities performances are recognized as Category 1 (coverage of DPT-HepB-Hib 1 is more than 80% and dropout of DPT-HepB-Hib 1 Vs. DPT-HepB-Hib 3 is less than 10%), Category 2 (coverage of DPT-HepB Hib 1 is more than 80% and dropout of DPT-HepB-Hib 1 Vs. DPT-HepB-Hib 3 is also more than 10%), Category 3 (coverage of DPT-HepB Hib 1 is less than 80% and dropout of DPT-HepB-Hib 1 VS DPT-HepB-Hib 3 is also less than 10%) and Category 4 (coverage of DPT-HepB-Hib1 is less than 80% and dropout of DPT-HepB-Hib 1 VS DPT-HepB-Hib 3 is more than 10%).

Un-vaccinated children against DPT-HepB-Hib 3 (target population: number of vaccinated children against DPT-HepB-Hib 3) is another important indicator of performance of immunization programme.

Based on above tools, districts and community level health facilities are categorized as having problems of “Access and Utilization” which helps to prioritize health facilities to solve the problems using RED strategies i.e. re-establishment of outreach sessions, supportive supervision, community links with service delivery, monitoring and use of data for action and planning and management of resources. Map 2.1.1 below shows districts categorized using above mentioned tool.

**Map 2.1.1: Categorization of districts based on access and utilization of immunization, 2068/69**



Altogether 48 districts fall in Category I based on the above mentioned categorization, i.e. having good accessibility (adequate and appropriately placed immunization booths) and utilization (regular and timely conduction of sessions) of immunization services, while Mugu and Dolpa (Category II districts) need more efforts to track the drop out children. Similarly, 27 districts fall in Category III indicating the need to reestablish or reallocate session sites appropriately to increase the accessibility of immunization services. None of the districts has fallen in category IV in FY 2068/69.

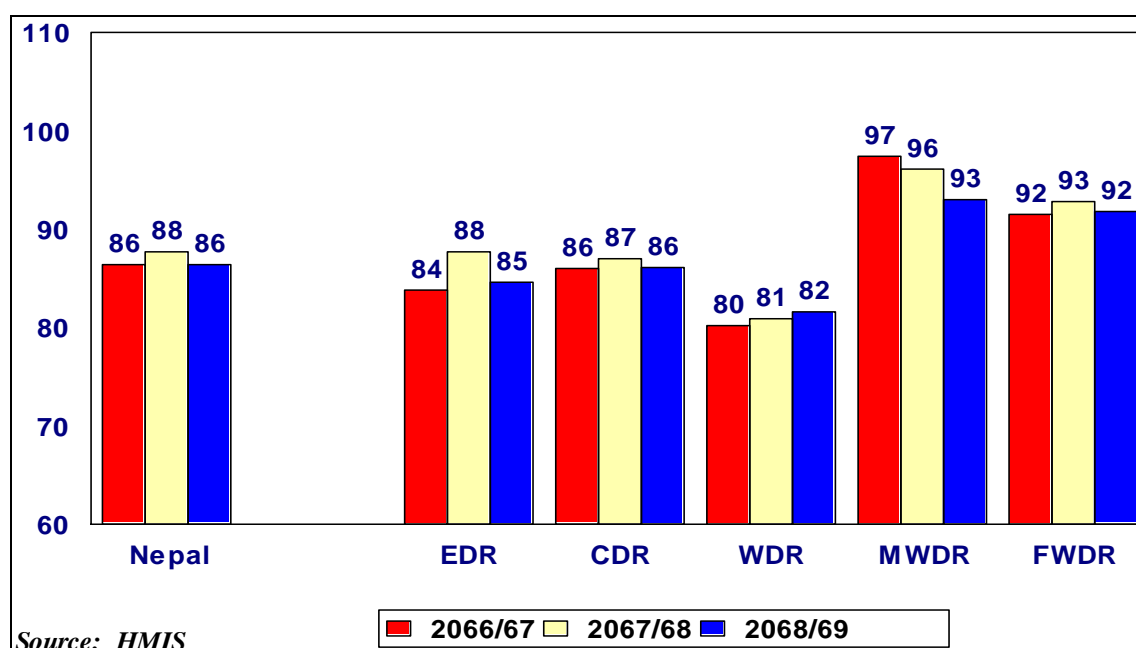
### Number of Un-immunized Children

The total un-immunized children against DPT-HepB-Hib3 (target population–DPT-HepB-Hib 3 and measles) in this fiscal year are 66,358 against 27,714 in FY 2067/68 and measles 89,649 against 80,987 in F/Y 2067/68 this shows number of un-immunized children has increased by 38,634 for DPT-HepB-Hib 3 and 8,662 for measles in this fiscal year. Total 16,594 children have not received any antigens (BCG) i.e. never reached by any immunization services.

### Measles Coverage

The national coverage of measles has decreased slightly from 88% in FY 2067/68 to 86% in 2068/69 (Figure 2.1.2). The achievement of measles coverage in four out of five regions (except in WDR) has also decreased slightly in FY 2068/69 compared to previous fiscal year.

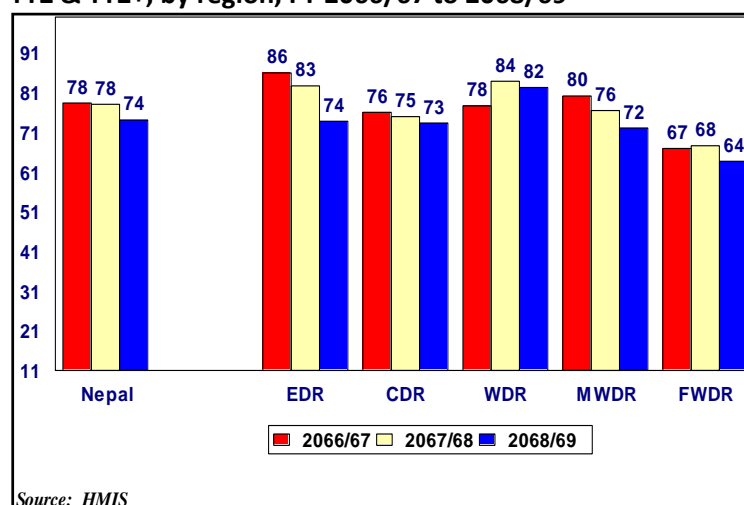
Figure 2.1.2: Measles coverage, by region, FY 2066/67 to FY 2068/69



### TT2+ Coverage

The national trend of TT2 and TT2+ (combined) vaccination coverage for last three fiscal years has been presented in Figure 2.1.3. National coverage for TT2 and TT2+ in FY 2068/69 is 74 percent which is 4 percent less in comparison with the previous FY 2067/68. Region wise TT2 and TT2+ coverage have decreased in all regions but significant reduction was noted in EDR (reduction by 9% compared to 2-4% in other regions)

Figure 2.1.3: Percentage of pregnant women Immunized with TT2 & TT2+, by region, FY 2066/67 to 2068/69



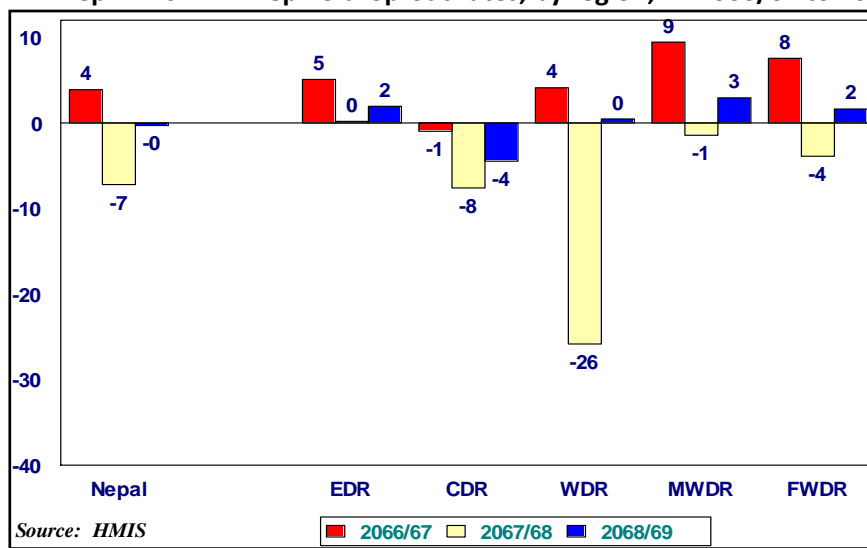
**Drop-out Rates**

Less than 10 % drop out rate is expected to ensure good utilization of immunization services. More than 10% and minus dropout rate signifies that there is problem either of denominator or recording and reporting.

**Drop-out rate of DPT-HepB-Hib1 vs. DPT-HepB-Hib3**

A dropout rate for DPT-HepB-Hib1 vs. DPT-HepB-Hib1 for FY 2066/67 to 2068/69 has been shown in Figure 2.1.4. A total of 5,90,886 children received DPT-HepB-Hib1 and 5, 92,658 children received DPT-HepB-Hib 3 doses i.e. the number of children receiving third dose of DPT-HepB-Hib is higher than the number of children receiving first dose, thus dropout rate (in percent) nationally is minus 0.3. Minus dropout rate for DPT-HepB-Hib 1 VS DPT-HepB-Hib 3 is still significantly high in CDR (minus 4 in FY 2068/69 compared to minus 26 in WDR - FY 2067/68).

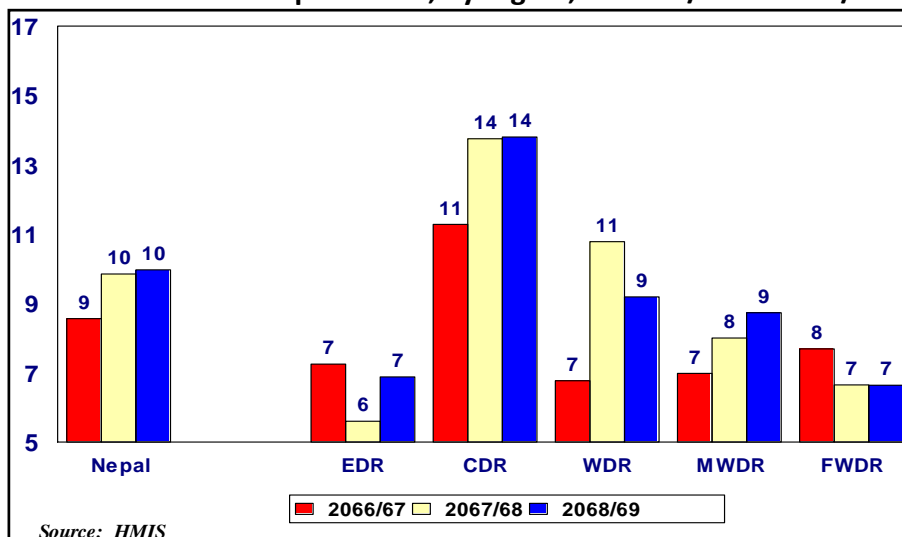
**Figure 2.1.4: DPT-HepB 1 vs. DPT-HepB 3 drop-out rates, by region, FY 2066/67 to 2068/69**



**Dropout rate of BCG vs. Measles**

Figure 2.1.5 shows 3 years trend of dropout rate of BCG vs. Measles. In FY 2068/69 it remains constant at 10% as of FY 2067/68. Region wise analysis indicates that CDR still has high dropout rate of 14% followed by increase in dropout rate of 1% in EDR and MWDR compared to FY 2067/68.

**Figure 2.1.5: BCG vs. measles drop-out rate, by region, FY 2066/67 to 2068/69**

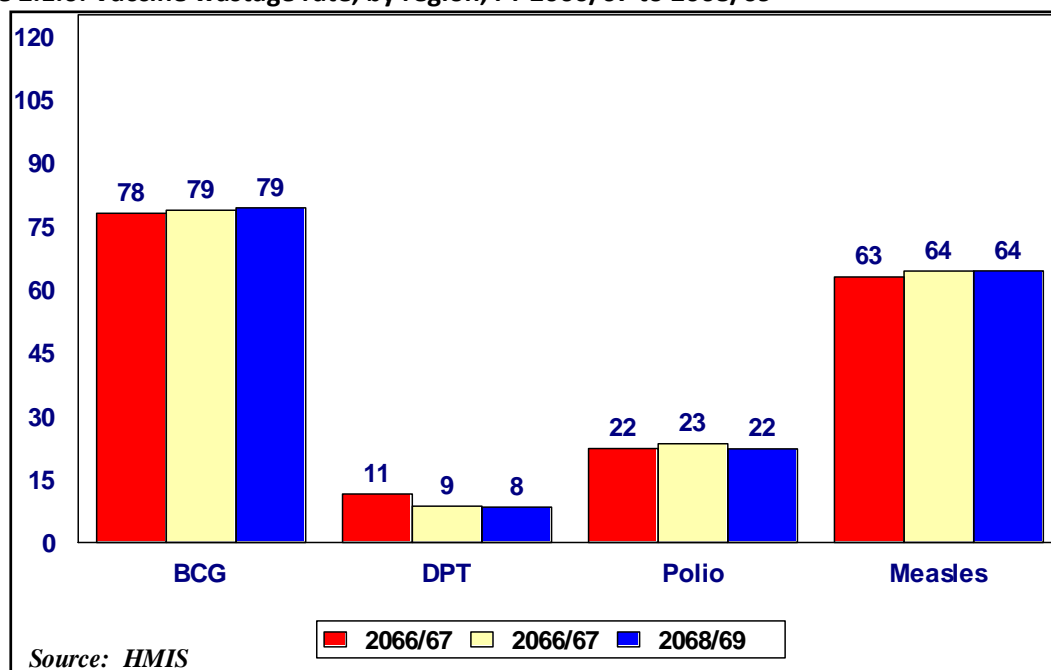


**Vaccine Wastage Rate**

Vaccine wastage rate both for the multi dose vial vaccine policy (MDVP and non MDVP vaccines have been presented in Figure 2.1.6. The wastage rate of MDVP must not increase more than 15% (10 dose vials). BCG and measles which do not fall under MDVP vaccines and are opened for even a single child in sessions, the wastage rate becomes higher.

In FY 2068/69 the wastage rate for both DPT-HepB-Hib and OPV have been reduced by 1% in FY 2068/69 in comparison with previous fiscal year. Similarly, for BCG and measles the wastage rate is constant at 79% and 64% respectively in comparison with the previous fiscal year.

**Figure 2.1.6: Vaccine wastage rate, by region, FY 2066/67 to 2068/69**



**2. Supplementary Immunization Activities**

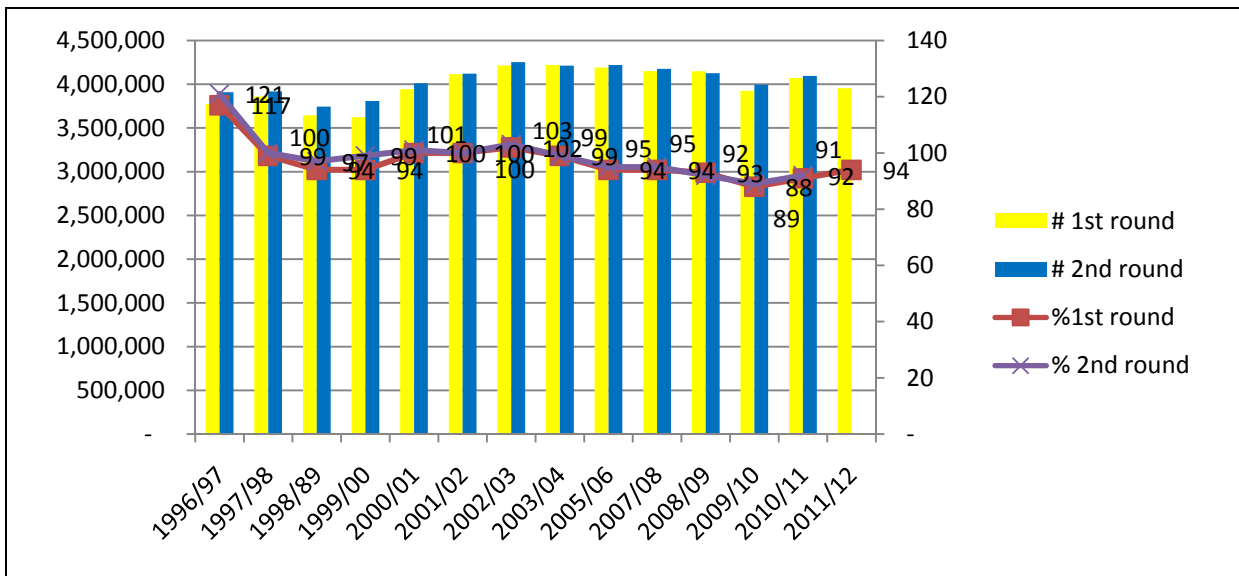
National immunization program is observing supplementary immunizations activities for the vaccine preventable diseases targeted for eradication, elimination and control. In fiscal year 2068/69, supplementary immunization held for polio eradication initiatives (national immunization days), Measles/Rubella (MR Campaign) and Japanese Encephalitis control (JE campaign).

**National Immunization Days (NIDs) for Polio Eradication**

Nepal is polio free since August 2010 and to sustain the achievement DoHS, CHD conducts supplementary immunization every year through NID campaigns. In FY 2068/69 one round of NID was held (April 2012) assuming next round will be tagged with MR campaign to be held in next fiscal year.

The coverage of NID from 1996/1997 to 2010/2011 has been shown in number and percentage in Figure 2.1.7. The administrative coverage of NID was 94% , covering 3,955,266 children against 4,226,966 children under 5 targeted in FY 2068/69.

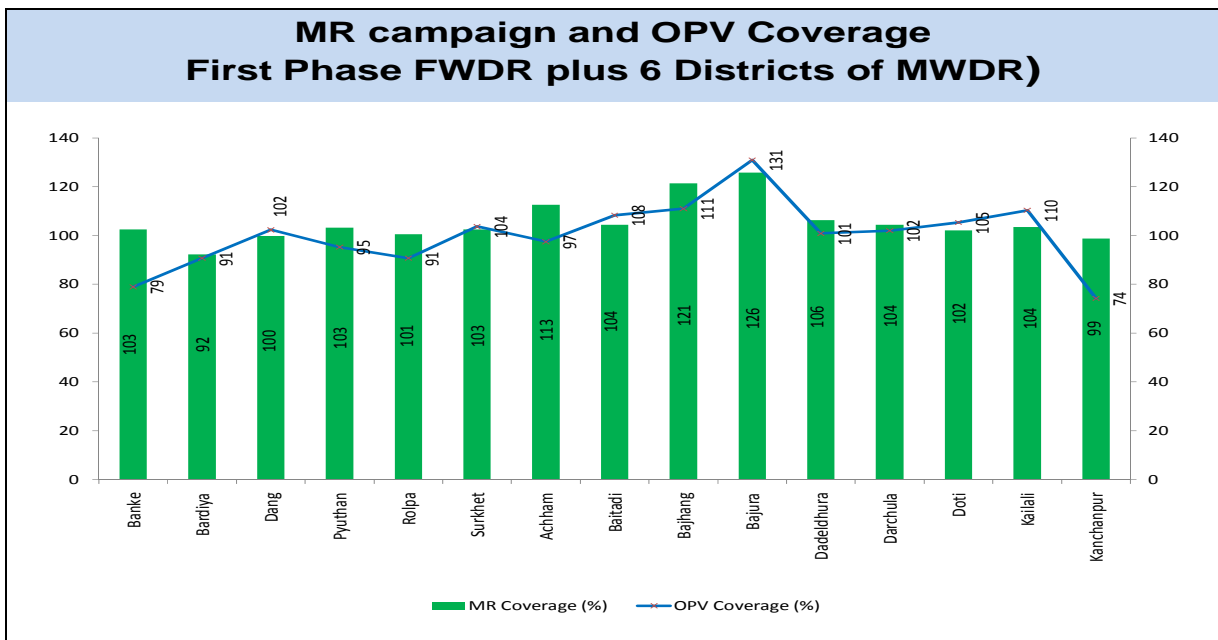
Figure 2.1.7: NID coverage, FY 1996/1997 to 2011/12



**Measles Rubella (MR) campaign in 15 districts**

The coverage of Measles Rubella campaign held in 9 districts of FWDR and 6 districts of MWDR respectively has been presented in Figure 2.1.8. This campaign was a part of nationwide MR campaign. Overall coverage of 15 districts was more than 100% with minimum of 92% in Bardiya and maximum of 126% coverage in Bajura. There were only 2 districts (Bardiya 92% and Kanchanpur 99%) achieving less than 100% coverage. Additionally, OPV 1 dose was given together along with MR vaccine in the campaign.

Figure 2.1.8: Measles/Rubella campaign coverage, by districts, FY 2068/69



**JE Campaign**

To the date, 31 districts have completed JE targeting different age groups since 2006 (Nepalese calendar) (Table 2.1.4). JE campaign started in 2006 with 1 dose of live attenuated SA-14-14-2 vaccine targeting JE endemic districts followed by inclusion of vaccine in routine immunization. Thus, a total of 11,924,927 people have been vaccinated against SA-14-14-2 vaccine in these districts.

In FY 2068/69 (September to November 2011) 4 districts (Dhading, Kavre, Kaski and Palpa) completed JE campaign targeting all age group above 1 year. Total of 1,286,303 JE doses were administered against the target of 1,579,838 achieving 81% coverage. Only Kaski achieved 90% coverage.

**Table 2.1.4: Coverage of JE Campaign, by district**

S.N.	District	Target	Achievement	%	Age Group	Month and Year of SIA
1	Banke	424,152	363,298	86	All above 1yrs	14 July- 18 Aug 2006
2	Bardiya	420,863	358,513	85	All above 1yrs	14 July- 18 Aug 2006
3	Dang	503,821	456,063	91	All above 1yrs	14 July- 18 Aug 2006
4	Kailali	684,718	584,642	85	All above 1yrs	14 July- 18 Aug 2006
5	Rupandehi	768,893	715,943	93	All above 1yrs	14 Jul-18 Aug 2006 and 7 Jun-31 Aug 2007
6	Kanchanpur	426,938	347,367	81	All above 1yrs	14July- 18 Aug 2006 and 7 Jun- 31 Aug 2007
7	Morang	365,009	311,881	85	1-15 Years	7Jun- 31 Aug 2007
8	Sunsari	271,868	270,057	99	1-15 Years	7 Jun- 31 Aug 2007
9	Dhanusha	296,222	307,638	104	1-15 Years	23 Sept- 18 Oct 2007
10	Mahottari	243,543	247,538	102	1-15 Years	4-14 May 2008
11	Jhapa	304,503	289,043	95	1-15 Years	5 Jun- 7July 2008
12	Kapilvastu	263,903	234,656	89	1-15 Years	28 May - 15 Jun 2008
13	Nawalparasi	251,005	224,253	89	1-15 Years	15 Jun- 15 July 2008
14	Parsa	219,493	212,399	97	1-15 Years	2-30 Jun 2008
15	Chitwan	209,400	212,300	101	1-15 Years	6- 28 Jun 2008
16	Lalitpur	151,244	157,012	104	1-15 Years	27 Aug- 17 Sept 2008
17	Bhaktapur	100,575	115,563	115	1-15 Years	27 Aug- 17 Sep 2008
18	Saptari	656,885	654,555	100	All above 1yrs	7-24 Feb 2009
19	Udaypur	336,951	351,397	104	All above 1yrs	7 Feb- 12 Mar 2009
20	Bara	649,171	590,051	91	All above 1yrs	22 Feb- 27 April 2009
21	Rautahat	630,225	639,223	101	All above 1yrs	30 Jan- 18 Feb 2009
22	Siraha	659,149	622,858	94	All above 1yrs	25 May- 13 Jun 2009
23	Kathmandu	1,311,596	978,254	75	All above 1yrs	1 Aug 2009 (VDCs) and July 2010 (Metro)
24	Sarlahi	712,109	560,460	79	All above 1yrs	April- May 2011
25	Makwanpur	441,426	261,023	59	All above 1yrs	1 -29 April 2011
26	Sindhuli	331,229	269,825	81	All above 1yrs	19 April-16 May 2011
27	Surkhet	358,531	303,012	85	All above 1yrs	5 April- 5 May 2011
28	Dhading	392,166	322,573	82	All above 1yrs	22 Aug- 16 Nov 2011
29	Kavre	440,600	340,511	77	All above 1yrs	13 Sept- 22 Oct 2011
30	Kaski	443,572	399,948	90	All above 1yrs	17 Aug- 16 Sept 2011
31	Palpa	303,500	223,071	73	All above 1yrs	11 Sept- 18 Oct 2011
	<b>Total</b>	<b>13,573,260</b>	<b>11,924,927</b>	<b>88</b>		

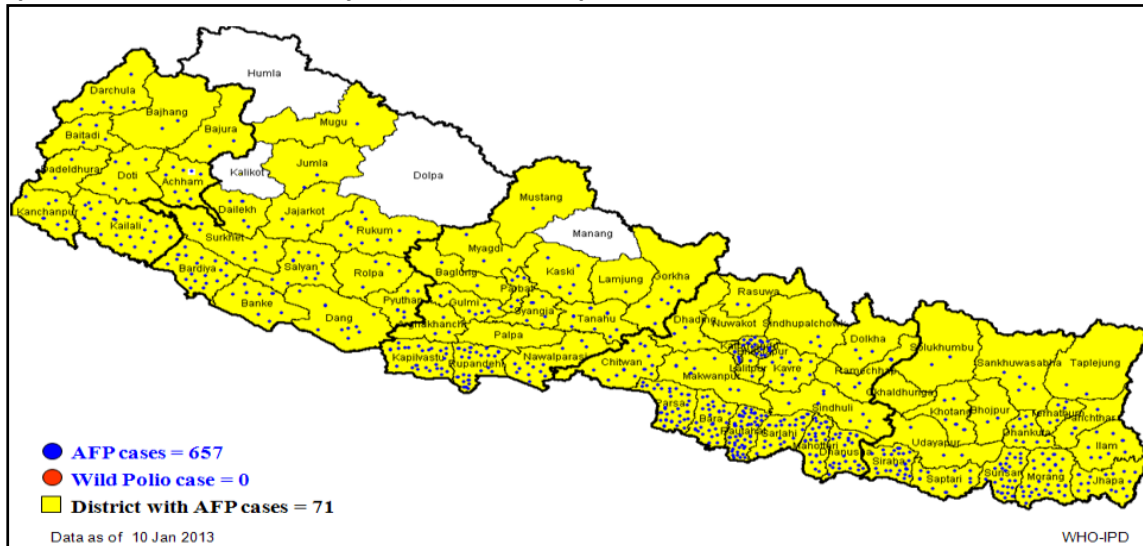
**3. Vaccine Preventable Disease Surveillance**

Nepal has a strong network of integrated Vaccine Preventable Diseases (VPD) surveillance (AFP, measles/rubella, AES, MNT, pneumonia for Avian Influenza) supported by surveillance medical officers. There are more than 576 weekly zero reporting sites and 89 active surveillance sites throughout the country. The reporting sites include hospitals, PHCCs, HPs and SHPs, private clinics and even community informers. This network is sensitive enough to pickup cases and out breaks of VPDs from any part of the country.

**AFP Surveillance**

In 2068/69 a total of 657 AFP cases from 71 districts were reported and investigated. National non-polio AFP rate and adequacy of stool collection are the certification standards. Four districts which have not reported AFP cases are with very sparse population and do not expect AFP case each year (Map 2.1.2).

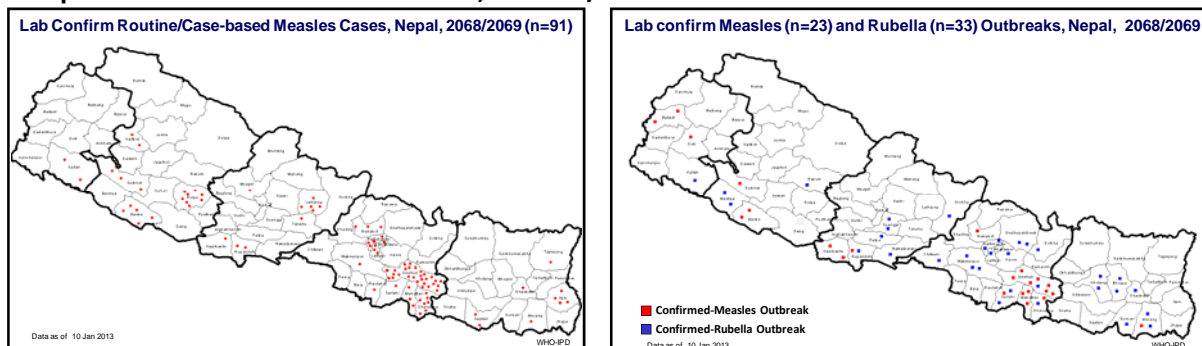
**Map 2.1.2: Acute Flaccid Paralysis (AFP) and wild polio cases, 2068/69**



**Measles/Rubella Surveillance**

In fiscal year 2068/69 total 91 measles cases were reported from 40 districts through routine reporting and measles case based surveillance sites. A total of 74 suspected measles outbreaks were reported from 33 districts. Out of which 23 outbreaks were laboratory confirmed measles outbreaks from 11 districts and 33 were lab confirmed rubella outbreaks, 9 were measles and rubella mix outbreaks, 6 were negative for both measles and rubella and remaining discarded for insufficient samples.

**Map 2.1.3: Lab confirm measles cases, FY 2068/69**

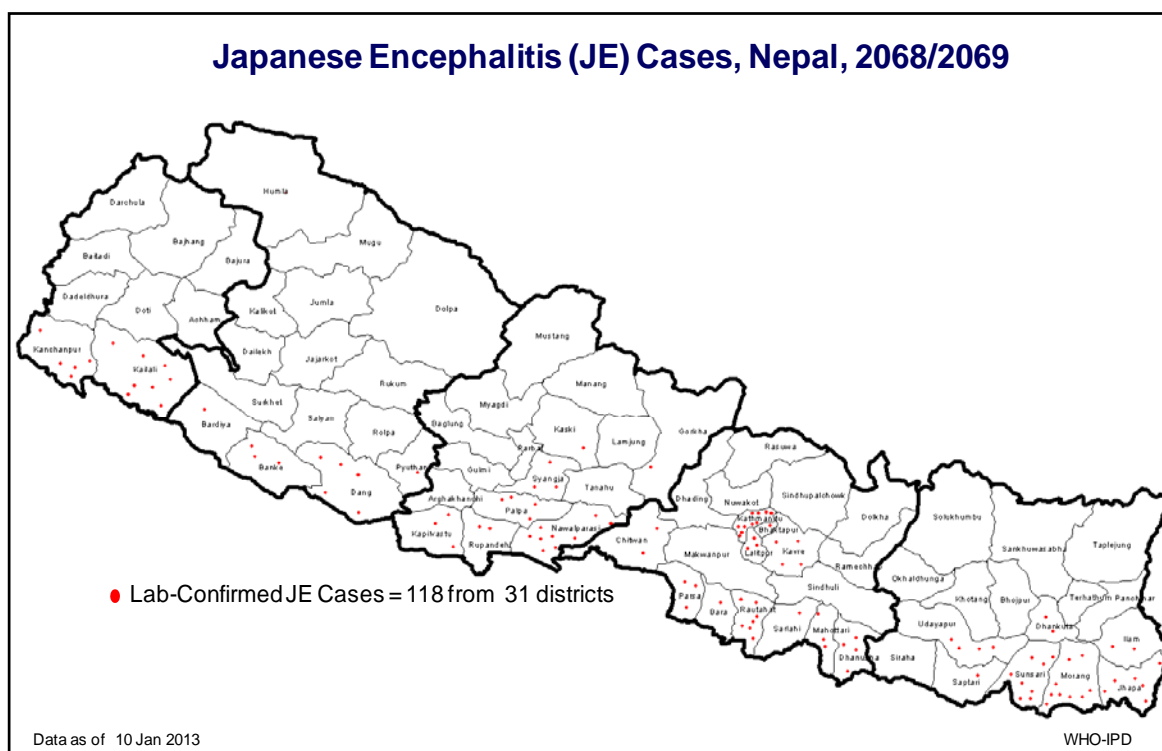


After successful completion of measles catch-up (2003/04) and follow up campaign (2008) the number of measles cases drastically reduced (Map 2.1.3). But, the number of rubella cases has increased.

**Japanese Encephalitis Surveillance**

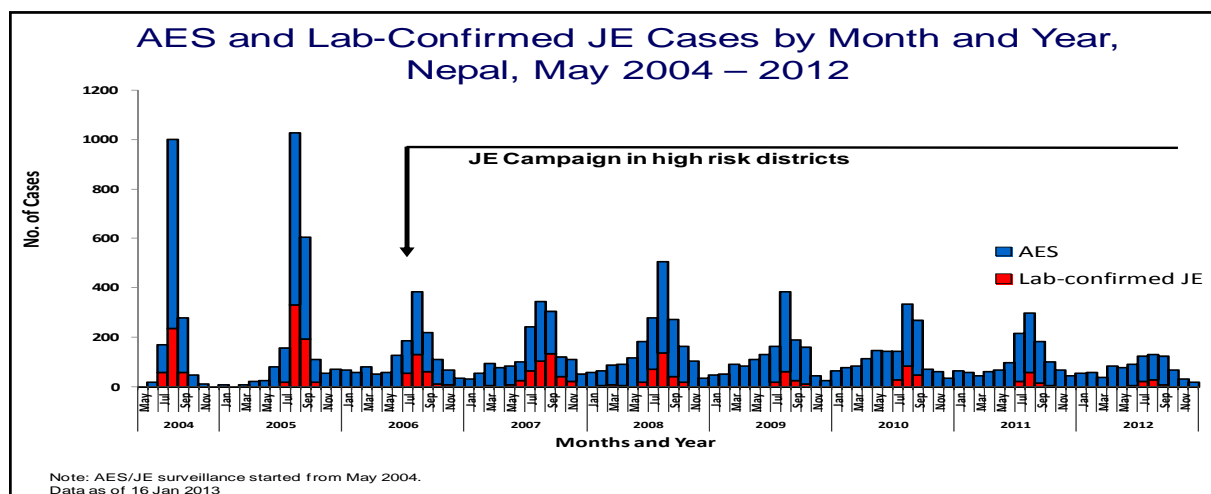
In fiscal year 2068/69 a total of 1,308 AES cases were reported from 61 districts of which 118 were laboratory confirmed JE cases from 29 districts.

Map 2.1.4: JE cases, 2068/69



JE campaign started in 2006 in high risk districts. Following JE campaign the number of JE cases has drastically reduced over periods (Figure 2.1.9).

Figure 2.1.9: JE cases, 2068/69

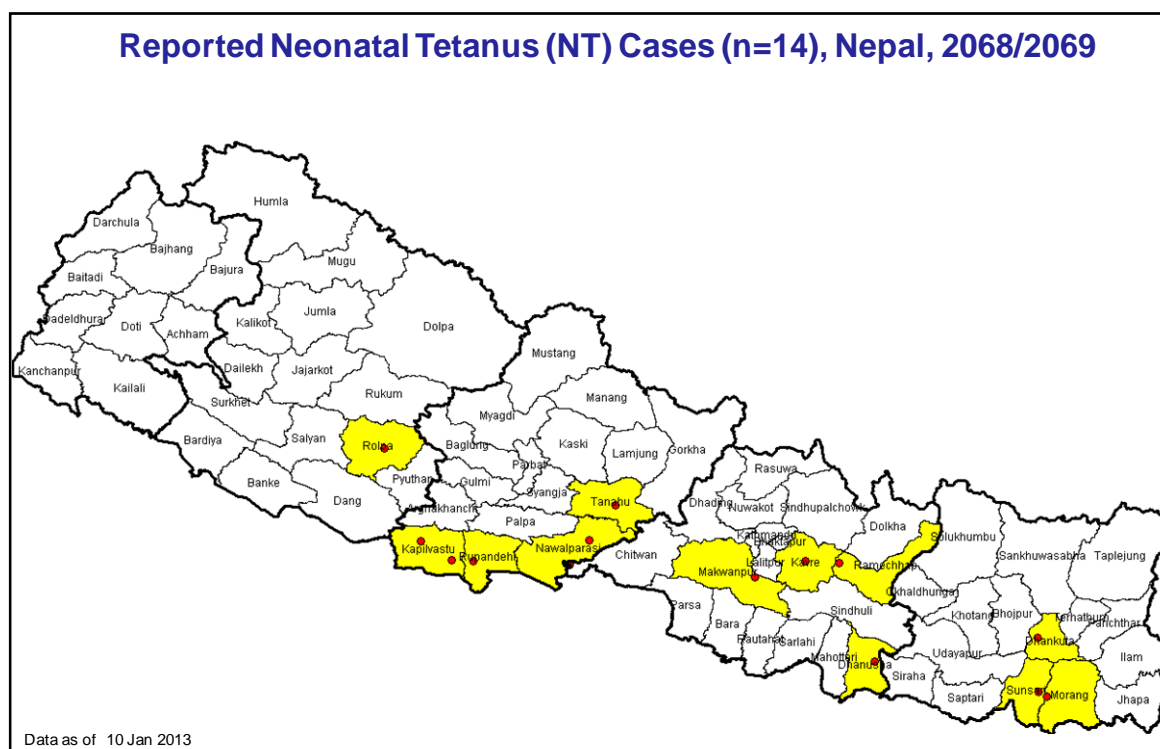


### Neonatal Tetanus Surveillance

In FY 2068/69 a total of 14 NT cases were reported from 12 districts through integrated VPD surveillance network.



Map 2.1.5: Reported Neonatal Tetanus Cases, FY 2068/69



Nepal achieved Maternal and Neonatal Tetanus elimination status in 2005. Since then Nepal has sustained MNT elimination status (Figure 2.1.14).

### 2.1.4 Issues and Recommendations

Department of Health Services, Child Health Division regularly monitors the national immunization program. Quarterly review of the program based HMIS information at the central level and regular feedback to districts has been useful in identifying the issues, challenges and solution to overcome the challenges faced. These reviews have provided guidance to the program for future planning. Table 2.1.5 presents the issues raised and recommended actions along with the responsibility of various organizations.

**Table 2.1.5: Issues/Recommendations**

Issues	Recommendations	Responsibility
Vaccinator: <ul style="list-style-type: none"> <li>• Many posts vacant,</li> <li>• Inadequate provision for service contract,</li> <li>• Delay in annual contracting of vaccinators,</li> <li>• Poor quality of contracted vaccinators because of lack of training</li> </ul>	<ul style="list-style-type: none"> <li>• Fulfillment of vacant post through Public Service Commission</li> <li>• Recruitment of ANMs in every wards (long term solution)</li> <li>• For new recruitment the policy should be multi year contact (Short term solution).</li> <li>• Training provision for newly contracted vaccinators</li> </ul>	MoHP, DoHS, CHD D(P)HOs
Health workers reluctant to run outreach immunization sessions without field allowances (where vaccinator post is vacant)	Provision of field allowance for those who are involved in immunization	MoHP, DoHS, CHD

### Child Health: Immunization

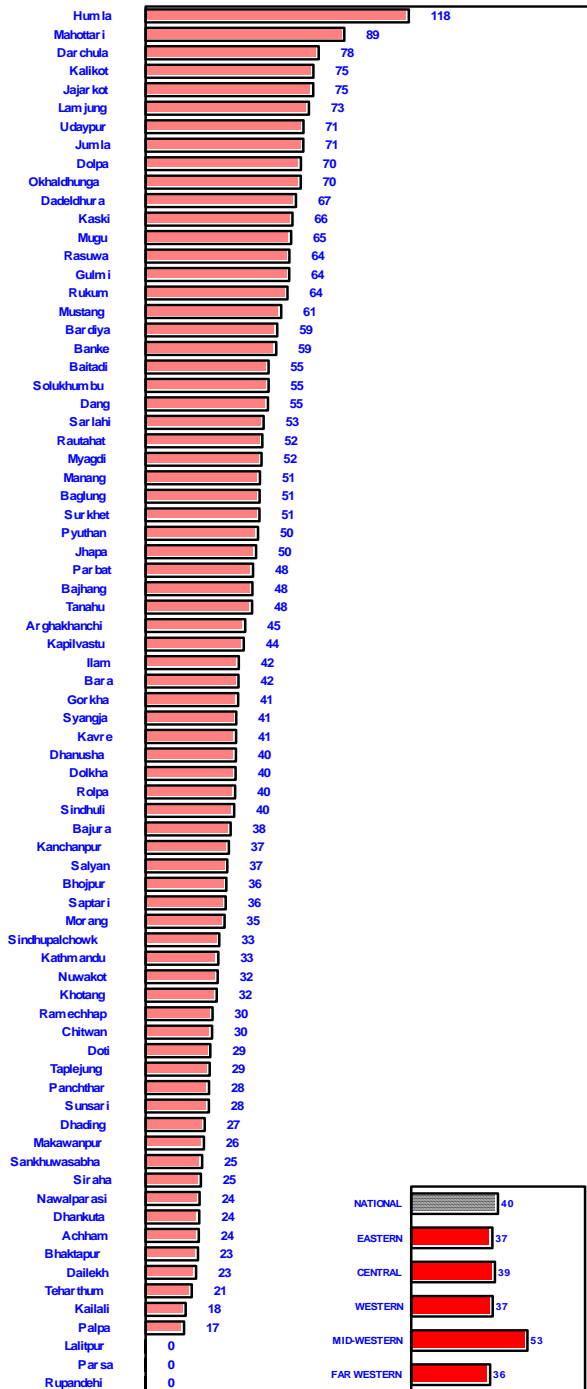
Issues	Recommendations	Responsibility
Inadequate budget allocation to districts for transportation of vaccine and other supplies and fuel for cold chain	Adequate budget should be allocated on the Basis of geography	MoHP, DoHS, CHD
Repair/maintenance and replacement of cold chain equipment	Procure the equipment in time	LMD
Equity in immunization coverage	Regular update and implementation of micro-planning focused on unreached population	RHD, D(P)HOs
Poor data quality: coverage, drop-out, vaccine wastage	Strengthen Data Quality Self Assessment (DQSA)/ Lot quality Assurance	CHD, RHD, D(P)HOs
Inadequate attention given to AEFI by Health Workers	i. Periodic refresher training to vaccinators ii. Strengthen supervision at different levels	CHD, RHD, D(P)HO
Lack of regulation and monitoring of Private sectors (especially for HepB)	Strong licensing and close monitoring of private sectors	MoHP, DoHS, CHD, RHD, D(P)HO
Initiation of New Vaccines: Mumps, Human Papilloma Virus, Typhoid, Cholera	Systematic surveillance for those Diseases should be initiated	MoHP, DoHS, CHD
Entry criteria for cold chain assistant is not clear	Cold Chain Assistant should be of relevant technical background	MoHP, DoHS, CHD

Note: Please refer to Annex

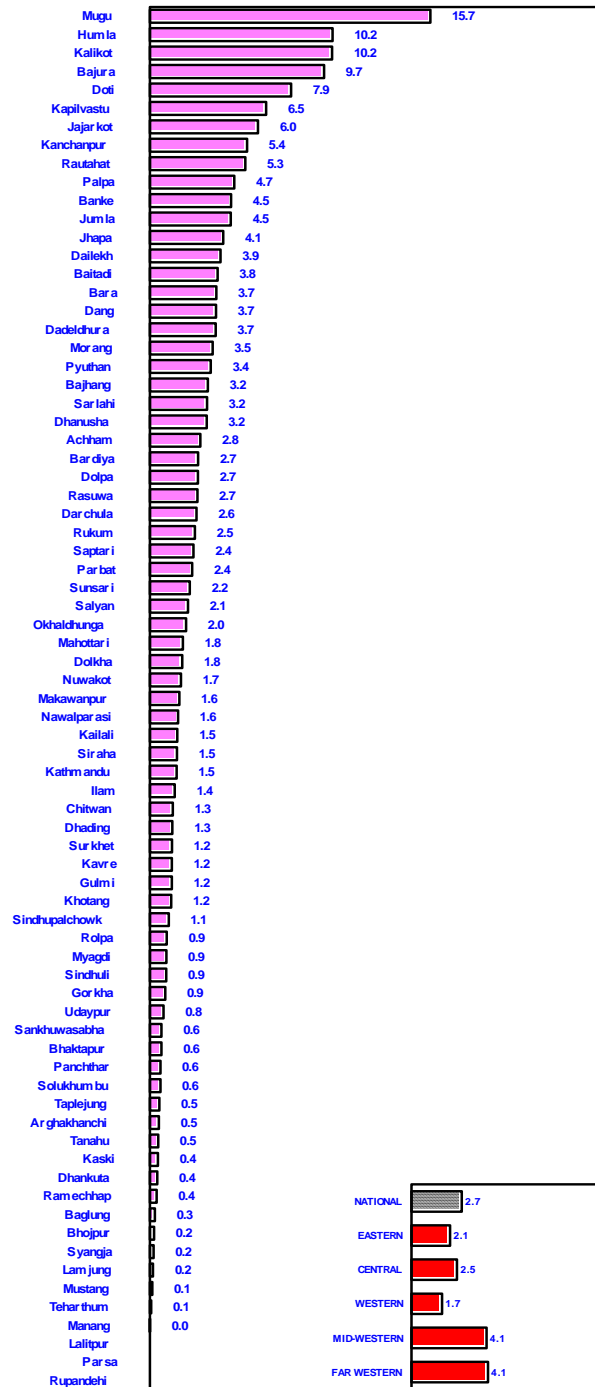
# Nutrition

Fiscal Year 2068/69 (2011/2012)

Growth Monitoring New Visits as % of <5 Children



Proportion of malnourished children (weight/age new visit)<5 Children



Source: HMIS

## 2.2 NUTRITION

### 2.2.1 Background

Improvement in nutrition status has been seen as some of the most powerful and cost effective investment for the overall socio-economic development by enhancing the optimal physical growth and cognitive development especially of women and children. Nutrition is crucial for accelerated attainment of Millennium Development Goals as its impact is felt in developing human capital thereby influencing the economic progress. Convention on Rights of the Child has mandatorily ensured child protection from all forms of neglect, violence/abuse and exploitation including the right to food and nutrition. As the country signatory of several international conventions and declarations, Government of Nepal is committed to its citizens for adequate food, health and nutrition. Failing to ensure protection of these children often results in undernourishment, poor health and intellectual development which, in turn, lead to less productive and under-nourished adults. When combined with household food insecurity, frequent illness and infections, inadequate dietary intake, poor hygiene, care and practices, the cycle of intergenerational malnutrition comes into existence.

#### **Current changes and focus in nutrition**

Globally, there has been a significant progress made in reducing the hunger and poverty in the last decade. Yet, the focus was not made in improving the nutritional status, especially of women and children. In 2009, G8 leaders pledged to increase funding and coordination for investment in agriculture and food security. In subsequent year 2010, more than a dozen countries initiated a country-led global effort “Scaling-Up Nutrition Movement” to advance health and development through improved evidence based cost-effective nutrition interventions. It is the start of a larger movement to focus global attention, align and increase resources, and build partnerships to alleviate the suffering caused by under-nutrition among millions of people around the world. SUN calls for greater ‘multi-sectoral’ action on nutrition during the first critical 1000 days of a child’s life, starting at pregnancy to children under 2 years of age.

Being part of global SUN movement, Nutrition is high on the Government of Nepal’s priority as demonstrated with the adoption of the Multi Sectoral Nutrition Plan (MSNP). Additionally, external development partners are also channelling significant resources towards improving the nutritional status of the Nepali people. Yet another paradigm shift is the realization of issues affecting the nutritional status are multidimensional and that a multi-sectoral approach is required to address the multifaceted challenges. Understanding the fact that under-nutrition is a complex, multi-faceted problem, and responses need to include many diverse actors, the high level of political will, involvement of sectoral ministries, and support from the EDPs place Nepal in a unique position. In recent years, improving the nutritional status of women and children is top priority for the Government of Nepal.

### Summary of policy initiatives

With outline of multi-sectoral determinants for nutrition and subsequently calling for multi-sectoral approach to address the problem of malnutrition; as suggested by the Nutrition Assessment and Gap Analysis (NAGA) in 2009, National Planning Commission with the support of EDPs and multilateral agencies developed a comprehensive Multi-Sectoral Nutrition Plan involving the five key line ministries. It has recently been approved and endorsed by the Council of Ministers and officially launched by Rt. Hon. Prime Minister of Nepal in September 2012. The longer-term vision of the multi-sectoral nutrition plan, over the next ten years, is to embark the country towards significantly reducing chronic malnutrition to ensure that it no longer becomes an impending factor to enhance human capital and for overall socio-economic development. The goal over the next five years is to improve maternal and child nutrition, which will result in the reduction of MIYC under-nutrition, in terms of maternal Body Mass Index (BMI) and child stunting, by one third.

In the health sector, a National Nutrition Policy and Strategy was developed and approved in 2004 AD realizing a need for a comprehensive document on nutrition for generating support and effective implementation of the program. It is the main policy document which has been guiding the nutrition interventions in the health sector. Later in 2006, MoHP has also put in place School Health and Nutrition Strategy. In recent days, emphasis has been laid to intensify the priority interventions as recommended by the Lancet Series in 2008. As a result, Nepal Health Sector Programme II 2010-2015 (NHSP II) has also given a special priority for nutrition and emphasised the need for a multi-sectoral approach. Likewise, MoHP has also approved a decision to carry out organisation and management survey for the establishment of National Nutrition Centre under the MoHP.

### Problem of Malnutrition in Nepal

In last 15 years, Nepal has shown notable decrease in under 5 mortality rate, infant mortality rate and maternal mortality ratio. These steep declines in mortality rates have been attributed to strong public health interventions including the control of the micro-nutrient deficiencies during the same period. However, the neonatal and infant mortality rates have remained stagnant between 2006 and 2011 and are representing more than two-third of under-five deaths.

Micronutrients programs in Nepal has made a significant progress in reducing micronutrient deficiency over the past decade and is on track to meet the micronutrient related goals of the World Fit for Children Summit 1990. One of the micronutrient programs is sustained through semi-annual Vitamin A supplementation and deworming of pre-schoolers which covers more than 90 percent of children, and this has saved valuable lives of thousands of children each year. This program has set a very good example of community mobilization and strong partnership across various sectors in Nepal. Our focus now is on sustaining and maintaining this intervention along with promotion of food based dietary approach.

The household consumption of adequately iodized salt has risen to 80 percent in 2011. This has been possible through on-going awareness campaign targeting areas with low coverage, transportation subsidies given to remote districts. Our aim is to attain the target of more than 90 percent by 2015 through minimizing regional disparity.

Similarly, iron intensification program has contributed to significant increase in the iron and folic acid supplementation and deworming of pregnant women has greatly contributed in the reduction of anaemia prevalence. Anaemia has come down almost by half (from 67 to 35 percent) between 1998 and 2011 among Nepalese women of reproductive age. During this period, anaemia prevalence among children under five years of age has also decreased by more than one-third (from 78 to 46 percent).

However, the anaemia in children below 2 years of age and pregnant women still remains very high (70 percent and 48 percent, respectively) in 2011 posing a big challenge for us. To address this problem, MoHP has started distribution of multiple micronutrient powders linked with the promotion of infant and young child feeding. This program is under nation-wide rapid expansion. In addition, mandatory flour fortification at roller mills is also underway. But the reduction of anaemia has ceased in the last five years. Between 2006 and 2011, the prevalence of anaemia in the pregnant women has increased by 6 percent. Anaemia rates were higher among pregnant women (48%) and breastfeeding women (38%) compared to women who were neither pregnant nor breastfeeding (33%). The prevalence of anaemia among adolescent girls has remained stagnant at around 39 percent over the last five years and the NDHS findings from 2006 and 2011 both reported a higher rate of anaemia in adolescent girls than in non-pregnant women.

Despite the above success, chronic malnutrition continues to be a long standing challenge. Progress in reducing general malnutrition among children and women has been relatively slow. The acute and chronic malnutrition in children remains at critical levels. According to latest data, stunting (a form of chronic malnutrition) has come down to 41 percent in 2011 from 49 percent in 2006. While wasting continues to linger at 11 percent, and 29 percent of the children are still underweight. Malnutrition and under-nutrition diminishes cognitive and economic growth of the affected population which in turn reduces GDP by at least 3 percent. The issue of food insecurity and its contributing factors such as climate change related outcomes (droughts, floods) including chronic poverty, illiteracy, socio-economic disparity, internal displacements, rising gasoline price, rugged geo-topography are also conducive factors for under-nutrition.

Despite of all these complex and multi-facet problems contributing to deterioration of nutritional status, Nepal has been implementing the proven and highly cost-effective interventions (phase-wise nation-wide expansion) to address the malnutrition / under-nutrition problems with continued progress.

Currently, the prevailing high rate of child under-nutrition in the country is one of the major contributing factors for optimal growth and development of children. The NDHS 2011 has also estimated low birth weight (i.e. "very small" or "smaller than average") at 12 percent, which is likely to be an underestimate; recent hospital based studies across Nepal have found low birth weight rate varying from 8% to 34%. Furthermore, national nutrition status estimates mask wide inequities. Children from the lowest quintile or whose mother has no education are more than twice likely to be stunted than those from richest quintile or whose mother has secondary level or more education. The mountain zone has the highest stunting rate of 56 percent, while the Terai has the lowest rate (37.4%). Eighteen percent of non-pregnant women are undernourished or chronically energy deficient (BMI <18.5kg/m<sup>2</sup>) and 14 percent are overweight or obese (NDHS 2011) an increase of 5 percent since 2006. The prevalence of both underweight and overweight among women is indicative of a potential double burden of malnutrition in the country. At particular risk for chronic energy deficiency are girls 15-19 years of age, women living in Terai, Western Mountains, Far Western Development Region and women with no formal schooling and from the lowest wealth quintiles. Women in Nepal are generally of short stature. According to the 2011 NDHS, 12 percent of women in Nepal are less than 145 cm. Risk factors for short height include living in a rural area, having limited schooling and coming from the lowest wealth quintiles. In terms of an etiology, short stature is likely consequence of the high prevalence of stunting in childhood. Babies who grow poorly and become stunted are likely to continue being stunted thus perpetuating the intergenerational cycle of malnutrition in the population. Adolescent girls in Nepal fair worse as 25.8 percent of them have a low body mass index less than 18.5 kg/m<sup>2</sup> compared to only 18.2 percent of women of reproductive age.

## National Nutrition Program

### Goal

The overall goal of national nutrition program is to achieve nutritional well-being of all people to maintain a healthy life to contribute in the socio-economic development of the country, through improved nutrition program implementation in collaboration with relevant sectors.

### General Objective

The general objective of the National Nutrition Program is to enhance nutritional well-being, reduce child and maternal mortality and to contribute for equitable human development.

### Specific Objectives:

- To reduce general malnutrition among women and children
- To reduce iron deficiency anaemia among children and pregnant mother
- To maintain and sustain iodine deficiency disorder (IDD) and vitamin A deficiency disorder (VAD)
- To improve maternal nutrition
- To align with Multi-sectoral Nutrition Initiative
- To improve nutrition related behaviour change and communication
- To improve monitoring and evaluation for nutrition related programmes/activities
- To improve health and overall nutritional status of school children through the implementation of school health and nutrition program
- To reduce the critical risk of malnutrition and life during exceptionally difficult circumstances
- To strengthen the system for analyzing, monitoring and evaluating the nutrition situation

### Targets

In order to improve the overall nutritional status of children and pregnant women, the national nutrition program has set the following targets:

- To reduce PEM in children under 5 years of age and reproductive aged women to half of the 2000 level by the year 2017
- To reduce the prevalence of anaemia among women and children to less than 40% by 2017.
- To virtually eliminate IDD and sustain the elimination by 2017
- To virtually eliminate vitamin A deficiency and sustain the elimination by 2017
- To reduce the infestation of intestinal worms among children and pregnant women to less than 10% by 2017
- To reduce the prevalence of low birth weight to 12% by the year 2017

### Nutrition Specific MDGs

The following Nutrition Specific Goals are to be achieved by the end of 2015 (MDGs):

- Reduce sub-clinical VAD to 7%
- Reduce anaemia in pregnant women to 43%
- Reduce anaemia in all age women to 42%

- Reduce anaemia in children to 43%
- Increase consumption of adequately iodized salt ( $\geq 15$  PPM) at house hold level to 88%
- Reduce prevalence of night blindness in pregnant women to 1%
- Reduce prevalence of underweight in <5 years children to 27%
- Reduce prevalence of stunting in <5 years children to 28%
- Reduce prevalence of wasting in <5 years children to 5%
- Increase exclusive breast-feeding in <6 months children to 88%
- Reduce prevalence of thinness (BMI 18.5 – below 25) in women to 15%
- Reduce worm infestation rate in children (Pre-school) to less than 15%

### Strategies

The following general strategies have been pursued to address the nutritional situation in Nepal:

- Protect, promote and support optimal feeding practice of children through expansion and strengthening of infant and young child feeding and promotion of growth monitoring
- Iron tablet supplementation to pregnant and breast feeding women, adolescent girls, multiple micronutrient powder distribution to children 6 months to 5 years of age, deworming tablets distribution to pre-school and school children and flour fortification
- Increase accessibility and social marketing of 2 child logo salt for consumption of adequately iodized salt
- Bi-annual mass supplementation of Vitamin A to children 6 months to 5 years
- Gradual expansion of the school health and nutrition activities in all districts
- Behavior change communication for changing dietary practices for improved maternal and child nutrition practices
- Expansion and strengthening of integrated management of acute malnutrition through both community as well as facility based approaches
- Promote, facilitate and utilize community involvement for all nutrition activities
- Develop understanding and effective co-ordination between various concerned sections, divisions and centres for integration of nutrition in key health programs including community based approaches
- Strengthen and integrate nutrition across key non-health sectors (involving key agencies viz. Ministry of Agriculture Development, Education, Federal Affairs and Local Development, Urban Development and the National Planning Commission) in collaboration with EDPs, I/NGOs and private sectors in line with the multi-sectoral nutrition plan
- To adopt multi-sectoral approach to address the problem of under-nutrition in women and children
- Promote, facilitate and utilize community participation and involvement for all nutrition activities
- Develop understanding and effective co-ordination between various concerned sections, divisions and centres within DoHS
- Maintain and strengthen co-ordination among other agencies involved in nutrition activities, i.e., the Ministries of Agriculture Development, Education, Federal Affairs and Local Development, Urban Development and the National Planning Commission, as well as with EDPs, NGOs, INGOs and private sector
- Conduct national and regional advocacy and social mobilization campaigns for nutrition
- Develop a systematic approach for monitoring and evaluation of all nutrition program activities
- Celebrate different events related to nutrition program like School Health and Nutrition Week (Jestha 1 to 7), breast feeding week (August 1-7), Iodine month (February) to raise awareness about the importance of Nutrition



- Implement School Health and Nutrition Program as per National Strategy
- Growth monitoring will be used as a screening tool to assess the general malnutrition status of children under less than five years

### **Specific Strategies**

#### **Control of Protein Energy Malnutrition (PEM)**

- Ensure early initiation of breast feeding within one hour of birth, avoidance of pre-lacteal feed and promotion of exclusive breastfeeding for the first 6 months.
- Ensure continuation of breast feeding for at least 2 years and introduction of appropriate complementary feeding after 6 months.
- Strengthen the capacity of health workers/ medical professionals for nutrition/breast feeding management
- Protect from commercial promotional practices which undermine optimal breast feeding practices
- Empower all mothers, families and care-givers to make and carry out fully informed decisions about feeding
- Support community based programs
- Promote mother and child friendly working environment
- Promote the use of appropriate and adequate locally available complementary foods like Jaulo and Sarvottam Pitho
- Strengthen the system of growth monitoring and its supervision/monitoring
- Improve skills and knowledge regarding growth monitoring and nutrition counseling among health workers
- Create awareness regarding the importance of appropriate and adequate nutrition for children, pregnant and lactating mothers
- Change culturally acceptable nutrition behavior to improve intake of nutritious foods and diversification of diet
- Facilitate the function of nutrition rehabilitation centre at hospital level and community management of acute malnutrition
- Strengthen the ability of health personnel in dietary and clinical management of severely malnourished children
- Distribute fortified foods to children aged 6 to 36 months (and expectant and nursing mothers) in food deficient areas
- Celebrate breastfeeding week (August 1-7) as an advocacy for the protection and promotion of breastfeeding.
- Improve maternal and adolescent nutrition and low birth weight through improved maternal nutrition practices.

#### **Control of Iron Deficiency Anaemia (IDA)**

- Increase coverage and compliance of iron/folic supplementation for pregnant and breastfeeding women
- Reduce the burden of parasitic infestations (Helminthes, Malaria and Kala-azar)
- Identify and implement food fortification to increase the dietary iron intake focusing on commercial as well as small-scale community based fortification initiatives
- Promote dietary diversification to improve the quality of food consumed with an emphasis on bio-available iron

- Promote maternal care practices and services to improve health and nutritional status of mother and babies
- Identify and implement the effective modalities to address iron deficiency in adolescents and non-pregnant women of reproductive age
- Advocate for equity among genders in access and control over household foods

#### **De-worming**

- De-worming of pregnant women with a single dose tablet (Albendazole 400 mg) starting from 2<sup>nd</sup> trimester (4 months) of the pregnancy
- Distribute bi-annual de-worming tablet to school children (grade 1-10) in 75 districts (Government schools)
- Create awareness about improving living conditions including sanitation and hygiene

#### **Control of Iodine Deficiency Disorders**

- Strengthen the implementation of Iodized Salt Act, 2055 for regulation and monitoring of iodized salt trade to ensure that all edible salt is iodized
- Increase the accessibility and market share of iodized packet salt with 'two-child' logo
- Create awareness about the importance of use of iodized salt for the control of IDD through social marketing campaign
- Celebrate month of February as an iodine month

#### **Control of Vitamin A Deficiency (VAD)**

- Bi-annual distribution of vitamin A capsule to children between 6 and 59 months through FCHVs
- Advocate for increased home production, consumption and preservation of Vitamin A rich foods at the community level
- Strengthen the usage of Vitamin A Treatment protocol
- Supplementation of Vitamin A capsule (200,000 IU) to postpartum mothers through healthcare facilities and community volunteers

## **2.2.2 Analysis of Achievement**

### **Growth Monitoring and Promotion**

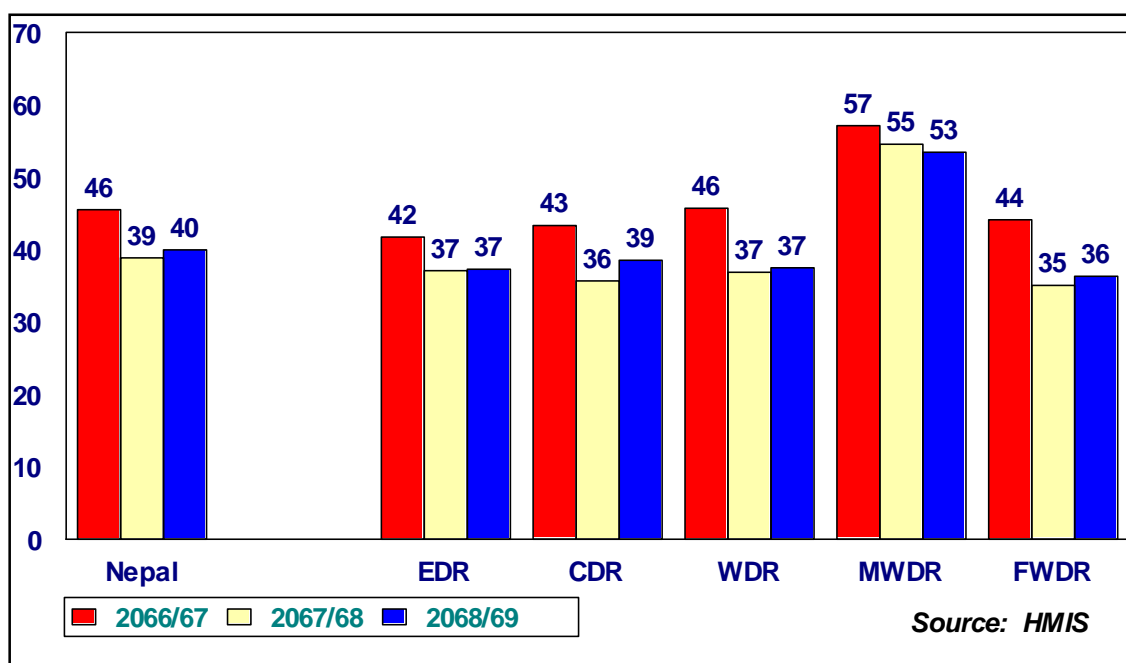
Growth monitoring of children less than 5 years of age has been one of the major strategy for prevention and control of protein energy malnutrition. It is recognized as an effective means of detecting growth faltering early, providing a critical opportunity for taking the preventive or curative actions needed. Based on the assumption that community based growth monitoring and promotion activities are relevant where there is low awareness of the causes of malnutrition and where families do not have the necessary information to help them protect and promote their children's health and nutritional status.

Currently, health workers of all public health facilities monitor the growth of children once a month by taking their weigh in 75 districts. Based on the WHO new growth standard, MoHP has revised and

developed a new growth monitoring card. Currently, the operational feasibility of the new growth card is being done in 4 districts viz. Dang, Jumla, Rukum and Udaypur.

Figure 2.2.1 shows the growth monitoring coverage of last three fiscal years. The national average for new growth monitoring coverage has increased by 1% in FY 2068/69 in comparison with the previous fiscal year.

**Figure 2.2.1: New growth monitoring coverage (new visits as % of <5 children), FY 2066/67 to 2068/69**



Total number of under-five and under three years children monitored for growth have been presented in table 2.2.1.

**Table 2.2.1: Indicators related to Growth Monitoring by region**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total no. of <3 year Children growth monitored	2066/67	255,221	412,467	257,906	224,436	133,347	1,283,377
	2067/68	227,047	324,387	194,531	215,979	107,024	1,068,968
	2068/69	230,919	339,896	192,956	203,952	108,403	1,076,126
Total No. of < 5 years Children growth monitored	2066/67	305,275	501,891	298,989	279,668	161,839	1,547,662
	2067/68	266,861	406,834	236,492	262,266	126,048	1,298,501
	2068/69	263,399	431,060	235,670	252,213	127,929	1,31,0271
Average no. of growth Monitoring visits by <5 per case	2066/67	2.96	2.09	2.36	2.00	3.27	2.41
	2067/68	3.31	2.19	2.57	2.03	4.28	2.61
	2068/69	3.44	2.24	2.51	2.04	4.23	2.61

The monthly trend in growth-monitoring visits for the past three fiscal years has been presented in figure 2.2.2.

Figure 2.2.2: Trends in total growth monitoring visits, FY 2066/67 to 2068/69

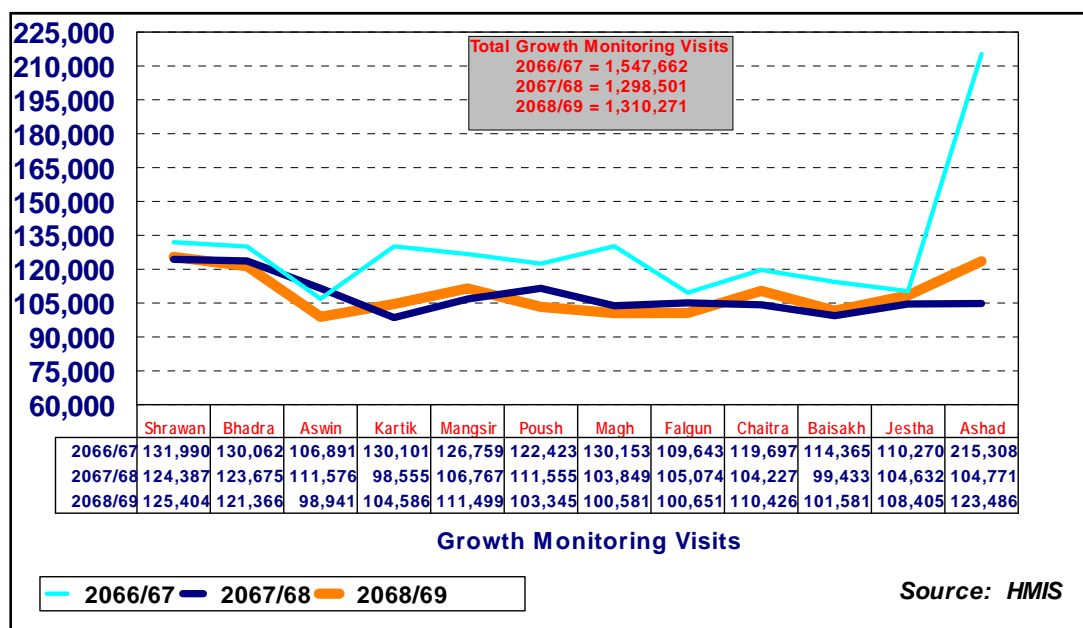
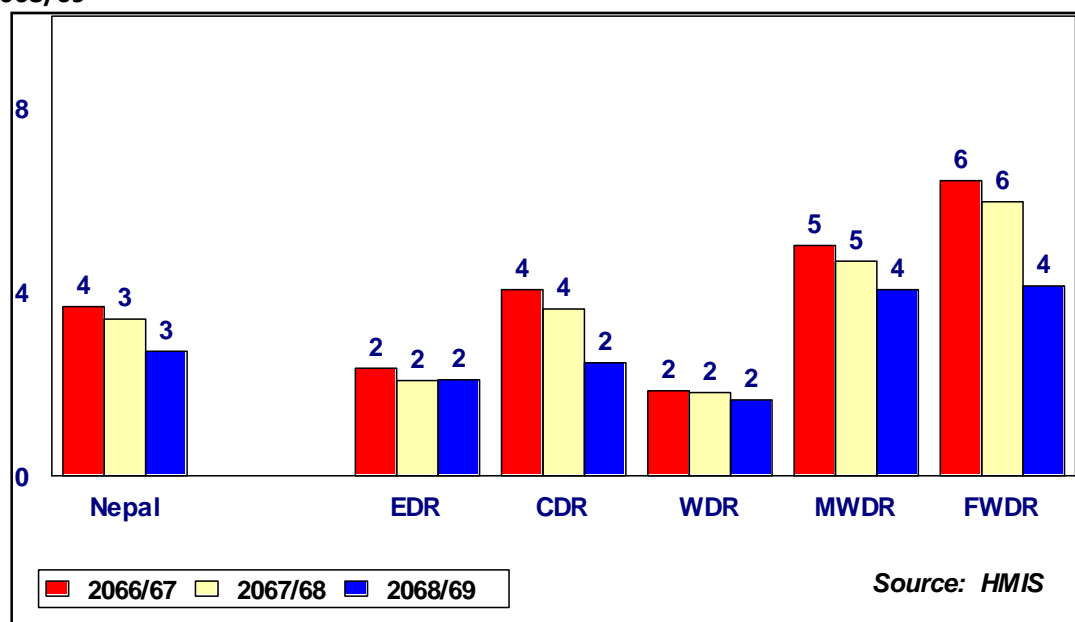


Figure 2.2.3 represents the nutritional status of children less than five years who were brought to health institutions for growth monitoring. The percentage of malnourished children has remained almost constant at 3% in FY 2068/69 as of previous fiscal year. Region wise analysis of the indicator shows that the percentage of malnourished children has remained constant in Eastern and Western Development regions. Likewise, the slight decrement has been noted in Central, Mid-western and Far-western development region.

Figure 2.2.3: Percentage of malnourished children among new growth monitored, FY 2066/67 to FY 2068/69



## Infant and Young Child Feeding

Improving infant and young child feeding (IYCF) is a key priority of MoHP. The protection, promotion and support of optimal feeding practices for infants and young children is listed as a specific objective of the protein energy malnutrition control program of the National Nutrition Policy and Strategy 2004 and a policy on IYCF has been developed.

A community based IYCF promotion package has been developed by UNICEF as part of a pilot to distribute multiple micronutrient powders (MNPs) together with IYCF counseling. The package, the core of which is a flip chart for the counseling of caregivers by health workers, in particular Female Community Health Volunteers (FCHVs), has been adopted by the government.

## Integrated Management of Acute Malnutrition

Ministry of Health and Population (MoHP), with the support from UNICEF, has been piloting the Community-based Management of Acute Malnutrition (CMAM) program since 2008 in five districts viz. Achham, Bardiya, Jajarkot, Kanchanpur and Mugu. The CMAM program aims to improve access to treatment for acute malnutrition among children 6-59 months of age through regular health services. Till date, CMAM's performance for treatment of children admitted with Severe Acute Malnutrition (SAM) has been of high quality meeting the SPHERE standards (table 2.2.2). In 2012, the programme will include infant and young child feeding; water, sanitation and hygiene (WASH); Early Childhood Development (ECD); health and social protection components making it an integrated program 'Integrated Management of Acute Malnutrition (IMAM)'. The integrated approach will be implemented in six additional districts namely Dhanusa, Jumla, Kapilvastu, Okhaldhunga, Saptari and Sarlahi in FY 2068/69.

**Table 2.2.2: CMAM performance in 5 piloted districts (as of June 2012)**

Indicators	Districts					Total
	Bardiya	Achham	Mugu	Kanchanpur	Jajarkot	
No. of total admission	3695	2357	1424	3629	1118	12223
Discharge	3363 (91)	2259 (95)	1321 (92)	3372 (92)	1000 (89)	11315 (92)
Recovered	2781 (82)	1980 (87)	1183 (83)	2753 (81)	894 (89)	9591 (84)
Death	8 (0.2)	15 (0.7)	24 (1.82)	2 (0.1)	7 (0.7)	56 (0.5)
Defaulter	453 (13.4)	126 (5)	78 (5.9)	500 (14.8)	98 (9.8)	1255 (11)
Under treatment	332 (8.9)	98 (4.1)	103 (7.2)	257 (7)	118 (10)	908 (7)
Relapse case	74 (2.6)	21 (1.1)	22 (1.9)	38 (1.4)	1 (0.1)	156 (1.6)
Not recovered	27 (0.8)	26 (1.1)	16 (1.2)	28 (0.8)	0	97 (0.9)
Other discharge	94 (3.4)	112 (5.6)	20 (1.7)	89 (3.2)	1 (0.1)	316 (3.3)
SAM as per baseline	2.8	3.6	7.1	3.3	2.4	-

Note: Figures in parenthesis are percentage

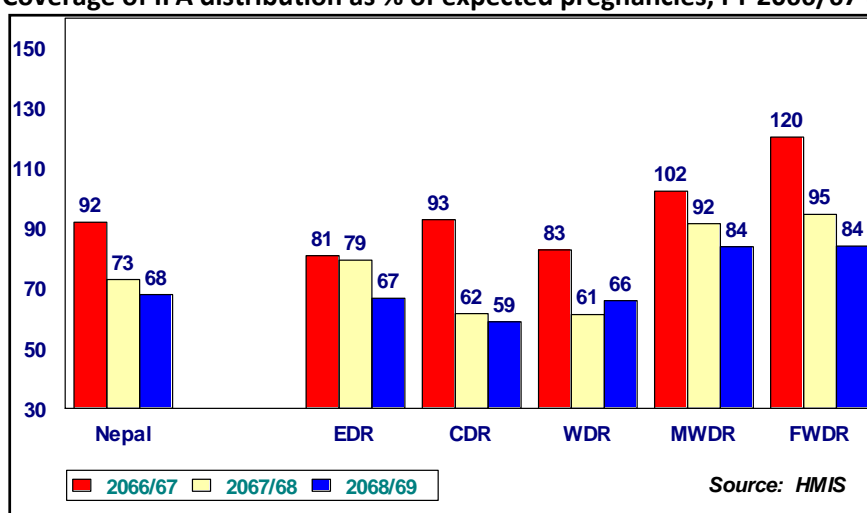
## Prevention and Control of Iron Deficiency Anemia

Since 1998, the MoHP has been providing iron foliate (IFA) at "no cost" to pregnant women and breastfeeding mothers through the network of government health system as part of antenatal care (ANC) and postnatal care (PNC) services. Pregnant women are provided with 180 tablets during antenatal visits and are advised to take one tablet a day. An additional 45 tablets are provided after

childbirth to cover the post natal period. In addition to providing IFA tablets, the policy recommends education on nutrition, health and hygiene with special focus on consuming adequate iron rich foods throughout pregnancy and the postpartum period; however, the implementation of this component is comparatively weak. The maternal IFA supplementation programme in Nepal faces several constraints including limited coverage, stock out of IFA tablets at the community level and low intake. The government, in collaboration with the Micronutrient Initiative and other programme stakeholders piloted the Maternal and Neonatal Micronutrient Programme (IMNMP) in 2003, an initiative that focused on intensifying programme activities in a few selected districts to identify potential strategies to improve the coverage and compliance. The IMNMP focused on intensive advocacy activities and building awareness through public media and training health workers and volunteers. Currently, the programme is implemented in 74 of the country’s 75 districts. The programme evaluation shows improved coverage and compliance as a result of community-based delivery involving FCHVs.

At the national level the coverage of IFA tablets has reduced by almost 5% in FY 2068/69 in comparison with the previous fiscal year (Figure 2.2.4, Table 2.2.3). The coverage has reduced slightly in all of the regions except in Western Development region in FY 2068/69 compared to the previous fiscal years.

**Figure 2.2.4: Coverage of IFA distribution as % of expected pregnancies, FY 2066/67 to 2068/69.**



**Table 2.2.3: Coverage of iron and folic acid tablets by region, FY 2066/67 to 2068/69**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
No. of pregnant women receiving Iron and folic acid tabs	2066/67	143,345	237,034	124,741	104,366	87,616	697,102
	2067/68	142,667	158,589	93,280	94,421	69,618	558,575
	2068/69	120,513	151,992	100,796	87,114	62,191	522,606
Percentage of expected pregnant women receiving Iron and folic acid tabs (%)	2066/67	80.88	92.89	82.83	102.4	120.41	92
	2067/68	79.39	61.57	61.28	91.57	94.65	72.91
	2068/69	66.69	58.85	65.91	83.88	84.09	67.90

### Multiple Micronutrient Powder (MMNP) Supplementation

Multiple Micronutrient Powder (MMNP) Supplementations started in 2009 when MoHP, with support from UNICEF, did a feasibility study in two districts - Parsa and Makwanpur. The overall

objective of the study was to reduce anemia and use the MNPs as a motivation to change infant, and especially, young child feeding practices i.e. complementary feeding practices. The outcome of the feasibility study was development of a local name for the MNP - “Baal Vita”, agreement on the target age group of 6-23 months and agreement that MNPs should be ‘packaged’ with IYCF counseling. MNP distribution program has currently been implemented in 6 districts of Nepal viz. Rupandehi, Parsa, Gorkha, Rasuwa, Palpa and Makwanpur. The plan is to scale up this program to all 75 districts by 2015.

Following a pilot study undertaken in 3 districts in 2009, WFP started distributing MNPs with food/cash for assets (F/CA) programmes in 17 districts in the Mid and Far west, considered as food insecure regions. MNP distribution started in January 2010. When caregivers enrolled in the F/CA activities go to distribution points to collect the cash/food, those with children under 5 are counseled on IYCF and offered MNPs.

### Control of Vitamin A Deficiency

The Nepal vitamin A supplementation (VAS) programme for young children is held up as a global success story. It was started in 1993 in 8 districts following a meeting in Kathmandu that considered three major research projects in Nepal in the late 1980s which all concluded that periodic dosing of children 6-60 months with high dose vitamin A resulted in significant reductions in child mortality. By the end of 1997 the programme was implemented in 32 districts and by 2002 it had expanded to all 75 districts. FCHVs distribute the capsules to young children twice a year through a ‘campaign-style’ activity. Mass distribution coverage of Vitamin A to 6-59 months children over the past three fiscal years has been demonstrated in Table 2.2.4.

**Table 2.2.4: Coverage of Vitamin A, FY 2066/67 to 2068/69**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Vitamin A distribution to Children 6-59 months	2066/67	664,405	909,237	503,409	310,079	259,537	2,646,667
	2067/68	756,699	1,022,240	581,388	479,285	251,202	3,090,814
	2068/69	727,575	988,311	511,396	455,775	297,008	2,980,065
Vitamin A distribution as percent of children 6-59 months (%)	2066/67	94	90	82	111	73	90.0
	2067/68	106	108	94	120	101	106
	2068/69	115	102	91	107	93	101

Source: CHD/DoHS

### Prevention and Control of Iodine Deficiency Disorder

A policy to fortify all edible salt with iodine in Nepal was adopted by MoHP in 1973. A social marketing campaign along with celebration of the month of February as “Iodine Month” continues to raise awareness about the government endorsed “two-child-logo” packaged salt for consumption of adequately iodized salt at household level.

### School Health and Nutrition

School aged children, especially in the government - run schools are also one of the vulnerable groups to suffer from PEM problems. To address this issue, a 'National School Health and Nutrition Strategy' has also been jointly developed and approved by MoHP and MoE in 2006. With the help of

JICA technical assistance all components of SHN strategy was implemented on pilot basis in 2 districts, Syangja and Sindhupalchowk from June 2008 to May 2012 aimed to replicate the results and experiences in other districts in a phase-wise manner.

The main goal of the SHNP is to develop physical, mental, emotional and educational status of the school children. The objectives of the program are as follows:

- Improve use of SHN services by school children
- Improve healthy school environment
- Improve health and nutrition behaviors and habits
- Improve and strengthen community support system and policy environment

The final evaluation of the SHN project was done in 2012. Based on the result, the school deworming from grade 1 to 10 was expanded throughout the country. The first aid kit and the training/orientation on some of the SHN components to health workers including Ministry of Education personnel were also initiated.

### **Nutrition in Emergencies**

Every year, many children and women in Nepal are suffering from different types of humanitarian crisis and major of them are; (i) natural disasters e.g. floods, landslides, earthquakes (ii) food insecurity due to recurrent droughts, (iii) Food, fuel, financial crisis (3Fs) and (iv) impact of last 10 years complex emergencies (armed conflict). To address the nutritional problem during such scenario, a nutrition cluster jointly led by Child Health Division and UNICEF has been established as part of the Inter Agency Standing Committee. Its aim is to “to prevent death from starvation and diseases and to reduce malnutrition by supporting and protecting breastfeeding, especially exclusive breastfeeding, Infant and Young Child Feeding (IYCF), therapeutic and supplementary feeding, providing essential micronutrients and feeding orphans”.

The nutrition cluster has prepared a District Contingency Plan (DCP) for 20 districts, a cluster operating guideline, TOR, 3W mapping and nutrition cluster contingency plan providing strategic framework to launch a nutrition response in humanitarian crisis in 2068/69. Based on this plan, a total of 43 pregnant and breastfeeding women, 319 under five children (girls-176/boys-143) were benefitted from the supplementary feeding support for two months which was provided through nutrition cluster coordination mechanism in Siraha during fire emergencies in August 2012. Among all affected children, two identified SAM children were provided therapeutic feeding support and rehabilitated in Rajbiraj Nutrition Rehabilitation Home of Saptari.

Similarly, a Comprehensive Multi-sectoral Disaster Risk Management Plan (DDRMP) are developed in four districts namely Kailali, Sunsari, Rukum and Mahottari including health and nutrition component jointly by Ministry of Home Affairs, UNICEF and UNDP. Additionally, the nutrition cluster, has maintained a roster of about 190 trained people on nutrition in emergencies including nutrition assessment and SMART survey, the updated roster will be uploaded in the cluster webpage. Nutrition cluster operating guideline, TOR, preparedness strategic framework, mapping and cluster contingency plan are in place, plus support has been provided on pre-positioning of emergency health and nutrition supplies for 3,000 SAM children and essential medical supplies for 50,000 populations for life saving nutrition humanitarian response for flood and earthquake scenarios.



### **New Projects and Other Activities on Nutrition**

Government of Nepal, with financial support of USAID, has started a five year integrated nutrition program called "Suaahara." It uses a comprehensive, household-based approach to improve access to, and consumption of, nutritious foods in areas with very poor nutrition indicators. Its main objective is to improve the nutritional status of pregnant and lactating women and children under two years of age directly addressing the vulnerable points of development which result in stunting. The program will focus on improving nutrition; maternal, newborn, and child health (MNCH) services; family planning services; water, sanitation and hygiene; and home-based gardening. Behavior change communications and continued support for micronutrient supplementation will be key components of *Suaahara's* strategy. The program will also work with health facilities to improve nutritional counseling and care services and connect families to reproductive health and MNCH services. One of the distinguishing elements of Suaahara is the integration of various sectors—including agriculture—to achieve improved nutrition for vulnerable populations. There are two sets of important interventions under Suaahara called "Essential Nutrition Actions" and "Essential Hygiene Actions" intended to deliver with a multi-sectoral approach.

UNICEF supported MoHP to review the multi-sector nutrition information system (MNIS) in line with MSNP monitoring and evaluation (M&E) framework. Based on the findings and recommendations, a national MNIS strategy was developed and a national nutrition survey guideline is being developed to establish a sentinel site surveillance system based on SMART survey methods, with links to existing food security early warning system.

### **NUTEC and its achievement**

In recognition of the need for concerted efforts to address under-nutrition within health sector, there was a need to establish a structure which could facilitate technical dialogue, involving government, international non-government organisations, professional bodies, academic institutions and nutrition experts, for an effective policy and program for nutrition in Nepal. On this background, a Nutrition Technical Committee under MoHP was established with the aim to provide advisory support and guidance on nutrition to key sectors and to monitor performance with respect to nutrition against the goals, objectives, activities/interventions and targets in sector strategies and policies”.

The roles and functions of NUTEC are as follows:

- Provide technical and public health managerial advice and support to key sectors, including health agriculture and livestock, on the design of national and sectoral policies, strategies, plans and activities to ensure that nutrition concerns are adequately addressed.
- Supervise the implementation of national and sectoral policies, strategies, plans and activities, with special attention to scaling up nutrition interventions and addressing gaps in service delivery.
- Advocate on behalf of nutrition with appropriate governmental line ministries and partners to increase awareness, understanding and prioritization of nutrition issues, to substantiate investments for specific nutrition interventions and ensure that nutrition concerns are kept high on the political agenda.

- Mobilize increased funding support for nutrition in Nepal by leveraging resources from sector MoF allocations, district budgets, development partners, international funding agencies, NGOs and other stakeholders.
- Facilitate sharing of information on nutrition, both within and between sectors, including data on nutrition, best practices, lessons learned, and research findings to; (i) keep stakeholders abreast of new research findings and their implications, (ii) determine how best to improve integration, convergence and effectiveness of nutrition interventions; (iii) identify system bottlenecks in need of redress and determine appropriate solutions; (iv) ensure rationalization and best use of financial and human resources.
- Identify knowledge gaps and research priorities to inform the design of more effective nutrition interventions.
- Facilitate the strengthening of monitoring on nutrition to ensure that nutrition indicators are integrated into national and sectoral monitoring, evaluation, and reporting frameworks and systems.
- Strengthen multi-sectoral coordination and promote partnerships for nutrition.
- Form sub-groups under the NUTEC to address specific issues on and as need arises basis.

After its establishment in 2011, the NUTEC has remained very functional in reviewing and developing strategies of different programs on nutrition. There are nine different working groups formed under the NUTEC to facilitate the technical dialogue of respective areas.

- Infant and Young Child Nutrition Working Group
- Maternal Nutrition Working Group
- MIYCN Communication Working Group
- Working Group on Iodine Deficiency Disorders Prevention and Control
- Working Group on Iron Deficiency Anaemia Prevention and Control
- Working Group for Growth Monitoring
- Multi-Sectoral Nutrition Plan Working Group
- Working Group on Emergency Nutrition
- Working Group on Flour Fortification

In last fiscal year, this committee has made important accomplishments in revising and developing strategies and guidelines for different programs on nutrition.

- A national strategy for infant and young child feeding is being developed
- Health sector strategy for addressing maternal under-nutrition is in the development process
- 2nd Plan of Action (2013-2017) for Iodine Deficiency Disorders was made final.
- National Plan of Action for the control of Anaemia is in process of development.
- Emergency Nutrition Contingency Plan for earthquake 2012 and for flood emergencies as well as therapeutic feeding guidelines in emergency were finalized
- A national guideline to address MAM is in development process.
- A food based dietary guidelines is under development.

### 2.2.3 Issues and Recommendations

**Table 2.2.5: Issues and Recommendations**

<b>Issues</b>	<b>Recommendation</b>	<b>Responsibility</b>
Slow scale up and low coverage of evidence based and cost effective interventions viz. IYCF, CMAM, and multiple Micronutrient powder supplementation etc.	Strengthen IYCF Linked with MNP, IMAM and implement health sector strategy for maternal under nutrition.  Implementation and scale up of new initiatives (SUN, REACH etc.) special focused on 1000 days initiative	MoHP, CHD and concerned Stakeholders
Maintaining and sustaining of progress attained in micronutrient deficiency disorders	Integrate micronutrient supplementation in community based maternal and child health programs	CHD, RHD, D(P)HOs
Implementation of nutrition activities through multi-sectoral approach including non-state partners	Scale up multispectral nutrition plan after evaluation of the pilot.	MoHP, CHD
Behaviour change and promotion of consumption of local indigenous food and diet diversity	Social mobilization and awareness campaigns at local level in line with stake holders Scale up school health and Nutrition program.	NHEICC, MoE, MoAD, CHD
Delay in establishment of Nutrition Centre	Initiate O&M survey and other necessary actions for establishment of the center	MoHP
Inadequate coordination on Nutrition activities	Strengthen coordination and communication with other stakeholders including Ayurvedic department.	DoHS, CHD
Low coverage of Iodized salt	Strengthen social marketing in collaboration with concerned stakeholders	CHD

Note: Please refer to Annex

#### **2.2.4 Future plans and activities**

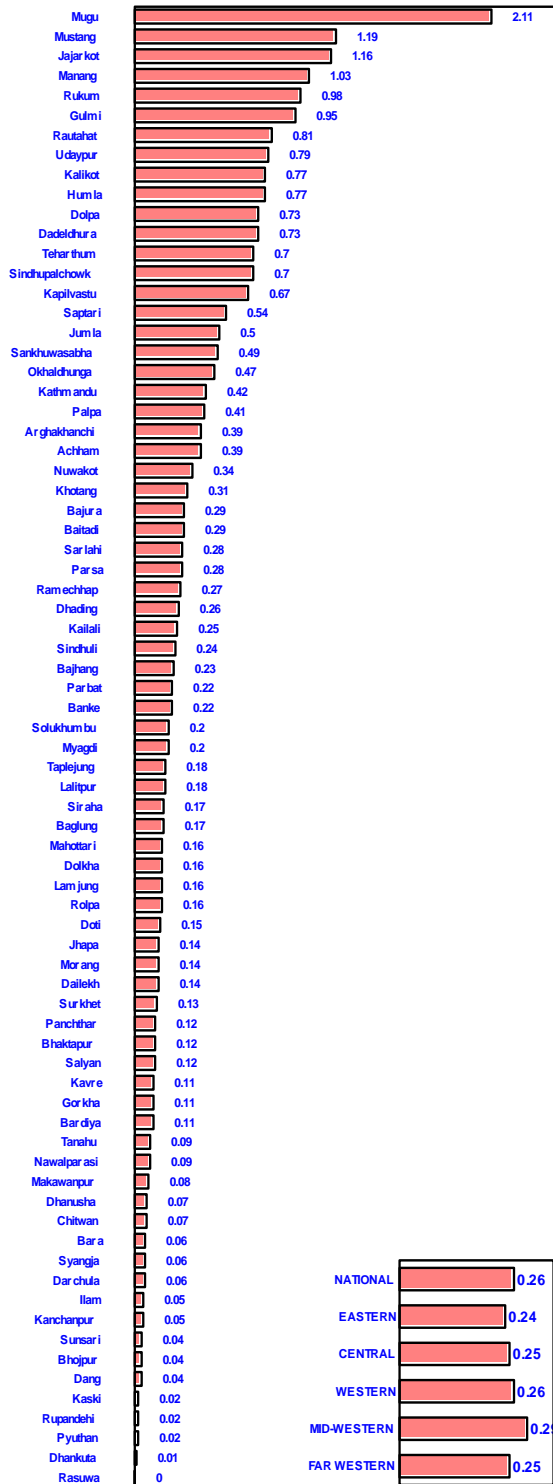
For the achievement of nutrition program specific goals and objectives following plans and activities have been planned for future

- Scaling-up of Infant and Young Child Feeding and Nutrition Promotion
- Scaling-up Integrated Management of Acute Malnutrition
- Scaling-up of Multiple Micronutrient Powders supplementation to children age 6-24 months linked with IYCF promotion.
- Maintain and sustain achievements related to Micronutrient Deficiency Control particularly for Iron Deficiency Anemia, Iodine Deficiency Disorders and Vitamin A Deficiency.
- Carry-out Organization and Management Survey and establish National Nutrition Center.
- Continuous dialogues with Donors and External development Partners for leveraging sustainable and predictable financial support.
- Continuously carry out nutrition education and BCC to improve food habits, dietary practice and care of children and pregnant women including promotion of WASH activities
- Implement identified cost effective and evidence based interventions to improve maternal under nutrition.
- Keep Multi-sectoral alignment with the sectoral ministries and agencies
- Research and development in the field of nutrition.
- Educational and research linkage with national and international academic institutions.

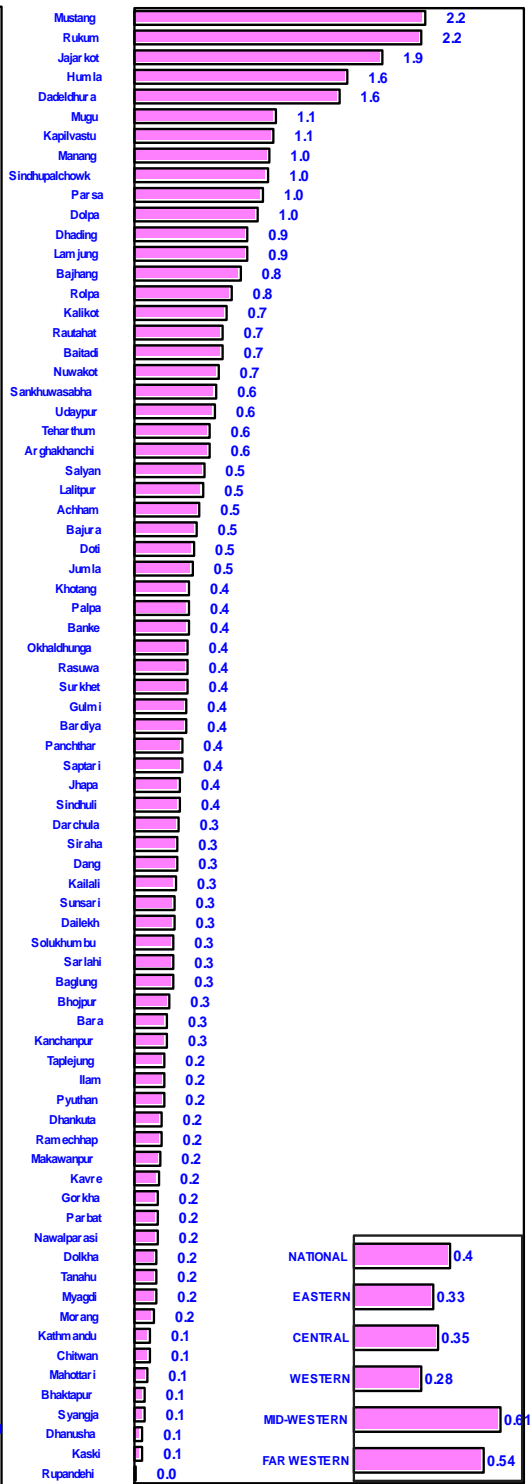
# CB-IMCI

Fiscal Year 2068/69 (2011/2012)

Proportion of Severe Dehydration  
Among Total New Cases



Proportion of Severe Pneumonia  
among New Cases



Source: HMIS

## **2.3 COMMUNITY BASED INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESSES (CB-IMCI) AND NEWBORN CARE PROGRAM (CB-NCP)**

### **2.3.1 Background**

Community Based Integrated Management of Childhood Illness (CB-IMCI) Program is an integrated package of child-survival interventions and addresses major childhood killer diseases like Pneumonia, Diarrhoea, Malaria, Measles and Malnutrition in 2 months to 5 years children in a holistic way. CB-IMCI also includes management of infection, Jaundice, Hypothermia and counselling on breastfeeding for young infants less than 2 months of age. With the implementation of this package children are diagnosed early and treated appropriately for major childhood illnesses at the health facility and community level. At the community level, FCHVs are the main vehicle of service delivery and also play key role to increase community participation.

In 1997, the IMCI program was initiated in Mahottari district as a pilot. Based on the recommendations it was decided to include a community component, enabling mobilization of community health workers (VHWs and MCHWs) and FCHVs to provide CDD, ARI, Nutrition and Immunization services to the community. As a result the Community based ARI and CDD (CBAC) program was merged into IMCI in 1999 and is now called the Community Based Integrated Management of Childhood Illness (CB-IMCI). CB-IMCI Program has covered 75 districts by the end of fiscal year 2066/67 (2009/2010). Newborn component was added to CB-IMCI in 2004.

#### **Vision**

- Contribute to survival, healthy growth and development of under five years children of Nepal.
- Achieve MDG 4 by 2015.

#### **Goal**

To reduce morbidity and mortality among children under-five due to pneumonia, diarrhoea, malnutrition, measles and malaria.

#### **Targets**

- To reduce neonatal mortality from the current rate of 33/1,000 live births to 17/1,000 live births by 2015.
- To reduce neonatal morbidity among infants less than 2 months of age.

#### **Objectives**

- Reduce frequency and severity of illness and death related to ARI, Diarrhoea, Malnutrition, Measles and Malaria.
- Contribute to improved growth and development.

#### **Strategy**

The following strategies have been adopted by CB-IMCI program:

### 1. Improving knowledge and case management skills of health service providers

CB-IMCI aims to improve the skills of health service providers through

- Training to all health service providers on CB-IMCI including zinc treatment for diarrhea;
- Regular integrated review and refresher trainings to health service providers;
- Inclusion of CB-IMCI component in the curriculum of pre-service medical and paramedical schools;
- Technical support visits should include visits from the central and regional level to districts, DHO to all HFs; HFs to FCHVs; and
- Capacity building training to the CB-IMCI focal persons of the districts.

### 2. Improving overall health systems

- Carry out CB-IMCI Program maintenance activities as per the recommendations made by IMCI technical working group and global context.
- Improve logistic supply.
- Regularize mother's group meeting.
- Strengthen reporting system at all levels.
- Strengthen supervision and monitoring.

### 3. Improving family and community practices

- Disseminating key behavioural message through FCHVs to families and communities using relevant IEC materials.
- Reaching the disadvantaged and hard-to-reach communities through reactivated mother's group meeting.
- Dissemination of key family practice messages through interpersonal communication.

## 2.3.2 Major Activities

Major activities carried out in FY 2068/69 include the following:

- CB-NCP expansion in new 9 districts [(Taplejung, Bara, Lamjung, Humla and Kanchanpur (GoN), Saptari and Bajhang (UNICEF), Rautahat (Plan Nepal), Baitadi (Save the Children)].
- CB-IMCI Training for HWs (5 Regions for 100 persons)
- Capacity Building training of CB-IMCI Focal Person (EDR, CDR and WDR)
- Development of Referral IMNCI Protocol for Medical Doctors and Nurses.
- Pre-service CB-IMCI/NCP orientation to Medical, Para-Medical, Public Health and Nursing Institutes.
- Integrated MCH Micro-planning in low performance districts 2 districts (Okhaldhunga and Baitadi).
- Review IMCI Protocol.
- Development of IMCI Multi-year Plan and Strategies.

### 1. Management of sick children below 2 months of age

Health service providers assess each case and classify into following categories (one or more) according to IMCI protocol.

- Possible Severe Bacterial Infection (PSBI)
- Local Bacterial Infection (LBI)
- Jaundice
- Hypothermia
- Low weight or feeding problem

Based on the classification they manage the cases following the IMCI protocol. They also mention whether the case was treated by Cotrimoxazole and/or Gentamycine (for infection) and refer to the appropriate facility if needed.

## **Management of sick children 2 months to 5 years of age**

### **Management of Acute Respiratory Infection (ARI) {PRIVATE }**

The Ministry of Health and Population (MoHP) recognises Acute Respiratory Infection (ARI) as one of the major public health problems in Nepal among children under 5 years of age. CB-IMCI Program follows WHO guidelines (IMCI Protocol) on standard ARI case management. Accordingly, all cases of ARI assessed by health workers should be classified into one of the following categories:

- Severe pneumonia or Very severe disease
- Pneumonia
- No pneumonia (cough and cold)

The program recognises the important role of mothers and other caretakers in identifying the difference between the need for home care and for referral to health facilities. Therefore, all health workers should be able to communicate the necessary information effectively to mothers and caretakers.

### **Management of Diarrhoeal Diseases**

Diarrhoea is still a leading killer disease in Nepal. CB-IMCI program intensely focuses on management of diarrhoeal diseases among the under-five year's children. Standard diarrhoea case management with Oral Rehydration Therapy (ORT, continued feeding and Zinc tablet have been providing in the health institutions. All health facilities and community health volunteers have been serving as the primary health service providers in the treatment of diarrhoea with low osmolar oral Rehydration Solutions (ORS) and Zinc supplementation.

The targets of important components of the CB-IMCI program were achieved by 100 percent in three consecutive fiscal years (Annex 1.1).

### **Zinc Supplementation**

Zinc tablet in the treatment of diarrhea was introduced in FY 2062/63 as a pilot program in two districts of Nepal (Rautahat and Parbat). The scaling up of the program was completed in 2066/67.

## **2.3.3 Analysis of Achèvement**

Since FY 2064/65, CB-IMCI Program data (as received from Health Facility, VHW/MCHW and FCHV) has been incorporated into HMIS. Therefore, from FY 2064/65 onwards, the national level data is a total of HF level plus VHW/MCHW plus FCHV level data.

### **1. Management of below 2 months cases**

The status of the under-two months cases registered at health facilities in FY 2068/69 has been presented in Table 2.3.1.

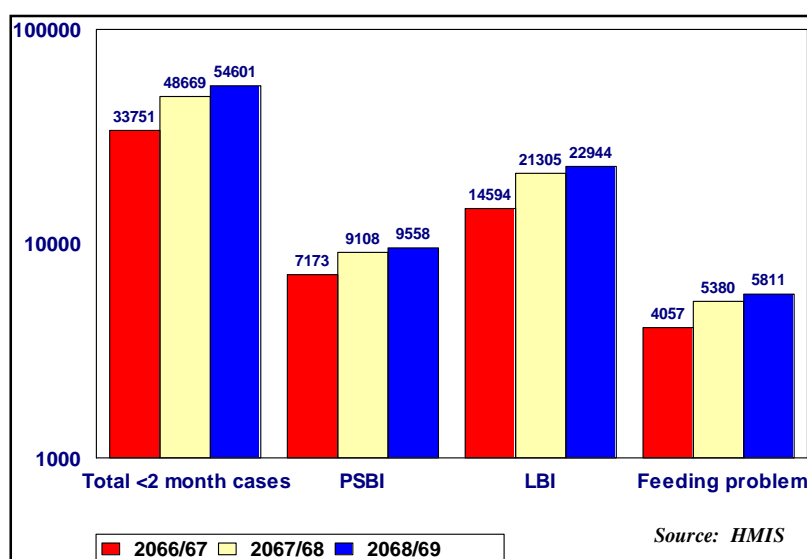


**Table 2.3.1: Classification and treatment of <2 months cases, by region from 2066/67 to 2068/69**

Indicators and classification	Year	EDR	CDR	WDR	MWDR	FWDR	National	%
Total Cases <2 Months	2066/67	9,222	5,967	4,520	10,128	3,914	33,751	
	2067/68	12,295	8,905	6,997	12,446	8,026	48,669	
	2068/69	14,124	10,018	8,336	13,129	8,994	54,601	
Possible Severe Bacterial Infection (PSBI)	2066/67	1,952	1,168	653	2,458	942	7,173	21.3
	2067/68	2,093	1,449	625	3,511	1,430	9,108	18.7
	2068/69	2491	1396	819	3359	1493	9,558	17.5
Local Bacterial Infection (LBI)	2066/67	4,308	2,749	1,833	3,976	1,728	14,594	43.2
	2067/68	5,284	5,588	2,826	4,344	3,263	21,305	43.8
	2068/69	6,853	4,632	3,199	4,545	3,715	22,944	42.0
Jaundice	2067/68	263	425	433	383	168	1,672	3.4
	2068/69	473	511	654	495	210	2,343	4.3
Hypothermia	2067/68	36	116	97	144	67	460	0.9
	2068/69	65	76	114	158	28	441	0.8
Low Weight or Feeding Problem	2066/67	823	787	603	1,135	709	4,057	12.0
	2067/68	1,255	805	1,103	1,315	902	5,380	11.0
	2068/69	1776	753	1,200	1,237	845	5,811	10.6
<b>Treatment and referral</b>								
Treatment by Cotrimoxazole	2067/68	4,650	5,628	4,558	4,772	2,895	22,503	46.2
	2068/69	6,307	3,664	2,226	5,859	3,902	21,958	40.2
Treatment by Gentamycin	2067/68	2,091	1,042	460	3,071	1,336	8,000	16.4
	2068/69	2596	1658	728	3607	1827	10,416	19.1
Refer	2066/67	515	521	358	537	307	2,238	7
	2067/68	500	570	412	537	348	2,367	5
	2068/69	922	555	435	450	320	2,682	5
Dead Cases	2067/68	76	103	23	55	205	462	0.95
	2068/69	40	25	133	36	27	261	0.5

Source: HMIS

In FY 2068/69, a total of 54,601 infant of under 2 months were treated at health facilities which is quite high in comparison to FY 2066/67 and 2067/68 (Table 2.3.2, Figure 2.3.1). In the same way, there has also been an increment in the number of cases treated for PSBI, LBI, low weight and feeding problems. This could be the result of raised awareness in treatment seeking behaviour of mothers/caretakers.

**Figure: 2.3.1: Under 2 month's cases treated at health facilities**

## 2. Diarrhoea

IMCI program has imparted positive impact on the skills and knowledge of health workers, enabling them for better identification, classification and treatment of diarrhoeal diseases. Health workers classify diarrhoeal cases as 'No Dehydration', 'Some Dehydration', 'Severe Dehydration' and Dysentery according to the treatment protocol of CB-IMCI.

The reported number of total new diarrhoeal cases (health facility plus community) and classification of dehydration by region over the last three years have been presented in Table 2.3.3. In FY 2068/69 a total of 1,809,205 diarrhoeal cases were reported. The reported number of new diarrhoeal cases seemed to have increased in FY 2068/69 compared to FY 2067/68 but still low from that of FY 2066/67. At the national level cases of 'Severe Dehydration' has decreased slightly to 0.2 percent in FY 2068/69 from 0.4 of FY 2066/67 and 2067/68. Severe dehydration has decreased considerably in all the regions except WDR.

**Table 2.3.2: Classification of dehydration, by region, FY 2066/67 to 2068/69**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total diarrhoeal cases (HF+Community)	2066/67	471,649	521,056	314,752	420,309	307,126	2,034,892
	2067/68	361,064	452,232	271,658	368,463	282,427	1,735,844
	2068/69	389,539	466,977	288,568	354,300	309,821	1,809,205
No Dehydration	2066/67	395,268 (83.8)	447,408 (85.9)	285,545 (90.7)	375,670 (89.4)	279,637 (91.0)	1,783,528 (88)
	2067/68	316,290 (87.6)	407,684 (90.1)	248,172 (91.4)	331,069 (89.9)	255,806 (90.6)	1,559,021 (90)
	2068/69	325,205 (83.5)	404,467 (86.6)	258,190 (89.5)	308,712 (87.1)	270,100 (87.2)	1,566,674 (86.6)
Some Dehydration	2066/67	75,165 (15.9)	71,615 (13.7)	28,527 (9.1)	42,443 (10.1)	25,951 (8.4)	243,701 (12.0)
	2067/68	31,366 (8.7)	28,824 (6.4)	13,504 (5.0)	20,103 (5.5)	12,874 (4.6)	106,671 (6)
	2068/69	32,853 (8.4)	25,896 (5.5)	13,271 (4.6)	18,163 (5.1)	13,027 (4.2)	103,210 (5.7)
Severe Dehydration	2066/67	1,216 (0.3)	2,033 (0.4)	680 (0.2)	2,196 (0.5)	1,538 (0.5)	7,663 (0.4)
	2067/68	2,403 (0.7)	1,202 (0.3)	601 (0.2)	1,335 (0.4)	708 (0.3)	6,249 (0.4)
	2068/69	903 (0.2)	1,100 (0.2)	736 (0.3)	976 (0.3)	743 (0.2)	4,458 (0.2)
Dysentery	2068/69	14,244 (3.7)	21,791 (4.7)	10,575 (3.7)	15,998 (4.5)	14,954 (4.8)	77,562 (4.3)

Note: \*Cases reported from health facility and community; Numbers in parenthesis are percentages. Source: HMS

The reported diarrhoeal deaths and diarrhoeal incidence has slightly increased in FY 2068/69 compared to FY 2067/68 but the Case Fatality Rate remained constant compared to 2067/68 and still lower than that of FY 2066/67 (Table 2.3.3).

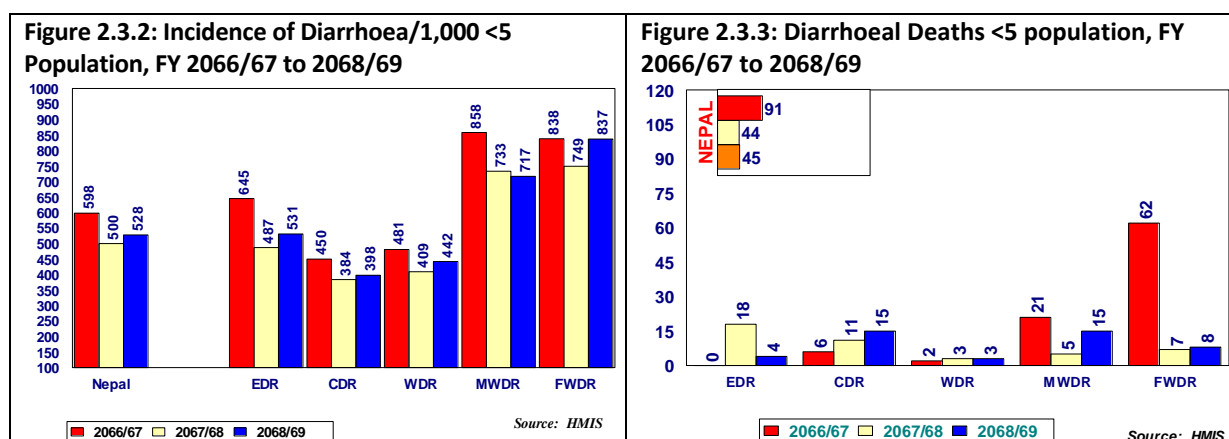
**Table 2.3.3: Diarrhoea among children under 5 years of age, by region, FY 2066/67 to 2068/69**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total <5 Population	2068/69	706,114	1,119,080	628,550	471,851	352,212	3,277,807
Incidence of diarrhoea /1,000 <5 yrs. Popn.	2066/67	645	450	481	858	838	598
	2067/68	487	384	409	733	749	500
	2068/69	531	398	442	717	837	528
Diarrhoeal Deaths	2066/67	0	6	2	21	62	91
	2067/68	18	11	3	5	7	44
	2068/69	4	15	3	15	8	45
Case Fatality Rate/ 1,000 <5 yrs. Popn.	2066/67	-	0.01	0.01	0.05	0.20	0.04
	2067/68	0.05	0.02	0.01	0.01	0.02	0.03
	2068/69	0.01	0.03	0.01	0.04	0.03	0.03

Note: \*Case reported from health facility and community; Source: HMIS

The national incidence of diarrhoea per 1,000 under-five years' children has increased slightly from 500/1000 in FY 2067/68 to 528/1,000 in 2068/69, but remained low compared to FY 2066/67 (Figure 2.3.2). Likewise, the incidence of diarrhoea has increased in all regions except MWDR. In MWDR it has decreased substantially in FY 2068/69. The highest incidence of diarrhoea occurred at FWDR (837/1,000 under five children) amongst all the regions.

In FY 2068/69 the diarrhoeal deaths increased by 2 percent from that of number 44 of FY 2067/68. However, it is still 51 percent lower than that of FY 2066/67. At the regional level, the highest diarrhoeal deaths were reported from CDR and MWDR (15) followed by FWDR (8), EDR (4), and WDR (3) in FY 2068/69.



Out of the total 1,809,205 diarrhoeal cases, 27.5 percent were treated at HFs, 17.5 percent were treated by VHW/MCHWs and 55.3 percent were treated by FCHVs (Table 2.3.4). This implies that 72.5 percent of diarrhoeal cases who seek care in the public sector were treated at community level, either by FCHVs or by VHW/MCHW.

The case fatality rate/ 1000 remained constant at 0.03 in FY 2068/69 compared to FY 2067/68, which is slightly lower than that of FY 2066/67 (Table 2.3.3).

**Table 2.3.4: Treatment of diarrhea at different levels in FY 2068/69**

National	1,809,205	100.0
HF Level	497,806	27.5
VHW/MCHW	311,693	17.2
FCHV	999,706	55.3
Total Community (VHW/MCHW + FCHV)	1,311,399	72.5

The treatment of diarrhoea by IV fluid and ORS and Zinc have been presented in Table 2.3.5. In FY 2068/69 the proportion of diarrhoeal cases treated by ORS and Zinc has increased in comparison to FY 2066/67 and 2067/68 and on the other hand percentage of case treated by IV Fluid has also increased slightly to 0.5% in FY 2068/69 from 0.3 of FY 066/67 and 2067/68.

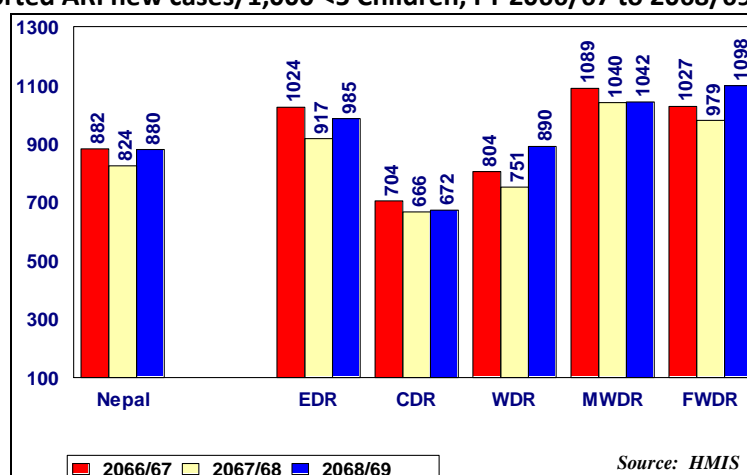
**Table 2.3.5: Treatment of diarrhoeal diseases, by region, FY2066/67 to 2068/69**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total Cases (HF + Community Level)	2066/67	471,649	521,056	314,752	420,309	307,126	2,034,892
	2067/68	361,064	452,232	271,658	368,463	282,427	1,735,844
	2068/69	389,539	466,977	288,568	354,300	309,821	1,809,205
Zinc + ORS	2066/67	169,937 (36.0)	251,246 (48.2)	180,415 (57.3)	241,993 (57.6)	127,007 (41.4)	970,598 (47.7)
	2067/68	316,983 (87.8)	412,109 (91.1)	233,766 (86.1)	321,214 (87.2)	240,799 (85.3)	1,524,871 (87.8)
	2068/69	342,328 (87.9)	422,182 (90.4)	245,860 (85.2)	316,586 (89.4)	267,088 (86.2)	1,594,044 (88.9)
Treated with IV Fluid	2066/67	977 (0.2)	2,084 (0.4)	826 (0.3)	1,951 (0.5)	812 (0.3)	6,650 (0.3)
	2067/68	1,071 (0.3)	1,741 (0.4)	1,011 (0.4)	1,424 (0.4)	780 (0.3)	6,027 (0.3)
	2068/69	1,260 (0.3)	3,467 (0.7)	822 (0.3)	2,215 (0.6)	1,352 (0.4)	9,116 (0.5)

Note: Numbers in parenthesis are percentages. Source: HMIS

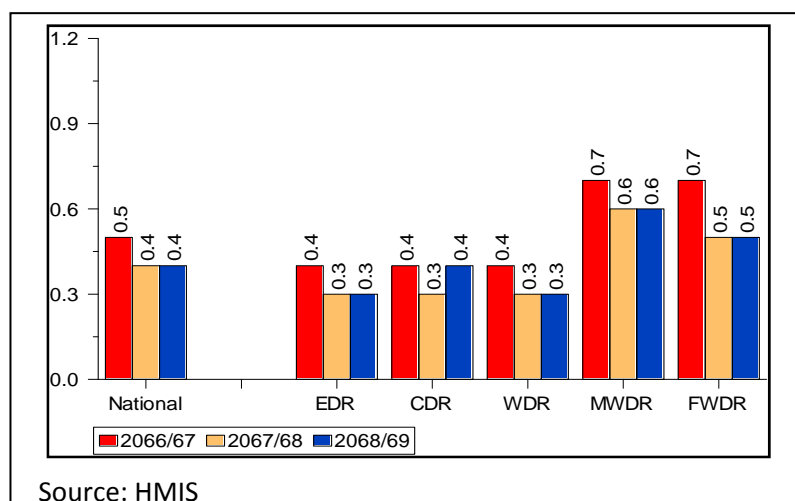
### 3. Acute Respiratory Infection

In FY 2068/69 a total of 2,845,281 ARI cases have been reported (Table 2.3.6). The reported number of New ARI cases seemed to have increased in FY 2068/69 compared to FY 2067/68 but still low from that of FY 2066/67.

**Figure 2.3.4: Reported ARI new cases/1,000 <5 Children, FY 2066/67 to 2068/69**

At the national level, reported ARI cases per 1,000 under-five population has slightly increased (880) in FY 2086/69. It was 824 in FY 2067/68. However, it is still below in comparison to FY 2066/67 (Figure 2.3.4). The highest rate of new ARI cases per 1,000 has been observed in FWDR (1,098) followed by MWDR (1,042), EDR (985) and WDR (890) and CDR (672). The escalation of ARI new cases per 1,000 children is mainly due to the data incorporated for the treatment provided by the FCHVs at the community level and completion of scaling up of CB-IMCI program.

**Figure 2.3.5: Percentage of Severe Pneumonia among new ARI Cases (<5 yrs. children), FY 2066/67-2068/69**



Percentage of severe pneumonia remained constant in FY 2068/69 at National level (0.4%) as well as in almost all regions except CDR (Table 2.3.6 and Figure 2.3.5). In CDR it was 0.4 percent in FY 2068/69 which was 0.3 percent in FY 2067/68. Severe pneumonia cases at the national as well as at the regional level for two fiscal years remained low compared to FY 2066/67. It is mainly due to the early detection and proper management of ARI cases by health workers, VHW/MCHWs and FCHVs in CB-IMCI districts.

**Table 2.3.6: Total ARI new cases with classification, by region, FY 2067/68 to 2068/69**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Target population <5 years	2066/67	731,488	1,158,425	654,071	489,732	366,692	3,400,408
	2067/68	719,297	1,140,023	641,434	480,671	359,500	3,340,925
	2068/69	706,114	1,119,080	628,550	471,851	352,212	3,277,807
Total New Cases (HF + Community)	2066/67	749,067	815,446	525,808	533,072	376,491	2,999,884
	2067/68	659,596	758,721	481,892	499,986	352,071	2,752,266
	2068/69	681,661	743,734	554,500	483,864	381,522	2,845,281
% of No Pneumonia	2066/67	68.7	72.8	73.5	68.3	73.0	71.1
	2067/68	66.3	70.0	73.6	67.3	71.4	69.4
	2068/69	70.1	73.6	66.1	67.9	75.1	70.5
% of Pneumonia	2066/67	31.3	27.2	26.5	31.7	27.0	28.9
	2067/68	32.3	29.0	26.9	32.5	27.5	29.9
	2068/69	30.5	26.5	21.1	31.6	25.3	27.1
% of Severe Pneumonia	2066/67	0.4	0.4	0.4	0.7	0.7	0.5
	2067/68	0.3	0.3	0.3	0.6	0.5	0.4
	2068/69	0.3	0.4	0.3	0.6	0.5	0.4

Note: \*Cases reported from health facility and community; Source: HMIS

In FY 2068/69, out of the total 2,845,281 New ARI cases registered, 782,315 cases were treated for pneumonia (Pneumonia + Severe Pneumonia), which accounted for 27.5% at National level (Figure 2.3.6). Percentage of pneumonia (Pneumonia + Severe Pneumonia) has declined in FY 2068/69 compared to FY 2066/67 and 2067/68. On the other hand, the incidence of pneumonia (Pneumonia + Severe Pneumonia) is also declining because of the early detection and management of ARI cases (Table 2.3.7). The incidence of pneumonia/1,000 <5 children is 239 in FY 2068/69 which was 255 in FY 2066/67 and 246 in FY 2067/68. The reported total ARI related deaths decreased to 201 in FY 2068/69. The ARI case fatality rate among under-five children has also decreased to 0.07 in FY 2068/69 in comparison with the FY 2066/67 and 2067/68. At the regional level, ARI case fatality rate has decreased in all of the regions.

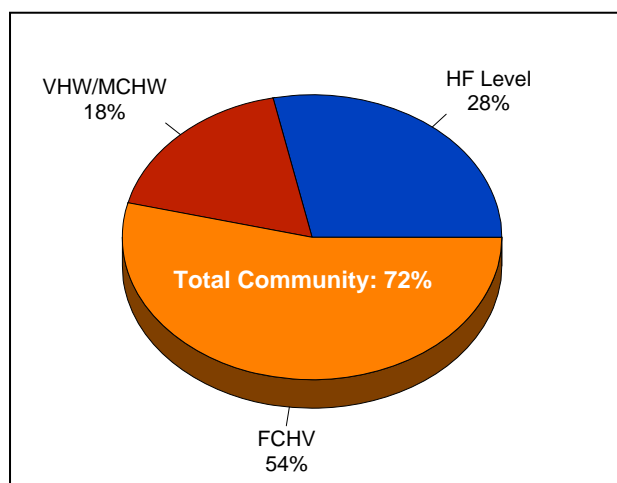
**Table 2.3.7: Incidence of pneumonia, deaths, mortality and case fatality rate, by region FY 2067/68 to 2068/69**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total Pneumonia Cases	2065/66	234,095	222,116	139,108	168,772	101,585	865,676
	2066/67	213,120	220,013	129,644	162,690	96,885	822,352
	2067/68	209,948	199,549	118,316	156,017	98,485	782,315
% of Pneumonia (Pneumonia + Severe Pneumonia)	2065/66	31.3	27.2	26.5	31.7	27.0	28.9
	2066/67	32.3	29.0	26.9	32.5	27.5	29.9
	2067/68	30.8	26.8	21.3	32.2	25.8	27.5
Incidence of Pneumonia / 1,000 <5 children	2065/66	320	192	213	345	277	255
	2066/67	296	193	202	338	269	246
	2067/68	297	178	188	331	280	239
ARI Reported Deaths	2065/66	164	25	19	83	28	319
	2066/67	136	90	35	153	232	646
	2067/68	66	24	15	53	43	201
Reported ARI Case Fatality Rate	2065/66	0.22	0.03	0.04	0.16	0.07	0.11
	2066/67	0.21	0.12	0.07	0.31	0.66	0.23
	2067/68	0.10	0.03	0.03	0.11	0.11	0.07

Source: HMIS

Table 2.3.6 shows that a total of 2,845,281 New ARI Cases among ‘under-five children’ were treated in FY 2068/69. Out of the total ARI cases 802,528 (28.00%) were treated at HFs, 513,313 (18.00%) cases were treated by VHW/MCHWs and 1,529,440 (54.00%) were treated by FCHVs (Figure 2.3.8). In total 72 percent of ARI cases are treated at community level.

**Figure 2.3.6: ARI Cases Treated at Different Level**



**Table 2.3.8: Total ARI cases treated at different level in FY 2068/69**

Total ARI New Cases		%
National	2,845,281	100.0
HF Level	802,528	28.0
VHW/MCHW	513,313	18.0
FCHV	1,529,440	54.0
Total Community	2,042,753	72.0

Source: HMIS

Treatment of ARI at home has decreased to 58.7 percent in FY 2068/69 in comparison with FY 2066/67 and 2067/68. Similarly, treatment by cotrimoxazole has also decreased to 32.3 percent in FY 2068/69, whereas treatment of ARI by other antibiotics has increased from 7.3% in FY 2067/68 to 9% in FY 2068/69 (Table 2.3.9).

**Table 2.3.9: Treatment of ARI cases, 2066/67–2068/69**

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total New Cases (HF + Community Level)	2066/67	749,067	815,446	525,808	533,072	376,491	2,999,884
	2067/68	659,596	758,721	481,892	499,986	352,071	2,752,266
	2068/69	681,661	743,734	554,500	483,864	381,522	2,845,281
Home Treatment	2066/67	511,778	582,159	382,779	362,135	273,429	2,112,280
		(68.3)	(71.4)	(72.8)	(67.9)	(72.6)	(70.4)
	2067/68	367,322	467,138	307,287	271,479	210,695	1,623,921
		(55.7)	(61.6)	(63.8)	(54.3)	(59.8)	(59.0)
	2068/69	374,540	438,856	376,689	250,457	230,013	1,670,555
		(54.9)	(59.0)	(67.9)	(51.8)	(60.3)	(58.7)
Antibiotic (Cotrim)	2066/67	221,247	212,693	131,878	162,862	97,291	825,971
		(29.5)	(26.1)	(25.1)	(30.6)	(25.8)	(27.5)
	2067/68	242,659	243,997	142,418	184,433	113,415	926,922
		(36.8)	(32.2)	(29.6)	(36.9)	(32.2)	(33.7)
	2068/69	246,137	238,284	136,293	182,874	115,850	919,438
		(36.1)	(32.0)	(24.6)	(37.8)	(30.4)	(32.3)
Other Antibiotics	2066/67	16,857	15,977	11,580	8,468	4,516	57,398
		(2.3)	(2.0)	(2.2)	(1.6)	(1.2)	(1.9)
	2067/68	49,605	47,586	32,187	44,074	27,961	201,413
		(7.5)	(6.3)	(6.7)	(8.8)	(7.9)	(7.3)
	2068/69	60,984	66,594	41,518	50,533	35,659	255,288
		(8.9)	(9.0)	(7.5)	(10.4)	(9.3)	(9.0)

Note: Numbers in parenthesis are percentages. Source: HMIS

#### 4. Community Based Newborn Care Program (CB-NCP)

Nepal Family Health Survey 1996, Nepal Demographic and Health Surveys and WHO estimations over the time have shown that neonatal mortality in Nepal has been decreasing at a slower rate than infant and child mortality. Nepal Demographic and Health Survey 2011 have shown 33 neonatal deaths per 1,000 live births, which accounts for 61 percent of under 5 deaths. The major causes of neonatal death in Nepal are infection, birth asphyxia, preterm birth, and hypothermia. Given Nepal's existing health service indicators, it becomes clear that strategies to address neonatal mortality in Nepal must consider the fact that 63 percent of births take place at home (NDHS, 2011).

Therefore, as an urgent step to reduce neonatal mortality, Ministry of Health and Population (MoHP) initiated a new program called 'Community Based New born Care Program (CB-NCP) based on the National Neonatal Health Strategy 2004. The program was implemented as a pilot program in 10 districts in FY 2065/66. The program further expanded in 15 districts in FY 2067/68 and 9 districts in FY 2068/69. It has been planned to scale up CB-NCP in all the 75 districts by 2015.

The goal of CB-NCP is to reduce neonatal mortality (NMR) through the sustained high coverage (use) of effective community based interventions. The specific objectives of CB-NCP include:

- To prevent and manage Newborn infection;
- To prevent and manage hypothermia and low birth weight newborns;
- To manage post-delivery asphyxia; and
- To develop an effective system of referral of the sick newborns.

**Table No: 2.3.10: Coverage of districts with CB-NCP, FY 2065/66 – 2068/69**

Phase	Year	Districts	Total
Piloting	2065/66	Dhankuta, Morang, Sunsari, Parsa, Chitwan, Kavre, Palpa, Dang, Bardiya and Doti	10 districts
Scaling up	2067/68	Sankhuwasabha, Tehrathum, Sarlahi, Myagdi, Kailali, Saptari, Bajhang, Banke, Nawalparasi, Kapilvastu, Arghakhanchi, Mahottari, Dailekh, Jumla, Salyan.	15 districts
	2068/69	Lamjung, Humla, Kanchanpur, Taplejung, Bara, Baglung, Dolpa, Rautahat and Baitadi	9 districts

### Data Recording and Reporting System in CB-NCP Districts

The CB-NCP uses seven different types of recording and reporting tools at community and health facility level. Out of them, five are for recording and two are for reporting. The recording tools include CB-NCP 1<sup>1</sup>, 2<sup>2</sup> and 3<sup>3</sup> for FCHVs, CB-NCP 4<sup>4</sup> for VHW/MCHWs and CB-NCP 5<sup>5</sup> for HFs. CB-NCP 6<sup>6</sup> and 7<sup>7</sup> are compilation tools that are used by HFs for reporting all services provided by FCHVs, VHWs/MCHWs and HFs. In addition, CB-NCP also uses CB-IMCI OPD register (HMIS 16A) for reporting of some of the indicators in CB-NCP 7.

### Analysis of Achievement

**Table 2.3.11: Districts covered by CB-NCP and expected pregnancy (Target for Newborn/Delivery Captured)**

Indicators	EDR	CDR	WDR	MWDR	FWDR	Total
	Districts					
Districts	Dhankuta, Taplejung, Tehrathum, Sankhuwasabha, Sunsari, Saptari, and Morang,	Chitwan, Kavre, Parsa, Mahottari, Sarlahi, Bara and Rautahat	Palpa, Myagdi, Nawalparasi, Kapilvastu, Arghakhanchi, Lamjung and Baglung	Bardiya, Dang, Banke, Salyan, Dailekh, Jumla, Humla, Dolpa, and Jajarkot	Doti, Baitadi, Kailali and Bajhang	34
Expected Pregnancy	89,070	99,292	53,996	47,597	34,063	324,018

Source: CB-NCP Secretariat/ CHD, DoHS

Region wise coverage of districts by CB-NCP and total number of expected pregnancies for the respected districts have been shown in Table 2.3.11.

<sup>1</sup> FCHV Register for the registration of pregnant women.

<sup>2</sup> FCHV Register to record the services provided by FCHVs to pregnant women and new-born up to 28 days after birth.

<sup>3</sup> FCHV Register to record the treatment and referral provided to sick babies 0-59 days by FCHVs.

<sup>4</sup> VHW/MCHW Register to record the treatment provided to sick babies 0-59 days.

<sup>5</sup> HF Register to record the services provided to sick babies 0-59 days.

<sup>6</sup> Compilation form used at HF. It reports the services provided by FCHVs, VHWs, MCHWs and Health workers.

<sup>7</sup> Compilation form used at HF. It reports services provided by VHWs, MCHWs and Health Workers to sick babies aged 0-59 days and also includes the infection cases referred by FCHVs.



**Table: 2.3.12: Total delivery and newborn captured by FCHVs, FY 2068/69**

Indicators	EDR	CDR	WDR	MWDR	FWDR	Total
Expected Pregnancy	89,070	99,292	53,996	60,863	34,063	337284
Number of newborn captured by FCHV out of expected pregnancy (Closed Forms)	35,575	20,077	22,449	20,950	7,945	106,996
Percentage	39.9	20.2	41.6	34.4	23.3	31.7
Number of delivery in HF	25,839	12,963	10,007	13,293	5,185	67,287
Percentage	72.6	64.6	44.6	63.5	65.3	62.9
Number of delivery at Home	9,736	7,114	12,442	6,599	2,760	38,651
Percentage	27.4	35.4	55.4	31.5	34.7	36.1
Number of alive after 28 days	35,236	19,502	22,147	20,614	7,885	105,384
Percentage	99.0	97.1	98.7	98.4	99.2	98.5
Number of death	308	254	238	303	56	1,159
Percentage	0.9	1.3	1.1	1.4	0.7	1.1
Number of Unknown	31	321	64	33	4	453
Percentage	0.1	1.6	0.3	0.2	0.1	0.4

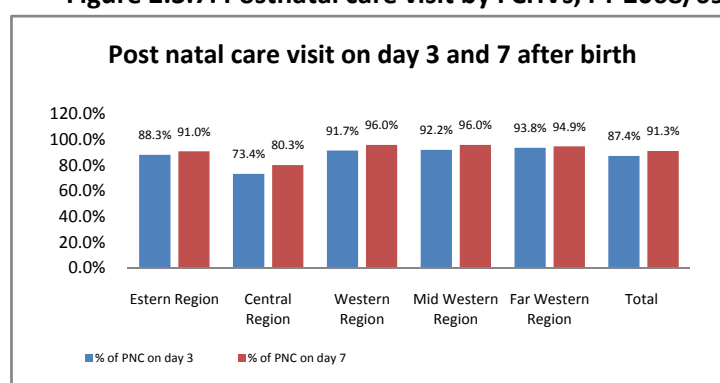
Source: CB-NCP Secretariat/CHD, DoHS

As portrayed from the Table 2.3.12, out of the total 324,018 expected pregnancies, 106,996 delivery cases (31.7%) were captured by FCHVs as of closed forms. Out of those captured, 67,287 (62.9%) deliveries were in the health facilities and 38,651 (36.1%) were delivered at home. The total number of alive newborns captured by FCHVs after 28 days was 105,384 (98.5%). On the other hand, 1,159 (1.1%) newborns were dead and 453 (0.4%) newborns could not be followed up to 28 days by FCHVs.

## Postnatal care visits (Follow up visits)

Findings of different researches have proved that most of the newborns die within first week of delivery. Therefore, recognizing the importance of special attention to newborns during this period, CB-NCP has emphasized on post natal care visit (follow up visit) on day 3 and 7 after delivery for newborns.

In CB-NCP program implemented districts, post natal care visit by FCHVs on third day was 934,84 (88.3 percent) and on the seventh day it was 976,77 (92.3 percent) out of total alive newborns in FY 2068/69 (Figure 2.3.7).

**Figure 2.3.7: Postnatal care visit by FCHVs, FY 2068/69**

**Table 2.3.13: Number of alive newborn, number of PSBI and referred cases, FY 2068/69**

Indicators	EDR	CDR	WDR	MWDR	FWDR	Total
Number of newborn alive after 28 days	35,236	19,502	22,147	20,614	7,885	105,384
Number of infected newborn identified and referred by FCHV	566	432	189	890	18	2,095
Percentage	1.6	2.2	0.9	4.3	0.2	2.0
Number of sick newborn received cotrim among referral by FCHV	524	298	124	840	17	1,803
Percentage	92.6	69.0	65.6	94.4	94.4	86.1
Number of PSBI cases identified by VHW/MCHW/HW	2,198	514	263	1,950	211	5,136
Number of babies with PSBI received 1st dose of Gentamycin	1,849	331	133	1,901	205	4,419
Percentage	84	64	51	97	97	86

Source: CB-NCP Secretariat/CHD, DoHS

In FY 2068/69, FCHVs have identified 2,095 (2.0 percent) infected cases and referred them to VHW/MCHWs and Health Facilities (Figure 2.3.13). Out of the total number of infected cases identified by FCHVs, only 86.1% (1803) received cotrim tablets. Remaining 14% did not receive any medication. Out of the total PSBI cases referred to VHW/MCHW and Health Facilities, only 86% (4419) cases received Gentamycin injections.

### 2.3.4: Issues and Recommendations

Issues	Recommendation	Responsibility
Sustaining the quality of IMCI.	Finalization and Implementation of revised package of IMCI	DoHS, CHD,RHD,D(P)HOs
No separate post of CB-IMCI Focal Person in district, like EPI Supervisor.	Separate post for IMCI focal person should be created	MoHP, DoHS
The coverage of Zinc for Treatment of Diarrhoea is still low.	Adequate and timely supply of zinc and close supervision/ monitoring and intensify social marketing	LMD,CHD,D(P)HOs
IMCI Protocol not used properly at all levels.	Close monitoring and supervision at all levels	CHD,RHD,D(P)HOs
Stagnant Neonatal Mortality Rate.	Strengthen facility based New Born Care at all levels and explore other interventions	MoHP, DoHS
Inadequate resources to sustain and provide quality IMCI.	Endorsement of IMCI/NCP multi year plan and resource allocation based on the plan	MoHP, DoHS
Inadequate and poor quality supply of IMCI/NCP equipment and drugs.	Adequate budget allocation and timely procurement and distribution of equipment and drugs	LMD,CHD,D(P)HOs
Untrained health workers on IMCI	Provision of training for newly recruited staffs on basic IMCI	CHD
Slow scale up (implementation) of CB-NCP due to lengthy bidding process.	Simplify procurement process	LMD, CHD
Complicated CB-NCP recording/reporting tools.	Tools should be reviewed and revised based on evaluation findings	CHD

Note: Please refer to Annex

**2.3.5 Major activities proposed for FY 2069/70**

- Expansion of CB-NCP in new 12 districts (Achham, Rukum, Gorkha, Dhanusa, Syangja, Okhaldhunga, Jajarkot, Rupandehi, Pyuthan, Udaypur, Bajura and Dadeldhura).
- Capacity building training to CB-IMCI Focal Persons.
- Intensive monitoring of CB-IMCI/NCP program districts (in low performing districts).
- Capacity Building Training for New-born Care for health service providers (30 persons).
- Orientation training on CB-IMCI, CB-NCP and Zinc, CHX to the HWs of private sectors (CB-NCP Program Districts).
- Development and finalization of Referral IMNCI Protocol for Medical Doctors and HWs.
- CB-IMCI and CB-NCP training to newly recruited medical doctors and HWs.
- Revised IMCI Protocol Training – 2 Districts.
- Construction/renovation of newborn care facilities in 37 sites (SDF).
- Revision of CB-IMCI and NCP IEC materials with printing, editing etc.
- Celebration of World Pneumonia Day (12 November).
- Advocacy and marketing of CHX, Zinc, Cotrim, ORS.
- Logistics and equipment supplies to 160 sites by SAARC Development Fund (SDF).

# Family Health Programme

3.1	Family Planning .....	55
3.2	Safe Motherhood and Newborn Health .....	66
3.3	Female Community Health Voluntary Programme.....	77
3.4	Primary Health Care Outreach .....	81
3.5	Demography and Reproductive Health Research .....	84
3.6	Adolescent Sexual and Reproductive Health .....	88

Table 3.1.1: Progress against NHSP2 logical framework indicators related to family health

LF Code	Indicator	Achieved (2012)	Source/ Year	NHSP 2 Target	
				2013	2015
G1	Total fertility rate (per woman)	2.6	NDHS 2011	2.8	2.5
G2	Adolescent fertility rate (women aged 15-19 years, per 1,000 women in that age group)	81	NDHS 2011	85	70
G6	Maternal mortality ratio (per 100,000 live births)	170	WHO 2010	192	134
P1	% of neonates breast fed within one hour of birth	51	HHS 2012	55	60
P2	% of infants exclusively breast fed for 0 – 5 months	69	NDHS 2011	48	60
P7	Contraceptive prevalence rate - modern methods (%)	43	NDHS 2011	52	67
P8	% of pregnant women attending at least four ANC visits	48	NDHS 2011	65	80
P9	% of pregnant women receiving IFA tablets or syrup during their last pregnancy	91	NDHS 2011	86	90
P10	% of deliveries conducted by a skilled birth attendant	46	HMIS 2012	40	60
P11	% of women who had three postnatal check-ups as per protocol	31	HMIS 2012	43	50
P12	% of women of reproductive age (15-49) with complications from safe abortions (surgical and medical)	1.2	HMIS 2012	<2	<2
P14	Obstetric direct case fatality rate (%)			<1	<1
OC1.5	Met need for emergency obstetric care (%)	19	HMIS 2012	43	49
OC1.6	% of deliveries by caesarean section (CS rate)	5.3	HMIS 2012	4.3	4.5
OC2.3	Unmet need for family planning (%)	27	NDHS 2012	20	18
OC2.4	% of institutional deliveries	43	HMIS 2012	35	40
OC2.5	% of women who received contraceptives after safe abortion (surgical and medical)	33	HMIS 2012	60	60
OP1.1	% of women utilizing FCHV fund (among women of reproductive age)	0.5	HMIS 2012	8	20
OP1.2	Number of health facilities providing adolescent-friendly health services	542	FHD, 2012	500	1000
OP3.2	% of district hospitals that have at least 1 MDGP or Obstetrician/ Gynaecologist; 5 nurses (SBA); and 1 Anaesthetist or Anaesthetist Assistant		STS 2012	60	80
OP3.3	Number of production and deployment of: SBA	3637	FHD, 2012	6000	7000
	MDGP			28	56
	Anaesthetists			22	44
	Anaesthetists assistant			31	62
OP3.4	Number of Female Community Health Volunteers (FCHVs)	48,897	HMIS 2012	52,000	53,514
OP4.5	% of districts with at least one public facility providing all CEONC signal functions	62	FHD 2012	68	76
OP4.6	% of PHCCs providing all BEONC signal functions	39	FHD 2012	50	70
OP4.7	% of health posts with birthing centre	98	FHD 2012	≥80	≥80
OP4.8	% of safe abortion (surgical and medical) sites with post abortion long acting family planning services	90	FHD 2012	≥90	≥90
OP4.9	% of health posts with at least five family planning methods	8	STS 2012	35	60
OP5.1	% of women of reproductive age (15 – 49) aware of safe abortion sites	35	STS 2012	35	50
OP5.2	% of women of reproductive age (15 – 49) who know at least three pregnancy related danger signs	57	HHS 2012	40	50
OP5.3	% of women of reproductive age (15 – 49) giving birth in the last two years aware of at least three danger signs of new born	49	HHS 2012	40	50

# FAMILY HEALTH

## 3.1 FAMILY PLANNING

### 3.1.1 Background

The main aim of the National Family Planning Program is to expand and sustain adequate quality family planning services to communities through the health service network such as hospitals, primary health care (PHC) centers, health posts (HP), sub health posts (SHP), primary health care outreach clinics (PHC/ORC) and mobile voluntary surgical contraception (VSC) camps. The policy also aims to encourage public private partnership. Female Community Health Volunteers (FCHVs) are mobilized to promote condom distribution and re-supply of oral pills throughout the country. Awareness on FP is to be increased through various IEC/BCC interventions as well as by active involvement of FCHVs and Mothers Groups as envisaged by the revised National Strategy for FCHV Program.

In policy background, family planning service delivery system is designed to provide method specific counseling and then contraceptive methods/services based on informed choice of the users. This programme aims to reduce fertility, enhance maternal and neonatal health, child survival, and contribute to bringing about a balance in population growth and socio-economic development, resulting in an environment that will help the Nepalese people improve their quality of life.

#### Objectives

Within the context of reproductive health, the main objectives of the Family Planning Program are to assist individuals and couples to:

- space and/or limit their children;
- protect from STI and other sexual diseases;
- prevent unwanted pregnancies;
- improve their overall reproductive health.

#### Strategies

In order to achieve the CPR and the TFR targets mentioned above (Table 3.1.1), a total of 2,580,000 couples were expected to use modern contraception by the end of the FY 2068/69. Recognizing the importance of spacing of births, the Family Planning Programme is placing greater emphasis on promoting temporary FP methods with particular stress on long acting temporary methods like IUCD and implant. More specifically, the long-term objective is to reduce the share of permanent sterilization in overall use of family planning methods. However, the emphasis on VSC services is continued to address the unmet needs of those people who desire to limit births.

To achieve the above stated goal and objectives, the Family Planning Programme adopted following strategies:

- Institutionalize policy/operational guidelines and clinical protocols to ensure maximum coverage and quality of family planning services and coordinate FP program and activities through RH coordination committee/networks including Family Planning Sub-Committee. Review the policy through national RH steering committee meetings periodically.
- Strengthen link between family planning and essential health care services. Establish family planning as a regular service in hospital and strengthen institutionalization of Family Planning Service Centers (IFPSC). Increase accessibility and availability of FP services through a combination of static, outreach and referral services.
- Expand regular year-round and mobile VSC outreach services, and expand IUCD services to PHC and HP, with special emphasis on thorough counseling and follow-up services.
- Provide FP skill building training to service providers.
- Improve the quality of care in accordance with the national medical standards for contraceptive services, with special attention on counseling for informed choice of FP method, infection prevention and management of side effects and complications.
- Establish post-partum FP services in health institutions which have significantly high delivery caseload. Integrate family planning services with post abortion care and safe abortion care. Provide non-clinical FP methods (condoms, pills, and injectables) through static and outreach clinics.
- Provide re-canalization services in selected hospitals.
- Identify national requirements of contraceptives and then ensure adequate procurement and supply to each health institution. Increase free access to condom in all health institutions and re-supply of pills and distribution of condom through FCHVs in the community.
- Ensure effective monitoring and supervision of FP programs. Promote wider use of Health Management Information Systems (HMIS) and health system research for better planning and program management.

### **3.1.2 Major Activities**

In order to provide the reproductive population with options to limit or space births, various modern contraceptive methods are made available under the national health services delivery system. Family planning services are provided through different health institutions at various levels through static clinics as well as mobile camps. Since long ago, Family Planning Programme is complemented and supplemented by various CBOs, NGOs, INGOs and other partner organizations. The major activities implemented during FY 2068/69 are described briefly in following sections.

#### **1. Voluntary Surgical Contraception (VSC)**

VSC services include vasectomy, minilap and postpartum tubal ligation. At least one type of VSC service was made available in all districts except Solukhumbu through hospitals and/or mobile outreach services. VSC mobile outreach program was conducted in 74 districts in FY 2068/69.

#### **2. Spacing Methods**

Spacing methods such as Depo-Provera (injectable), oral pills and condoms were made available up to the community level. Distribution of oral pills and condoms were done through FCHVs at the ward level. In addition, implant and IUCD services were offered through selected HPs, PHCCs and hospitals. Few SHPs also offered IUCD services. Spacing methods were also made available through private practitioners, contraceptive retail sales outlets, pharmacies, and other NGOs and INGOs.

### 3. FP Counseling

Counseling is an important activity for assisting clients to make an informed choice for appropriate family planning method. Family planning counseling services were provided to potential clients by front line FP providers. Accordingly, comprehensive family planning counseling trainings were provided for various categories of family planning service providers.

### 4. Referral

Referral is one of the main approaches for increasing access to family planning services. At community level, condoms and pills were re-supplied, through a network of FCHVs, while requests for other family planning services were referred to the PHC Outreach clinics, SHPs or to mobile camps. Health facilities referred the clients to other appropriate health institutions or mobile camps for family those FP services which were not available in their own institution.

### 3.1.3 Achievement

#### 1. Current Users

Achievement of FP current users at national level was very good in 2068/069. Overall achievement was 95 percent as compared to expected number of users. However, there was slight variation in achievement across the development regions. The achievement in FWDR and MWDR was more than 100 percent whereas there was little shortfall in other regions (Table 3.1.2). Relatively high achievement in these two regions was contributed by technical support provided by external development partners and better management of mobile camps in time.

**Table 3.1.2: Family Planning Current Users (all modern methods) by Region in FY 2068/69**

Region	Unit	Projected	Achievement*	Percent Achieved
EDR	Couples	666,500	618,312	92.8
CDR	Couples	1,043,200	960,196	92.0
WDR	Couples	397,300	359,294	90.4
MWDR	Couples	290,000	304,854	105.0
FWDR	Couples	183,000	203,596	111.2
National	Couples	2,580,000	2,446,286	94.8

Note: \* Unadjusted data

Source: HMIS & FHD, DoHS

Comparative achievement in current users compared to projected number is almost static during last three program years. Overall achievement was 93 percent in 2066/67 which increased marginally to 95 percent in 2068/69 (Table 3.1.3).

**Table 3.1.3: Trend in family planning current users (all modern methods)**

Region	Years					
	2066/67		2067/68		2068/69	
	Projected	Achievement	Projected	Achievement	Projected	Achievement
EDR	660,000	592,388	666,500	610,919	666,500	618,312
CDR	1,012,200	942,522	1,043,200	982,244	1,043,200	960,196
WDR	391,800	340,547	397,300	349,642	397,300	359,294
MWDR	277,000	296,556	290,000	295,845	290,000	304,854
FWDR	180,000	181,483	183,000	186,837	183,000	203,596
National	2,521,000	2,353,496 (93%)	2,580,000	2,425,487 (94%)	2,580,000	2,446,286 (95%)

Note: \*Unadjusted data; Source: HMIS



## 2. New Acceptors in Voluntary Surgical Contraception (VSC)

Overall achievement in new VSC services compared to projected number was at moderate level in 2068/2069. Overall national achievement was 73 percent. However, there was slight variation in achievement across the regions. Achievements in MWDR and FWDR were close to national average, CDR was below the national average, while WDR and EDR were above the national average (Table 3.1.4).

**Table 3.1.4: VSC users by region in FY 2068/69**

Region	Expected Cases	Minilap	Vasectomy	Total	Percent
EDR	16,350	13,179	1,075	14,254	87.2
CDR	32,400	15,144	5,604	20,748	64.0
WDR	7,750	3,978	2,320	6,298	81.3
MWDR	8,000	2,697	3,161	5,858	73.2
FWDR	5,500	2,406	1,621	4,027	73.2
<b>NATIONAL</b>	<b>70,000</b>	<b>37,404</b>	<b>13,781</b>	<b>51,185</b>	<b>73.1</b>

Source: HMIS/MD & FHD, DoHS

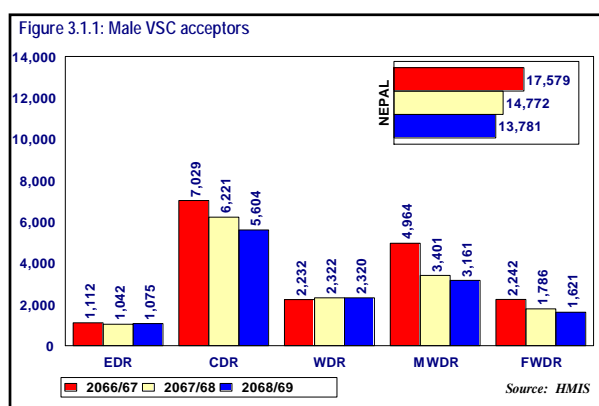
Slight change in recruitment of new VSC users by procedure has been noticed during the review period 2066/2067 to 2068/2069. The share of minilap was 75 percent in 2066/2067 which decreased marginally to 73 percent in 2068/2069 (Table 3.1.5). Contrarily, the share of vasectomy among new VSC users increased marginally from 25 percent in 2066/67 to 27 percent in 2068/2069. Such type of shift, though minimal in nature, is an outcome of program focus of vasectomy compared to minilap, and availability of trained medical doctor to perform vasectomy compared to minilap in the country.

**Table 3.1.5: Trend of VSC new acceptors by procedure and region**

Procedure	Year	Region					National total VSC	Procedure as a % of total VSC
		EDR	CDR	WDR	MWDR	FWDR		
Minilap	2066/67	15,087	27,102	4,822	2,972	3,225	53,208	75.2
	2067/68	14,505	23,451	3,888	3,032	2,952	47,828	76.4
	2068/69	13,179	15,144	3,978	2,697	2,406	37,404	73.1
Vasectomy	2066/67	1,112	7,029	2,232	4,964	2,242	17,579	24.8
	2067/68	1,042	6,221	2,322	3,401	1,786	14,772	23.6
	2068/69	1,075	5,604	2,320	3,161	1,621	13,781	26.9
Total new VSC acceptors	2066/67	16,199	34,131	7,054	7,936	5,467	70,787	-
	2067/68	15,547	29,672	6,210	6,433	4,738	62,600	-
	2068/69	14,254	20,748	6,298	5,858	4,027	51,185	-

Source: HMIS/MD, DoHS

Overall recruitment of new VSC users in absolute number is declining gradually during the review period at national level. There were a total of 70,787 new VSC users in 2066/2067 which declined substantially to 51,185 users in 2068/2069 (Table 3.1.5). Decline in total new VSC users was noticed in all regions though such decline in CDR was high compared to other regions (Table 3.1.5). Such a decline in total new VSC users was contributed by a policy shift from permanent to temporary methods and setting a relatively low number of VSC target to the districts and allocation of resources accordingly.



New VSC acceptors by procedure i.e., male and female declined in 2068/69 compared to the previous years. However, there is slight variation within the development regions. There was slight increase in male new VSC acceptors in EDR while it was constant to decline in other regions (Figure 3.1.1). Contrarily, new female VSC acceptors declined in all regions during the review period (Figure 3.1.2).

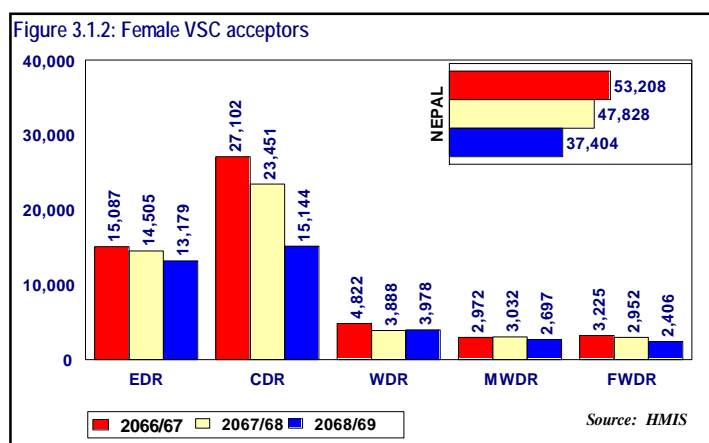
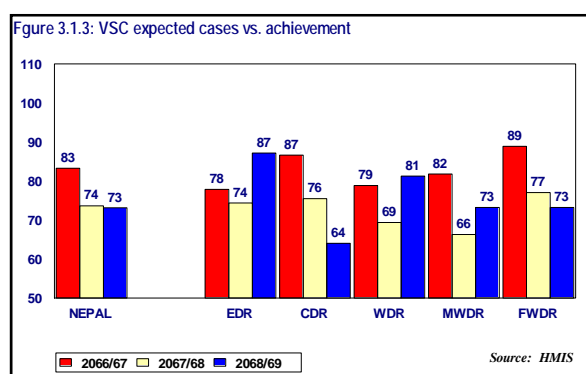


Table 3.1.6: Trend in VSC new acceptors by region

	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Expected Cases	2066/67	20,800	39,400	8,950	9,700	6,150	85,000
	2067/68	20,900	39,300	8,950	9,700	6,150	85,000
	2068/69	16,350	32,400	7,750	8,000	5,500	70,000
Achieved	2066/67	16,199	34,131	7,054	7,936	5,467	70,787
	2067/68	15,547	29,672	6,210	6,433	4,738	62,600
	2068/69	14,254	20,784	6,298	5,858	4,027	51,185

Source: HMIS

Overall performance in total VSC users compared to projected number was not up to the expected level. National achievement is in declining trend. The achievement in 2066/2067 was 83 percent, which declined to 73 percent in 2068/2069 (Figure 3.1.3). Slight variation is noticed within the regions. There was slight increase in EDR, MWDR and WDR while there was slight decrease in other CDR and FWDR.



### 3. New Acceptors of Spacing Methods

New acceptors are defined as the number of MWRA who adopted any one FP method for the first time in their life. Recruitment of new acceptors in spacing methods is found almost constant during the review period. A total of 594,774 new users were recruited in 2066/67 which declined marginally to 580,033 in 2067/68 and again increased to 597,877 in 2068/069 (Table 3.1.7). The public health system is seen static to recruit new users in spacing methods over the years. Districts reported that the high spousal separation among MWRA due to out-migration of their male counterpart in search of employment opportunity has made low demand for temporary FP methods particularly in rural areas of Nepal.

Out of five temporary FP methods supplied by public health system, there has been a decline in use of oral pills and injectable whereas users of IUCD, Implant and condom has increased impressively during the review period as envisaged by the policy (Table 3.1.7).

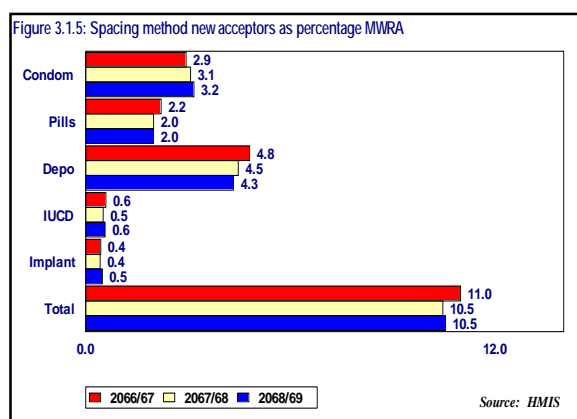
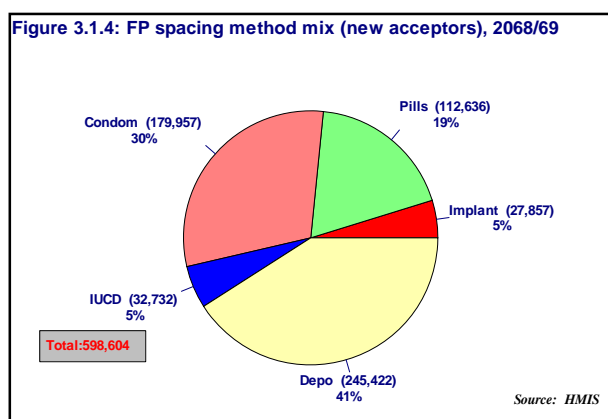
Regional variations have been noticed in recruitment of new pills users. The number of new users declined in EDR, CDR and MWDR. While the number of new pills users increased in WDR and FWDR. Similarly, recruitment of new users in injectable decreased in four regions except FWDR in fiscal year 2068/69. Recruitment of new IUCD users increased in FWDR, WDR and CDR and decreased in EDR and MWDR. Recruitment of new implant users increased in all regions (Table 3.1.7).

**Table 3.1.7: Trend in Number of New Acceptors of Spacing Methods by Region**

Method	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Pills	2066/67	29,312	34,964	20,144	23,381	11,687	119,488
	2067/68	25,578	32,172	20,361	20,869	11,646	110,626
	2068/69	24,442	30,982	23,558	19,509	14,145	112,636
Depo	2066/67	60,185	88,395	42,223	45,338	23,993	260,134
	2067/68	57,230	82,336	38,390	42,536	27,172	247,664
	2068/69	53,271	79,234	40,940	43,688	28,289	245,422
IUCD	2066/67	6,163	13,515	5,023	6,043	1,114	31,858
	2067/68	5,371	11,805	4,820	4,520	1,515	28,031
	2068/69	5,815	13,958	5,323	4,962	2,674	32,732
Implant	2066/67	4,126	9,878	2,477	4,875	2,600	23,956
	2067/68	3,817	7,604	2,739	5,881	3,293	23,334
	2068/69	4,359	10,411	3,142	6,526	3,419	27,857
Condoms	2066/67	29,937	42,303	28,619	34,673	23,770	159,338
	2067/68	30,307	47,353	30,345	36,912	25,421	170,372
	2068/69	31,410	45,587	35,309	37,266	30,351	179,957
Total	2066/67	129,723	189,055	98,486	114,310	63,164	594,774
	2067/68	122,303	181,270	96,661	110,718	69,047	580,033
	2068/69	119,297	180,172	108,272	111,951	78,878	598,604

Note: New acceptors of condom are estimated by dividing total condoms distributed by 150. Source: HMIS

Out of the total of 598,604 new acceptors in spacing methods, the percentage share of new acceptors among different spacing methods recruited in the FY 2068/69 shows a dominance of injectable constituting 41 percent, followed by condom 30 percent, oral pills 19 percent, IUCD 5 percent and implant 4 percent (Figure 3.1.4). All spacing method users' constitute 10 percent of total MWRA. This is almost static during the review period 2066/2067-2068/2069 (Figure 3.1.5).



#### 4. Family Planning Current Users and Contraceptive Prevalence Rate (CPR)

The Contraceptive Prevalence Rate (CPR) is one of the main indicators for monitoring and evaluating the National Family Planning Program. The number of current users in permanent method to calculate the CPR is adjusted based on the age exit and the mortality of males and females in the reproductive age group every year.

The trend (in number) of current users and estimated CPR by region is almost static during the review period. Total number of current users was 2,353,532 in 2066/067 which increased marginally to 2,446,286 in 2068/2069. Increase in current users was almost equal to incoming new MWRA in the country therefore the estimated CPR was almost constant to 43 percent during the review period 2066/67 to 2068/069 (Figure 3.1.6).

**Table 3.1.8: Trend in current users in spacing and limiting methods by region**

	Year	Region					National Total
		EDR	CDR	WDR	MWDR	FWDR	
Spacing methods	2066/67	247,978	333,119	131,016	159,294	86,613	958,056
	2067/68	249,930	350,848	139,780	158,709	89,499	988,800
	2068/69	263,413	338,877	152,302	165,811	104,727	1,025,164
Permanent methods*	2066/67	344,410	609,403	209,531	137,262	94,870	1,395,476
	2067/68	360,989	631,396	209,862	137,136	97,338	1,436,721
	2068/69	354,899	621,319	206,992	139,043	98,869	1,421,122
Total users*	2066/67	592,388	942,522	340,547	296,556	181,483	2,353,532
	2067/68	610,919	982,244	349,642	295,845	186,837	2,425,521
	2068/69	618,312	960,196	359,294	304,854	203,596	2,446,286

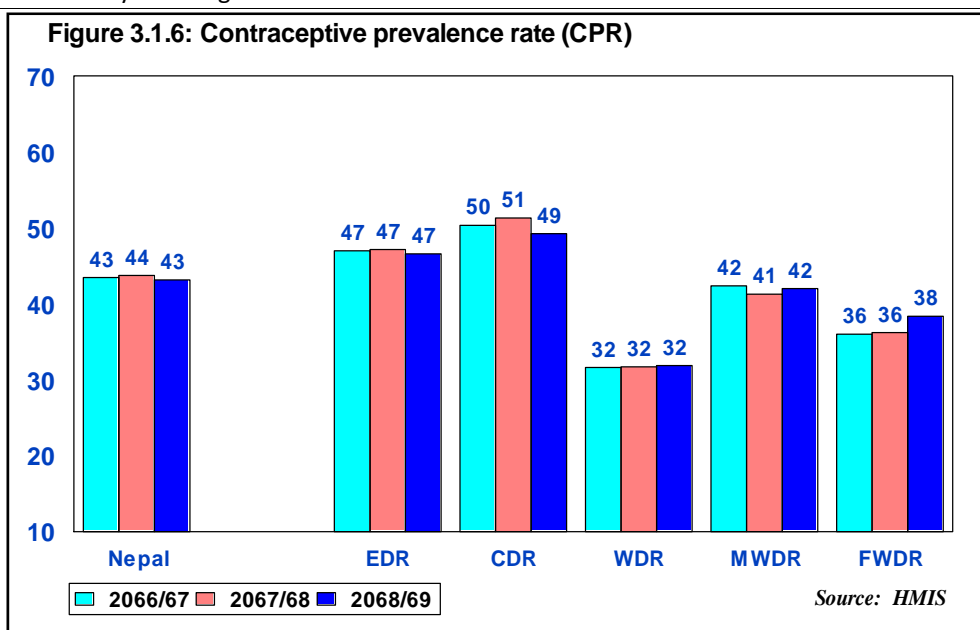
Note: \*Unadjusted data

CPR is estimated based on service data reported to HMIS but it is higher than this estimate as indicated by NDHS 2011 because the HMIS does not capture all private sector service data.

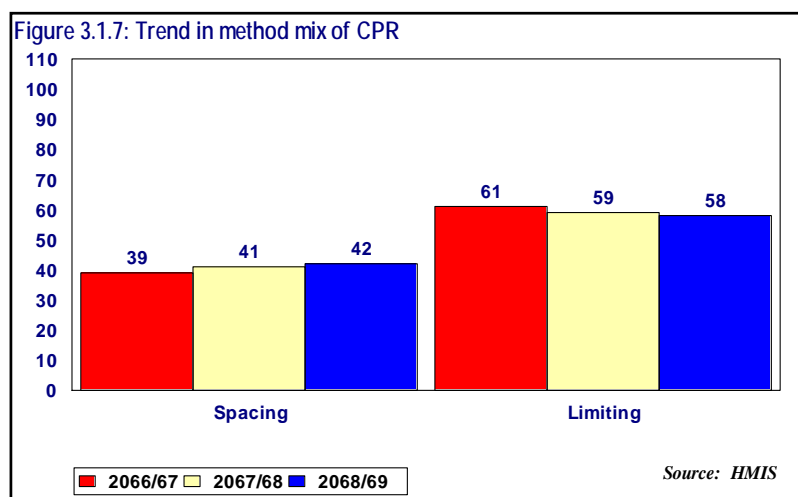
The CPR for modern family planning method, as shown in Figure 3.1.6, is comparable to NDHS 2011 (43%). The NDHS 2011 also indicated no increase in CPR by of modern method over the five year period. One of the reasons for such static in CPR for modern methods could be high spousal separation due to migration for employment reason. A survey conducted in the rural areas of Nepal showed nearly one-third of the MWRA reported their husbands were living away at the time of the survey (NFHP II and New ERA, 2010).

Couples who are not living together for long duration are less likely to use family planning as they are not in immediate need. The same study showed a much higher CPR among couples living together compared to those couples whose husbands were living away. Moreover, the CPR among the couples living together has increased thus reflecting that family planning services have been reaching to those couples who are in immediate need. Although, overall CPR as shown by HMIS and NDHS 2011, is constant even though the Total Fertility Rate (TFR) declined significantly from 3.1 in 2006 to 2.6 in 2011 (NDHS 2011). It is expected to meet the NHSP-II TFR target of 2.5 by 2015. Further analysis is needed to understand the factors contributing to decline in TFR without increase in CPR.

There is wide variation in CPR at the regional level. Highest level of CPR is noted in CDR (49%) and lowest in WDR (32%) (Figure 3.1.6). CPR has remained constant in the recent two years in EDR, WDR and FWDR, increased slightly in CDR but declined slightly in MWDR. Given the CPR estimated from the HMIS and survey data, achieving NHSP-II goal of 67 percent by 2015 from the current level is also a challenge that should be addressed by the program with innovative approaches and appropriate strategies.

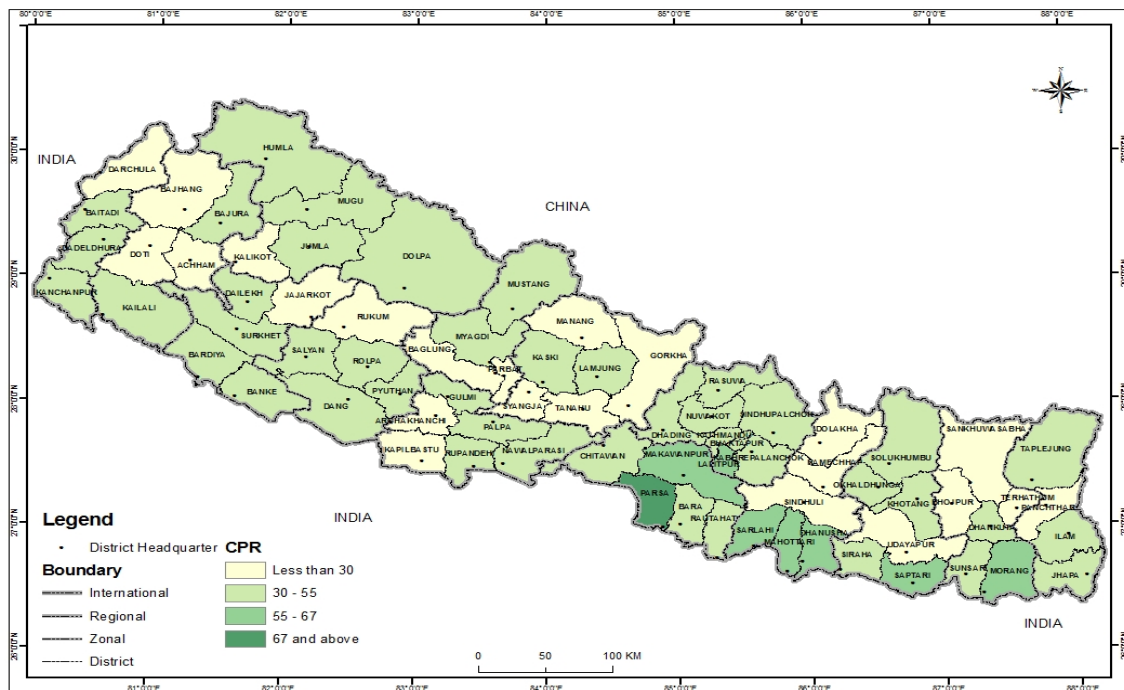


In FY 2067/68 the share of spacing method in total CPR was 41 percent which is lower than the estimation of NDHS 2011 data (47%). While the program has been successful in increasing the share of spacing methods from 39 percent in 2066/67 to 41 percent in 2067/68, In the FY 2068/69 the spacing method increased by 1 percent. . The share of spacing was 42 percent in 2068/2069 (Figure 3.1.7).



CPR by district reveals a distinct pattern. One district, Parsa, has high CPR above 67 percent which has reached the MDG target. Nine districts including Rautahat, Makwanpur, Saptari, Dhanusa, Sarlahi, Morang, Mohottari and Lalitpur have CPR in between 55-67 percent. These districts can meet the MDG target of 67 percent, if programs are intensified. More than half (43) districts have moderate level of CPR between 30-55 percent while 22 districts have substantially low CPR (Map 3.1.1). Thus the FP program needs more attention in low and moderate level of CPR districts.

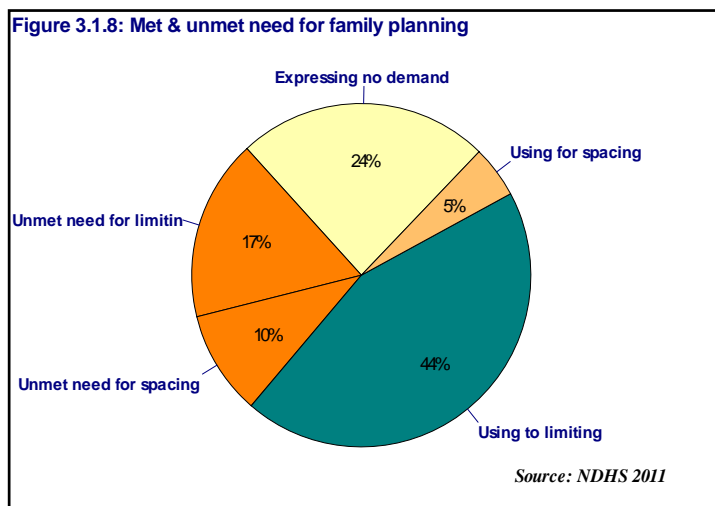
**Map 3.1.1: Contraceptive Prevalence Rate (CPR) by districts**



The program emphasis, as mentioned in the beginning of this chapter, has been to increase the use of spacing methods of family planning. The NDHS 2011 also showed marginal increase in share of spacing methods between 2006 and 2011. These data indicate that more efforts are needed if the program has to increase the share of spacing methods in the contraceptive method mix.

**5. Unmet Need for Family Planning**

According to NDHS 2006 the CPR (all methods) was 48 percent with an unmet need of 25 percent of which 10 percent is for spacing and 15 percent is for limiting (Figure 3.1.8). While NDHS 2011 showed that the CPR increased to 49.7 percent and unmet need for family planning increased further to 27 percent including 10 percent for spacing and 17 percent for limiting.



### 3.1.5 Issues and Recommendations

The issues related with family planning program, recommendations and the responsible agency discussed during the regional and national annual reviews in the FY 2068/69 are presented in Table 3.9.

**Table 3.9: Issues and recommendations**

<b>Issues</b>	<b>Recommendations</b>	<b>Responsibility</b>
Nominal training sites and service providers for long acting FP services	Develop more training sites, identify and mobilize partners to support in training	FHD/NHTC
Delay in procurement of FP/RH commodities (implant, equipment, instruments etc.)	Procurement process should be in place timely	LMD/FHD
Postpartum mothers not captured by the FP program	Initiate postpartum FP program and also link FP with immunization to reach postpartum mothers	FHD/CHD/ D(P)HO
Low FP acceptors in post abortion care	Strengthen post abortion FP service	D(P)HO
High unmet need among couples who are not living together	Address the unmet need of returning migrants	DoHS/FHD
Private sector data are not captured in HMIS	Capture private sector service data in HMIS through D(P)HOs	FHD/D(P)HO
FP in public hospitals	Mainstream FP in public hospitals	DHO/Medical Superintendents
Seasonal demand of FP during festival as the periodic out-migrants return to their home to celebrate festivals	Prepare community level health workers and FCHV to address the seasonal demand of FP	D(P)HO and HF In charges

Note: Please refer to Annex

## 3.2 SAFE MOTHERHOOD AND NEWBORN HEALTH

### 3.2.1 Background

The goal of the National Safe Motherhood Program is to reduce maternal and neonatal mortalities by addressing factors related to various morbidities, death and disability caused by complications of pregnancy and childbirth. Global evidence shows that all pregnancies are at risk, and complications during pregnancy, delivery and the postnatal period are difficult to predict. Experience also shows that three key delays are of critical importance to the outcomes of an obstetric emergency: (i) delay in seeking care, (ii) delay in reaching care, and (iii) delay in receiving care. To reduce the risks associated with pregnancy and childbirth and address these delays, three major strategies have been adopted in Nepal:

- Promoting birth preparedness and complication readiness including awareness raising and improving the availability of funds, transport and blood supplies.
- Encouraging for institutional delivery.
- Expansion of 24-hour emergency obstetric care services (basic and comprehensive) at selected public health facilities in every district

Since its initiation in 1997, the Safe Motherhood Program has made significant progress in terms of the development of policies and protocols as well as expansion in the role of service providers such as staff nurses and ANMs in life saving skills. The policy on skilled birth attendants endorsed in 2006 by MoHP specifically identifies the importance of skilled birth attendance at every birth and embodies the Government's commitment to training and deploying doctors and nurses/ANMs with the required skills across the country. Similarly, endorsement of revised National Blood Transfusion Policy 2006 is also a significant step towards ensuring the availability of safe blood supplies in the event of an emergency.

In order to ensure focused and coordinated efforts among the various stakeholders involved in safe motherhood and neonatal health programming, government and non-government, national and international, the National Safe Motherhood Plan (2002-2017) has been revised, with wide participation of partners. The revised Safe Motherhood and Neonatal Health Long Term Plan (SMNHLTP 2006-2017) includes recent developments not adequately covered in the original plan. These include: recognition of the importance of addressing neonatal health as an integral part of safe motherhood programming; the policy for skilled birth attendants; health sector reform initiatives; legalization of abortion and the integration of safe abortion services under the safe motherhood umbrella; addressing the increasing problem of mother to child transmission of HIV/AIDS; and recognition of the importance of equity and access efforts to ensure that most needy women can access the services they need. The SMNHLTP identifies the following goal, purposes and outputs.



## Strategies

Following strategies have been taken to achieve the goals of safe motherhood program:

1. Promoting inter-sectoral collaboration by ensuring advocacy for and commitments to reproductive health, including safe motherhood, at the central, regional, district and community levels focusing on poor and excluded groups;
  - Ensuring the commitment to SMNH initiative at all levels by promoting collaboration between sectors like health, education, and social welfare, legal and local development. (Strengthening RHSC, RHCC, District RHCC and SMNSC)
  - Mobilizing national authorities, District Health Management Committee (DHMC), community leaders and community members to play active roles in creating suitable environment for promoting safe motherhood.
2. Strengthening and expanding delivery by skilled birth attendant, basic and comprehensive obstetric care services (including family planning) at all levels. Interventions include the following:
  - Developing the infrastructure for delivery and emergency obstetric care.
  - Standardizing basic maternity care and emergency obstetric care at appropriate levels of the healthcare system;
  - Strengthening human resource management;
  - Establishing functional referral system and advocating for emergency transport systems and funds from communities to district hospitals for obstetric emergencies and high-risk pregnancies;
  - Strengthening community-based awareness on birth preparedness and complication readiness through FCHVs, increasing access of all relevant maternal health information and service.
3. Supporting activities that raise the status of women in society;
4. Promoting research on safe motherhood to contribute to improved planning, higher quality services, and more cost-effective interventions.

### 3.2.2 Major Activities

#### 1. Birth Preparedness Package and MNH Activities at Community Level

Family Health Division (FHD) continued support for expansion and maintenance of MNH activities at community level which includes revised Birth Preparedness Package (*Jeevan Suraksha* Flip Chart and *Jeevan Suraksha* Card) and *Matri Suraksha Chakki* (Misoprostol) distribution for prevention of post-partum haemorrhage (PPH) at home delivery focusing continuum of care from pregnancy, through birth and the post-partum period, including the newborn. Such community level activities promote strengthening birth preparedness and complication readiness (preparedness of money, SBA/health facilities, transport and blood donors), promotion of key ANC/PNC services (Iron, TT, Albendazole), self-care in pregnancy and post-partum period (food, rest, no smoking and no drinking alcohol), identification and prompt care seeking for danger signs in pregnancy, delivery and post-partum period and education and distribution of *Matri Suraksha Chakki* for prevention of PPH at home delivery.

In 2068/69, several external development partners (EDPs) such as NFHP II/USAID, UNICEF, UMN, RHDP/SDC, Care Nepal and Plan Nepal supported FHD in maintenance of BPP in the existing 41 districts (25 GoN and 16 partners) and in expansion of revised BPP in 30 districts (25 by GoN and 5 by partners).

In 2066/67, the GoN approved PPH education and *Matri Suraksha Chakki (MSC)* distribution by FCHVs for prevention of PPH at home delivery. FHD has expanded MSC to 2 districts with GoN funding. MSC will be procured by GoN funding for all districts from this Fiscal Year. National trainers were developed for expanding the MSC intervention in integration with BPP.

These community level interventions have increased the demand and access of information and services at the community level. This has contributed to increase the service utilization in pregnancy, delivery and post-partum care including essential newborn care.

## **2. Rural Ultra Sound Program**

The objective of this program is to timely identify the complication during pregnancy referral to the appropriate health faculty for complication management. This program is being piloted in two districts Mugu and Dhading. The preliminary finding shows the increment in ANC cases and increased timely referral to higher centers. In this program a trained nurse use a portable ultrasound machine for scan purpose only.

## **3. Uterine Prolapse**

Uterine Prolapse (UP) relates on nearly every aspect of mandate in the area of Reproductive health (RH) and Rights, gender equity, and empowerment of women. The many factors that directly and indirectly cause this morbidity have the potential to serve as an entry point for improving women's Reproductive Health and Reproductive Rights. While UP is not an MDG indicator, it is indirectly related to Goal

Uterine prolapsed is the priority one program of Government of Nepal. In the last 4 years separate fund has been allocated for uterine prolapsed. Uterine prolapse treatment and surgery operational guideline 2065 first revision 2066 has been developed and one focal person has been identified in the FHD. Till the end of FY 2068/69 more than 26,000 surgeries have been done and in the FY 2067/068 and 2068/69 approximately 14,044 and 9045 surgeries have been performed respectively. Likewise more than 7000 women have been treated with conservative management with ring pressary.

## **4. Human Resource**

A total of 1,342 ANMs and 25 staff nurses have been recruited on local contract to support 24-hour delivery services in PHCCs and HPs. Nine MDGP/Gynecologists were recruited locally in nine districts for CEOC services. This has resulted in increased number of CS in these districts (See Annex sheet on Safe Motherhood). National Academy of Medical Sciences (NAMS) has now initiated one-year Diploma course in Gynecology and Obstetrics where six doctors are under taking the training.

Family Health Division has been coordinating with NHTC to provide SBA training to doctors and staff nurses. Since in-service SBA training was initiated in 2007, a total of 2535 SBAs have been trained and 27 doctors are trained in advanced SBA training including caesarean section.

## **5. Emergency Referral Fund**

It is estimated that 15 percent of the pregnant women develop complication during pregnancy and 5 to 15 percent of them need CS for delivery (WHO, 2009). In difficult geographical terrain and inadequate BEOC/CEOC services, it is very important to have referral services to the pregnant

women in the remote districts. To address this issue FHD has launched emergency referral fund program to facilitate referral services in fourteen districts namely Bhojpur, Khotang, Sunsari, Rasuwa, Manang, Mustang, Dolpa, Humla, Jajarkot, Mugu, Rolpa, Rukum Bajhang, and Darchula. A total of two hundred thousand rupees has been allocated as seed money for each district to be used by a locally formed committee as per the guidelines. The main objective of this program is to provide the referral services to women from poor, Dalit, Janjati, geographically disadvantaged; socially and economically disadvantaged communities who need emergency caesarean section (C/S) or complication management during pregnancy.

## 6. Safe Abortion Services

Preventing unwanted pregnancies through a quality family planning services is a first step towards addressing women's reproductive health needs, and increasing access to safe abortion services has been considered as a missed opportunity to prevent unwanted pregnancy, however, there is a dearth need to make this service available in order to prevent mortality and morbidity from unsafe abortion. A comprehensive approach needs to be integrated between three services, family planning, safe abortion and post abortion care. This means ensuring the availability of comprehensive abortion care (CAC) that refers termination of unwanted pregnancies through safe technique with effective pain management, post procedure family planning information and service to ensure women are able to plan when to have children and avoid further unwanted pregnancies.

Only trained doctors or health workers can provide safe abortion services at the government approved health facilities, with the consent of women and according to the national standard. The increasing trend in abortion utilization shows that more and more women are seeking safe abortion services. In FY 2068/69 a total of 91,696 women received safe abortion service from 477 listed sites.

In the country where there is high turnover of doctors, training nurse providers, especially auxiliary nurse midwife, in safe abortion service is seen as an effective way to avoid service interruption due to unavailability of provider. In FY 2068/69 a total of 297 providers including nurses have been trained on safe abortion services (SAS). Currently IPAS is supporting 23 MA implementing districts.

The existing FCHV network has been used to reach women in their communities with the information about the legal status in Nepal, refer women as per needs for RH services (ANC, FP and CAC) using urine pregnancy tests for early detection of pregnancy. Medical personnel networks such as pharmacist associations and nursing college teachers' groups have also been utilized to reach women as well as current and future service providers.

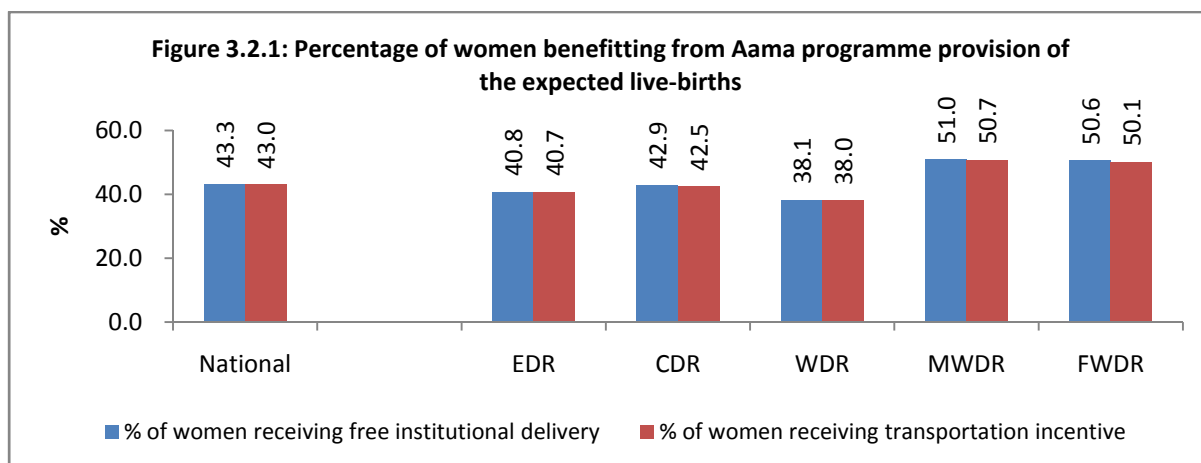
## 7. Aama Program

The *Aama* program guideline was revised for the integration of 4ANC program with Aama. Since both Aama and 4ANC program aim to improve maternal health service utilization, the need for integration of *Aama* with 4ANC was felt necessary as it would ease the implementation of program reducing administrative costs. Hence, the second revision of *Aama* Program Guideline incorporates both 4ANC incentive and *Aama* program also addressing some of the programmatic issues. The revised *Aama* guideline has been implemented since the start of FY 2069/70. The *Aama* guideline specifies the services to be funded, the tariffs for reimbursement and the system for claiming and reporting on free deliveries each month. After revision, *Aama* program has four components: (1) the Safe Delivery Incentive Program (SDIP), a cash incentive scheme, which was initiated in July 2005, (2) free institutional delivery care, which was launched in mid-January 2009, (3) incentive to health worker for home delivery and (4) incentive to women for 4ANC visits. The *Aama* program provisions are:

- Incentives to women on institutional delivery: A cash payment is made to women immediately following institutional delivery: NRs. 1,500 in mountain, NRs. 1,000 in hill and NRs. 500 in Terai region.
- Free institutional delivery services: A payment to the health facility for the provision of free delivery care. For a normal delivery health facilities with less than 25 beds receive NRs. 1,000; health facilities with 25 or more beds receive NRs. 1,500.
- For complicated deliveries health facilities receive NRs. 3,000; for C-Sections NRs. 7,000. Ten complications i.e. APH requiring blood transfusion, PPH requiring blood transfusion or MRP or exploration, Severe, pre-eclampsia, Eclampsia, Retained placenta with MRP, Puerperal Sepsis, Instrumental delivery, Multiple delivery, RH Negative and post abortion management cases that include blood transfusion for haemorrhage, and admission longer than 24 hours with IV antibiotics for sepsis are included as complicated deliveries while laparotomy for perforation due to abortion has also been added to the criteria for surgery along with C/S, laparotomy for ectopic pregnancy and ruptured uterus.
- Incentive to women for 4ANC visits: A cash payment of NRs. 400 is made to women on completion of four ANC visits at the 4, 6, 8 and 9 months of pregnancy following institutional delivery.
- Incentives to health workers for home deliveries: A cash payment of NRs. 100 is made to health worker for home deliveries. Copies of birth registration or death certificate need to be produced to claim incentive for home deliveries.

A significant increase has been observed in the number of facilities providing delivery service and number of institutional delivery after the launch of Aama program. At the end of fiscal year 2068/69, Aama program was implemented in 54 non-state hospitals. FHD administrative record shows that 123 CEOC sites, 153 BEOC sites and more than 1100 birthing centers provided delivery services in the FY 2068/69.

Nationally, Aama program data showed that about half of the women had received free institutional delivery care in FY 2068/69 (Figure 3.2.1). The proportion is higher in the mid-west and far-west regions which are the region with highest need of free delivery care. Comparatively, eastern, central and western region had about two in five women receiving free institutional delivery care. This difference could be due to the large number of private facilities available in the eastern, central and western region as compared to the other two-regions.



Financial management

There has been a substantial increase in the budget allocation for Aama program and also in the absorption capacity of the DoHS over the last couple of years. The budget absorption has increased over the years for Aama program. For FY 2068/69, the total expenditure was more than 90% of the total allocated amount (Table 3.2.1). As evident from the graph this is increment over the years from 42% in 2062/63 to 90% in 2068/69.

Fiscal Year	Allocation	Expenditure
2062/63	139.85	59.27
2063/64	159.2	111.58
2064/65	194.5	143.7
2065/66	444.6	336.7
2066/67	574.3	463.5
2067/68	850.0	648.7
2068/69	900.0	828.4

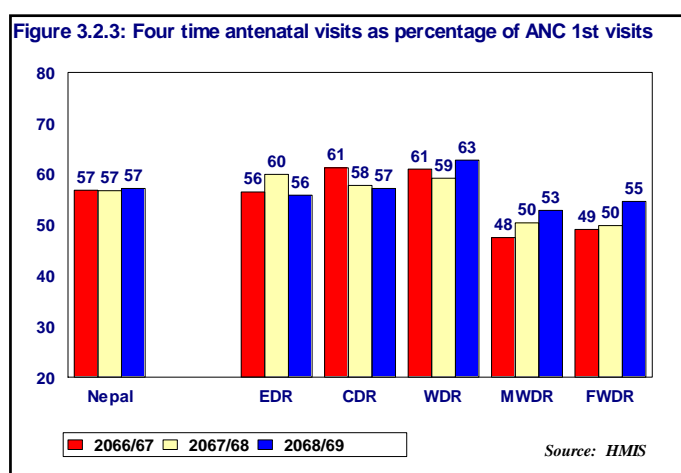
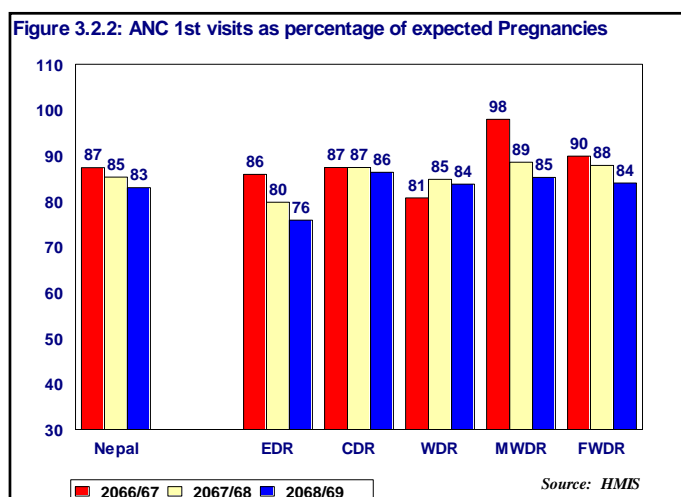
Source: Aama Program, Financial reporting, FHD

### 3.2.3 Achievement

#### 1. Antenatal Care

Antenatal care services include:

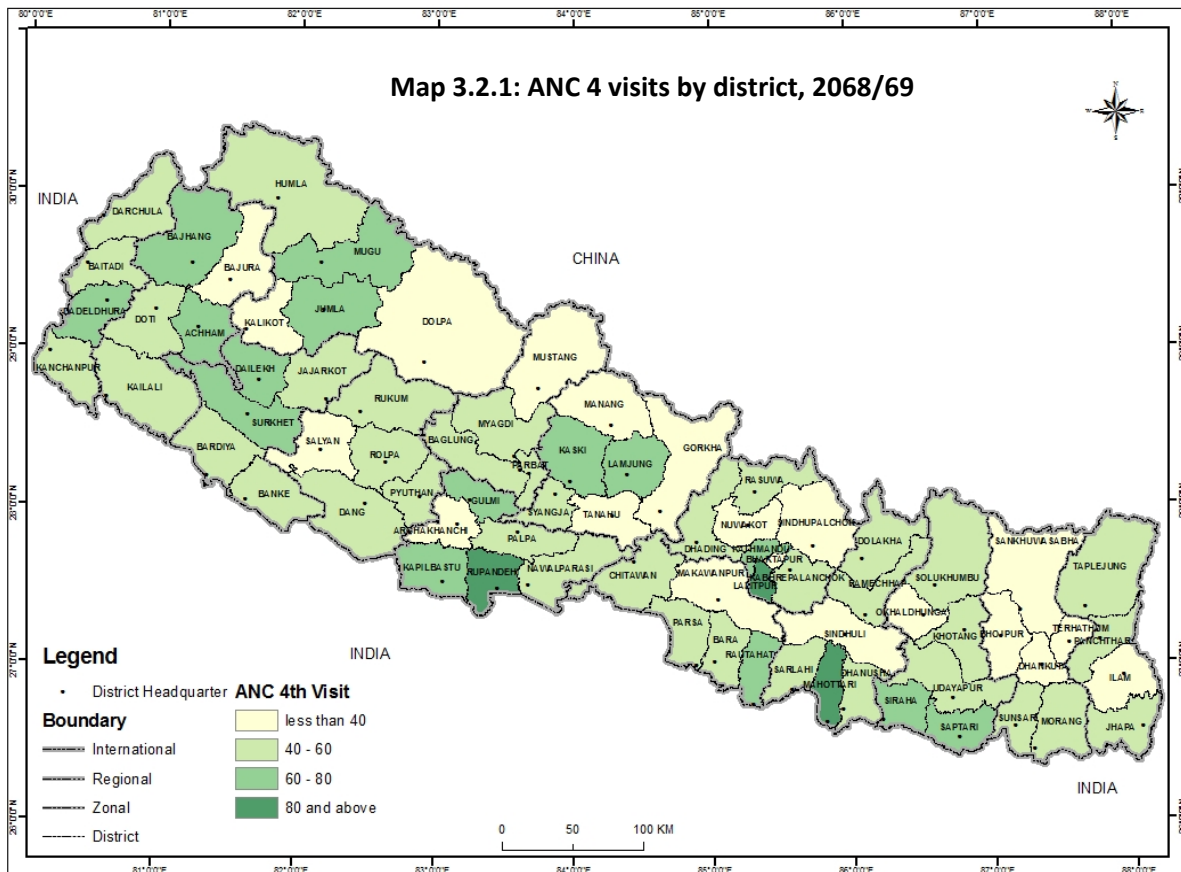
- At least four antenatal check-ups: first at 4<sup>th</sup> month, second at 6<sup>th</sup> month, third at 8<sup>th</sup> month and fourth at 9<sup>th</sup> month of pregnancy;
- Monitor blood pressure, weight and fetal heart rate;
- Provide information, education and communication (IEC) and behavior change communication (BCC) for danger signs and care during pregnancy and timely referral to the appropriate health facilities;
- Birth preparedness and complication readiness (BPCR) for both normal and obstetric emergencies (delivery by skilled birth attendants, money, transportation and blood); Early detection and management of complications;
- Provision of tetanus toxoid (TT) immunization, iron tablets, deworming tablets to all pregnant women and malaria prophylaxis where necessary.



Service statistics of the last three years shows that the national average of ANC first visit as percentage of expected pregnancy has decreased from 87 percent in 2066/67 to 83 percent in 2068/69 (Figure 3.2.2). At the regional level, there was a sharp decline in mid-western development region from 98 percent in 2066/67 to 85 percent in 2068/69.

Mothers are encouraged to make at least four antenatal check-ups: first at 4<sup>th</sup> month, second at 6<sup>th</sup> month, third at 8<sup>th</sup> month and fourth at 9<sup>th</sup> month of pregnancy for a complete ANC care (see the section on *Aama* Program). There is a monitoring system in place to track the timing of ANC visits as per the ANC protocol since 2066/67. Figure 3.2.3 shows the pregnant women attending at least 4 ANC visits, irrespective of the timing of visit, as percentage of first ANC visit. As in the previous years, less than three fifths of the mothers who attended first ANC in the fiscal year 2068/69 made four visits indicating that more than two fifths of the mothers did not complete the four ANC visits. Compared to the last fiscal year there has been slight improvement in western, mid-western and far western regions whereas slight decline in eastern and central development region.

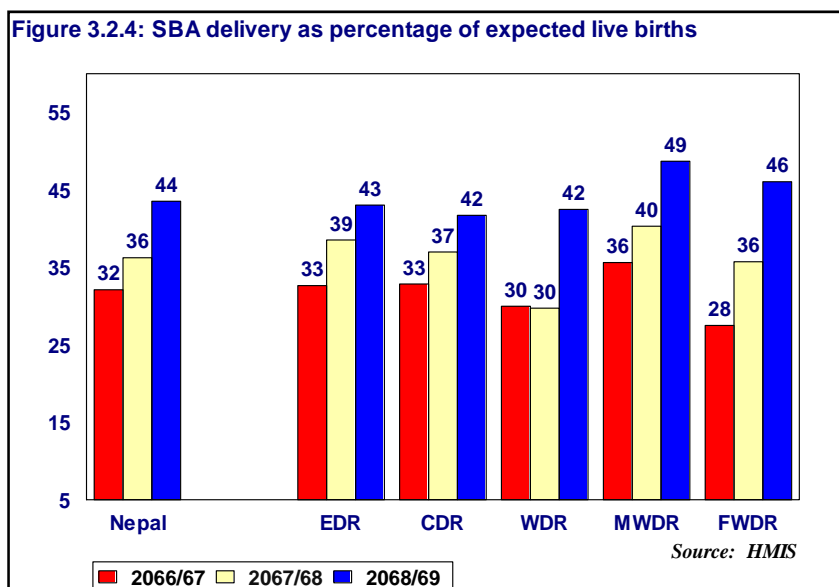
Nepal has a target to achieve 80 percent of women completing at least four antenatal care visits during their last pregnancy by 2015 (NHSP2, 2010-2015). Map 3.2.1 shows that three districts (Rupandehi, Lalitpur and Mahottari) have already achieved the 2015 target (80%), 15 districts have achieved more than 60 percent so are on track to achieve and rest of the districts need extra efforts to achieve the targets.



## 2. Delivery Care

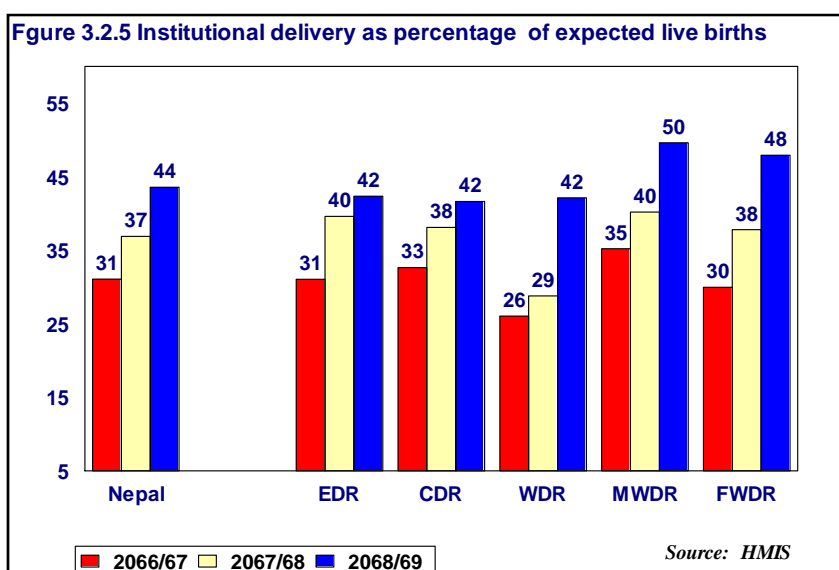
Delivery care services include:

- Skilled birth attendants at deliveries (either home-based or facility-based);
- Early detection of complicated cases and management or referral after providing obstetric first aid by health worker to appropriate health facility where 24 hours emergency obstetric services are available;
- Obstetric first aid at home and/or HP/SHP if complications occur, using Emergency Obstetric Care Kit (EOC kit);
- Identification and management of complications during delivery and referral to appropriate health facility as and when needed;
- Registration of births and maternal and neonatal deaths.



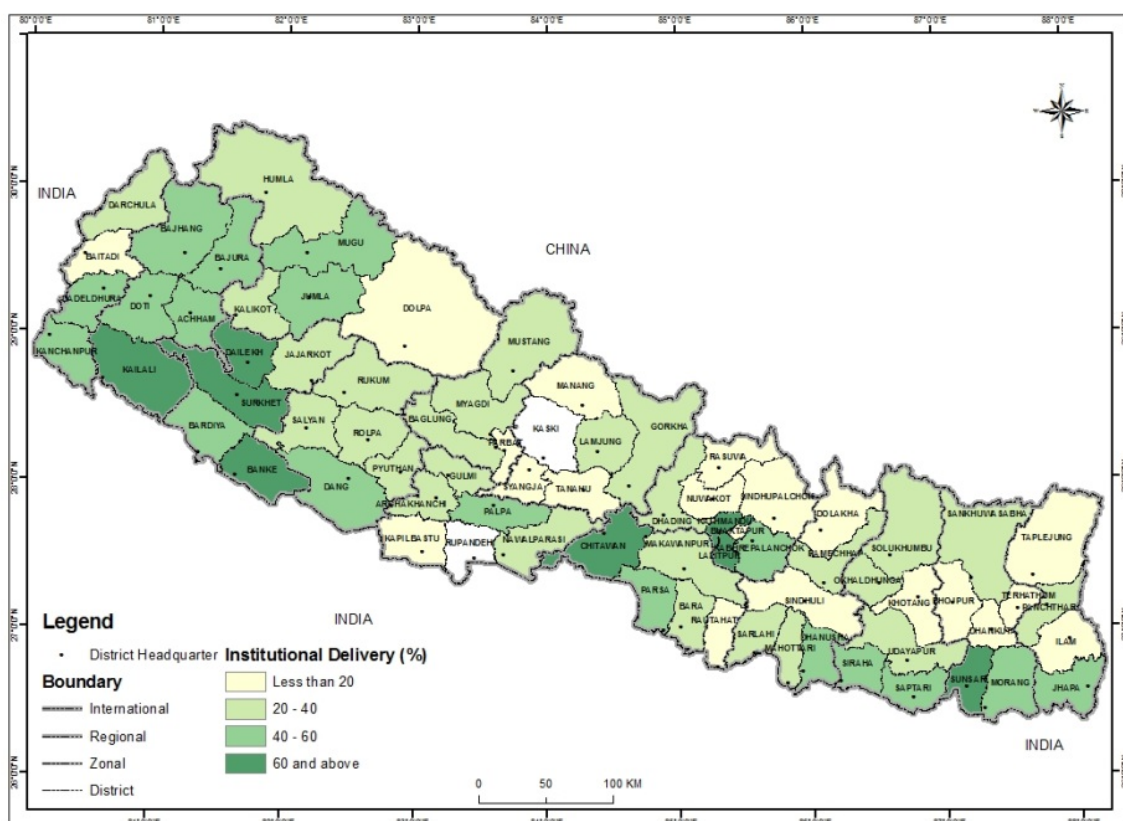
Nepal has committed in achieving 60 percent deliveries by SBA by 2015 (2071/72). Deliveries attended by skilled birth attendant has increased from 32 percent in 2066/67 to 44 percent in 2068/69 (Figure 3.2.4).

There has been a substantial increase in institutional delivery in the last three years in Nepal. Institutional delivery has increased from 31 percent in 2066/67 to 44 percent in 2068/69 (Figure 3.2.5).



Nepal aims at raising institutional delivery at 60% by 2015 (NHSP2, 2010-2015). Map 3.2.2 shows that seven districts have already achieved the 2015 target of 60 percent institutional delivery, 23 districts are on track to achieve the target.

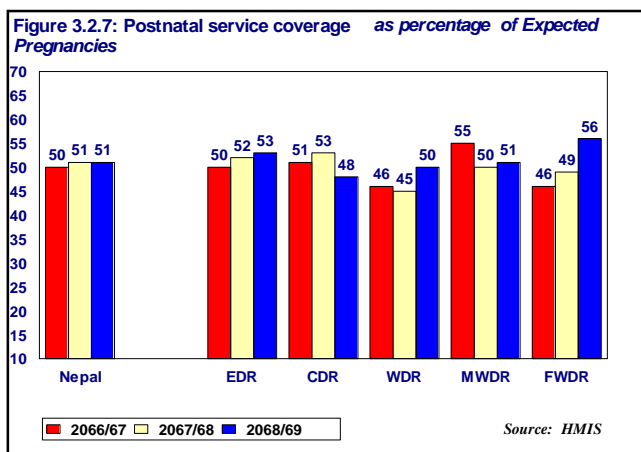
Map 3.2.2: Institutional delivery by district



### 3. Postnatal Care

Postnatal care services include:

- Three postnatal visits: First visit within 24 hours of delivery, second visit on the third day and third visit on seventh day after delivery;
- Identification and management of mother's and newborn in complications of postnatal period and referral to appropriate health facility as and when needed;
- Promotion of exclusive breastfeeding;
- Personal hygiene and nutrition education, post-natal vitamin A and iron supplementation for the mother;
- Immunization of newborns; and
- Post-natal family planning counseling and services.



Percentage of mothers who received postnatal care at the health facility among of expected pregnancies has increased from 50 percent in 2066/67 to 51 percent in 2068/69. At the regional level, there has been increment in all regions except central (Figure 3.2.7).



#### 4. Newborn Care

Newborn care includes:

- Health education and behavior change communication on essential newborn care practices, Identification of neonatal danger signs and timely referral to the appropriate health facility. Delivery by skilled birth attendant both at home and health facility, immediate newborn care (warmth, cleanliness, immediate breast feeding, cord care, eye care and immunization) and newborn resuscitation

Community based newborn care program and community based IMCI is dealt in Chapter 2, Child Health.

#### 5. Emergency Obstetric Care

Basic emergency obstetric care (BEOC) covers management of pregnancy complications by assisted vaginal delivery (vacuum or forceps), manual removal of placenta, removal of retained products of abortion (manual vacuum aspiration), and administration of parental drugs (for postpartum hemorrhage, infection and pre-eclampsia/eclampsia), resuscitation of newborn and referral. Comprehensive emergency obstetric care (CEOC) includes surgery (caesarean section), anesthesia and blood transfusion along with BEOC functions. Safe blood transfusion is an essential part of CEOC, and to support this, national blood transfusion policy was revised in 2006 and blood transfusion guideline developed.

The SMNH long term plan (2006-2017) has envisaged that by 2017 CEOC services will be available in 60 districts, 80 percent of PHCCs will provide BEOC services and 70 percent of HPs will provide delivery services. Table 3.2.2 presents the status of CEOC, BEOC and birthing centers in fiscal year 2068/69.

**Table 3.2.2: Status of BEOC/CEOC, 2011/12**

Regions	CEOC Districts	CEOC Hospitals	BEOC Hospitals	BEOC PHCC	Birthing Centres (PHCC)	Birthing Centres (HP)	Birthing Centres (SHP)	Total BC (PHCC, HP & SHP)
EDR	15	28	8	31	15	116	73	204
CDR	13	46	7	21	34	114	105	253
WDR	11	31	11	18	20	111	37	168
MWDR	8	11	8	23	5	145	153	303
FWDR	7	7	8	18	1	87	105	193
Total	54	123	42	111 (54.1%)	75	573 (69.7%)	473 (15.8%)	1121

Table 3.2.3 presents EOC monitoring data in fiscal year 2068/69. More than one fourth (28%) of the estimated live birth took place in birthing center and B/CEOC facilities. EOC met need was recorded at 19 percent; caesarean section rate was 5.3 and met need of cesarean section was 117 percent. EOC met need was recorded lowest in central development region (6.2). It is mainly due to under reporting from referral hospitals.

**Table 3.2.3 : EOC monitoring, 2068/69**

	Birth at B/CEOC site		Obstetric complications managed	Met Need of EOC	Number of C/S done	C/S rate	Met need of C/S
	Number	%					
<b>Nepal</b>	<b>194528</b>	<b>28.1</b>	<b>19706</b>	<b>19.0</b>	<b>40623</b>	<b>5.9</b>	<b>117.3</b>
EDR	63091	38.8	6591	27.0	12285	7.6	151.1
CDR	27741	11.9	2144	6.2	18196	7.8	156.6
WDR	30871	22.4	2738	13.3	6890	5.0	100.1
MWDR	43234	46.3	4456	31.8	2390	2.6	51.1
FWDR	29591	44.5	3777	37.8	862	1.3	25.9

### 3.2.4 Problems and Recommendations

**Table 3.13: Problems/constraints and actions to be taken**

Issues/Constraints	Recommendations	Responsibility
Sustainability of Aama program	<ul style="list-style-type: none"> <li>▪ Funding from GoN source need to be increased every year</li> </ul>	MoHP, FHD
Inappropriate location of health facilities	<ul style="list-style-type: none"> <li>▪ Health facilities location should be decided with community participation</li> </ul>	MoHP, DHO/DPHO
Yearly contract of MDGP, SN, AA, ANM, SM coordinator	<ul style="list-style-type: none"> <li>▪ Multi-year contract system should be in place</li> </ul>	MoHP
Referral mechanism not well established	<ul style="list-style-type: none"> <li>▪ Need to develop referral guideline</li> </ul>	FHD
Inadequate and timely supply of equipment and commodities	<ul style="list-style-type: none"> <li>▪ Need to simplify procurement system</li> <li>▪ Decentralization of procurement system</li> </ul>	MoHP, LMD, FHD, District

Note: Please see Annex

## 3.3 FCHV PROGRAM

### 3.3.1 Background

Recognizing the importance of women's participation in promoting health of the people, GoN initiated the Female Community Health Volunteer (FCHV) Program in FY 2045/46 (1988/1989) in 27 districts and expanded to all 75 districts of the country in a phased manner. Initially, the approach was to select one FCHV per ward regardless of the population size. Later in 2050 (1993/94) population based approach was introduced in selected (28) districts. All together there are 48,897 FCHVs in the country (44176 FCHVs at rural/VDC level and 4721 at urban/municipality level).

FCHVs are selected by members of Mothers' Group for Health (MG-H) with the help of local health facility staff. They are provided 18 days basic training in two phases (9+9 days) on selected primary health care components. After completion of basic training, FCHVs are provided with a certificate and medicine kit box consisting of necessary drugs and supplies free of cost. They are also provided with manuals, flip chart, ward register, IEC materials, FCHV bag, signboard and identity card. Family Planning devices (pills and condoms only to FCHVs) are supplied regularly through local health facility.

The major role of the FCHV is to promote health and healthy behaviors of mothers and community people to promote safe motherhood, child health, family planning, and other community based health services. FCHVs distribute condoms and pills, ORS packets and vitamin A capsules, treat pneumonia cases and refer more complicated cases to health institution along with motivation and education to community people. Similarly, they also distribute iron tablets to pregnant women.

Various policies, strategies and guidelines have been developed to strengthen the FCHV program. Numerous factors influence the program including national health sector reform, decentralization and handing over of health facilities to VDCs, experience gained from program implementation, and the recognition to FCHVs in reduction of maternal and child mortality and general fertility through continuous implementation of community-based health programs in Nepal.

The FCHV program strategy has been revised in 2067 (2010) which gave strategic directions and critical approaches to ensure a strengthened national program for consistency and continuous support to each FCHV.

Government of Nepal is committed to increase the moral & participation of FCHV in community health development. In fiscal year 2064/65 MoHP established FCHVs fund by providing cash support of Rs. 50,000 to each VDC. The mobilization of this fund for income generation activities is expected to benefit the FCHVs and the community at large.

#### Goal

The goal of FCHV program is to support national goal of health through involvement of community in public health activities. This includes imparting knowledge and skills for empowerment of women, increasing awareness on health related issues and involvement of local institutions in promoting health care.

---

## Objective

FCHV program has the following objectives:

- To prepare a pool of self-motivated volunteers as a focal person to bridge health programs with community
- To prepare a pool of volunteers to provide community based health services
- To activate women to tackle common health problems by imparting relevant knowledge and skills
- To increase the community participation in improving health
- To develop FCHV as a motivator for health
- To increase utilization of health care services through demand creation

### 3.3.2 Major Activities

Major activities carried out during the FY 2068/69 include the following:

- Reactivation of Health Mother Group for Health
- Bi-Annual FCHV Review meeting
- FCHV Day celebration

### Birth Preparedness Package (BPP)

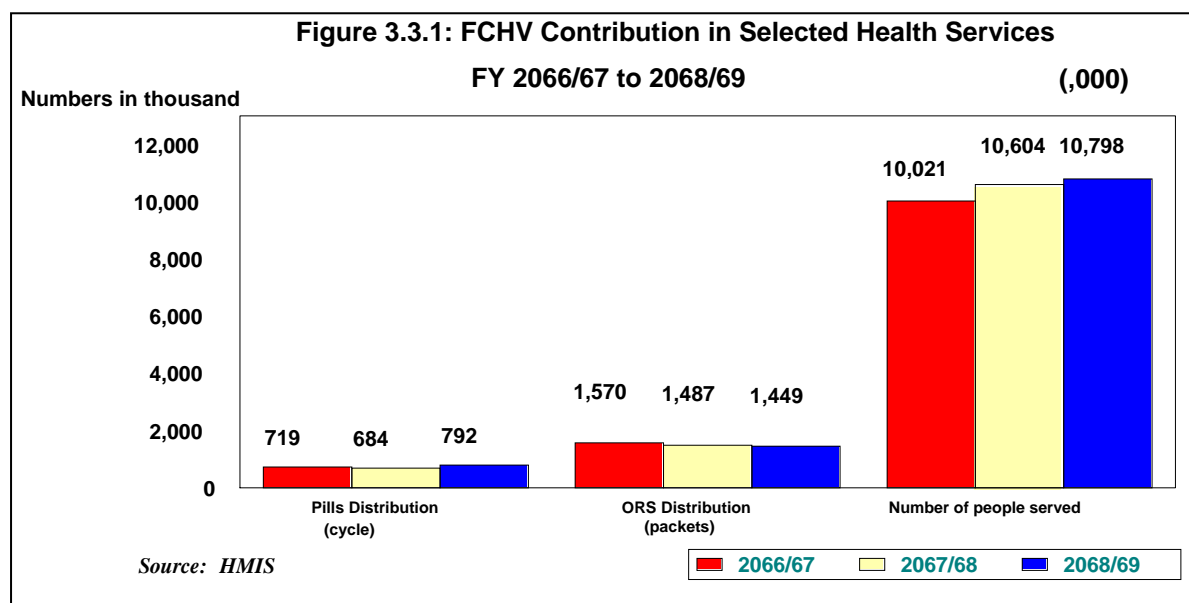
BPP training was provided to FCHVs through GoN support in 5 districts. Mother's cards were distributed to pregnant women through FCHV. The BPP flip charts were used to educate and create awareness in the community to help in birth preparedness and reduce delays.

Other key activities carried out during the FY 2068/69 include:

- An approach was designed and piloted in eighth lowest performing VDCs of Rautahat district through strengthening of Mothers' Group for Health (MG-H) in NFHP/II/USAID support. The findings of pilot program expected to support in revising existing guideline of MG-H.
- Prepared/finalized orientation package to strengthen Mother Group for Health.
- Piloted adult learning process to strengthen FCHVs in Rasuwa district.
- National annual performance review workshop reviewed the recommendation and operation plan was prepared at the regional workshops.

Major activities carried out in the FY 2068/69 are presented in Annex. All the targeted activities for the fiscal year 2068/69 were completed except for volunteer retirement of FCHVs. In the fiscal year 2068/69, a total of 1,457 FCHVs were expected to receive voluntary retirement however only 700 FCHVs took voluntarily retirement.

### 3.3.3 Achievement

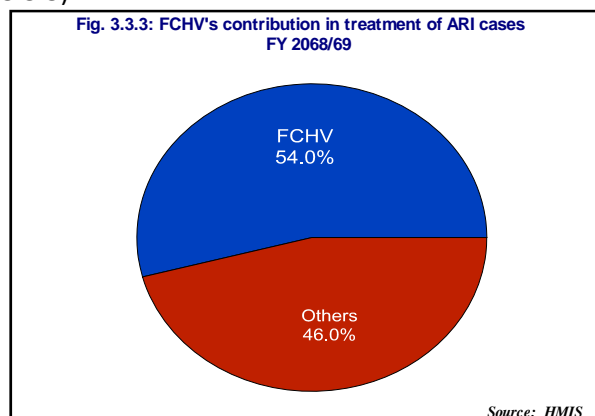
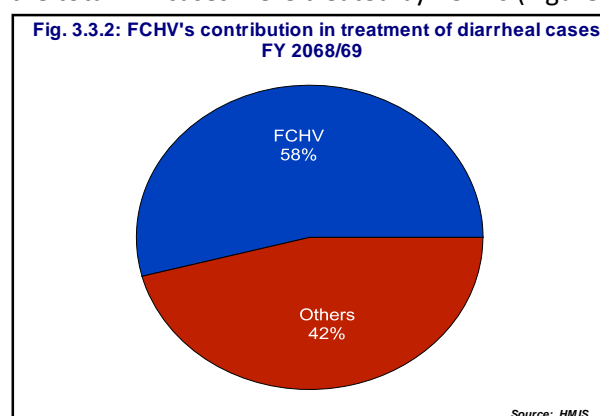


A total of 10.7 million persons had contacted FCHVs for information and services related to FP, SM, and CDD/ARI during the fiscal year 2068/69 (Figure 3.3.1). There has been increased in distribution of oral contraceptive pills (791,637 cycles) and slightly decrease in ORS distribution (1,449,149 packets) in the FY 2068/69 in comparison to last fiscal year (Table 3.3.1). FCHVs have contributed almost 50 percent in oral pills and ORS packets distribution nationwide. FCHVs distributed a total of 8,940,306 packets of condoms in the FY 2067/68.

**Table 3.3.1: FCHV Contribution in Selected Health Services – FY 2066/67 – 2068/69**

Services	2066/67	2067/68	2068/69
Pills distribution (Cycles)	719,451	684,701	791,637
Condom distribution (Persons)	NA	6,905,532	8,940,306
ORS distribution (Packets)	1,570,419	1,487,613	1,449,149
Iron tablets distribution	1,033,362	16,242,529	18,599,314

FCHVs have a large share in treatment of diarrhea and ARI. Of the total diarrhea cases treated in FY 2068/69 more than half (58%) of them were treated by FCHVs (Fig. 3.3.2). Similarly, 54.1 percent of the total ARI cases were treated by FCHVs (Figure 3.3.3).



In addition to the above activities, FCHVs have supported in counseling and referring mothers to the health facilities for the service utilization; providing Vitamin A capsules, Iron supplementation and de-worming to pregnant women and polio immunization to children below 5 years during NID; community based management and treatment of ARI /CDD; and other public health activities.

### 3.3.4 Problems/Constraints

Problems/constraints faced and actions to be taken, with responsibility as discussed in the national annual review 2068/69 are listed below.

Table 3.15: Problems/constraints and actions to be taken

Issues	Recommendations	Action
Overburdened FCHVs	More organized task-shifting and coordination with focal agency	FCHV sub-committee is discussing on the issue and will be soon sending a circular
Ageing FCHVs	Appropriate exit policy	Implemented voluntary exit policy Poor participation
Inadequate initiatives for FCHV fund management	Fund management orientation for FCHVs	Fund management orientation program started in 14 districts (7 from partners and 7 from government)

Note: Please see Annex

## 3.4 PRIMARY HEALTH CARE OUTREACH

### 3.4.1 Background

As envisaged in the national health policy 1991, health facilities were extended up to village level. However, utilization of services provided by health facilities, especially preventive and promotive services, has been found to be limited because of limited accessibility. Therefore it was felt that services should be expanded closer to the community. Thus Primary Health Care Outreach (PHC/ORC) services were initiated and established in 1994 (2051 BS).

The aim of PHC/ORC is to improve access to some basic health services including family planning and safe motherhood closer to rural households. These clinics are the extensive service sites of PHCCs, HPs and SHPs up to community level. The primary responsibility to conduct these clinics lies with MCHWs and VHWs at SHP level and ANMs, AHWs and VHWs at PHCC and HP level. Other staffs of HP/PHCCs help to conduct the PHC/ORC. Female Community Health Volunteers (FCHVs) and other local NGOs/CBOs support health workers to conduct the clinics and also support in recording/reporting and other support activities.

Based on the local needs PHC/ORCs are conducted every month at fixed locations of the VDC on specific dates and time. The clinics are conducted within half an hour's walking distance for the population residing in that area.

VHWs and MCHWs or ANMs/AHWs provide basic PHC services. According to PHC/ORC strategy, following services are provided from the clinic.

1. Safe Motherhood & Newborn Care
  - Antenatal, postnatal, and newborn care
  - Iron distribution
  - Referral if danger signs identified
2. Family Planning
  - DMPA, (Depo-Provera) pills and condom
  - Monitoring of continuous users
  - Education and counseling on FP methods and emergency contraception
  - Counseling and referral for IUCD, implant and VSC service
  - Tracing defaulter
3. Child Health
  - Growth monitoring of under 3 children
  - Pneumonia treatment
  - Diarrhoea treatment
4. Health Education and Counseling
  - Family planning
  - Maternal and newborn care
  - Child health
  - STI, HIV/AIDS
  - Adolescents' sexual and reproductive health
  - Others

5. First aid treatment
  - Minor treatment
  - Referral for complicated cases

### 3.4.2 Major Activities of FY 2068/69

- PHC/ORC reactivation and micro planning orientation were conducted in 1305 VDCs of 75 districts.
- PHC-ORC kits with recommended equipment and drugs were purchased to be used during PHC-ORC clinic (333 Clinics of 75 Districts).

Achievement of the activities carried out in the FY 2068/69 is presented in Annex 1.

### 3.4.3 Analysis

The achievement of outreach clinics conducted in last three years.

**Table 3.4.1: PHC Outreach Clinics Conducted by Region**

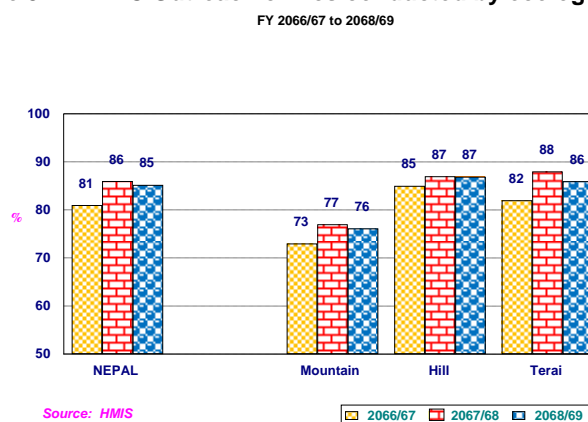
Regions	2066/67 (2009/2010)			2067/68 (2010/2011)			2068/69 (2011/2012)		
	Targets	Achievement	%	Targets	Achievement	%	Targets	Achievement	%
Mountain	19,356	14,276	74	18,768	14,517	77	19,320	14,556	75
Hill	77,820	66,346	85	74,880	65,117	87	75,396	65,245	87
Terai	60,984	48,371	79	59,832	52,951	88	59,136	50,710	86
EDR	38,124	35,245	91	35,436	32,394	91	34,968	31,354	90
CDR	49,440	37,863	77	48,720	41,283	85	48,696	40,327	83
WDR	31,097	23,833	76	30,432	28,802	88	30,444	27,173	89
MWDR	22,848	18,332	80	22,200	18,239	82	22,896	17,818	78
FWDR	16,656	13,720	82	16,692	13,867	83	16,848	13,839	82
National	158,160	128,993	81	153,480	132,585	86	153,852	130,511	85

Source: HMIS

*Note: Target: Total number of clinics expected to run in a year (12,821 PHC/ORC Clinics x 12 times = 153,852); Achievement: Total no. of clinics reported to have been conducted.*

Target vs. achievement of PHC/ORC at national level and by region for the last three fiscal years are shown in Table 3.4.1 in detail and percentage wise shown in the Figure 3.4.1. Of the total targeted PHC/ORC, 85 percent of the clinics were conducted at the national level and this is one percent decrease from last fiscal year. The EDR and WDR achieved 90 percent of the targeted number followed by CDR (83%) and FWDR (82%). Achievement of WDR was increased from 88 percent in 2067/68 to 90 percent in 2068/69 but in remaining all four development regions the achievement slightly decreases. There has been a slight decrease in

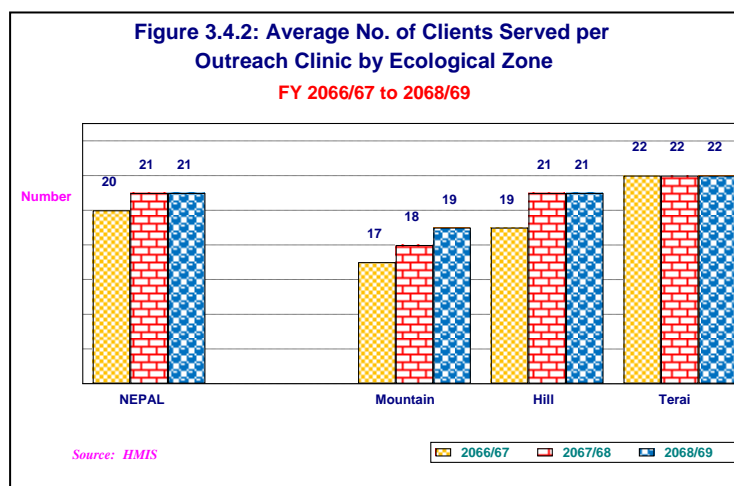
**Figure 3.4.1: PHC Outreach clinics conducted by ecological zone**





conduction of PHC/ORC clinics in Mountain and Terai ecological regions (Figure 3.4.1) which is constant in two fiscal years in hill. In hill 87 percent of the targeted PHC/ORCs were conducted whereas it was only 76 percent in the mountain region. Due to geographic terrain in the mountain region less people visit to the health facility, special innovative approach need to be done to increase coverage in this region.

There has been no increase in average number of client served by PHC-ORC compared to FY 2067/68 (Figure 3.4.2). There has been a gradual increment in the average number of clients served in PHC/ORC in all Mountain ecological regions but stable in Hills and Terai. It is obvious that due to high population density as well as easy access, more clients might have visited PHC/ORC clinics in Terai compared to mountain area.



### 3.4.4 Issues/Gaps

The issues discussed in the regional and national reviews.

**Table 3.4.2: Issues and recommendations**

Issues	Recommendations	Responsibility
Inadequate services in PHC/ORC clinics	Change indicators of PHC/ORC clinics (Depo and Antenatal services)	FHD, HMIS
Poor quality and irregular conduction of clinics	Effective monitoring	FHD, RHD, DH(P)O
Lack of place (infrastructure) to conduct PHC/ORC clinics	Activate PHC/ORC committee, identify proper place	FHD, RHD, DH(P)O

Note: Please see Annex.

## 3.5 DEMOGRAPHY AND REPRODUCTIVE HEALTH RESEARCH

### 3.5.1 Background

Planning, monitoring and evaluation of reproductive health (RH) activities are the key functions of Demography Section. This section conducts periodic and *ad hoc* studies and also coordinates reproductive health related research and studies carried out by other organisations in Nepal.

Major responsibilities of Demography Section include:

- Estimate annual national targets for family planning and safe motherhood services including family planning acceptors and RH commodities.
- Carry out regular monitoring of RH and EOC activities in coordination with HMIS Section.
- Provide supportive supervisory support to DHO/DPHO and all levels of health facilities.
- Conduct periodic and ad-hoc researches and studies on reproductive health, family planning, maternal and neonatal health, comprehensive abortion services and female community health volunteer services.
- Conduct and support piloting of maternal and new-born health initiatives.

### 3.5.2 Major Activities

Major activities in fiscal year 2068/69 include:

1. Preparation of annual national and district program budget
2. Estimation of contraceptive requirement
3. Regional and national review of RH programs and EOC monitoring
4. National MPDR review
5. Carried out three studies namely:
  - a. Clients' perceptions on Family Planning Services in Kaski and Baglung districts.
  - b. Impact evaluation of uterine prolapse surgery in Nepalese women
  - c. Rapid assessment of *Aama Surakchha* program in Rupandehi and Sindhupalchowk districts
6. Extension of MPDR in 5 hospitals

The section below presents some glimpses of key studies carried in the FY 2068/69.

Methodology & study area	Key findings
<b>1. Client's perception on family planning services</b>	
<ul style="list-style-type: none"> <li>▪ Selected public and non-public health facilities of Baglung and Kaski districts</li> <li>▪ Exit interview with 217 family planning clients</li> </ul>	<ul style="list-style-type: none"> <li>▪ About 3/4 clients reported complication due to the use of family planning methods, side effect or inconvenience with the use of the FP method</li> <li>▪ About 2/3 clients perceived the overall quality of services at an average level</li> <li>▪ More than 88 % of users were satisfied with the services.</li> </ul>
<b>2. Impact evaluation of uterine prolapse surgery in Nepalese women</b>	
<ul style="list-style-type: none"> <li>▪ A cross-sectional study</li> <li>▪ 8 districts (Okhaldhunga, Saptari, Nuwakot, Rautahat, Gorkha, Rolpa, Jumla and Kanchanpur)</li> </ul>	<ul style="list-style-type: none"> <li>▪ 49% of the women did surgery in free health camps (&gt;75% in remote districts), 28% in non-government hospitals, and 23% in government hospitals</li> <li>▪ 28% of women who did the surgery in Nepal reported that they had to pay for it</li> </ul>

Methodology & study area	Key findings
<ul style="list-style-type: none"> <li>▪ Primary and secondary sources</li> <li>▪ Quantitative and qualitative method</li> <li>▪ Respondent driven sampling</li> <li>▪ 821 women ranging from 20 to 80 years who had UP surgery interviewed</li> <li>▪ In-depth interview with 32 stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>▪ Around one third women in Terai did surgery in India</li> <li>▪ 83% women reported to have post-surgery problems within a week after discharge from the hospital</li> <li>▪ 15% of women reporting post-surgery complication were from health camps; 11% from non-public facilities; and 10% from government facilities.</li> <li>▪ 9% women reported that their husband had another wife, and 13 (17%) women said that UP was the reason</li> <li>▪ UP surgery generated positive attitudes in husbands towards their wives</li> <li>▪ 74% women expressed satisfaction with the health workers involved in surgery</li> <li>▪ Poor implementation of guidelines and protocols</li> </ul>
<b>3. Rapid assessment of Aama Surakchha program (6 districts)</b>	
<ul style="list-style-type: none"> <li>▪ Purposive selection of 6 districts and 48 health facilities were sampled, comprising 24 Health Posts/Sub Health Posts (HP/SHPs), 12 Primary Health Care Centers (PHCCs), 7 public and 5 private hospitals.</li> <li>▪ Interviewed women who had delivered in the last six months at a health facility and women who had delivered at home with assistance</li> </ul>	<ul style="list-style-type: none"> <li>▪ Women have adequate knowledge about the transport incentives and free delivery care but very limited awareness of the 4ANC program and limited uptake; only 13% of women who had delivered in a health facility received the 4ANC incentive.</li> <li>▪ Overall, 23% are still paying some costs for delivery.</li> <li>▪ The districts involved in developing their own plans and budgets for the <i>Aama</i> program were more likely to manage their budget well and have less fund deficits throughout the year.</li> <li>▪ On reporting, monitoring and supervision, mismatches were found between districts and the health facilities within them (overall 10% of cases) and between the health facilities and the women (overall 5%), but this should not be interpreted as a misuse of funds since human error could be a factor.</li> <li>▪ Only a minority of facilities reported having regular monitoring and supervision in relation to the <i>Aama</i> program, undermining the motivation to complete the annexes properly and to report on time.</li> <li>▪ Overall, only 54% of facilities publicly displayed the Annex 10 (information of women delivered in a health facility), which limits public accountability of the <i>Aama</i> program.</li> <li>▪ In Terai districts, in contrast to the <i>Aama</i> guidelines, most of the disbursed incentives were given to husbands or other relatives</li> </ul>
<b>4. Rapid assessment of Aama program (2 districts from GoN funding)</b>	
<ul style="list-style-type: none"> <li>▪ Purposive selection of 2 districts and health facilities</li> <li>▪ Client exit interviews</li> </ul>	<ul style="list-style-type: none"> <li>▪ Most of the women were aware of <i>Aama</i> program</li> <li>▪ Delay in budget release affected timely payment to mothers at the time of delivery</li> <li>▪ Health facilities to be equipped with essential equipment</li> <li>▪ Most institutions had not displayed the list of beneficiary women; FHD to give strong instruction and monitor closely</li> </ul>
<b>5. Responding to increased demand for institutional delivery in Nepal (Situational analysis and emerging options)</b>	
<ul style="list-style-type: none"> <li>▪ Purpose selection of 6 reportedly overcrowded referral hospitals, to represent five development regions and ecological zones</li> </ul>	<ul style="list-style-type: none"> <li>▪ Normal deliveries increased by 43% in three years</li> <li>▪ Terai castes used the services proportionally more than the other castes (users - 28%, population share - 11%).</li> <li>▪ Bed occupancy rate in increasing trend; Janakpur Zonal Hospital reported more than 100%.</li> <li>▪ All the senior positions for matrons, medical superintendents and senior nursing sisters (supervisors) were vacant across all six referral hospitals. Anaesthetists were available only in Koshi Zonal Hospital, Bharatpur Hospital and Western Region Hospital. At all the other referral hospitals, anaesthesia assistants were providing this service.</li> <li>▪ All the hospital buildings except for Bheri zonal hospital were over 30 years old and built to cater to a much smaller number of clients. Managing high volumes of clients in under-resourced facilities compromised the quality of</li> </ul>

Methodology & study area	Key findings
	<p>care including basic hygiene and infection prevention.</p> <ul style="list-style-type: none"> <li>▪ Birthing centres are heavily underutilised for child birth in the districts where the road and transport network is better and where SBAs are not available 24/7 (11%).</li> <li>▪ Birthing centres at PHCCs appeared to be less well used than those at health posts. Responses suggested that women who could reach a PHCC would be able, and prefer, to go directly to a higher-level facility.</li> <li>▪ A poorly functioning referral system has contributed to self-referral to the higher institutions and reduced confidence in birthing centres.</li> <li>▪ Average unit cost of a normal delivery was NPR 1,847; and in birthing centres it was NPR 3,625, more than double that in the hospitals. The lower hospital unit costs arise from the very high bed occupancy rates, old infrastructure and low staffing levels, and high birthing centre unit costs arise from low utilisation. If these costs are re-estimated on the basis of international standards and zero vacancies, this 'normalised' average unit cost would rise from NPR 1,847 to NPR 2,445.</li> <li>▪ The average hospital unit cost of a complicated delivery was NPR 3,226 and a caesarean section NPR 11,143.</li> <li>▪ The study recommends enhancing maternity services at the district hub by either expanding current maternity wards; establishing additional birthing units at hospitals for normal deliveries; or establishing additional maternity hospitals at the district level.</li> <li>▪ Create a package of services for strategically located birthing centres</li> <li>▪ Revise incentives: costs to reflect direct and indirect costs for private hospitals; performance based payments for birthing centre; and incentive payments to FCHVs.</li> </ul>

### Maternal and Perinatal Death Review (MPDR)

Maternal death is the leading cause of death among women of reproductive age in Nepal. It is not only health disadvantage it is a social disadvantage. It is estimated that MMR is 170 per 100,000 live births in Nepal which tells these women die not from disease but during the normal, life enhancing process of pregnancy; delivery and the puerperium and most of them are avoidable.

Following ICPD (Cairo 1994) meeting, World conference in Beijing, 1995, the Safe Motherhood Technical Consultation at Colombo in 1997 placed maternal mortality into the context of human rights, urging governments to use their political, legal and health systems to fulfil this obligation. Reviewing maternal deaths, using a process called a Maternal Death Review (MDR), is an approach designed to improve obstetric services and make pregnancy safer. The review is easy to implement and does not require external expertise. It is defined as "a qualitative, in-depth investigation of the cause and circumstances surrounding maternal deaths occurring at health facilities. It is particularly concerned with identifying the combination of factors at the facility and in the community that contributed to death and which ones are avoidable".

MPDRs should be continuously conducted by staff at a facility every time a maternal death occurs and at least monthly for perinatal death review in the institution to identify the different causes of and contributing factors to maternal/perinatal deaths and provokes discussion about ways to reduce maternal/perinatal deaths. Every maternal death is unique and provides useful lessons to learn, so it is important to conduct a review process after every death. The review can be used as a mechanism

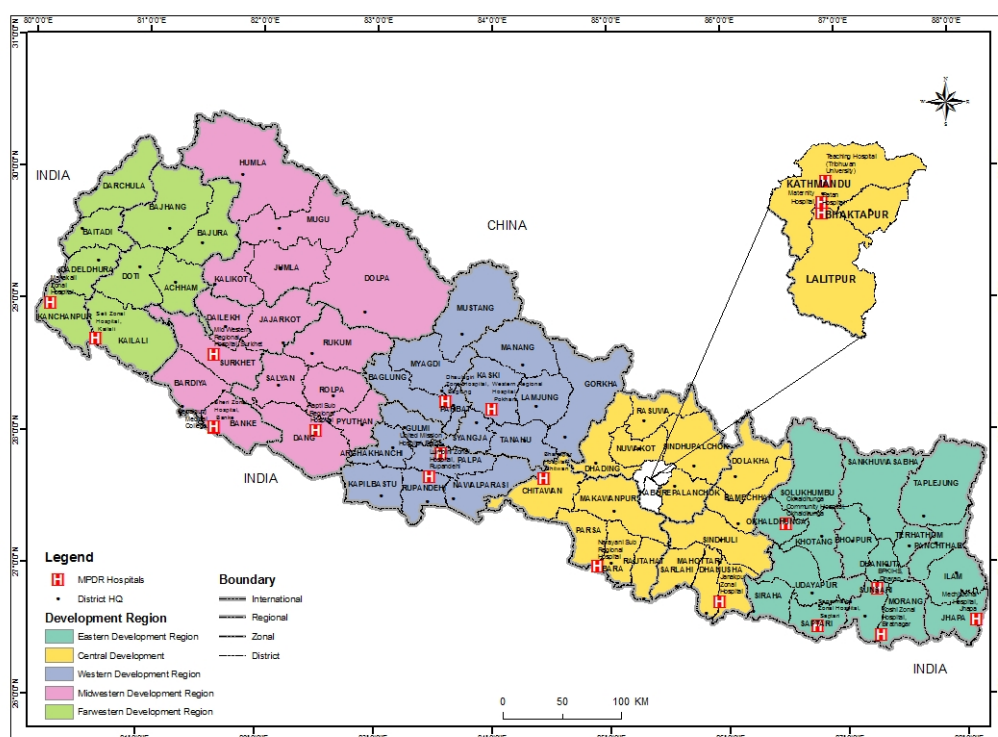
for assessing and improving the quality of care and promoting discussion between colleagues about the practice for identifying ways to improve the clinical care.

MPDR was initiated in 1990 from Maternity Hospital, Thapathali and is regular till date. Maternal mortality and morbidity study (MMMS) was conducted in Kailali, Rupandehi and Okhaldunga districts in 1998 which gave some data regarding maternal mortality and morbidity in Nepal. Perinatal death reviews are done regularly in central hospitals and academic institutes as teaching learning activities. From 2004 MPDR has been implemented in twenty one referral hospitals. There is a strong need to monitor and support these hospitals in the review process and utilizing the review findings in improving quality of care. Map 3.5.1 shows the hospitals where MPDR is being implemented.

MPDR was extended to five additional hospitals in fiscal year 2068/69. These hospitals include:

1. Bharatpur Hospital, Chitwan
2. Narayani Sub-Regional Hospital, Birgunj
3. Western Regional Hospital Pokhara, Kaski
4. Palpa Mission Hospital, Palpa
5. Mid-western Sub Regional Hospital, Dang

**Map 3.5.1: MPDR implemented hospitals, 2012**



### 3.5.3 Issues/Gaps

Institutionalization of MPDR system has been a major issue. FHD is working towards reactivating national and hospital level MPDR committee, developing MPDR implementation guideline, revising the MPDR forms, designing web-based reporting system, orientation to the staff, and revise the national annual review process.

## 3.6 ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH

### 3.6.1 Background

National Adolescent Sexual and Reproductive Health Program (NASRH) is one of the programs of Ministry of Health and Population being implemented under Family Health Division/Department of Health Service.

Nepal developed and published 'National Adolescent Health and Development Strategy' in 2000. An implementation guideline on Adolescent Sexual and Reproductive Health (ASRH) has been developed in 2007 to support district health managers in operationalizing the strategy. In 2008, a draft national ASRH program under the leadership of FHD was developed with the support of GIZ. This national ASRH program was piloted in 2009 in 26 public health facilities in Bardia, Surkhet, Dailekh, Jumla and Baitadi districts. Based on the findings from the pilot intervention, a national ASRH program was designed in 2011 and is now implementing gradually to meet the NHSP II target of making 1,000 health facilities Adolescent Friendly (AFS) by 2015. Up to December 2012 in total 542 health facilities providing adolescent friendly health services.

Since the fiscal year 2009/2010 FHD is scaling-up and implementing the national ASRH program in partnership with different stakeholders (GIZ/GFA, Save the Children, UNICEF, UNFPA, WHO, and IPAS). FHD has developed final national ARSH program package in 2011 which consists of 4 different orientations manuals for district health managers, district stakeholders, health service providers and Health Facility Operation and Management Committees (HFOMCs)/community stakeholders. ASRH secretariat office is in full swing at FHD and ASRH sub-committee meeting effectively functioning which makes the environment to achieve the target of 2015.

#### Goal

The overall goal of national ASRH program in line with the national adolescent health and development strategy 2000 is to promote the sexual and reproductive health status of the adolescents.

#### Objectives

- To increase the availability and access to information on adolescent health and development, and provide opportunities to build skills of adolescents, service providers and educators.
- To increase accessibility and utilization of adolescents health and counseling services for adolescents.
- To create safe and supportive environment for adolescents in order to improve their legal, social and economic status, and
- To create awareness through BCC campaigns and at community level through FCHVs and mothers groups.

#### Targets

The major target of the program is to make 1,000 health facilities as adolescent friendly by 2015 as per the target of NHSP II. In addition, it aims to reduce the Adolescent Fertility Rate (AFR) to 70 per 1,000 women (15-19 yrs.) by 2015, the target of NHSP II and MDG 5b.

### 3.6.2 Major Activities

The national ASRH program focused on the following activities and the achievements in FY 2068/2069 (2011/2012) are:

- Making the public health facilities adolescent friendly
- Increasing demand for the services in the communities through mobilization of different structures at community level.
- Equipping the health facilities with necessary logistics/equipment's to provide services to adolescents by maintaining privacy and confidentiality.
- Train health workers on ASRH and provide IEC materials (8 booklets) and a counseling flipchart on ASRH (through NHEICC).
- Involving adolescent in decision making process in health facilities by involving them as an invitee in Quality Improvement Team (QIT) along with HFOMC.
- Provision of appropriate sexual and reproductive health services to adolescents (family planning, HIV and STI services, safe abortion, counseling etc.)

The following are the activities that have been implemented as per the Adolescent Health and Development (AHD) strategy 2000:

#### 1. Information and Skills

Information dissemination through health facilities

- Printed and distributed IEC/BCC booklets
- Revised, printed and distributed flip chart
- Adolescent job aid (both in Nepali and English) printing and distribution (on Process)

#### 2. Skills Based Training and Orientation to Health Service Providers on ASRH

- Skill based training (4-day training) to mid-level health service providers by National Health Training Center (NHTC).
- Program orientations to Regional Health Managers in all five development regions
- Program orientations to District Health Managers of 38 program districts
- Program orientation to district stakeholders including Reproductive Health Coordination Committee (RHCC) members in the program districts
- Program orientation to service providers in the program districts
- Program orientation to local stakeholders including HFOMC members in program HFs.

#### 3. Health Services and Counseling

- Making health facilities adolescent friendly.
- Integrating adolescent health services into the existing health care delivery system and delivery it in friendly way.
- Involving and establishing links with youth clubs, child clubs, Village Child Protection Committees (VCPCs), NGOs and the private sector to expand and improve service delivery for adolescents.

#### 4. Safe and Supportive Environment

- Functional Adolescent Sexual and Reproductive Health Sub Committee under chair of FHD director.
- Developed Adolescent Friendly Service (AFS) logo to display at HF's
- Wall painting with key message in program implemented HF's
- Community awareness activities through existing structures

### 3.6.3 Implementation Status of ASRH Program

**Table 3.6.1: Implementation Status of ASRH Program**

2065/2066 (pilot)	2066/2067	2067/2068	2068/2069	Remarks
Bardia Surkhet Dailekh Jumla Baitadi	Bara Dhading Morang Gulmi Parbat	Jhapa Dolakha Kavrepalanchowk Kaski Nawalparasi	Udayapur, Rautahat, Baglung, Rolpa, Dadeldhura, Humla, Jajarkot, Rukum, Bajura, Darchula, Banke, Bardiya, Jumla, Dang, Dailekh, Surkhet, Achham, Baitadi, Doti, Kailali, Pyuthan, Kapilbastu, Arghakhanchi, Bajhang, Mahotari, Sindhuli, Kathmandu, Bhaktapur	All of the 38 districts, where ASRH program has been implemented until FY 2068/69 are supported by FHD for sustainability of the program

The districts identified for the scale up of ASRH programme in 2069/70 and the support agencies are: Kanchanpur, Salyan, Mugu, Dolpa, Kalikot (GIZ); Parsa, Dhanusa, Saptari (UNICEF), Sunsari, Sarlahi (UNFPA); Lamjung, Gorkha, Taplejung, Sankhuwasabha, Rasuwa (GoN), Siraha (Save the Children). Similarly the in 81 new health facilities of previously ASRH implemented districts will be scale up in coming fiscal year and support agencies are: Baitadi, Achham by UNICEF, and Kapilvastu, Pyuthan by Save the Children.

#### 3.6.4 Issues

Some of the specific issue/problems identified during implementation of training activities noted in recent regional review meetings and National Review meeting are summarized in Table 3.6.2.

**Table 3.6.2: Issues and recommendations**

Issues	Recommendations	Responsibility
Lack of uniformity in action of different actors	ASRH activity of other agencies to be aligned as per national ASRH program	FHD, UNFPA, GIZ, UNICEF, WHO, SC, IPAS,
Weak recording & reporting system	Incorporate ASRH indicators into HMIS	FHD & Management Division
Quality assurance of ASRH program	Develop quality indicators	FHD/Sub-committee
Lack of ownership at local level	Performance evaluation/appraisal	FHD/Sub-committee/DHO
Inadequate linkage with other programs (FP, SM, HIV etc.)	Advocate for functional integration of ASRH issues in other thematic areas	FHD, agencies working on ASRH
Inadequate IEC/BCC materials - Lack of streamline	Identify innovative approach for IEC/BCC intervention	NHEICC and Partners
Inadequate coordination between FHD and NHTC on ASRH training	Increase coordination	FHD and NHTC
Inadequate information on ASRH issues of unmarried adolescents	Research, NAYS further analysis	EDPs to support FHD Population Division
Lack of standardized message e.g. wall painting, board, etc.	Mainstreaming of IEC /BCC activities/ materials to ASRH program	NHEICC FHD
A number of different activities related to ASRH like population program, school health etc., are implemented in parallel within DHO	Develop better harmonization of different activities related to ASRH with DHO	DHO/DPHO and ASRH focal person



# Disease Control

4.1	Malaria .....	92
4.2	Kala-azar .....	99
4.3	Lymphatic Filariasis .....	103
4.4	Dengue .....	108
4.5	Tuberculosis .....	110
4.6	Leprosy .....	125
4.7	HIV/AIDS and STI.....	144
4.8	Eye Care .....	154

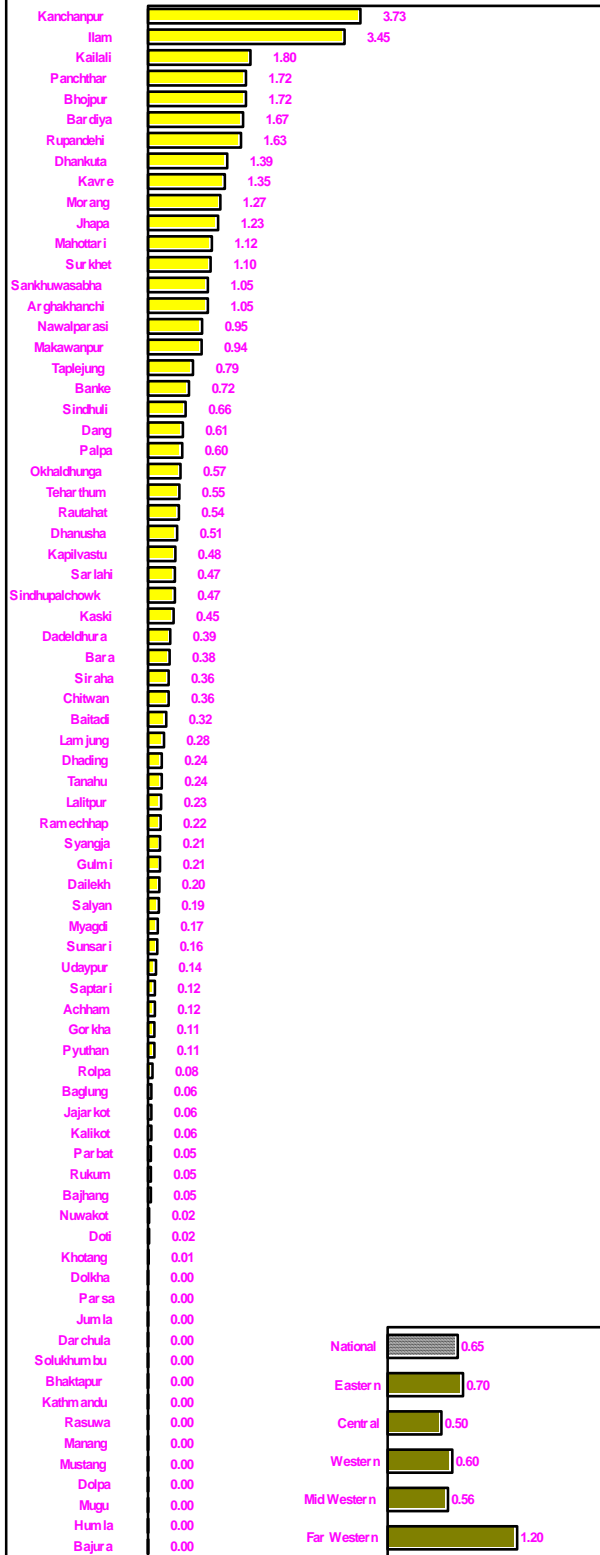
## Curative services

5	Curative services (In-Patient/OPD) .....	160
---	--	-----

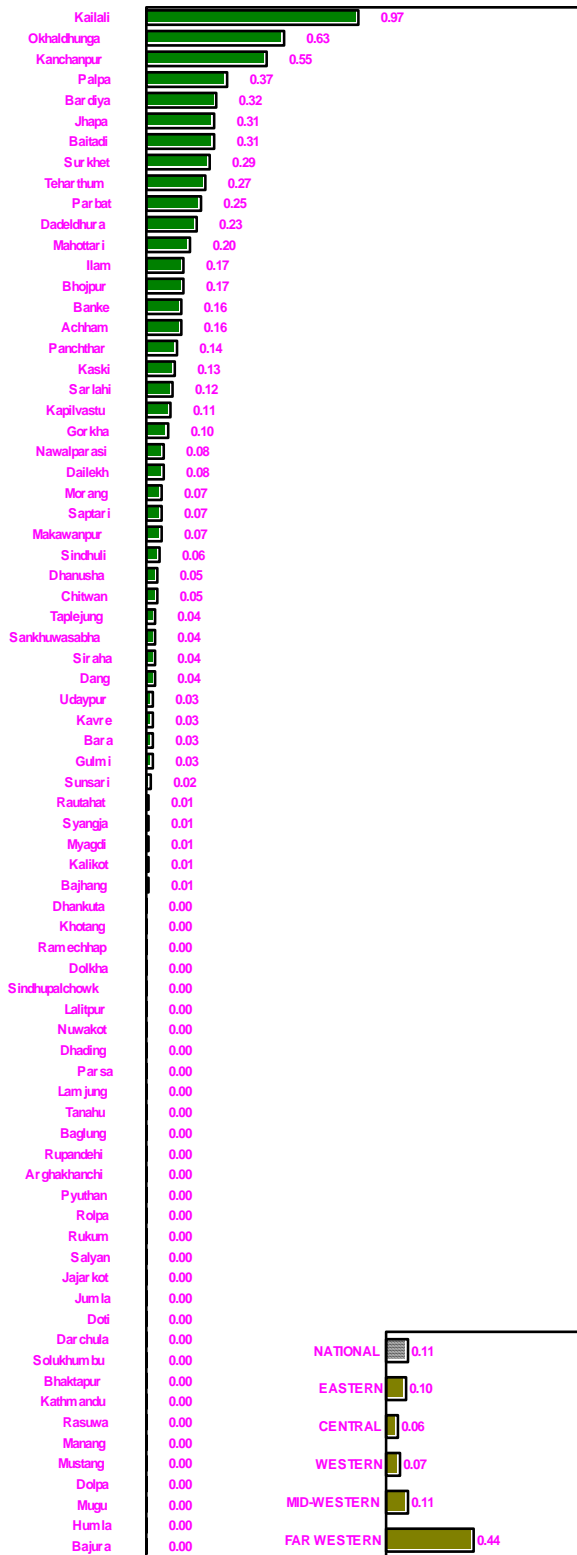
# Malaria

Fiscal Year 2068/69 (2011/2012)

Blood Slides Examined Rate



Malaria Parasite Incidence Rate/1,000 Population



Source: HMIS

# DISEASE CONTROL

## 4.1 MALARIA

### 4.1.1 Background

Malaria control project was first initiated in Nepal in 1954 with the support from USAID (then USOM). The objective of the project was to control malaria mainly in southern Terai belt of central Nepal. In 1958, national malaria eradication program, the first national public health program in the country was launched with the objective of eradicating malaria from the country within a stipulated time period. Due to various reasons the eradication concept was reverted to control program in 1978. Following the call of WHO to revamp the malaria control programs in 1998, Roll Back Malaria (RBM) initiative was launched to address the perennial problem of malaria in hard-core forested, foot hills, inner Terai and valley areas of the hills, where more than 70 percent of the total malaria cases of the country prevail. The high risk of acquiring the disease is attributed to the abundance of vector mosquitoes, mobile and vulnerable population, relative inaccessibility of the area, suitable temperature, environmental and socio-economic factors. Currently malaria control activities are carried out in 65 districts at risk of malaria. The districts are divided into four different categories based on annual parasite incidence per 1,000 populations as follows:

- High risk districts (13): Ilam, Jhapa, Morang, Sindhuli, Dhanusa, Mahottari, Kavre, Nawalparasi, Banke, Bardiya, Kailali, Kanchanpur, Dadeldhura
- Moderate risk districts (18): Panchthar, Dhankuta, Sunsari, Saptari, Siraha, Udaypur, Sarlahi, Rautahat, Bara, Parsa, Makawanpur, Chitwan, Sindhupalchowk, Rupandehi, Kapilvastu, Dang, Surest, Doti
- Low risk Districts (34): districts with minimal transmission
- No risk Districts (10): districts in the Himalayan region

The Global Fund is supporting malaria control program in the high risk 13 endemic districts and moderate risk 18 endemic districts.

#### Goal

By 2016, incidence of locally transmitted malaria will be reduced by 90% of current levels and number of VDCs having indigenous malaria cases will be reduced by 75% of current level (2010)

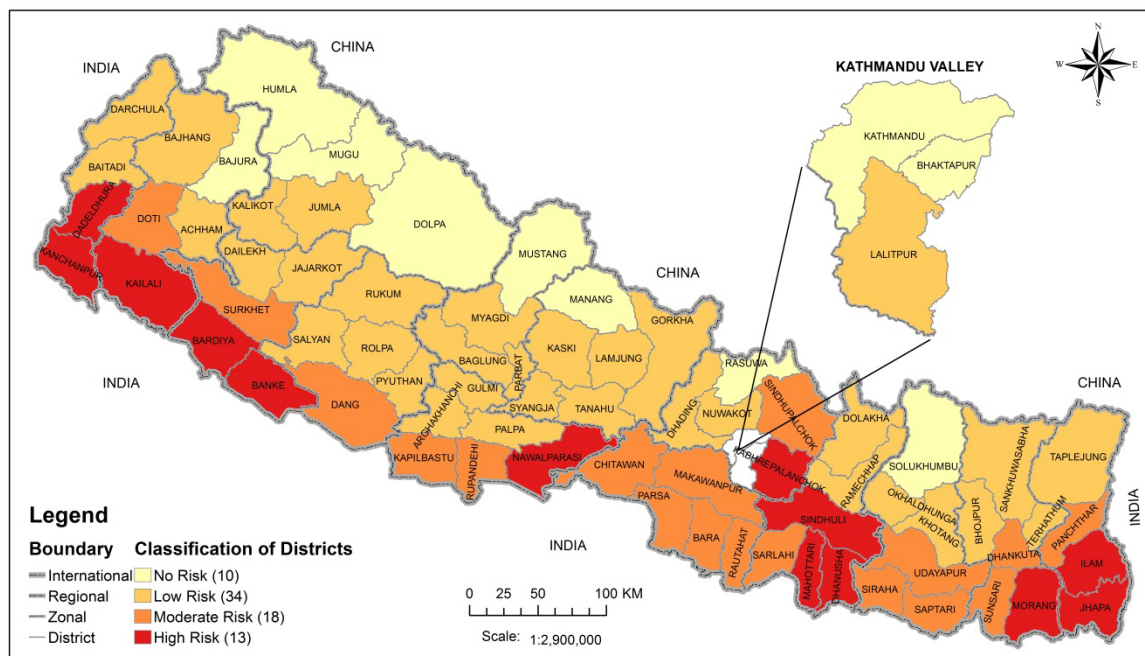
#### Objectives

1. To update the stratification of malaria endemic areas and align activities outlined in the strategic plan accordingly in different strata by 2012.
2. To achieve at least 90% vector control coverage of malaria risk population residing in high and moderate risk areas by 2016.
3. To achieve 90 % screening of all suspected malaria cases for parasitological diagnosis and 100 % effective treatment of all confirmed malaria cases according to the national guidelines by 2016.
4. To intensify passive malaria surveillance, introduce weekly reporting including mandatory zero reporting system, case notification and case based active malaria surveillance and initiate early response to focal outbreaks by 2016.

## Disease Control: Malaria

5. To ensure that 90% of population at malaria risk adopt at least one malaria preventive measures by combination of BCC approaches by 2015.
6. To develop and sustain the required program management capacity and structures at all levels to effectively and efficiently deliver a combination of targeted interventions by 2014.

**Map 4.1.1: Classification of Malarious Districts - Nepal**



## Strategies

### Vector Control and Personal Protection

- Two rounds of routine indoor residual spraying (IRS) will be carried out annually in each high risk VDCs unless LLIN population coverage in that VDC exceeds 80%
- In the event of limited insecticide stocks, round 2 of the IRS campaign may be withheld and target VDCs will be prioritized according to malaria burden.
- Insecticides for IRS will be WHOPEs approved and will be selected by the insecticide Technical Working Group (TWG) on the basis of likely cost effectiveness (insecticide resistance profiles for primary vectors will be taken into consideration).
- IRS operations will aim to cover at least 80 percent of households in targeted VDCs.
- WHOPEs approved long-lasting insecticide treated bed nets (LLINs) will be provided free of charge to all people living in high risk VDCs (1 LLIN per 2 people every three years - assuming a three year life for the LLIN).
- LLIN delivery campaigns will take place in one third of targeted VDCs in each district every year so that total coverage of the target population is achieved by the year three and maintained thereafter. Additional WHOPEs approved LLINs will be provided to all pregnant women attending ANC check-ups in high risk VDCs (one LLIN per pregnancy).

### Early Diagnosis and Appropriate Treatment

- Diagnostic services for malaria will be provided free of charge at all public sector health facilities.
- Microscopy will form the diagnostic method of choice at hospital and primary health care centre level and some selected health posts and sub-health posts.

- Below primary health care centre level falciparum specific RDTs will form the diagnostic method of choice in high and moderate risk areas. To minimize wastage, use of RDTs will be strictly limited to diagnosing clinically suspected cases only.
- EDCD will implement a comprehensive quality assurance system for malaria microscopy and RDTs through the referral laboratory network (District, Regional and Central). This will be linked to needs-based refresher training.
- Anti-malarial drugs will be provided free of charge from all public sector health facilities.
- Anti-malarial drugs will be provided free of charge through the Female Community Health Volunteer (FCHV) network in high risk area according to national treatment guidelines.
- Artemisinin-based combination therapy (ACT) will be provided for confirmed falciparum malaria cases throughout the country as per national treatment guidelines.
- Chloroquine will be provided for confirmed vivax cases and suspected malaria cases as per national treatment guidelines.
- Primaquine will be provided for the radical cure of confirmed vivax cases as per national treatment guidelines.
- National malaria treatment guidelines will be reviewed regularly and revised as appropriate based on the findings of drug resistance surveillance.
- National malaria treatment guidelines (and any revisions to them) will be implemented at all public sector health facilities throughout the country within one year of ratification by the Regional Technical Advisory Group on Malaria (RTAG-M). Recommended anti-malarial, including ACT, will be incorporated into the essential drug list.

#### **Malaria Surveillance and Epidemic Preparedness**

- A simple malaria outbreak early warning system will be established in selected public health facilities (one sentinel site/endemic district). This will be complimentary to existing surveillance networks.
- Technical and operational linkages between EDCD and epidemic prone districts will be strengthened for an effective coordinated action in response to outbreaks.
- In the event of an outbreak, focal IRS will be carried out in the ward(s) where the outbreak was detected and in all adjacent wards.
- In the event of an outbreak, district-level teams will carry out RDT-based active case detection in the outbreak ward(s) and in all adjacent wards. Confirmed cases will be treated according to national treatment guidelines.

#### **Behaviour Change Communication (BCC)**

- Carefully tailored locally appropriate malaria related IEC/BCC will be delivered through 5 methodologies: interpersonal communication (health workers, religious and community members); primary and secondary education (malaria incorporated into vector borne disease control module); mass media (electronic and print); special events (malaria day); and, high level advocacy.
- Final development and production of BCC materials will be outsourced to private/INGO/NGO sector specialists.
- Maximum use will be made of free promotional opportunities such as articles in newspapers, and news bulletins, and dramas on television and radio.

#### **Program Management**

- Capacity building: A holistic package of carefully tailored technical and management training will be developed and will be implemented through central and district level staff in order to strengthen the functionality of service provision in the periphery.

## **Disease Control: Malaria**

---

- Planning: Technical Working Groups (TWGs) will be established and maintained for all key technical areas including: diagnostics; case management; vector control; IEC/BCC; monitoring & evaluation; and operational research.
- Existing technical guidelines, including guidelines on case management, vector control, epidemic preparedness and control, monitoring drug and insecticide resistance will be updated by the TWGs/TA and disseminated.
- Policies, strategies and guidelines will be reviewed regularly by TWGs in light of findings from periodic evaluations and in view of recommendations resulting from surveillance and operational research activities.
- To ensure equitable and evidence-based distribution of services, allocation of all program commodities will be carried out by the relevant TWG.
- A National Technical Advisory Group for Malaria (NTAG-M) will be established. The group will have representation from MoHP, EDCD, NPHL, NHEIC, VBDRTC, DHOs, the INGO/NGO sector and WHO (and other key agencies as appropriate). This committee will meet annually in order to review programmatic progress and to ratify any policy/strategy changes.

### **Operational Research**

- The program will implement a modest needs-based package of operational research in association with implementing partners and national and international research institutes.
- Research priorities will be reviewed annually by TWG and the resulting research agenda will be ratified by the NTAG Malaria.

### **Community Participation**

- Enhance community participation and partnership building in malaria control through the progressive expansion of Roll Back Malaria (RBM) initiative

## **4.1.2 Major Activities**

### **1. Case Detection and Treatment**

Blood slide collection from fever cases residing in areas at risk of malaria were continued through health workers and health institutions. In malaria endemic areas without laboratory facilities, fever cases were classified as clinical malaria based on clinical signs and symptoms and were treated for malaria without mandatory blood smear collection. However, in high risk 13 districts and 18 moderate risk districts, pan specific rapid diagnostic test kits (detecting both PF and PV) were introduced to facilitate early diagnosis and appropriate treatment (EDAT) at peripheral institutions that do not have easy access for microscopic diagnosis. A total of 2,857 people with confirmed malaria cases and 68,054 clinical malaria cases were treated in the FY 2068/69. Besides, the program gave high emphasis on strengthening the skills of health personnel at all levels of health service delivery for early diagnosis and appropriate treatment, referral and management of severe and complicated malaria cases.

### **2. Prevention and Control Measures**

Selective and sustainable control measures are the main tools for malaria control. Two rounds of Selective Indoor Residual Spraying (IRS) in malarious areas of 15 districts was carried out based on criteria set for IRS which included areas with previous history of outbreaks, new settlements and ongoing development projects in high-risk malarious areas, epidemic-prone situations, high prevalence of *P. falciparum* cases, and areas with drug-resistant malaria. In addition to IRS, activities to promote use and acceptance of long lasting insecticidal bed nets (LLIN) were also carried out under Global Fund program in 13 districts. LLINs are also distributed to the pregnant women residing at high risk VDCs in 13 high risk districts through ANC clinics under DHOs/DPHOs.

### 3. Epidemic Prevention and Control

Outbreak preparedness and response of malaria has been operationalized through district rapid response teams. For this purpose a stock of anti-malarial drugs was maintained in outbreak prone districts. Indoor residual spraying operations were carried out in outbreak-affected areas. Malaria rapid diagnostic test was continued in all high endemic districts along with the expansion of on the spot microscopy centre as an attempt to strengthen early diagnosis and appropriate treatment. Behaviours Change Communication (BCC) activities were carried out to promote community partnership in these areas. *P. falciparum* affected areas were regularly monitored for any indication of emergence of drug resistance. World Malaria Day is celebrated in 25 April with the slogan of 'Counting malaria out' in 13 highly endemic districts, 5 regions and in centre.

### 4. Training/Orientation

The following trainings were conducted during the FY 2068/69 (2011/2012)

- Basic and Refresher Training on Malaria Microscopy for Laboratory Technicians and Assistants by VBDRTC.
- Training on Malaria control to health workers.
- Review of Malaria control program through quarterly review meetings at five regions.
- Field based entomological training and surveillance for VCO/MI.

### 5. Operational Researches

The following researches were carried out;

- Routine longitudinal entomological surveillance in the month of August – October of the year 2011 for effective malaria vector control operations.
- Vector insecticide resistance study in Kanchanpur, Dang, Nawalparasi and Dhanusa districts.

## 4.1.3 Analysis of Achievement

### 1. Surveillance

This year a total of 146,917 blood smears were collected against the target of 150,000. However, only 91 percent (133,730) of collected blood smears could be examined. During this fiscal year 33,320 blood samples were tested with pan-specific malaria RDT. The RDT test result showed 3.4 percent (1,138) positive and the rest (1,719) out of total positive cases (2,857) were confirmed with microscopy. About 9 percent of peripheral blood smears could not be examined due to the lack of laboratory facilities, shortage of skilled human resources, reduced accountability of related health workers and delayed transportation of the slides to the laboratories with examination facility. However, the country is moving towards adopting malaria pre-elimination strategy (2011-2016) instead of present control strategy which gives emphasis on at least 90 percent of malaria diagnosis based on parasitological (microscopy) or serological (RDT) confirmation.

### 2. Malariometric Indicators

The number of laboratory confirmed malaria cases has decreased from 3,241 in 2067/68 to 2,857 in 2068/69; however the proportion of *P. falciparum* cases has substantially increased from 15.7 percent in the last year to 46 percent in this year. The number of clinical malaria cases reported during this fiscal year has decreased by 18.5 percent compared to previous fiscal year. The Annual

## **Disease Control: Malaria**

Parasite Incidence (API) rate per 1000 is decreased from 0.16 in 2067/68 to 0.11 in 2068/69. Slide Positivity Rate (SPR) has decreased in comparison to the previous year. Annual Blood Examination Rate (ABER) has slightly decreased from 0.66 in 2067/68 to 0.65 in 2068/69. This is important to note that proportion of PF has increased by 25 percent and there were no major outbreaks in any part of the country during FY 2068/69 (Table 4.1.1). The data has revealed that imported malaria cases are remarkably high in number. This demands more attention for cross border monitoring and surveillance of malaria.

A total of 133,730 slides were examined and 2,857 were detected as malaria-positive cases. Out of the total positive cases, 1,719 were detected by malaria microscopy and 1,138 were detected by RDT in 2068/69. Among all positives (Microscopy and RDT), FWDR together contributed to nearly 35 percent of total cases. The least number of positive cases was reported from the MWDR (12%). The Annual Blood Slide Examination Rate (ABER) remained same in 2066/67 and in 2067/68 and slightly decreased to 0.65 in 2068/69 where as Annual Parasite Incidence (API) increased from 0.14 per 1,000 in 2066/67 to 0.16 in 2067/68, and decreased to 0.11 per 1,000 in 2068/69. Proportion of *P. falciparum* (PF) decreased by more than 6 percent from 20.5 percent in 2066/67 to 15.7 in 2067/68, however it is substantially increased by 20 percent to 46 in 2068/69.

**Table 4.1.1: Malarionometric Indicators**

<b>Fiscal Year</b>	<b>Total slides examined</b>	<b>Total +ve</b>	<b>ABER (%)</b>	<b>SPR (%)</b>	<b>API (/1000)</b>	<b>% IMP</b>	<b>% PF</b>	<b>CM</b>
2066/67	136,719	2,920	0.66	2.13	0.14	32.70	20.48	10,8179
2067/68	106,598	3,241	0.66	2.39	0.16	37.64	15.71	83,527
2068/69	133,730	2,857	0.65	2.13	0.11	33.81	46.00	68,054

### **3. Age Group Distribution**

Majority (73%) of cases were among people over 5 years of age in 2068/69. In all regions different pattern of age group distribution was observed in contrast to the similar pattern in 2067/68. The eastern region showed the highest proportion (97%) of the cases were among people over 5 years of age, the least (41%) in the mid-western region, 58 percent in the far-western region, 87 percent in the western region and 89 percent in the central region.

### **4. Indoor Residual Spraying**

Like previous years, two rounds of Indoor Residual Spraying were carried out in FY 2068/69 in high risk VDCs of 15 districts.



#### 4.1.4 Issues and Recommendations

**Table 4.1.2: Recommendations Made During Regional and National Reviews in 2067/68 and Actions Taken in 2068/69**

<b>Problems/Constraints</b>	<b>Action to be taken</b>	<b>Action taken</b>
Confirmation of diagnosis of suspected /clinical malaria cases	Microscopy trainings, RDT availability Validation of clinical malaria cases	<ul style="list-style-type: none"> <li>▪ Regular training has been provided</li> <li>▪ Initiation to supply drugs and logistics regularly and timely with close coordination with LMD/RMS</li> </ul>
Orientation on malaria program to health workers	Training programs are proposed in GFATM	<ul style="list-style-type: none"> <li>▪ Training program in 31 districts are planned in GFATM</li> </ul>
Defining population at risk	Micro stratification of malaria risk areas	<ul style="list-style-type: none"> <li>▪ Micro stratification is ongoing</li> </ul>
LLIN distribution in ANC	Distribution plan and budget for transportation has been disbursed to districts	<ul style="list-style-type: none"> <li>▪ The instruction has been given to provide LLIN to the pregnant through ANC in high risk VDCs</li> </ul>
Malaria case reports	HMIS data and Program data should be consistent at district and center	<ul style="list-style-type: none"> <li>▪ Districts are directed for complete reports</li> <li>▪ EDCD intensified the verification and started to line list the cases</li> </ul>

Note: Please see Annex

**4.2.1 Background**

The government of Nepal has committed to the regional strategy to eliminate Kala-azar and with India and Bangladesh is signatory of the memorandum of understanding that was formalized during the World Health Assembly held in May 2005 on Kala-azar elimination, with the target of achieving the disease elimination by 2015.

In 2005, Epidemiology and Disease Control Division (EDCD) of Department of Health Services formulated a National Plan for the Elimination of Kala-azar which is divided into three phases: Preparatory Phase: 2005-2008; Attack Phase: 2008-2015 and Consolidation Phase: 2015 onwards. The overall goal of the plan is “To contribute to improving the health status of vulnerable groups and at risk populations living in Kala-azar endemic areas of Nepal through the elimination of Kala-azar so that it is no longer a public health problem”. The target is: “To reduce the annual incidence of Kala-azar to less than 1 per 10,000 populations at the district level by 2015”. Expected outputs of the Plan are six related to the different components of the system that has to be strengthened in order to achieve the elimination goal. One of the outputs is to develop a functional network that provides diagnosis and case management with special outreach to the poorest.

EDCD has revised the recommendations for the diagnosis and treatment of Kala-azar in Nepal. The rK39 test kit has been accepted and introduced as a rapid diagnostic test kit and Miltefosine as a first line of treatment in Kala-azar except in some situations. This strategy is being pilot tested in Saptari district that has in turn served as a demonstration district for all other endemic areas to be trained.

Kala-azar is a vector-borne disease caused by parasite *Leishmania donovani*, transmitted by the sand fly, *Phlebotomus argentipes*. The disease characterized by fever for more than two weeks with splenomegaly, anaemia, progressive weight loss and sometimes darkening of the skin. In the endemic areas, children and young adults are its principal victims. The disease is fatal if it is not timely treated. Kala-azar and HIV/TB co-infections have emerged as a health problem in recent years.

Over the last decade, there have been some significant advances both in the diagnosis and treatment of Kala-azar. The rK39 dipstick test kit, a rapid and easily applicable serological test has been demonstrated to have high sensitivity and specificity in validity studies conducted in the Indian subcontinent. For the first time, an oral drug- Miltefosine has proven to be efficacious in drug trials and has been registered for the use in Kala-azar.

**Goal**

Reduce incidence of Kala-azar to less than 1 case per 10,000 populations at district level by 2015.

**Objectives**

- Reducing the incidence of Kala-azar in the endemic communities including the poor, vulnerable and unreached population;
- Reducing case fatality rates from Kala-azar;
- Treatment of PKDL to reduce the parasite reservoir; and
- Prevention and treatment of Kala-azar and HIV–TB co-infections.

## Strategies

Based on the regional strategy proposed by South East Asia Kala-azar technical advisory group and the adjustments proposed by the Nepal expert group discussions, Government of Nepal, Ministry of Health and Population has adopted the following strategies in the implementation of the Kala-azar elimination program in Nepal.

- Improve Program Management
- Early Diagnosis and Complete Treatment (introducing new technology)
- Integrated Vector Management
- Effective Disease Surveillance and Vector Surveillance
- Social Mobilization and Partnerships
- Clinical, Implementation and Operational Research

### 4.2.2 Major Activities

#### Case Detection and Treatment

As in the previous fiscal year various training programs for health workers at different health institutions were conducted so as to develop the desired competency in the prevention and control of Kala-azar to achieve the Kala-azar elimination by 2015. EDCD continued conducting training programs for the laboratory personnel from the district hospitals on rK-39 dipstick diagnosis of Kala-azar. Currently health institutions in Kala-azar endemic districts are using this diagnostic technique. Peripheral level health workers were trained on appropriate skills required for prevention and control of vector borne diseases including Kala-azar. Similarly, as in the previous year, Vector Borne Disease Research and Training Centre (VBDRTC) also conducted training on Kala-azar and other Vector-Borne Diseases (VBDs) for District Health Officers (DHOs, Medical Officers (MOs), Public Health Officers (PHOs) and other health personnel. Kala-azar elimination activities were carried out in Saptari District as a pilot program.

#### Indoor Residual Spraying in Priority-selected Kala-azar Affected Areas

Two rounds of selective Indoor Residual Spraying (IRS) was carried out in prioritised Kala-azar affected areas of 12 districts based on the national guideline on IRS. IRS for the prevention and control is carried out only in those villages where Kala-azar cases were recorded in previous year or in areas with an outbreak in the recent past. Collateral benefit for the Kala-azar elimination program has been gained from the IRS used for the prevention and epidemic response for malaria in Kala-azar endemic and Kala-azar non endemic districts too.

#### Continuation of Treatment through Miltefosine and Amphotericine B

As in the previous fiscal year, Miltefosine (oral drug) as first line drug and Amphotericin B as second line drug have been continually utilised for the treatment of Kala-azar in endemic districts and Sukra Raj Tropical Hospital in this fiscal year 2068/2069.

### 4.2.3 Analysis of Achievement

#### Vector Control

Indoor residual spraying in two cycles was conducted in Kala-azar affected areas of 11 endemic districts with 100 percent achievements against the set targets.

## Disease Control: KALA-AZAR

### Case Detection and Treatment

A total number of 171 cases were reported and treated in different health facilities in 2068/69 (Table 4.2.1). Out of the 171 cases 118 (69%) cases were native and 53 (31%) were foreigner. Among 171 cases, 168 cases were improved after the treatment while 3 patients (1.75%) died.

**Table 4.2.1: Kala-azar Cases & Incidence per 10,000 by Region & District FY 2066/67 to 2068/69**

Districts/Health Institutions	FY 2066/67 (2009/2010)			FY 2067/68 (2010/2011)			FY 2068/69 (2011/2012)		
	No. of cases	Incidence	Death no	No. of cases	Incidence	Death no	No. of cases	Incidence	Death no
Jhapa	23(2)	0.53	1	22(0)	0.53	0	19(4)	0.22	1(0)
Morang	107(0)	1.21	0	175(0)	1.95	3	1(0)	0.01	0(0)
Sunsari	34(0)	0.52	1	30(0)	0.49	0	16(0)	0.21	0(0)
Saptari	128(15)	2.03	0	66(4)	1.03	0	0(0)	0	0(0)
Siraha	65(4)	0.86	0	69(1)	1.01	0	11(0)	0.16	0(0)
Udaypur	5(0)	0.12	0	11(0)	0.24	0	1(0)	0.03	0(0)
<b>Eastern endemic districts total</b>	<b>362(21)</b>	<b>0.88</b>	<b>2</b>	<b>373(5)</b>	<b>0.90</b>	<b>3</b>	<b>57(4)</b>	<b>0.13</b>	<b>1(0)</b>
Dhanusa	32(2)	0.47	0	42(15)	0.58	0	0(0)	0	0(0)
Mahottari	177(117)	2.51	0	145(91)	2.49	0	8(19)	0.12	0(0)
Sarlahi	134(73)	1.36	0	107(62)	1.12	0	45(30)	0.57	0(0)
Rautahat	43(5)	0.57	0	8(0)	0.13	0	2(0)	0.03	2(0)
Bara	9(2)	0.13	0	9(0)	0.13	0	2(0)	0.03	0(0)
Parsa	1(0)	0.01	0	1(0)	0.01	0	0(0)	0	0(0)
<b>Central endemic districts total</b>	<b>396(199)</b>	<b>0.95</b>	<b>0</b>	<b>312(168)</b>	<b>0.85</b>	<b>0</b>	<b>57(49)</b>	<b>0.13</b>	<b>2(0)</b>
Okhaldhunga	12(0)	-	0	2(0)	0	0	0(0)	0	0(0)
Makawanpur	3(0)	-	0	1(0)	0	0	0(0)	0	0(0)
Rasuwa	1(0)	0	0	1(0)	0	0	0(0)	0	0(0)
Dang	2(0)	0	0	1(0)	0	0	0(0)	0	0(0)
Palpa	5(0)	0	0	1(0)	0	0	1(0)	0	0(0)
Kailali	1(0)	0	0	0(0)	0	0	0(0)	0	0(0)
Kalikot	1(0)	0	0	0(0)	0	0	0(0)	0	0(0)
Dadeldhura	1(0)	0	0	0(0)	0	0	0(0)	0	0(0)
Jajarkot	1(0)	0	0	1(0)	0	0	0(0)	0	0(0)
Rolpa	1(0)	0	0	0(0)	0	0	0(0)	0	0(0)
Salyan	0(0)	0	0	1(0)	0	0	0(0)	0	0(0)
Rupandehi	1(0)	0	0	0(0)	0	0	0(0)	0	0(0)
Surkhet	1(0)	0	0	3(0)	0	0	3(0)	0	0(0)
Achham	0	0	0	1(0)	0	0	0(0)	0	0(0)
Pyuthan	0	0	0	1(0)	0	0	0(0)	0	0(0)
Bardiya	0	0	0	1(0)	0	0	0(0)	0	0(0)
Khotang	0	0	0	1(0)	0	0	0(0)	0	0(0)
Dhading	0	0	0	1(0)	0	0	0(0)	0	0(0)
Solukhumbu	0	0	0	1(0)	0	0	0(0)	0	0(0)
Dolpa	0	0	0	2(0)	0	0	0(0)	0	0(0)
BPKIHS	3	0	0	76(0)	0	1	0(0)	0	0(0)
Teku Hospital	NA	0	0	23(0)	0	0	0(0)	0	0(0)
Kanti Children	NA	0	0	2(0)	0	0	0(0)	0	0(0)
Bheri Zonal Hospital, Banke	NA	0	0	1(0)	0	0	0(0)	0	0(0)
<b>Others total</b>	<b>33</b>	<b>0</b>	<b>0</b>	<b>121</b>	<b>0</b>	<b>1</b>	<b>0(0)</b>	<b>0</b>	<b>0(0)</b>
<b>National Total</b>	<b>791 (220)</b>	<b>1.33</b>	<b>2</b>	<b>806 (173)</b>	<b>0.94</b>	<b>4</b>	<b>118(53)</b>	<b>0.14</b>	<b>3(0)</b>

Figure in the parenthesis shows the foreigners' cases

Reported cases of Kala-azar increased from 791 in 2066/67 to 806 in 2067/68, and declined to 118 cases in 2068/69. EDR and CDR both reported same cases (57) reflecting the incidence of 0.13 per 10 in areas at risk population. However, 53 cases are foreigner cases among the total reported 118 cases. The highest number of cases was recorded in Sarlahi, and followed by Mahottari and Jhapa. Even, if we exclude the foreigner cases (Indian) Sarlahi has the highest number of the Kala-azar cases where there are 45 cases as shown in Table 4.2.1. Since the reported cases are compilation of

reports from government health institutions mainly, the real scenario may be different. It is known that cases of Kala-azar also cross the border for treatment at the hospitals and private clinics from Nepal to India or vice versa.

**Kala-azar Incidence**

Kala-azar incidence per 10,000 in areas at risk populations ranged from 0.57 in Sarlahi to 0.03 in Udaypur reflecting the national incidence of 0.14 per 10,000 in areas at risk population (excluding foreign cases). Out of the 12 endemic districts, only 9 districts have reported Kala-azar cases and all the reporting districts have an incidence of less than 1, none of the districts have an incidence of more than 1 case per 10,000 in areas at risk population (including foreigner cases). The incidence indicated in the table 4.2.1 may not be the real incidence and it indicates that the completeness of the reporting is poor. In the other hand, EDCD has recorded 742 cases including 148 foreigners with 15 native patients' deaths in 2068/69. Among the total recorded 148 (20%) are foreigner cases. Due to lack of detailed case classification, the cases are not reflected in the above Table 4.2.1. However, EDCD started to line list the all Kala-azar cases from 2012.

**4.2.4 Issues and Recommendations**

**Table 4.2.2: Recommendations Made During the Regional and National Reviews of 2067/68 and Actions Taken During 2068/69**

Issues	Recommendations	Responses
<ul style="list-style-type: none"> <li>▪ Early case detection and complete treatment of Kala-azar</li> </ul>	<ul style="list-style-type: none"> <li>▪ Orientation/Training of health workers</li> <li>▪ Active case detection in Kala-azar endemic districts</li> </ul>	<ul style="list-style-type: none"> <li>▪ Trainings were organized of physician and lab staff</li> <li>▪ Active case detection is planned</li> </ul>
<ul style="list-style-type: none"> <li>▪ Early detection, investigation and response to epidemics</li> <li>▪ Shortage of human resources for outbreak investigation and control</li> <li>▪ Delayed response due to unavailability of staff</li> <li>▪ Incomplete reporting</li> </ul>	<ul style="list-style-type: none"> <li>▪ To strengthening the outbreak response</li> <li>▪ To create post of 2 MO and 2 HA at EDCD to strengthen existing RRT</li> <li>▪ Create posts of one epidemiologist, one surveillance assistant in regions and one surveillance assistant in districts</li> <li>▪ Restructure all level RRTs so as to involve other potential stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>▪ Efforts are ongoing,</li> <li>▪ Strengthen HMIS for verification of the cases</li> </ul>

Note: Please see Annex

## 4.3 LYMPHATIC FILARIASIS

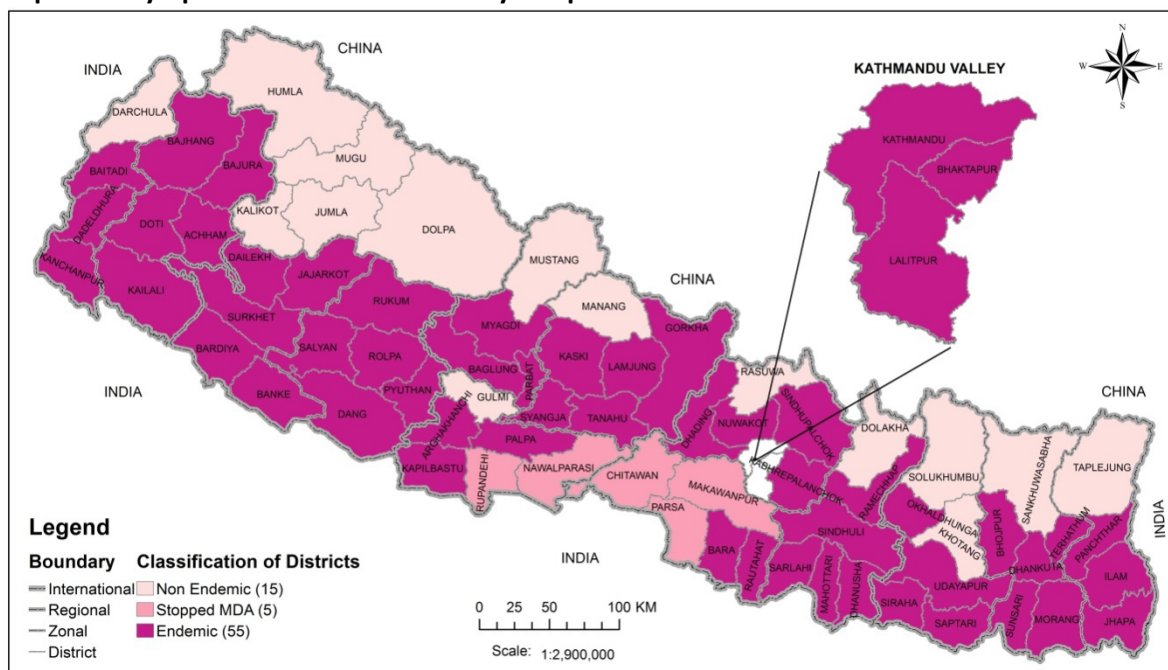
### 4.3.1 Background

Lymphatic Filariasis (LF) is a public health problem in Nepal. The disease is a major cause of morbidity, primarily, lymphoedema of legs and hydrocele and impedes socio-economic development in many endemic areas of the country. The disease is prevalent in the rural and slum areas of the country, predominantly affecting the poorer sector of the community. The LF mapping completed in 2005 by using Immunochromatography card test (ICT) revealed 60 out of 75 districts are endemic for lymphatic filariasis in the country. The disease has been detected in different topographical areas ranging in attitude from 300 feet above sea level in the plain Terai ecological zone to 5,800 feet above sea level in mountainous areas. More filarial cases are observed in Terai when compared with the hills.

*Wuchereria bancrofti* is the only recorded parasite in Nepal. The mosquito, *Culex quinquefasciatus*, an efficient vector of the disease has been recorded in all the endemic areas of the country. The government of Nepal is fully committed to eliminate the disease from the country within the stipulated period.

Epidemiology and Disease Control Division under the Department of Health Services has formulated a National Plan of Action (2003-2020 AD) for the Elimination of Lymphatic Filariasis in Nepal by establishing a National Task Force under the Chairpersonship of Director-General, Department of Health Services. The government had initiated the implementation of Mass Drug Administration (MDA) in Parsa district in 2003. Since then the program has expanded gradually in other endemic districts as well. MDA has been stopped in 5 districts (Parsa, Makawanpur, Chitwan, Nawalparasi and Rupandehi) in fiscal year 2067/68 after completion of 5 rounds of MDA.

Map 4.3.1: Lymphatic Filariasis Endemicity - Nepal



**Goal**

- People of Nepal no longer suffer from LF

**Objectives**

- To eliminate LF as a public health problem by 2020
- To interrupt the transmission of lymphatic filariasis;
- To reduce and prevent morbidity;
- To provide de-worming benefit through use of Albendazole to endemic community especially to the children; and
- To reduce mosquito vectors through application of suitable and available vector control measures (Integrated Vector Control Management).

**Strategy**

- Interruption of transmission by yearly Mass Drug Administration using two drug regimens (Diethylcarbamazine Citrate and Albendazole) for six years.
- Morbidity management by self-help and with support using intensive but simple, effective and local hygienic techniques.

**Target**

- To cover with MDA all LF endemic districts by 2014 and achieve <1% prevalence in all endemic districts after 5 years of MDA by 2018

**4.3.2 Major Activities**

- **Activities at national level**
  - National Task Force Committee meeting
  - Planning meeting
  - Interactions with media, professionals organizations, civil society, MPs etc.
  - Monitoring and supervision
  - Logistics support/supply
  - IEC/BCC activities
- **Activities at regional level**
  - Regional coordination meeting
  - Monitoring and supervision
- **Activities at implementation unit level**
  - Planning meetings
  - Training of health workers
  - Advocacy/social mobilization/IEC/BCC
  - Monitoring and supervision
- **Activities at community level**
  - Volunteers orientation
  - Advocacy/social mobilization/IEC/BCC
  - Implementation of MDA activities
  - Monitoring and supervision
- **Other activities**
  - Media mobilization during MDA
  - Coordination and collaboration with all stakeholders
- Operational research and survey
- Quality control
- Follow up of microfilarimia survey in MDA districts

## Disease Control: LYMPHATIC FILARIASIS

- Base line study of microfilaria in 9 new districts
- Post MDA survey in 12 districts
- Remapping in 3 non-endemic districts
- Pre- Transmission Assessment Survey in 16 districts
- Procurement of Tab DEC
- Production of revised IEC material, checklist, reporting, recording, and guidelines for MDA campaign
- Technical support by WHO in filaria elimination campaign
- Interaction program on professional NGOs, Journalists, hospitals and stakeholders
- Review and planning workshop on MDA campaign in elimination implemented districts
- Urban coverage implementation strategy
- Management of Post MDA complication in centre
- Morbidity management camp
- Advertisement for MDA program.
- MDA carried out as per the suggestions given by the experts who investigated the severe adverse effect (SAEs) after MDA to change the schedule of MDA from summer to winter months

Table 4.3.1 shows scaling up and coverage of MDA.

**Table 4.3.1: Scaling Up and Coverage of MDA**

Fiscal Year	# Districts	# of tablets Albendazole	# of tablets DEC	# people at risk	# eligible people	# people treated	Coverage (%)
2062/63 (2005/2006)	3	6,250,000	1,498,800	2,075,812	1,960,977	1,729,059	82.6
2063/64 (2006/2007)	21	12,850,000	30 million	10,844,541	10,247,915	8,777,110	85.5
2064/65 (2007/2008)	<b>Mass Drug Administration (MDA) is not carried out due to some technical reason in this FY.</b>						
2065/66 (2008/2009)	21	9,258,000	40 million	10,779,864	10,025,009	8,280,343	76.8
2066/67 (2009/2010)	30	14,000,000	40 million	14,162,850	13,339,351	11,508,311	81.3
2067/68 (2010/2011)	36	16,500,000	14.5 million	15,505,463	14,533,412	12,276,826	79.1
2068/69 (2011/2012)	46	NA*	NA*	20,017,508	18,616,282	13,546,889	68.8

Note: Total districts covered with MDA program till date are 46, where 5 districts (Parsa, Makawanpur, Chitwan, Nawalparasi and Rupandehi) have been phased out after completion of 5 rounds of MDA. \* Not available



Map 4.3.2: Mass Drug Administration Coverage in 46 Districts (FY 2068/69)

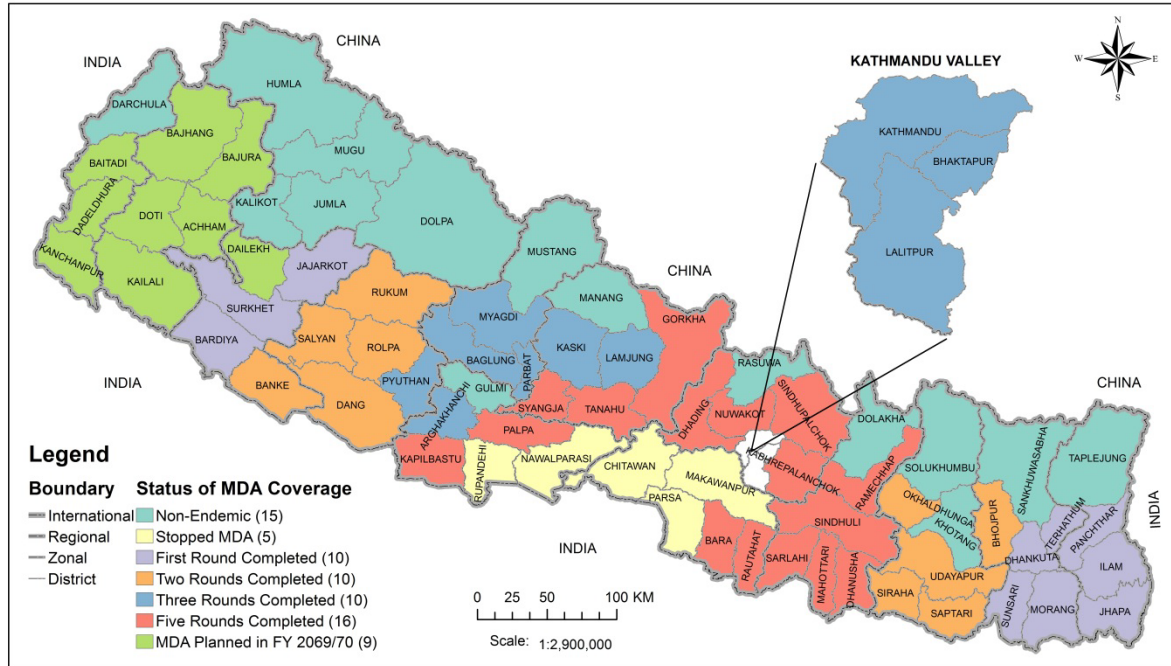


Table 4.3.2: LF cases found during the MDA campaign in 46 Districts

Summary of LF MDA: 2011-12

22-24 Poush 2068 - 32 districts and 21-23 Magh 2068- 14 districts

S.N.	Districts	Morbidity cases			
		Elephantiasis	Hydrocele	Hand, breast swelling	Total
1	Rautahat	67	265	226	558
2	Bara	130	571	76	777
3	Kapilvastu	302	797	132	1,231
4	Sarlahi	353	1421	166	1,940
5	Dhadhing	403	1,154	196	1,753
6	Nuwakot	704	1,000	175	1,879
7	Dhanusa	50	150	25	225
8	Mahottari	70	568	82	720
9	Ramechhap	1	47	2	50
10	Sindhuli	10	41	5	56
11	Sindhupalchowk	192	474	50	716
12	Kavrepalanchowk	145	244	16	405
13	Palpa	6	34	3	43
14	Tanahu	0	0	0	0
15	Syangja	0	0	0	0
16	Gorkha	6	77	0	83
17	Kathmandu	356	150	55	561
18	Lalitpur	96	68	4	168
19	Bhaktapur	219	63	46	328
20	Kaski	17	54	21	92
21	Parbat	17	89	3	109
22	Myagdi	4	36	1	41
23	Baglung	3	12	0	15
24	Arghakhanchi	5	11	2	18
25	Pyuthan	3	31	1	35
26	Lamjung	31	102	1	134
27	Banke	470	1,538	243	2,251
28	Bhojpur	8	47	2	57
29	Dang	60	130	15	205
30	Okhaldhunga	2	24	17	43

**Disease Control: LYMPHATIC FILARIASIS**

31	Rolpa	3	20	0	23
32	Rukum	3	13	2	18
33	Salyan	3	42	6	51
34	Saptari	44	206	6	256
35	Siraha	54	217	17	288
36	Udaypur	21	61	6	88
37	Dhankuta	16	67	0	83
38	Illam	0	0	0	0
39	Jhapa	476	2,982	512	3,970
40	Morang	803	3,016	651	4,470
41	Panchthar	24	89	3	116
42	Sunsari	133	357	97	587
43	Tehrathum	4	36	7	47
44	Bardiya	725	2,762	684	4,171
45	Jajarkot	4	28	3	35
46	Surkhet	6	153	0	159
	<b>Total</b>	<b>6,049</b>	<b>19,247</b>	<b>3,559</b>	<b>28,855</b>

**Major Challenges**

- Out of 60 endemic districts, till FY 2068/2069 (2011/2012) LF elimination program was carried out in 46 districts. To achieve the goal and objective of the elimination program, LF MDA need to be initiated in 9 additional districts and the 6 rounds of MDA has to be completed.
- More efforts for resource mobilization (budget and logistic support) are required.
- Morbidity management component need to be addressed more meticulously through establishment of management clinics.
- The active surveillance is to be expanded and strengthened in order to monitor the program performance in five MDA stopped districts (Parsa, Makawanpur, Chitwan, Nawalparasi and Rupandehi).
- Mass campaign for social mobilization.
- Public awareness about the disease.
- To increase the coverage of MDA in urban communities, especially in Kathmandu valley where the coverage is less than 70 percent.
- Media mobilization during MDA campaign
- Effective coordination and collaboration with all stakeholders
- Guidelines on Lymphatic Filariasis Elimination and strategies to be revised.

**Table 4.3.3: Recommendations Made During the Regional and National Reviews of 2067/68 and Actions Taken During 2068/69**

<b>Issues</b>	<b>Recommendations</b>	<b>Responses</b>
<ul style="list-style-type: none"> <li>▪ MDA related severe adverse events management</li> <li>▪ LF related morbidity management</li> <li>▪ LFE program expansion</li> <li>▪ Poor MDA achievement in urban areas</li> </ul>	<ul style="list-style-type: none"> <li>▪ Budget allocation</li> <li>▪ Training</li> <li>▪ MDA will be expanded</li> <li>▪ Social mobilization</li> <li>▪ Media management</li> <li>▪ SAE management</li> </ul>	<ul style="list-style-type: none"> <li>▪ Budget allocated SAE management &amp; supervision</li> <li>▪ Training of physicians of major hospitals</li> <li>▪ MDA expanded to 10 new districts in FY 2068/2069</li> <li>▪ Clubs and media were mobilized</li> </ul>

**4.4.1 Background**

Dengue, a mosquito-borne disease emerged in Nepal in the form of Dengue Fever (DF), Dengue Hemorrhagic Fever (DHF) and Dengue Shock Syndrome (DSS). The earliest cases were detected as early as 2006. The sporadic cases continued and outbreaks occurred in 2009-2010. Initially most of the reported cases had travel history to neighbouring country (India), however lately indigenous cases were also reported.

Dengue outbreak in 2006 had shown its face with 32 confirmed dengue cases (among the total cases identified, 94 percent were adults; male to female ratio was 4:1), followed by 27 cases in 2007, 10 cases in 2008, 30 cases in 2009 and 917 cases in 2010 with major outbreak in Chitwan and Rupandehi districts. In 2010/11, different districts showed dengue endemicity as reported in previous years. The affected districts were Kanchanpur, Kailali, Banke, Bardiya, Dang, Kapilvastu, Parsa, Rupandehi, Rautahat, Sarlahi, Saptari and Jhapa, indicating spread throughout the country from west to east lying in the plain Terai region. During 2011, 79 confirmed cases were reported from 15 districts with the highest case incidence in Chitwan (n=55). In 2012, total of 82 confirmed cases were reported.

*Aedes aegypti* (mosquito-vector) has been identified in 5 peri-urban areas of Terai region (Kailali, Dang, Chitwan, Parsa and Jhapa) during entomological surveillance conducted by EDCD during the year 2006-2010, indicating local transmission of dengue.

Studies carried out in close collaboration of WARUN/AFRIMS in the year 2006 by EDCD/NPHL showed all 4 sub-types (DEN-1, DEN-2, DEN-3 and DEN-4) of Dengue virus circulation in Nepal.

**Goal**

To reduce the morbidity due to Dengue Fever (DF), Dengue Hemorrhagic Fever (DHF) and Dengue Shock Syndrome (DSS)

**Objectives**

- To develop an integrated vector control approach for prevention and control.
- To develop capacity on diagnosis and case management of DF/DHF/DSS
- To intensify health education/IEC activities and
- To strengthen the surveillance system for prediction, early detection, preparedness and early response to outbreak of dengue.

**Strategies**

- Early case detection, diagnosis, management and reporting of the DF, DHF & DSS
- Regular monitoring of DF/DHF/DSS cases and surveillance through the EWARS
- Mosquito vector surveillance in different municipalities.
- Integrated vector control approach: A combination of several approaches directed towards container management and source

#### 4.4.2 Major Activities

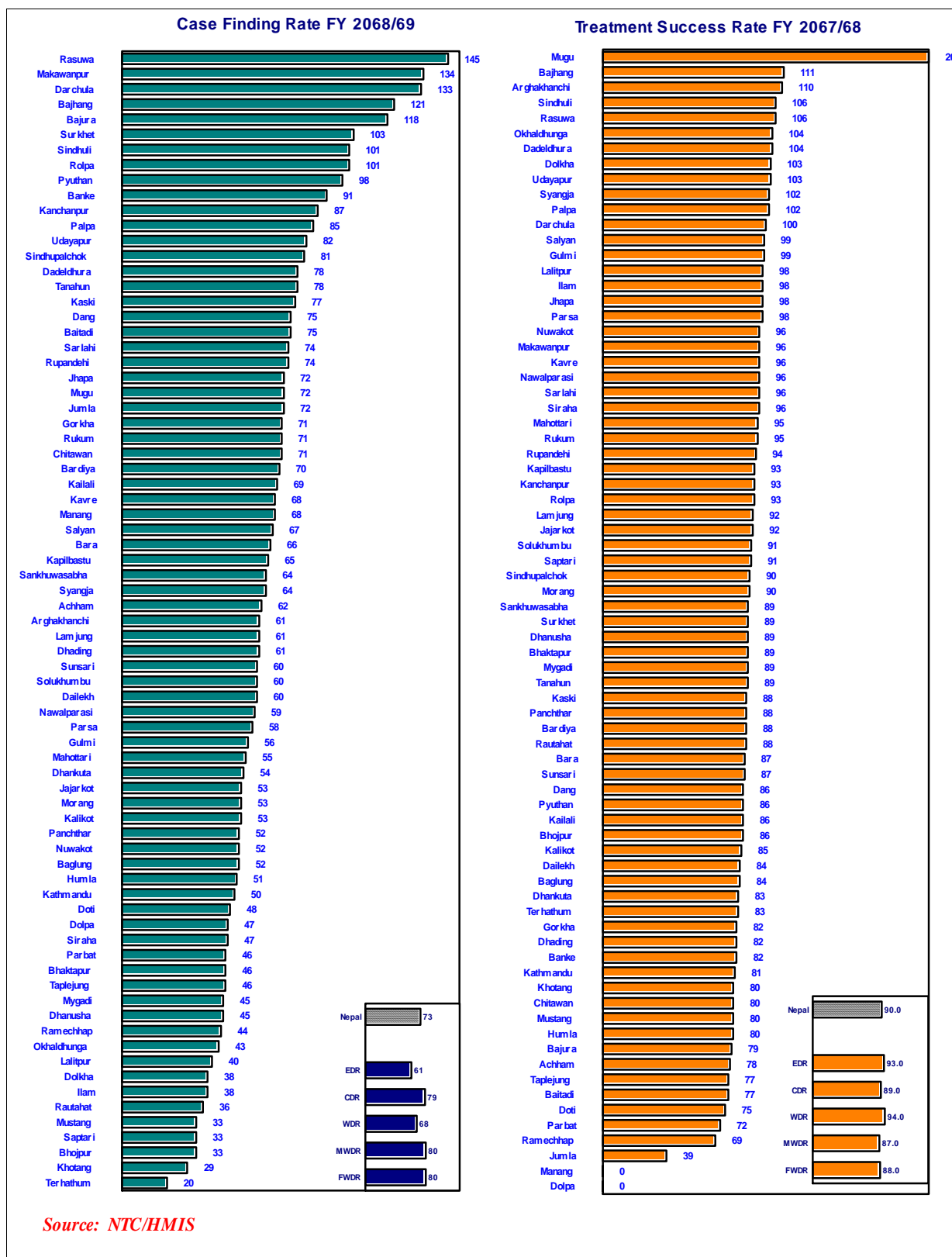
To achieve the goal of controlling dengue, following activities were carried out during 2068/69 (2011-2012).

- Training on dengue case detection, diagnosis, management and reporting to physicians and health workers
- Laboratory diagnostic support with rapid diagnostic test kit (IgM)
- Dengue case monitoring and vector surveillance
- Dengue vector larvae (*Aedes aegypti*) search and destroy program in dengue affected districts
- Advocacy meeting and interaction in the centre and dengue affected districts with the stakeholders for the prevention and control of Dengue
- Integrated Vector Management
- Health Education Message (leaflet) development and dissemination
- Operation research
- BCC on dengue and chickun guniya control – 2 times
- Dengue and chickun guniya vector search and destroy campaign to control dengue epidemics – 2 times
- Fogging programme to control dengue epidemics – 1 time
- Orientation to FCHV and other stakeholders in prevention of dengue and chickun guniya fever – 3 times

**Table 4.4.1: Recommendations Made During the Regional and National Reviews of 2067/68 and Actions Taken During 2068/69**

Issues	Recommendations	Responses
Inadequate dengue control interventions in districts	<ul style="list-style-type: none"> <li>▪ Increase the budget</li> <li>▪ Orientation</li> <li>▪ Strategy development and planning</li> <li>▪ Advocacy</li> <li>▪ Vector management</li> </ul>	<ul style="list-style-type: none"> <li>▪ Increment in the district and regional budget were made</li> <li>▪ Orientation to doctors and health workers conducted</li> <li>▪ Strategy development and planning workshop done</li> <li>▪ Advocacy meetings organized</li> <li>▪ Vector larvae search and destroy activity done</li> </ul>

# Tuberculosis



Source: NTC/HMIS

## 4.5 TUBERCULOSIS

### 4.5.1 Background

Tuberculosis (TB) is a major public health problem in Nepal. About 45 percent of the total population is infected with TB, of which 60 percent are adult. Every year, 45,000 people develop active TB, out of them 20,580 have infectious pulmonary disease. These 20,000 are able to spread the disease to others. Treatment by Directly Observed Treatment Short course (DOTS) has reduced the number of deaths; however 5,000-7,000 people are still dying per year by TB. Expansion of this cost effective and highly successful treatment strategy has proven its efficacy in reducing the mortality and morbidity in Nepal. By achieving the global targets of diagnosing 70 percent of new infectious cases and curing 85 percent of these patients will prevent 30,000 deaths over the next five years. High cure rates and Sputum conversion rate will reduce the transmission of TB and lead to a decline in the incidence of this disease, which will ultimately help to achieve the goal and objectives of TB control.

DOTS have successfully been implemented throughout the country since April 2001. The NTP has coordinated with the public sectors, private sectors, local government bodies, I/NGOs, social workers, educational sectors and other sectors of society in order to expand DOTS and sustain the present significant results achieved by National Tuberculosis Program (NTP). A total of 1,141 DOTS treatment centres and 3,110 sub centres are established till 16<sup>th</sup> July 2012 for treatment of TB. The treatment success rate stands at 90 percent and case finding rate of 73 percent in the year 2011/2012. At the national level 36,764 TB patients have been registered in 2068/69 and out of them 15,059 infectious (sputum smear positive new cases) cases are being treated under the DOTS strategy in NTP during the FY 2068/69 (2011/2012).

#### Vision

Vision of National Tuberculosis Program is “TB free Nepal”.

#### Mission

- To ensure that every TB patient has access to effective diagnosis, treatment and cure
- To stop transmission of TB
- To prevent development of multi drug resistant TB
- To reduce the social and economic toll of TB

#### Goal

- To reduce the mortality, morbidity and transmission of tuberculosis until it is no longer a public health problem in Nepal.

#### Objectives

- Achieve universal access to high-quality diagnosis and patient-centred treatment
- Reduce the human suffering and socioeconomic burden associated with TB
- Protect poor and vulnerable populations from TB, TB/HIV and multi-drug-resistant TB
- Support development of new tools and enable their timely and effective use

## Targets

Targets linked to the MDGs and endorsed by the Stop TB Partnership:

- by 2005: detect at least 70 percent of new sputum smear-positive TB cases and cure at least 85 percent of these cases
- by 2015: reduce prevalence of and death due to TB by 50 percent relative to 1990
- by 2050: eliminate TB as a public health problem (<1 case per million population)

### 4.5.2 Major Activities

Key activities of NTP are as follows:

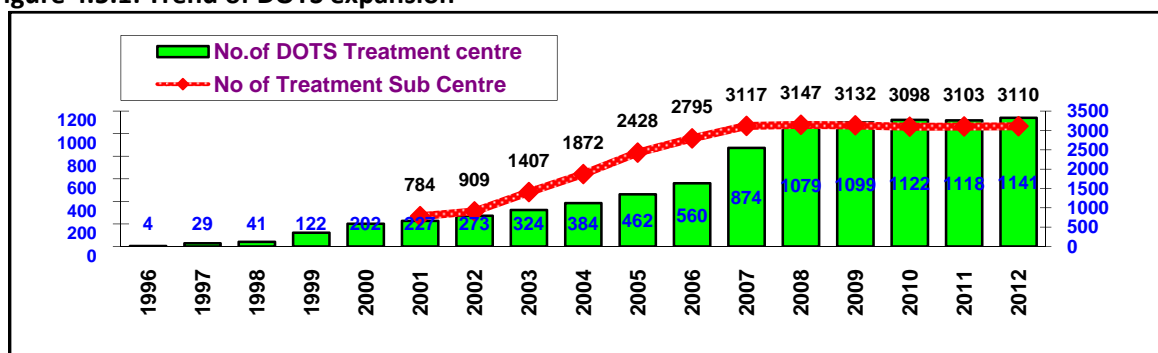
- Provide effective chemotherapy to all patients in accordance with national treatment policies.
- Promote early diagnosis of people with infectious pulmonary TB by sputum smear examination.
- Establish a network of microscopy centres and a system of quality control of sputum smear examination.
- Establish treatment centres for every 100,000 population within the existing primary health care system.
- Provide continuous drugs supply to all treatment centres. This includes systems for procurement, storage, distribution, monitoring and quality control of drugs.
- Maintain a standard system for recording and reporting
- Monitor the result of treatment and evaluate progress of the program, by analysing periodic treatment outcome in cohorts of patients.
- Provide continuous training and supervision for all staff involved in the NTP, at each level.
- Pilot and expand health communication project to improve communication between health workers and TB patients and to promote community awareness about TB.
- Expansion of income generation and skill development training activities to needy DRTB patients in all over the country.
- Strengthen cooperation between non – government organizations (NGOs), bilateral aid agencies and donors involved in the NTP. Coordinate NTP activities with other primary health care activities, especially leprosy and AIDS/STD programs.
- Carry out research programs to improve the NTP performance.

### 4.5.3 Analysis of Achievement

#### 1. DOTS and Microscopy Centre Expansion

Nepal has adopted microscopy diagnosis and DOTS treatment policy in order to control TB. Thus full coverage of microscopy center for diagnosis and DOTS for treatment of TB patients is must to enhance the program. Starting with 4 DOTS center and microscopy center in 1996, the TB control program initiated a momentum toward its goal. Till today the expansion of DOTS center and microscopy center is almost complete throughout the country. Even the number of DOTS center and microscopy center is slightly increasing over every year in the country to make more accessible for the people who are unreached. In this regard, non-state actors including private sectors have important contribution by technical and logistic support.

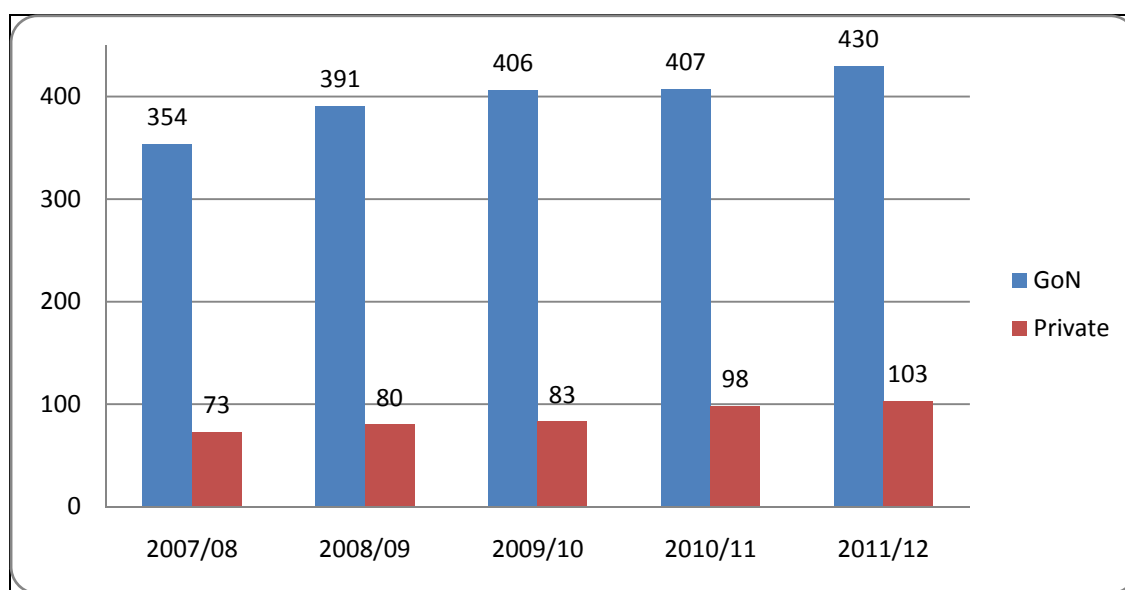
**Figure 4.5.1: Trend of DOTS expansion**



Source: NTC

NTP has rapidly expanded DOTS strategy initiated in 1996 with 4 pilot centres and by mid July 2012 the number of DOTS centres have reached to 1,141 with 3,110 sub centres (Figure 4.5.1) and integrated in the general health services throughout the country. In mid-July 2012, number of microscopy centres reached to 533 (Gov-430 and partners/I-NGOs-103). Alongside the government health institutions major partners in DOTS implementation are the private sectors, nursing homes and polyclinics, cement and cigarette factories, I/NGOs health clinics, eye hospitals, prisons, UMN hospitals, refugee camps, police hospitals, medical colleges, municipalities, Village Development Committees, District Development Committees. Different approaches have been adopted in difficult to access areas. DOTS by community volunteers and I/NGOs has been found effective in some hill and mountain districts. All diagnosed TB patients are being treated with DOTS in the reporting years.

**Figure 4.5.2: Expansion of microscopy centres**



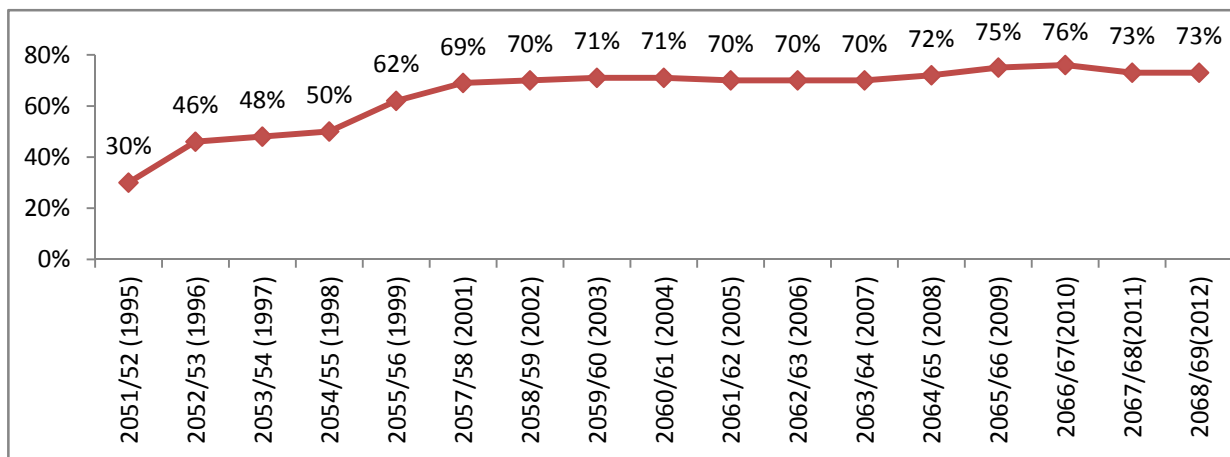
Source: NTC

## 2. Case Finding

The program is now moving into the consolidation phase. The global target defined by WHO to diagnose at least 70 percent and treat at least 85 percent of the estimated number of sputum smear positive new cases has been fulfilled since FY 2058/59 (2002/03) to till now by building partnerships with private sectors, medical colleges and community. As TB spreads easily in areas of high population density, many TB patients are found in the cities and Terai areas. Case finding rate remains static (73%) throughout previous two years.



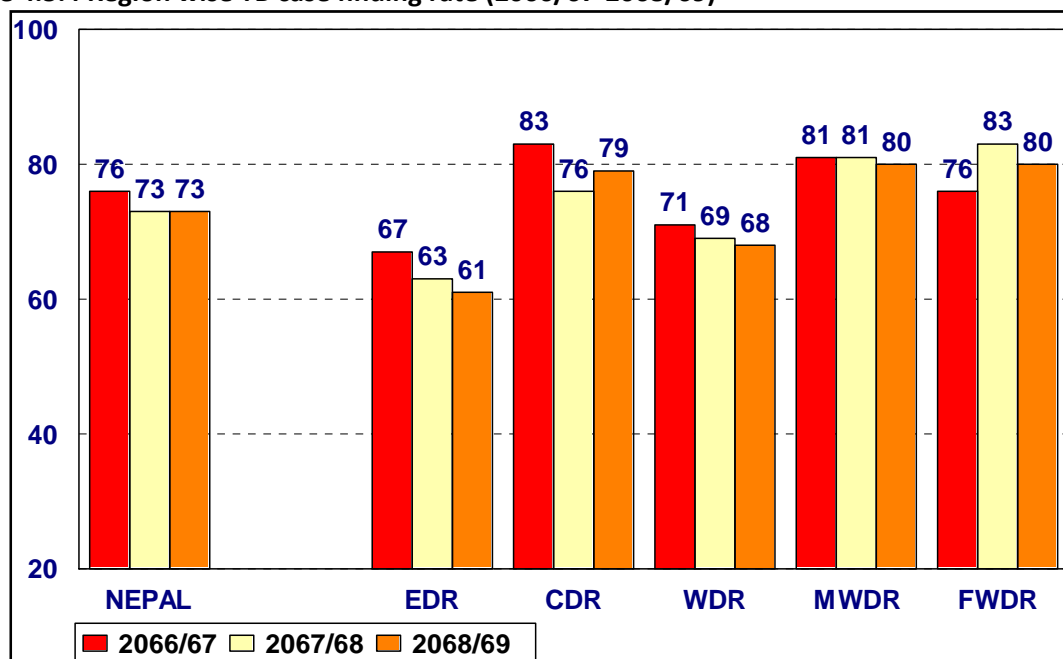
Figure 4.5.3: TB case finding trend (in percent)



Source: NTC

There is great increment in case finding rate in the period of 17 years from 2051/52 to 2068/69 (Figure 4.5.3). This increment is due to the strengthening of microscopy centers and DOTS centers throughout the country. Case finding rate is reported 73 percent as compared to estimated positive cases in 2068/69 which was same in 2067/68. These rates are meeting the national target for case detection. However, the case finding rate in 2068/69 is slightly decreasing as compared to fiscal years 2065/66 and 2066/67. The decrease in case finding is due to vacant post of medical doctors, lab personnel and paramedics in remote areas of the country.

Figure 4.5.4 Region wise TB case finding rate (2066/67-2068/69)



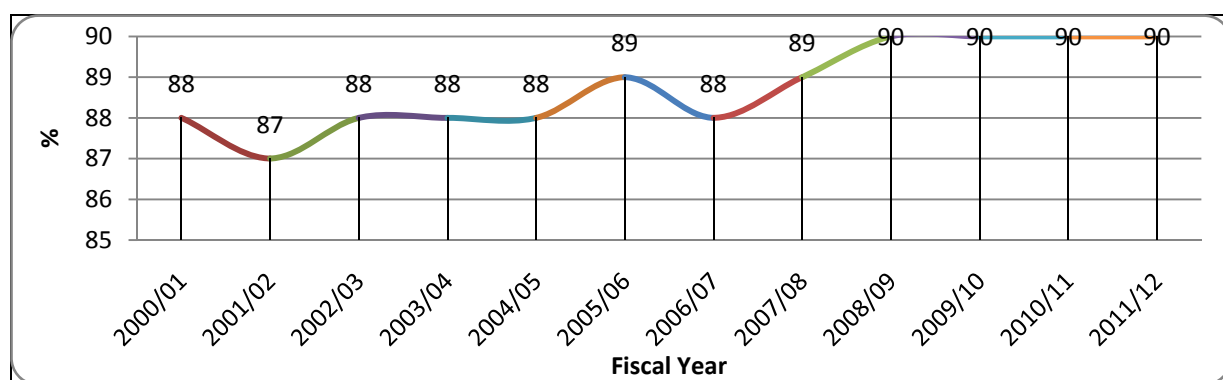
Source: NTC

The case finding rate varies by regions. There are both positive and negative results compared to previous years. There is slight increase in CDR compared to previous year while there is slight decrease in other regions. Though most of the regions have this rate close to national target of 70 percent (Fig 4.5.4).

### 3. Treatment Outcome

DOTS was introduced in Nepal in April 1996 covering 1.7 percent of the population in four selected districts. Now it has expanded to all the districts of Nepal. TB patients have been treated with DOTS achieving 90 percent treatment success rate. This rate has been sustained since DOTS was introduced. Treatment success rate is almost same (around 90%) from FY 2008/9 to 2011/2012 (Figure 4.5.5).

Figure 4.5.5: Treatment outcome rate (FY 2000/01 – 2011/12)

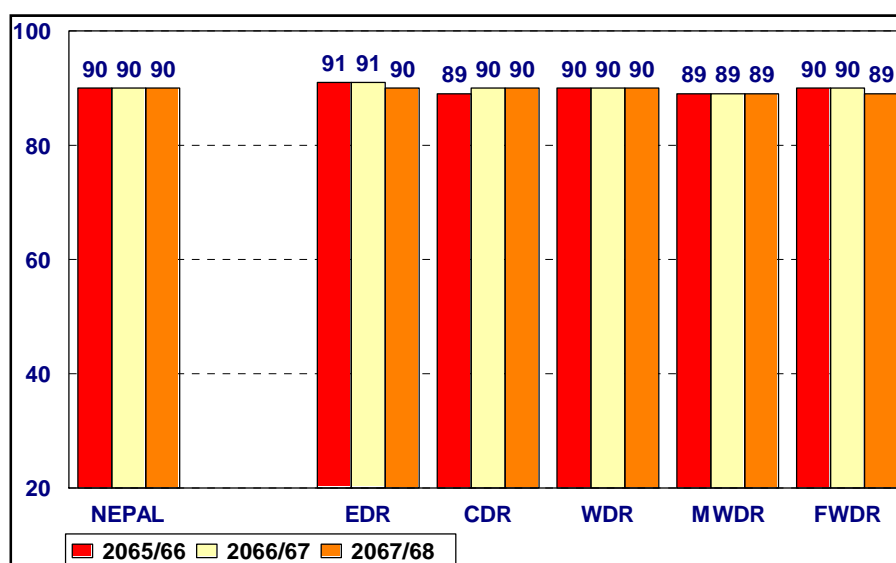


Source: NTC

### Treatment Success Rate

Case finding, case holding and treatment with DOTS are the main activities of NTP. All registered TB patients are treated with DOTS. About 95 percent of diagnosed TB patients are supervised by health workers and the rest are by FCHV and community volunteers during the treatment. As a result, an encouraging result of treatment success rate has been achieved in all development regions of new smear positive cases (Figure 4.5.6).

Figure 4.5.6 Region wise treatment success rate (2066/67-2068/69)



Source: NTC

The treatment success rate for sputum positive cases is almost constant in all five development regions in previous three years 2066/67 to 2068/69 (Figure 4.5.7). Out of total sputum positive cases registered in 2067/68, ninety percent cases were completed their treatment course in 2068/69. Three regions namely eastern, central and western have 90 percent treatment success rate in 2068/69 where as two regions mid-western and far western have 89 percent success rate in the same period. Overall treatment success rate in review period remains in national target for case holding. Thus, case holding is quite satisfactory and this is due to the effective monitoring and supervision.

#### **4. Laboratory Network in National TB Control Program**

##### **Sputum Microscopy and Microscopy Network**

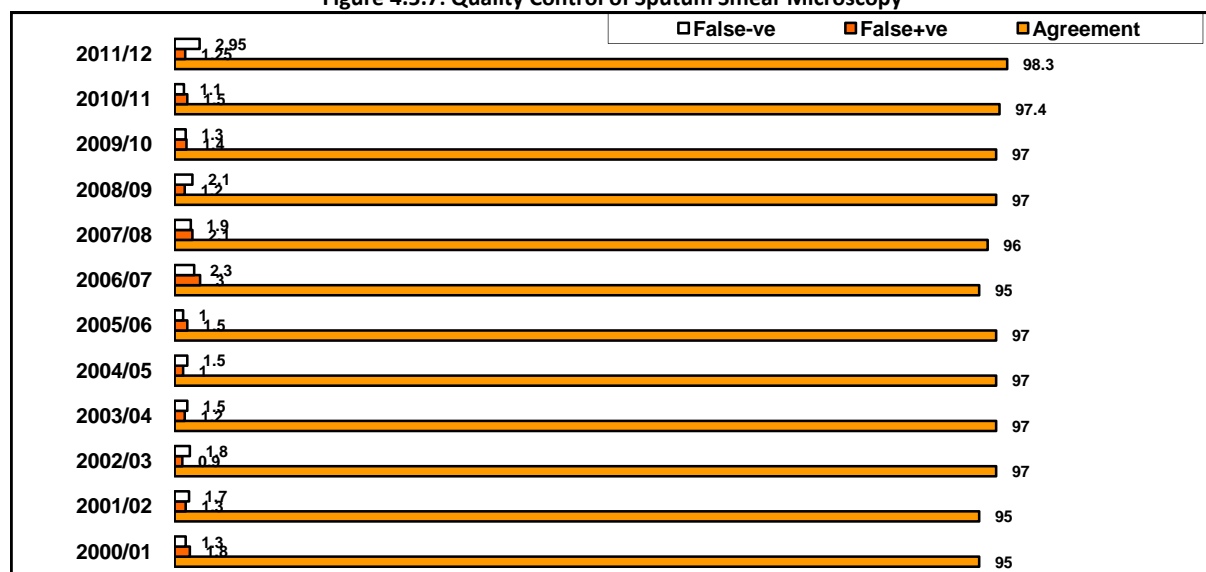
Tuberculosis diagnosis and monitoring rely in Sputum microscopy of NTP because of its low cost and easier to perform. Direct sputum microscopy is popular worldwide. At present there are 533 microscopy centres catering the sputum microscopy examination throughout the country. Most of the microscopy centres are established in government setting and few are established in non-governmental organization and private sectors. NTP is providing reagents, chemicals and equipment to every microscopy centres and they are providing sputum smear examination free of cost. To reduce the workload in high burden microscopy centres, Florescence Microscopy is provided and they are functional now. This microscope does the work ten times more than Bright field Microscope.

External Quality Assurance (EQA) is another important task for this program. There is good laboratory networking between microscopy centres (MCs) DHO/DPHO, RQCC and the NTC. Microscopy centres send their slides to their respective regional quality control centres via district health office. Five Regional quality control centres (RQCC) are functioning smoothly with help of skilled and trained quality control assessors. BNMT/NATA is doing EQA in eastern region; NTC is working for EQA at central region. RTC Pokhara is working for EQA at western region, Mid-western regional health Directorate is working for EQA in Mid-Western Region and NLR Dhangadhi is working for EQA at Far-Western region.

Lot Quality Assurance Sampling System (LQAS) is the main slide selecting method for EQA. Previously NTP is applying system for all positive and 10% negative slide for EQA. In LQAS, slides are collected by using standard statistical tools, systematic sampling technique, for re-checking of slides to find agreement between microscopy centre and quality control centre. Figure 4.5.5 shows that average agreement rate of slide re-checking is more than 98% in the FY 2011/12. Moreover agreement rate is slightly increasing with value 95 percent to 98 percent from FY 2006/7 to 2011/12.

NTC lab is a National Reference Laboratory. It is working as a National Quality Control Centre (NQCC). Discordant slides are rechecked by NQCA. Feedback is send to RQCC. Feedback is provided by Regional quality control centres (RQCC) to the microscopy centres through their DHO/DPHO for their performance improvement.

Figure 4.5.7: Quality Control of Sputum Smear Microscopy



Source: NTC

### Sputum Culture and Drug Susceptibility Testing (DST)

NTC-National Reference Laboratory and GENETUP are providing culture and DST facility. NTC and GENETUP are working under the TB Supranational Lab-Gauting, Germany. Gauting, Germany is looking external quality assurance of these laboratories. To manage the toxic effect of drugs, NTP is providing additional hematological and biochemical tests free of cost to DR-TB patients all over the DR Treatment centers in the country.

In the beginning of 2012, a new molecular diagnostic tool; Gene Xpert MTB/RIF machines for rapid diagnosis of DR TB had been introduced to nine health facilities (7 in ER and 2 in CR) in collaboration with NTP Nepal and International Organization for Migration (IOM) through TB Reach funding. NTP is planning to expand this diagnostic tool in other regions as well.

### Training and Supervision

Basic modular training, Refresher Microscopy training, Fluorescence microscopy training, LQAS training and Sputum primary culture training are being conducted on regular basis as a part of quality assurance program. On site evaluation is done at the time of supervision.

Training is fundamental component of NTP. Every laboratory personnel have been provided sputum microscopy training on the beginning of job as a microscopist.

- Basic Sputum Microscopy Training is five days training; it develops knowledge and skills of laboratory personnel.
- Sputum Microscopy Refresher Training, three days training, is provided to the laboratory personnel after two years of basic sputum microscopy training.
- Lot Quality Assurance Sampling (LQAS) Training is also provided to the laboratory personnel to improve their work performance.
- Basic fluorescence microscopy training is provided as seven days package and refresher training on fluorescence microscopy is conducted for five days.
- Sputum primary culture training is conducted for five days program.

## 5. DOTS and Microscopy Centres by Region

DOTS have been implemented in all over the country and TB patients are being treated with DOTS at 1,141 treatment centres and 3,110 sub centres and laboratory facilities are being provided by 533 MCs (Table 4.5.1).

**Table 4.5.1: No of DOTS and Microscopy Centres by Region**

Development Region/Centres	EDR	CDR	WDR	MWDR	FWDR	Total
No. of treatment centres	237	354	239	188	123	1,141
No. of Sub-centres	707	1,025	666	417	295	3,110
DR TB Treatment centres	2	3	3	1	3	12
DR TB Treatment sub- centres	8	37	15	5	3	68
Microscopy centres	120	187	82	68	76	533

Source: NTC

## 8. Research

In order to improve the quality of care for people with tuberculosis in Nepal and to assist in effective Planning and implementation the TB control program, the NTP have been carrying out the following researches:

- MDR Surveillance
- Assessment of HIV among sputum smear pulmonary TB patients regularly.
- Impact of community-based orientations of TB on KAP of community people, FCHVs, mother's groups, teachers, Dhama-Jakris in Nepal
- There are numbers of operational research in NTP work planned which has been conducting in collaboration with sub-recipients.

## 9. HIV/AIDS and Tuberculosis

The prevalence of HIV is rising rapidly in Nepal and effective control measures for HIV/AIDS as well as for TB is more important now than ever before. NTP is conducting regular surveys to find the extent of HIV among TB patients. In 2006, 2.4 percent of tuberculosis patients also had HIV infection. This could rise rapidly if HIV increases. 4th sentential site survey of HIV in Tuberculosis patients was conducted. This survey is conducted in every two-year time interval.

## 10. TB-HIV Collaborative Activities

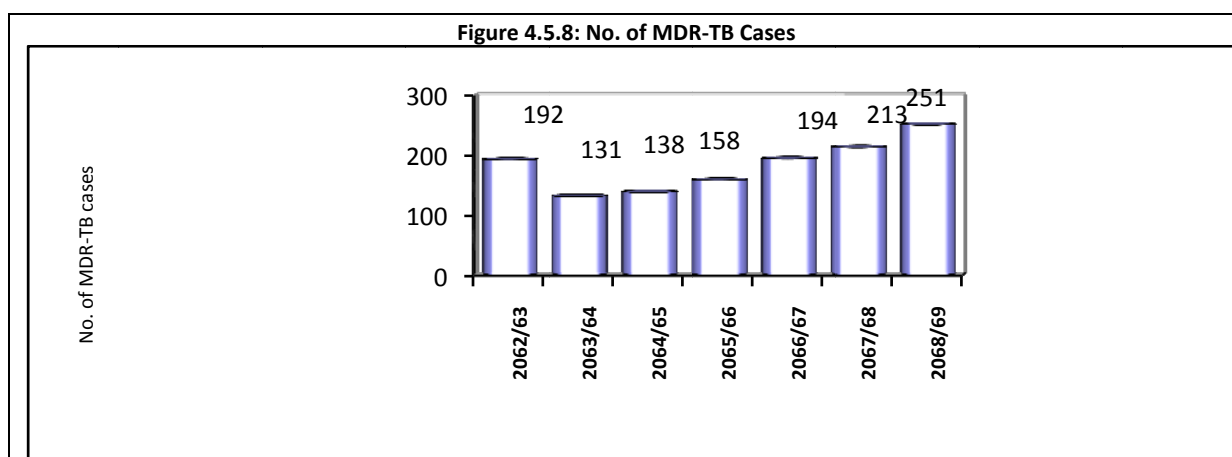
HIV epidemic has posed major challenges to TB control efforts globally. HIV weakens the immune system. Someone who is HIV positive and infected with TB is 5-7 times more likely to develop active TB than someone infected with TB but not infected with HIV. TB is leading cause of death among people who are HIV- positive accounting for about 11 percent of AIDS death worldwide. Over all HIV prevalence in Nepal is estimated at 0.49 percent in the adult population. And it is categorized as a concentrated epidemic. So an effective control measure for AIDS as well as for TB is more important now than ever before. The NTP adopted TB/HIV strategy and policy in 2009. Some activities are currently carried out through Global Fund against AIDS, TB and Malaria (GFATM) Round 4, Round 7 and National Strategy Application Wing of GFATM (2010-2015). TB/HIV collaborative activities have undertaken by National Tuberculosis Centre (NTC) as one of the strategic priorities in line with the global Stop TB Plan and the Millennium Development Goals. In this context, functional collaboration has been established between NTC and NCASC for implementing TB/HIV activities through joint planning and coordination for generating evidence for advocacy, mobilizing partnership and

resources to raise the awareness on TB/HIV. BNMT, HERD, FAITH, HSWO, NFWLHA, Naya Goreto are the main Sub-Recipients (SRs) of GFATM working especially for TB/HIV program implementing districts. Advocacy, training, operational research, IEC materials development, surveillance are the main components of TB/HIV collaborative activities to decrease the burden of HIV among TB patients in Nepal.

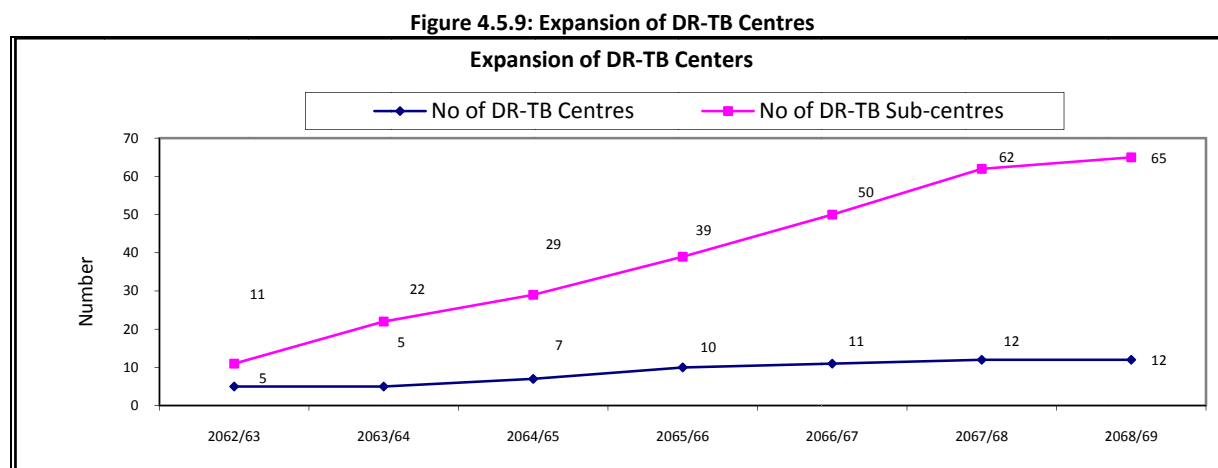
### 11. DR-TB Management

The NTP has carried out repeated surveys on drug resistance. The last survey showed that Multi Drug Resistant (MDR) TB is almost constant in newly registered cases. This is a sign of a good and effective DOTS program implementing in Nepal. Fourth MDR TB survey was conducted in collaboration with WHO and the results was 2.9 percent among the newly diagnosed TB patients.

For addressing DR issue, DR- TB management program was initiated/ started in September 2005 with the approval of World Health Organization (WHO), Green Light Committee. WHO accepted to treat 350 MDR tuberculosis cases for two years period. In the beginning DR tuberculosis management program was started at 5 treatment centres and 16 sub-treatment centres with the technical and financial assistance from WHO. Now, National Tuberculosis Program has expanded DR tuberculosis management service in 5 development regions of the country with 12 treatment centres and 65 sub-treatment centres till Ashad 2069. Total No. of patients registered up to 2069 Ashad were 1221. Cure rate of MDR-TB for the year 2068/69 is 72 percent. 8 MDR-TB hostels have been established in five development regions in 2068/69.

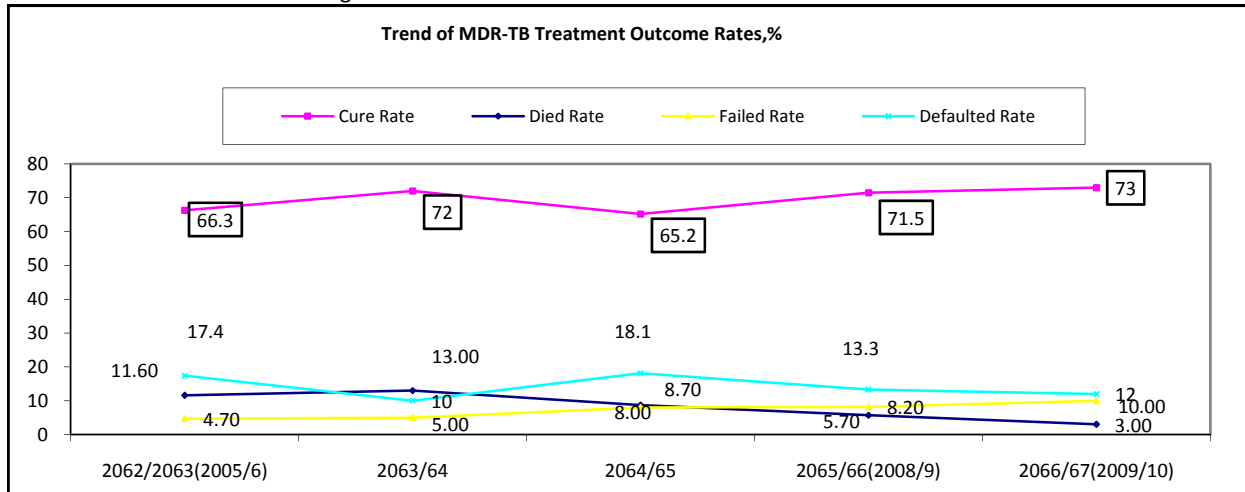


Source: NTC



Source: NTC

Figure 4.5.10: Trend of MDR-TB Treatment Outcome Rates



Source: NTC

## 12. Advocacy, Communication and Social Mobilization (ACSM)

The Government of Nepal, National Tuberculosis Centre developed a comprehensive National Strategy Plan (2010-2015). The New Strategy builds on the previous national strategy and outlines enhanced and more focused commitment for tackling the TB epidemic, consistent with Millennium Development Goals in line with the Stop TB Partnership targets.

Ensure access to quality treatment, diagnostics, ACSM, MDR Case Management, Public Private Mix and TB-HIV care and support services for infected, affected and vulnerable groups in Nepal within the context of a comprehensive response to HIV and AIDS. The ACSM intervention focusing on improving case detection and treatment adherence, combating stigma and discrimination, empowering people affected by TB and mobilizing political commitment and resources for TB.

These challenges will not be met without far greater prioritization and improvement in TB-related communication activities. In addressing each of these issues, there are strong organizational synergies with efforts to combat HIV/AIDS. To cope above mentioned situation, the following activities were carried out during fiscal year 2068/69.

- Appointed Tuberculosis Goodwill Ambassadors for the National Tuberculosis Program.
- Organized interaction program with journalists to advocate TB program at National level.
- Celebrated World TB day on 24th March 2011.
- Organized TB orientation to slum people.
- Broadcasted TB/HIV messages through National Television, Radio and FMs.
- Carried out monitoring activities of ACSM activities.
- Revised/developed TB posters, pamphlets, leaflets etc. and distributed them to the districts.
- Conducted skill development training to MDR-TB patients as pilot project in Morang.
- Carried out many different advocacy, communication and social mobilization activities in the districts by the stakeholders.
- Organized National TOT on ACSM.

### 13. Practical Approach to Lung (PAL)

Endorsement of New Stop TB Strategy by Government of Nepal in 2006, the certain components of the strategy has been launched in the NTP mainstream. One of the components of strategy is Health System Strengthening and within that, NTP has focused to increase case finding where the case finding is relatively low. PAL is one of the initiatives, which can achieve the objectives of the NTP particularly in TB case finding. The main objectives of the PAL program are:

- Management of respiratory illness of over 5 year’s population.
- Increase TB case finding.
- Rationale use of an antibiotic and others medication to respiratory symptomatic capacity building of health workers.

Now the PAL programme has implemented 14 districts of Nepal covering health posts and Primary Health Care Centres. District Hospitals, Zonal Hospitals are working as referral centres for PAL programme.

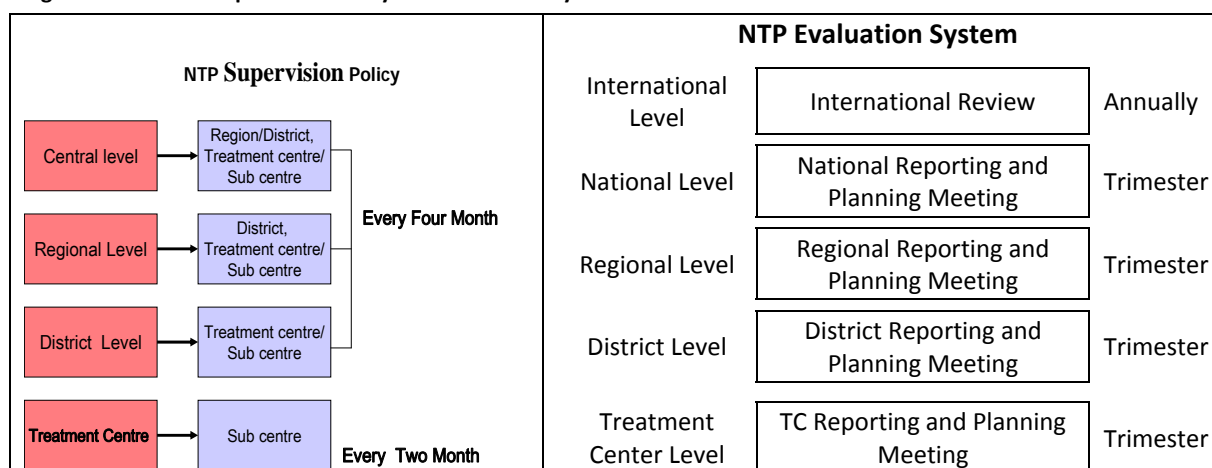
### 14. Public Private Mix (PPM)

The objective of this PPM component is to engage Public and private health care providers to ensure provision of quality TB services in line with NTP policy and international standard of TB care (ISTC). In order to achieve this objective, Linkage (referral and feedback) between existing DOTS centres and private health care providers was established in various urban areas of Nepal. Living support to clients/target population was provided to poor TB patients who are in need (migrants, TB/HIV co-infected, homeless, and slums dwellers). One day orientations on PPM/ISTC in medical colleges and hospital are organized. So NTP has planned to extend PPM activities in Kathmandu, Lalitpur, Bhaktapur, Biratnagar, Pokhara, Nepalgunj & Kanchanpur cities.

### 15. Supervision and Monitoring Policy

Supervision and monitoring is carried out during regular supervisory visits as of the NTP policy. In addition to supervision and monitoring, quarterly reporting of activities is carried out in the regular planning and reporting workshop at various levels as shown in Figure 4.5.11. The NTP has introduced a computerized feedback system as part of its monitoring activities.

Figure 4.5.11: NTP Supervision Policy and Evaluation System

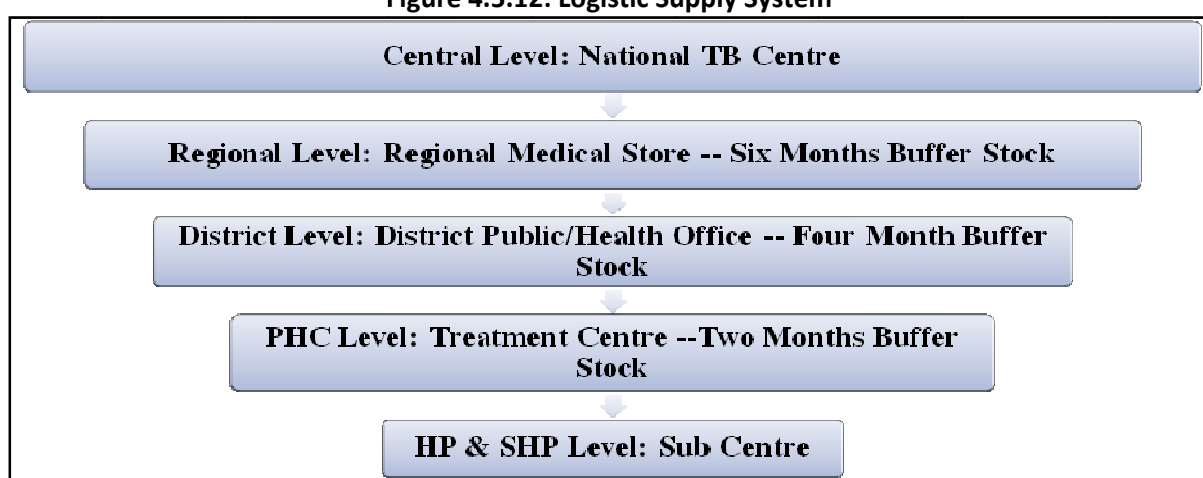




## 16. Logistic Supply System

The National Tuberculosis Control Program provides all drugs and other logistic supplies on a regular basis. In order to avoid supply shortages and stock outs of drugs, the NTP has developed a drug ordering system that uses the trimesterly reporting meetings for clinic staff to calculate their requirements based on trimesterly utilization and buffer stocks requirements. Each level has to maintain 2 to 6 months additional buffer stock to prevent stock out. The NTP has switched over to FDC drugs with HR and HE combination. This has also reduced the amount of tablets patients have to take. The buffer stock kept out at regional level has been increased from 4 to 6 months in order to guard against shortages caused by delays in delivery from national level due to unforeseen natural and other disturbances.

**Figure 4.5.12: Logistic Supply System**



## 17. Target versus Achievement (Financial report)

Financial report of the central budget of the fiscal year 2068/69 has been shown in Table 4.5.2. Only 48 percent of the total budget has been spent in the FY 2068/69.

**Table 4.5.2: Budget/Expenditure of FY 2068/69**

SN	Budget	Expenditure	Expenditure (%)	Source
1	43,255,267.80	38,154,160.40	88	GoN
2	12,286,000.00	10,310,889.05	84	Norway
3	657,593,000.00	293,684,527.00	45	Global Fund
4	3,500,000.00	180,457.00	5	WHO
<b>Total</b>	<b>716,634,267.80</b>	<b>342,330,033.45</b>	<b>48</b>	

Source: NTC, Account Section

#### 4.5.4 Issues and Recommendations

Some of problems/constraints raised in annual performance review meeting of the FY 2068/69 are listed in Table 4.5.3.

**Table 4.5.3: Issues and Recommendations**

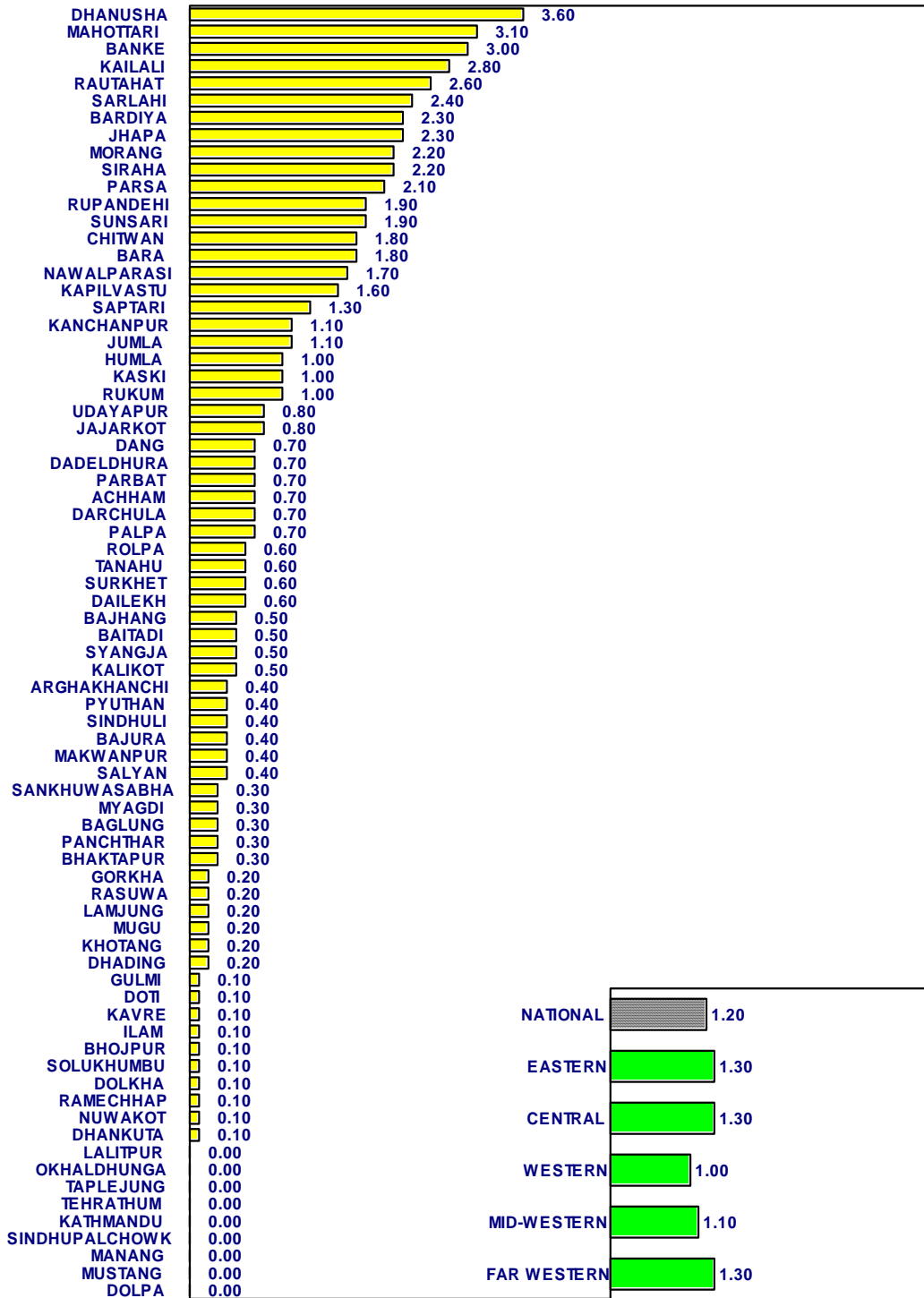
SN	Issues	Recommendations	Responsibility
1	TB Program in hard to reach area and urban slum (Low case finding)	<ul style="list-style-type: none"> <li>▪ Intensify case finding</li> <li>▪ Increase microscopy center</li> <li>▪ Mobile camps</li> <li>▪ PAL approach</li> <li>▪ ACSM approach</li> </ul>	NTC/RHD/DHO
2	Infection Control	<ul style="list-style-type: none"> <li>▪ Apply infection control program in each health facility</li> </ul>	NTC
3	TB/HIV collaboration	<ul style="list-style-type: none"> <li>▪ Implement 3I</li> <li>▪ Intensified case finding</li> <li>▪ Among HIV Positive</li> <li>▪ Infection Prevention</li> <li>▪ IPT Therapy</li> </ul>	NTC/NCASC
4	MDR TB Program	<ul style="list-style-type: none"> <li>▪ Develop MDR expansion plan</li> <li>▪ DST test for retreatment cases.</li> <li>▪ Inpatient facility in five region hospital</li> </ul>	NTC / DOHS/ MOHP
5	PPM	<ul style="list-style-type: none"> <li>▪ Develop PPM program</li> <li>▪ Orientation private sector.</li> <li>▪ Develop recording &amp; reporting</li> </ul>	NTC
6	District TB/Leprosy/HIV clinic	Provide staff	NTC

Note: Please see Annex

# Leprosy

Fiscal Year 2068/69 (2011/2012)

## New Case Detection Rate/10,000



## 4.6 LEPROSY

### Vision, mission and program

#### Vision

To make leprosy free society where there are no new leprosy cases and all the needs of existing leprosy affected persons having been fully met.

#### Mission

To provide accessible and acceptable cost effective quality leprosy services including rehabilitation and continue to provide such services as long as and wherever needed.

#### Goal

Further reduce the burden of leprosy and to break channel of transmission of leprosy from person to persons by providing quality services to all the affected community.

#### Objectives

1. To eliminate leprosy (Prevalence Rate below 1 per 10,000 population) and further reduce disease burden at district level.
2. To reduce disability due to leprosy.
3. To reduce stigma in the community against leprosy.
4. Provide high quality service for all persons affected by leprosy.

#### Strategies

The new national strategy has envisioned delivering quality leprosy services through ten strategic areas including greater participation and meaningful involvement of people affected by leprosy and right based approaches in leprosy services which are as follows:

1. Early new case detection and their timely and complete management
2. Quality leprosy services in an integrated setup by qualified health workers
3. Prevention of leprosy associated impairment and disability
4. Rehabilitation of people affected by leprosy, including medical and community based rehabilitation (MCBR).
5. Reduce stigma and discrimination through advocacy, social mobilization and IEC activities and address gender equality and social inclusion
6. Strengthen referral centers for complications management
7. Meaningful involvement of people affected by leprosy in leprosy services, and address human right issues
8. Promote and conduct operational research/studies
9. Monitoring, supportive supervision including onsite coaching, surveillance and evaluation to ensure/strengthen quality leprosy services
10. Strengthen partnership, co-operation and coordination with local government, external development partners, civil society and community based organizations.

**Targets**

- Reduce NCDR by 25 % at national level by the end of 2015 in comparison to 2010
- Reduce PR by 35 % at national level by the end of 2015 in comparison to 2010
- Reduce by 35% GII disability amongst newly detected cases per 100,000 population by the end of 2015 in comparison to 2010
  - o Additional deformity during treatment <5% by EHF score
  - o 80% health workers are able to recognize and manage /refer reaction/complications
  - o Promote POD and Self care

These targets will be revised after midterm leprosy program evaluation.

**Major Activities Undertaken During F/Y 2068/69 (2011-12)****MDT service delivery**

During the FY 2068/69, 3,481 new leprosy cases were detected and were put under MDT and 2430 cases were under treatment at the end of the fiscal year. During this fiscal year, 3187 cases completed treatment and were released from treatment (RFT). Secondary and tertiary care service was provided to the needy leprosy patients and affected through the existing network of referral centers through the support of partners. MDT drugs, which are made available by Novartis Foundation through WHO, and anti-reaction drugs were freely available and the supply remained uninterrupted in the country throughout the year.

**Capacity Building**

The division organized various capacity building activities during this reporting period. Four batches of medical officers training were conducted in which MOs from different districts and health institutions received basic training on leprosy through regional health directorates and partners. Comprehensive leprosy training was provided to 75 health workers 7 they are providing service in high and low endemic districts. Apart from this, 227 health workers were trained (two-day orientation/training) with support from WHO during this fiscal year. Districts also conducted 2 days orientation/training on leprosy to their health workers though government's regular budget... Three batches of refresher training to health workers were also conducted by the division. Partners like LMN and BIKASH Nepal have also conducted basic training for health workers.

A training program on community based rehabilitation (CBR) was organized to capacitate health workers and programme focal persons (TB and leprosy officers/assistants) on various aspects of rehabilitation of leprosy affected people. This 3-day training programme was organized/conducted in Anandban, Lalitpur from 29th Magh - 2nd Falgun, 2068 (12 – 14, Feb, 2012) and was attended by 29 participants and facilitators. The participants includes regional TB and leprosy officers (RTLOs), district TB and leprosy officers(DTLOs), health assistants (HA), senior AHWs, and other health workers working in rehabilitation. The training was facilitated by director of LCD, other program managers and experts from medical colleges and partners.

**IEC and advocacy**

To enhance community awareness, passive case detection, voluntary case reporting and to reduce stigma, IEC activities were undertaken on a regular basis using electronic and non electronic media. During the year, relevant messages were broadcasted using mass media. Posters and leaflets were

### Disease Control: Leprosy

printed and distributed. Likewise, leprosy messages were disseminated through flex boards (300 boards) which were displayed at district and HF levels. Similarly, 2125 episodes of leprosy messages were broadcasted in Nepali and local languages through FM and other radio services at national and district levels. It was a two-week program organized by LCD & supported by partners, including region & districts. The division also published booklet (handbook) for health workers, bulletins (*Hamro Sawal*) and diaries for general information and technical matters.

#### **World leprosy day observation**

Fifty-ninth world leprosy day was observed by conducting various activities at national, regional and district levels. The following activities were jointly organized to observe the day by LCD, partners and stakeholders.

- **Media interaction**

On the occasion of the 59th "World Leprosy Day", a media interaction was organized in the premises of National Health Training Centre, Teku on 13/10/2068 (Jan 27, 2012). The director general of the department of health services (DoHS), Dr. Yeshovardan Pradhan, graced the programme as the chief guest and the director of Leprosy Control Division, Mr. Chudamani Bhandari, chaired the program. The division director made a presentation on various aspects of leprosy and its current situation, strategies employed and activities conducted and planned to further reduce the disease burden due to leprosy and the role of media in leprosy control programme. The presentation was followed by interaction, and the questions and queries raised by the media representatives and participants were answered by the director general and the division director.

- **Street drama and Bhajan**

Street drama and *Bhajan* (traditional way of singing religious songs/devotions) were also organized and performed on the occasion of the 59th World Leprosy Day. The dramas were performed at three different places of Kathmandu and Patan. The month of January has a religious importance for Hindu women, during which a month-long fasting and worships are practiced and is called "*Swasthani brata*". During this period, a month-long religious gathering occurs in Sankhu, a place in Kathmandu district, on the bank of river Shali, where, according to Hindu mythology, an ancient queen affected by leprosy was believed to have recovered from the disease by making daily holy baths in this river. A street drama and a religious song on leprosy were staged in this popular religious gathering. The drama and the song both carried messages of various aspects of leprosy like what it is, how it occurs, MDT, role of community and etc. The street drama was also staged in two other popular places of Kathmandu (Tudikhel- the open theatre) and Patan (Krishna Temple).



- **Blood donation**

A blood donation program was organized in the premise of the department of health services (DoHS), Teku on Magh 15th, 2068. The program was inaugurated by the director general of DoHS, Dr Yashovardan Pradhan and was chaired by the director of Leprosy Control Division, Mr Chudamani Bhandari. A total of 25 donors, including the director of LCD, WHO staff, people affected by leprosy, donated blood in the program followed by distribution of fruits/fruit juice, T-shirt, and handkerchief to the blood donors and others.



- **Video documentary**

A documentary was produced and televised/broadcasted in national television channels like Sagarmatha TV and Himalayan TV on the occasion of the 59th World Leprosy Day. The documentary contained information on various aspects of Leprosy control program in Nepal, including messages and information from the health minister, state minister for health, secretary, director general of health services, director of leprosy control division, head of the partners and others. It also contained information on leprosy related services provided by referral centres like Anandban leprosy hospital, International Nepal Fellowship (INF) Pokhara, Lalgah leprosy service centre and Khokana rehabilitation centre. The documentary was produced by a media firm called Namuna films and Global Health Alliance, Nepal.

- **Leprosy day observation at regional level**

The day was observed at regional levels also with different activities like interactions with media people, distribution of fruits to patients in hospitals and organizing awareness rallies on leprosy on the 29th January, 2012. All the five regions observed the day with various activities with participation from different sectors and stakeholders at regional level. Districts also observed leprosy day in coordination/collaboration with local partners.

- **IEC activities and materials**

Messages on leprosy were aired in national radio and FM radios. Stickers, pamphlets and leaflets on leprosy were produced and distributed to participants and public in the programs organized to observe the day. T-shirts and handkerchiefs were also printed/produced to distribute in the programmes organized to observe the day in the centre and districts. Likewise, flex banners were also produced to display at various programmes and places.

- **Field trip and observation**

A joint field trip, from LCD and partners, was made to districts (from Jan 29 to Feb 15, 2012) with objectives to participate in programs organized by different districts to observe the leprosy day. The team, led by the director of the leprosy control division Mr Chudamani Bhandari, visited Jhapa (Bahundangi, Birtamod, Bhadrapur), Morang (Koshi zonal hospital, Biratnagar), Dhanusa (Lalgah hospital), Rautahat (Chandranigahpur), Bara (Rehab centre in Sundarpur), Chitwan (Bhandara), Rupandehi (Lumbini zonal hospital, Butwal), Banke (Nepalgunj), Surkhet, Dailekh, Kailali (Dhangadhi), Kanchanpur (Mahendranagar) and Dadeldhura (Jogbudha) and participated, observed, and inaugurated programmes and activities organized in these districts to observe the leprosy day. The

activities and programs organized included rickshaw rally, media interaction, distribution of fruits and other materials to people infected and affected by leprosy, hand-over of low cost houses built for leprosy affected people, interaction with network people/affected people, observation of income generation programmes run for/by leprosy affected people, rehabilitation centres etc. The team took opportunities to monitor and supervise leprosy services in the districts; and meet the medical superintendents of Koshi and Seti Zonal hospitals to discuss on the hand over process of leprosy clinics.

### **Program monitoring**

During this reporting year, 3 monitoring workshops were organized in the endemic Terai districts once in every four months. Personnel from SHPs/HPs/PHC met at Ilaka level to compile and aggregate data, discuss problems faced in the field and to share their experiences. Facilitators from LCD, district/regional health directorates, supporting partners assisted the staff in these meetings. Presentations on relevant topics were also made during these meetings.

### **District and regional review meetings**

Regular quarterly (every 4 months) review meetings were held at district and regional level. During these meetings aggregated data was presented and discussed. Administrative issues were attended too. Activities that are to be undertaken in near future were presented and the details regarding their implementation were discussed and agreed upon.

### **Trimester performance review workshop at central level**

Three quarterly review workshops were held at LCD to assess the outcome & monitoring of the program. These meetings were held in the leprosy control division under the chair of the division director. RTLOs, regional medical store chiefs, regional statistical officers, representatives from LMD and HMIS section, INGO partners and WHO attended the workshops. RTLOs presented on leprosy programme situation, problems and issues in their respective regions and districts. Regional medical store chiefs also presented the MDT drugs stocks/demands and problems of their respective regions. Progress made, plans and problems/issues faced by partners were also presented and discussed in the workshops.

### **Health Management Information System (HMIS)**

Data generation, compilation, aggregation, and report submission were timely throughout the year. Consolidated data was received at every 4 months at districts, regions and center. Feedback on vital issues that had emerged was provided to specific programme area during the review

### **Early case detection activities**

A three-day active case search programs was designed and implemented in 110 VDCs of seven high burden districts. Prior to the search activities, a one-day orientation was conducted to health workers and FCHVs of the concerned VDCs. The search was done by performing a house-to-house search by FCHVs and other health workers by using a pictorial search card and other IEC materials. A team consisting of senior and trained leprosy officers/supervisors from centre, region, district and partners provided technical support to the local health facilities in diagnosing and managing the identified cases. A total of 121 new cases were identified during these search activities. The details have been given in the Table 4.6.1.



**Table 4.6.1: Details of active case search activity**

Districts	No of VDCs	Cases identified		
		MB	PB	Total
Banke	18	4	10	14
Bardia	14	3	11	14
Kailali	19	9	37	46
Mahottari	5	0	8	8
Dhanusa	5	1	7	8
Nawalparasi	15	3	4	7
Rautahat	24	3	21	24
<b>Total</b>	<b>110</b>	<b>23</b>	<b>91</b>	<b>121</b>

**Active search in urban slums**

During this reporting year, active case search was also done in some slums of major urban areas/municipalities. The search methodologies was similar to the search done in the VDCs as mentioned above. The details are given in the Table 4.6.2.

**Table 4.6.2: Details of active case search activity conducted in urban slums**

Districts	Municipalities	No of slums searched	Case details		
			MB	PB	Total
Kathmandu	KMC	3 slums	0	2	2
Morang	Biratnagar	4 wards	0	0	0
Siraha	Lahan	All wards	6	10	16
Chitwan	Ratnanagar	All wards	1	3	4
Rupandehi	Butwal	3 slums	0	0	0
<b>Total</b>			<b>7</b>	<b>15</b>	<b>22</b>

**Contact examination: Patients & their family and neighbors**

This is an index case based approach activity in which health workers and FCHVs visit every household of a newly detected leprosy case and their neighbors using the chase card (pictorial card). They examine all household family members for any signs and symptoms of leprosy and refer suspected case of leprosy to nearest health institution for confirmation of diagnosis, treatment management. During this year 189,666 family members were targeted and 174,122 members were examined.

**Skin camps**

This is a camp approach to screen and identify/detect leprosy cases early in areas with high disease burden and other areas. A team consisting of dermatologist, where available, trained health workers and leprosy focal persons organizes this camp in the local health facility. FCHVs, other health workers are mobilized and IEC activities are done to inform community people about the camp. During this fiscal year, 16 such camps were conducted in different endemic districts/pockets of Terai.

**School health education**

This activity targets mainly secondary level school students. The main objective of this activity is to aware students and teachers about early signs and symptoms of leprosy, benefits of early treatment and options of treatment available at treatment facilities. During this FY 1500 schools were given health education against targeted 1500 schools.

**MDT and other logistics**

Nepal receives MDT drugs free of cost donated by Novartis foundation through WHO. The supplies are made by WHO based on the progress reports sent annually by leprosy control division. During this reporting fiscal year, the division received MDT drugs as given in Table 4.6.3.

**Table 4.6.3: Details of MDT drugs stock at central store (LCD)**

Particular	MB		PB	
	Adult	Child	Adult	Child
Previous Balances	12,971	718	3,918	650
Received Drugs	23040	2304	11,232	2,592
Total Stock	36,011	3,022	15,150	3,242
UT Patients	0	0	0	0
Expenditure	31,189	2,346	12,147	2,372
Stock at Store	4,822	676	3,003	870

Government of Nepal is thankful to this generous donation of MDT drugs by Novartis Foundation. Maintaining MDT supply and improving its distribution shall always be a high priority. As per the numbers of patients requiring MDT drugs, logistical support for its effective distribution will need to be assured. It is essential to ensure that treatment of any patient is not interrupted due to shortage of drugs at the health facilities.

To ensure the uninterrupted supply of MDT drugs to health facilities and treatment and referral centres, the leprosy control division supplies MDT to districts through regional medical store (RMS) based on the requisition made by them. The division also supplies directly to treatment and referral centres as required and requested by them.

The drugs and other materials/logistics required for treating complications such as reactions, wounds and ulcers are made available from the pharmacies of general health facilities.

MDT stock management remained satisfactory throughout the year though some districts faced stock out but managed the shortage from neighboring districts. There was no discontinuation in treatment of leprosy cases due to shortage of any type of MDT blister packs. Some of the blisters were damage due to the defect in packaging which was managed by re-supply in the districts.

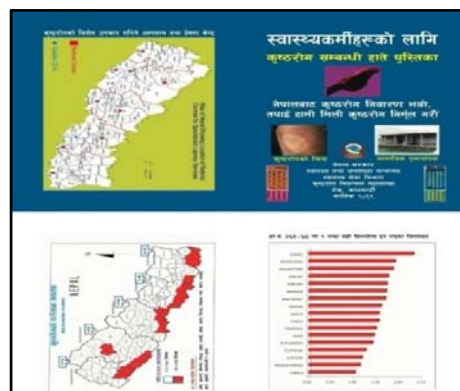
Health facilities where leprosy cases are diagnosed and treated must have stock of MDT drugs. Cases should start MDT at the centre where diagnosis is confirmed, and treatment should continue at the health facility nearest to the patient's residence, at the patient's own discretion. Accompanied MDT may be given to certain categories of patients—those from hard-to-reach or distant areas, migrant laborers, nomads, those with jobs which entail constant travel, etc.

Where necessary, the referral centre that first treats a case should provide the MDT drugs to the local unit (Primary Health Centre / Health Post in low endemic districts and upto Sub Health Posts in high endemic districts) that will continue the treatment.

### Publications

During this reporting year, leprosy control division published its annual report 2067/68 (2010-11) containing the salient features of the current leprosy situation, activities undertaken during previous year, achievements and obstacles faced by the program.

During the year, *Hamro Sawal*, a quarterly bulletin in Magh & Jestha twice and *Hand book for health workers*, which are helpful for orientation and provide technical information on leprosy including surveillance, were published.



### Disadvantaged group program

This activity was conducted to increase the access of unreached/marginalized communities (Dalits, Janajatis and other disadvantaged groups) to leprosy control activities and services. The communities were educated on stigma reduction and motivation for active participation in leprosy control activities. During this fiscal year this activity was conducted in 168 places of different districts. In some places and the community identified suspected cases and referred them to nearby health institutions for diagnosis & treatment.

### Supervision and monitoring

To provide technical guidance to health workers at peripheral health facilities and district health offices, supervisory visits were undertaken regularly by the staff of LCD, regional health directorate (RHD) and district health offices (DHO). Apart from the budget made available by GoN for this activity, additional funds were also provided by WHO, NLR and other supporting partners. Additional technical support through supervisory visits was also provided by the staff of WHO, NLR, NLT, INF, Anandaban hospital & other supporting partners.

### Involvement of people affected by leprosy in leprosy programmes

The leprosy control division initiated and supported in forming the network of people affected by leprosy in Nepal at national level. This initiative brought several organizations of people affected by leprosy together and empowered them to widen their involvement and participation of people affected by leprosy in various leprosy related programmes and activities. This initiative was highly appreciated by the people affected leprosy and the partners working in leprosy in Nepal.

### Coordination meeting with partners

During this fiscal year, the leprosy control division organized/held coordination meetings among the partners working in leprosy in Nepal. Two such meetings were held in LCD with participation from partners like WHO, NLR, TLM, NLT, INF, BIKASH Nepal, PNL, NLF, NELRA, Sewa Kendra, Shanti Sewa Griha, READ Nepal, IDEA Nepal and government institutions.

### Surveillance

An initiation has been taken to collect detail information on leprosy cases from low endemic districts. A surveillance form has been designed and distributed to low endemic districts, as they have low disease burden. These districts will collect detail information about the cases by using the surveillance form which will help to generate socio-demographic and epidemiological information. Further strengthening of this system is needed to collect timely and quality information.

### SODVELON conference

Dermatologists plays a key roles and possess expertise in care and support related to leprosy services. They have greater and important roles in case detection, treatment and management of complications and reactions. Any advancement and new technologies and change in programmes and strategies should be shared with this community of clinicians. So an opportunity was taken by the national leprosy control programme of the annual conferences of SODVELON (Society of Dermatologists, Venerologists and Leprologists of Nepal) and a paper on leprosy was presented in the conference by the division director of leprosy. Discussions were done on the roles of SODVELON in delivering the leprosy services and its elimination in Nepal and further opportunities to work together in achieving the national goal of leprosy free society.



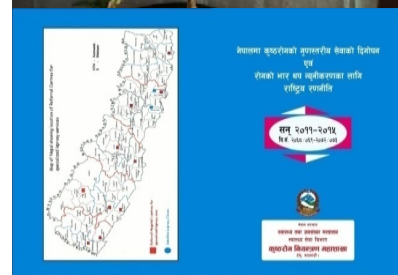
### Dissemination of national strategy: 2011-2015

A meeting was organized by the division in Kathmandu to disseminate the newly endorsed national strategy to "Sustain Quality Leprosy Services and Further Reduce the Disease Burden due to Leprosy in Nepal: 2011-2015 (2068/69-2072/73)" based on the "Enhanced Global Strategy for Further Reducing the Disease Burden Due to Leprosy:2011-2015". The event was attended by the secretary of health, Dr Praveen Mishra, as the chief guest and was chaired by DDG, Dr. Guna Raj Lohani & presentation made by the division director and was attended by a wider group of audience including senior government officials, heads/representatives from partners, SODVELON, dermatologists, academic institutions, network of people affected by leprosy and others.



### Reporting of relapse cases

Though relapse of leprosy cases after completing a standard and recommended course of treatment is quite rare, the programme reported more than 20 cases of relapse but these cases were not confirmed by laboratory. Anandban hospital serves as a sentinel surveillance site of drug resistance in Nepal. Any suspected case of relapse should be referred to this site for confirmation of the resistance and relapse.



**Foreign cases in Nepal**

The leprosy referral centres/clinics located in the border districts of Nepal cater leprosy services to many cases from India, especially from Bihar state. During this reporting year 712 new cases PB leprosy were detected in Nepal and there were more than six hundred cases under treatment at the end of the year. It is estimated that many Indian cases give a local address of Nepal and on the other hand many Nepali cases are migrant workers in India. So a system of cross notification and information sharing should be developed between Nepal and India to strengthen the leprosy services at both sides.

**Activities supported by different partners****Activities Supported by WHO**

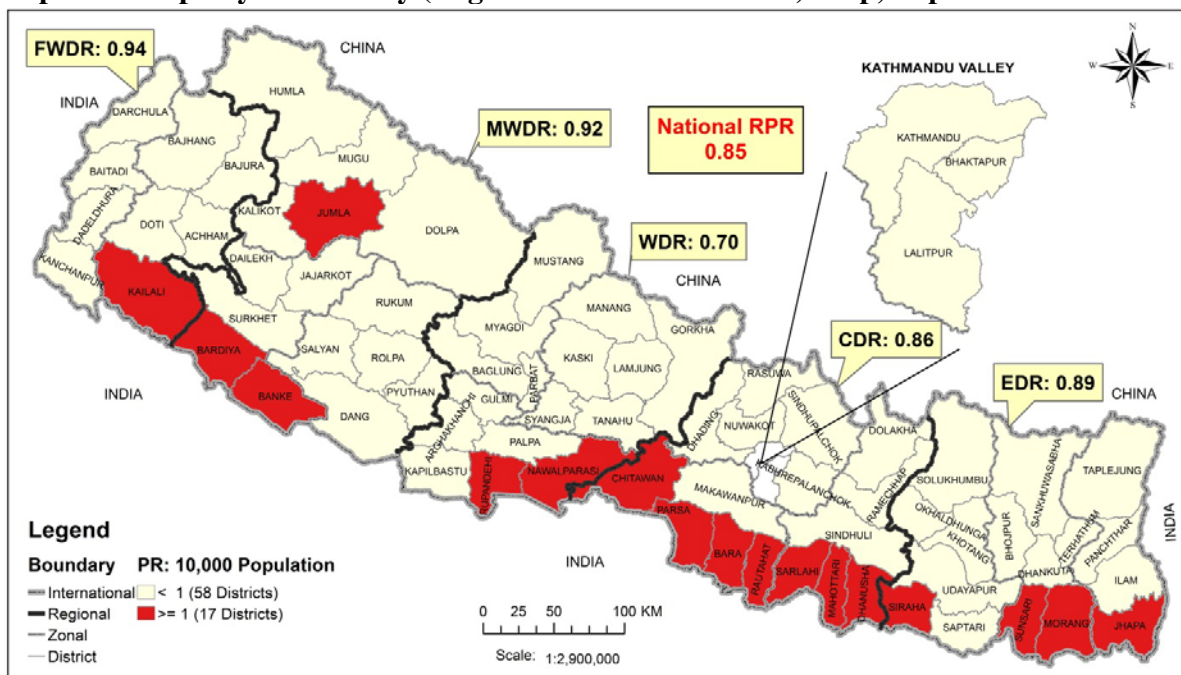
- MDT drug supply.
- Broadcasting of leprosy messages through radio & FM.
- Technical support/guidance for leprosy control programme.
- Support to endemic districts in case finding, case validation & IEC activities.
- Supervision and monitoring.
- Capacity building activities
- Leprosy day observation.

**Activities supported by partners (NLR, INF, LMN & NLT etc.)**

Following activities were carried out in high endemic districts with the assistance from supporting partner/s:

- Community awareness & participatory program at different level.
- Orientation of different community member's
- Provision of Primary, secondary and tertiary care through referral centers.
- Capacity building activities for government health staff.
- Technical support through supervision and monitoring.
- POID & Rehabilitation services.
- IEC activities/materials.
- Formation of self-care and self-help groups of people affected by leprosy or people living with disabilities due to leprosy.
- Vocational training to people affected by leprosy.
- Local non-governmental organizations like NELRA, Sewa Kendra, and Bikash Nepal were supported by national level partners for these activities.

**Map 4.6.1: Leprosy Endemicity (Registered Prevalence Rate) Map, Nepal in 2068/2069**



### Leprosy situation and achievements in disease control

#### Prevalence

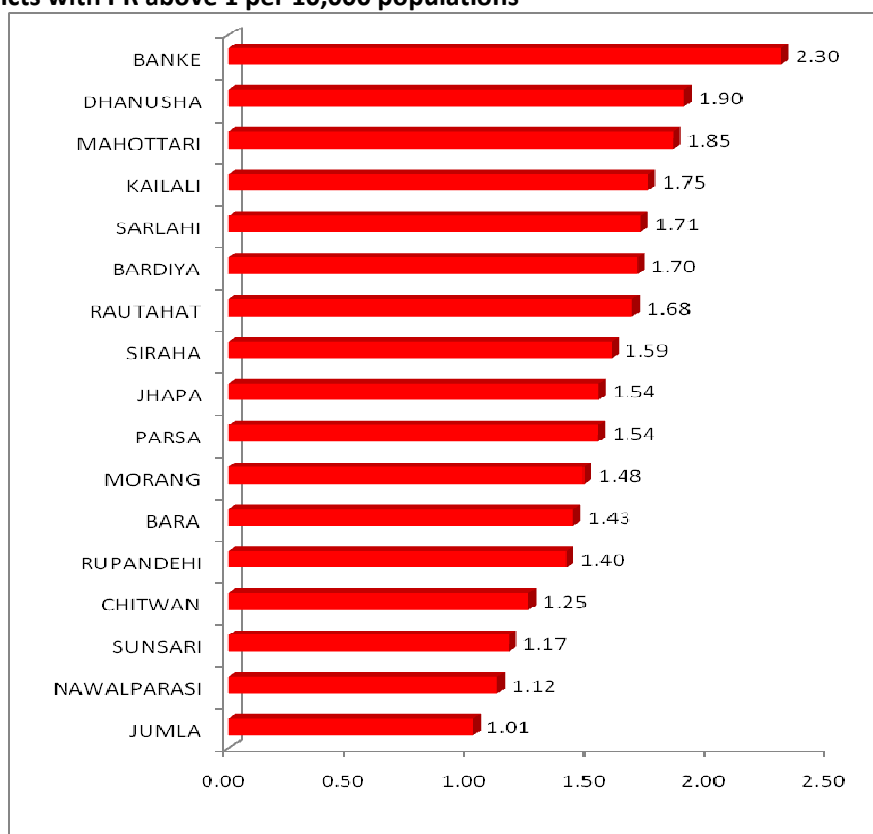
At the end of the FY 2068/69 (2011/12) there were 2430 leprosy cases receiving MDT in the country, which makes the registered prevalence rate of 0.85/10,000 populations at national level. This rate is below the cut-off point of <1 /10,000 population set by WHO to measure the elimination of leprosy as public health problem. Thus the national program has sustained the status of elimination of leprosy as public health problem achieved at the end of 2009, though the PR has increased as compared to previous year.

Region wise, the highest number of leprosy cases under treatment was reported from the central development region with 858 cases (35% of total) followed by eastern development region with 585 (24%) cases under treatment. Though far western developmental region reported the least number (255) and share (11%) of total cases under treatment, the registered prevalence rate (RPR) was the highest in this region (0.94/10,000 population) followed by mid-western region (0.92/10000 population). Region wise registered prevalence rate are shown in Table 4.6.4.

**Table4.6.4: Region-wise distribution of registered cases and prevalence rates (RPR) in FY 2068/2069**

Regions	No. of registered cases at the end of the year			
	MB	PB	Total	PR/ 10,000
EDR	387	198	585	0.89
CDR	545	313	858	0.86
WDR	314	79	393	0.70
MWDR	264	75	339	0.92
FWDR	190	66	255	0.94
<b>National</b>	<b>1,700</b>	<b>730</b>	<b>2,430</b>	<b>0.85</b>

This reporting year saw an increase in the number of districts with PR more than 1 case per 10,000 population. Seventeen districts reported PR above 1 case/10,000 population, an increase by 3 districts compared to previous year. Among these 17 districts, all but one (Jumla) are Terai districts and bordering Bihar and UP states of India. District wise, Banke reported the highest PR of over 2/10,000 population followed by Dhanusa, Mahottari and others. All endemic districts, other than Banke have PR between 1 and 2. Figure 4.6.2 shows the district wise PR in endemic districts.

**Fig4.6.2: Districts with PR above 1 per 10,000 populations**

**New case detection**

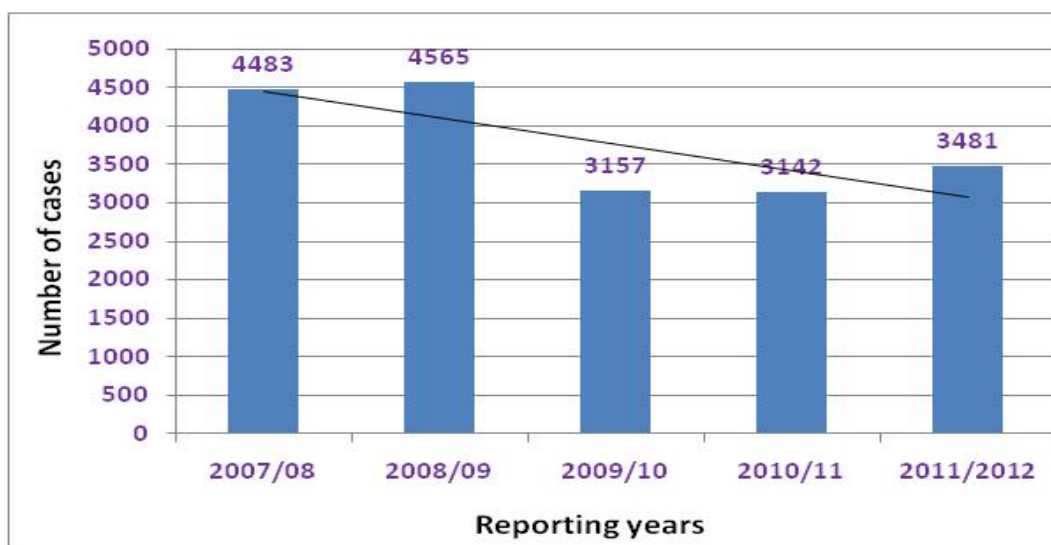
Detection of new cases signifies ongoing transmission of leprosy and the rate measured per hundred thousand populations helps monitoring the progress towards control. Three thousand four hundred and eighty one new leprosy cases were detected during this reporting year (2068/2069), which is an increase in number and rate as compared to previous reporting year. Region wise, the highest number was reported from CDR with 1295 cases followed by EDR, WDR, MDR and FWDR with 866, 548, 424 and 348 new cases respectively.

The new case detection rate (NCDR) per 100,000 populations for the year 2068/69 was 12.2 nationally, whereas EDR reported the highest rate among the regions. More than 80 percent of the new cases detection were from Terai districts alone.

By type, more than half (52.20%) of these new cases were Multi Bacillary (MB) and the rest were Pauci Bacillary (PB) leprosy. This proportion has constantly remained around fifty percent since several years. By region, Midwestern region has the highest proportion (64.85%) followed by Western region (63.5%) and the lowest proportion was seen in Central region with 43.39% and the rest fell between these figures. Nearly one third (31.6%) of the new cases were female which shows that a significant proportion of female are getting access to leprosy control services in the country. This proportion also has remained consistently around thirty percent since last five years. Likewise, children constituted 6.26% of the total new cases detected in this reporting year which proves an ongoing new transmission. This figure is an increase by 17 percent when compared to previous reporting year.

District wise, 8 mountain and hilly districts reported zero new cases during this year, whereas four districts have reported more than 200 cases each, with Dhanusa reporting the highest number (300) followed by Morang, Kailali and Mahottari districts reporting 227, 219 and 208 cases respectively. Figure 4.6.3 shows five year trend in new case detection and shows an increase in number of cases by more than 10 percent compared to previous reporting year.

**Figure 4.6.3: Five year trend in new case detection**





Region-wise new cases detected during the FY 2068/2069 and their further break down are given in Table 4.6.5.

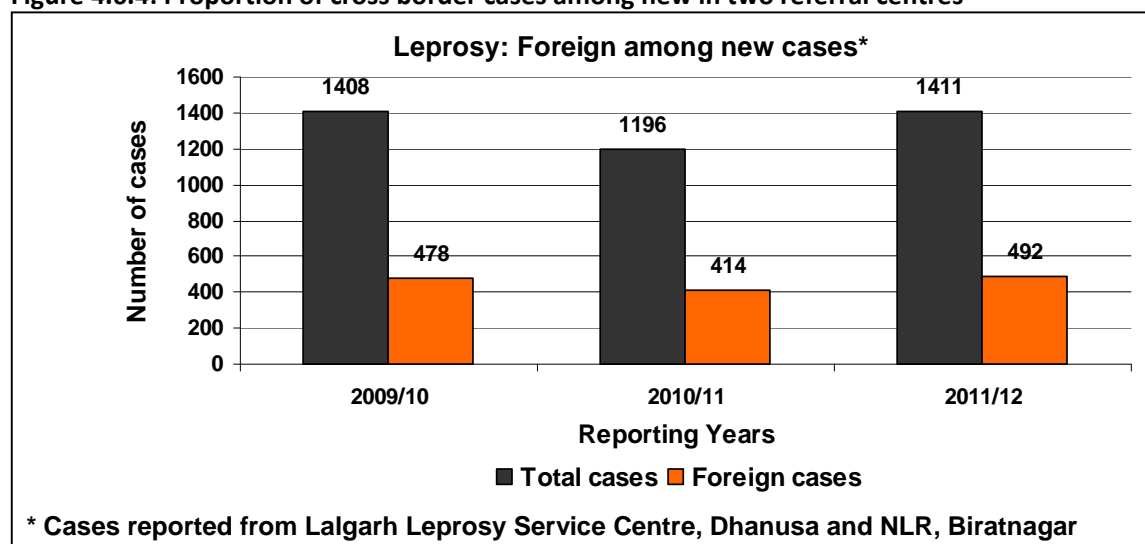
**Table 4.6.5: New cases and proportions among new**

Regions	New cases			NCDR/ 100,000	Proportion among new cases		
	MB	PB	Total		Women	Child	G II
EDR	437	429	866	13.2	277 (31.98%)	65 (7.51%)	30 (3.46%)
CDR	562	733	1295	13.0	382 (29.45%)	94 (7.26%)	35 (2.70%)
WDR	348	200	548	9.8	215 (39.23%)	18 (3.28%)	7 (1.28%)
MWDR	275	149	424	11.4	106 (25%)	27 (6.37%)	18 (4.25%)
FWDR	195	153	348	12.8	120 (34.48%)	14 (4.02%)	20 (5.75%)
<b>National</b>	<b>1,817</b>	<b>1,664</b>	<b>3,481</b>	<b>12.2</b>	<b>1,100 (31.6%)</b>	<b>218 (6.26%)</b>	<b>110 (3.16%)</b>

#### Cross border cases

In addition to detection of over three thousand native new cases, the program also detected 712 new cross border cases during this reporting period, and at the end of the year 639 cross border cases were registered. Most of these cross border cases were detected from referral centres /clinics located in the border districts of Nepal and mostly are from bordering districts of Bihar, India. The figure below shows a three year trend of cross border new case detection in two of the bordering referral centres, namely Lalgarh Leprosy Service Centre, Dhanusa and NLR clinic, Biratnagar. These two referral centres combine reported 492 cross border cases during FY 2068/2069 which constitutes more than two third (69%) of total cross border cases reported during the same period. The proportion of cross border cases among the total newly detected cases in these two centres is more than one third (34.86%), as shown in Figure 4.6.4.

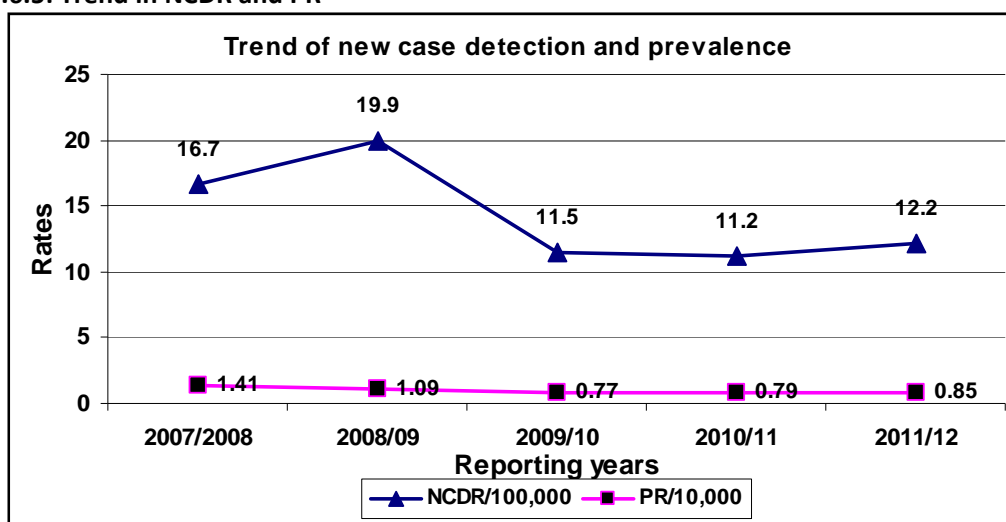
**Figure 4.6.4: Proportion of cross border cases among new in two referral centres**



#### Trend in new case detection and prevalence

Both the new case detection and registered cases have increased as compared to last year's. But looking into the trend of last five years, it is encouragingly going down and Nepal has consistently maintained the elimination status since last three years (Figure 4.6.5).

Figure 4.6.5: Trend in NCDR and PR



Region wise, Far-west region reported the highest prevalence rate (0.94/10,000 population) followed by Midwestern, Eastern, Central and Western regions respectively. All five regions have observed an increase in the trend as compared to the last reporting year, but all except Midwestern, have significantly declined as compared to pre elimination level. Four-year trend in registered prevalence rate by region is given in Table 4.6.6.

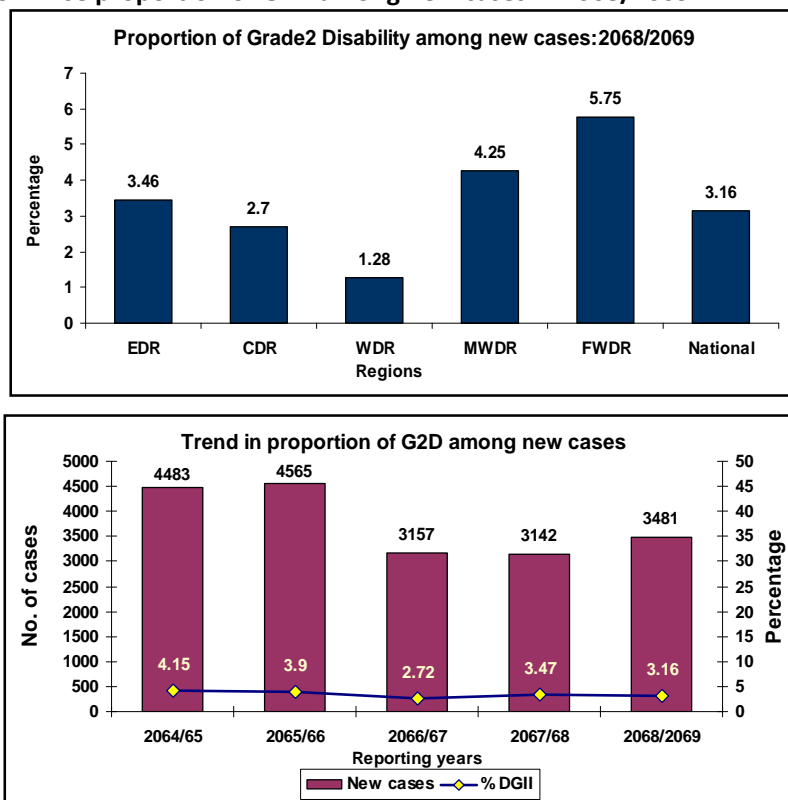
Table 4.6.6: Region wise trend in prevalence rate

Regions	2065/66	2066/67	2067/68	2068/69
EDR	1.16	0.92	0.87	0.89
CDR	1.23	0.79	0.82	0.86
WDR	0.82	0.68	0.64	0.70
MWDR	0.93	0.48	0.72	0.92
FWDR	1.21	0.88	0.91	0.94
National	<b>1.09</b>	<b>0.77</b>	<b>0.79</b>	<b>0.85</b>

### Disability

If not detected early and not completely and timely treated, leprosy variably results into disability of varied degree and type. Thus early detection and timely and complete treatment is very crucial for prevention of disability due to leprosy. Proportion of Grade II Disability (G2D) among new cases and rate per hundred thousand populations are major monitoring indicators of early case detection. During this reporting year, 110 cases of visible disability (G2D) were recorded and its proportion among new cases was 3.16 percent nationally and by region it was the highest in Far-west region (6.29%) and the lowest in Western region (1.94%). The G2D proportion among new cases has consistently declined since last five years but there is an increase when compared to the year 2066/67 (Figure 4.6.6).

Figure 4.6.6: Region-wise proportion of G2D among new cases in 2068/2069



#### Outcome of the registered cases

During this Fiscal Year 2068/69, a total of 3,190 (MB 1,613 and PB 1,517) cases had completed treatment and were released from treatment. The remaining cases are undergoing treatment. Total transferred out cases were 19, number of defaulter cases was 24 and other deductions were 132 (other than defaulters and transferred outs), which include death, double registration and wrong diagnosis. The number of patients who restarted MDT in the current year was 37. (See **annexes** for detail information on district, regional & national level data breakdowns).

Table 4.6.7: Number of cases released from treatment (RFT), by region in 2068/69

Region	MB	PB	Total
EDR	438	392	830
CDR	494	713	1,207
WDR	291	203	494
MWDR	206	128	334
FWDR	184	141	325
<b>National</b>	<b>1,613</b>	<b>1,517</b>	<b>3,190</b>

**Table 4.6.8: Comparison of leprosy indicators**

	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12
New patients	4,991	4,317	4,483	4,565	3,157	3,142	3,481
RFT	5,793	4,674	4,434	4,849	3,844	2,979	3,190
Defaulter	99	83	70	41	25	31	24
UT at the end	4,213	3,787	3,817	3,009	2,104	2,210	2,430
New child	330	266	272	282	212	163	218
Female	2,059	1,307	1,402	1,479	1,030	892	1,100
NCDR/100,000	19.6	16.5	16.7	19.9	11.5	11.2	12.2
PR/10,000	1.65	1.45	1.42	1.09	0.77	0.79	0.85
Female %	41.25	30.28	31.3	32.4	32.6	28.4	31.6

**Some reasons of increase in new cases and prevalence**

A field verification and validation of records and cases were performed in the first quarter of the current fiscal year. The retrospective data verification and case validation activity was conducted in almost all endemic districts of Terai which identified the following reasons for increase in number of new cases and prevalence.

- Active community search in endemic pockets and urban slums
- Data management
  - Recycled cases/double registration
  - Over holding of cases/RFT due
  - Local address given to cross border cases
- Voluntary reporting due to improvement in general awareness
- Wrong diagnosis- very few

**Actions taken**

- Data verification and case validation
- Updating records/reports (Quarterly, on the spot, Fax, Tel.)
- Review meetings - quarterly at regional level and annual at central level
- Patients counseling, intensification of contact examination
- Post elimination strategy endorsed

**Impression**

- Sustained elimination but overall prevalence has increased
- Seventeen districts have prevalence above 1 case/10,000 populations
- Decrease in Grade II Disability
- In increase in female and child proportion

## **Strength, weakness, challenges and way forward**

### **Strength**

- Trained manpower serving in all health facilities.
- Accessible network of public health and services provided by partner organizations.
- Free MDT and other services
- Regular review meetings
- Uninterrupted MDT supply
- Good communication and collaboration among supporting partners

### **Weaknesses**

- Low priority to leprosy program at periphery.
- Low motivation of health workers
- District and regional focal persons are over burdened with TB programme
- Very few activities on rehabilitation
- Inadequate training and orientation (e.g.: CLT, BLT, CBR) for health workers, focal persons and managers

### **Challenges**

- To sustain the achievement of elimination at national level and further reduce disease burden
- To maintain quality of services in low endemic mountain & hilly districts.
- To strengthen surveillance, drug supply, logistic, information, and job oriented capacity-building for general health workers and an efficient referral network.
- To assess the magnitude of the disability burden due to leprosy.
- Further reduce stigma and discrimination against affected persons and their families.
- Information sharing and integration of leprosy services in private sector, including medical colleges.

**Future course of action and opportunities**

- Policy related issues to be addressed by MoHP.
- Implementation of national strategy within ministry and through partners.
- Update and follow national operational guideline as per new strategy.
- Intensify IEC activities to raise community awareness on leprosy: early diagnosis and treatment, prevention of disability, rehabilitation, and social benefits.
- Strengthen early case detection activities- focus in endemic districts.
- Establish and strengthen cross notification and information sharing on cross border cases.
- Promote community participation in National Leprosy Elimination Program.
- Improve access of unreached, marginalized and vulnerable groups to leprosy services.
- Strengthen greater and meaningful involvement of people affected by leprosy in leprosy services and programs.
- Capacity building of health workers for early case detection, management and medical & community based rehabilitation.
- Strengthen functional integration of leprosy services in remaining areas
- Use of available resources and infrastructure for other services, e.g.: lymphatic filariasis, diabetes and other NTDs
- Operational studies in high endemic districts and pockets on specific issues for quality services
- Vocational education and training and income generation activities to people affected by leprosy and their families
- Ensure resource mobilization, partnership and participation of local government and collaboration with new partners, institutions and individuals for leprosy services and rehabilitation
- Strengthen capacity of leprosy control division for effective implementation of national policy and strategies and quality services
- Innovative activities for efficient utilization of resources, services and management
- Efficient use of health management information system and strengthening e-health-WeBLERS.
- Strengthen surveillance in low endemic districts and areas
- Evidence based (laboratory confirmed) reporting of relapse through utilization of available resource (research lab of Anandban hospital)

## 4.7 HIV/AIDS AND STI

### 4.7.1 Background

Nepal's response against HIV/AIDS begun with the launching of first National AIDS Prevention and Control Program in 1988. National HIV/AIDS Policy with 12 key policy statements and supportive structures like National AIDS Coordination Committee (NACC) and District AIDS coordination Committee to guide and coordinate the response at central and district level was endorsed in 1995. As directed by the National HIV/AIDS Policy, a multi-sector National AIDS Coordinating Committee (NACC) chaired by the Minister of Health and Population, members representation from different ministries, civil society, and private sector was established to coordinate, support and monitor the activities implemented through NCASC. Similarly, DACC was established to coordinate and monitor the activities at district level.

In 2002 a National AIDS Council (NAC) was established, chaired by the Prime Minister, to raise the profile of HIV/AIDS. The NAC was intended to set overall policy, lead high level advocacy, and provide overall guidance and direction to the national response to AIDS in Nepal.

The latest national policy on HIV and AIDS (2010) have envisioned a more concrete policy framework for making AIDS free society with the overall policy aim of reducing impact of HIV among people by reducing new HIV infections.

Recently Nepal has expressed its high level political commitment to Political Declaration on HIV/AIDS: Intensifying our Efforts to Eliminate HIV/AIDS June 2011. The 2011 declaration builds on two previous political declarations: the 2001 Declaration of Commitment on HIV/AIDS and the 2006 Political Declaration on HIV/AIDS. At UNGASS, in 2001, Member States unanimously adopted the Declaration of Commitment on HIV/AIDS. This declaration reflected global consensus on a comprehensive framework to achieve Millennium Development Goal Six:- halting and beginning to reverse the HIV epidemic by 2015.

Thus, to ensure the effective response to the HIV epidemic in Nepal and so to fulfil the accountability of the response, Nepal has already implemented three rounds national HIV/AIDS strategic plan. The recent National HIV/AIDS Strategy 2011-2016 has laid a concrete road map in planning, programming and reviewing of the national response to the epidemic.

Milestones in Response to HIV/AIDS	
1988	Launched the first National AIDS Prevention and Control Program (short term)
1990-1992	First Medium Term Plan
1993-1997	Second Medium Term Plan
1993	National Policy on Blood safety
1995	National Policy on HIV/AIDS
1997-2001	Strategic Plan for HIV/AIDS Prevention
2000	Situation Analysis of HIV/AIDS-Nepal
2002-2006	National HIV/AIDS Strategic Plan
2003-2007	National HIV/AIDS Operational Plan
2006-2011	National HIV/AIDS Strategic Plan
2008-2011	National HIV/AIDS Action Plan
2007	National HIV/AIDS and STD Control Board established
2008	National HIV/AIDS Action Plan
2010	New National Policy on HIV/AIDS
2011-2016	New National HIV/AIDS Strategic Plan

**National HIV/AIDS Strategy (2011-2016)**

**Vision**

Nepal will become a place where new HIV infection are rare and when they do occur, every person will have access to high quality, life extending care without any form of discrimination.

**Goal**

To achieve universal access to HIV prevention, treatment, care and support.

**Objectives**

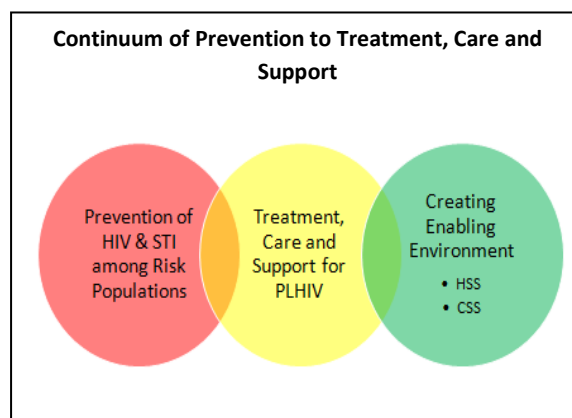
- Reduce new HIV infections by 50 percent by 2016, compared to 2010;
- Reduce HIV-related deaths by 25 percent by 2016 (compared with a 2010 baseline) through universal access on treatment and care services; and
- Reduce new HIV infections in children by 90 percent by 2016 (compared with a 2010 baseline)

**Guiding Principles, 2011-2016**

- Universal Access of Prevention, Treatment, Care and Support services for all people on equitable basis
- Decentralized, integrated, multi-sectoral and interdisciplinary engagement
- Evidence-informed planning and programming
- Health System Strengthening and Community System Strengthening
- Service delivery based on the principle of Primary Health Care Approach
- Equity and Human Rights
- Gender mainstreaming
- Greater involvement of people living with HIV/AIDS (GIPA) principle

The National HIV/AIDS Strategy is a national guiding document and a road map for the next five years for all sectors, institutions and partners involved in the response to HIV and AIDS in Nepal to meet the national goal; to achieve universal access to HIV prevention, treatment, care and support with two major programmatic objectives (i) reduce new HIV infections by 50 percent, and (ii) reduce HIV related deaths by 25 percent, by 2016. The strategy delineates the central role of the health sector and the essential roles the other sectors play, in response to the HIV epidemic.

The current national HIV/AIDS Strategy, therefore, builds on two critical program strategies: (i) HIV prevention, and (ii) treatment care and support of infected and affected. To ensure the achievements of program outcomes, cross-cutting strategies are devised to support (i) creating enabling environment: health system strengthening, legal reform and human rights and community system strengthening (ii) strategic information (HIV and STI surveillance, program monitoring and evaluation and research).



**Table 4.7.1: Linkage of National HIV/AIDS Strategic Plan, 2011-2016 with Overall National Development Plans**

Development Plan of Government of Nepal			
Nepal Health Sector Program Implementation Plan –II			
Reduce Poverty Achieve Millennium Development Goals	<ul style="list-style-type: none"> <li>• Achieve Millennium Development Goals 2011-2015</li> <li>• Universal coverage to Essential Health Care Services free against catastrophic health expenditure</li> </ul>	National HIV/AIDS Strategy	
		Reduce New HIV infections	Reduce AIDS related deaths

Source: NCASC (2011) National HIV/AIDS Strategy, 2011-2016



Building on the achievements, lessons and experiences of the past five years, the strategy (2011-2016) will focus on the following key points:

- Addressing the all dimensions of continuum of care from prevention to treatment care and support
- Effective coverage of quality interventions based on the epidemic situation and geographical prioritization
- Health system and community system strengthening
- Integration of HIV services into public health system in a balanced way to meet the specific needs of target populations
- Strong accountability framework with robust HIV surveillance, program monitoring and evaluation to reflect the results into NHSP-II and National Plan.

**Table 4.7.2: Impact Level Indicators and Targets**

Indicators	Baseline 2010	Target 2016
HIV prevalence in the population aged 15-24	0.12% (2010)	0.06%
Percentage of adults and children with HIV known to be on treatment 12, 24 and 36 months	89% - 12 months 84% - 24 months 70% - 36 months	At least 93% - 12 months At least 90% - 24 months At least 85% - 36 months

Source: NCASC (2011) National HIV/AIDS Strategy, 2011-2016

HIV in Nepal is characterized as concentrated epidemic, where majority of infections (more than four in every five new infections) are transmitted through sexual transmission. People who inject drugs, men who have sex with other men and female sex workers are the key populations at higher risk of HIV in Nepal. Thus, prevention of HIV among key population is the key programmatic strategies, while providing quality treatment, care and support for infected and affected is equally important strategic directions to achieve the end results of national response (Table 4.7.3)

**Table 4.7.3: Targeted Programs on HIV Prevention, Treatment, Care and Support Services Currently Available in Nepal**

Service package	Target populations
Comprehensive HIV prevention package for key population at higher risk to HIV:	<ul style="list-style-type: none"> <li>▪ People who inject drugs</li> <li>▪ Female sex workers</li> <li>▪ Men who have sex with men and transgender</li> <li>▪ Clients of sex workers</li> <li>▪ Male labour migrants</li> <li>▪ Other populations at risk and vulnerable to HIV</li> </ul>
Comprehensive condom programming	
Behaviour change communications/interventions	
HIV testing and counseling	
Diagnosis and treatment of sexually transmitted infections	
Antiretroviral therapy and management of opportunity infections	People living with HIV (PLHIV)
Prevention of mother-to-child transmission of HIV	Antenatal care attendees (women and girls of reproductive age groups)
Stigma and discrimination reduction	All population groups
Capacity development	Health care providers

## Disease Control: HIV/AIDS AND STI

As of July 2012, response to HIV has been made available through the following service delivery points in across Nepal:

**Table 4.7.4: Program Coverage by Service Delivery Points (service sites) in Nepal**

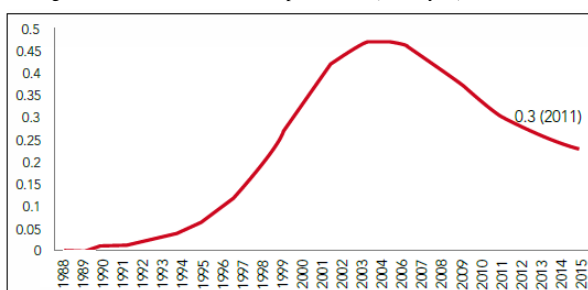
<b>HIV testing and counseling</b>	<b>219 sites in 75 districts</b>
Sites for sexually transmitted infection	219 + sites in 75 districts
Antiretroviral therapy sites	39 sites in 33 districts
Opportunistic infections sites	59 sites
Community care centre sites	30 centres
Prevention of Mother-to-Child Transmission sites	41 sites
Districts with District AIDS Coordination Committee Coordinators	50 districts
Other services (TB, Sexual and reproductive health services, nutrition support)	Many public and private sites
Targeted prevention interventions for key populations at higher risk to HIV	59 project sites in 38 districts

## 4.7.2 Analysis of Achievement

### 1. Epidemic Analysis

Since the detection of the first AIDS case in 1988, the HIV epidemic in Nepal has evolved from a low prevalence to concentrated epidemic. As of 2011, national estimates indicate that approximately 50,288 adults and children are infected with the HIV virus in Nepal. As of Asar 2069 a total of 20,583 cases of HIV out of them 7,142 advanced HIV infection cases had been reported to the National Centre for AIDS and STD control (NCASC). The estimated prevalence of HIV in the adult population is 0.3 percent (Figure 4.7.1).

Fig. 4.7.1: Estimated adult HIV prevalence (15-49 yrs.), 1988-2015



Out of the total estimated infections, 3,805 (7.6%) are children in the 0-14 year's age group. The remaining 46,483 (92.4%) are adults 15 years and above (Figure 4.7.2). It must be noted that 3,246 (6.5%) infections are amongst people over the age of 50 years. By sex, more than two-thirds of the infections have occurred among males (66.5%). Remaining 33.5 percent of infections are in women, out of which around 84 percent are in the reproductive age group of 15-49. It is also noteworthy that there has been a decline of HIV prevalence among youth, aged 15 to 24 (Figure 7.7.3).

Fig. 4.7.2: Estimated HIV Infections by age groups, 2011

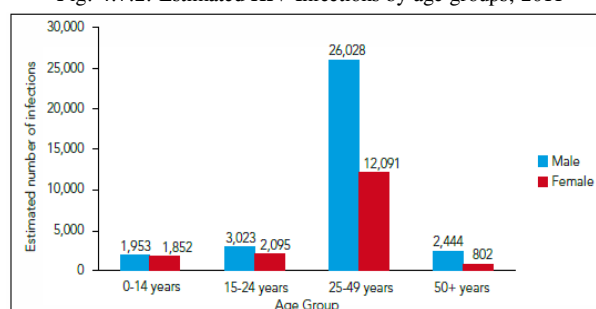
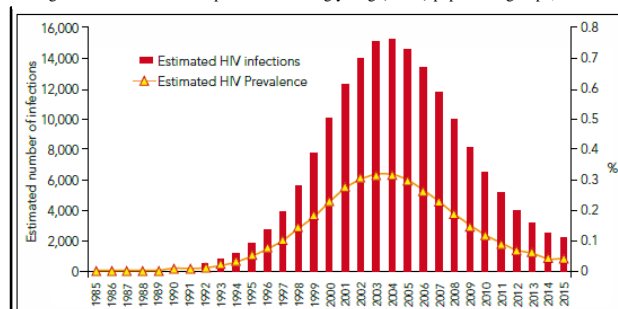


Fig. 4.7.3: Estimated HIV prevalence among young (15-24) population groups, 1985-2015



The estimates show that remaining females account for approximately 27.3 percent of the total infections, followed by male labour migrants, remaining males, other MSMs, MTCs,

clients of FSWs, PWIDs and FSWs with 27.0 percent, 14.4 percent, 7.2 percent, 4.4 percent, 2.2 percent and 1.5 percent respectively (Figure 4.7.4 and 4.7.5). If this trend continues the number of people living with HIV in Nepal is projected to fall from the current (2011 estimate) of 50,288 to 42,750 in 2015 (Figure 4.7.5).

The estimated number of annual AIDS deaths of all ages is projected to decrease from the current 2011 estimate of 4,722 to 1,576 in 2015. This decline is most likely due to the increase of the number of people on antiretroviral treatment (Figure 4.7.7).

The treatment needs were estimated (using CD4 count <350) at 27, 288 (adults: 25,169, children: 2,119) in 2011. These numbers are projected to rise to 28,791 (adults: 26,896, children: 1,896) in 2015.

The high risk population groups (PWIDs, MTCs, MSM, FSWs, male labor migrants and clients of FSWs) shared 56.7 percent of all adult HIV infections (Table 4.7.6). The low risk general male and female population shared about 43 percent of all estimated infections. Highest infection is estimated in the age group of 25-49 years who are economically productive and sexually active.

The younger stratum of population below the age of 15 has lowest infections and most are due to mother to child transmission Nepal has produced evidence that effective prevention interventions are working to stop the spread of HIV, particularly among key high risk population groups such as PWIDs, FSWs and their clients. However, the rate of new infections has

increased among MSM/TG in Nepal. In overall, the adult (15-49) HIV prevalence has started declining slowly (Figure 4.7.4). This demands for a continued effective prevention efforts to be sustained among high risk populations, especially among young and new entrants into the risk behaviors.

It is notable that migrants, remaining male and female sub-population groups have contributed

Fig. 4.7.4: Estimated HIV infections among key population group, 2011

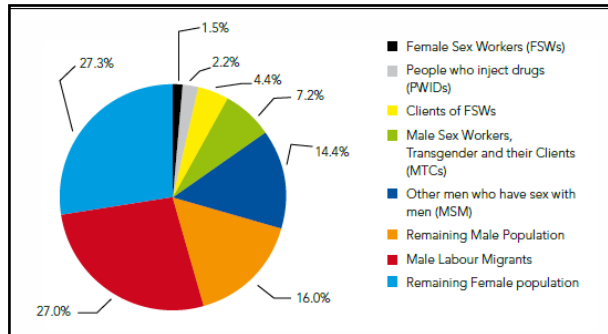


Fig. 4.7.5: Distribution of estimated HIV infections among key population groups aged 15-49: 1980-2015

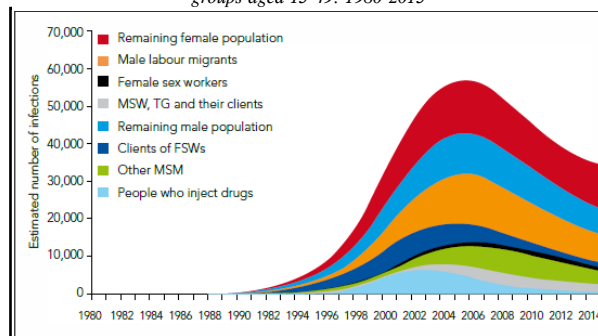


Fig. 4.7.6: Estimated new HIV infection trends, 2000-2015

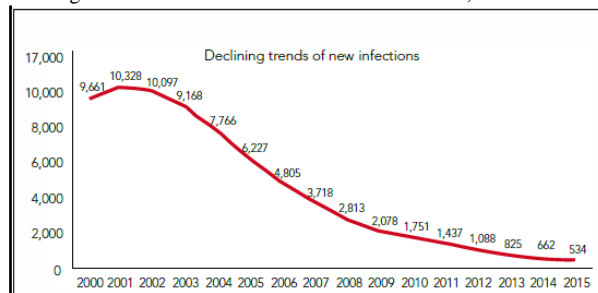
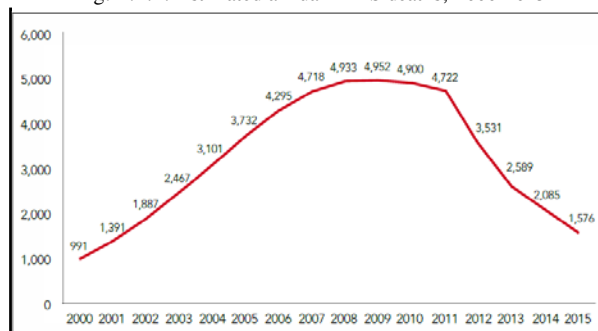


Fig. 4.7.7: Estimated annual AIDS deaths, 2000-2015



## Disease Control: HIV/AIDS AND STI

majority in the total estimated number of HIV infection (prevalence pool) (Table 4.7.5). This is due to their disproportionately bigger population sizes, in contrast to that of the MARPs. However, the main drivers of the epidemics are, in fact, the MARPs including migrants and clients of sex workers due to their high level of HIV prevalence and behavioral factors that associated with and contributed to HIV transmission.

**Table 4.7.5: Cumulative HIV Infection by Sub Group, Age and Sex, Reported as of Asar 2069 (July 2012)**

Sub Group	Male	Female	TG	Total
Sex Workers (SW)	27	997	0	1,024
Injecting Drug Users	2,750	70	3	2,823
Men having Sex with Men (MSM)	250	-	6	256
Blood or Organ Recipients	49	19	0	68
Clients of Sex Worker	8,651	121	0	8,772
Housewives	-	5,331	0	5,331
Male Partners of FSW/Female IDU/Female Migrant	97	-	0	97
Migrant workers	376	22	0	398
Spouse of migrants	19	250	0	269
Prison Inmates	-	-	-	-
Children	829	543	0	1,372
Sub-group NOT identified	109	64	0	173
<b>Total</b>	<b>13,157</b>	<b>7,417</b>	<b>9</b>	<b>20,583</b>
Age Group				
0 – 4	325	193	0	518
5 – 9	359	244	0	603
10 – 14	153	104	0	257
15 – 19	306	334	1	641
20 – 24	1,461	1,105	2	2,568
25 – 29	2,703	1,693	0	4,396
30 – 39	5,341	2,617	5	7,963
40 – 49	1,962	880	0	2,842
50 – above	547	247	1	795
<b>Total</b>	<b>13,157</b>	<b>7,417</b>	<b>9</b>	<b>20,583</b>

Source: Routine reporting, NCASC

**Table 4.7.6: Estimated HIV Infection and Prevalence by Risk Population Groups, 2011**

Key Affected Population	Total Population (age 15+ years)	Estimated HIV Infections (15-49 years)	% of total infections
People who inject drugs (PWIDs)	31,103	939	2.2%
Male sex workers, Transgender and their clients (MTCs)	73,894	3,099	7.2%
Other men who have sex with men (MSM)	172,525	6,245	14.4%
Female Sex Workers (FSWs)	26,574	647	1.5%
Clients of FSWs	727,854	1,915	4.4%
Male Labour Migrants	1,281,125	11,672	27.0%
Remaining Male Population	4,663,778	6,914	16.0%
Remaining Female Population	7,276,167	11,808	27.3%
<b>Total</b>	<b>14,253,020</b>	<b>43,239</b>	<b>100%</b>

The high prevalence rates among PWIDs, MSM, migrants and clients of FSWs signify a clear need to expand the intervention programs amongst these MARPs. At the same time, the apparent transfer of the HIV load to the remaining male and female populations also necessitates strengthening interventions targeting these vulnerable groups.

## 2. HIV Counselling and Testing (HCT)

HIV counselling and testing (HCT) offers an important entry point to prevention, care and support services. It is an essential component of comprehensive programming of response to HIV. HCT service is the process of providing people with professional counselling before and after an HIV test.

The process helps people prepare for and understand their HIV test results. It is a powerful strategy that can equip people with knowledge and skills for sustainable healthy behavior. HCT mainly aims for:

- prevention of HIV transmission: (i) from +ve tested people to -ve or untested partner/s (ii) from +ve tested mother to child (iii) to -ve tested people from +ve or untested partner/s;
- promote early uptake of services: (i) medical care (ARV therapy; treatment and prevention of opportunity infections; PMTCT) (ii) family planning (ii) emotional care (iv) counselling for positive living (v) social support (vi) legal advice and future planning (vii) normalization of HIV (viii) challenging stigma (ix) promoting awareness, and (x) supporting human rights.

HIV testing and counseling of HIV was first started in Nepal in 1995 at NCASC. As of now, there are altogether 219 HCT sites all over the country. HIV testing and counseling services is provided free of cost to the key populations at higher risk to HIV, including general population from all over the country according the national HTC guidelines. The guidelines for HIV testing and counseling was first developed in 2003 and updated in 2007, and 2010.

The last five years data from HIV tests and counseling services shows a trend of increased number of people getting tested and counselled (Table 4.7.7). However, is critical to have more HIV tests conducted among key populations at higher risk to HIV, and effectively counselled.

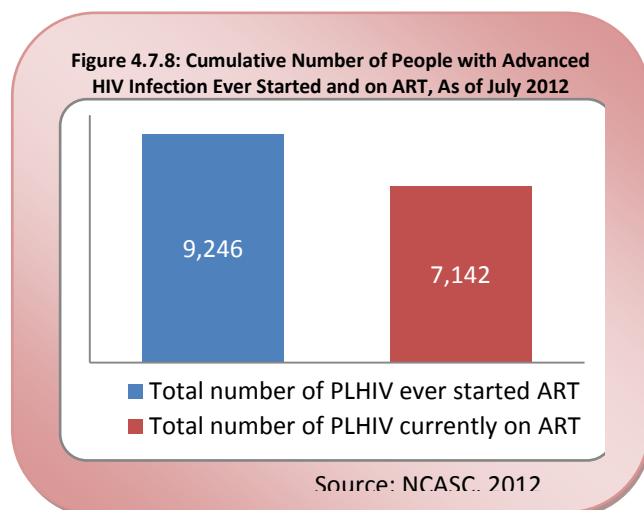
**Table 4.7.7: Service Statistics on HIV Testing and Counseling in Nepal: 2008 - July 2012**

Indicator	2008	2009	2010	2011	July 2012
Pre test Counseling	65,167	71,377	115,013	101,063	70,513
Tested for HIV	53,309	62,672	106,325	95,501	67,275
HIV Positive	2,387	2,110	2,015	2,060	1,465
Post test counseled	51,845	61,170	104,666	94,190	65,971

Source: NCASC (2012) HIV testing and counseling program monitoring report.

### 3. Anti-Retroviral Therapy (ART) Services

The national antiretroviral treatment program was started in Nepal in February 2004 from Teku Hospital. At present 3 or more ARV drugs are recommended for the treatment of people with HIV infection. The main goals of the Antiretroviral Therapy are (a) Maximal and durable suppression of viral load (2) Restoration and/or preservation of immunologic function (3) Reduction of HIV related morbidity and mortality (4) Improvement of quality of life of HIV infected persons (5) Prevention of Mother to Child Transmission (PMTCT) (6) Post Exposure Prophylaxis (PEP). By July 2012, total 7,142 patients with advanced HIV infection were on treatment in 39 ART centres across the country (Figure 4.7.8). The government of Nepal is providing free of cost ART service for all those in need under the National ART guideline.

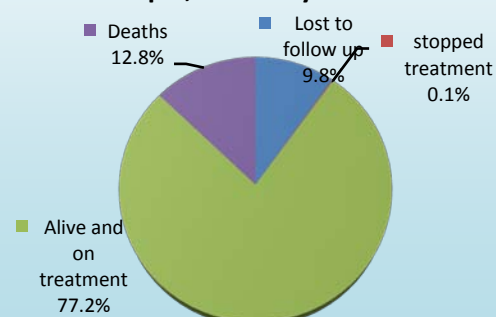


The proportion of adults among people with advanced HIV infection who are currently on ART is 93 percent and the proportion of children is 7 percent. By sex, the proportion distribution of 44.8 percent for female and 0.3 percent for third gender. As per the cohort analysis, people with advanced HIV infection, who are alive and currently on ART after 12 months of treatment is 84.7 percent, who are alive and currently on ART after 24 months of treatment is 78.2 percent.

**Table 4.7.8: Facts on ART in Nepal, As of July 2012**

Total ART need (CD4 $\leq$ 350), (2011):	27,363
Total ART coverage (As of July 2012):	7,142
Patients on the 1 <sup>st</sup> line regimen:	5,413
Patients substituted on the 1 <sup>st</sup> line	1,686
Patients switched on the 2 <sup>nd</sup> line	43

**Figure 4.7.9: Outcomes of ART Programme in Nepal, As of July 2012**



### 1. Prevention of Mother-to-Child Transmission (PMTCT) of HIV

Prevention of HIV infection is a priority for the Government of Nepal. Even though our reported overall prevalence rate remains well under one percent, major efforts will be needed to stop the epidemic spreading from more at-risk populations (MARPs) into the general population. Already, more than one in every five reported cases of HIV infection is among female partners of HIV positive men, and 96 percent of these are women of child bearing age. Prevention of mother-to-child

**Table 4.7.9: Trends of ART Profile of Nepal, As of July 2012**

Indicator	2005/06 July	2007 July	2008 July	2009 July	2010 July	2011 July	2012 July
People living with HIV ever enrolled on ART (cumulative)	522	1,180	2,452	3,968	5,539	7,437	9,246
People with advanced HIV infection receiving ARVs (Cumulative)	522	891	1,997	3,226	4,509	5,876	7,142
People lost to follow up (Cumulative)	32	54	182	293	426	647	908
People Stopped treatment	3	2	5	18	11	12	11
<b>Total death (cumulative)</b>	<b>36</b>	<b>114</b>	<b>276</b>	<b>447</b>	<b>653</b>	<b>872</b>	<b>1,185</b>

Source: Routine reporting, NCASC

transmission (PMTCT) of HIV is therefore an important part of our National HIV and AIDS Strategy.

In early 2007, the National Centre for AIDS and STD Control, UNICEF and other members of the National PMTCT Working Group undertook an operational Review of our pilot program of PMTCT services, which had been launched in December 2003. The review noted that the existing program had a strong focus on hospital-based services – much stronger than its “reach” to the community through prevention-based interventions and the provision of care, treatment and support for people living with HIV (PLHA).

Prevention of mother to child transmission was started in two capital city sites in 2005 and had expanded to 41 sites in 33 districts of which 19 sites were expanded in 2068/69. Besides this Community-Based PMTCT service is available up to primary Health Care Centre (PHC), Health Post (HP) and Sub Health Post (SHP) in 7 districts (Achham, Sunsari, Kailali, Doti, Dadeldhura, Dailekh and Baitadi).

Although HIV positive mother and HIV exposed babies are benefited from PMTCT service expansion in the country. Service statistics indicate that detection of HIV positive pregnant women and service received has increased over the time, but there is still challenge to provide 100 percent service to the mothers and babies who required ARV prophylaxis (Figure 4.7.8).

**Table 4.7.10: Service Statistics on PMTCT in Nepal (2005/06 – July 2012)**

Indicator	2005/06	2007	2008	2009	2010	2011	2012 July
Pregnant women tested for HIV	28,485	32,553	42,733	65,791	94,551	124,025	70,064
HIV positive identified pregnant women	71	59	84	133	138	169	101
Total deliveries by positive mothers	48	38	61	96	120	134	64
Mother received Prophylaxis and ART	35	28	47	77	96	117	64
Babies received Prophylaxis	38	34	57	89	112	129	63

### 4.7.3 Issues and Recommendations

#### Problems/Issues Raised in Regional and National Review, 2068/69

Issues/Problems/Constraints	Recommendation	Responsibility
HIV/AIDS issue yet to be integrated in all sectors/services	Enhance multi-sectoral approach	NCASC
HIV/AIDS related reporting not integrated in HMIS	Establish recording & of HIV/AIDS related activities in HMIS	NCASC/HMIS
Delayed disbursement of budget to district.	Timely disbursement of annual budget to the districts.	MoHP/DoHS/NCASC
Program at regional level are directly conducted by NCASC.	Decentralization of HIV/AIDS program	NCASC
Lack of STI Case management training.	STI case management training should be strengthen along with HTC training.	NCASC
Lack of HTC and PMTCT sites up to PHC level and ART site at District level.	Expansion of the HTC, ART and PMTCT services on the basis of need assessment and geographical MARP	NCASC
Orientation to FCHV on STI and HIV/AIDS	Coordination with I/NGO through DACC	NCASC/DACC
Hospitals have critical gaps in their ability to provide quality services on HIV/AIDS due to lack of staff.	Timely recruitment temporary ART counselors and capacity building of service providers.	NCASC
Frequent transfer of trained staff in the districts results in service interruption	NCASC trains more than one staff as a back-up staff	MoHP/DoHS/NCASC/DHO
Inadequate service sites in the districts	Expansion of service sites.	NCASC

**Challenges**

Despite many efforts by the Ministry of Health and population, programs are challenged to provide equitable access to services. Curative Services are unevenly distributed between regions. Even where services exist, staffing constraints and motivation problems leave communities underserved. Hospitals have critical gaps in their ability to provide quality services for common health problems. There is lot of improvement areas regarding quality service delivery. Access to services is further constrained by a difficult and mountainous geography and social and economic factors.



## 4.8 EYE CARE

### 4.8.1 Background

Blindness and severe visual impairment remain leading causes of suffering and disability in the world. In 2000 World Health Organisation (WHO) made a global estimate that there are over 50 million persons blind (bilateral blindness) and another 110 million persons with low vision who are at great risk of becoming blind. 90% of them are distributed in the developing countries.

Prior to 1980 for a population of 14 million, there were only three ophthalmologists outside the national capital Kathmandu, and only 16 hospital beds were dedicated to eye patients in Nepal and no eye care service were available west of Pokhara. Thus large number of cataract blind used to travel to Sitapur eye Hospital, UP India for cataract surgery.

The 1981 Nepal National Blindness Survey showed that 0.84% of the population was blind in both eyes (<3/60). In those 45 years and older the percentage was 3.77. It was estimated that 80% of this blindness is either curable or preventable. The major cause of blindness was cataract: 83% among those  $\geq$  45 years (65.4% among all ages).

Government eye care infrastructure and human resource was not capable enough to cope with this huge magnitude of blindness thus support from various national and international organization was solicited in this combat against the blindness in the country. Thus Public Private Partnership (PPP) in eye care services of Nepal was initiated in early 80s and different NGOs were delegated the responsibility to develop the eye care service in specified area under umbrella of a NGOs in the country.

Nepal Netra Jyoti Sangh (NNJS) was the pioneer NGO who took lead in eye care services in Nepal. NNJS was established in 1978 with aim to create extensive eye care network in the country to deliver comprehensive eye care service to all section of people irrespective of racial, cast, financial discrimination in the country and developed a master plan in eye care service in the country. Considering its capability government deputed its limited resources to NNJS to carry out the eye care services in the country at national level. Specific program objectives, based on that survey results, were established and Nepal began to build the physical and human infrastructure necessary to address the problem. Primary, secondary and tertiary eye care facilities dedicated to the prevention and treatment of eye diseases were established in the areas of the country with greatest need. The program simultaneously implemented a strategy of training eye care professionals at all levels to staff the hospitals and clinics as they become operative. The NNJS is expanded to 28 districts branches which forms Central Executive Committee based at Kathmandu. So mainly two-tier system exist under NNJS network of eye care. Both the district level NNJS and Central level NNJS are established with a motto of serving to blind and help them to restore their sight. Therefore all its eye care programme is guided with this strategy and solely dedicated to decrease the blindness problem in the country. At present there are 14 Eye Hospitals and 52 Primary Eye Care Centre are functioning under NNJS.

#### **Another NGO established in 1994**

Tilganga Institute of Ophthalmology (TIO) initial name was Tilganga Eye Centre is the implementing body of Nepal Eye Program which is a non-profit, community-based non-governmental organization that is

## Disease Control: EYE CARE

committed to providing quality ophthalmic care to the people of Nepal and developing nations. The TIO incorporates three principal divisions: the Comprehensive Quality Eye Services (Surgicentre, Eye Bank and Outreach programs), the Ophthalmic Products (Fred Hollows Intraocular Lens Manufacturing) and the production of Human Resources for Eye Health (Education/Training and Research).

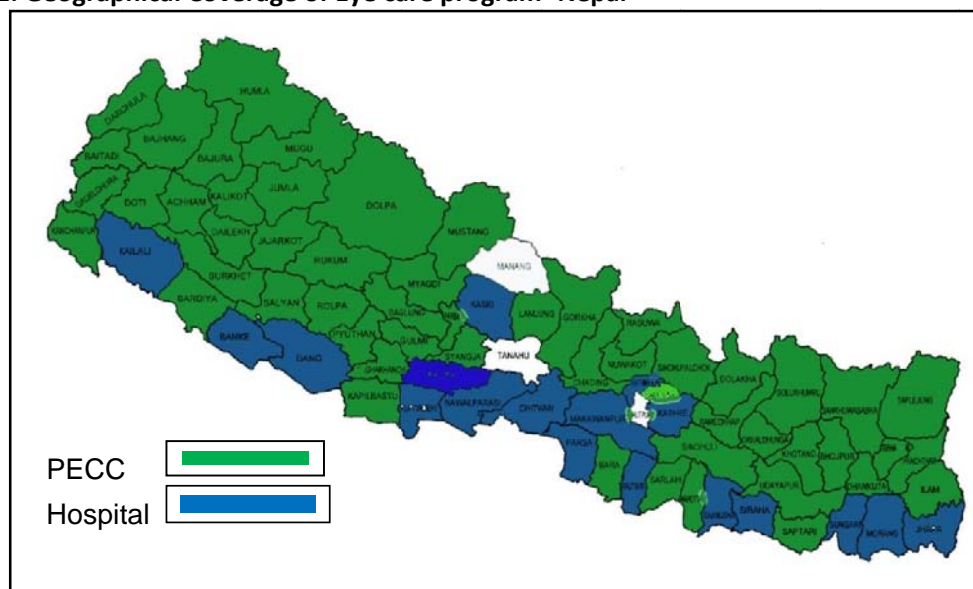
Other Major NGOs who are involved in eye care services in the country are: Nepal Red Cross Society having One Eye Hospital in Janakpur Dham and five Primary Eye Care Centres in Bheri Zones. Lions Club International Foundation (LCIF) also having one eye hospital in Kathmandu namely Lions service Centre and also sponsoring the cost of cataract surgery performed in remote and rural area of the country. The LCIF is also involved in supporting eye hospital for their capacity building activities by supporting in infrastructure development, equipment instrument support and human resource development.

Medical Colleges: The Tribhuvan University Teaching Hospital, Kathmandu started its MD programme in ophthalmology in 1987 has contributed for skilled human resource in eye care such as Ophthalmologist and Optometrist apart of rendering specialty in eye care services in the country. At present National Academy of Medical Sciences (NAMS) Kathmandu, BP Koirala Institute of Health Sciences (BPKIHS), Dharan, and other private medical colleges are also involved in MD Ophthalmology training programme.

### Geographical Coverage of eye care program

As of 2012 out of 75 districts in the country, 72 districts are having permanent eye care infrastructure either hospitals or Primary eye care centres (PECC) within the districts. But there is no permanent eye care service below district level those populations are served only by mobile eye care services. The district wise service coverage is shown in the map given below:

**Map 4.8.1: Geographical Coverage of Eye care program- Nepal**



### 4.8.2 Achievements

After launching of Vision 2020, the eye care programme became more focussed according to the guideline and target provided by the Vision 2020. The disease focussed strategies were adopted and various vertical programmes for Cataract, Trachoma, Xerophthalmia, Refractive Error and Low Vision were launched. After a decade of launching of Vision 2020, the situation analysis showed that there

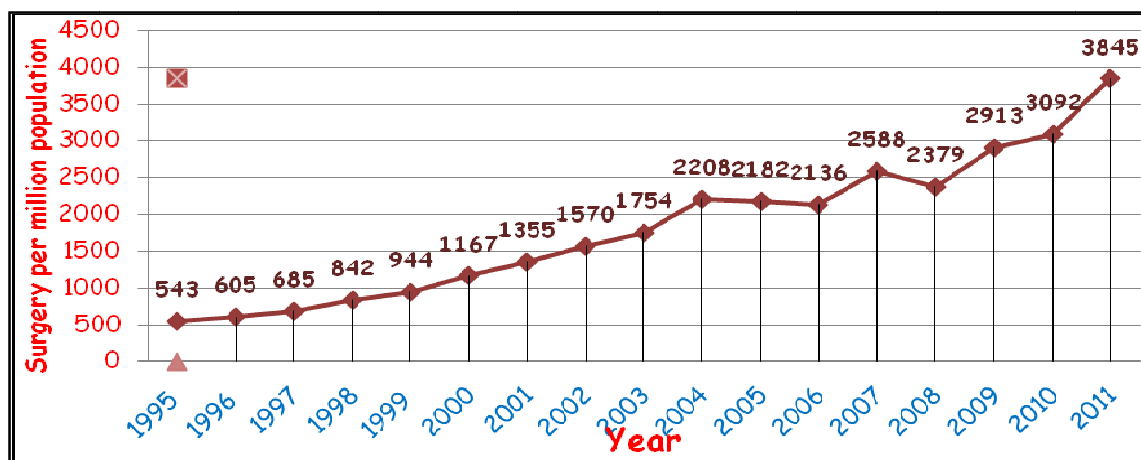
have been significant improvements made by the eye care programme of Nepal. It has been taken as successful example of NGO run eye care service at international level. The prevalence of blindness has now reduced to 0.35% from the 0.84% in 1981. Even though the prevalence of blindness has proportionately decreased by more than half compared to the prevalence of 1981, due to population having doubled, the number of blind remains almost the same. Now definition of blindness is also changing and a visual acuity of  $<6/60$  is considered as economic blindness. Due to advancement of technology and greater visual need of the population almost all eyes with  $VA < 6/60$  due to cataract are advised or patients themselves demand for surgery, therefore considering the magnitude, our work load for the future eye care programme has to be doubled. Now we are able to clear the back log of blindness among those who easily access the service and the cause are avoidable. The remaining proportion are either the resistant cases or many of them are with unavoidable causes and the cohort having prominent barrier to access the services. So it indicates that the tough road is ahead and more effective programme is required. Thus, it shows that a significant improvement has been achieved in terms of blindness reduction in last decades but still there is a lot more to be done to achieve the goal of Vision 2020.

A significant development is also seen in terms of infrastructure development in this period; now more than 72 districts have either primary eye care centre or eye hospital. The remaining district also gets mobile eye care service at least once a year. The technology adopted in eye care practice in the country is regularly updated and of internationally accepted standards. However, most of the eye hospitals are located either in Terai or in major cities. The service expansion in the far, inaccessible and remote area is the challenges to be overcome in this second decade of Vision 2020 period.

In terms of human resource development, the number of Ophthalmologists, Ophthalmic Assistants, Optometrists, Eye Care Managers, Bio-med Engineers have satisfactorily increased. However, it's both the inadequate number and inequitable distribution are also the major challenges to be tackled. In the disease control component, it seems that several new strategies with definite target with coherent indicators are to be further refined and a regular monitoring system is to be in place.

With this PPP effort the number of cataract operations increased from approximately 1,000 in 1981 to more than 250,000 in 2012. The situation of travelling to India for cataract surgery has been reversed and most of the cataract operations are performed on people from outside Nepal, mainly Indians, and around 40% (102,000) on Nepali citizens.

The figure 4.8.1 given below shows the number of cataract surgery performed in Nepalese eyes in per million population. It is been assumed that there are need of more than 6000 cataract surgery need to be performed in a million population to reduce the magnitude of cataract blind below public health significance in a community. It shows that we have reached just more than half and still lot of effort and resource is required to achieve this target to eliminate this leading cause of cataract blindness in the country.

**Figure 4.8.1: The number of cataract surgery performed in Nepalese eyes in per million populations****Table 4.8.1: Comparison of blindness rate according to age: (Source: RAAB Survey Result)**

Zone	<3/60, 1981	<3/60, 2010 (extrapolated)	<6/60, 2010 (extrapolated)
Mechi	0.64	0.35	0.79
Koshi	0.99	0.35	0.84
Sagarmatha	0.98	0.23	0.6
Janakapur	0.73	0.38	0.52
Bagmati	0.62	0.10	0.52
Narayani	0.99	0.81	2.8
Gandaki	0.46	0.25	0.42
Dhaulagiri	0.53	0.20	0.5
Lumbini	0.75	0.38	0.53
Rapti	0.87	0.13	0.52
Bheri	1.26	0.45	1.12
Karnali	1.63	0.12	0.83
Seti	1.24	0.41	0.76
Mahakali	1.24	0.41	0.76
<b>All</b>	<b>0.84</b>	<b>0.35</b>	<b>0.82</b>

**Conclusions**

- There has been an enormous expansion of infrastructure, equipment and human resources for eye care services throughout Nepal between 1981 and 2011
- Eye care services are not integrated in general health care services and provide limited coverage of remote rural areas. Coverage is insufficient in a number of zones.
- There is too much emphasis on financial sustainability and less attention for reduction of avoidable blindness in Nepal
- The number of cataract operations is high, but 64% is on foreign patients
- Eye care in Nepal is mainly driven by NGOs; there is little involvement by GoN.

- 
- The capacity of the eye care programme is sufficient but needs further expansion to cater for future needs
  - The prevalence of blinding trachoma has reduced

#### **4.8.3 Recommendations**

##### **1. Integration of eye care and general health programmes at district and zonal level.**

- a. Primary eye care service should be provisioned at community level.
- b. Cataract surgical services should be available in all district headquarter of the country.
- c. Develop referral network between grassroots level eye care service to district level eye care services in collaboration with non-governmental organizations.

##### **2. The eye care programme of Nepal should focus on the elimination of avoidable blindness in Nepal.**

- a. Focus on the needs of local population.
- b. Expand eye care services to rural communities vision testing and cataract identification service should be available in all village level health institution.
- c. Increase the number of cataract operations on Nepali citizens.

##### **3. Decentralise the eye care programme to the zones.**

- a. Develop VISION 2020 action plans for each zone.
- b. This should change local competition into local cooperation.
- c. Provide possibilities to use local solutions to local problems.
- d. Extra inputs to zones that have less developed eye care services.

##### **4. Develop adequate infrastructure to provide optical services throughout Nepal.**

- a. Refraction and optical dispensing service should be expanded to constituent to reduce uncorrected refractive errors.

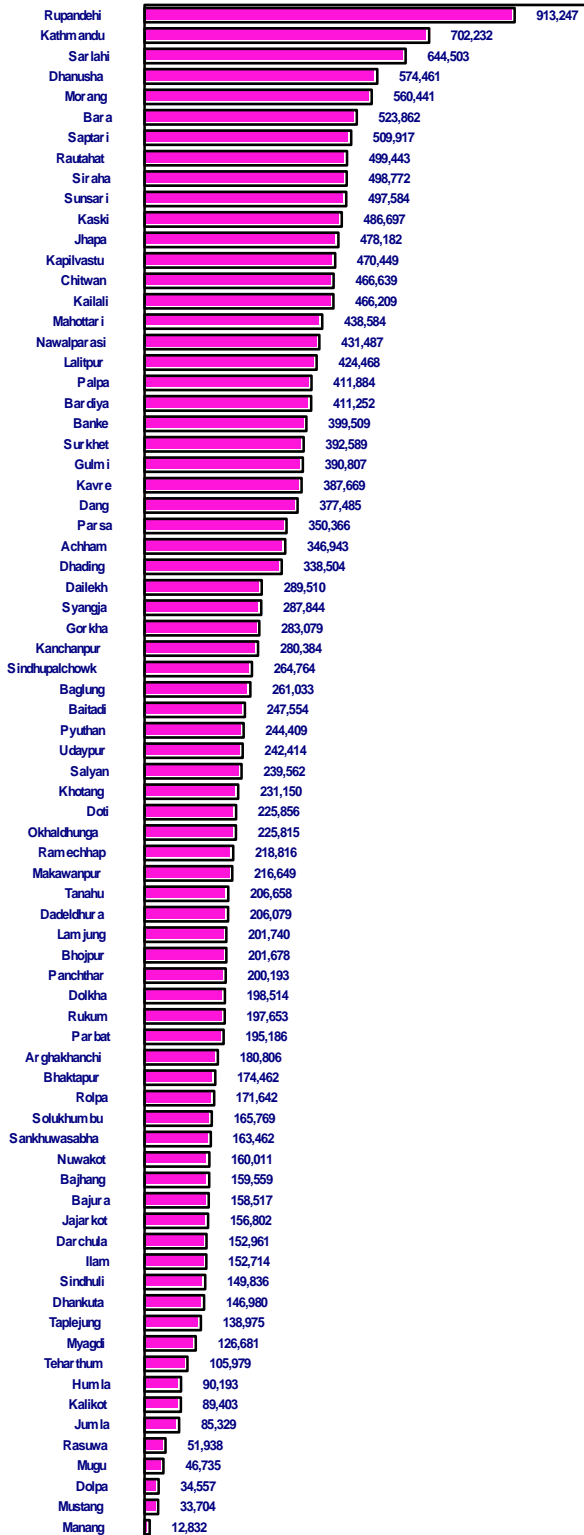
##### **5. Experiment with special programmes to control blindness from Diabetic Retinopathy and Glaucoma.**

- a. Actual Prevalence of Diabetes and Diabetes Retinopathy need to be revealed and mapped.
- b. Glaucoma identification service needs to be expanded to district level eye care programme.

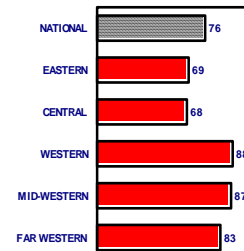
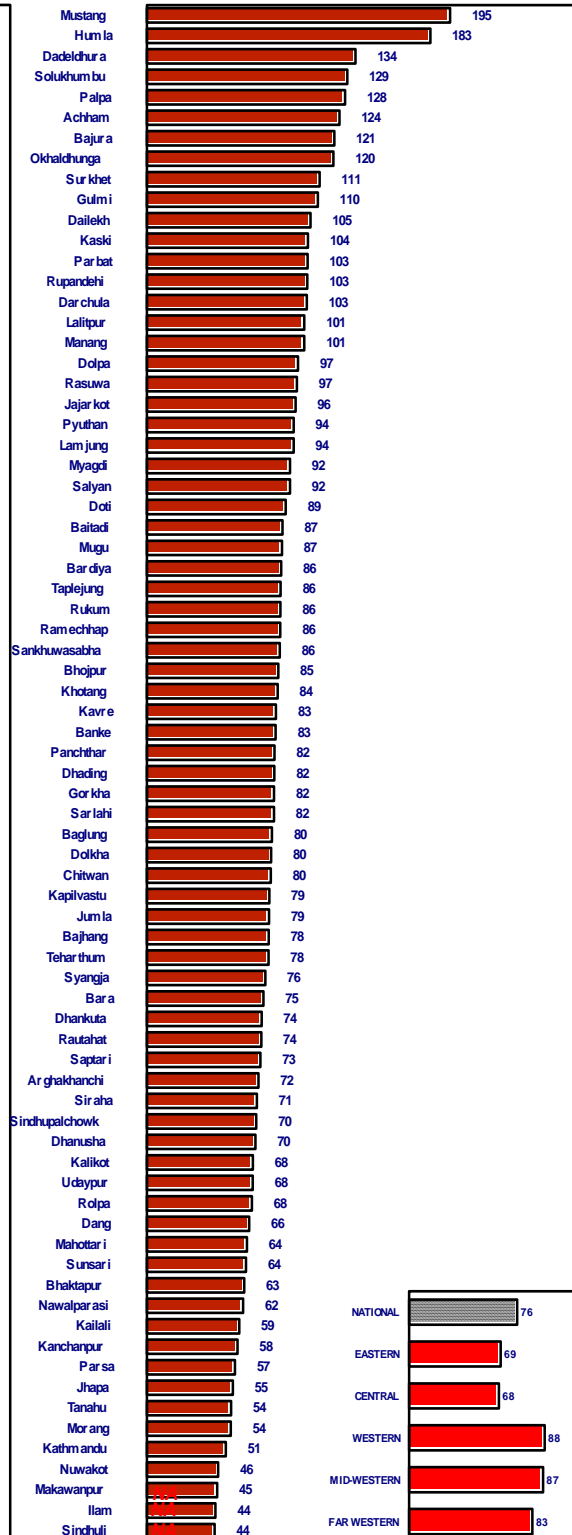
# Morbidity

Fiscal Year 2068/69 (2011/2012)

Total OPD New Cases



OPD Total New Cases as % of Total Population



# CURATIVE SERVICES

## 5.1 BACKGROUND

Government of Nepal is committed to improving the health status of rural and urban people by delivering high-quality health services throughout the country. Curative (out-patient, in-patient and emergency) services are highly demanded component of health services by the people. The policy is aimed at providing prompt diagnosis and treatment, and referral of cases through the health network from PHC outreach clinics to the specialised hospitals.

The Interim Constitution of Nepal 2063 has emphasized that every citizen shall have the rights to basic health services free of costs as provided by the law. Ultimately, government of Nepal decided to provide essential health care services (emergency and inpatient services) free of charge to poor, destitute, disabled, senior citizens and FCHVs up to 25 bedded district hospitals and PHCCs (December 15, 2006) and all citizens at SHP/HP level (8 October, 2007).

### Objectives

The overall objectives of curative services is to reduce morbidity, mortality and to provide quality health services by means of early diagnosis, adequate as well as prompt treatment and appropriate referral, if necessary.

### Strategies

- Provide curative services on the basis of a comprehensive and effective referral system initiating from PHC Outreach Clinics to higher level.
- Improve coordination between public and private sector. Promote private medical colleges/hospitals, nursing homes, and hospitals run by INGOs/NGOs and private practitioners as complementary to MoHP facilities.
- Provide required human resources to Regional Health Directorates and District Public/Health Offices and authority to render curative services more effectively.
- Consider every Village Development Committee (VDC) in the country as the basic level for curative health services through Sub Health with three health workers; an Auxiliary Health Worker (AHW), a Village Health Worker (VHW) and a Maternal and Child Health Worker (MCHW).
- Increase access to the reproductive health services such as Depo, Pills, Condoms and antenatal and postnatal services, child health services, minor curative services and health education through PHC Outreach clinics in each VDC.
- Health Posts provide services similar to those provided by the Sub Health Posts. In addition, they supervise and evaluate the activities of the Sub Health Posts and below.
- Upgrade Sub Health Post to Health Post; Health Post to PHCCs and PHCC to hospital in the different electoral constitutions.
- Make primary health care and treatment services available at local, district and regional level by strengthening the Regional Health Directorates and District Health Offices.
- Consolidate referral system for the development of effective medical services.

## 5.2 Major Activities

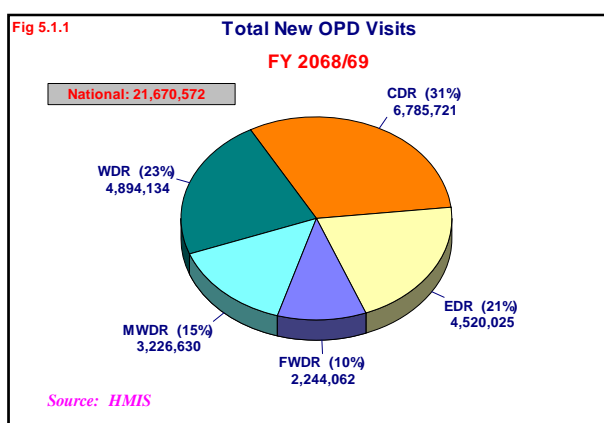
- Curative health services were provided through the existing health facilities on an outpatient including emergency where ever available and inpatient basis.
- In-patient services were provided by 122 government hospitals including INGOs/NGOs, Private medical college hospitals, nursing homes, and private hospitals as per the report available.
- Essential drugs and other logistic materials were provided to all health institutions.
- Record keeping and reporting were done on a daily, weekly and monthly basis at all institutions.
- Medical camps were organised in different places especially in the remote districts.
- JE vaccination campaigns were conducted in JE affected districts.

## 5.3 Analysis of Achievement

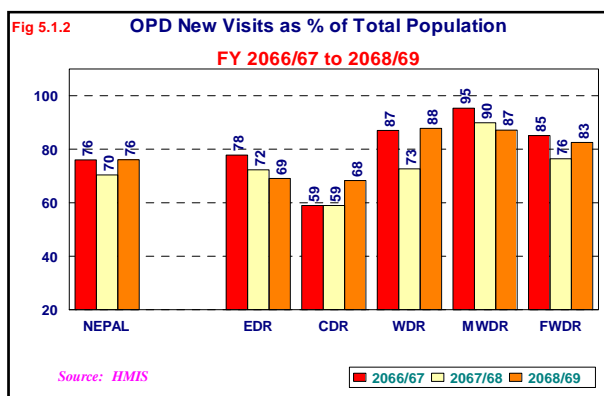
### 5.3.1 Outpatient Services

Outpatient services include services delivered through all service delivery outlets from sub-health posts to tertiary level hospitals.

A total of 21.6 million new out-patient visits were reported in 2068/69; except Lalitpur, Parsa and Rupandehi districts<sup>1</sup>. The highest number of new outpatient visits 67,85,721 (31%) was recorded in the CDR while the lowest number of new outpatient visits was recorded in the FWDR 22,44,062 (10%) (Figure 5.1.1).



The percentage of outpatient new visits increased from 70 percent in 20687/68 to 76 percent in 2068/69 (Figure 5.1.2). WDR observed the highest percentage of outpatient new visits (88%) followed by MWDR (87%) and FWDR (83%) and lowest percentage was observed in CDR (68%) in 2068/69. Analysis of district specific data indicates that the percentage of outpatient new visits was higher than the total population of the district in 15 districts (Annex). The highest percentage of outpatient cases was observed in Mustang (195%) followed by Humla district (183%). The percentage of OPD visits has an increasing trend from densely populated areas to sparsely populated ones.



<sup>1</sup> Recording and reporting tools in these three HSIS pilot districts are different from the 72 non-pilot districts and the databases are not compatible to each other so this figure does not include patients from these 3 districts.



Outpatient Morbidity

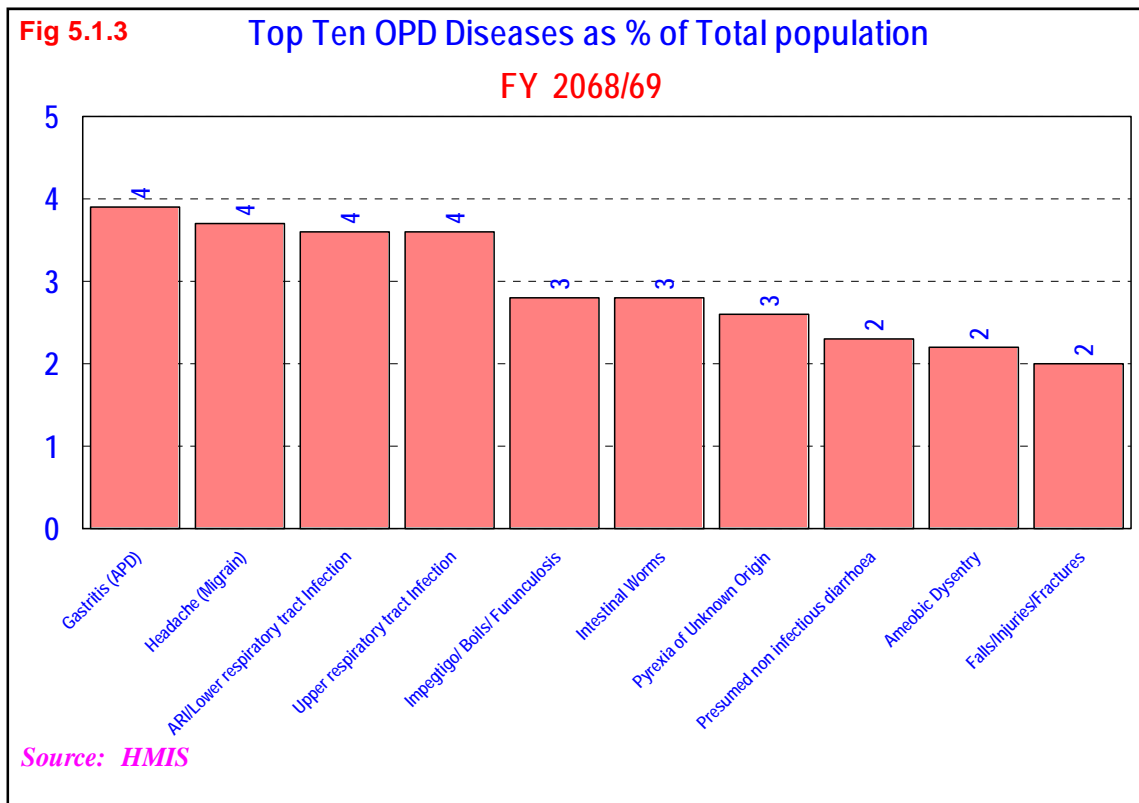
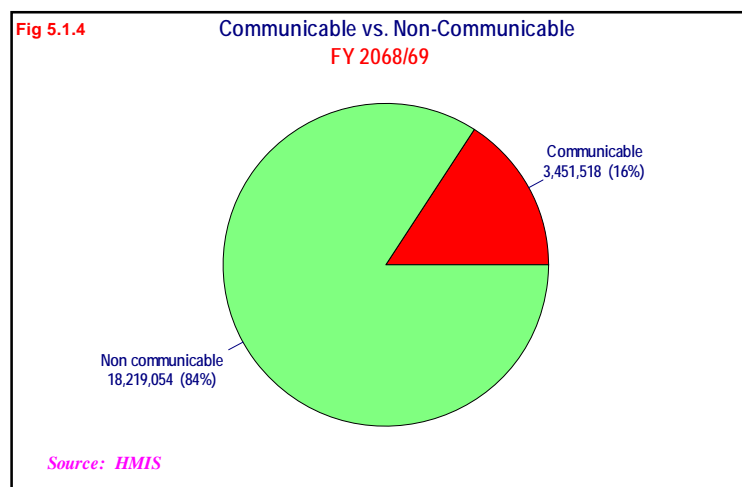


Figure 5.1.3 shows the top ten causes of outpatient morbidity in 2068/69. While data exhibits that Gastritis (APD) is the highest recorded among the top ten outpatient morbidity (3.9%) followed by Headache (Migraine) (3.7%), ARI/Lower respiratory tract infection (3.6%), Upper respiratory tract infection (3.6%). Other major reported causes for outpatient morbidity are Impetigo/Boils/Furunculosis (2.8%), Intestinal worm infestation (2.8%), Pyrexia of unknown Origin (2.6%), Presumed non Infectious Diarrhoea (2.3%), Amoebic Dysentry (2.2%), and Falls/Injuries/Fractures (2.0%).

**Communicable and Non-communicable Diseases**

Of the total 2,16,70,572 outpatient new visits in 2068/69, disproportionately high cases (84%) were identified as non-communicable diseases (Figure 5.1.4). The figure was similar for the previous years. Of the total outpatient new patients, the proportion of communicable disease was higher in MWDR (19.3%) followed by EDR (19%) and FWDR (17.6%), and it was lowest in WDR (11.6%) (Table 5.1.1).



CURATIVE SERVICES

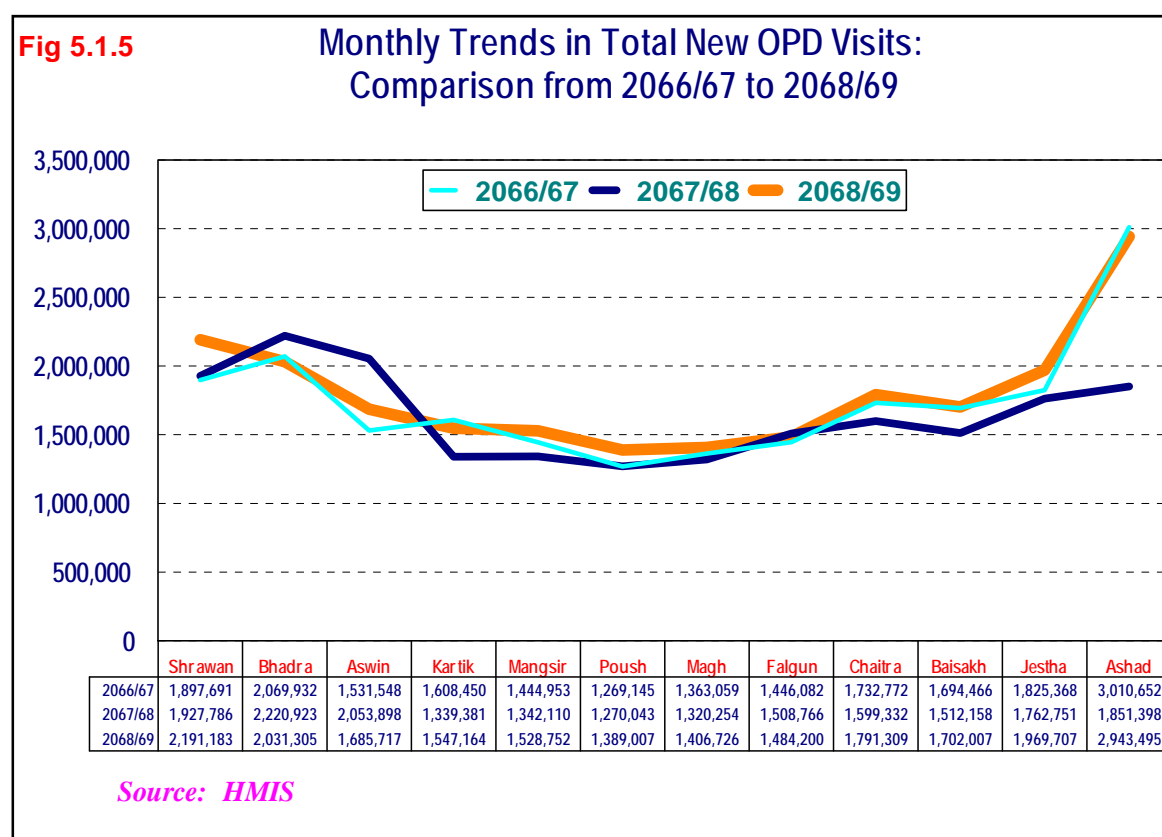
**Table 5.1.1: Communicable and Non-Communicable Diseases among Total Outpatient New Cases**

Level	Communicable		Non Communicable		Total
	No.	%	No.	%	
Eastern	857,834	19.0	3,662,191	81.0	4,520,025
Central	1,008,493	14.9	5,777,228	85.1	6,785,721
Western	566,024	11.6	4,328,110	88.4	4,894,134
Mid-western	624,196	19.3	2,602,434	80.7	3,226,630
Far-western	394,971	17.6	1,849,091	82.4	2,244,062
National	3,451,518	15.9	18,219,054	84.1	21,670,572

Out of the total communicable diseases reported, more than one fourth (29%) were reported in CDR, followed by EDR (25%); and the lowest cases were reported in FWDR (11%) (Table 5.1). Likewise, of the total non-communicable diseases reported, more than one fourth (32%) were reported in CDR, followed by WDR (24%); and the lowest cases were reported in FWDR (10%).

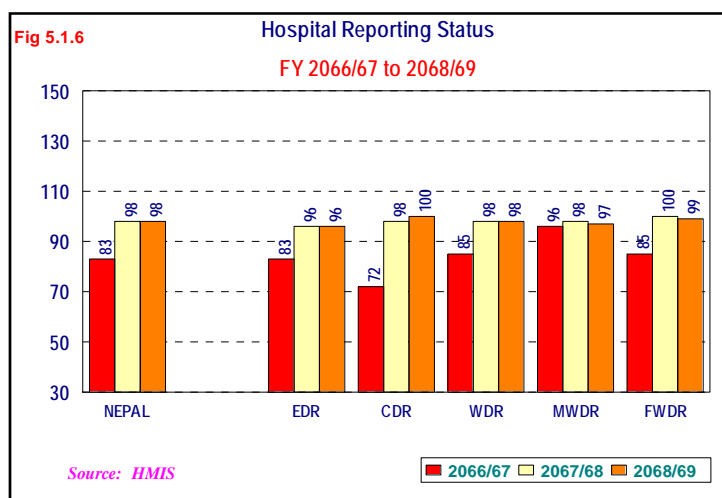
**Outpatient Monthly Trend**

Analysis of the outpatient cases by month shows that as in the previous year the highest number of cases were reported during the months of Jestha and Asar (May, June, July) and lowest during the months of Kartik, Mangsir, Poush and Magh (October, November, December, January, February) (Figure 5.1.5). This trend has remained almost the same over the last three years.



### 5.3.2 Inpatient Services

Inpatient services include services delivered through hospitals only. This section analyses the inpatient services provided by public and non-public hospitals. Reporting of the services is mainly from public hospitals. Very few non-public hospitals have reported to HMIS. Overall, at the national level the reporting status of public and non-public hospitals has increased from 83 percent in 2066/67 to 98 percent in 2068/69 (Figure 5.1.6). At the regional level, hospital reporting status varied from 96 percent in eastern region to 100 percent in central region in 2068/69.



#### Inpatient Morbidity

A total of 430,179 patients were admitted in hospitals and of them 426,238 patients were discharged from the hospitals in 2068/69. Of the total 426,238 inpatients recorded in 2068/69, 76 percent cases (324,955) were classified under ICD code (Table 5.1.2). Single spontaneous delivery (O80) was the most common morbidity (27%) followed by single spontaneous delivery, unspecified Diarrhoea (O80.9) (4%) and Gastroenteritis of Presumed Infectious Origin (A09) (4%) were the leading three causes for hospitalization.

**Table 5.1.2: Top Ten Reasons for Hospitalization, 2068/69**

SN	ICD Code	Cause of Hospitalization	Patients (N)	Percent
1	O80	Single spontaneous delivery	86,153	26.5
2	O80.9	Single spontaneous delivery, unspecified	13,497	4.2
3	A09	Diarrhoea & gastroenteritis of presumed infectious origin	13,483	4.1
4	J18	Pneumonia, organism unspecified	10,236	3.1
5	J22	Unspecified acute lower respiratory infection	10,199	3.1
6	A01	Typhoid and paratyphoid fevers	9,766	3.0
7	J44	Other chronic obstructive pulmonary disease	9,367	2.9
8	N39	Other disorders of urinary system	7,060	2.2
9	O82	Single delivery by caesarean section	6,779	2.1
10	O06	Unspecified abortion	5,467	1.7
		Others reasons	254,231	59.6
		<b>Total number of discharge patients</b>	<b>324,955</b>	<b>100</b>

Source: HMIS

Table 5.1.3 presents the age and sex distribution of discharged inpatients for fiscal year 2068/69. More than one third (37%) of the inpatients discharged were in the age group of 20-29 years.

CURATIVE SERVICES

**Table 5.1.3: Inpatients Morbidity by Age and Sex, 2068/69**

Age Group	Female		Male		Total	
	N	%	N	%	N	%
<28 days	4,494	1.4	6,560	2.0	11,054	3.4
29 days - 1 yrs.	6,193	1.9	10,983	3.4	17,176	5.3
1 - 4 yrs.	7,083	2.2	10,972	3.4	18,055	5.6
5 - 14 yrs.	8,532	2.6	11,824	3.6	20,356	6.3
15 - 19 yrs.	30,811	9.5	5,965	1.8	36,776	11.3
20 - 29 yrs.	111,109	34.2	8,842	2.7	119,951	36.9
30 - 39 yrs.	28,450	8.8	8,049	2.5	36,499	11.2
40 - 49 yrs.	10,971	3.4	7,879	2.4	18,850	5.8
50 - 59 yrs.	8,600	2.6	7,422	2.3	16,022	4.9
60 yrs. +	15,198	4.7	15,018	4.6	30,216	9.3
<b>Total</b>	<b>231,441</b>	<b>71.2</b>	<b>93,514</b>	<b>28.8</b>	<b>324,955</b>	<b>100.0</b>

Source: HMIS

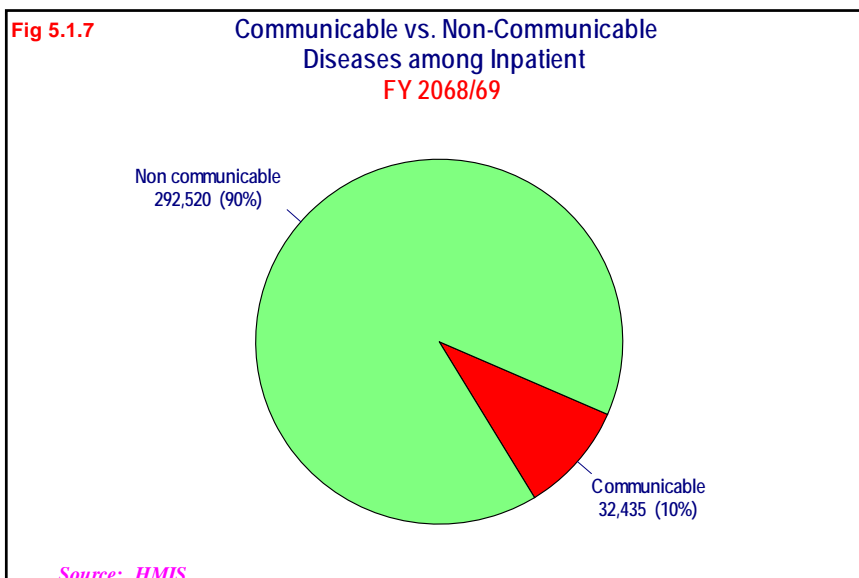
A total of 132,275 deliveries were conducted at hospitals in 2068/69 (Table 5.1.4). Similarly, a total of 3,756 deaths were recorded and of them 76 were maternal deaths (2.02%). The data shows that 84,506 surgeries were done in the hospitals in 2068/69. The average length of stay at hospital was recorded at 3.2 days and bed occupancy rate was 50.6.

**Table 5.1.4: Hospital Deliveries, Surgeries and Maternal Deaths, 2068/69**

Total deliveries conducted	132,275
Maternal deaths	76
Surgeries	84,506
Total hospital deaths	3,756
Total inpatient days	1,349,716
Average length of stay at hospital	3.2
Bed occupancy rate	50.6

Source: HMIS

A large majority of the inpatients discharged (90%) were admitted for non-communicable diseases and 10 percent were admitted for the communicable diseases in 2068/69 (Figure 5.1.7). The death rate among inpatients with communicable diseases was 0.1 percent and for non-communicable disease it was 0.6 percent.



### 5.3.3 Central Hospitals

Table 5.1.5 highlights the comparative curative services rendered by different central level hospitals during the fiscal years 2066/67 to 2068/69. As compared to 2066/67, the services rendered to inpatients from National Academy of Medical Sciences (NAMS)/Bir hospital, Paropkar Maternity and Women's Hospital, Mental Hospital, Sukraraj Tropical and Infectious Diseases Hospital, Shahid Gangalal National Heart Centre and BP Koirala Institute of Health Sciences has decreased except Kanti children's Hospital in 2068/69 compared to 2066/67.

**Table 5.1.5: Central Level Hospitals Statistics, 2066/67 to 2068/69**

Name of Central Hospital	Fiscal Years	Beds Available	Outpatients & emergency cases	Inpatients
National Academy of Medical Sciences (NAMS) Bir Hospital	2066/67	460	319,079	10,396
	2067/68		336,400	10,935
	2068/69		327,998	9,731
Kanti Children's Hospital	2066/67	314	158,640	11,302
	2067/68		149,951	9,520
	2068/69		153,653	9,567
Paropakar Maternity and Women's Hospital	2066/67	423	170,491	28,821
	2067/68		176,728	29,268
	2068/69		168,418	28,267
Mental Hospital	2066/67	45	26,182	826
	2067/68		28,022	893
	2068/69		26,822	840
Sukraraj Tropical & Infectious Disease Hospital	2066/67	100	24,689	3,843
	2067/68		16,230	3,874
	2068/69		18,711	3,106
Shahid Gangalal National Health Centre	2066/67	160	104,217	11,492
	2067/68		111,271	12,301
	2068/69		118,953	12,212
BP Koirala Institute of Health Sciences	2066/67	700	330,640	38,095
	2067/68		333,190	38,909
	2068/69		359,383	37,451

Source: Respective Hospitals

Table 5.1.6 shows the Bed Occupancy Rate, Death Rate among inpatients in 2068/69 in central hospitals. The bed occupancy rate of the seven central hospitals ranges from 30.9 percent in Sukraraj Tropical & Infectious Disease Hospital to more than 92 percent in Kanti Children's Hospital. The highest bed occupancy rate (92.3%) is observed in Kanti Children's Hospital followed by Mental Hospital (88%), Paropakar Maternity and Women's Hospital (82%) compared to other hospitals and the lowest bed occupancy rate was observed in Sukraraj Tropical & Infectious Disease Hospital (31%). The highest death rate of 2.7 percent among inpatients was reported by BP Koirala Institute of Health Sciences.

CURATIVE SERVICES

**Table 5.1.6: Bed Occupancy Rate, Death Rate among In-patients and Percentage of Female Patients treated by Central Hospitals, 2066/67 to 2068/69**

Name of Central Hospital	Fiscal Year	Bed Occupancy Rate	Death Rate (Inpatients)
National Academy of Medical Sciences (NAMS) Bir Hospital	2066/67	72.4	7.8
	2067/68	53.2	5.6
	2068/69	39.2	NA
Kanti Children's Hospital	2066/67	91.5	1.2
	2067/68	92.2	1.8
	2068/69	92.3	2.1
Paropakar Maternity and Women's Hospital	2066/67	80.4	0.0
	2067/68	84.0	0.0
	2068/69	82.0	0.0
Mental Hospital	2066/67	72.8	0%
	2067/68	82.0	0%
	2068/69	88.2	0%
Sukraraj Tropical & Infectious Disease Hospital	2066/67	30.9	2.0
	2067/68	34.3	2.1
	2068/69	30.9	NA
Shahid Gangalal National Heart Centre	2066/67	77.4	2.4
	2067/68	78.1	2.4
	2068/69	80.8	2.4
BP Koirala Institute of Health Sciences	2066/67	75.8	3.5
	2067/68	69.7	3.3
	2068/69	68.7	2.7

Source: Respective Hospitals

Table 5.1.7 and Table 5.1.8 show the five leading causes of morbidity and mortality pattern among inpatients within the seven central level hospitals. The five leading causes of inpatients morbidity and mortality are quite different because of the different services being provided by these hospitals.

**Table 5.1.7: Five Leading Causes of Morbidity among Inpatients in the Central Hospital, 2068/69**

Central Hospital Name	Five Leading causes of Morbidity (no. of patients)				
	I	II	III	IV	V
National Academy of Medical Sciences (NAMS) Bir Hospital	NA	NA	NA	NA	NA
Kanti Children's Hospital	Pneumonia/ Bronchitis (2,084)	AGE (1,256)	Neonatal Sepsis (878)	Enteric Fever (444)	Septicemia (287)
Paropakar Maternity and Women's Hospital	Abortion complication (1,681)	Menstrual disorders (287)	Fibroid Uterus (211)	Hyperemesis Gravidarum (159)	Gestational trophoblastic disease (157)
Mental Hospital	Bipolar affective disorder	Schizophrenia & related disorder	Alcohol Dependent Syndrome	Depression	Acute Anxiety disorders
Sukraraj Tropical & Infectious Disease Hospital	Gastro enteritis (1,712)	PLHA (379)	Snake bite (284)	Enteric Fever (176)	UTI (45)
Shahid Gangalal National Heart Center	Coronary Artery Diseases	Heart Failure	Congenital Heart Diseases	Rheumatic Heart Diseases	Infective Endocarditis
BP Koirala Institute of Health Sciences	Cholelithiasis (1,140)	Neonatal sepsis (649)	Pneumonia (539)	Low Birth Weight (528)	Pesticide toxicity (524)

Source: Respective Hospitals

**Table 5.1.8: Five Leading causes of Mortality among Inpatients in the Central Hospitals, 2067/68**

Central Hospital Name	Five Leading Causes of Mortality				
	I	II	III	IV	V
National Academy of Medical Sciences (NAMS) Bir Hospital	NA	NA	NA	NA	NA
Kanti Children's Hospital	Respiratory Diseases (103)	Neonatal Sepsis (39)	Septicemia (10)	Burn (9)	Meningitis (7)
Paropakar Maternity and Women's Hospital	Amniotic fluid embolism (2)	Eclampsia with ruptured uterus (1)	Ruptured uterus with Septicemia/ Shock (1)	0	0
Sukraraj Tropical & Infectious Disease Hospital	PLHA (59)	Tetanus (7)	Rabies (4)	Acute Gastroenteritis (4)	Kala-azar (2)
Shahid Gangalal National Heart Centre	Coronary Artery Diseases	Rheumatic Heart Diseases	Congenital Heart Diseases	Heart Failure	Arrhythmia
BP Koirala Institute of Health Sciences	Low Birth Weight (95)	Birth Asphyxia (92)	Cardiac arrest (75)	Bacterial Sepsis of NB (51)	Septicemia (49)

Source: Respective Hospitals

**5.4 Issues and Recommendations**

Issues	Recommendations	Responsibility
Shortage of human resources-vacant posts	Sufficient HR to be recruited	MoHP
Insufficient budget for infrastructure & equipment	Additional budget is to be allocated	MoHP/MoF
No standard case management protocol	Protocol is to be developed	Respective institutions
Poor quality of services	Additional HR and training to be provided	MoHP/DoHS
Poor coverage of services (specially obstetric)	Public private partnership is to be developed	MoHP and stakeholders
Retention of HR	Incentives to be provided	MoHP/MoF
Non-availability of histopathology/ cytology services in central hospitals (specially KCH)	Histopathology services is to be made mandatory in hospitals with >100 beds	MoHP
Lack of apex body in child health care	'Institute of Child Health' is to be established at KCH	MoHP
Insufficient research and research training activities	Program & Budget to be designed research and research training activities	MoHP, MoF
Structure of development boards	Development boards to be made non-political with membership of health professionals	MoHP & political parties
Social Security for poor	Budget for poor patients to be increased and social service unit to be established	MoHP, MoF
Non-communicable disease (NCD) program	NCDs to be incorporated in regular program	MoHP/MoF

Note: Please see Annexes

# Supporting Programmes

6.1	Health Training .....	169
6.2	Health Education, Information and Communication .....	178
6.3	Logistics Management .....	183
6.4	Public Health Laboratory Services .....	193
6.5	Personnel Administrative Management .....	201
6.6	Financial Management .....	204
6.7	Management .....	212
6.8	Primary Health Care Revitalization.....	221



# SUPPORTING PROGRAMS

## 6.1 HEALTH TRAINING

### 6.1.1 Background

National Health Training Centre (NHTC) has a network of 5 regional health training centres, one sub-regional health training centre, district level training facilities in 30 districts and 14 training health posts in 13 districts. At the district level a team of 5-7 district trainers provide training to the concerned health workers. Clinical competency based training are provided through 21 clinical training sites operating at regional and zonal hospitals. Various supporting partners are providing collaborative support to national health training centre in planning and execution of training programs. NHTC have accomplished 100 percent of the targeted Skilled Birth Attendant (SBA) training in 2068/69 and this has contributed in filling the gap of required number of SBA service providers in the country. NHTC also conducted basic, in-service, refresher, up-grading training along with clinical, non-clinical and other management training.

The health care delivery system has remained competent in providing health care services up to the community people through developing skilled human resources. But at the same time, the training system still needs to be improved to the proficient level to meet the international standard. Skilled human resource for health is the main component to cater quality health services to the people. Ministry of Health and Population (MOHP) thus accord high priority for the development of competent human resource through quality training program for improved health care service delivery. To materialise this fact National Health Training Strategy (NHTS) 2004 has been revised and updated. The NHTS-2004 focused on development and management of human resources at all levels, through shared responsibility with NGO/INGO and private sector, for delivering quality health care services. At the same time, it has also focused on overseeing all training need of MOHP through co-ordinated and complimentary efforts of all stakeholders, support partners and private sector training resources under the stewardship of MOHP. The strategy also envisaged for an integrated national health training system to maximise quality training for all resource persons and trainee health workers.

National health training centre is an apex body for human resource development towards meeting Nepal Health Sector Program (NHSP) outputs and millennium development goals 4, 5 and 6. Thus, it aims to cater the training needs of various divisions/centres of department of health services, department of drug administration and department of Ayurveda under MOHP.

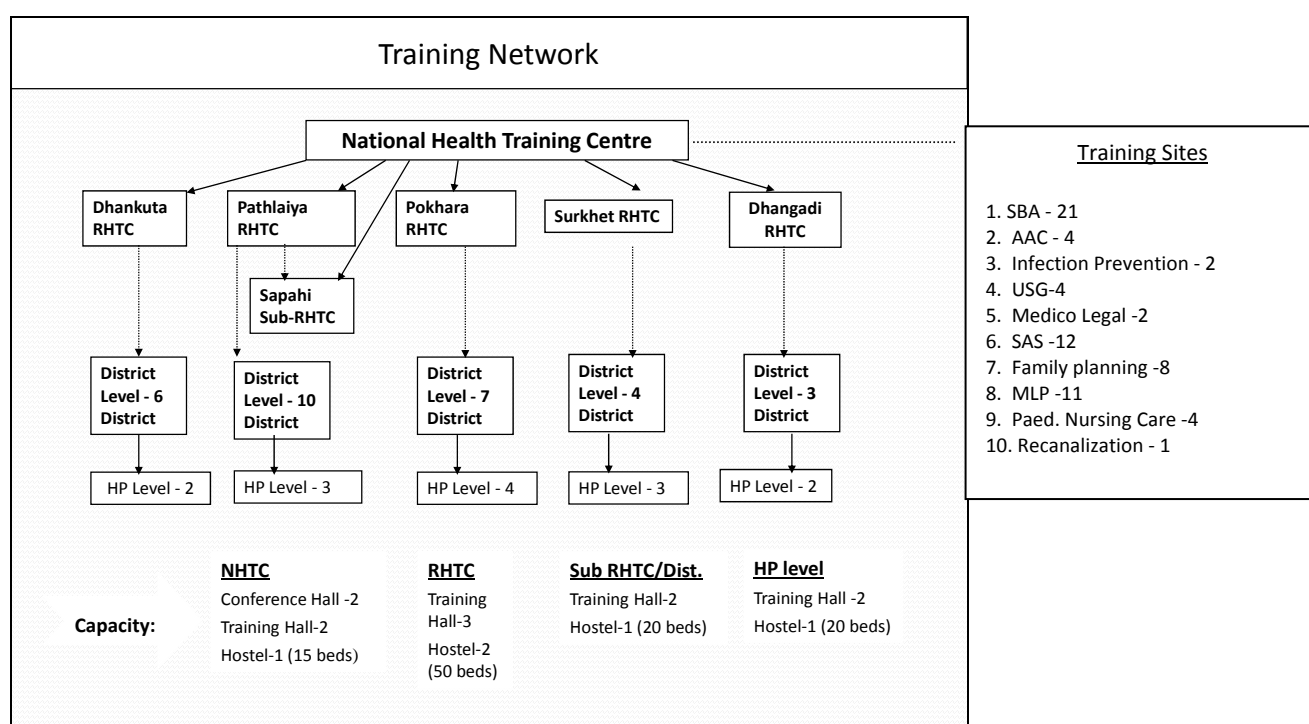
#### Training Network

The national health training system is an integrated and cross-cutting effort towards meeting the training needs for quality health care delivery throughout the country. In line with the national policies, plans and programs of MOHP an efficient training network has been developed up to the district level to address the human resource need of the overall health sector. The training network

## Supporting Programs: Health Training

is comprised of national health training centre, five regional health training centres, and one sub regional health training centre, 30 district level training facilities and 14 training health posts in 13 districts. At the district level health training is delivered through a team of 5-7 district-trainers to the concerned health worker of PHCC, HP and SHPs. Besides, there are 21 clinical training sites functioning at regional and zonal hospitals to provide clinical competency based training in the area of FP, SM, and clinical service management.

NHTC as an apex body of the network provides technical as well as managerial inputs at the national, regional, district and community level health training programs through appropriate and quality training need assessment, training delivery, monitoring, evaluation, post training follow up and research related activities.



## Vision

The vision of NHTC is to develop as a National Health Training Academy to Institutionalize Training System Thus the training system which will be sustained and capable of responding to training requirements of all stakeholders being involved in health care delivery system up to the community level.

## Mission

The National Health Training Centre helps to develop Human Resources to facilitate Health System Planners, Program mangers, Trainers in preparing and implementing their training programs and train service providers for successful implementation.

## Goal

The overall goal of NHTC is to produce/prepare efficient health service providers by means of training to contribute to deliver quality health care services towards attainment of the highest level of health status.

## Objectives

- Assess training requirements of Health Workers and prepare training plans based on the program's requirement.
- Plan, implement and train health workers as demanded by programs.
- Design, develop and refine teaching, learning materials to support implementation of training programs.
- Develop/improve capacity of trainers to deliver quality training at central, regional and district level.
- Support RHDs and DHOs in organizing, implementing and evaluating the training programs.
- Coordinate with all National and International, Governmental and Non-Governmental Organizations to avoid duplication of training and improve quality of training.
- Orient newly recruited health workers on health programs.
- Supervise, monitor, follow-up and evaluate training programs.
- Conduct operational studies to improve training efficiency and effectiveness.
- Organize International Training as per need.
- Establish TIMS for the quality recording and reporting systems of all training programs at central, regional, district, and community levels.

## Strategies

National Health Training Centre under MoHP operationalizes training activities in line with National Health Training Strategy 2004. The NHTC is responsible for developing human resources of the Department of Health, Department of Drug Administration and Department of Ayurveda. The training activities can be broadly classified into two themes as: In-Service training and International training categories.

## 6.1.2 Major Activities

### 1. Training

NHTC provides following arrays of training program:

**Initial and Basic Training:** Initial training for VHWs/MCHWs had been phased out but as per the requirement of DOHS it will organize initial and basic training programs for different cadres. NHTC offers basic training for FCHVs and Biomedical equipment technician (BMET) training.

**Upgrading Training:** NHTC has been offering several upgrading training courses e.g., ANM course for MCHWs, Senior ANM and senior AHW courses for ANMs and AHWs respectively.

**Special Training:** NHTC conducts special training courses for different cadres of service providers at different clinical training sites in order to enhance the desired skill base for additional responsibilities. Such trainings are offered with program needs. The trainings include IUCD/implant, NSV, minilap, SBA, ultrasonography (USG), anaesthesia assistant course (AAC) etc.

**In-service/Refresher Training:** A wide range of in-service/refresher trainings are designed and conducted as per the need of different program divisions and centres. Such training packages are aimed to enhance the skill need for implementing new programs as well as improving job performance of health workers.

**Orientation Programs:** NHTC supports the divisions and centres in developing orientation packages, preparing a pool of trainers for conducting various orientation of short duration for health workers and non-health worker category.

## **2. Certification and Accreditation**

NHTC is responsible to accredit and certify different non-clinical and clinical competency based training courses. The institutions should be accredited before providing such training courses. Training courses of more than one month duration will be accredited as part of career development. NHTC provides certificates to the participants after completing the training course.

## **3. Institutional Development**

For the institutional development of training function NHTC focuses on;

### **Physical Facility**

- NHTC reviews existing physical facilities including equipment as per the nature of training and ensures the supply of the same in training sites.
- NHTC works towards gradual development of physical facilities of regional training centres, hospitals, district level training facilities.
- Establishment of a sub-regional training centre at Karnali Zone.
- In addition NHTC also develops formal alliances with concerned private or non-governmental institutions to meet the desired need of physical facility for catering trainings assuring quality.
- One health learning material development unit has already been established under NHTC.

### **Health Training Program Development and Coordination**

NHTC develops the different training programs as per the need of MOHP, DOHS, DOA, DDA and other stakeholders. It also facilitates for functional coordination required amongst divisions, centers, districts and training sites.

NHTC has been planning, implementing managing training need of various Divisions, Centre of MoHP/DoHS and providing support for quality service improvement in coordination and collaboration with the partnership of various institutions of MoHP including the EDPs and NGOs, Private sector, Medical colleges.

A Central level National Health Training Coordination Committee (NHTCC) chaired by secretary MoHP with the participation of Directors from National Administration Staff College (NASC), Local Development Training Academy, Training Institutions from IOM, MOE, CTEVT, private hospitals was formed and made functional for promoting inter-sectoral cooperation and coordination. NHTC will function as secretariat. Similarly local level coordination committee has also been formed at regional and district level. In compliance with the national health training strategy 2004, strengthening the training information management system (TIMS) is underway.

Training is a cross cutting support program to contribute for effective health services delivery in the country with its optimal level quality of training. Infrastructure and logistics support activities were managed with the help of GON/MoHP system. Planning, monitoring, supervision, follow-up and evaluation functions are institutionalized at all level of the health training. There is also arrangement of before, during and after training program evaluation including at the spot coaching by providing technical, human resource, logistics and financial support. Institutional/personnel performance is being reviewed after end of the training. In this regard, the strengths, weaknesses, opportunities, problems and constraints of training are assessed, at the end of each fiscal year, for improving in planning next year's training program and activities.

## Capacity Building

The health service providers need competencies to provide specific service based on the service protocols, program modalities to the extent as per the need of the people. NHTC makes efforts to meet this capacity building. NHTC also provides technical assistance to different units of training network and other stakeholders in conducting various training/orientation and advocacy programs.

## Support from UN and Other International Development Partners

Various supporting partners are providing collaborative supports to NHTC in planning and execution of training programs. The key programs being implemented with such supports are as follows:

- USAID/NFHP: Family Planning, Logistic Training, HFOMC, FCHV, quality monitoring tools in clinical training.
- DFID/SSMP: Maternal and neonatal health care Training: SBA, Anesthesia, Infection prevention, Clinical training site development.
- NSI: Anesthesia, Bio-medical Equipment R/M.
- MSI/SPN: Conduction of FP training, Support on Family Planning Training, SAS training.
- CFWC/NFCC: Conduction of FP training, Support on Family Planning Training.
- FPAN: FP Training, advocacy, ASRH training Resource person support.
- UNFPA: RH orientation, SBA, IUCD, ASRH, Gender and health, Gender Based Violence, Behavior Change Communication, strengthening training capacity building, COPE/PLA.
- WHO: Pre-service Training for GON health workers, support in Curriculum Development studies.
- UNICEF: SBA Training, Technical Assistance.
- IPAS: SAS Training.
- PSI Nepal: FP training, Medical Abortion (MA) training, etc.

Recently NHTC, through a training working group is undertaking several initiatives towards strengthening its capacity in improving quality of training, package development, preparing trainers, development of Integrated work plan in consultation with various support partners like NFHP-II, PSI Nepal, FPAN, CFWC, UNFPA, NSI, MSI/SPN, IPAS and NHTC has also assessed FP training sites and provided support for improving quality and performance of the FP related trainings and re-functionalized FP training in maternity hospital. After assessment of the FP Training Sites using FP QI (FP quality Improvement tools) support was provided to upgrade it, built capacity of its human resource to conduct FP training. Also strengthened FP training sites (Chhetrapati Family Welfare Clinic - CFWC, Institutional Clinic and Training Centre – ICTC, Nepalgunj, Maternity Hospital, FPAN, and Koshi ZH). Reviewed, updated and finalized Training Packages e.g.: CTS, IUCD and Infection Prevention Training Package, Procurement Planning, Auctioning, Write-off and Disposal Guidelines (logistic) training packages.

## Financial Resources

- Annual Program budget is allocated to each RHTC and 75 districts for implementing central and district level training programs respectively. It is also envisioned to allocate annual grants for initiating locally organized training based on the number and extent of predefined training needs
- Funding provision, in future, will be made on the basis of decentralized planning of the respective training institutions
- Mechanism will be explored for generating/mobilizing local resources by each training institutions
- Coordinated financial planning with need based resource allocation is carried out with the participation of all stakeholders.

## Research

A training research is needed to identify problem of health workers and conduct operation as well as evidence based research on training to explore ways to improve the quality of training.

## 4. Training Support Functions

The NHTC has been undertaking the following training functions:

**Assess Training Requirements of Health Workers:** National and district training teams identify training requirement for each category of health workers and design courses accordingly.

**Training Materials and Human Resource Development:** Training materials are designed, developed, updated and revised as per identified training requirements.

**Training Program Management and Implementation:** Training programs are implemented in close collaboration with the partner/stakeholders following the set policy, strategy, protocol and guidelines. The management and implementation of local level training programs is managed at local level institutions and updates through its national health training monitoring information system.

**Physical Assets Management and Implementation of Health Training Implementation Fund:** Physical assets management includes strengthening of existing training facilities, repair and maintenance of medical equipment laboratory etc. The Health Training Implementation Fund Procedure guideline 2059 facilitates to generate fund from the utilization of various training facilities.

**Supervise, Monitor, Follow-up, and Evaluate the Training Activities:** There is an established mechanism of supervision, monitoring, follow-up and evaluation of the training activities in co-ordination with relevant stakeholders involved in training. The shared efforts provide feedback to NHTC to assert quality of training programs.

## 5. Training Process

- All in-service trainings comply with systematic training cycle,
- Training quality is maintained through use of standard training curriculum, lesson plans, quality monitoring tool,
- Major emphasis on competency based training approach following basic principles of clinical quality of training.

## 6. Health Training Targets

Indicators for measuring achievements are listed below:

Indicator	Description
Number of trained HW	Expresses the number of trained health personnel out of targeted number to be trained in the given fiscal year
Number of oriented HW	Expresses the number of oriented health personnel out of targeted number to be oriented in the given fiscal year
Number of oriented LHFMOOC	Expresses the number of oriented LHFMOOC out of targeted number of handover of health facilities to the local bodies in the given fiscal year
Number of trained volunteers (FCHVs)	Expresses the number of trained volunteers out of targeted number to be trained in the given fiscal year

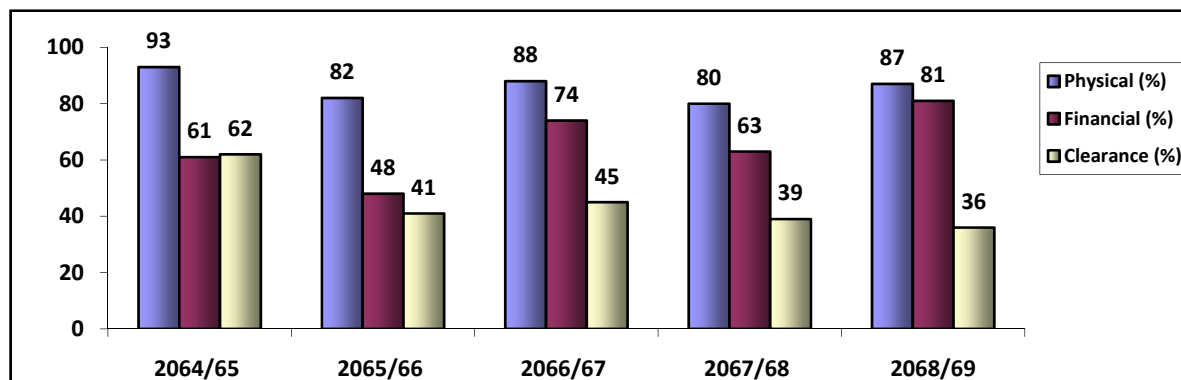
### 6.1.3 Analysis of Achievement

Table 6.1.1 presents the comparison of physical and financial progress of 5 fiscal years.

Table 6.1.1 Physical and Financial Progress of FY 2064/65 to 2068/69

Achievement	2064/65	2065/66	2066/67	2067/68	2068/69
Physical (%)	93	82	88	80	79
Financial (%)	61	48	74	63	71
Clearance of Financial Arrears (%)	62	41	45	39	36

Figure 6.1.1 Physical and Financial Progress of FY 2064/65 to 2068/69



#### Central Level Training Programs

##### National Training System Strengthening activities

From the table attached in annex, it is seen that NHTC conducted some national training system strengthening activities for central, Regional Trainers on training methodology, training of trainers to district training team.

**In-service Training:** During the reporting period, NHTC planned and implemented several in-service trainings in the general category for central/district level program officials, managers and district and below level health facility in-charges and service providers. The training programs were gender based violence (GBV), behaviour change communication (BCC), logistics management.

In clinical training, key component training was training of ANMs/SN for Skilled birth attendants (SBA) working at district hospitals, PHCC, HPs in districts. The achievement reported was 1029 Doctors/ANMs/SN trained on SBA against target of training 950 ANMs/SNs (100% achieved).

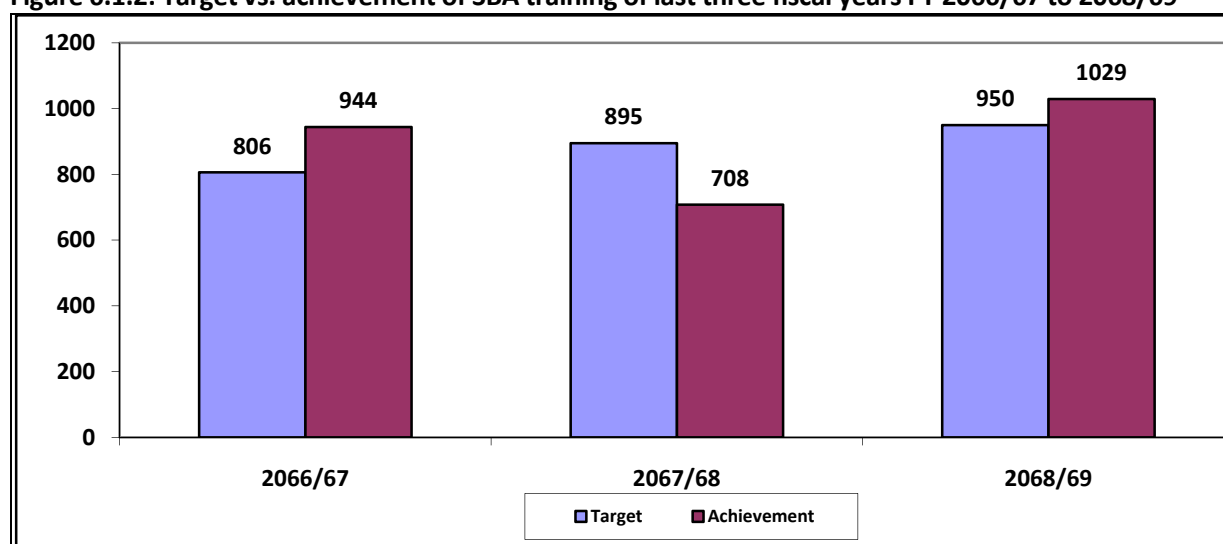
It was pleasing to note that NHTC was able to meet 100 percent of the targeted SBA Training. This will help significantly in filling the gap of required number of SBA service providers in many PHCC/HPs of the country. NHTC also was able to meet target of training medical officers in non-scalpel vasectomy, mini-laparotomy and IUCD, implant training to SN, ANMs. Achievement was only 43 percent in vasectomy, 51 percent in minilap while IUCD 91 percent, implant had 100 percent achievement. This number of trained FP service providers will help to provide the services in needy areas.

## Outcome Indicators in the NHSP-2

**Table 6.1.2: Numbers of SBAs required by 2012 to meet the MDGs**

SBAs to train for 100% coverage	SBAs to train for 60% coverage	Total SBAs trained up to 2012 mid-July
7,623	4,573	3,637

**Figure 6.1.2: Target vs. achievement of SBA training of last three fiscal years FY 2066/67 to 2068/69**



### Other Clinical training implemented are:

- Safe Abortion Services (SAS)
- Clinical training skills (CTS)
- Operation Theatre (OT) Management
- Nursing & Clinical service management
- Infection prevention (IP)
- Emergency Nursing Management, ICCU, clinical service management

Achievement in these training was above 87 percent. These training helped in strengthening clinical service delivery management at hospitals. NHTC started training service providers in gender based violence (GBV) to the service providers of Hospital/PHCC which will help in proving medical as well as social psychological help for the victims of GBV.

### **Upgrading Training**

NHTC provided upgrading training for MCHWs, ANMs and AHWs. The achievement in this category of training was almost 100% (for MCHW to ANM, ANM to Sr ANM and AHW to Sr. AHW program). It is expected that with these upgraded training the health facilities at district and below level will have service of experienced, trained mid-level service providers.

### **Community Involvement/Mobilization Activities**

NHTC has also introduced training on COPE/PLA (Client Oriented Providers Efficient/Participatory Learning Action), tool for increasing quality services at health facilities with the active involvement of



service providers and service users and community leaders. Other key training was for health facility operation management committee members (HFOMCM) training on strengthening their management capacity to manage handed over health facilities. Achievement in HFOMCM training was around 55 percent against the given target.

NHTC has increased monitoring and supervision of training activities to assure maintenance of quality of training delivered. 300 monitoring visits were targeted and by the end of the reporting period 100 percent monitoring visit achievement were reported.

Training activities carried out at the district level are presented in Annex.

## 1. District Level Training Programs

NHTC provided FCHVs basic training through DHO/DPHO using their own trainers with the support of RHTCs as and when needed. Training activities carried out at the district level are presented in Annex 1 B. Due to the late release of fund some districts could not conduct the training.

### 6.1.4 Issues and Recommendations

As in the previous year the national performance review meeting recommended to manage a separate pool of trainers from various disciplines like public health, nursing, clinical health education for which NHTC has been continuously advocating but still not been materialized. Some of the specific issue/problems and opportunities identified during implementation of training activities noted in recent regional review meetings and National Review meeting are summarized below:

Issues	Recommendation	Responsibility
Allowance	Allowance for short term training up to 7 days should be managed by Nepal Government/Training center. In case of long term training should be beared by participant themselves	MoHP/NHTC
Training follow up and quality assurance	Post training follow up should be done regularly and actively, if otherwise concern party must be punished. Quality training should be ensured by follow up and monitoring	MoHP/DOHS /NHTC
GESI Prospective	In all Health related Training GESI should be included	MoHP/NHTC
Research	Training related research should be done accordingly	NHTC
Training Package	Training package to be revised periodically	NHTC
Training Requirement	All training requirement according to MoHP policy should be plan accordingly	NHTC
Trainers roster	Prepare roster for trainers of all training	NHTC
Training profile and training plan	List of training being conducted by department and center including training plan	NHTC / other centers, divisions & departments
Training package development	Involvement of the NHTC during training package development and implementation	NHTC
Ayurvedic Programme	Main streaming of Ayurvedic training programme within National Health Training system	MoHP/NHTC/DOA

## 6.2 HEALTH EDUCATION, INFORMATION AND COMMUNICATION

### 6.2.1 Background

In 1991, Ministry of Health and Population had formulated new health policy. Following this policy, National Health Education, information and Communication Centre (NHEICC) was established under the Ministry of Health and population in 1993. MoHP improved its structure in 2002 with giving mandate to support for health promotion, education and communication to Department of Drug Administration and Department of Ayurveda. So, NHEICC is under the direct supervision of MoHP. Similarly, recently cabinet endorsed "National Health Communication Policy, 2012" is the milestone for health promotion, education and communication program under MoHP/GoN. It shows high priority of government to health promotion, education and communication program in the health sector.

NHEICC is responsible for planning, implementation, monitoring and evaluation of health promotion, education and communication program of all health services and program under the ministry of health and population. It, also, regulates the health messages produced and disseminated by other organizations. Developing, producing and disseminating messages and materials to promote and support health programs and services in an integrated manner is part of the responsibility.

For this purpose, all of the districts have Health education, information and communication programs since FY 2051/52. The health education and communication section in the regional health directorates and training and health information section in the district Health/Public Health Offices implement health promotion, education and communication activities utilizing various media and methods according to the needs of the local people in the district. Local media and languages are used in the district for the dissemination of health messages so that people can understand health messages clearly in their local context.

#### Goal

The goal of the National Health Education, information and Communication program is to contribute to attaining the national health programme goals and objectives by providing support for all national health services and programmes

#### Objectives

The general objective of National Health Education, information and Communication program is to raise the health awareness of the people as a means to promote improved health status and to prevent disease through the efforts of the people themselves and through full utilization of available resources.

The specific objectives of the IEC/BCC programs are to:

- To increase knowledge, improve skills and promote desired behaviour change on EHCS and beyond
- To create a demand for quality EHCS among all castes and ethnic groups, and disadvantaged and hard-to-reach populations
- To advocate for required resources (human and financial) and capacity development for effective communication programmes and interventions to achieve the NSHP-2 goals
- To increase access to new information and technology on health programmes
- To raise awareness among the public on communicable and Non-communicable Diseases and to encourage all to seek preventive measures

---

### Supporting Programs: National Health Education, Information and Communication

- To intensify and strengthen action against tobacco use, both smoked and smokeless, excessive use of alcohol, unhealthy diets, and physical inactivity
- To mitigate public panic and respond to communication needs during emergency situations.
- Promote environment health, hygiene and sanitation.

#### Strategies

- Mutually reinforcing approaches of ACSM, BCC, and IEC linked to service availability of EHCS and beyond
- Advocacy activities carried out to gain support for EHCS, occupational and environmental health, and tobacco control, and for political and social commitment, as well as resources for implementing the programme
- Social mobilisation of local-level resources, mobilisation of HR in existing networks as well as support for FCHVs and HWs
- Informing people about EHCS, social issues and service availability, and promoting positive behaviour
- Disseminating and reinforcing messages through mass media, community-based media and IPC
- Catering to specific gender needs and to the needs of the poor, socially excluded, and disadvantaged communities, and making efforts to produce and disseminate messages and materials in local languages and for different socio-cultural contexts
- Promotion of health as a right, especially in the context of Nepal's political restructuring and decentralisation
- Strengthening institutional capacity, and in hospital settings providing appropriate health education and communication programmes at all levels
- Coordination with other ministries and academic institutions to ensure in-service and pre-service training specifically on health education
- Multi-sectoral collaboration to implement communication programmes
- Ensuring that the impact of communication interventions is captured by the HMIS and that additional resource are available for periodic surveys.

#### 6.2.2 Major Activities

National Health Education, Information and Communication Centre conducted major health communication activities at all levels as following:

##### Central Level

- Policy, strategy and program development
- Development of Program guideline and directives.
- Development, production and airing of short messages through Radio, Television and FM
- Development and publication of health messages through Newspaper
- Development, production and distribution of IEC materials.
- Program orientation to regional and district level program manager and focal person in five regions
- Advocacy - Global Hand Washing Day, World Health Day and World No Tobacco Day Celebration
- Coordination - Technical committees meetings
- Capacity building on health communication
- Conduction of health communication researches
- Supervision, Monitoring and evaluation of health communication program
- Tobacco control act including tobacco product pictorial health warning Implementation
- Tobacco control strategic plan draft

## Supporting Programs: National Health Education, Information and Communication

---

- Regional Orientation to Assistant CDO for tobacco control
- Conduction of environmental health, hygiene and sanitation activities
- School Based Hand Washing with Soap and Water program
- Public Private Partner involvement in HWWS
- Climate Change and Health Activities
- Draft of Environment Health and Hygiene strategy
- Broadcasting health messages through Radio and Television in package

### **Regional Level**

- Radio program airing from regional Radio Nepal
- supervision and Monitoring of IEC activities
- Orientation to journalist and stakeholders on health
- Sensitization program for prevention and control of epidemics
- Distribution of IEC materials through Regional medical store

### **District Level**

- Strengthen district IEC corner by supporting electronic equipment
- Sensitization program for prevention and control of epidemics
- Production of need based IEC materials
- Distribution of IEC materials in health facilities
- Production and airing of health radio programs and messages through local FM radio
- Exhibition to promote health services & programs
- Organize Community health promotion campaign
- Community interaction program for health service promotion
- Publication of health messages in print media
- Essential health education program on public health problems in schools
- Sensitization program against gender based violence
- Orientation on health issues to media persons
- Orientation to health & sociology teacher on health issues
- Orientation to journalist and health communicators on health
- IEC program on anti-tobacco and non communicable diseases
- Sensitization program on environment & Occupational health
- Establishment and management of IEC corner in each health facilities
- Encourage FCHVs to promote health education
- Supervision and Monitoring of IEC activities
- Report on the achievement on the IEC activities in time.

### **New Initiatives**

- National Health Communication Policy, 2012
- National Communication Strategy for MNCH 2012-2016
- National Communication Strategy for ASRH 2012-2016
- Final Draft of Tobacco Control Strategic Plan 2013-2016.
- School Based Hand Washing with Soap and Water
- Climate Change and Health Activities in support from Ministry of Environment- School and Community orientation, Awareness Kit, Radio and TV Messages
- Broadcasting of health messages through Radio, Television and FM Radio in Package).
- Promotion and involvement of Public Private Partnership hand washing

### 6.2.3 Analysis of Achievement

The physical and financial achievement of the regular IEC/BCC activities carried out by NHEICC was 98.3 and 92.6 percent respectively during FY 2066/67, where as the above achievement was slightly decreased to 92 percent and 90.4 percent respectively. But the physical and financial achievement was increased at 99.9 percent and 95.3 percent respectively during the FY 2068/69.

Similarly the physical achievement on Health Tax Fund-Tobacco control remains constant at 100% during the FY 2066/67 to 2068/69 respectively and financial achievement has also almost constant at 99.6 percent and 99.6 percent during the FY 2066/67 and 2067/68, whereas the financial achievement was decreased at 93.9 percent during the FY 2068/69.

**Table 6.2.1: Trend of Physical and Financial Achievement**

Program	FY 2066/67		FY 2067/68		FY 2068/69	
	Physical	Financial	Physical	Financial	Physical	Financial
Regular IEC program (%)	98.3	92.6	92.0	90.4	100	95.3
IEC program of Tobacco control program (%)	100	99.6	100	99.6	100	94.0

Source: NHEICC Annual Report

According to NHSP-2, Health education and communication is crosscutting to all health programs, aiming to increase knowledge and improve behaviors regarding key health issues of all castes, ethnic groups, disadvantaged, and hard-to-reach population. It also aims to create demand for quality essential health services, thereby improving access, creating public trust in health services and ultimately encouraging people to utilize the existing health services and mitigate public panic and respond to communication needs during emergency situations.

NDHS 2011 report shows decrease in TFR, IMR and CBR. The report also shows reduction in prevalence of anaemia among pregnant women and children. Knowledge of informants about HIV/AIDS has also increased. Utilization rate of available health services has increased. There is correlation with these achievements and impact of health education, information and communication program.

### 6.2.4 Issues and Recommendations

Table 6.2.2 presents the issues discussed during the regional and national reviews and the recommendations to overcome these issues.

**Table 6.2.2: Issues, recommendation and responsibility**

Issues	Recommendation	Responsibility
Less priority to health education and communication	One door policy of health education, information and communication program focal person(Region/district)	MoHP/DoHS/NHEICC
Lack of coordination on IEC/BCC activities between various divisions/centers	One door system of IEC/BCC program between various divisions/centers	MoHP
Media pressure increased for publication of health messages	1. Guideline should be formulated and implemented. 2. Media persons should be oriented in health sector	MoHP/NHEICC/NHTC
Weak reporting system of district on IEC/BCC program to HMIS due to less indicators	Incorporation of adequate IEC/BCC indicators in HMIS tools	DoHS/ HMIS

**Family Health Materials**



**Child Health Materials**



**Disease and other Materials**



**Avian & Seasonal Influenza Materials**



**Gender Based Violence Materials**



**Adolescent Materials**



**Tobacco Control Materials**



## 6.3 LOGISTICS MANAGEMENT

### 6.3.1 Background

An efficient management of logistics is crucial for effective and efficient delivery of health services as well as ensuring rights of citizens of having quality of health care services. Logistics Management Division (LMD) has established under the Department of Health Services in 2050/51 (1993), with a network of central and five regional medical stores as well as district level stores. The major function of LMD is to procure, store and distribute health commodities for the health facilities of government of Nepal. It also involves repair and maintenance of bio-medical equipment, instruments and the transportation vehicles.

In order to systematize the management of logistics, the Logistics Management Information System (LMIS) unit was established in LMD in 1994. LMIS Unit collects and analyses quarterly (three monthly) LMIS reports from all of the health facilities across the country; prepares report and disseminates it to:

- Forecast annual requirements of commodities for public health program including family planning, maternal, neonatal and child health, HIV and AIDS commodities, vaccines, and Essential Drugs;
- Help to ensure demand and supply of drugs, vaccines, contraceptives, essential medical supplies at all levels;
- Quarterly monitor the national pipeline and stock level of key health commodities.

#### Overall Objective

To plan and carry out the logistics activities for the uninterrupted supply of essential medicines, vaccines, contraceptives, equipment, HMIS/LMIS forms and allied commodities (including repair and maintenance of bio-medical equipment) for the efficient delivery of healthcare services from the health institutions of government of Nepal in the country.

#### Strategies

- Logistics planning for procurement, storage and distribution of essential health care commodities.
- Introduce effective and efficient procurement mechanisms like Multi-Year Procurement (MYP) and Central Bidding System (CBS).
- Use of LMIS information in the decision making at all levels.
- Strengthen physical facilities at the central, regional, sub-regional and district level for the storage and distribution of health commodities.
- Promote web-based LMIS and Equipment/Expendable Items Inventory System in districts and regions.
- Repair and maintenance of bio-medical equipment, instruments, cold-store and transportation vehicles.
- Capacity building of required human resources on logistics management at all levels.
- Implement effective Pull System for year round availability of Essential Drugs and other health commodities at all levels (Central, Regional, District and Health Facilities).



### 6.3.2 Major Activities

LMD implemented the following major activities during the FY 2068/69:

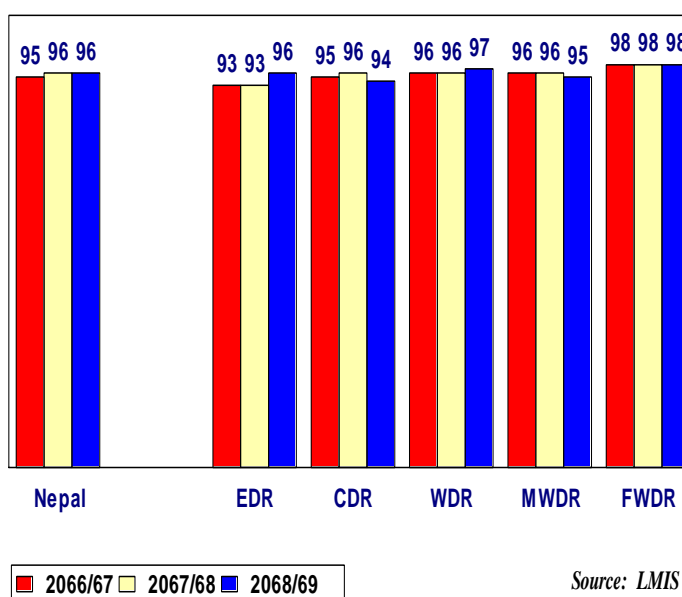
- Plan for the efficient management on procurement, storage, distribution and transportation of health commodities required for the delivery of healthcare services to all health institutions of government of Nepal in the country.
- Develop tender documents as per public procurement rules and regulations and procure essential medicines, vaccines, contraceptives, equipment, different forms including HMIS/LMIS and allied commodities.
- Store, re-pack and distribute medicines, vaccines, contraceptives equipment and allied commodities.
- Conduct health logistics management trainings/orientation in collaboration with NHTC up to regions, districts and other stakeholders.
- Manage to print and distribute HMIS/LMIS forms, stock books and different forms required for all health institutions.
- Support on implementation and functioning of web-based LMIS, web-based Equipment Inventory System and Inventory Management System software.
- Manage to maintain the bio-medical equipment, machineries and transport vehicles.
- Implement and monitor Pull System for contraceptives, vaccines and essential drugs in the districts.
- Coordinate with all development partners supporting health logistics management.
- Supervise and monitor the logistics activities of all region (RMS) and district levels (DPHO/DHO).
- Implement Telemedicine program in the hill and mountain districts.
- Procure, store and distribute various health commodities for Program Divisions of the DoHS.

### 6.3.4 Analysis of Achievement

#### 1. LMIS Reporting Status

The trend of total LMIS reporting from health facilities is consistently above 95 percent over three years (Figure 6.3.1). The LMIS has helped to generate accurate and reliable feedback reports, thereby contributing to improve logistics functions like budgeting, quantifying, forecasting, procurement, storage, transportation and distribution of FP, MCH commodities and essential drugs to be procured by the centre. LMIS has played a key role in reducing stock-out rates and increasing year-round availability of key health commodities through close monitoring. Similarly, LMD has implemented web-based LMIS and Inventory reporting system.

Figure 6.3.1: LMIS Reporting Status



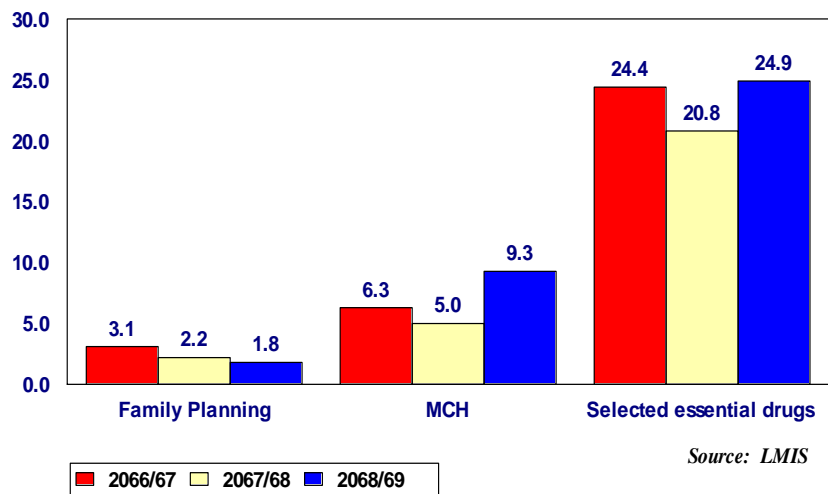
Source: LMIS



## 2. Availability of Key Health Commodities

LMD aims to make year round availability of key health commodities like Condom, Oral Pills, Inj. DMPA, Tab. Iron, Cotrim-P, Caps. Vit. A, ORS, Tab. Zinc sulphate in all health facilities and essential drugs for free health services has increased and the national stock out of health commodities has been steadily decreasing in every year (Figure 6.3.2). The average availability of contraceptives, key MCH commodities and selected essential drugs has increased in HF's in comparison with previous fiscal years. Though the demand and consumption

Figure 6.3.2: National Stock out percentage of Health Commodities at HF's



Family Planning Commodities= Condom, Injectable DMPA, IUCD, Implant, and Pills  
 MCH Commodities = ORS, Vitamin A, Co-trim/p, and Iron Tablets  
 Essential Drugs = Albendazole, Paracetamol, Chloramphenarimine, Aluminium Hydroxide, Metronidazole, Chloramphenicol, Gamma Benzene, Amoxicillin, Benzoic Acid.  
 (Data Source: LMIS (Stock out information is quarterly average based on over 90% Health Facilities reporting LMIS)

of essential drugs has increased drastically after implementation of free health policy up to hospital level, the stock out of the selected drugs has been reduced. However, there is a need to decrease the stock-out of essential drugs in the health facilities by the effective implementation of the Pull System.

## 3. Major Logistics Activities to Strengthen Health Care Services

### a. Procurement

LMD continued and added more commodities in the multi-year procurement. Condom, Injectable, ORS, Iron Tablets, Essential Drugs are now being procured through multi-year mechanism. Multi-year mechanism saves every year bidding and evaluation time for tender. LMD also completed the LICB (limited international competitive bidding) process in coordination with World Bank in the procurement of Implants, which results in procuring directly from the manufacturer in much lower cost.

A district-wise breakdown list of essential drugs and quantities to be procured at the district level, based on consensus forecast was developed by PHCRD and LMD. The list and budget was sent to all districts by the Primary Health Care Revitalization Division (PHCRD). Similarly, on the development of e-bidding software, the terms of reference/guidelines was finalized and sent to prospective e-bidders for their review and feedback.

Under the GoN public procurement regulations, districts are involved in local procurement of health commodities (Essential Drugs) necessary for the district. LMD with support from USAID | DELIVER PROJECT provided District Level Public Procurement Training to 15 participants from Rukum, Jajarkot and Mugu districts. The training imparted knowledge and skill to the participants in order to make

## Supporting Programs: Logistic Management

procurement process timely, simple, easy, uniform and more transparent over time. NHTC and LMD decided to monitor district procurement based on following five indicators:

- District Procurement Plan
- Setting up of procurement committee (evaluation committee) in the district
- Forecasting and quantification (also have district followed quantification provided by the center)
- Cost estimation of the health commodities
- Timely procurement

### Standard specifications for health commodities and biomedical equipment

LMD in coordination and support from USAID | DELIVER PROJECT prepared a draft list of standard list of bio-medical equipment for all levels (Regional, District, and Health Facilities). LMD is working with NHSSP II and KfW in developing standard specification of pharmaceutical and equipment/instruments. DELIVER PROJECT supported LMD in organizing workshop with expert for developing a standard specification for pharmaceutical items. LMD has already uploaded more than 400 standard specifications for pharmaceutical items in its web-site ([www.dohslmd.gov.np](http://www.dohslmd.gov.np))

### Consensus Forecasting Workshops

LMD conducted the 2-days National Level workshop on Consensus Forecast and Quantification of RH/FP, MCH commodities, Essential Drugs and Vaccines for coming 5 years with the technical and financial support from USAID | DELIVER PROJECT. There were altogether 52 participants from Family Health Division, Child Health Division, Epidemiology and Disease Control Division, National Center for AIDS and STD Control, Logistics Management Division,



*Director General, Dr. MG Sherpa addressing the Forecast workshop.*

District Health Offices, Family Planning Association Nepal (FPAN), Contraceptive Retail Sales (CRS, a Social Marketing Agency), PSI, WHO, World Bank, DFID, KfW, UNICEF, UNFPA, USAID and NFHP. Dr. Naresh Pratap KC, Director/LMD highlighted the importance of forecasting and quantification of commodities at national scale including EPI commodities in the forecast exercise in his remarks.

### Quarterly National Pipeline Review Meetings

LMD with the support from USAID | DELIVER PROJECT/NFHP conducted quarterly National Pipeline Status Review meetings. The meeting was participated by Program Divisions of DoHS, External Donor Partners and stakeholders like Social Marketing agency and FPAN. In the meetings shipment schedules, shipment status (planned, ordered and received), actual consumption and months-of-stock-in-hand of 19 health commodities were discussed.

**b. Storage, Distribution, Transportation of Medicine, Equipment and Health Commodities****Transportation and Distribution**

LMD has supplying 4.4 million capsules of Vitamin A and 3.6 million Albendazole Tablets to all 75 districts for National Vitamin A campaign in October 2011. LMD also managed for distribution of more than 4.3 million capsules of Vitamin A and more than 3.6 million Albendazole Tablets during the mass campaign on April 2012. USAID | DELIVER PROJECT/NFHP routinely assisted LMD in distributing FP, MNCH and other drugs and health commodities across the country.



Delivery of Storage Equipment in Bajhang

LMD also managed distribution of following vaccines during the fiscal year 2068/69 (Table 6.3.1).

**Table 6.3.1: Distribution of Vaccines (FY 2068/69)**

Vaccine	Quantity Received at Central Warehouse, Teku	Quantity Supplied to RMSs	Remarks
BCG	184,200	170,050	
DPT-HepB-Hi(10 dose)	205,852	94,600	
DPT-HepB-Hib(1 dose)	1,278,285	1,278,285	
Measles	262,150	175,750	
Polio 10 dose	433,294	232,254	
Polio Mopv 20 dose	10,100	0	Expired*
Polio bopv 20 dose	532,756	458,600	
TT 10 dose	124,400	124,150	
TT 20 dose	20,800	20,800	
JE	309,565	309,310	Regular and Mass Campaign

Source: DoHS/LMD

\*MOPV 20 doses was received for only mopping up polio campaign for the polio affected districts Bara, Parsa, Rautahat, Sarlahi, Mahottari, Dhanusa, Siraha and Saptari. It was not used for other vaccination program, where bOPV was used in NID and tOPV was used for routine vaccination program. Therefore, some MOPV were expired.

**c. Strengthen Storage Capacity****Improve district and sub-district storage capacity**

LMD coordinated to strengthen storage capacity of district stores and health facilities by providing store equipment required at the storerooms upon the request from various District Health Offices. Thus LMD managed the basic storeroom

**Figure 6.3.4 Key Achievements**

- 54 District Warehouses constructed (KfW-43, DFID-5, GoN-6)
- 1 Cold Chain Warehouse (KfW fund) built in Pathalaiya Transit Warehouse complex
- Increased total storage space from 21,223 sq. ft. from 1999 to 86,400 sq. ft. in 2011
- Safe storage of valuable health commodities maintaining storage standards

## Supporting Programs: Logistic Management

equipment to 6 districts<sup>1</sup>, enabling proper storage conditions for health commodities. This is important activity to strengthen the storage standard of service delivery sites and districts in order to safe storage and distribution of health commodities and provided 49 steel racks and 49 Cupboards to periphery level 48 HFs of Bajhang.

### **Strengthen Storage Capacity of Teku and Pathalैया**

LMD designed the new warehouses at the center and Pathalैया store. The design was finalized in a series of workshops with participation from the Director General (DoHS), MD, LMD, USAID, UNICEF, UNFPA and KfW.



**Architectural design of Pathalैया Central Warehouse**

### **District Store Construction**

Ideal storage conditions for essential drugs and commodities are required to deliver quality health services to service delivery sites in order to ensure optimal health service utilization by consumers. In the course of implementing the Logistics System Improvement Plan (LSIP) of Ministry of Health and Population (MoHP) jointly developed by MoHP, a massive clean-up and de-junking activities were carried out across the country during the period of 1994-97. This effort resulted in freeing storage space and generating revenue for the government (from de-junking and auctioning), which revealed that numerous districts seriously lacked ideal storage space for handling health and other allied commodities including vaccines.

The MoHP and LMD commissioned an assessment in 1999 to identify the current storage conditions and space needed at district level. The assessment was carried out with support from JSI Research & Training Institute and USAID. The study revealed that 58 of 75 districts had immediate storage needs (none of the districts had ideal cold storage facilities) and all 75 would require new stores. Space was inadequate and security was poor. 49 out of 75 districts had storerooms scattered in two or more rooms with none specifically designed for storage and many were in rented buildings. Most of the storerooms were filled with unusable commodities and junk. Every year huge quantities of drugs and other health commodities went missing, damaged or had to be destroyed.

Till date, the progress of district medical storeroom construction is as following:

- 54 (6 GoN + 43 KfW+ 5 DFID) completed from GoN, KfW, DFID and JSI management support.
- 18 Under construction through GoN
- Remaining three districts (Manang, Mustang and Kathmandu)

<sup>1</sup>

Tehrathum, Makwanpur, Bhaktapur, Rupendehi, Gulmi and Bajhang

Map 6.31: Medical Warehouse Construction Status by Districts – 2068/69



#### d. Logistics Supervision Checklist

LMD developed logistics supervision checklist which consist of 12 sets of logistics criteria for the better logistics management of stores. The tool was used during supervision by LMD staffs as well as NFHP staffs. A circulation was also sent to all Regional Directors and DPHO/DHO for the use of this newly developed checklist and included in the revised District level Basic Logistics Management training curriculum as well. These checklists are used by both NFHP and Government health workers.

#### e. Capacity Building in Logistics Management

##### Basic logistics training to MCHWs and VHWs

LMD/NHTC/NFHP organized a TOT program to prepare twenty two trainers from 2 districts<sup>2</sup> on Basic Health Logistics for VHW/MCHWs. The trainers in turn trained 727 VHW/MCHWs in their respective districts. It is expected that through the training, there will be a better understanding of the supply chain management from the HF to the community level.

##### Regional Review meeting and Refresher Training on web-based LMIS

LMD conducted the Logistic Regional Review meeting in all 5 development regions. The current logistics challenges and issues were discussed with district health officers in the meetings. LMD also conducted refresher training on Web-Based LMIS and inventory management system for storekeepers of all 75 districts, staff of Regional Medical Stores and Regional Directorate. NFHP and USAID | DELIVER PROJECT provided technical and partial financial support to organize these events.



### **Basic Logistics Training to FCHVs**

LMD conducted basic logistics orientation for FCHVs in Baglung district, because of its poor logistics indicators. The training package, consisting of a job aid and orientation guidelines were developed and printed this year. This program provided FCHVs with basic concept of logistics management and is expected to improve availability of health commodities with FCHVs.

### **District Level Procurement Training**

LMD conducted district level procurement training in 3 districts such as Mugu, Rukum and Jajarkot in September 2011, where 27 district level participants were trained in procurement training as per Government's rules and regulations.

### **Review and Orientation on Key Health Commodities Management at HFs**

LMD conducted one day Review and Orientation on Key Health Commodities Management for HFs of Taplejung and Jajarkot districts. In the orientation program 62 HFs personnel were oriented on logistics management. NFHP and USAID | DELIVER PROJECT provided support in conducting Pull system training on health logistics management in Rautahat and Surkhet where 39 participants (newly transferred/drop out health personnel from health facilities) participated in better logistics management.

### **Curriculum Revision to include New Logistics Interventions**

The District Basic Health Logistics Training manual, which was developed and printed in 2005, was revised and included new logistics interventions, such as the pull system, district level procurement capacity training and Web- Based LMIS.

### **HIV/AIDS Logistics**

LMD conducted an assessment on the HIV and AIDS commodities (ARV Drugs and HIV test kits) and essential logistics systems to determine vertically management of ARV supply chain system can be integrated with the general health logistics system. As per the recommendation, the integration of HIV and AIDS logistics into mainstream logistics was endorsed by MoHP in June 2012. As a part of integration process, HIV and AIDS commodities were included in National Consensus Forecast since November 2011. Integration of HIV and AIDS Logistics system came into effect mainstream logistics from July 2012 with assuming the responsibilities of storage and transportation/distribution of HIV and AIDS commodities to the service delivery sites.

LMD has started with technical support from USAID | DELIVER PROJECT, assisted to NCASC in capacity building of SDP personnel either by conducting the HIV and AIDS logistics training or facilitating the training conducted by the Government. These trainings have helped in transferring skills in HIV and AIDS commodities logistics management. From October 2011 to October 2012, the project provided technical and financial support to conduct the following trainings.

1. Training on ARV Dispensing Tool – 16 participants (Male 8, Female 8)
2. Training on HIV and AIDS Logistics Management - 72 participants (Male 52, Female 20)

LMD in coordination with NHTC and USAID funded NFHP, NFHP II and USAID DELIVER PROJECT has trained more than 12,000 human resource in Logistics Management since 1994 (Table 6.3.2).

**Figure: 6.3.2 Total no of trained resource persons in logistics management (1994-2012)**

SN	Type of training	Male	Female	Total
1	Basic Health Logistics Training for newly transferred staff	30	1	31
2	Basic Health Logistics Training for MCHW/VHW	1,323	1,136	2,459
3	Pull system Training on Health Logistics Management	2,018	1,416	3,434
4	Sub District Level Logistics Review & Orientation Program	2,613	383	2,996
5	District Level Public Procurement Training	433	1	434
6	Training on web-based LMIS, Inventory Management	491	17	508
7	Logistics Orientation for FCHVs	1,173	1,434	2,607
8	Refresher Pull system training	128	4	132
9	Training on Logistics Management System	45	1	46
10	Orientation on HIV and AIDS Logistics Management	99	44	143
11	Refresher Training on HIV and AIDS Logistics Management	10	6	16
12	Training on ARV Drug Dispensing Tool	29	20	49
13	Training on HIV and AIDS Logistics Management	68	20	88
<b>Grand Total</b>		<b>8,490</b>	<b>4,484</b>	<b>12,974</b>

Source: LMD/NHTC

**Auctioning and Disposal**

LMD using the Guideline for Auction and Disposal conducted auctioning for the disposal of old furniture and vehicles (36 four wheelers and 40 two wheelers), office equipment, instrument, furniture, freezers and other commodities at Central Store, Teku and Transit Warehouse Pathalैया through sealed bidding process. The auction raised an amount of NRs. 1.2 million and vacated 7,060 sq. ft. of space as well as Kanchanpur generated NRs. 91,300 and frees 3,100 sq. ft. of space.

**f. Telemedicine Program**

LMD initiated and implemented Rural Telemedicine program in 30 hill and mountain districts<sup>3</sup>. The training on Telemedicine for these districts has also been completed. The training included i) Telemedicine web-based system, ii) multi-function scanner, iii) digital camera, iv) CDMA wireless internet, and v) basic computing. The 7-days training were held in Kathmandu and Nepalgunj for the participants (Medical Officer, Health Assistant and AHW) from each district. After the training program LMD provided one set of Dell Computer Optiplex 330, HP 1005 Printer, APC UPS, CDMA RUIIM card with CDMA wireless Modem, Multifunction HP Scanjet Scanner 5590, X-Ray Viewbox, and Sony Digital Camera 8.1 to each 25 districts. During FY 2068/69 the program extended to five more hill districts of Far- Western and Mid-Western region.

<sup>3</sup> Achham, Bajhang, Bajura, Darchula, Dolpa, Gorkha, Humla, Jajarkot, Jumla, Kalikot, Khotang, Manang, Mugu, Mustang, Okhaldhunga, Pyuthan, Rasuwa, Rolpa, Rukum, Sankhuwasabha, Sindhuli, Sindhupalchowk, Dolakha, Solukhumbu, Taplejung, Baitadi, Doti, Dadeldhura, Dailekh and Salyan

### 6.3.3 Issues and Recommendations

#### Issues raised during the regional and national reviews during 2067/68 and recommendations:

Issues	Recommendations	Responsibility
Inadequate supply of Iron and ORS	<ul style="list-style-type: none"> <li>Received partial shipment and distributed from Pathalaiya warehouse</li> <li>Continuous re-supply</li> </ul>	DoHS/LMD
Electronic based reporting software not working properly (Web-based LMIS)	<ul style="list-style-type: none"> <li>Continued remote support to districts</li> <li>Upgraded the software</li> <li>Budget provision for service contract for web-based LMIS (manpower/training) in 75 districts</li> </ul>	DoHS/LMD
Timely and adequately supply of HMIS/LMIS forms	<ul style="list-style-type: none"> <li>LMD planned to distribute by Ashad end coordinating with MD</li> </ul>	DoHS, MD, LMD
Stock out of some free health drugs	<ul style="list-style-type: none"> <li>Multi-year procurement started</li> <li>Immediate distribution from RMSs, and Central Warehouse upon receipt</li> </ul>	DoHS, LMD, RD, RMSs, Districts
Lack of timely repair and maintenance of bio-medical equipment	<ul style="list-style-type: none"> <li>Positioned bio-medical engineer at Center and Western Region in contract basis</li> <li>Repair maintenance activities in MWDR and FWDR are being done with KfW support</li> </ul>	DoHS, LMD, MD
Similar strips of Iron, Cotrim P, and Vitamin B Complex (FCHVs find difficulties in distribution)	<ul style="list-style-type: none"> <li>Manufacturer is requested to make different color in strips</li> </ul>	DoHS, LMD
Some Cold chain equipment (Fridge, Deep-Fridge) not functioning	<ul style="list-style-type: none"> <li>LMD started to procure spare parts and maintenance will be continued</li> </ul>	DoHS, LMD, CHD

#### Problems and recommendations discussed in the national and regional reviews during 2068/69:

Insufficient transportation budget for remote district	Allocate sufficient budget for transportation of drugs and commodities	DoHS, LMD
Problem in repair and maintenance of Biomedical equipment and cold chain equipment	Establish repair and maintenance centre in each region.	MoHP, DoHS, LMD
Web-based LMIS and inventory management system not updated regularly	Provide temporary technical assistance in the district and regional stores for technical guidance	DoHS/LMD
Insufficient storage capacity of central store	Construct central ware-house as Master plan of central store	MoHP/DoHS
Store capacity is still insufficient for the districts	Scale up of construction of store in district level	DoHS, LMD, RHD, DHO/DPHO
Inefficient drug procurement at the district level.	Introduce Central Bidding Local Payment (CBLP) system and increase monitoring for district drug quality.	MoHP, DoHS, LMD



## 6.4 Public Health Laboratory Services

### 6.4.1 Background

Under curative services, the Health policy aims to provide diagnostic laboratory services in all the hospitals from central to the periphery. In accordance with the Eighth Five Year Plan and the Health Policy 1991 (2048 BS), the National Public Health Laboratory (NPHL) has been identified as the central and specialised national referral public health laboratory for the country, which was previously been identified as central health laboratory. Beyond this is also the national focal point and provides technical support for laboratory service related activities throughout the country. Apart from the routine and specialized diagnostic facilities, various public health related laboratory activities are on-going. This is national the referral laboratory for HIV diagnostics and monitoring, Japanese encephalitis, Measles, Rubella, Anti-microbial drug resistance and Influenza along with the establishment of National Influenza Centre.

NHSP II (2010-2015) envisages Public Health Laboratory Service strengthening at all levels. In this regards, National Public Health Laboratory (NPHL) has be designated as nodal institute for Policy, guidelines and over all framework for capacity building development in laboratory sector. Attention will be given to strengthen laboratory procedure and communication between national, regional and district levels and strengthening the systems ensuring the availability of essential equipment and logistics. It also gives commitment to new recruitment of staff as well as training of existing staff.

History of laboratory services in Nepal is nearly half century old and a clinical lab was first established at Bir Hospital. Now services have been expanded from central level to PHC Level in government sector. At present there are central hospital based laboratories-8, Regional hospital based laboratory-3, sub regional hospital based laboratory-2, Zonal hospital based laboratories-11, District hospital based laboratories-66, and PHCC based level laboratories-204. In the private sector there are above 2064 laboratories. All these laboratories require significant strengthening with respect to quality assurance, human resource recruitment, competency, development of service range and physical infrastructure.

National Health Laboratory Policy is endorsed by the cabinet in 2069 (Poush). To implement of which NPHL will devise the guidelines for standards in on infrastructure, human resource, equipment, reagents, legislative framework, and registration/licensing of laboratories. NPHL is the nodal point for certifying private sector laboratory based on the directives issued by MOH & P. Coming to Quality control NPHL has been organizing NEQAS with involvement of more than 300 health laboratories in public and private sector. To assure the quality to services provided, NPHL itself also participates in EQAS, REQAS and IEQAS organized by different international agencies at India, Thailand, Hong Kong, Australia, UK and CDC, Atlanta on different disciplines of laboratory science.

In 2010, April 19<sup>th</sup>, NPHL has been designated as National Influenza Centre (NIC), the goal of which is to share the total influenza cases and the isolates of influenza virus prevailing in the country with global influenza surveillance network, which might be useful for candidate vaccine development. Nepal faced a few outbreaks of Highly Pathogenic Avian Influenza (HPAI) time to time. There is a great possibility of transmission of such infection to human. So, the outbreak of such in poultry should alert human component. Hence, a coordination committee has been deployed with involvement of human (NIC, EDCD, WHO and WHO IPD, etc.) and animal component (Central Veterinary Lab, Directorate of livestock and AICP). To collect representative samples of influenza samples from all the regions of the

## Supporting Programs: Public Health Laboratory Services

country, National Influenza Surveillance Network (NISN) is established with identification of 10 sentinel sites allocating 1 to 3 sentinel sites for each region.

Diagnosis of emerging and re-emerging highly infectious diseases is a challenge for the country for which highly contained laboratory, BSL-2 plus has been constructed through World Bank support by AICP (human). The lab needs to be evaluated and then accredited by international agency more appropriate if done by American Bio Safety Association (ABSA). There is a need of lot of resources (human as well as financial) to make this BSL 2 plus/BSL3 lab functional. WHO SEARO has also initiated to form SEARO lab network for capacity building of laboratories at SEARO for diagnosis of these highly infectious diseases.

Major challenge of Health Laboratory service is shortage of human resource. There is no post of microbiologist/virologist whose role is very crucial for diagnosis of infectious disease. Lab service cannot be functional without use of biomedical equipment. Repair, maintenance of calibration of equipment is very essential to provide quality laboratory service for which it needs adequate number of biomedical engineers. Unfortunately, there is no post of biomedical engineer/assistants. Ministry of health and population has planned to carry out organization and management survey for creation of such unavailable but important posts. Besides the new posts creation of the human resource, it is also essential to upgrade qualification of existing manpower. Through NHSP II, fellowship scheme for Pathologist, Microbiologist/Virologist, MMLT, BMLT and Lab Technician course have been introduced so that highly qualified manpower will be available for the country.

Up-gradation of Laboratory Management Information System is another challenge for health laboratory service. Communication between national, regional and district and between district, PHC and health post should be liaised thorough effective linking by Laboratory Information Management System. NPHL also plans to distribute web based lab result so that the customers can retrieve their result from net at their convenience.

NPHL is also the focal point of blood safety on behalf of MoHP and for effective implementation of National Blood program is working on development/revision of policy, guidelines, protocols, SOPs as per need. NPHL also serves as National Reference laboratory for TTI screening of all donated blood. In this regards, NPHL will evaluate the TTI screening kits of HIV, Hepatitis B&C and syphilis. For External Quality Assessment of BTSCs, NPHL develops and sends proficiency panel. Besides, to carry out confirmatory test for positive in screening of blood donor is responsibility of NPHL. Other quality related responsibilities are to conduct training of laboratory staff, carry out supervision & monitoring of different laboratories and BTSCs as per need and supply of quality equipment to district hospital and PHC based laboratories. This year in December 2012, NPHL sent Proficiency Testing (PT) for Transfusion Transmissible Infection (TTI) screening to 14 BTSCs within Kathmandu valley. The report from all sites are awaited

### **1. VISION**

To provide quality laboratory service in the country

### **3. GOAL**

To provide quality health laboratory service which is accessible to every citizen of the country at affordable cost.

#### 4. OBJECTIVES

- To affirm government commitment and support for the organization and management of efficient, cost-effective and sustainable health laboratory services.
- To strengthen laboratory services for supporting diagnosis, treatment, surveillance, prevention and control of diseases.
- To establish national standards for laboratory quality systems.
- To ensure the quality of the health laboratory through an established quality system.
- To empower the establishment, implementation and monitoring of the national health laboratory program, national regulatory mechanism for regulating all health laboratories in the country.
- To ensure adequate financial and human resources to meet the requirements for the health laboratory services.
- To comment to ethical values in laboratory practice, including patient confidentiality, adherence to professional codes of conduct and ethical research practices.
- To encourage research and collaboration to inform and improve the quality of health laboratory services.

#### STRATEGIES

- Public health Capacity will be strengthened at all levels.
- Policy, guidelines and an overall framework for capacity building will be prepared.
- National Public Health Laboratory (NPHL) will be the nodal institute and will also be the national influenza center.
- Attention will be given to strengthen laboratory procedures and communication between
- different level, strengthen system and ensure the availability of essential equipment and logistics

#### 6.4.2 MAJOR ACTIVITIES

NPHL is providing the routine and specialized laboratory service at affordable prices. The major objective is to provide the routine and specialised diagnostic facilities at reasonable price on timely manner.

##### 1. Logistics Procurement and Supply

NPHL has been procuring the test kits/reagents and biomedical equipment. Likewise some equipment is provided by NGO/INGOs/Internal agencies. Among them, most of reagent/kits and huge bulk of equipment are utilized at NPHL and some equipment dispatched to other laboratory which are in urgent need for those at different district. The main objective is to provide the continuous laboratory service and minimize the interruption of service occurred due to logistics.

##### 2. Laboratory Refurbishment

As NPHL is designated at the laboratory referral centre, and various departments with the NPHL are being strengthened and some are newly established. To address this issue and to maintain the sound working environment, different units have been refurbishment at NPHL. Following units were refurbished in past two years:

- National Influenza centre
- National JE/Measles/Rubella lab
- Collection unit
- Washing unit

**3. Supervision and Monitoring**

A team from NPHL goes for the supervisory and monitoring visit in the different laboratories of the country. The major objective is to access the laboratory standards, existing physical infrastructure and capability.

**List of laboratories supervised: Total Sites = 75**

- Eastern Development Region: 19
- Central Development Region: 28
- Western Development Region: 8
- Mid-western Development Region: 12
- Far-western Development Region: 8

**4. National External Quality Assurance Scheme (NEQAS)**

To ensure the testing quality and access the existing status, NPHL is conducting the NEQAS program as a part of External quality assurance. NPHL dispatch the laboratory samples of different parameters to various labs throughout the country and receives the test result from those labs where as in some NPHL receives the tested sample (HIV DBS). On the basis of their, test result, NPHL compiles the report and send feedback to individual laboratories. This also helps to access the testing capability of lab personnel. The testing parameter ranges from biochemical test, malaria slide and others like DBS EQAS where HIV testing quality is monitored.

**Table 6.4.1: NEQAS Performance**

	<b>Lot 26</b>	<b>Lot 27</b>
Total samples sent	266	272
Results returned	136	132
% returned	51.1	48.5
Overall performance	1.5	1.62
Excellent	24	17
Good	97	96
Need to improve	12	19
Not acceptable	3	-

**5. Training and workshops conducted during the fiscal year**

Training	No. of trainee					Total
	EDR	CDR	WDR	MWDR	FWDR	
Quality Control Training (3 times)	29	10	5	17	4	65
Quality Assurance Training for Lab. personnel. (2 times)	8	5	6	14	6	39
Training on Lab. monitoring of Antiretroviral Therapy	3	8	2	2	3	18
Training on DBS Technique for Laboratory Personnel. (4 times)	43	4	1	30	18	96
Bacteriology Training	8	5	4	4	3	24
National Workshop on Lab Based Surveillance on AMR	1	8	4	-	-	13
Enumeration of CD4 T Lymphocyte by FACS count and FACS calibur.	1	10	4	4	3	22
In-service Training for Laboratory Personals	13	5	3	6	2	29
VCT/STI Training	10	4	4	5	2	25

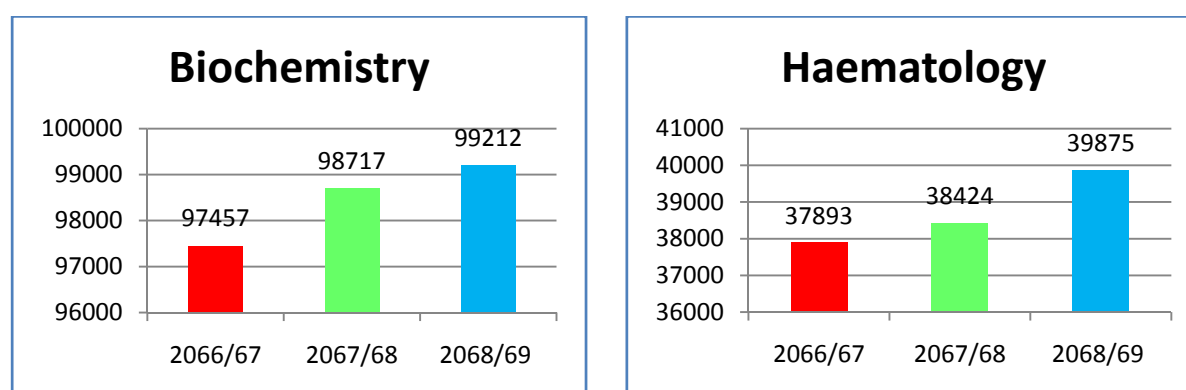
### 6.4.3 Analysis of Achievement

#### 1. Performance of Various Departments of NPHL

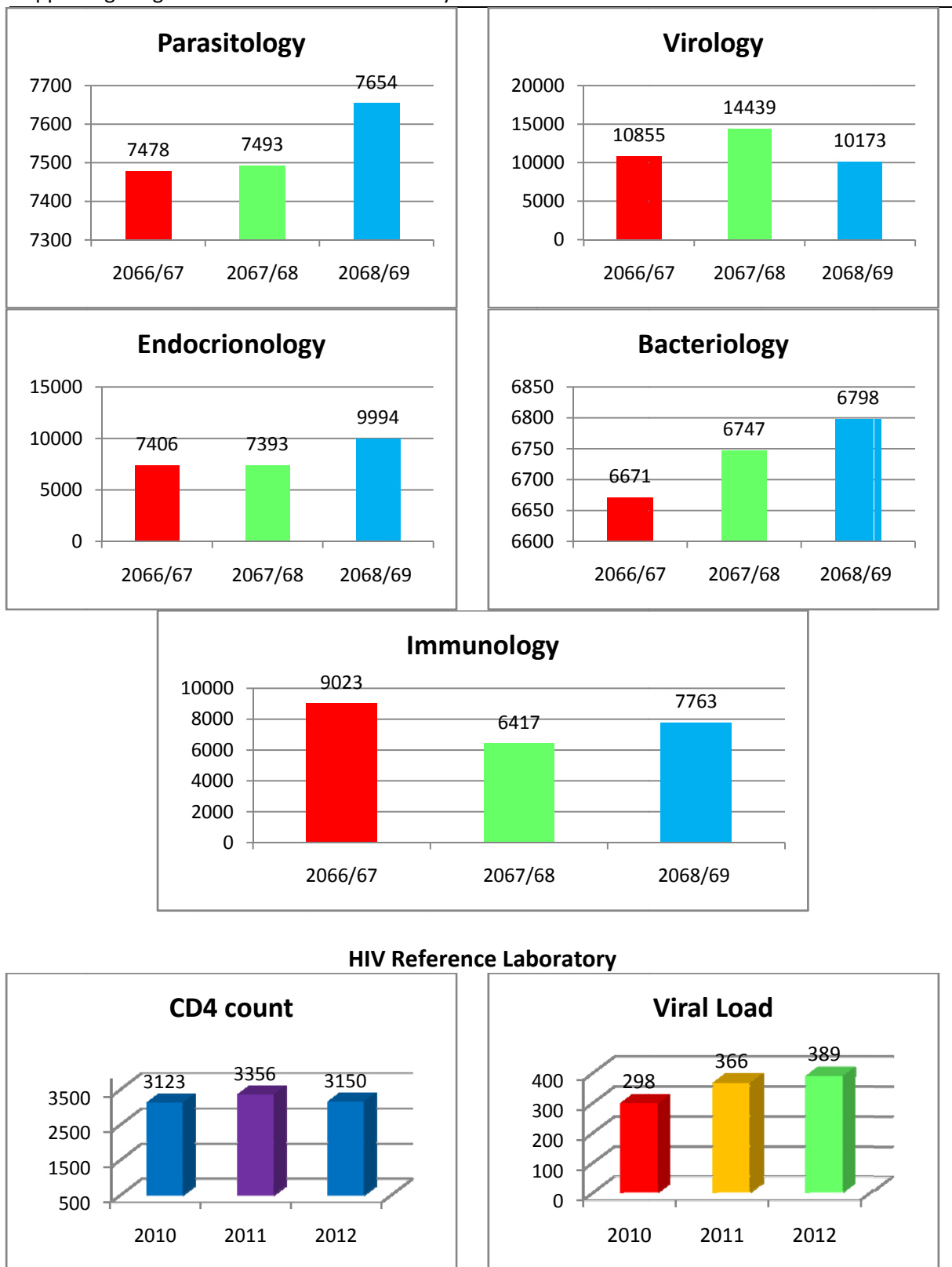
The comparative performance of various departments of NPHL in the last three fiscal years is shown in the graphs below:

Department	066/067 (2009/2010)	067/068 (2010/2011)	068/069 (2011/2012)
Biochemistry	97,457	98,717	99,212
Haematology	37,893	38,424	39,875
Virology	10,855	14,439	10,173
Immunology	9,023	6,417	7,763
Parasitology	77,478	7,493	7,654
Bacteriology	6,671	6,747	6,798
Endocrinology	7406	7393	9,994
<b>Histopathology</b>			
Histology	308	432	470
Cytology	4,169	4,253	8,595
<b>HIV monitoring Lab</b>			
Viral Load	298	366	389
CD4	3,123	3,356	3,150
<b>Lab Based Surveillance</b>			
Japanese Encephalitis	1,051	1,267	1,430
Measles	552	1,009	1,205
Rubella	552	1,009	1,205
Dengue	534	1,388	1,042

Figure 6.4.1: Department wise Tests records in NPHL



Supporting Programs: Public Health Laboratory Services

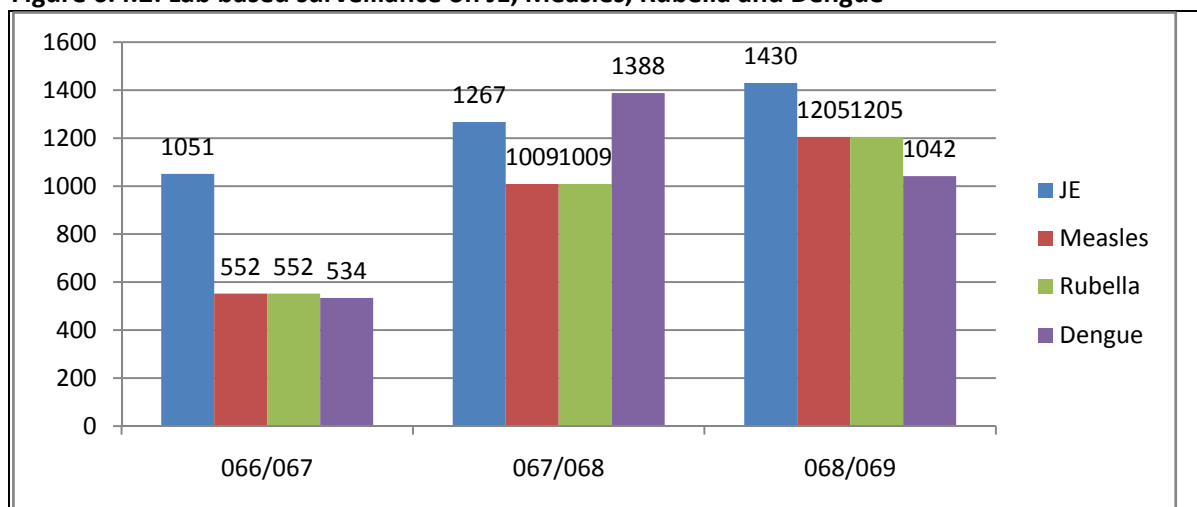


**2. Laboratory based surveillance activities**

Beyond the routine diagnostic, NPHL is also conducting the laboratory surveillance activities on various disease pathogens. These activities include Measles/Rubella surveillance, Japanese encephalitis surveillance, Influenza surveillance and Antimicrobial resistance surveillance. The major

objective of these programmes is to find out the burden of related diseases and provide background information for the formulation of strategy to control these diseases in the country. Below are the samples analysed on the related activities.

**Figure 6.4.2: Lab based surveillance on JE, Measles, Rubella and Dengue**



### 3. Outbreak Investigation, 2012

SN	District	Sample	Isolate	Number
1	Kathmandu	Stool	Shigella Dysentriae	4
			Shigella Flexneri	6
			Shigella Boydii	3
			Shigella Sonnei	3
			Shigella Spp.	1
			Salmonella Spp.	2
			V. Cholerae O1 Ogawa	6
2	Doti	Stool	V. Cholerae O1 Ogawa	5
			Salmonella Spp.	1
3	Dailekh	Stool	V. Cholerae O1 Ogawa	4
<b>Total Isolates</b>				<b>35</b>
<b>Tests</b>			<b>Total</b>	<b>Positive</b>
Dengue			1042	6

#### A. Issues and Recommendations

##### 1. Policy Constraints

- Approval of National Laboratory policy, licensing criteria and process of accreditation.
- Shortage of all levels and types of human resources including Pathologists, Microbiologists, Technologists, Technicians etc.
- Difficult to obtain the quality chemicals and reagent kits from different suppliers.
- Lack of authority in transfer/training /upgrading of laboratory staffs of government of Nepal labs as per requirements.

**2. Institutional Constraints**

- Workload increased, however manpower is same as of old organogram.
- Lack of trained Manpower, i.e., MD Haematology, Microbiology, M.Sc. in Cytology, Hematology, Medical Microbiology, Biochemistry and other specialized training.
- When transfers are made, NPHL is not notified.
- Old Laboratory equipment not maintained due to lack of biomedical engineer/technician.
- Problem of waste disposal.

**3. Resource Constraints**

- Skilled human resource
- Financial resources/Budgetary constraints



## 6.5 PERSONNEL ADMINISTRATION MANAGEMENT

### 6.5.1 Background

The Personnel Administration Section of the Department of Health Services is responsible for organising routine and program administrative function. The major functions of the section include upgrading health institutions, transfer of health workers, level upgrading of health workers up to 6<sup>th</sup> level, capacity building as well as internal management of human resources of personnel, etc.,.

#### Objectives

The main objective of the section is to mobilize human resource for delivery of quality health services. The specific objectives include:

- Transfer and manage all the posts according to the government policy;
- Placement health staffs at the sanctioned posts in all the health institutions;
- Manage human resources at the different levels;
- Take disciplinary action according to the professional law;
- Updating human resource book keeping of all levels and institutions;
- Performs the tasks according to prevailing laws, rules and regulations;
- Manage the posting and transfer of medical officers who had completed their study in government scholarships;
- Execute the O&M survey as needed to establish and extend the structure of health institutions/ organizations in and under the Department of Health Services; and
- Conducting the activities as per the direction given by Ministry of Health & Population.

### 6.5.2 Major Activities

#### Distribution of Health Work Force

MoHP has a total of 27,300 employees. Of them 21,000 are technical personnel and 6,300 are administrative staff.

#### Transfer

As per the MoHP policy, DoHS is responsible for transfer of the health workforce up to the 7<sup>th</sup> level.

#### Disciplinary Action

Discipline may be considered as a force that prompts individuals and groups to observe the rules, regulations and procedures which are deemed to be necessary for the effective functioning of an organisation. DoHS works to maintain the professional discipline within its employees.

#### Level Upgrading

Following a set of criteria DoHS manages upgrading of its employees up to the 7<sup>th</sup> level. DoHS also provide its employees with appropriate *Padnam* as guided by the norms set by the court.

**Leave**

DoHS also manages different types of leaves of non-gazetted/non-officer level employees. Following the Laws and Acts, it also manages special leave requests received from different levels of staff by recommending the appropriate cases to the MoHP.

**Table 6.5.1: Type of Institutions 2068/69**

Types of Institution	EDR	CDR	WDR	MWDR	FWDR	Total
Central Hospital	0	5	0	0	0	5
Regional Health Directorate	1	1	1	1	1	5
Regional Health Training Centre	1	2	1	1	1	6
Regional Medical Store	1	1	1	1	1	5
Regional TB Centre	0	0	1	0	0	1
Regional Hospital	0	1	1	1	0	3
Sub-Regional Hospital	0	1	0	1	0	2
Sub-Regional TB Centre	0	0	1	0	0	1
Zonal Hospital	3	1	2	3	2	11
D(P)HO	16	19	16	15	9	75
District Hospital	14	12	15	11	8	60
Institutional Clinic	4	9	2	3	1	19
PHC/HC	51	68	43	29	19	210
HP	140	173	145	129	88	675
SHP	715	999	692	432	289	3,127
<b>Total</b>	<b>945</b>	<b>1292</b>	<b>921</b>	<b>628</b>	<b>419</b>	<b>4,205</b>

Source: Personnel Administration Section, DoHS

**Table 6.5.2: Sanctioned posts under Department of Health Services, 2068/69**

Type of Health Institution	Sanctioned
Department of Health Services (DoHS)	184
Regional Health Directorate Office (all five regions)	227
Regional and Sub-regional Hospital (all four hospital)	444
Regional Medical Store (all five stores)	60
Regional Training Centre (all six training centres)	79
Zonal Hospital (all ten zonal hospitals)	1013
District/Public Health Office (all districts)	18,364
<b>Total</b>	<b>20,371</b>

Source: Personnel Administration Section, DoHS

**6.5.3 Issues and Recommendations**

Problems/Constraints	Action to be Taken	Responsibilities	Deadline
Need to update employee personnel records in DoHS and HuRIC unit	<ul style="list-style-type: none"> <li>Each and every districts and health institutions should maintain personal file according to the rules and regulations</li> <li>Any changes (e.g. transfer, training or promotion) should be communicated to the HuRIC Unit for updating</li> <li>Implement E- HURDIS plan. Record system should be improved systematically</li> </ul>	HuRIC and Personnel Administration, DoHS/MoHP	Ongoing
Frequent transfer and no transfer	<ul style="list-style-type: none"> <li>Strictly follow the Civil Service Act and Health act and regulations.</li> <li>Transfer policy should be revised</li> </ul>	RHD/DoHS/MoHP	Immediate
Inadequate training of administrative staff	<ul style="list-style-type: none"> <li>Develop and implement in-service training packages. Increase efficiency of administration unit. Evaluation performance of administrative employees. Opportunities should be provide on the basis of performance</li> </ul>	DoHS/MD, NHTC	As soon as possible

## Supporting Programs: Personnel Administration Management

<b>Problems/Constraints</b>	<b>Action to be Taken</b>	<b>Responsibilities</b>	<b>Deadline</b>
Staff duties and authority unclear	<ul style="list-style-type: none"> <li>The duties, responsibilities, and delegation of authority of employees should be defined clearly. There should be commitment and budget allocation for effective implementation of these activities</li> </ul>	DoHS/MD	As soon as possible
Fulfillment of vacant posts and deputation	<ul style="list-style-type: none"> <li>Strictly follow Civil Service and Health Service Act and Regulation</li> </ul>	DoHS/RHD/MoHP	Immediate
No HuRIC unit connection at regional health directorate and district health office	<ul style="list-style-type: none"> <li>Develop HuRIC unit at RHDs and establish networking between RHD and central health information system</li> </ul>	DoHS/MoHP	As soon as possible
Performance appraisal system was not functioning properly	<ul style="list-style-type: none"> <li>Performance appraisal should be based on job descriptions</li> <li>Tie up reward and punishment with performance</li> </ul>	RHD/DoHS/MoHP	Immediate
Registration of health institutions	<ul style="list-style-type: none"> <li>Registration of health institutions in Civil Service Registration Department, Ministry of General Administration in appropriate time</li> </ul>	DoHS/MoHP	As soon as possible

## 6.6 FINANCIAL MANAGEMENT

### 6.6.1 Background

An effective financial support system is imperative for efficient management of health services. Preparation of the annual budget, timely disbursement of funds, accounting, reporting, and auditing are the main financial management functions that are necessary to support the implementation of health programs. The Finance Section of the DoHS is the focal point for financial management for all programs under the DoHS. All health institutions have their own Finance Section, except PHCs, HPs and SHPs.

#### Objectives

- To provide support to all programs divisions/centres during annual budget preparation
- To obtain and disburse program budgets
- To keep books of accounts and collect financial reports from all institutions
- To prepare and submit financial reports
- To facilitate internal and external auditing
- To provide financial consultation

#### Targets

The main target of financial management is to achieve 100% expenditure of all budgets in accordance with program work plans within a specified time as per financial rules and regulations of government and to maintain the recording and reporting system accurately and timely.

### 6.6.2 Analysis of Achievements by Major Activities

Out of total National Budget of Rs. 3,84,90,00,00,000 a sum of Rs. 24,65,78,85,000 (7.00%) was allocated for the health sector during the fiscal year 2068/69. Of the total health sector budget, Rs. 15,967,885,000 ( 64.76 %) was allocated for the execution of programs under the Department of Health Services Network (Table 6.6.1).

**Table 6.6.1: Health Budget under DoHS, FY 2068/69** (Amount in NRs. '000)

Budget	Total	Recurrent	%	Capital	%
National Budget	384,900,000	312,292,910	81.14	72,607,090	18.86
Health Budget	24,657,885	19,951,776	80.91	4,706,109	19.09
Health Budget under DoHS	15,967,885	15,127,383	94.74	840,502	5.26

Source: Finance Section, DoHS

**Table 6.6.2: Allocation of Budget by Source, FY 2068/69** (Amount in NRs. '000)

Budget	Total	GoN	%	Donor	%
Health Budget under DoHS	159,667,885	7,705,973	48.26	8,261,912	51.74

Source: Finance Section, DoHS

**Table 6.6.3:** Regular Program Recurrent Budget, Releases and Expenditure by Programme Activities, FY 2068/69 (Amount in NRs. '000)

Budget Code No	Program Budget	Total Budget (in Rs.)		Release Budget (in Rs.)		Expenditure (in Rs.)		
		Amount	%	Amount	%	Amount	% (a)	% (b)
3700123	Department of Health	53,046	1.01	52,348	1.04	52,348	100	1.04
3700133	Regional Health Directorates	16,400	0.31	12,987	0.26	12,987	100	0.26
3700143	District Health Offices	4,613,996	88.06	4,440,831	88.04	4,440,831	100	88.04
3700213	Health Training Centres	28,017	0.53	27,138	0.54	27,138	100	0.54
3700233	District Hospitals	528,237	10.08	510,534	10.12	510,534	100	10.12
Total		5,239,696	100	5,043,838	100	5,043,838	100	100

Source: Finance Section, DoHS

**Table 6.6.4:** Regular Programme Capital Budget, Releases and Expenditure by Programme Activities, FY 2068/69 (2011/2012) (Amount in NRs. '000)

Budget Code No	Program Budget	Total Budget (in Rs.)		Release Budget (in Rs.)		Expenditure (in Rs.)		
		Amount	%	Amount	%	Amount	% (a)	% (b)
3700144	District Health Offices	7,800	72	7,575	71	7,575	100	71
3700234	District Hospitals	3,100	28	3,044	29	3,044	100	29
Total		10,900	100	10,619	100	10,619	100	100

Source: Finance Section, DoHS

**Table 6.6.5:** Central Level Recurrent Budget Allocation by Source and Program activities, FY 2068/69

Budget Code No	Programme Budget Heading	Total Budget Allocation by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3701133	Tuberculosis Control Programs	69,846	9.12	698873	12.86	768,719	12.86
3701143	National Aids Control	42,742	5.58	607,392	11.18	650,134	11.2
3701153	FP/MCH Programs	114,250	14.92	542,212	9.98	656,462	10.0
3701163	Integrated CHD Programme	100,182	13.08	1,861,559	34.26	1,961,741	34.3
3701193	Epidemiology Programme	75,350	9.84	268,987	4.95	344,337	5.0
3701203	Leprosy Control Programme	11,720	1.53	5,320	0.10	17,040	0.1
3701213	Indent Procurement	16,400	2.14	611,500	11.25	627,900	11.3
3701223	Hospital Construction /Management Information System	73,880	9.65	45,728	0.84	119,608	0.8

## Supporting Programs: Financial Management

Budget Code No	Programme Budget Heading	Total Budget Allocation by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3701233	NHEICC	59,650	7.79	32,900	0.61	92,550	0.6
3701263	Health Laboratory Services	24,940	3.26	29,400	0.54	54,340	0.5
3701363	PHC RD Avian	22,450	2.93	530,000	9.75	552,450	9.8
3701383	Primary Health RD	113,550	14.83	93,500	1.72	207,050	1.7
3708033	National Health Training Centre	40,880	5.34	106,060	1.95	146,940	2.0
Total		765,840	100.00	5,433,431	100.00	6,199,271	100

Source: Finance Section, DoHS

**Table 6.6.6:** Central Level Recurrent Budget Released by Source by Program, FY 2068/69 (2011/2012)

Budget Code No	Programs Budget Heading	Released Budget By Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3701133	Tuberculosis Control Programs	46,134	8.12	218,720	6.45	264,854	6.69
3701143	National Aids Control	38,300	6.74	283,820	8.36	322,120	8.13
3701153	FP/MCH Programs	94,958	16.71	406,526	11.98	501,484	12.66
3701163	Integrated CHD Programme	98,423	17.32	1,122,042	33.06	1,220,465	30.81
3701193	Epidemiology Programme	20,982	3.69	189,899	5.60	210,881	5.32
3701203	Leprosy Control Programme	7,897	1.39	7,110	0.21	15,007	0.38
3701213	Indent Procurement	15,030	2.64	450,320	13.27	465,350	11.75
3701223	Hospital Construction /Management Information System	64,968	11.43	31,586	0.93	96,554	2.44
3701233	NHEICC	56,766	9.99	30,670	0.90	87,436	2.21
3701263	Health Laboratory Services	23,072	4.06	27,728	0.82	50,800	1.28
3701363	PHCRD	17,284	3.04	528,337	15.57	545,621	13.77
3701383	Primary Health Avian	54,257	9.55	83,974	2.43	138,231	3.44
3708033	National Health Training Centre	30,207	5.32	68,996	2.03	99,203	2.50
Total		568,278	100.00	3,449,728	100	4,018,006	100

Source: Finance Section, DoHS

**Table 6.6.7: Central Level Recurrent Budget Expenditure by Source and Program, FY 2068/69 (2011/2012)**

Budget Code No	Programs Budget Heading	Expenditure Budget by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	% (a)
3701133	Tuberculosis Control Programs	46,134	8.12	218720	6.45	264,854	6.69
3701143	National Aids Control	38,300	6.74	283,820	8.36	322,120	8.13
3701153	FP/MCH Programs	94,958	16.71	406,526	11.98	501,484	12.66
3701163	Integrated CHD Program	98,423	17.32	1,122,042	33.06	1,220,465	30.81
3701193	Epidemiology Program	20,982	3.69	189,899	5.60	210,881	5.32
3701203	Leprosy Control Program	7,897	1.39	7,110	0.21	15,007	0.38
3701213	Indent Procurement	15,030	2.64	450,320	13.27	465,350	11.75
3701223	Hospital Construction /Management Information System	64,968	11.43	31,586	0.93	96,554	2.44
3701233	NHEICC	56,766	9.99	30,670	0.90	87,436	2.21
3701263	Health Laboratory Services	23,072	4.06	27,728	0.82	50,800	1.28
3701363	PHC RD Avian	17,284	3.04	528,337	15.57	545,621	13.77
3701383	Primary Health Avian	54,257	9.55	83,974	2.43	138,231	3.44
3708033	National Health Training Centre	30,207	5.32	68,996	2.03	99,203	2.50
Total		568,278	100.00	3,449,728	100	4,018,006	100

Source: Finance Section, DoHS

**Table 6.6.8: Central Level Capital Budget Allocation by Source by Program, FY 2068/69**

Budget Code No	Program Budget Heading	Total Budget Allocation by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3701134	Tuberculosis Control Programs	17,000	7.16	145,150	1.87	162,150	2.85
3701144	National Aids Control	6,700	8.71	3,120	0.08	9820	1.67
3701154	FP/MCH Programs	0	0.00	157,900	12.67	157900	10.33
3701164	Integrated Child Health Programme	2,322	0.00	71,403	2.22	73725	1.81
3701194	Epidemiology Programme	3,150	0.00	4,708	5.52	7858	4.50
3701214	Indent Procurement	2,650	54.35	315,500	39.92	318150	42.58
3701224	Hospital Construction /Management Information System	11,550	0.13	3,300	17.58	14850	14.36
3701234	NHEICC Center	600	0.36	0	0.00	600	0.07
3701264	Health Laboratory Services	10,000	1.72	27,200	2.53	37200	2.38
3701364	Primary Health RD	1,900	18.50	0	16.74	1900	17.06
3708034	National Health Training Centre	2,500	0.86	3,500	0.49	6000	0.56
Total		116,195	100	513,522	100	629,717	100

Source: Finance Section, DoHS

**Table 6.6.9: Central Level Capital Budget Released by Source by Program, FY 2068/69(2011/2012)**

Budget Code No	Programs Budget Heading	Released Budget by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3701134	Tuberculosis Control Programs	4820	13.74	437	0.29	5257	2.88
3701144	National Aids Control	6694	19.08	1,692	1.15	8386	4.60
3701154	FP/MCH Programs	0	0.00	57,080	38.78	57080	31.31
3701164	Integrated Child Health Programme	1688	4.81	17,829	12.11	19517	10.71
3701194	Epidemiology Program	318	0.91	0	0.00	318	0.17
3701214	Indent Procurement	467	1.33	38,657	26.26	39124	21.46
3701224	Hospital Construction /Management Information System	6887	19.63	2,450	1.66	9337	5.12
3701234	NHEICC Center	599	1.71	0	0.00	599	0.33
3701264	Health Laboratory Services	9957	28.38	26,908	18.28	36865	20.22
3701364	Primary Health RD	1900	5.42	0	0.00	1900	1.04
3708034	National Health Training Centre	1754	5.00	2,149	1.46	3903	2.14
Total		35,084	100	147,202	100	182,286	100

Source: Finance Section, DoHS

**Table 6.6.10: Central Level Capital Budget Expenditure by Source by Program, FY 2068/69**

Budget Code No	Programs Budget Heading	Expenditure Budget by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%(a)
3701134	Tuberculosis Control Programs	4820	13.74	437	0.29	5257	2.88
3701144	National Aids Control	6694	19.08	1,692	1.15	8386	4.60
3701154	FP/MCH Programs	0	0.00	57,080	38.78	57080	31.31
3701164	Integrated Child Health Programme	1688	4.81	17,829	12.11	19517	10.71
3701194	Epidemiology Programme	318	0.91	0	0.00	318	0.17
3701214	Indent Procurement	467	1.33	38,657	26.26	39124	21.46
3701224	Hospital Construction /Management Information System	6887	19.63	2,450	1.66	9337	5.12
3701234	NHEICC Center	599	1.71	0	0.00	599	0.33
3701264	Health Laboratory Services	9957	28.38	26,908	18.28	36865	20.22
3701364	Primary Health RD	1900	5.42	0	0.00	1900	1.04
3708034	National Health Training Centre	1754	5.00	2,149	1.46	3903	2.14
Total		35,084	100	147,202	100	182,286	100

Source: Finance Section, DoHS



**Table 6.6.11: District Level Recurrent Budget Allocation by Source and Program, FY 2068/69**

Budget Code No	Programs Budget Heading	Total Budget Allocation by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3708063	TB Control Programs	36,405	2.47	92844	17.65	129,249	6.47
3708013	MCH Programs (Dolakha/Ramechhap)	48	0.00	66,670	12.68	66,718	3.34
3708023	NHEICC	36,600	2.48	44,600	8.48	81,200	4.06
3701243	National Health Training Centre	5,500	0.37	52,565	9.99	58,065	2.90
3708043	Integrated Health Services	1,394,595	94.67	2,659,300	91.20	4,053,895	92.36
Total		1,473,148	100	2,915,979	100	4,389,127	100

Source: Finance Section, DoHS

**Table 6.6.12: District Level Recurrent Budget Released by Source and Program, FY 2068/69**

Budget Code No	Program Budget Heading	Released Budget by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3708063	TB Control Programs	35,228	2.63	90074	4.07	125,302	3.53
3708013	MCH Programs (Dolakha/Ramechhap)	0	0.00	0	0.00	0	0.00
3708023	NHEICC	35,315	2.64	43,533	1.97	78,848	2.22
3701243	National Health Training Centre	4,505	0.34	41,605	1.88	46,110	1.30
3708043	Integrated Health Services	1,264,298	94.40	2,040,056	92.09	3,304,354	92.96
Total		1,339,346	100	2,215,268	100	3,554,614	100

Source: Finance Section, DoHS

**Table 6.6.13: District Level Recurrent Budget Expenditure by Source and Program, FY 2068/69**

Budget Code No	Programme Budget Heading	Expenditure Budget by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	% (a)
3708063	TB Control Programs	35,228	2.63	90074	4.07	125,302	3.53
3708013	MCH Programs (Dolakha/Ramechhap)	0	0.00	0	0.00	0	0.00
3708023	NHEICC	35,315	2.64	43,533	1.97	78,848	2.22
3701243	National Health Training Centre	4,505	0.34	41,605	1.88	46,110	1.30
3708043	Integrated Health Services	1,264,298	94.40	2,040,056	92.09	3,304,354	92.96
Total		1,339,346	100	2,215,268	100	3,554,614	100

Source: Finance Section, DoHS

**Table 6.6.14: District Level Capital Budget Allocation by Source and Program, FY 2068/69**

Budget Code No	Program Budget Heading	Total Budget Allocation by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3708024	NHEICC	2,800	1.56	0	0.00	2,800	1.00
3708044	Integrated Health Services	176,500	98.44	99,691	100.00	276,191	99.00
3708064	TB Control Programs	2,005	1.12	9,880	9.91	11,885	4.26
Total		179,300	100	99,691	100	278,991	100

Source: Finance Section, DoHS

**Table 6.6.15: District Level Capital Budget Released by Source and Program, FY 2068/69**

Budget Code No	Program Budget Heading	Released Budget by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3708024	NHEICC	2,797	1.64	0	0.00	2,797	1.06
3708044	Integrated Health Services	168,107	98.36	93,958	100.00	262,065	98.94
3708064	TB Control Programs	1,898	1.11	9,708	10.33	11,606	4.38
Total		170,904	100	93,958	100	264,862	100

Source: Finance Section, DoHS

**Table 6.6.16: District Level Capital Budget Expenditure by Source and Program, FY 2068/69**

Budget Code No	Program Budget Heading	Expenditure Budget by Source (Amount in NRs. '000)					
		GoN	%	Donor	%	Total	%
3708024	NHEICC	2,797	1.64	0	0.00	2,797	0.00
3708044	Integrated Health Services	168,107	98.36	93,958	100.00	262,065	100.00
3708064	TB Control Programs	1,898	1.11	9,708	10.33	11,606	10.33
Total		170,904	100	93,958	100	264,862	100

Source: Finance Section, DoHS

**Table 6.6.17: Cumulative Financial Irregularities up to 2068/69**

Irregularity to be regularized	Irregularity clearance	Percent
2,303,545	790,223	34.30

**Table 6.6.18: Irregularity Clearance Status of Last Three Years**

F/Y	Total Irregularity Amount	Irregularity Clearance	(Rs. In Lakh)
			Clearance %
2068/69	2,303,545	790,223	34.30
2067/68	23,094	10,506	45.49
2066/67	18,900	61,84	32.72

**6.6.3 Issues and Recommendations**

<b>Problems/constraints</b>	<b>Action to be taken</b>	<b>Responsibility</b>
Difficulty in financial reporting procedures and reimbursement from donors due to the lack of trained manpower and physical facilities	Provide internal and external training in finance as appropriate	MoF, MoHP
Delay in budget disbursement due to programs not being approved on time	Timely actions must be taken for the approval of development programs.	DoHS (especially Planning Division and concerned program divisions and centres), MoHP, NPC
Non-release of committed donor budget	Plans of Action and work plan agreements must be signed before budget allocation, and donors should release budget as per their commitment.	MoF, MoHP, Donors
Difficulty in keeping books of accounts and reporting according to the differing formats of the different donors supporting the same program	<ul style="list-style-type: none"> <li>• Account staffs should be thoroughly oriented on book keeping and reporting formats used by of different donors</li> <li>• Provide computers to district level finance section and provide computer training for them</li> </ul>	MoF, MoHP and donors

## 6.7 MANAGEMENT

### 6.7.1 Background

General management of Department of Health Services is assigned to Management Division. Operating Manual (Procedure), 2068 (third edition) for Department of Health Services describes the responsibility of this division in information management, planning, coordination, supervision, monitoring and evaluation of the health programs. The division is also responsible for monitoring the delivery of quality health services through all types of health institutions. Furthermore, it monitors the building construction and maintenance of public health institutions and provides supports for maintenance of medical equipment. More activities are assigned to this division as directed by NHSP, policies and plans that include mental health, oral health, health care waste management, health facility upgrading and renewals and nursing related programs.

#### Objectives

The Management Division has major objective to support health programs and DoHS in overall to accomplish their service delivery functions which include in major to;

- facilitate and co-ordinate among concerned program divisions and centres to prepare annual plan, programs and make necessary arrangements to get approval from National Planning Commission (NPC) and Ministry of Finance (MoF)
- make necessary arrangements for preparation and compilation of annual budget and programs of the Regional Health Directorates and Districts Public/Health Offices
- monitor program implementation status and carryout periodic performance reviews
- support quality improvement in the health sector
- manage Health Management Information System (HMIS)
- manage and Co-ordinate for construction and maintenance of buildings and other infrastructures of Public Health Institutions
- process for approval of establishment of private and non-government health institutions
- process for approval of new public health institutions and their upgrades
- make arrangements for capacity building of human resources in public health

#### Strategies

To achieve the overall and specific objectives, management division adopts following major strategies.

- Make necessary arrangements to collect and analyze health information and use it to support planning, monitoring, and evaluation (PME) of health programs
- Strengthen Bottom-up planning process from community to the central level by optimum use of available resources including health service information
- Conduct and expand regular periodic performance reviews and use outcomes for improvement down to community level
- Strengthen and guide the monitoring/supervision system at each level
- Establish central data bank linking HMIS with HURDIS, LMIS, Finance, Surveys/ Censuses and other sources of information
- Expand computerized information system at all levels
- Monitoring of health services provided by state owned and non-state health institutions

## Supporting Programs: Management

---

- Develop and implement construction, repair and maintenance plan for public health facilities
- Capacity development of health workers as well as Management Committees in close collaboration with NHTC and concerned agencies
- Conduct Human Resource Development programs for improvement in quality of health services
- Routine management of Health Service Information round the year
- Orientation on quality health service delivery
- Upgrading health facilities as per plan and policies
- Initiate processing for approval of establishment of private and non-government health institutions within the 16 to 50 bed capacity
- Process for approval and renewal of private and non-governmental health facilities on the basis of given service standards
- Develop and implement integrated supervision and monitoring plan
- Establish and develop required infrastructure, human resource and guidelines to conduct other designated and non routine works assigned to MD

## Organizational Arrangement

The division has four sections and two units for overall management of functions and service delivery as directed by operating manual, citizen charter and plan and policy documents of health system.

1. Health Management Information Section
2. Planning, Budgeting, Building Construction and Maintenance Section
3. Program Monitoring and Evaluation Section
4. Quality Assurance Section
5. Nursing Unit
6. Oral Health Unit

The specific functions of sections and units are as follows:

### 1. Health Management Information Section (HMIS)

This section manages health service information from community to the DoHS through predefined process and procedure. This system is almost 19 years old robust and well set that provide base for planning, monitoring and evaluation of health system at all levels. The major functions of the HMIS are;

- To collect and manage the health service delivery information from all levels of health service delivery outlets including services at the communities by FCHVs and community level health workers
- To verify, process, analyze the collected data and operate data bank
- To provide feedbacks on achievements, coverage, continuity and quality of health services to program divisions/centres, RHDs, hospitals and district public/ health offices
- To draw indicators and relevant information and support to the program management
- To disseminate health information through efficient methods and technologies
- To publish a comprehensive Annual Report of Department of Health Services
- To develop competent human resource for Health Information Management System

- To support for conducting National Performance Review of health programs and support to regional, district and below level reviews
- To improve the information management system and modify the tools, techniques and methodologies

## **2. Programming, Budgeting, Building Construction and Maintenance Section**

This section is mainly responsible for integrated planning of DoHS and providing technical supports in the planning process of District Public Health and Health Offices as well as Regional Health Directorates. The annual program and budgeting is prepared in collaboration with respective divisions, RHDs, DPHOs and DHOs. The section performs following activities to satisfy related objectives.

- Facilitates planning, programming and budgeting at central, regional and district level
- Make process for approval of annual programs and budget of health programs of DoHS, Regions and districts from NPC and MoF
- Support and facilitate bottom-up planning process
- Support the maintenance of bio-medical equipment
- Support the construction, repair and maintenance of infrastructure of public health institutions
- Conduct activities related to mental and ear health programs

## **3. Program Monitoring & Evaluation Section**

This section is assigned with responsibility of monitoring health programs and services performed by DoHS, RHDs, DPHOs, DHOS and health institutions under DoHS that includes;

- Monitoring, supervision and evaluation the preventive, curative and promotive health programs
- Conducting integrated supervision in collaboration with Divisions, Centres and Regional Health Directorates
- Facilitating conduction of monthly, bi-monthly, quarterly, half yearly performance review meetings of health programs
- Monitoring health care service delivery with special focus on essential health care services in state and non-state sector
- Facilitate strengthening District Health Management System as well as health management orientation/ training
- Supporting DPHOs and DHOs to strengthen Local Health Facility Management Committee
- Strengthen health care waste management activities in hospitals, PHCCs, HPs and SHPs

## **4. Quality Assurance Section**

This section mainly performs the activities for health facilities under the DoHS to improve and maintaining the quality of health services as well as supporting establishment and operating of health facilities. To achieve the objective it performs following activities.

- Strengthen national quality assurance system for health sector in close collaboration with Divisions, Centres, RHDs and other stakeholders
- Facilitate process for upgrading government health institutions

## Supporting Programs: Management

---

- Conduct supervision and monitoring for quality assurance as per standard guideline & service protocol in coordination with program monitoring and evaluation section
- Conduct studies & research activities to improve quality of health care
- To process providing approval for opening new hospitals under NGO/private sector including nursing homes of 16 to 50 beds and their renewal.
- Provide suggestions during Registration Process for NGOs

### 5. Nursing Unit

This unit support capacity building of nursing staffs and co-ordination of activities related to nursing services that mainly include;

- support capacity development programs and activities for nursing professionals
- support nursing leadership and motivational programs
- Co-ordinate programs and activities for improvement in nursing services

### 6. Oral Health Unit

Management division support oral health services through this unit by conducting activities on;

- capacity building of health workers
- preparation and distribution of IEC/BCC materials for oral health care
- co-ordinate with stakeholders and national focal point for expanding and improving the services

### 6.7.2 Major Activities

Management division conducts some major activities related to regular and assigned functions to enhance and improve the program and activities. The following activities are major innovations those have been conducted on regular or ad-hoc besides its regular functions.

#### a) Geographic Information System (GIS)

GIS has been incepted and in the process of institutionalize in the health system. This is guided by NHSP, Periodic Development Plans, Health Sector Information System-National Strategy (HSIS-NS) and Information, Communication and Technology Policy of the Government of Nepal. This adoption is also reinforced by e-health, HealthGIS and need for integration of information systems. Health Facility Mapping Survey (HFMS) has been carried out in 57 districts with technical and financial support from WHO and further processing for remaining 18 districts is going on. The completion of this survey is expected to result in geographic feature embedded planning, monitoring and evaluation in the health system.

#### b) Performance Based Management System (PBMS)

This is aimed at reward mechanism for best performers at the district level. Ranking of health facilities and health workers are done with a set of performance indicators. Districts select health facilities and health workers sorting their rank and honoured with gifts. Twelve districts are selected and provided with required budget and guideline for PBMS conduction.

**c) Health Care Waste Management (HCWM)**

Management division has been providing orientation and required capacity for managing wastage in the health facilities. The program package includes orientation on effects of health care and managing them, minimizing the use of mercury and mercury embedded products, IEC/BCC materials, colored bins. A committee is formed in the MoHP to guide the HCWM activities.

**d) Health Infrastructure Information System (HIIS)**

HIIS is started to have complete scenario on infrastructure of all the public health facilities. This information system is expected to provide basis for decision making on building construction and maintenance as well as for resource allocation. The system is in the process of completion. The system aims to regularly update the information.

**e) Health Sector Information System (HSIS)**

This is the integrated and comprehensive information system guided by National Strategy. The strategy is endorsed in 2007 by MoHP and being piloted in three districts Lalitpur, Parsa and Rupandehi. The implementation of HSIS is assigned to MD until the national health information center is established. The poor performance of recording and reporting tools and process, lack of intended infrastructure and institutional set up and resource constraint is barring to bring out expected results.

**f) Building Construction and Maintenance**

Management division makes process for construction of building and other infrastructure of health facilities.

Public health facility construction and maintenance work is assigned to Management Division and Department of Urban Development and Building Construction (DUDBC). All the maintenance within premises of DoHS and construction and maintenance works in the districts and regions costing less than one million is disbursed through Management Division. All other construction works costing more than one million is done through DUDBC. A committee is formed in the MoHP to monitor the construction and maintenance works.

Table 6.7.1: Summary of building construction by DUDBC (FY 2061/062 – 2068/069)

Total number of projects	1,145
Under construction	724
Near completion (Till the end of FY 2067/068)	286
Completed/handed over	421
Budget allocated to DUDBC (in '000)	3,220,000
Expenditure (in '000)	2,656,509 (82.5%)



## Supporting Programs: Management

### Building construction scenario in the three consecutive years is given in Table 6.7.2

Table 6.7.2: Building Construction Scenario in the three consecutive years

Types of the health facility	2066/67	2067/68	2068/69
Health post with Birthing Center	75	76	80
Doctor's Quarter	4	15	15
Staff quarter	1	10	10
PHCC	15	18	10
Birthing center	31	24	25
District health store	5	8	10
BEOC building	6	6	10
CEOC building	4	4	0
Public health office building	2	8	10
District hospital building	1	5	0

### g) Health Facility Up-gradation

Management Division starts the processing for upgrading of public health facilities up to 15 bed hospitals. In line with upgrading all the Sub-Health Posts to Health Posts and other health facilities accordingly up to 15 bed hospitals following certain procedures, division collects demand and recommendations from concerned agencies and process for approval. The status of health facility up-gradation is given in Table 6.7.3.

Table 6.7.3: Status of Health Facilities up Gradation

Year	HF Type	HF Number	Status
2065/66	SHP to HP	478	Processing in the MoHP
2065/66	Health facility to Hospital	6	Approved, Implementing
2066/67	SHP to HP	522	Approved, Implementing
2067/68	SHP to HP	500	O & M is going on
2067/68	HP to PHC	10	O & M is going on
2068/69	SHP to HP	500	O & M Completed
2068/69	HP to PHC; PHC to Hospital	25	O & M going on

### h) Approval to Private Health Facilities

Management Division processes documents for approval to private health facilities. Among the processed two are approved in 2068/69 and 16 HFs got renewed.

### Major activities carried out in 2068/69 (2011/12) by MD

Following are the major activities conducted by management division under the project "Hospital construction and maintenance and management information system" mentioned in the annual work plan and budget, 2068/69 (2011/12)

- Conduction of 16<sup>th</sup> National Annual Performance Review Meeting, 2067/68 (2010/2011)
- Arrangements for printing and supply of HMIS recording and reporting tools
- Initial works for web based online reporting system of HMIS
- Preparation, printing and distribution of Annual Report of FY 2066/67 (2010/11) of DoHS
- Health Sector Information System (HSIS) implementation in three districts: Rupandehi, Parsa and Lalitpur

- Initiation on use of Health GIS
- Health Facility Mapping Survey (HFMS) conducted in 15 districts, reaching 57 districts
- Construction of PHCs, HPs, birthing centres, store building, staff quarters, birthing units is being continued
- Dental care training to health workers
- O&M Survey was conducted for health facility upgrading
- Conduction of Regional level planning workshops
- Leadership Development and Appreciative Inquiry Orientation for Senior Nurses
- Capacity building programs for health workers in Oral Health
- Quality Assurance Orientation to state and non-state health workers
- Performance Based Monitoring System related activities continued
- Mental Health Training is continued

Management Division had 76 activities during 2068/69 out of which major are listed in Annex 1. Overall physical and financial progress scenario is as follows.

Physical achievement		Financial achievement (in 000)	
Total Activities	: 76	Total Budget allocated	: 127,508
Activities conducted	: 59	Total budget received	: 122,308
Activities not done and cause		Returned and used in other activities	: 4,800
- Budget not received from Partners	: 7	Total Expenditure (through MD)	: 89,349
- Delay in budget transfer from Partners	: 2	Financial progress	: 73%
- Budget returned to MoHP	: 3		
- Activities not conducted	: 5		
Physical Progress	: 70%		

### 6.7.3 Issues and Recommendations

The management division related issues including problems and constraints are obtained through annual national and regional review meetings. The issues in last year with action taken and that raised during current year with recommendation and responsibility are given in Table 6.7.4.

**Table 6.7.4: Issues collected during Regional and National Reviews, 2067/68**

Issues	Recommendation	Action Taken
Delay in HMIS reporting	Ensure timely reporting from districts and make regions more responsible	Web based reporting with modified process initiated
Under reporting from private health facilities	Make proper arrangements for actual and complete reporting	Interaction with private institutions is started in the district and region
Degrading quality of HMIS tools	Keep focus on quality of printing	Specification is revised
Inadequate HMIS data utilization	Data use in Planning, Monitoring and supervision at each level should be enhanced	Micro analysis of HMIS data for use in PME program is started from 15 districts
Inadequate HMIS training for proper recording and reporting	Increase number of trainings for HF level staffs	Request is made for budget to the MoHP
Strong and user friendly software is needed for reporting and data analysis	Develop user friendly software	Web based software development is in progress

## Supporting Programs: Management

Lack of training and other infrastructure for medical recorders in the hospitals	Provide ICD and other trainings to medical recorders, improve infrastructure and prepare policy to clear old documents	ICD training is continued for limited number of participants
No regulatory act for private health institution for reporting services	Private health institution regulatory act should be formulated	HSIS implementation is in progress
Low pursuance of issues raised in reviews	Follow issues raised and take proper action for solving them	National and regional review documents are shared for action
Low involvement of disadvantaged (DAG) in health management and service utilization	Strengthen gender and social inclusion in public health systems of the region through situation analysis and forwarding this agenda for implementation	Disaggregated data reporting is in place and report is planned to share with stakeholders
Death analysis in the hospitals is not done	Death audit to be initiated and documented	No action taken yet
Issue of quality of services	Quality service delivery should be improved and monitored well	Orientation to the health workers is continued
Low quality of construction works, no proper hand over mechanism and poor supervision	Health authorities should take responsibility of building construction and maintenance	A joint monitoring team is formed

**Table 6.7.5: Issues collected during Regional and National Reviews, 2068/69**

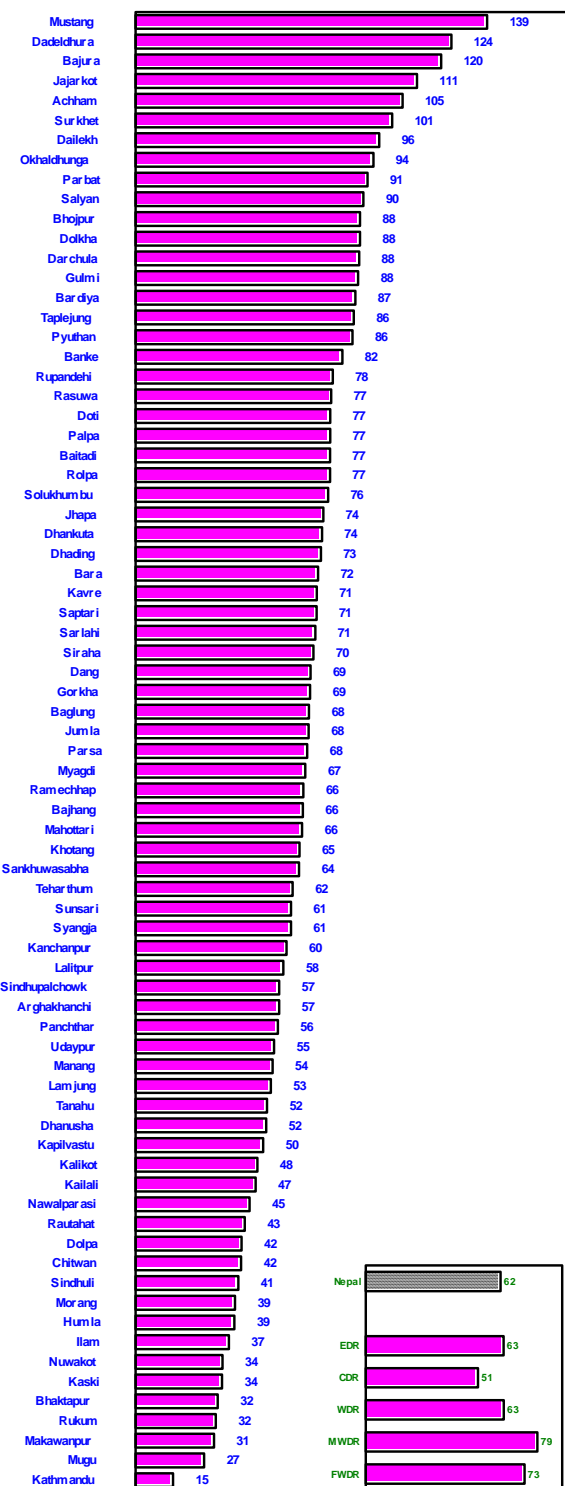
Issues	Action to be taken
Planning process is not rational in practice	<ul style="list-style-type: none"> <li>-Provision of competent facilitators and need of planning tools and guidelines</li> <li>-Orientation to HWs below district about policy and plan</li> <li>-Capacitate to practice micro-planning</li> <li>-Bottom up planning revitalization</li> </ul>
District plan is ignored by the center while programme planning and budgeting	-District priorities need to be considered
Delay, Incomplete and Inconsistent reporting (HMIS-33, LMIS)	<ul style="list-style-type: none"> <li>-Initiate web based reporting</li> <li>-Provision of staff on contract for vacant or needed posts for recording and reporting</li> <li>-Backup plan (electricity)</li> <li>-Timely HMIS training to all HWs</li> </ul>
Low reporting status from NGOs and Private Health Institutions	<ul style="list-style-type: none"> <li>-Prepare rules and regulations</li> <li>-Update profile of I/NGOs and private sectors</li> </ul>
Ensuring quality of data	District level data verification should be conducted before regional review
Revision is needed in HMIS tools	Some HMIS recording and reporting tools should be revised.
Integrated supervision and monitoring is less effective	<ul style="list-style-type: none"> <li>- Mandatory implementation of integrated joint supervision plan</li> <li>-Supportive supervision along with mandatory signatory of supervisors in HMIS tools</li> <li>-Revise supervision checklists</li> <li>-Involvement of higher authority in joint integrated supervision</li> <li>-Make integrated supervision plan with proportionate supervision according to guideline</li> </ul>
HMIS feedback system is less effective	<ul style="list-style-type: none"> <li>Need of regular feedback from RHD and Center</li> <li>No timely availability of HMIS tools</li> <li>Decentralize for development of tool</li> </ul>

Issues	Action to be taken
Inadequate budget for Ilaka level meeting and supervision	Make provision for adequate fund
Poor documentation at various levels	Compulsory development of website in all districts Establish PME and research unit at RHD and District
Need of separate review meeting for hospitals' internal review	Provision of hospital internal review
No uniformity in District Report	Develop standard template
Need of Health Sector Information System (HSIS)	Scale up HSIS
Data has not yet been fully utilised for planning, programmes and monitoring process	Bottom up planning programme Periodic meetings on HMIS data will be proposed for district level
Electronic reporting and software is not working properly	Proper development of software
Programme personnel at the district level are not yet taking responsibility for analyzing and consolidating the progress reports	Instructions/Orientates should be given to DHOs
Inadequate/ Quality supply of HMIS tools	Adequate number should be printed and timely supply should be assured
Errors in data like consistency, accuracy Error in data entry	Data entry should be at district Technical assistance for information technology management Skill and knowledge development to improve quality of data
No provision of medical recorder in most of the hospitals	There should be medical recorder in all hospitals
Physical progress is low in some activities	Budget and programme should be released timely
Programme wise Physical and Financial Progress not received regularly in time	DHO/ DPHO Should report with in 7 days of the next Month
Data inconsistency between Program Division and HMIS, from district to center; need co-ordination in the district and single report (HMIS 33) is the solution	Report should be uniform and consistent. DHO/ DPHO should be punished if data are not consistent
Integrated Supervision, Monitoring & feedback Mechanism and use of information should be practiced at each levels	Supervision and monitoring should be by at list 3 personnel from 3 different organization/section/division and District
Comment and suggestions are not written in the monitoring profiles and program specific recording registers in most of the places while supervising from all levels	Supervision team should fill the column of monitoring profile and DHO should send the copy to the MD Monthly
Institutionalization of HSIS	Before upgrading , construction, Information, Human resource, equipment's, instrument, Budgeting
Support to implementation of updates proposed in HMIS	MD O&M Survey should be done
Client satisfaction of health services unknown	Assess client satisfaction of health services (secretary)
Strengthen VDC level services	Make VDC level reviews effective

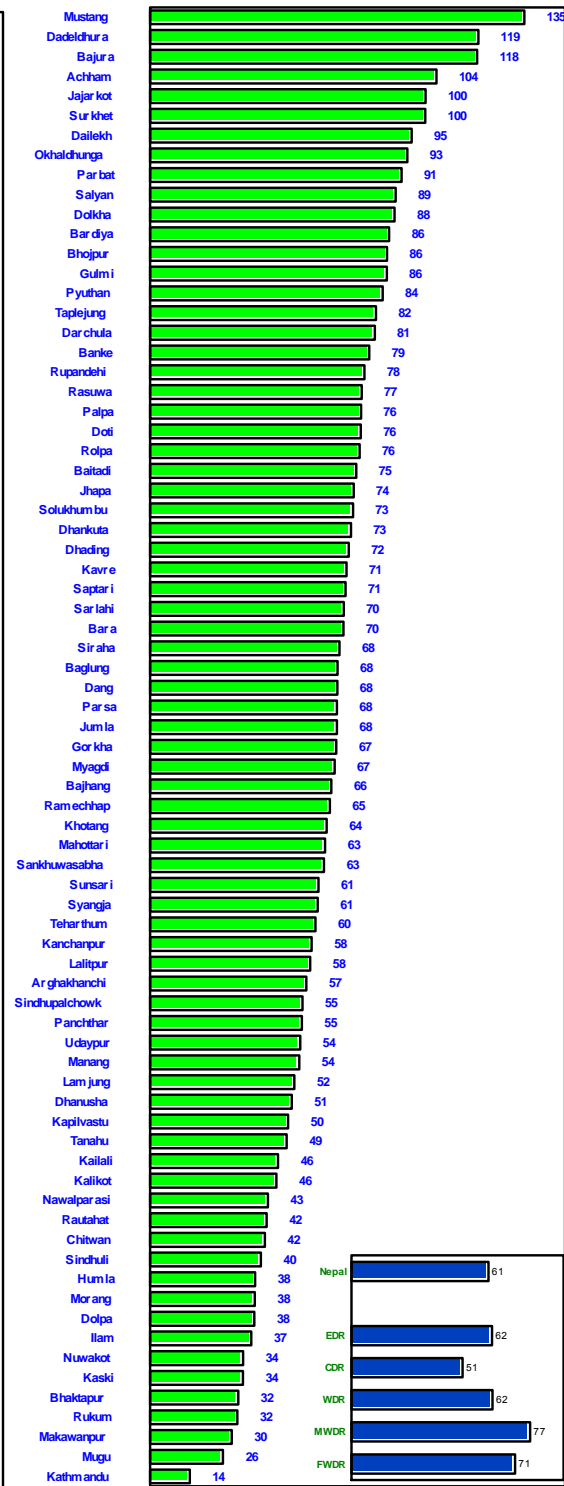
# Free Health Services

FY 2068/69

Free health services as percentage of total population



OPD visits as percentage of total population



Source: HMIS

## 6.8 PRIMARY HEALTH CARE REVITALIZATION

### 6.8.1 Background

PHC is the strategic movement of World Health Organization for the achievement of “better health for all”. So PHC is needed to extend throughout the country of each nation for the universal health coverage (UHC) that is, up to the general population who need and expect this service.

In Nepal, PHC has a long history that was reinforced by the Declaration at Alma Ata. It was mainstreamed in 1991 National Health Policy which endorsed PHC as a strong service delivery component. Thus, the National Health Policy 1991 was a turning point in delivery of primary health care services in the rural areas of Nepal. The most important contribution of the Policy is that it helped to increase access to health services to majority of people in Nepal by establishing a total of 4,020 health institutions spread throughout the country. Sub-Health Posts (SHP) and Health Posts (HP) deliver health services at VDC level. Primary Health Care Centers (PHCC) with 3-beds are established in each electoral constituency. Hospitals that have up to 25 beds provide outdoor, indoor, diagnostic and emergency services in the district.

The Second Long Term Health Plan (1997-2017) of Nepal has reflected PHC as Essential Health Care Services (EHCS), and Nepal Health Sector Program-II (NHSP-II, 2010-2015) has set three objectives in the result framework regarding to EHCS.

- To increase access to and utilization of quality EHCS.
- To reduce cultural and economic barriers to accessing health care services and harmful cultural practices in partnership with non-state actors.
- To improve the health system to achieve universal coverage of EHCS.

The NHSP-II puts a major emphasis on an increased coverage and quality EHCS with a special attention to improve access to the poor, vulnerable and disadvantaged groups. The rationale is to revitalize the PHC programs to meet the NHSP II objectives and target as below:

- Assure on availability of basic health services to all Nepalese citizens as addressed by the Interim Constitution of Nepal.
- Assure the quality health services.
- Assure easy access of health services to all Nepalese citizens.
- Implement health insurance through health cooperatives.
- Monitoring, supervision and evaluation of free health care services for the development of future planning and strategies.
- Manage urban PHC services to the urban vulnerable and deprived citizens.
- Implement environmental and sanitation programs for the creation of healthful environment.

The concern of the poor and marginalized people both in urban and rural areas has been in high priority in government programs. In order to materialize the constitutional commitment (Interim Constitution, 2007) of fundamental right of basic free health care, MoHP introduced a policy of providing “Free Health Care Services” to the population in a phased manner to enhance access to primary health care services for every citizen on an equal footing with special consideration for the safety net for the poor, ultra-poor, destitute, disabled, senior citizens and Female Community Health Volunteers (FCHV). Consequently, in 2009 (Jestha 2065), Ministry of Health and Population (MoHP) embedded in principles of essential care and equity constituted a new division Primary Health Care

## Supporting Programs: Primary Health Care Revitalization

---

Revitalization (PHCRD) under the Department of Health Services. The new Division is envisaged to revitalize PHC in Nepal by addressing emerging health challenges in close collaboration with other DoHS divisions and relevant actors. The Division has following major programs:

- National Free Health Care Program
- Urban health program
- Community health insurance program.
- Rural community health, basic health and model healthy village program.
- Equity and access program.
- Social audit program.

It is expected to make inroads into translating the constitutionally stipulated fundamental right of basic free health care into practice by addressing the disparities in health service delivery and health outcomes and promoting equitable health services.

**Vision:** The vision is to contribute in improving the health status of the Nepali population, especially of the poor and excluded. It will support MoHP to contribute to poverty reduction by providing equal opportunity for all to receive high-quality and affordable health care services.

**Goal:** To reduce morbidity and mortality especially of poor, marginalized and vulnerable people by securing the right of the citizens to quality essential health services

### Objectives

- To ensure health as a fundamental right of the people.
- To increase access to and utilization of available health services by poor and excluded.
- To decrease morbidity and mortality of general population.
- To ensure the government is accountable in maintaining healthful life of the people.
- To carryout health insurance, urban and environmental health programs.
- To review, evaluate and conduct research regarding to PHC program

### Strategy

- Establishment of urban health clinics.
- Health insurance through health co-operatives.
- Free health care services packages to targeted and general population.
- Integrated public health comps.
- Equity and access.
- Social audit.
- Establishment of model healthy villages.
- Establishment of community health units.

**Specific Objectives and Strategies as per thematic focuses of the Division are as below:**

<b>Component 1</b> National Free Health Care Program	<b>Component 2</b> Social Health Protection	<b>Component 3</b> Urban and Environmental Health	
▲	▲	▲	▲
<b>Objective 1</b> To increase access to and utilization of quality essential health care services by ensuring availability of essential drugs in both urban and rural health facilities throughout the year	<b>Objective 2</b> To achieve universal coverage of essential health services by developing a more comprehensive approach (structures or systems) with the aim of protecting the population against the financial risks of expensive health care	<b>Objective 3</b> To provide quality essential health care services to the municipal population at accessible delivery points through urban health clinic in partnership with MoLD/ Municipality	<b>Objective 4</b> To promote environmental health specifically hygiene and sanitation amongst population in conjunction with other essential health care services for improved hygiene practices in partnership with related agencies
<b>Strategy</b> 1. Develop and ensure implementation of comprehensive essential health care services package considering the below <ul style="list-style-type: none"> <li>• Program communication</li> <li>• Rapid expansion of the package</li> <li>• Community participation</li> <li>• Strengthening accountability, integration &amp; reduce verticality</li> </ul> 2. Appoint a focal person for PRD within the district health system 3. Outreach for underserved population and community empowerment to demand their rights to quality services and realize their responsibilities 4. Ensure quality of care and availability of essential drugs through M & E	1. Support the MoHP in Pilot-testing of 'networking' & expansion' of social protection mechanisms as outlined in the National Insurance Health Insurance Strategy 2. Mechanisms to revitalize Community Drug Scheme are explored and endorsed 3. Ensure the services are sensitive to GESI and users have equal access to services without regard to financial or social status	1. Develop and endorse Urban Health Strategy 2. Coordinate with other divisions and MoLD/Municipalities to establish urban health centers 3. Support municipalities in deploying the Female Community Health Volunteers (FCHVs) as Municipal Health Volunteers in delivering EHCS 4. Support municipalities in deploying and capacity enhancing of clinical health workers	1. Multi-sector coordination including specify division's functionalities and responsibilities with other key stake holders 2. IEC for integrated messages (link with behavior change) 3. Institutional arrangement as best practice for WASH



## **6.8.2 Major Activities Accomplished**

### **The following activities were carried out in 2068/69**

- Budget for free essential medicine for district and below level health facilities was managed.
- Integrated public health campaigns were implemented in 28 districts.
- Community health units were established in 22 districts.
- Free specialist health camps were organized in 22 districts.
- ENT training for district and zonal level paramedics was organized.
- Evaluation of Equity Access Program and recommendations for multi-year contract.
- Number of 128 Urban Health Clinics were established.
- Number of Urban FCHVs increased to 4721.
- Basic training provided to 2240 Urban FCHVs.
- Monitoring of peer group discussion and review meetings for rational use of drugs was conducted.
- Revised, Drafted and finalized Standard Treatment Protocol for Health Posts and Sub-health posts.
- Revised list of free essential medicines and submitted for approval.
- Revised and institutionally reclassified the list of free essential medicines based on National List of Essential Medicines and submitted for approval.
- GESI orientation to district and zonal level staffs conducted.
- Comprehensive social audit guidelines developed
- Social audit conducted in 147 facilities in 21 districts.
- Strengthened and functionalized district coordination committees.
- Worked with HMIS to include urban health clinic contribution in routine MIS.
- File memo for multi-year contract for EAP (Equity and Access Programme) implementation partners submitted for approval.
- Reviewed social audit guidelines and social audit practices
- Reviewed and revised guideline for model healthy village programme.

### **6.8.3 Analysis of Achievement**

It is estimated that more than three fourth (76%) of people in Nepal utilized public health services in 2068/2069. Among the total morbidity cases (21,670,572), 81 percentage of population were found utilizing free health care services (Table 6.8.1). This information shows that remarkable chunk of people utilize the free health care services. Likewise, population utilizing free health services by OPD service is significantly higher than emergency, indoor and referral cases. Population utilizing free health services by OPD service is 98.26%. Among health facilities, the free health service provided by HP/SHP is 91.29% which is outstanding compared to free health services provided by PHCC and hospitals. The free health care service provided by PHCC and hospital is 4.67% and 2.92% respectively (Table 6.8.1).

**Table 6.8.1: Utilization status of free health care services, FY 2068/69**

SN	Indicators	Achievement (Number)	Achievement (Percentage)
1	Population utilizing free health services among total number of OPD morbidity (21670572)	17,577,802	81
2	Population utilizing free health OPD services	17,273,326	98.26
3	Population utilizing free health emergency services	121,124	0.69
4	Population utilizing free health indoor services	41,948	0.24
5	Referral cases among total number of utilizing free health services	141,404	0.81
6	Population utilizing free health services by health post/sub-health post	16,046,030	91.29
7	Population utilizing free health services by PHCC	888,664	4.67
8	Population utilizing free health services by hospitals	512,985	2.92

Source: HMIS

The free health care services provided to the target groups are as below:

The total OPD patients served by the hospitals were 406,082; emergency patients were 77,724; indoor patients were 31,519; and referral cases were 2659. Thus the total number of patients utilizing free health services was 512,985.

**Table 6.8.2: Hospital free health care service utilization status by targeted groups, FY 2068/69**

Service Target group	OPD	Emergency	Indoor	Refer	Total
Ultra-poor destitute	215,644	39,848	17,320	1,332	274,144
Poor	106,594	17,010	6,571	521	130,696
Disable	7,386	1,610	1,310	77	10,383
Senior citizen	66,399	13,044	5,522	682	85,647
FCHV	10,060	1,212	796	47	12,115
<b>Total</b>	<b>406,083</b>	<b>72,724</b>	<b>31,519</b>	<b>2,659</b>	<b>512,985</b>

Source: HMIS

Community Drug Program (CDP) was initiated in 2052/53. The program was functioning smoothly before launching of the free health care program. However, very few districts are now continuing the CDP activities in these days. Community Drug Program is on the reactivation process by PHCRD since last fiscal year 2068/69. There were 287 program implementing health facilities throughout the country having Rs. 292,648,059 bank balance (Table 6.8.3).

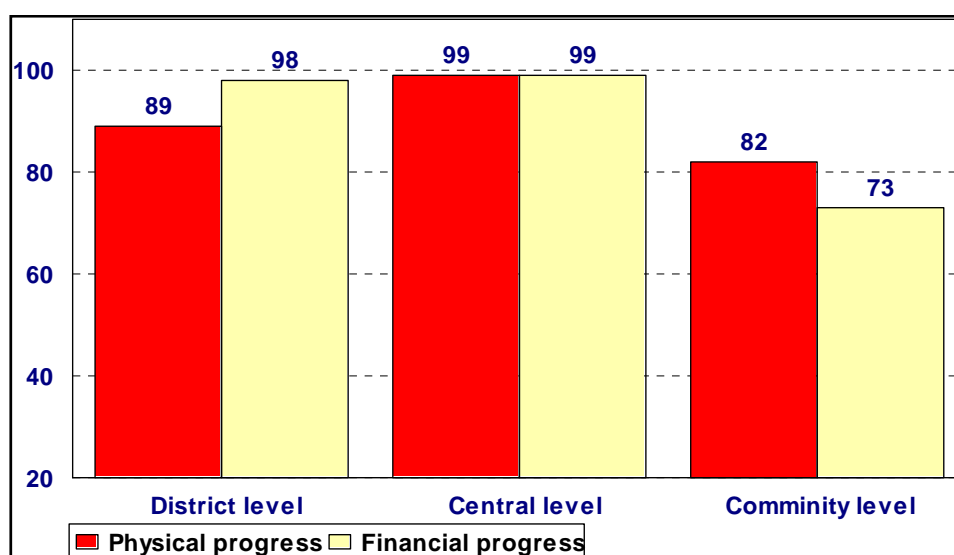
**Table 6.8.3: Community drug programme status, FY 2068/69**

S.N.	Particulars	Number
1	Districts reporting CDP activities	3
2	Health facilities conducting CDP activities	287
3	Total balance of CDP fund (Rs)	292,648,059

Source: HMIS

**Physical and Financial Progress**

Physical and financial progress of central level activities is equal i.e. 99 percent in 2068/2069 where as district level activities conducted with more financial expenditure. District level activities achieved 89 percent physical progress with 98 percent expenditure (Fig 6.8.1). On the other hand, community level activities were conducted with low budget. There was 82 percent achievement with 73 percent expenditure.

**Figure 6.8.1: Physical and financial progress, FY 2068/69****6.8.4 Issues and Recommendations**

Issues	Recommendation	Responsibility
Reduced budget for medicines in district level. Stock out of some free health medicines	Enough budget for medicines should be available in each district timely and consistently	PHCRD/LMD/ RHD/DoHS
Incomplete list of essential medicines.	Proposed list of revised medicines will be sent for approval	DOHS/MOHP
Communication mechanism between district (public) health office and Urban health clinics	Strengthening coordination mechanism between MoHP and MoLD	DoHS/MoHP / PHCRD
Poor coordination between D/PHO and Municipality	Urban Health policy submitted for approval. Link with HMIS to include urban clinic contribution.	MoHP/MoLD
Increased demand of Integrated Public Health Campaigns.	Number of Districts and budget to be increased in yearly basis.	PHCRD/MoHP/ DoHS
Regional monitoring budget for IPHC	Budget should be allocated	PHCRD
Multi-year contract for NGO implementing EAP	File memo for multi- year contract submitted for approval.	PHCRD/MoHP/ DoHS
Extension of social audit program Effectiveness of social audit programme	Number of districts and budget to be increased Technical support to be provided to respective districts	PHCRD/MoHP/ DoHS
Guideline of Model Healthy Village program	Review and update guideline	PHCRD/DoHS
Extension and continuation of peer group program for rational use of medicine	Peer group program to be continued and extended	PHCRD/DoHS

# MONITORING AND EVALUATION

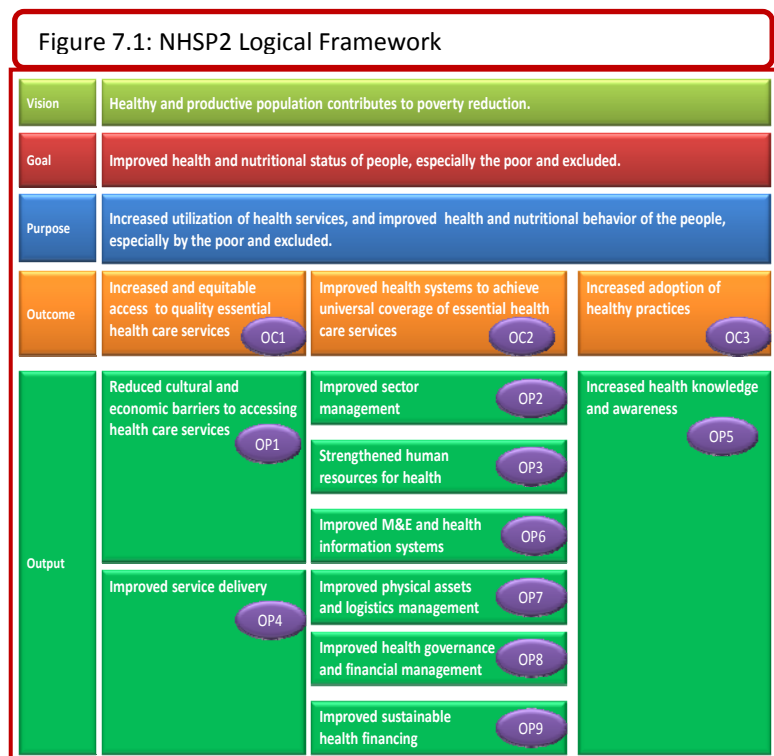
## 7.1 BACKGROUND

The Government of Nepal (GoN) introduced a National Health Policy (NHP) in 1991 which aimed to improve the health status of the population through increasing access to primary health care services. Following this, various sub-sector health policies, strategies and plans were developed and implemented within the health sector. The Health Sector Strategy: An Agenda for Reform was introduced in 2003, with the intention to move the health sector towards strategic planning and a Sector Wide Approach (SWAp). The first Nepal Health Sector Programme (NHSP-1), from 2004-2009, was the first health SWAp in Nepal.

Building on the foundations laid by the NHSP -1 and its success, the government formulated the second Nepal Health Sector Programme (NHSP-2), for 2010–2015. The NHSP-2 aims to improve the health and nutritional status of the Nepali population, especially the poor and excluded.

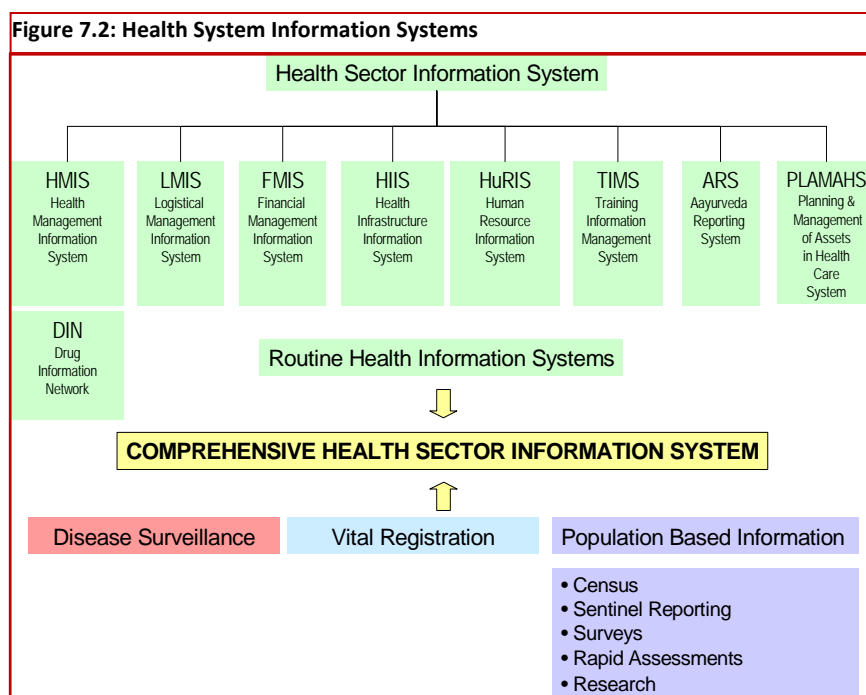
To monitor the NHSP-2, a results framework was developed in 2010. In 2010 MoHP developed a monitoring and evaluation framework which is a comprehensive document including the logical framework (LF), a breakdown of activities under each output, an indicator matrix, and details on disaggregation of indicators. The LF consists of 12 goal level indicators, 14 purpose level indicators, 19 outcome level indicators, and 45 input level indicators (Figure 7.1). Achievements against these indicators in 2011 and 2012 are presented in Section 9.8.

Health information systems are gaining importance in public health domain of developing countries and Nepal is not an exception. In Nepal a number of initiatives have been taken for establishing and strengthening information culture; institutionalization of demand driven supply of information; development and use of integrated health information systems; strengthening information use; and utilization of effective, efficient and robust technology.



## 7.2 Information Systems in Health Sector

Sources of health sector information in Nepal include Management Information Systems (MIS), disease surveillance, vital registration, census, sentinel reporting, surveys, rapid assessments, and research (Figure 7.2). There are nine different MIS located within the health sector that include the Health Management Information System (HMIS); Logistical Management Information System (LMIS); Financial Management Information System (FMIS); Health Infrastructure Information System (HIIS); Human Resource Information System (HuRIS); Training Information Management System (TIMS); Ayurveda Reporting System (ARS); and Drug Information Network (DIN). Despite strong realization of importance of integrating these information sources



there has not been a functional link between them yet. The Health Sector Information System (HSIS) National Strategy, 2005, proposes linking together the different MIS, except for DIN, using a uniform coding system. As the Department of Drug Administration (DDA) does not have offices in the districts, the DIN will continue with its current system at central level as an interlinked component of the national health information system.

These MISs are independent systems utilising different coding structures. However, it is proposed to link these systems (with the exception of the DIN) using a uniform coding system under the umbrella of an overarching Health Sector Information System (HSIS). HSIS will not replace the individual MIS; it will provide a platform from which information from all these systems can be linked, accessed and distributed.

Of the eight MIS already established within the health sector, HuRIS is located within the Human Resource and Financial Management Division in the MoHP; DIN in the Department of Drugs; and ARS in the Department of Ayurveda. Three are located within the Department of Health Services (DoHS): HMIS within the Management Information System (MIS) Section in the Management Division; HIIS within the Building Construction Maintenance Unit in the Management Division; LMIS within the Logistic Management Division. Likewise, TIMS lies within the National Health Training Centre (NHTC). The section below presents each routine information systems in brief.

### Health Management Information System

Integrated Health Management Information System (HMIS) was designed and implemented in entire country since 1994. The current HMIS manages information on all health services mainly delivered

through government's health facilities, and partially from non-government health facilities. However, some programs still continue to obtain parallel reports directly from districts. Though the upward reporting from community level to center is on monthly basis, providing feedback from any level on monthly or quarterly basis is not institutionalized. MIS Section in Management Division, DoHS generates statistical tables with raw and analyzed data in every three months and produces performance review report every year.

With the inception of Health Sector Information System National Strategy, (HSIS-NS) in 2005, HSIS was 'piloted' in three districts namely Rupandehi, Lalitpur and Parsa. The piloting collected information from different systems in the same tools, rather than keeping systems separate but linked. This resulted in HMIS in 72 districts and HSIS in 3 districts. This is continued till date.

Building on the recommendations of regular reviews at different levels; recommendations by mismatch assessment, IT review, review of HSIS pilot in three districts; the need of monitoring NHSP2 logical framework indicators and addressing the needs of programs, MIS Section, Management Division, DoHS, with the leadership of Public Health Administration Monitoring and Evaluation Division and Policy Planning and International Cooperation Division in the Ministry of Health and Population, is undertaking an overhaul of HMIS. This overhaul of HMIS aims to achieve the following:

- Address the needs of NHSP-2, HSIS & programs
- Generate data disaggregated by caste/ethnicity for selected indicators
- Provide facility and VDC level data
- Include all facilities - public and non-public
- Enable electronic data entry at district level and web-based reporting
- Integrate vertical systems (Aama Program, EOC monitoring, nutrition, HIV/AIDS and TB programs) into HMIS
- Improve hospital recording and reporting to generate institutional mortality and morbidity data by age, sex and cause
- Improve data quality through user-friendly recording and reporting tools, minimize the burden on staff and reduce duplication of work
- Strengthen HMIS across all 75 districts

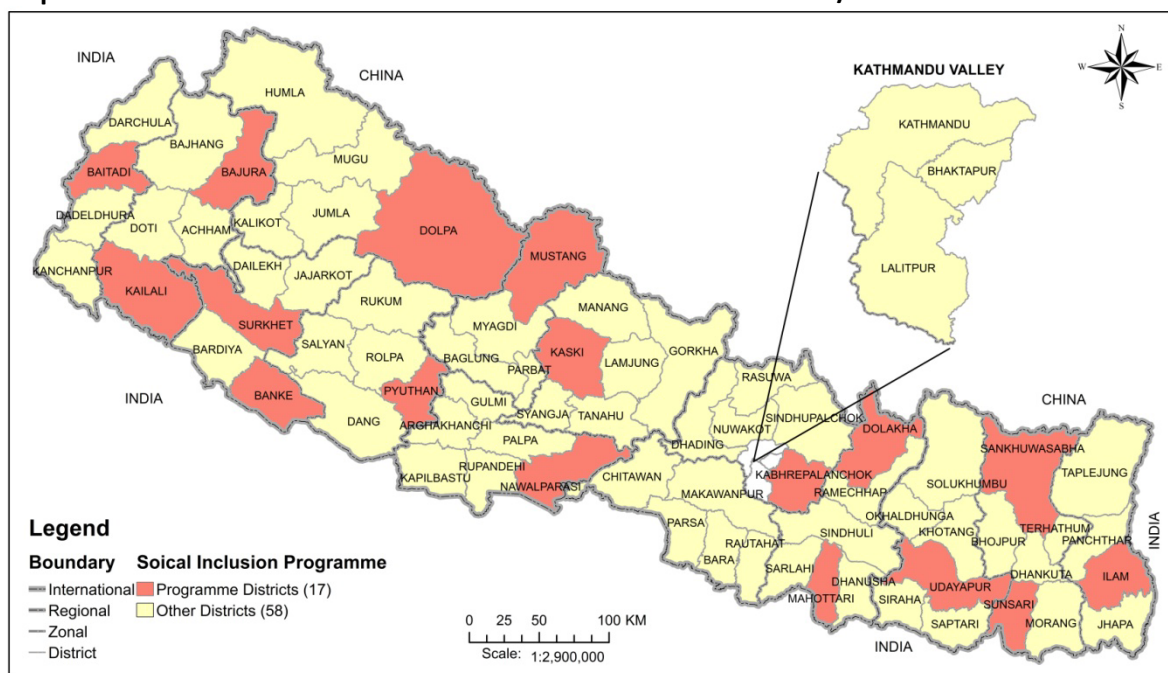
The data included in the revised tools are urgently needed as this enables NHSP-2 to be effectively monitored for two years (2013/14 and 2014/15) and generates disaggregated data to help with planning of NHSP-3.

### **7.3 Monitoring of Social Inclusion**

Monitoring of social inclusion data was piloted in 10 districts in fiscal year 2066/67 with support from UNICEF. The piloting included recording, compilation and analysis of 19 indicators by caste/ethnicity. Piloting suffered as reporting compliance was not high with some districts not sending reports, and those collected from some other districts were not complete; there was no system of review or feedback from the central level to the districts; and there was no formal mechanism to review the pilot.

In 2068/69 this was strengthened and expanded to 17 districts with the government funding. Map 9.1 shows the districts where social inclusion data monitoring is practiced. Now the data has been analyzed and there is a plan to scale up this at the national level along with scaling up of the revised HMIS.

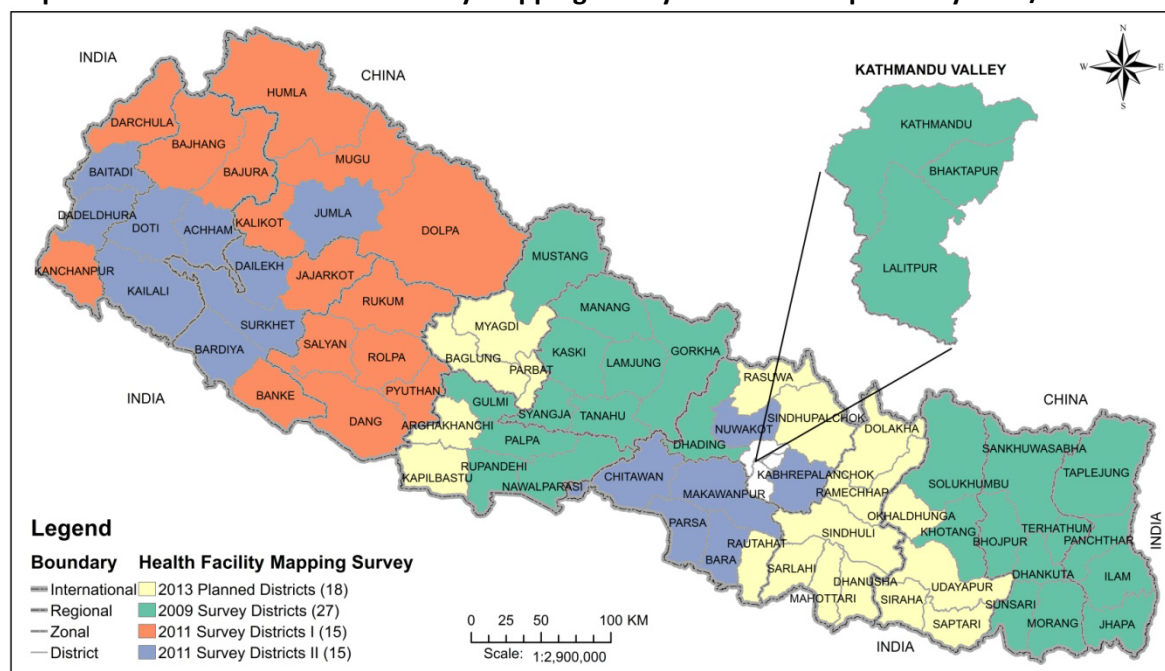
**Map 7.1: Districts where social inclusion data was monitored in 2068/69**



#### 7.4 Health Facility Mapping Survey

A Geographical Information System (GIS) based mapping of health facilities and health service availability was initiated in 2009. The health facility mapping survey has been completed in 57 districts in 2068/69. The mapping includes spatial location of health facilities along with availability of health services, disaster preparedness situation, water and power supply, and health work force situation.

The mapping includes both state and non-state health institutions in the districts. The mapping exercise makes use of three tools a) Hospitals and other public health facilities, b) Primary Health Care Centre, c) Health Posts/Sub Health Posts. Central HMIS and the regional statistical personnel were trained on tools, technology and methodology of the survey. District statistical and computer personnel were trained to collect the necessary data from health facilities.

**Map 7.2: Districts where health facility mapping survey has been completed by 2068/69**

This survey helps in preparation of a sound base for spatial-enabled analysis in the ArcGIS environment. It is planned to scale up in the remaining 18 districts to cover the whole nation. The potential to expand this to cover all EHCS and outcomes could be reviewed.

## 7.5 Mismatch Assessment

The Health Management Information System (HMIS) is one of nine management information systems (MIS) in the Ministry of Health and Population. Despite having data quality controls in place, there are frequent concerns about data quality, including inconsistencies with data reported from other sources and within HMIS. MIS Section, Management Division, DoHS and Nepal Health Sector Support Program (NHSSP) jointly did the mismatch assessment in 2011/12. It aimed to gain a better understanding of why these differences are occurring and to recommend appropriate measures to mitigate them.

This assessment explored the mismatch in data reported by HMIS and other systems (looking at both national and district level comparisons) and the inconsistencies in data reported within HMIS. It is commonly thought that data reported by HMIS and other systems are duplicated at the outset in parallel collection processes. In fact, for all variables duplicated at the reporting stage all systems utilize the data from the HMIS recording tools. However, from this stage onwards parallel systems are in operation in regards to reporting, data entry, verification etc. and provide multiple opportunities for differences to occur in the data. Given the source of all the data is the HMIS tools, inconsistencies arise therefore arise due to a number of factors that occur after this initial data recording stage. The main reasons for differences in data have been categorized as direct i.e. as a result of the data collection, reporting and verification processes and indirect i.e. broader systemic issues, as many of the barriers are far reaching and beyond the control of the MIS Section. In summary these are:

### Direct Reasons

- *Inclusion of facilities:* There is no accurate list of all public and non-public facilities (i.e. those who should report to HMIS) and their reporting status available at the district or national level. This



makes it difficult to track which facilities should report and whether they are reporting complete data on a timely basis.

- *Different reporting periods:* The design of different systems is frequently not complementary to HMIS or each other. Reporting periods vary between systems: some use the fiscal year and others the calendar year, some require monthly reporting and others quarterly, some use the Nepali calendar others use the Julian calendar. As well as creating inconsistencies in the data reported it also places additional demands on health workers.
- *Data collection and submission controls and processes:* The system dictates that data are reported upwards through different levels, however, this is frequently not adhered to resulting in differences in data held at the various levels. There is limited feedback or accountability on the quality or timing of data reporting. This leads to delays and omissions in the submission of data and limits the extent to which problems can be identified and lessons can be learnt.

### Indirect Factors

- *Data management:* Data management is not considered to be an integrated part of service delivery and is often undervalued so receives less attention. Even within the HMIS guidelines data management is not comprehensively covered.
- *Human resources:* Recruitment and retention of competent data management, information technology (IT) and monitoring and evaluation (M&E) staff is extremely challenging.
- *Data collection tools:* HMIS tools tend to be user-friendly, however, some programs feel that the content does not adequately reflect current data requirements. Tools are often reviewed on an ad-hoc basis, or in response to just one particular program's demands. There are also concerns regarding the timely distribution of tools, printing quality, paper quality binding and size of tools. Furthermore, most districts and facilities do not have adequate infrastructure in place for data management, with inadequate computers, filing systems and storage facilities.
- *Information technology:* There is a lack of strategic guidance for information technology (IT) related issues, so Divisions and Centers use different IT systems that are not compatible with each other.

The key recommendations made by the assessment for improving timely and accurate data reporting are:

- *A facility-level database* that is accessible, accurate and updated on a regular basis, and indicates which facilities should report to the different systems and the reporting status of each facility. This should be accessible at the district and central levels and should enable greater accountability.
- *Feedback mechanisms* need to be in place so that facilities have processed data returned to them and have a better understanding of how data is used. This will help them to better understand the benefit of providing accurate and timely data. Good performers need to be acknowledged and likewise poor performers identified and action taken.
- *Comprehensive HMIS guidelines* need to be developed, distributed and implemented by all those involved in data management activities at all levels. These guidelines should include data validation and verification, staff roles and responsibilities, and the amount of time required for data management responsibilities, and clear systems for supervision.
- *The Design of HMIS* should satisfy the needs of other programs for timely and accurate HMIS data. This would remove dual systems of verification and corrections, and also reduce the burden on staff required to check the data.
- *A systematic and timely review of the tools and indicators* is required to accommodate the monitoring needs of the different programs.

- *A uniform coding system* needs to be developed and utilised by all systems to enable linkages to be made.

## 7.6 Rapid Assessment of IT Systems

MIS Section, Management Division, DoHS with support from Nepal Health Sector Support Program (NHSSP) did a rapid assessment of existing IT systems in HMIS and HSIS pilot districts. The objectives of the assessment were to review the existing situation and provide recommendations for improvement, both short-term fixes and longer-term measures that complement the development of HSIS.

The key recommendations made by the assessment include:

- Revise HMIS indicators, tools and database application
- Use a phased approach towards developing an integrated information system in line with the HSIS vision
- Use increasingly sophisticated methods for integrating data from multiple systems and a target technical architecture for the overarching system
- Define and implement uniform coding system enabling the integration of data from multiple sources
- Eventual computerization of data recording tools at health facilities
- Technical recommendations:
  - Use of Open Source Software – don't build what's already available
  - Ensure better software quality through user testing
  - Use of ETL software tools for data integration
  - Virtualization to enhance backup, disaster recovery, software deployment and support
  - Formal software development process
  - Technical guiding principles

The report also proposes an implementation plan.

## 7.7 Country Accountability Roadmap Following COIA

The Global Strategy for Women's and Children's Health was launched in September 2010 for improving the health of Women and Children. Following this, a Commission on Information and Accountability for Women's and Children's Health was created to determine the most effective international institutional arrangements for ensuring global reporting, oversight and accountability on women's and children's health, which proposed a framework for global reporting, oversight and accountability on women's and children's health. Through ten recommendations presented in its report *Keeping Promises, Measuring Results*, the Commission has created a system to track whether donations for women's and children's health are made on time, resources are spent wisely and transparently, and whether the desired results are achieved.

The accountability framework also places accountability at the country level with the active engagement of national governments, parliaments, communities and civil society. It defines accountability as a cyclical process of monitoring, review, and remedy/action.

Nepal, in line with the COIA recommendations has made progress in Women and Children's health and is ready to take initiatives at the country level for further strengthening the achievements made so far in regards to women and children health.

Ministry of Health and Population have finalized the roadmap following a National workshop to develop country roadmaps to translate the recommendations of the Commission on Information and Accountability for Women's and Children's Health (COIA). The workshop was from 30 October 2012 – 01 November 2012, Kathmandu, Nepal with support from WHO. The main objective was to develop a country roadmap to strengthen accountability for 2012-2015 by assessing of the current situation on the implementation of accountability framework.

Participants worked in groups to further refine the work, including costing of the priority actions for the following areas:

- Strengthening Civil Registration and Vital Statistics
- Strengthening innovation through the use of ICT
- Resource tracking and national health accounts
- Maternal Death Surveillance and Response (MDSR) and Quality of Care Assessments
- Quality of Care: Maternal and Child Health
- Strengthening Monitoring of Results
- National Review and Accountability Mechanisms
- Advocacy and Outreach

MoHP and partners are working together for expediting the implementation of the roadmap.

### **7.8 Surveys**

There is increasing demand for nationally-representative information on health indicators to aid the design and monitoring of national health programmes. The Nepal Demographic Health Survey (NDHS) is conducted every five years, and routine health information systems, such as the Health Management Information System (HMIS), are operational; however, these do not currently meet all the data requirements for assessing the impact of NHSP-2. Hence, within NHSP-2, a Service Tracking Survey (STS) is planned every year and a household survey (HHS) is planned for every two years to meet the additional needs.

#### **Service Tracking Surveys**

Ministry of Health and Population (MoHP) with the support from Nepal Health Sector Support Programme (NHSSP) conducted first service tracking survey in 2011 and the second in 2012. The 2011 STS report has already been disseminated and the STS 2012 report is in the process of finalization.

The two service tracking surveys monitor the following:

- implementation of the Aama and free care programmes,
- financial management capacity of health facilities (including a detailed accounting of the flow of services and finance),
- quality of care, including client experience,
- indicators in the NHSP-2 logical framework, and
- governance and gender equality and social inclusion (GESI)

For detailed information on STS 2011, visit [www.nhssp.org.np](http://www.nhssp.org.np).

### Household Survey

MoHP with support from NHSSP has recently completed Household Survey 2012 and the report is in the process of finalization. The main aim of the HHS 2012 was to monitor the implementation of key health care programs under NHSP-2, peoples' perspectives, and utilisation of health care. The key objectives of the household survey 2012 were to monitor:

- Selected indicators in NHSP2 LF
- Implementation of the Aama program including awareness, receipt of incentives, trends in utilization of delivery care services in public health facilities, and impact of the Aama program
- Implementation of free care including knowledge; factors affecting health-seeking behaviour and demand and supply side barriers faced in accessing and utilizing services; impact of free health care, with focus on out-of-pocket payments; trends in utilization of services; and client experience and perception on quality of care
- Household expenditure on health
- Knowledge, perception, and participation relating to health service governance (e.g. social audits, health facility operation and management committees), citizen's charter, complaints and redress systems)
- Social norms, social practices, and decision making that affect access to and utilization of services

### Nepal Demographic and Health Survey 2011

Nepal Demographic and Health Survey (NDHS) 2011 was the fourth nationally representative survey conducted as a part of the worldwide Demographic and Health Surveys in the country. The primary objective of 2011 NDHS was to provide up-to-date and reliable data on different issues related to population and health, which provides guidance in planning, implementing, monitoring, and evaluating health programs in Nepal. The survey includes information on fertility levels and determinants, family planning, fertility preferences, childhood mortality, children and women's nutritional status, the utilization of maternal and child health services, knowledge of HIV/AIDS and STIs, women's empowerment and for the first time, information on women facing different types of domestic violence. The survey also reports on the anemia status of women age 15-49 years and children age 6-59 months.

In addition to providing national estimates, the survey report also provides disaggregated data at the level of various domains such as ecological region, development regions and for urban and rural areas. This being the fourth survey of its kind, there is considerable trend information on the areas it covers over the past 15 years. Moreover, the 2011 NDHS is comparable to similar surveys conducted in other countries and therefore, affords an international comparison. Key findings of the survey have already been disseminated at annual national and regional reviews. The final report and additional information on NDHS 2011 can be obtained from Population Division, Ministry of Health and Population.

### 7.9 Monitoring NHSP2 Log Frame Indicators

This section presents the progress for the NHSP2 logical framework indicators in the year 2011 and 2012 against the targets for 2013 and 2015. Achievements in 2011 have been compared against the target 2011 and the achievements in 2012 are compared against the target 2013.

The sources of information are basically from the Joint Annual Review (JAR 2013), which has drawn from the Household Survey 2012, the Service Tracking Survey 2012, the Health Management

## Monitoring and Evaluation

Information System (HMIS) 2011/12 and information from relevant sections and divisions of Department of Health Services (DoHS) and Ministry of Health and Population (MoHP).

To illustrate progress, indicators where the targets for 2011 and 2013 have already been met are shaded in green, while indicators achieving at least 90% of the target are shaded in amber, and those where less than 90% of the target has been met are shaded in red.

### Key for shading in Tables

Year 2012	Colour
Achieved 100% progress against the target <sup>1</sup>	
Achieved at least 90% progress against the target <sup>1</sup>	
Did not achieve at least 90% progress against the target	
Data not available	
No target	

Note: <sup>1</sup>Achieved data of 2011 is compared with 2011 target whereas achieved data of 2012 data is compared with 2013 target

### Goal: Improved health and nutritional status of people, especially the poor and excluded

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
G1	Total Fertility Rate (per woman)	2.6	NDHS			3	2.8	2.5
G2	Adolescent Fertility Rate (women aged 15-19 years, per 1,000 women in that age group)	81	NDHS			-	85	70
G3	Under-five Mortality Rate (per 1,000 live birth)	54	NDHS			55	47	38
G4	Infant Mortality Rate (per 1,000 live births)	46	NDHS			44	38	32
G5	Neonatal Mortality Rate (per 1,000 live births)	33	NDHS			30	23	16
G6	Maternal Mortality Ratio (per 100,000 live births)	170 (2010)	WHO			250	192	134
G7	HIV prevalence among men and women aged 15-24 years (per 100,000 population)					0.1	0.08	0.06
G8	Malaria annual parasite incidence rate (per 1000 population in one year)	0.16	HMIS	0.11	HMIS	halt & reverse		
G9	% of children under five years of age who are stunted	40.5	NDHS			40	35	28
G10	% of children under five years of age who are underweight	28.8	NDHS			39	34	29
G11	% of children under five years of age who are wasted	10.9	NDHS			10	7	5
G11	% of low birth weight babies	12.4	NDHS			-	13	12

### Purpose: Increased utilisation of health services, and improved health and nutritional behaviour of the people, especially by the poor and excluded

LF Code	Indicator	Achieved 2011		Achieved 2012		Target			Remarks
		Data	Source	Data	Source	2011	2013	2015	
P1	% of infants breast fed within one hour of birth	44.5	NDHS	50.9	HHS	-	55	60	
P2	% of infants exclusively breast fed for 0 – 5 months	69.6	NDHS	68.7	HHS	35	48	60	
P3	% of one-year-old children immunised against measles	88	NDHS	86	HMIS	88	90	90	
P4	% of children aged 6-59 months who have received vitamin A supplements	90.4	NDHS	90.2	HHS	≥90			
P5	% of children aged 6 -59 months suffering from anaemia	46.2	NDHS			45	44	43	
P6	% of households using adequately iodised salt	80	NDHS			80	84	88	
P7	Contraceptive Prevalence Rate - modern methods (%)	43.2	NDHS	43.1	HHS	48	52	67	MWRA
P8	% of pregnant women attending at least four ANC visits	50.1	NDHS	48.1	HHS	45	65	80	
P9	% of pregnant women receiving IFA tablets or syrup during their last pregnancy	79.5	NDHS	91.1	HHS	82	86	90	2012: ANC attendants
P10	% of deliveries conducted by a skilled birth attendant	36	NDHS	46.3	HHS	-	40	60	
P11	% of women who had three postnatal check-ups as per protocol (1st within 24 hours of delivery, 2nd within 72 hours of delivery and 3rd within 7 days of delivery, as % of expected live births)	35.8	HMIS	31.4	HMIS	-	43	50	Data does not reflect PNC protocol

## Monitoring and Evaluation

LF Code	Indicator	Achieved 2011		Achieved 2012		Target			Remarks
		Data	Source	Data	Source	2011	2013	2015	
P12	% of women of reproductive age (15-49) with complications from safe abortions (surgical and medical)	49 <sup>2</sup>	NDHS	1.2	HMIS	<2			
P13	Prevalence rate of leprosy (%)	0.79	HMIS	0.85	HMIS	halt & reverse			
P14	Obstetric direct case fatality rate	0.17	HMIS		HMIS	<1			

Note: <sup>2</sup>The abortion complications are for all abortions (miscarriage and induced abortion) as complications from safe abortion are not available for NDHS 2011

### Outcome 1: Increased and equitable access to quality essential health care services

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
OC1.1	% of population living within 30 minutes travel time to a health or sub-health post	61.8	NLSS	47.2	HHS	60	70	80
OC1.2	% population utilising outpatient services at SHP, HP, PHCC and district hospitals	70.4	HMIS	76.1	HMIS	Proportion to population size		
OC1.3	% population utilising inpatient services at district hospitals (all levels of hospitals)	9.1	HMIS	9.5	HMIS	Proportion to population size		
OC1.4	% population utilising emergency services at district hospitals (all levels of hospitals)	2.4	HMIS	2.7	HMIS	Proportion to population size		
OC1.5	Met need for emergency obstetric care (%)	23	HMIS	15.9	HMIS	-	43	49
OC1.6	% of deliveries by caesarean section	4.6	NDHS	4.9	HHS	4	4.3	4.5
OC1.7	Tuberculosis treatment success rates (%)	90	HMIS	90	HMIS	90	90	90
OC1.8	% of eligible adults and children currently receiving antiretroviral therapy		ART monitoring		ART monitoring	24	55	80

### Outcome 2: Improved health systems to achieve universal coverage of essential health care services

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
OC2.1	% of children under 5 with diarrhoea treated with Zinc and ORS	5.2	NDHS	21.9	HHS	7	25	40
OC2.2	% of children, under 5 with pneumonia, who received antibiotics	35.1	NDHS	36	HHS	30	40	50
OC2.3	Unmet need for family planning (%)	27	NDHS				20	18
OC2.4	% of institutional deliveries	35.3	NDHS	43.5	HHS	27	35	40
OC2.5	% of women who received contraceptives after safe abortion (surgical and medical)	41	HMIS	33	HMIS	55	60	60
OC2.6	% of clients satisfied with their health care provider at public facilities	96	STS	91	STS	68	74	80
OC2.7	Tuberculosis case detection rate	73	HMIS	73	HMIS	75	80	85

### Outcome 3: Increased adoption of healthy practices

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
OC3.1	% of children under 5 years who slept under a long lasting insecticide treated bed net the previous night in high-risk areas	67.8	PSI			75	80	80
OC3.2	% of key populations at higher risk (sex workers, men who have sex with men, people who inject drugs, male labour migrants) reporting the use of condom at last sex							
	Female Sex workers (FSWs)	82.6	IBBS			82.6	-	85
	Male sex workers (MSWs)					-	-	80
	Men who have sex with men (MSM)					-	75	80
	People who inject drugs (PWIDs)	46.5				46.5	60	80
Male labour migrants (MLM) to India						-	65	80
OC3.3	% of people who inject drugs reporting the use of sterile injecting equipment the last time they injected	95.3	IBBS			≥95		
OC3.4	% of households with hand washing facilities with soap and water nearby <sup>^</sup> the latrine	47.8	NDHS	19.7	HHS	-	65	85

**Output 1: Reduced cultural and economic barriers to accessing health care service**

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
OP1.1	% of women utilising the FCHV fund (among women of reproductive age)	5	HMIS	0.5	HMIS	-	8	10
OP1.2	Number of health facilities providing adolescent-friendly health services	78	FHD	455	FHD	-	500	1000
OP1.3	% of HFMOCH/HDMC with at least three female members and at least two Janajati and Dalit members	42	STS	41	STS	-	70	100

**Output 2: Improved sector management**

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2012	2013	2015
OP2.1	% EDPs providing Official Development Assistance (ODA) on a rolling 3-year period basis				PPICD	-	50	90
OP2.2	% of health sector aid reported by the EDPs on national health sector budgets				MoF	-	50	85
OP2.3	% of actions documented in the action plan of the aide-memoire completed by the next year				JAR	-	100	100
OP2.4	% of EDPs reporting to JAR their contribution to the health sector (including expenditure) aligned to the agreed annual reporting format for EDPs as developed by MoHP				JAR	-	100	100

**Output 3: Strengthened human resources for health**

Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2012	2013	2015
OP3.1.1	% of sanctioned posts that are filled - doctors at PHCCs	50	STS	19	STS	85	88	90
OP3.1.2	% of sanctioned posts that are filled - doctors at district hospitals	69	STS	56	STS	85	88	90
OP3.1.3	% of sanctioned posts that are filled - nurses at PHCCs	74	STS	59	STS	85	88	90
OP3.1.4	% of sanctioned posts that are filled - nurses at district hospitals	83	STS	83	STS	85	88	90
OP3.2	% of district hospitals that have at least 1 MDGP or Obstetrician/Gynaecologist; 5 nurses (SBA); and 1 Anaesthetist or Anaesthetist Assistant	13	STS	0	STS	-	60	80
OP3.3	Number of production and deployment of:							
	Skilled birth attendants (SBA)	2562	FHD	3637		4,000	6,000	7,000
	Medical doctors general practice (MDGPs)				HURIS, FHD		28	56
	Anaesthetists					22	44	
	Psychiatrists					28	56	
	Radiologists					27	55	
	Physiotherapists					10	20	
	Physiotherapy assistants					35	70	
	Radiographers					50	100	
	Assistant anaesthetists					31	62	
	Procurement specialists					3	7	
	Health legislation experts					1	3	
	Epidemiologists					3	7	
	Health economists					3	7	
	Health governance experts					1	3	
OP3.4	Number of Female Community Health Volunteers (FCHVs)	48,680	HMIS	48,897		HMIS	50,000	52,000

**Output 4: Improved service delivery**

LF Code	Indicator	Achieved 2011		Achieved 2012		Target			
		Data	Source	Data	Source	2011	2013	2015	
OP4.1	Number of one stop crisis centres to support victims of gender based violence	6	Pop. Div.	8	Pop. Div.	5	10	20	
OP4.2	Number of HPs per 5,000 population	0.12	HMIS	0.8	HMIS	-	0.5	1	
OP4.3	Number of PHCCs per 50,000 population	0.37	HMIS	0.35	HMIS	-	0.7	1	
OP4.4	Number of district hospital beds per 5,000 population	1.06	HMIS	0.8	HMIS	-	0.6	1	
OP4.5	% of districts with at least one public facility providing all CEONC signal functions	39	STS	62	STS	-	68	76	
OP4.6	% of PHCCs providing all BEONC signal functions	14	STS	39	STS	-	50	70	
OP4.7	% of health posts with birthing centre	79	STS	93	STS	≥80			
OP4.8	% of safe abortion (surgical and medical) sites with post abortion long acting family planning services	91	STS	90	STS	≥90			
OP4.9	% of health posts with at least five family planning methods	13	STS	8	STS	-	35	60	
OP4.10	% of households with at least 1 long lasting insecticide treated bed net per 2 residents in all high-risk areas				Malaria Survey	≥90			
OP4.11	% of key populations at higher risk (people who inject drugs, sex workers, men who have sex with men, male labour migrants) reached with HIV prevention programmes								
	People who inject drugs (PWIDs)	71.4	IBBS			71.4	75	80	
	Female sex workers (FSWs)	60				60	-	80	
	Male sex workers (MSWs)							93	95
	Men who have sex with men (MSM)						-	80	80
Male labour migrants (to India, MLM)							50	80	
OP4.12	% of PHCCs with functional laboratory facilities	97.6	HFM S			90	95	100	
OP4.13	% of public hospitals, PHCCs, and HPs that have infrastructure as per GoN standard				STS	50	65	80	
	Hospital			63					
	Primary health care center			69					
	Health post			37					

**Output 5: Increased health knowledge and awareness**

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
OP5.1	% of women of reproductive age (15 – 49) aware of safe abortion sites	58.8	NDHS	34.3	HHS	-	35	50
OP5.2	% of women of reproductive age (15 – 49) who know at least three pregnancy related danger signs			56.9	HHS	-	40	50
OP5.3	% of women of reproductive age (15 – 49) giving birth in the last two years aware of at least three danger signs of newborns			48.3	HHS	-	40	50
OP5.4	% of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS by sex		NDHS					
	Male	33.9				33.9	40	50
	Female	25.8				25.8	25.8	40

**Output 6: Improved M&E and health information systems**

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
OP6.1	% timely and complete data on annually reportable M&E framework indicators reported by the end of December of the following year				PHAMED	-	100	100
OP6.2	% of health information systems implementing (using) uniform standard codes	0	HMIS	0		-	100	100
OP6.3	% of tertiary and secondary hospitals (public and private) implementing ICD 10 and reporting codes information to the health information system	65 (Public)	HMIS	100	HMIS	-	75	100
OP6.4	% of health facilities ( public and private) reporting to the national health information system (by type or level)	-		100	HMIS	-	80	100



**Output 7: Improved physical assets and logistics management**

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
OP7.1	% of public health facilities with no stock outs of the listed free essential drugs in all four quarters	79.2	LMIS		LMIS	70	80	90
OP7.2	% of the budget allocated for operation and maintenance of the physical facilities and medical equipment		AWP B		AWPB	at least 2		

**Output 8: Improved health governance and financial management**

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
OP8.1	% of health facilities that have undertaken social audits as per MoHP guidelines in the last fiscal year	31	STS	21	STS	5	15	25
OP8.2	% of MoHP budget spent annually	76.3	FMIS	79.7	AWPB	83	84.5	86
OP8.3	% of budget allocated to district and below facilities (including flexible health grants)	59.5	AWPB	59.4	AWPB	60	65	70
OP8.4	% of irregularities ( <i>Beruju</i> ) among the total public expenditures	6.2			AWPB	6	5	4
OP8.5	% of district health offices receiving budgeted amount within one month of budget disbursement from MoHP/DoHS with clear-cut guidance for expenditure	100	DoHS/MoHP	100	AWPB	–	100	100

**Output 9: Improved sustainable health financing**

LF Code	Indicator	Achieved 2011		Achieved 2012		Target		
		Data	Source	Data	Source	2011	2013	2015
OP9.1	% of MoHP budget allocated to EHCS	76.8	AWPB	75.0	AWPB	75	75	75
OP9.2	% of health sector budget as % of total national budget	7.1	MoF	6.05	AWPB	7.5	8.5	10
OP9.3	% of government allocation (share) in total MoHP budget	39.2	MoF	60.3	AWPB	60	65	70

# Other Departments

8.1	Drug Administration.....	242
8.2	Ayurveda .....	245
8.3	Homoeopathic .....	251

## 8.1 DEPARTMENT OF DRUG ADMINISTRATION

### 8.1.1 BACKGROUND

Government of Nepal has promulgated the Drug Act 1978, to prohibit the misuse or abuse of medicines and allied pharmaceutical materials as well as the false or misleading information relating to efficacy and use of medicines and to regulate and control the production, marketing, distribution, export-import, storage and utilization of those medicines which are not safe for the use of the people, efficacious and of standard quality.

To implement and fulfill the aim of Drug Act 1978 and various regulations under it Government of Nepal established Department of Drug Administration (DDA) in 1979.

In accordance with the objectives of the National Health Policy 1991, the National Drug Policy 1995 has been formulated and implemented. It focuses on establishing co-ordination among government, non-government and private organizations involved in the activities related to medicine production, import, export, storage, supply, sales, distribution, quality assessment, regulatory control, rational use and information flow. Achieving the aims and objectives of National Drug Policy is another important area for DDA.

Under the Drug Act 1978, the following regulations and codes have been implemented as supporting tools for the active enforcement of Drug Act.

1. Regulation on Constitution of Drug Consultative Council and Drug Advisory Committee, (2037 BS).
2. Drug Registration Regulation, (2038 BS).
3. Drug Standard Regulation (2043 BS).
4. Enquiry and Inspection Regulation (2040 BS).
5. Codes on Drug Production (2041 BS).

Drug Donation guidelines have been implemented for the quality assurance of donated medicines.

#### OBJECTIVES

The main objective of DDA is to regulate all functions relating modern, veterinary and traditional medicines, like misuse and abuse of medicines and its raw materials, to stop false and misleading advertisement and make available safe, efficacious and quality medicine to the general public by controlling the production, marketing, distribution, sale, export-import, storage and use of medicines.

#### STRATEGIES

- Selection of essential medicine to promote rational use of medicines.
- Establishment of regional offices at all five regions for effective decentralization.

## DEPARTMENT OF DRUG ADMINISTRATION

---

- Strengthening of National Medicines Laboratory (NML) as an Independent Medicine Control Laboratory.
- Medicine registration based on scientific facts.
- Promotion of rational use of medicines.
- Development of an efficient drug information system to disseminate the relevant information.
- Encouragement to promote and establish pharmaceutical industries to achieve self-reliance in the production of essential medicines.
- Effective inspection to ensure the quality of marketed medicines.
- Prevent misuse of antibiotic to combat antimicrobial resistance.
- Strengthen national industry to comply with WHO-Good Manufacturing Practices (GMP)

### 8.1.2 Organizational Structure of DDA

#### Import and Export Section

- To register the foreign drug manufacturing company and products in a scientific manner for import.
- To issue the recommendation letter for import/export of medicines
- To renew the recommendation letter for import-export.

#### Industry Section

- To issue recommendation letter for the establishment of pharmaceutical industry and issue Product Manufacturing License and renew them.
- Check and approve the pharmaceutical manufacturing plant layout.
- Evaluate the new products and issue marketing permission for the sale and distribution.
- Issue letter of recommendation for the import of raw materials and renew them.

#### Pharmacy Registration Section

- To register and issue registration certificates to open retail/wholesale pharmacy outlets and renew them.
- Issue and renew certificates for persons authorized to sale medicines.
- Update the record of pharmacies

#### Training and Drug Information Section

- Conduct the refresher training to medicine sellers.
- Disseminate information about medicines particularly side-effects, contraindication, drug interaction, and storage condition and other necessary information regarding medicines.
- Publish Drug Bulletin of Nepal (DBN) and distribute to health institutions, industries, medical doctors, health personnel's, pharmacists and others concerned person and institutions.
- Revise National List of Essential Medicines, Standard Treatment Schedules and Nepalese National Formulary periodically.
- Recommend for import of narcotic, psychotropic, precursors substances and liaise with International Narcotic Control Board.
- Conduct activities related to Pharmacovigilance and Adverse Drug Monitoring Reporting.

**Inspection Section**

- Inspect drug industries, wholesale and retail pharmacies regularly.
- Take legal and administrative action on cases of non-compliance as per the provision of Drug Act and its Regulations.
- Regulate sales and distribution of psychotropic and narcotic drugs.
- Co-ordinate Good Manufacturing Practice Audit within and outside the country.

**Branch Offices**

DDA has its branch offices at Biratnagar, Birgunj and Nepalgunj. These offices carry out the responsibility of inspection as well as Pharmacy registration and renewal.

Biratnagar Office	Birgunj Office	Nepalgunj Office
Kanchanbari, Biratnagar, Morang District <a href="mailto:biratnagar@dda.gov.np">biratnagar@dda.gov.np</a> Tel/fax: 021-420849	Murali Bagaicha, Birgunj Parsa District <a href="mailto:birgunj@dda.gov.np">birgunj@dda.gov.np</a> Tel/Fax :051-527753	Adarshanagar, Surkhet Road, Banke District, <a href="mailto:nepalgunj@dda.gov.np">nepalgunj@dda.gov.np</a> Tel/Fax 082-522074

**National Medicines Laboratory (NML)**

National Medicines Laboratory is the principal body of Government of Nepal for testing and analysis of drugs. It has various sections like chemical analysis, microbiology, pharmacology and instrumental analysis. The main functions of NML are to:

- Test and analyze the quality of medicines as empowered according to the Drug Act 1978
- Issue Lot Release Certificate for vaccines
- Develop Secondary Reference Standard and make available to the pharmaceutical industries and laboratories
- Conduct training on Good Laboratory Practices
- Audit laboratories of Nepalese pharmaceutical industries

**8.1.3 Financial Allocation and Expenditure**

Allocated Budget (in Rs. '000'): 38235.00

Expenditure (in Rs. '000'): 35815.00

Percentage of expenditure: 93.67%

Revenue Collection (in Rs. '000'): 23400.00

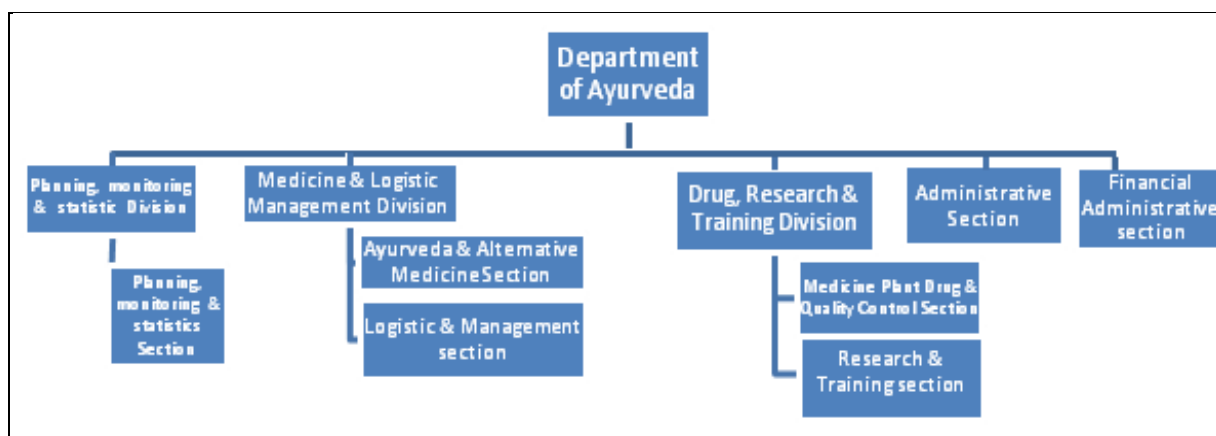
**For further detail and drug information visit: [www.dda.gov.np](http://www.dda.gov.np)**

## 8.2 AYURVEDA

### 8.2.1 Background

Ayurveda is the most ancient medical system based on the herbal, minerals and animal products. At present Ayurveda health services are being delivered through two Ayurveda Hospitals (one 100+18 cabin bedded at Naradevi, Kathmandu & other 30 beds Bijauri, Dang), 14 Zonal Ayurveda Aushadhalayas, 61 District Ayurveda Health centers and 214 Ayurveda Aushadhalayas in the country. Ayurveda and Alternative Medicine unit in the Ministry of Health and Populations (MoHP) formulates policies and guidelines for the traditional medical system. Department of Ayurveda (DoA), one of the three departments within the Ministry of Health and Population, was established in 2038 B.S.

#### Organogram of Department of Ayurveda (DoA):



Altogether 1,543 posts have been sanctioned within the Department of Ayurveda. Of which 817 posts are technical, 101 are administrative and 625 posts are supporting level (office assistance).

The ratios between population and Ayurveda institution are as follows:

- Population per Hospital: 13.3 million.
- Population per District Ayurveda Health Centers: 0.354 million; and
- Population per Ayurveda Dispensaries: 0.124 million.

#### Objectives

- To expand and develop functional, physical Ayurveda health infrastructure;
- To improve a quality control mechanism for Ayurveda health services throughout the country;
- To develop and manage the required human resources;
- To mobilize the adequate resources for medicinal plants;
- To promote community participation in the management of the health facility & utilization of local herbs;
- To procure, store and distribute the Ayurveda medicine & other allied materials;
- To promote health status & sustainable development of Ayurveda system using locally available

- medicinal plants;
- To promote positive attitudes towards health care & awareness of health issues;

### Strategies

- Provide preventive, promotive & curative health services in the rural areas;
- Establishment & development of Ayurveda institutions;
- Strengthen & expand the Ayurveda health services;
- Develop skilled manpower required for various health facilities;
- Strengthening of monitoring & supervision activities;
- Development of information, education & communication center in the Department;
- Develop Inter sectoral co-ordination with Education Ministry, Forestry, local development sector & other NGO's & INGO's;
- Establishment of regional Ayurveda Hospitals & Ayurveda Dispensaries;
- Strengthening & expansion of research & training center of international level;
- National & International level training for the capacity development of its human resources

## 8.2.2 Major Activities

### Central level

- Procurement & payment of essential Ayurveda drugs & transportation to districts
- Free health camps conducted on Shivaratri festival & five districts outside Kathmandu valley - Sarlahi, Bara, Nawalparasi, Sindhupalchowk & Tanahu
- Annual performance review meeting
- Panchakarma & Yoga ToT Programme for Ayurveda physician
- Refresher Training of orientation to the district office chief
- Orientation Training of Janapadoddyawms management to Ayurveda physician & Kaviraj
- Panchakarma, yog & statistics training to Kaviraj & Vaidhyas

### District level

- Construction of twenty two office buildings partially completed.
- Ayurveda medicine, First-aid and surgical equipment supplied to all health facilities.
- Repaired existing buildings and compound walls in district and local levels.
- Ayurveda medicine preparations were continued at rural Ayurveda Pharmacy and district.
- Ayurveda Health Center utilizing the locally available medicinal herbs and supplied to Ayurveda
- Institution in the regions.
- Promotive Panchakarma/Rasayan/Yoga program for older population
- Awareness program for medicinal plants
- Program for lactating mother (Distribution of galactogogue medicine).
- Conduction of free Ayurveda health camps in 75 districts.
- Conduction of traditional healers training (district wise)
- Construction, Maintenance & repair of Ayurvedic institution
- Ayurveda health education for School students
- Supervision and monitoring of Ayurveda institution
- In-service computer training

## 8.2.3 Analysis of Achievement

Based on the treatment report of different Ayurveda institutions following diseases were classified as top ten diseases:

- Amlapitta (Gastritis)
- Udar rog (Abdominal diseases)
- Swasan Bikar (Respiratory diseases)
- Vata vyadhi (Arthritis, Rheumatic Arthritis etc. diseases)
- Jwar (Pyrexia)
- Bal rog (Pediatric diseases)
- Karna, Nasa, Mukha, Danta & Kantha rog (ENT, Oral, Dental diseases)
- Stri rog (Gynecological diseases)
- Brana (Wound, Abscess)
- Atisar/Grahani (Diarrhea diseases)

Table shows the number of people served at various regions and zones by sex in 2068/69. The highest number of people were served in western region where as the least number of people were served in mid-western region.

### Service Statistics for fiscal year 2068/69

Region	Zone	District	Children		Adult		Total
			Male	Female	Male	Female	
East	Mechi	Taplejung	402	334	3,815	2,793	7,344
		Panchthar	2,162	2,145	1,602	2,204	8,113
		Ilam	2,391	2,931	2,503	3,961	11,786
		Jhapa	1,165	1,107	9,886	9,105	21,263
		<b>Total</b>	<b>6,120</b>	<b>6,517</b>	<b>17,806</b>	<b>18,063</b>	<b>48,506</b>
	Koshi	Morang	1305	1037	2,635	2,876	7,853
		Sunsari	828	726	3,782	3,839	9,175
		Dhankuta	83	65	1,892	1,887	3,927
		Tehrathum	297	612	3,498	3,806	8,213
		Sankhuwasabha	718	596	3,265	3,103	7,682
		Bhojpur	135	297	3,632	3,766	7,830
		<b>Total</b>	<b>3,366</b>	<b>3,333</b>	<b>18,704</b>	<b>19,277</b>	<b>44,680</b>
		Solukhumbu	941	940	2,446	2,423	6,750
		Khotang	204	396	2,678	3,759	7,037
		Okhaldhunga	1,658	1915	3,276	3,627	10,476
		Udaypur	341	329	2,311	2062	5,043
		Siraha	2,751	3,409	2,740	4,456	13,356
		Saptari	474	413	2,808	2,597	6,292
		<b>Total</b>	<b>6,369</b>	<b>7,402</b>	<b>16,259</b>	<b>18,924</b>	<b>48,954</b>
		<b>Total</b>	<b>15,855</b>	<b>17,252</b>	<b>52,769</b>	<b>56,264</b>	<b>142,140</b>
	Center	Janakpur	Dolakha	753	773	2,292	2,846
Ramechhap			271	302	1,331	1,845	3,749
Sindhuli			873	911	8,726	9,400	19,910
Sarlahi			1431	1201	6,070	3,664	12,366
Mahottari			967	609	5,365	3,881	10,822
Dhanusa			578	648	9,847	11,185	22,258
<b>Total</b>			<b>4,873</b>	<b>4,444</b>	<b>33,631</b>	<b>32,821</b>	<b>75,769</b>



	Bagmati	Kathmandu	445	625	3,879	4,785	9,734	
		Bhaktapur	207	237	2,832	4,343	7,619	
		Lalitpur	230	319	2,850	3,202	6,601	
		Dhadhing	1,145	1,434	2,946	4,034	9,559	
		Rasuwa	485	366	3,579	3,797	8,227	
		Nuwakot	744	758	7,104	9,584	18,190	
		Sindhupalchowk	1,328	2,173	3,994	2,095	9,590	
		Kavre	1,467	1,501	6,319	5,768	15,055	
		<b>Total</b>	<b>6,051</b>	<b>7,413</b>	<b>33,503</b>	<b>37,608</b>	<b>84,575</b>	
	Narayani	Bara	231	221	2,283	1,640	4,375	
		Parsa	552	375	3,799	2,940	7,666	
		Rautahat	450	352	4,603	3,489	8,894	
		Makwanpur	98	138	2,715	2,708	5,659	
		Chitwan	1,650	2,113	11,043	13,052	27,858	
		<b>Total</b>	<b>2,981</b>	<b>3,199</b>	<b>24,443</b>	<b>23,829</b>	<b>54,452</b>	
	<b>Total</b>	<b>13,905</b>	<b>15,056</b>	<b>91,577</b>	<b>94,258</b>	<b>214,796</b>		
	West	Lumbini	Nawalparasi	349	499	9,809	14,090	24,747
			Palpa	1,116	1,194	5,543	8,719	16,572
			Gulmi	377	263	3,159	5,412	9,211
Kapilvastu			507	584	5,330	6,087	12,508	
Arghakhanchi			92	75	2,409	2,355	4,931	
Rupandehi			236	348	5,267	7,930	13,781	
<b>Total</b>			<b>2,677</b>	<b>2,963</b>	<b>31,517</b>	<b>44,593</b>	<b>81,750</b>	
Dhawalagiri		Mustang	334	354	2,801	1,988	5,477	
		Myagdi	1,483	1,363	6,080	6,170	15,096	
		Baglung	230	321	6,106	7,700	14,357	
		Parbat	102	148	5,240	5,626	11,116	
		<b>Total</b>	<b>2,149</b>	<b>2,186</b>	<b>20,227</b>	<b>21,484</b>	<b>46,046</b>	
Gandaki		Gorakha	2,315	2,090	9,602	6,793	20,800	
		Lamjung	3,283	3,310	8,248	11,626	26,467	
		Tanahu	1,035	1,213	10,277	18,418	30,943	
		Manag	111	87	1,381	561	2,140	
		Kaski	1,073	820	6,533	3,926	12,352	
		Syangja	2,920	3,240	9,214	14,232	29,606	
		<b>Total</b>	<b>10,737</b>	<b>10,760</b>	<b>45,255</b>	<b>55,556</b>	<b>122,308</b>	
<b>Total</b>		<b>15,563</b>	<b>15,909</b>	<b>96,999</b>	<b>121,633</b>	<b>250,104</b>		
Mid-west	Rapti	Rukum	238	329	1,599	1,947	4,113	
		Rolpa	184	292	1,310	865	2,651	
		Salyan	671	848	2,447	4,466	8,432	
		Pyuthan	741	805	3,732	4,765	10,043	
		Dang	1,571	1,773	4,742	9,807	17,893	
		<b>Total</b>	<b>3,405</b>	<b>4,047</b>	<b>13,830</b>	<b>21,850</b>	<b>43,132</b>	
	Bheri	Dailekh	1,466	2,049	2,800	4,518	10,833	
		Jajarkot	213	325	3,554	4,088	8,180	
		Surkhet	1,403	1,943	3,312	4,740	11,398	
		Banke	326	323	4,070	4,726	9,445	
		Bardiya	773	800	2,361	2,564	6,498	
		<b>Total</b>	<b>4,181</b>	<b>5,440</b>	<b>16,097</b>	<b>20,636</b>	<b>46,354</b>	

Ayurveda

	Karnali	Jumla	450	527	2,243	2,283	<b>5,503</b>
		Humla	102	136	2,176	3,294	<b>5,708</b>
		Kalikot	238	226	897	1,005	<b>2,366</b>
		Mugu	385	374	1,556	1,915	<b>4,230</b>
		Dolpa	189	144	1,902	1,409	<b>3,644</b>
		<b>Total</b>	<b>1,364</b>	<b>1,407</b>	<b>8,774</b>	<b>9,906</b>	<b>21,451</b>
	<b>Total</b>	<b>8,950</b>	<b>10,894</b>	<b>38,701</b>	<b>52,392</b>	<b>110,937</b>	
Far-west	Seti	Bajhang	1,131	841	3,653	3,123	8,748
		Bajura	157	273	3,534	4,268	8,232
		Doti	24,308	19,914	16,091	11,639	71,952
		Kailali	175	123	3,967	4,408	8,673
		Achham	645	731	4,096	5,301	10,773
		<b>Total</b>	<b>26,416</b>	<b>21,882</b>	<b>31,341</b>	<b>28,739</b>	<b>108,378</b>
	Mahakali	Darchula	2,474	2,456	2,641	2,631	10,202
		Baitadi	948	1,069	5,197	6,987	14,201
		Dadeldhura	1,183	1,059	3,369	3,851	9,462
		Kanchanpur	1,796	1,725	3,075	2,603	9,199
		<b>Total</b>	<b>6,401</b>	<b>6,309</b>	<b>14,282</b>	<b>16,072</b>	<b>43,064</b>
<b>Total</b>	<b>32,817</b>	<b>28,191</b>	<b>45,623</b>	<b>44,811</b>	<b>151,442</b>		
Regional Ayurveda hospital Dang		525	710	8,524	16,636	<b>26,395</b>	
Nardevi Ayurveda Hospital		601	577	14,099	13,059	28,336	
<b>Grand total</b>		<b>88,216</b>	<b>88,589</b>	<b>348,292</b>	<b>399,053</b>	<b>924,150</b>	

**Financial Allocation and Expenditure in 2068/69**

Topic	Allocation (NRs)	Expenditure (NRs)	Expenditure %
Ayurveda Bibhag (3700253)	10,989,017.57	10,428,746.57	94.9
Ayurveda Chikitsalay haru/ Aushadhalay haru (3700263)	327,773,063.4	323,119,584.8	98.6
Ayurveda Sewa karyakarm (370809-3)	82,750,000	80,620,527.08	97.4
Ayurveda Sewa karyakarm (370809-4)	48,000,000	44,906,712.01	93.6
Bibidh karyakarm-Ayurveda Bibhag (370129-3)	44,510,000	35,682,311.25	80.17
Bibidh karyakarm-Ayurveda Bibhag (370129-4)	1,550,000	821,179	52.98

## 8.2.4 Issues and Responsibilities

Issues	Actions to be taken	Responsibility
No provision for higher study for BAMS Ayurveda doctors	<ul style="list-style-type: none"> <li>▪ Establish PG institution in Nepal</li> <li>▪ Recognition of BAMS course of Nepal by foreign country (India)</li> </ul>	MOHP, MOE, MOFA
Lack of experts and inadequate qualified human resource	Production of Qualified Ayurvedic Human resource (BAMS, MD)	DOA, MOHP, MOE
Inadequate financial support for district level Ayurveda institution to conduct monitoring supervision & publicity program	Allocate sufficient Budget	MOHP, MOE
Poor storage & dispensing techniques of medicines in curative aspects of Ayurveda institutions	<ul style="list-style-type: none"> <li>▪ Provide good furniture &amp; dispensing materials</li> <li>▪ Training on storage &amp; dispensing</li> </ul>	DOA, MOHP, MOE
Lack of inter sector co-ordination	<ul style="list-style-type: none"> <li>▪ Co-ordination with related ministries, NGO's &amp; INGO's</li> <li>▪ Increase qualified manpower</li> </ul>	DOA, MOHP, MOE
Lack of community based program for publicity of Ayurveda	<ul style="list-style-type: none"> <li>▪ Increase manpower production</li> <li>▪ Allocate budget</li> </ul>	DOA, MOHP, MOE
Lack of appropriate recording & reporting system	<ul style="list-style-type: none"> <li>▪ Establish statistics section under department of Ayurveda with sufficient budget</li> <li>▪ Develop recording and reporting tools</li> <li>▪ Provide ICD coding System in morbidity and mortality datasets</li> <li>▪ Train employee on recording &amp; reporting tools</li> </ul>	DOA, MOHP, MOGA
Inadequate staffing under Department of Ayurveda	<ul style="list-style-type: none"> <li>▪ Recruitment &amp; placement as per need</li> </ul>	MOGA, PSC
Formal Justification about the successful treatment of certain incurable disease with Ayurveda therapy claimed by practitioners	<ul style="list-style-type: none"> <li>▪ Goal formation</li> <li>▪ Allocate budget</li> </ul>	DOA, MOHP, MOE

## 8.3 Homoeopathic Services

### 8.3.1 BACKGROUND

Dr. Samuel Hahneman of Germany had discovered Homoeopathic system before two century. This is based on the fixed principals of "Similia Similibus Curantur". Medicine is provided on healthy human being and symptoms are recorded in Materia Medica. Medicine is prescribed on the basis of sign and symptom obtained from patients.

Pashupati Homoeopathic Hospital s is the only one hospital providing homoeopathic services to the people of Nepal in the public sector. The homoeopathic system is economic, easy and effective having no side effect as well. The hospital provides OPD and IPD to the patients. Currently 25 beds are allocated for Indoor patients to admit for treatment along with meal free of cost.

### 8.3.2 SUMMARY OF ACHIEVEMENT

Homoeopathic system is gaining popular mode of treatment. Hospital record shows that, the number of patient is increasing day by day. Many rejected cases by other system of medicine and surgical cases have been treated successfully. A total number of 66,016 patients were visits for the treatment in the fiscal year 2068/69.

Fiscal Year	Female patients	Male patients	Number of patients
2068/69 (2011/2012)	33,790 (51%)	32,226 (49%)	66,016

#### Summary of Financial Allocation and Expenditure

Fiscal Year	Regular Budget in Rs	Development Budget in Rs	Total Budget in Rs
2068/2069 (2011/2012)	7,077,000	1,800,000	8,877,000

#### Description of Patients Visited in Hospital in FY 2068/69

Particular	Number of patients
General Medicine	37,760 (57.20%)
Skin	16,952 (25.68%)
E.N.T.	3,302 (5.01%)
Eye	1,401 (2.12%)
Dental	1,341 (2.03%)
Gyn/Obs.	1,090 (1.65)
Other	4,170 (6.31%)
<b>Total patients</b>	<b>66,016 (100%)</b>

### **8.3.3 CONSTRAINTS**

- Due to unlimited budget it is hard to manage the medicine for increasing number of patients.
- Not enough human resources for the ever increasing number of patients in Hospital basically the Doctors, Technical personnel and other supporting staffs due to lack of budget.
- Due to unavailability of Pathological Laboratory, patients have to go outside for pathological findings.
- Human resource especially the Doctor, Technical staff and other supporting staff do not have any opportunity to expose themselves for higher studies, attending in the training and seminars.

### **8.3.4 CONCLUSION**

This Homoeopathic Hospital is providing service to outdoor patient as well as indoor patient free of cost. In order to increase people's access to the Homoeopathic services Homoeopathic system of treatment need to be developed in other development regions as well.

# Development Partners

<b>9.1</b>	<b>Multilateral Partners.....</b>	<b>253</b>
<b>9.2</b>	<b>Bilateral Partners.....</b>	<b>254</b>
<b>9.3</b>	<b>International Non-Governmental Organisations.....</b>	<b>257</b>
<b>9.4</b>	<b>National Non-Governmental Organisations.....</b>	<b>263</b>

## DEVELOPMENT PARTNERS

The outcomes discussed in the previous chapters is the result of combined efforts of MoHP/GoN and the development partners (multilateral, bilateral organizations and international and national NGOs). Department of Health Services highly acknowledges partnership with these organizations and their contribution in the health sector in Nepal. This section presents major program focus of these organizations and their contact details to help the readers find more details about them and their programs.

### Pooled Funding

World Bank, UK's Department for International Development (DFID), Australian Agency for International Development (AusAID), KfW and GAVI Alliance have been providing pooled fund to support MoHP/GoN via Sector-Wide Approach (SWAp). The pool funding supports the government's five year NHSP2 (2010/11-2014/15) to achieve its three objectives: (i) increase access to and utilization of quality essential health services (ii) reduce cultural and economic barriers to accessing health care services and harmful cultural practices in partnership with non-state actors and (iii) improve health systems to achieve universal coverage of essential health care services. The current support is a continuation of the previous Health SWAp (Nepal Health Sector Program 2004/05-2009/10).

The coverage is nationwide and in alignment with the NHSP2. The areas of support include the overall sector governance, child health, population and reproductive health, health system performance, gender equality and social inclusion, HIV/AIDS and nutrition.

For the last fiscal year 2011/12, the disbursements from the pooled funding partners were as follows:

- World Bank: USD 35.83 million (includes advance for 2 trimesters of FY12/13)
- DFID: GBP 7 million (USD 11.1 million)
- AusAID: A\$ 5.2million.
- KfW: KfW signed the JFA only in January 2012 for 10 mio Euro contribution to the pool fund; but no disbursement took place between January and July 2012. Later, USD 5.66 million was disbursed as part of reimbursement for FY11/12 and advance for 2 trimesters of FY12/13
- GAVI: USD 4.17 million

Apart from the fully flexible pooled funding to the GoN in support of NHSP2, some pooled funding partners also supported other activities which have been presented in the table below which also shows contributions from other non-pooled partners.

## Development Partners Contributing to Health Sector in Nepal

### 9.1 MULTILATERAL ORGANIZATIONS

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
UNFPA	<ul style="list-style-type: none"> <li>▪ Reproductive health</li> <li>▪ Population and development</li> <li>▪ Gender</li> <li>▪ Support development/update of policy/strategies, protocols, manuals, national standards</li> </ul>	National level and specific programs in 18 districts		Sanepa, Lalitpur Tel: 01-5523637, 5523880 Fax: 01-5523985  <a href="http://nepal.unfpa.org">http://nepal.unfpa.org</a>
UNICEF	<ul style="list-style-type: none"> <li>▪ Child health</li> <li>▪ MNCH</li> <li>▪ Nutrition</li> <li>▪ Immunization</li> <li>▪ WASH</li> <li>▪ HIV/AIDS</li> </ul>	National level and specific programs at sub-national level		United Nations House Pulchowk, Lalitpur, Kathmandu P.O. Box 1187  <a href="http://www.unicef.org/infobycountry/nepal">www.unicef.org/infobycountry/nepal</a>
World Bank	<ul style="list-style-type: none"> <li>▪ Nutrition</li> </ul>		Budget comes from a trust fund (SAFANSI/SUNITA) supported by AusAID/DfID	The World Bank Nepal Country Office The Yak and Yeti Complex Durbar Marg PO Box 798 Kathmandu
World Food Programme (WFP)	<ul style="list-style-type: none"> <li>▪ Mother and Child Health Nutrition (MCHN)</li> </ul>	9 districts: Dadeldhura, Baitadi, Darchula, Bajhang, Doti, Achham, Bajura, Salyan, Solukhumbu	USD 4,294,359 Expenditure: USD 1,301,328	Tel: 977-1-5260607 Fax: 977-1-5260201 E-mail: <a href="mailto:wfp.kathmandu@wfp.org">wfp.kathmandu@wfp.org</a> Web: <a href="http://go.wfp.org/web/wfpgo">http://go.wfp.org/web/wfpgo</a> Contact: <a href="mailto:pramila.ghimire@wfp.org">pramila.ghimire@wfp.org</a>
WHO Nepal	Immunization, Maternal Health, Child Health, Neglected Tropical disease, HMIS, NHTC, Non Communicable disease, Non Communicable disease, Oral Health, Mental Health, Health Policy and Health Systems, HIV, TB, Malaria Emergency Health, Environmental health, Nutrition, Health Related Academic and Public Health Institutions and Networks	National	US\$ 1.819 million Expenditure: US\$ 1.720 million	WHO Country Office Nepal UN House Jawalakhel, Nepal Tel: 01-5523200 (1301) Fax: +977-1-5527756 <a href="http://www.nep.searo.who.int">http://www.nep.searo.who.int</a>



## 9.2 BILATERAL ORGANIZATIONS

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
AusAID	Health SWAp <ul style="list-style-type: none"> <li>▪ Access</li> <li>▪ Equity</li> <li>▪ Quality</li> <li>▪ Governance</li> </ul>	AusAID is one of the five pooling donors to NHSP II, hence AusAID's contributions is attributable to every program covering all 75 districts	AUD 5.2 million NPR 451,776,000 Expenditure: AUD 3,494,530 NPR 303,604,770	GPO Box 879, Australian Embassy, Bansbari, Kathmandu Tel: 4371678; Fax: 4371533 ausaid.kathmandu@dfat.gov.au <a href="http://www.ausaid.gov.au/countries/southasia/nepal/Pages/home.aspx">http://www.ausaid.gov.au/countries/southasia/nepal/Pages/home.aspx</a>
Department for International Development (DFID)	<ul style="list-style-type: none"> <li>▪ Maternal, newborn and reproductive health</li> <li>▪ Nutrition</li> <li>▪ HIV/AIDS</li> <li>▪ Gender equity and social inclusion</li> <li>▪ Governance and accountability</li> <li>▪ Health Policy and Planning</li> <li>▪ Health Systems Strengthening</li> </ul>	National level and specific programs at sub-national level	NHSP2: £11 million (includes both pooled funds and TA)	Ekantakuna, Lalitpur, Nepal GPO: 106 <a href="http://www.gov.uk/government/world/organisations/dfid-nepal">www.gov.uk/government/world/organisations/dfid-nepal</a>
Deutsche Gesellschaft Für Internationale Zusammenarbeit (GIZ)	<b>A. Health Sector Support Program</b> <ul style="list-style-type: none"> <li>▪ Decentralization and quality improvement</li> <li>▪ Fair Financing and Social Health Protection</li> <li>▪ Promotion of Sexual and Reproductive Health and Rights with a focus on young people</li> </ul>	Dhading, Banke, Bardiya, Dang, Surkhet, Dailekh, Jumla, Kailali, Dadeldhura, Doti, Achham, Baitadi	Euro 1,565,000	MoHP-GIZ Health Sector Support Programme (HSSP), Teku, Kathmandu Tel: 4261404 Fax: 4261079 Email: <a href="mailto:hssp@giz.org.np">hssp@giz.org.np</a> Web: <a href="http://GIZ.de/nepal">GIZ.de/nepal</a>
	<b>B. Harm Reduction</b> Access to qualitative Opioid Substitution Therapy (OST) and HIV services for injecting drug users	Nationwide	Euro 598,000	
Nepal Family Health Program (NFHP)	<ul style="list-style-type: none"> <li>▪ Family planning</li> <li>▪ MNCH</li> <li>▪ Information systems</li> <li>▪ Health facilities strengthening</li> <li>▪ FCHVs</li> <li>▪ Development of policies, standards, guidelines, curricula</li> </ul>	National level and specific programs in 22 districts		Oasis Complex, Patan Dhoka P.O. Box 1600, Kathmandu, Nepal Tel: +977-1-5524313, 5526609 Fax: +977-1-5526608 <a href="mailto:nfhp@nfhp.org.np">nfhp@nfhp.org.np</a>

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
Swiss Agency for Development and Cooperation/Rural Health Development Project (SDC/RHDP)	<ul style="list-style-type: none"> <li>▪ Social inclusion</li> <li>▪ Empowerment</li> <li>▪ Primary health care</li> <li>▪ Family planning</li> <li>▪ Health information</li> </ul>			<a href="http://www.sdc.org.np">www.sdc.org.np</a> <a href="mailto:rhdpmm@wlink.com.np">rhdpmm@wlink.com.np</a>
USAID	Maternal, newborn and child health	Nationwide, plus focused program in 24 districts	US\$ 12,188,000	USAID, U.S. Embassy Maharajgunj, Kathmandu G.P.O Box 295 Tel: 01-4007200 Fax: 01-4007285 <a href="http://nepal.usaid.gov">http://nepal.usaid.gov</a>
	Family Planning and Reproductive Health	Nationwide, plus focused program in 51 districts	US\$ 11,044,000	
	Nutrition	28 districts	US\$ 4,300,000	
	HIV/AIDS and Sexually Transmitted Infections	33 districts	US\$ 2,815,000	
	Neglected Tropical Diseases	Nationwide	US\$ 742,000	
	Immunization Preventable Diseases	Nationwide	US\$ 557,000	
	Logistics and Supply Chain Management for Health Commodities	Nationwide	US\$ 800,000	
	Clean Water, Sanitation and Hygiene	Achham, Surkhet plus 20 districts of Suaahara project	US\$ 100,000	
	Physical Rehabilitation of People Living with Disabilities	Banke, Dang, Kanchanpur, Kathmandu, Morang, Sarlahi, Surkhet	US\$ 390,000	
Targeted and National Population-based Surveys, Data Analysis, Assessments, and Capacity Building	Nationwide	US\$ 3,500,000		

### 9.3 INTERNATIONAL NON-GOVERNMENT ORGANIZATIONS (INGOs)

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
Action Aid International Nepal (AAIN)	<ul style="list-style-type: none"> <li>▪ Reproductive health</li> <li>▪ Safe motherhood</li> </ul>	350 VDCs and 6 Municipalities of 30 districts		Apsara Marg, Lazimpat, Kathmandu Tel: 4436477 <a href="http://www.actionaid.org/nepal">http://www.actionaid.org/nepal</a>
Adventist Development and Relief Agency (ADRA) Nepal	<ul style="list-style-type: none"> <li>▪ Maternal child health and family planning services</li> <li>▪ Uterine prolapse</li> <li>▪ VCT</li> </ul>	Dadeldhura, Dang, Kapilvastu, Rautahat, Mahottari, Saptari, Rukum, Dailekh	NRs. 134,195,190  Expenditure: NPs. R43,235,029	ADRA Nepal, Kathmandu Nepal Tel: 1-5555913; Fax: 1- 5554251 Email : <a href="mailto:info@adranepal.org">info@adranepal.org</a> Web: <a href="http://www.adranepal.org">www.adranepal.org</a>
Britain Nepal Medical Trust (BNMT)	<ul style="list-style-type: none"> <li>▪ Tuberculosis</li> <li>▪ Child health</li> <li>▪ Safe motherhood</li> <li>▪ Gender based violence</li> <li>▪ Nutrition</li> </ul>	>35 districts – 5 regions		Lazimpat, Kathmandu, Nepal POB: 20564 <a href="http://www.britainnepalmedicaltrust.org.uk">www.britainnepalmedicaltrust.org.uk</a> <a href="mailto:cd_po@bnmt.org.np">cd_po@bnmt.org.np</a> <a href="http://cd_era@bnmt.org.np">cd_era@bnmt.org.np</a>
CARE International Nepal	<ul style="list-style-type: none"> <li>▪ MNH</li> <li>▪ SRH</li> <li>▪ HIV/AIDS</li> <li>▪ Governance</li> <li>▪ Equity, inclusion</li> </ul>	7 districts as direct program districts		Krishna Galli, Pulchowk, Lalitpur POB: 1661  <a href="http://www.carenepal.org">www.carenepal.org</a>
Chlorhexidine Navi Care Program/JSI R&T	<ul style="list-style-type: none"> <li>▪ Scaling up use of 7.1% w/v chlorhexidine digluconate immediately after cord cutting for prevention of infection</li> <li>▪ CB-NCP</li> </ul>	At least in 63 districts  CBNCP in Rupandehi and Pyuthan districts	2 million for 3 years	Chlorhexidine Navi Care Program Patan Dhoka; Po Box no. : 1600 Tel: 01-5524313; Fax: 01-5526608 Email: <a href="mailto:cncp@cncp.org.np">cncp@cncp.org.np</a>
CWS - Child Welfare Scheme	<ul style="list-style-type: none"> <li>▪ Maternal &amp; newborn</li> <li>▪ Child &amp; adolescent</li> </ul>	5 districts		Indrapuri Marg, Nagdhunga, Pokhara-8, Kaski, Nepal; Tel: 061-530002 <a href="mailto:health@cwsuk.org">health@cwsuk.org</a>
FHI 360 Nepal (managing USAID-funded Saath-Saath Project) October 2011 - September 2016	<ul style="list-style-type: none"> <li>▪ HIV prevention to care, support and treatment services</li> <li>▪ Integrated family planning (FP)/HIV services</li> <li>▪ Community and home based care</li> <li>▪ Surveillance &amp; research</li> <li>▪ Capacity strengthening of SSP's partners</li> </ul>	33 districts	USD 4,899,840 Expenditure: USD 3,092,981	Gopal Bhawan, Anamika Galli, Kathmanu-4, Nepal; GPO 8803 Tel: 1-4437173; Fax: 1-4417475 Email: <a href="mailto:fhinepal@fhi360.org">fhinepal@fhi360.org</a> Web: <a href="http://www.fhi360.org">www.fhi360.org</a> , <a href="http://www.usaid.gov/nepal">http://www.usaid.gov/nepal</a>
Fida International	<ul style="list-style-type: none"> <li>▪ Preventive health care</li> <li>▪ Health screening camps</li> </ul>	36 VDCs of 18 districts		Maharajgunj, Bansbari, Kathmandu, Nepal ; Tel: 01-4378788 <a href="mailto:palvi.leppanen@fidadevelopment.fi">palvi.leppanen@fidadevelopment.fi</a>

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
Lutheran World Federation Nepal (LWF Nepal)	<ul style="list-style-type: none"> <li>▪ WASH facilities improvement in OTPs/SCs</li> <li>▪ Hygiene supplies</li> </ul>	Bardiya (16 OTPs/SCs) and Kapilvastu (21 OTPs/SCs) Districts	USD 161,450 Expenditure: USD 146,034	Chundevi Marg, Maharajgunj Po Box – 3330, Kathmandu, Nepal Tel: 4720152/4721271; Fax: 4720225 Email: mail@lwf.org.np Web: www.lwfnepal.org
German Nepalese Help Association	<ul style="list-style-type: none"> <li>▪ Free medicine &amp; surgical goods distribution to poor patients</li> <li>▪ Financial assistant for major surgery</li> <li>▪ Rehabilitation and medication to spinal injury patients</li> <li>▪ 20 Fresenius Haemodialysis Machine</li> </ul>	Surrounding districts of Kathmandu valley, Kaski	NRs. 7,096,051  Expenditure: NRs. 6,870,851	Thapathali, Kathmandu Tel: 4246448 Fax: 4224088 Email :gnhanepal@wlink.com.np Web:www.dnh-stuttgart.org
Good Neighbors International	<ul style="list-style-type: none"> <li>▪ Nutrition</li> <li>▪ Medical/Disability</li> <li>▪ Housing and Environment</li> </ul>	27 VDCs of 6 districts		Mahalaxmasthan, Lalitpur, Nepal Tel: 015538758 goodnn@wlink.com.np gnnepal@gmail.com
Handicap International	<ul style="list-style-type: none"> <li>▪ Physical rehabilitation</li> <li>▪ Health service preparedness to major crisis</li> </ul>	19 districts		Tel: 0143278482 director@hi-nepal.org
Health Right International	Maternal and newborn health	Arghakhanchi -42 VDCs Kapilvastu – 77 VDCs	US\$ 118,965 Exp. US\$ 1 21,634	HealthRight International Oasis 49 Dhara, 403, 4 <sup>th</sup> Floor, Patan Dhoka, Patan Telephone:977-1-5528843 <a href="http://www.healthright.org">www.healthright.org</a> Contact Person: Mohan Paudel (Monitoring and Evaluation Coordinator) E-mail: <a href="mailto:Mohan.Paudel@healthright.org">Mohan.Paudel@healthright.org</a>
	Family Planning and Maternal and Newborn Health	Arghakhanchi district	US\$ 58,475 Expenditure: US\$ 58,058	
Helen Keller International	<ul style="list-style-type: none"> <li>▪ Nutrition (Action against malnutrition through Agriculture - AAMA)</li> </ul>	3 districts: Kailali, Baitadi, Bajura	NRs. 59,361,014 Expenditure: NRs. 57,658,523	PO Box: 3752, Green Block, Ward # 10, Chakupat, Patan, Lalitpur, Nepal. Tel: 5260247 / 5260837 Fax: 5260459 Web: www.hki.org
INF Worldwide	<ul style="list-style-type: none"> <li>▪ TB, Leprosy, HIV/AIDS</li> <li>▪ Spinal cord injury</li> <li>▪ Disability</li> <li>▪ Nutrition</li> <li>▪ Special health camps</li> </ul>	8 districts		Kathmandu, Nepal POB: 1230 Tel: 01-5521183 liason.officer@world.inf.org

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
<b>International Network for Rational Use of Drugs (INRUD, Nepal)</b>	Monitoring prescribing practices and availability of free drugs at PHC outlets to improve rational use of medicines. Provides technical support to DoHS/MoHP to the set activities.	9 districts	Rs. 3. 5 million	34, Surya Bikram Gyawali Marg, Baneswor, Kathmandu Tel: 4115636 Fax: 4115515 Email : INRUD@healthnet.org.np Web: www.inrud-nepal.org.np
IPAS	<ul style="list-style-type: none"> <li>▪ Safe abortion care</li> <li>▪ Family planning</li> <li>▪ Reproductive health</li> </ul>	Selected PHCCs and HPs in 16 districts	NRs. 98,733,344	Tewa Tower, Teku, Kathmandu Telephone: 01-4100180 Fax: 01-4262384 Email: ipasnepal.ipas.org Web: www.ipas.org
ISIS Foundation	<ul style="list-style-type: none"> <li>▪ Child nutrition</li> <li>▪ Safe drinking water</li> <li>▪ Mobile medical team</li> </ul>	15 VDCs of Humla district		Budhanilkantha, Kathmandu, Nepal POB: 8974 pralad.dhakal@isisgroup.org
Karuna Foundation	<ul style="list-style-type: none"> <li>▪ Child disability prevention</li> <li>▪ Community based rehabilitation</li> </ul>	17 VDCs of 3 districts (Sunsari, Kavre, Rasuwa)		Narayan Gopal Marga, Lazimpat, Kathmandu, Nepal Tel: 01-4410687, 4413340 kimat@karunafoundation.com
Leprosy Mission Nepal	<ul style="list-style-type: none"> <li>▪ Leprosy</li> </ul>	15 districts		Tikabhairav, Lele VDC, Lalitpur, Nepal shovakhark@tlmnepal.org
Lutheran World Federation Nepal	<ul style="list-style-type: none"> <li>▪ WASH facilities improvement in OTPs/SCs</li> <li>▪ Hygiene supplies</li> </ul>	Bardiya (16 OTPS/SCs) and Kapilvastu (21 OTPs/SCs) Districts	Budget: USD 161,450 Expenditure USD 146,034	Chundevi Marg, Maharjgunj, Kathmandu, Nepal POB: 3330 Tel: 01-4720152, 4721271 Fax: 977-01-4720225 mail@lwf.org.np web: <a href="http://www.lwfnepal.org">www.lwfnepal.org</a>
Medecins Du Monde-France (MDM-France)	<ul style="list-style-type: none"> <li>▪ Safe motherhood</li> <li>▪ Neonatal health</li> <li>▪ Health education</li> </ul>	12 VDCs of Sindhupalchowk district		Sanepa, Lalitpur, Nepal Tel: 01-5013023, 5521215 <a href="mailto:medco.mdmnepal@gmail.com">medco.mdmnepal@gmail.com</a>

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
Medical Emergency Relief International (Merlin)	<ul style="list-style-type: none"> <li>▪ Mass casualty management</li> <li>▪ Disaster preparedness</li> <li>▪ DHO capacity development</li> <li>▪ Human resource for health</li> </ul>	18 districts		Kupandole, Lalitpur, Nepal <a href="mailto:cd@merlin-nepal.org">cd@merlin-nepal.org</a>
The Micronutrient Initiative (MI)	Micronutrient supplementation and food fortification	15 districts	NPR 18,353,000 Expenditure: NPR 17,742,000	Uttar Dhoka Marg, 424/2, 2 <sup>nd</sup> Floor, Lazimpat, Kathmandu Tel: 4001083, Fax: 4001084 Email : minepal@micronutrient.org Web: <a href="http://www.micronutrient.org">www.micronutrient.org</a>
Mission East Organization	<ul style="list-style-type: none"> <li>▪ Refreshers' training to Female Community Health Volunteer (FCHV) and Traditional Healers (THs)</li> <li>▪ Hygiene and Health Promotion</li> </ul>	12 VDCs of Humla 5 VDCs of Kalikot	EUR 74,361 for 3 years (2009-2012) Expenditure: NPR 2,670,919	P.O. Box: 8975, EPC 2328 Jawalakhel, Lalitpur, Nepal Tel: 5538416, 5538668; Fax: 5545469 Email : admin.nepal@missioneast.org Web: <a href="http://www.miseast.org">www.miseast.org</a>
Nepal Association for the Welfare of the Blind (NAWB)	<ul style="list-style-type: none"> <li>▪ Eye screen/low vision</li> </ul>	14 districts		Tripureshwor, Kathmandu POB: 3255 Tel: 01-4260583 <a href="mailto:nawbnepal@gmail.com">nawbnepal@gmail.com</a>
Nepal Leprosy Trust (UK)	<ul style="list-style-type: none"> <li>▪ Leprosy</li> </ul>	7 districts		Satdobato, Lalitpur, Nepal Tel: 01-5521622, 5523322 <a href="mailto:nlt@mail.com.np">nlt@mail.com.np</a>
Nepal Youth Foundation (NYF)	<ul style="list-style-type: none"> <li>▪ Nutrition (Nutritional rehabilitation homes)</li> </ul>	19 districts		Ekantakuna, Lalitpur, Nepal Tel: 01-5000276 <a href="mailto:som@nepalyouthfoundation.org.np">som@nepalyouthfoundation.org.np</a>
Netherlands Leprosy Relief (NLR)	<ol style="list-style-type: none"> <li>1. Leprosy Control</li> <li>2. Rehabilitation through CBR (Disability management)</li> <li>3. TB Control</li> </ol>	<p>1, and 2: All 16 districts of Eastern Region and all 9 districts of Far Western Region</p> <p>3. All districts of Far Western Region</p>	NRs. 37,874,000 Expenditure: NRs. 38,138,508	Anamnagar Tel: 4251115 Fax: 4245882 Email :nlrcro@ntc.net.np nlrcroktm@gmail.com Web: <a href="http://www.leprastachting.nl">www.leprastachting.nl</a>

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
Oxfam GB Nepal	<ul style="list-style-type: none"> <li>▪ Public health promotion</li> <li>▪ Water and sanitation</li> </ul>	11 districts		Jawalakhel, Lalitpur, Nepal POB: 2500 <a href="mailto:afaiia@oxfam.org.uk">afaiia@oxfam.org.uk</a> <a href="mailto:oxnepal@oxfam.org.uk">oxnepal@oxfam.org.uk</a>
Plan Nepal	Community based maternal, newborn and child health care program	Banke, Makwanpur, Rautahat, Sindhuli, Sunsari, Morang, Bara and Parsa	NRs. 23,849,624	Shreedurbar, Pulchowk, Lalitpur, Nepal Tel: 01-5535580, 5535560 <a href="mailto:sheerbahadur.rana@plan-international.org">sheerbahadur.rana@plan-international.org</a>
	Community based prevention from mother to child transmission of HIV (CB-PMTCT)	Banke and Bardiya	NRs. 4,200,000	
	Prevention, treatment and rehabilitation of children with disability	Morang, Sunsari, Sundhuli, Rautahat, Makwanpur, Myagdi, Baglung, Parbat & Banke	NRs. 14,047,012	
	Birthing center construction, rehabilitation & equipment support in health facilities	Banke, Makwanpur, Rautahat, Sindhuli, Sunsari & Morang	NRs. 8,825,730	
	Skill birth attendance training		NRs. 1,254,300	
	Medical and surgical treatment support to sponsored children, siblings and parents	Morang, Sunsari, Sundhuli, Rautahat, Makwanpur, Banke & Bardiya	NRs. 3,162,878	
	Snake bite management training & orientation	Sindhuli district	NRs. 354,110	
	Health facility management training and orientation	Banke, Makwanpur, Rautahat, Sindhuli, Sunsari & Morang	NRs. 3,628,799	
	Local health governance strengthening program	Morang & Sunsari	NRs. 1,965,609	
			Total Expenditure NRS 61,288,064.00	
Population Services International/Nepal (PSI/Nepal)	<ul style="list-style-type: none"> <li>▪ Malaria</li> <li>▪ Women's health</li> <li>▪ HIV</li> <li>▪ Water Guard</li> </ul>	75 districts		Shree Mahalaxmi Sadan, Mahalaxmasthan, Lagankhel Lalitpur, Nepal; GPO Box: 21976 Tel: 977-1-5553190/ 5550620 <a href="mailto:info@psi.org.np">info@psi.org.np</a>

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
Restless Development Nepal	<ul style="list-style-type: none"> <li>▪ Sexual reproductive health</li> <li>▪ HIV/AIDS</li> </ul>	6 districts		Jwagal, Lalitpur, Nepal Tel: 01-5538242 <a href="mailto:ravindra@restlessdevelopment.org">ravindra@restlessdevelopment.org</a>
Save the Children International	<ul style="list-style-type: none"> <li>▪ Maternal, Newborn &amp; Child health</li> <li>▪ Nutrition</li> <li>▪ HR for health</li> </ul>	15 districts-direct 8 districts through NFHP		Bag Durbar, Sundhara, Kathmandu, Nepal Tel: 01-4258140, 4222272 <a href="http://www.savethechildren.org.au">www.savethechildren.org.au</a>
Terre des hommes	Mother and child health and care Nutrition Social responsiveness Disability and health	18 districts	Rs. 25, 198,664  Expenditure: Rs. 24,113,746	Jhamsikhel, Lalitpur PO Box 2430 Kathmandu, Nepal Tel: 01-5555 348 Fax: +977-1-5532558 Email :info@tdhnepal.org jsq@tdh.ch Web: www.tdh.ch
United Mission to Nepal (UMN)	Health Education, Sustainable Livelihoods and Peace building	12 districts	Rs. 314,677,252  Expenditure: Rs. 302,896,391	P. O. Box 126 Kathmandu Tel: 01-4268900, 4228060 Fax 422,5559 <a href="mailto:umn@umn.org.np">Email umn@umn.org.np</a>
Water Aid in Nepal (WAN)	<ul style="list-style-type: none"> <li>▪ WASH</li> </ul>	28 districts		Kupandole, Lalitpur, Nepal Tel: 01-5552764 <a href="mailto:wateraidnepal@wateraid.org">wateraidnepal@wateraid.org</a>
World Education, Nepal	<ul style="list-style-type: none"> <li>▪ Maternal and child health</li> </ul>	8 districts		Ratopul, Kathmandu, Nepal Tel: 01-4422385 <a href="mailto:shyam@wei.org.np">shyam@wei.org.np</a>
World Neighbors	<ul style="list-style-type: none"> <li>▪ Safe motherhood</li> <li>▪ RH &amp; Family planning</li> <li>▪ Food security/nutrition</li> <li>▪ Capacity building of health personnel and institutions</li> </ul>	73 VDCs of 8 districts		62 Docha Marg, Baluwatar, Kathmandu, Nepal Tel: 01-4417272, 4414715 <a href="mailto:infoasia@wn.org">infoasia@wn.org</a>
World Vision International Nepal (WVIN)	<ul style="list-style-type: none"> <li>▪ MCH</li> <li>▪ Nutrition</li> <li>▪ HIV/AIDS</li> <li>▪ WASH</li> </ul>	12 districts – 83 VDCs, 3 Municipalities		Jhamsikhel, Lalitpur, Nepal Tel: 01-5013570, 5547177 <a href="http://nepal.wvasiapacific.org">http://nepal.wvasiapacific.org</a>



## 9.4 Non-Governmental Organizations

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
CRS Company	<ul style="list-style-type: none"> <li>▪ Maternal child health</li> <li>▪ Family planning</li> <li>▪ HIV prevention</li> </ul>	75 districts through its products and services	Rs. 155,145,923 Expenditure: Rs. 95,177,685	Tokha Road, Mahadev Taar, Gongabu, Kathmandu, Nepal P.O. Box. 842, Phone: 4362097, 4362098 Fax: 4362099 Email: <a href="mailto:mis@crs.org.np">mis@crs.org.np</a> <a href="http://mis@crs.org.np">mis@crs.org.np</a>
Family Planning Association of Nepal (FPAN)	<ul style="list-style-type: none"> <li>▪ Family planning</li> <li>▪ Reproductive health</li> <li>▪ Safe abortion</li> <li>▪ HIV/AIDS/STI</li> </ul>	42 districts	Rs. 53 Crores Expenditure: Rs. 36 Crores (Unaudited)	Pulchowk, Lalitpur, P. O. Box 486, Kathmandu, Nepal Phone: 5010240, 5010104; Fax: 5010248 <a href="mailto:fpandg@fpan.org.np">fpandg@fpan.org.np</a> Web: <a href="http://www.fpan.org">www.fpan.org</a>
Kidasha	<ul style="list-style-type: none"> <li>▪ Access to urban and rural primary health care services</li> <li>▪ Maternal and child health services</li> <li>▪ Health education and awareness</li> <li>▪ Community education and health awareness</li> </ul>	Pokhara Municipality urban slums, 3 VDCs of Kaski and 1 VDC of Lamjung district 7 VDCs of Gorkha district (Northern belt)	NRs 21,402,450  Expenditure: NRs 16,304,656	Indrapuri Marg, Nagdhunga, Pokhara – 8, Nepal Tel: 61 530002; Fax : 537947 Email: <a href="mailto:hridaya@kidasha.org">hridaya@kidasha.org</a> Web: <a href="http://www.kidasha.org">www.kidasha.org</a>
Marie Stopes International (MSI)/Sunaulo Parivar Nepal (SPN)	<ul style="list-style-type: none"> <li>▪ Family Planning Services</li> <li>▪ Safe abortion services</li> <li>▪ Training on FP and safe abortion services</li> <li>▪ ANC/PNC checkup</li> <li>▪ Child immunization</li> <li>▪ Adolescent's SRH</li> </ul>	41 districts (52 static centers)	Budget: Nrs 244 million	Baluwatar, Kathmandu Tel: 01-4413976 Fax: 01-4420416 GPO Box 11254 Kathmandu, Nepal <a href="mailto:msi@msinepal.org.np">msi@msinepal.org.np</a> Web: <a href="http://www.msinepal.org.np">www.msinepal.org.np</a>
Nepal Red Cross Society (NRCS)	<ul style="list-style-type: none"> <li>▪ Maternal and Child health</li> <li>▪ Health and sanitation, water supply</li> <li>▪ Blood supply</li> <li>▪ HIV/AIDS</li> <li>▪ Combating Trafficking</li> </ul>	12 VDCs of 10 districts Pina VDC of Mugu district	NRs. 449,256,877	National Headquarters, Red Cross Road Kalimati, Kathmandu Tel: 4270650, 4272761, 4270167 Fax: 014271915 E-mail: <a href="mailto:nrcs@nrccs.org">nrcs@nrccs.org</a> Web: <a href="http://www.nrcs.org">http://www.nrcs.org</a>

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
Nepali Technical Assistance Group (NTAG)	<ul style="list-style-type: none"> <li>▪ Maternal and child nutrition</li> <li>▪ Training to health workers and FCHVs</li> <li>▪ Research and surveys</li> <li>▪ Promotion and advocacy</li> </ul>	75 districts	NRS. 135,824,915  Expenditure: NR. 28,060,579	Maitighar, Kathmandu, Nepal GPO Box 7518 Tel: 977-1-4224884/4223477 Fax: 977-1-4221133 Email: nvatag@mail.com.np Web: <a href="http://www.ntagonline.org">http://www.ntagonline.org</a>
Nick Simons Institute (NSI)	<ul style="list-style-type: none"> <li>▪ Training</li> <li>▪ Rural staff support</li> <li>▪ Scholarship</li> <li>▪ Advocacy</li> <li>▪ M&amp;E</li> <li>▪ Infrastructure</li> </ul>	Staff support for six government district hospitals: Bajhang, Kalikot, Salyan, Kapilvastu, Gulmi, and Dolakha		Nick Simons Institute Box 8975; EPC 1813, Sanepa, Lalitpur Nepal Phone 977-1-5551978 Fax 977-1-5544179 nsi@nsi.edu.np <a href="http://www.nsi.edu.np">http://www.nsi.edu.np</a>
Sushma Koirala Memorial Hospital	Plastic and Reconstructive Surgery	Mountain, Hill and Terai Region	NRs. 39,289,000  Expenditure: NRs. 36,660,438	Salambutar, Sankhu, Kathmandu, Nepal Tel: 01-4450826, 4450304 Fax: 01-4450725 Email: skm@wlink.com.np Web: <a href="http://www.nepalhospital.de">www.nepalhospital.de</a>
Source: Report received from respective agencies to MIS Section, Management Division				

# Annexes

ANNEX 1	ACTIVITIES CARRIED OUT IN FY 2068/69 -----	265
ANNEX 2	TARGET FOR FY 2069/70-----	275
ANNEX 3	HEALTH SERVICES (Target Population, Raw/Analysed Data-----	282
ANNEX 4	ACRONYMS -----	414

**ANNEX 1 Major activities carried out in FY 2068/69****CHILD HEALTH: IMMUNIZATION**

<b>S N</b>	<b>Activities</b>	<b>Unit</b>	<b>Targets</b>	<b>Achievement</b>	<b>%</b>
1	Printing Multi Year Plan regarding NIP and vaccine management forms/formats/registers	Pcs	5500	5500	100
2	Training of Trainers on Micro Planning based on RED strategy	Person	40	40	100
3	Workshop for the development of Micro-planning guideline	Times	1	1	100
4	Review and Planning meetings in districts with low immunization coverage	District	10	10	100
5	Data Quality Self Assessment program	District	15	15	100
6	International visit for the exchange of experience, knowledge and skills related to immunization program (EPI supervisor, Cold Chain Assistant, VHW and MCHW)	Person	25	25	100
7	Measles Rubella Campaign (nine districts of FWDR and 6 districts of MWDR)	Times	1	1	100
8	National Immunization Day	Times	1	1	100
9	Workshop on strategy and guideline development for the sustainability of maternal and neonatal tetanus elimination	Times	1	1	100
10	Mid-Level Managers training on immunization and cold chain management.	Person	30	30	100

**CHILD HEALTH: NUTRITION**

<b>SN</b>	<b>Activities</b>	<b>Unit</b>	<b>Target</b>	<b>Achievement</b>	<b>%</b>
1	Purchase and distribution of medicine, Ready to Use Food (RUTF) and other logistics for the management of Community Management of Acute Malnutrition	Pcs	624000	62400	100
2	Purchase and distribution of Micronutrient (Bal Vita) for the prevention of malnutrition among infants and children.	Pcs	3600000	3600000	100
3	Training for health service providers on emergency nutrition	Times	1	1	100
4	School health and nutrition program piloting continuation in two districts (Syangja and Sindhupalchowk)	Districts	2	2	100
5	Severe Acute Malnutrition management training for health workers	Times	2	2	100
6	Growth monitoring and nutrition counseling training for health workers	Times	1	1	100
7	Continuation of Social marketing campaign for iodized salt (Jhapa, Sunsari and Saptari)	Times	1	1	100
8	Community Management of Acute Malnutrition program( continuation in five districts and implementation in new five districts)	Times	1	1	100

**Annex 1: Major Activities Carried out in FY 2068/69**

SN	Activities	Unit	Target	Achievement	%
9	Establishment and conduction of Nutrition Rehabilitation Center(Dhaulagiri zonal hospital and Bharatpur hospital)	Times	1	1	100
10	Piloting of the revised Growth Monitoring Card	Times	1	1	100

**CHILD HEALTH: IMCI/NCP**

SN	Activities	Unit	Target	Achievement	%
1	CB-IMCI training for FCHVs	Person	200	200	100
2	Development of Referral Integrated Management of Neonatal and Childhood Illness (IMNCI) protocol	Times	1	1	100
3	Capacity building training for IMCI program focal persons	Region	1	1	100
4	Pre-service orientation workshop regarding IMCI/NCP	Times	1	1	100
5	Integrated Child Health Review (Regional level)	Times	1	1	100
6	Expansion of CB-NCP in nine districts Taplejung, Bara, Lamjung, Humla and Kanchanpur, Saptari, Bajhang, Rautahat and Baitadi	Districts	9	9	100
7	Follow up of CB-NCP training in Nawalparasi, Kapilvastu, Arghakhanchi, Bajhang, Saptari, Dailekh, Jumla and Rolpa	Districts	8	8	100
8	Printing and distribution of CB-IMCI/NCP training materials	Times	1	1	100
9	CBIMCI training for newly recruited health workers	Regions	5	5	100
10	Assessment of child health care program at Regional Hospitals	Times	1	1	100

**Program Name: Epidemiology, Malaria, Kala-azar Control and Natural Disaster Management**

Physical Progress: 71 percent

Financial Progress: 61 percent

**DISEASE CONTROL: LYMPATIC FILARIASIS**

SN	Activities	Unit	Targets	Achievement
1	TOT for HWs and training for VHWs/ MCHWs/ Volunteers	Persons	70,000	70,000
2	District level interaction for social mobilization	Time	36	36
3	Data collection / updating by drug distributors	Time	1	1
4	Mass Drug Administration on filarial day (house to house visit)	Time	1	1
6	Supervision and monitoring of MDA	Time	1	1
7	IEC activities focusing MDA	Days	10	10
8	Media interaction program	Time	1	1
10	Review and planning meeting for MDA in 46 districts	Time	2	2

**DISEASE CONTROL: DENGUE**

SN	Activities	Unit	Targets	Achievement
1	Dissemination of National Dengue Guidelines for Clinical Management, Prevention and Control	Time	1	1
2	One day interaction/training on dengue for HW and stakeholders	Districts	6	4
3	2 days training for doctors and paramedics	Times	2	2
4	2 days TOT for doctors and focal person on dengue	Person	20	20

**Annex 1: Major Activities Carried out in FY 2068/69**

<b>SN</b>	<b>Activities</b>	<b>Unit</b>	<b>Targets</b>	<b>Achievement</b>
	prevention and aedes larvae search and destroy			
5	Procurement of RDT and ELISA for diagnosis	Pieces	4,000	4,000
6	1 day central level advocacy meeting	times	1	1
7	Dengue surveillance of dengue prone districts	Months	6	6

**DISEASE CONTROL: LEPROSY**

<b>Activities</b>	<b>Units</b>	<b>Target</b>	<b>Achievement</b>	<b>Budget</b>	<b>Expenditure</b>
<b>Central level</b>					
Workshop on new strategy 2011-15 for district program managers	times	5	5	600	600
MO training	times	3	3	720	460
MO training	times	1	1	123	123
MDT Management	times	3	3	72	72
DT Management	times	3	3	99	90
Purchase & distribution of supportive device for disable leprosy affected people	times	3	0	826	
Purchase & distribution of supportive device for disable leprosy affected people	times	2	2	500	500
Purchase of complication management drugs	times	1	1	1,000	450
Transportation cost for patients	Pts	2000	1500	2,000	1,500
Slum Survey	times	5	5	800	700
Special intervention program in PR >1 endemic districts	times	30	30	3,000	3,000
Annual report publication	times	200	200	50	50
Message broadcasting through Radio/FM		200		500	
Message telecast through television	times	3	3	500	500
Message dissemination through newspaper	times	6	6	200	200
Product, print & distribution Health education materials	times	2	2	500	500
World Leprosy Day celebration at centre & regional level	times	1	1	600	480
4 monthly performance review meeting central & regional	times	3	3	1,170	1,170
4 monthly performance review meeting central	times	3	3	310	310
4 monthly coordination meeting with supporting partners	times	3	3	25	25
Program Supervision, monitoring & follow up	times	15	15	240	240
Program Supervision, monitoring & follow up central & regional level	times	22	22	500	500
Grant for leprosy patient of Khokana Leprosarium & other groups	times	3	3	1,200	1050
<b>District level</b>					
2 days program orientation for BHS staff		5	5	563	563

**Annex 1: Major Activities Carried out in FY 2068/69**

Activities	Units	Target	Achievement	Budget	Expenditure
2 days program orientation for BHS staff		3	3	446	446
Patients & patients neighbor family examination		23000	23,000	805	805
Patients & patients neighbor family examination		166666	151,122	5,000	5000
Transportation for RFT patients		3000	2912	3,000	2912
Skin Camp		2	2	100	100
Skin Camp		14	14	700	700
Leprosy message broadcasting through local FM		125	125	75	75
Leprosy message broadcasting through local FM		2000	2000	1,200	1,200
Flex Board		300	300	500	500
School health education program		1500	1500	1,500	1500
Human rights		8	8	800	800
Marginalized group participatory program		18	18	396	396
Marginalized group participatory program		150	150	3,300	3300
Marginalized group participatory program		50	50	500	500
World Leprosy Day celebration		25	25	250	250
District, PHC, HP level Program monitoring & follow up		3	3	5,100	5,100
Supervision & Monitoring		1700	1700	3,500	3,500
Income generation Program		15	15	1,500	1,500

**National Health Training Centre (NHTC)**
**Central level training programs**

SN	Program/Activities	Unit	Annual		
			Target	Achieve.	Achvd (%)
1	ToT on FCHV (Centre & RHTC)	Person	190	168	88
2	ASBA (C/S) training	Person	30	30	100
3	SBA training for ANM/SN/Doctors	Person	950	1029	100
4	SAS training for ANM/SN/Doctors	Person	300	290	97
5	SAS refresher training for doctors and nurses	Person	100	0	0
6	SAS service OJT	Person	50	24	48
7	Infection prevention training for health workers	Person	420	270	64
8	Health institution decentralization program training	Commi	100	55	55
9	Bio-medical Equipment Maintenance Training	Person	48	54	100
10	Behavior Change communication training for district supervisors	Person	25	23	92
11	COPE/PLA Training for service providers	Person	175	49	28
12	Gender Based Violence and Conflict Management Training	Person	120	60	50

**Annex 1: Major Activities Carried out in FY 2068/69**

13	COFP/Counseling	Person	120	70	58
14	Minilap for Medical Officer & Nursing Staff	Person	100	50	50
15	Non Scalpel Vasectomy (NSV)	Person	100	43	43
16	IUCD training for nurses	Person	80	73	91
17	Implant (Nurse/Paramedic)	Person	100	147	100
18	MCHW to ANM	Person	60	59	98
19	ANM to Sr. ANM	Person	100	100	100
20	AHW to Sr. AHW	Person	295	295	100
21	Emergency Service Management Training for MOs of District Hospital	Person	40	36	90
22	Minimum Initial Service Package Training for service providers	Person	40	0	0
23	Rehabilitation Training	Person	20	0	0
24	Anesthesia Assistant Training	Person	18	9	50
25	Ultra sound (USG) training for Medical officers	Person	36	9	25
26	Mid- Level Practicum Training for HA/SN	Person	60	60	100
27	Clinical Skills Training for SBA trainers	Person	16	16	100
28	Hospital/Health Facility Management training for HWs	Person	120	0	0
29	Training Methodology Training (DTOT)	Person	150	120	80
30	ICU management training for MO/Staff nurses	Person	40	0	0
31	Medico Legal training for Medical officers	Person	30	12	40
32	Mental Health training for dist. hospital service providers	Person	40	40	100
33	OT Management training for SNs	Person	36	36	100
34	Public Procurement training	Person	15	15	100
35	International Training	Batch	2	0	0
36	Annual program review, planning for SBA training	Times	1	1	100
37	Annual Training program review/planning	Times	1	1	100
38	Supervision and follow-up for Post SBA training follow up	Times	300	300	100
39	Monitoring and supervision	Times	300	300	100

**District Level Training Programs**

SN	Programme Component/Activities	Unit	Annual		
			Target	Achieve	Achvd (%)
1	Female Community Health Volunteer Basic Training	Person	4200	3334	79
2	FCHV Mothers Group Orientation	Person	4200	3365	80
3	ToT for HWs on FCHV Training	Person	50	38	76



**Annex 1: Major Activities Carried out in FY 2068/69**
**LOGISTICS MANAGEMENT**
**Central Level**

SN	Activities	Unit	Target	Achievement (%)	Remarks
<b>A. Capital</b>					
1	Procurement of Office Furniture	Time	1	100	
2	Procurement of Photocopy, Fax, Scanner and Computer	Time	1	100	
3	Procurement of Equipment and tool for Biomedical maintenance	Time	3	100	
4	Procurement of Rural Telemedicine Instrument and Equipment	Time	1	0	
5	Procurement of Hospital and lab Equipment and Instrument	Time	1	11.32	Contract signed with the Vendor for those that have no objections from WB
6	Store Building Construction in Logistics Management Division, Teku	Time	2	0	Master Plan Completed and send it to MoF with MOHP comments for Approval
<b>B. Recurrent</b>					
1	Web-based LMIS and E-Post and Inventory System Training	Time	180	100	
2	Rural Telemedicine Related Basic and Refresher Training	Time	75	100	
3	Service Contract for office security and driver	Person	18	96.33	
4	Consultancy Service for Mechanical Engineer, Biomedical technician, web-based LMIS System	Time	14	56.09	
5	Repacking of Drug and Equipment for Centre	Time	200	100	
6	Repacking of Drug and Equipment for RMS	Time	100	99.20	
7	Tender Document Preparation, Tender Notice Publication and Logistics Related Works	Time	1	100	
8	Transportation of drugs for Centre	Time	200	100	
9	Transportation of drugs for RMS	Time	200	89.95	
10.	Procurement and payment of Essential Drugs	Time	1	99.90	
11.	E-tendering	Time	1	70.40	
12.	Printing of LMIS and Stock Book	Time	1	100	
13.	Logistics and pull system related Regional and Central Review workshop	Time	5	100	
14.	Review Workshop on Rural Telemedicine Program	Time	1	100	
15.	Supervision and monitoring of logistics program for Centre	Time	300	100	
16.	Supervision and monitoring of logistics program for RMS	Time	300	100	
17.	Inspection, Test and quality control of Drugs and Instrument	Time	1	87.33	

**Annex 1: Major Activities Carried out in FY 2068/69**

SN	Activities	Unit	Target	Achievement (%)	Remarks
18.	Capacity Extension of V-SAT, Monthly Internet Fee and V-Sat Installation for newly establish 10 District	Time	1	99.65	
19.	Received of Zithromax for Trachoma program	Time	2	50.80	
20.	Payment of Custom duties for Zithromax	Time	2	98.91	
	Overall Physical Achievement			67	
	Overall Financial Achievement			54	

**District level**

SN	Activities	Unit	Target	Achievement (%)
1	Re-packing, Supply and other service for Drugs, Instrument & Equipment	Time	225	100
2	Supervision and Monitoring of Logistics Program for district	Time	375	100
3	Rural Telemedicine Program for 25 District	District	25	98
4	Transportation and Distribution of fortified flour from District to the health institutions	District	7	100
	Overall Physical Achievement			99
	Overall Financial Achievement			100

**Procurement of Drugs and Equipment for various Divisions under DoHS in FY 2068/69:**

SN	Activities	Unit	Number	Remarks
<b>A. Epidemiology &amp; Disease Control Division</b>				
1	Anti Malarial Drugs	Item	2	Not procured due to no NOL from WB
2	Kala-azar Drugs	Item	2	Not procured due to no NOL from WB
3	Supporting Medicines and supplies	Package	4	Not procured due to no NOL from WB
4	Lab supplies	Item	6	Procured
5	Tab. Diethylcarbamazine Citrate	Item	1	Procured
6	Insecticides	Item	1	Procured
7	Inj. Cell Culture Anti Rabies Vaccines and Inj. Anti Snake Venom Serum	Item	2	Procured
8	RDT for Malaria & dipstick test kit for Kala-azar	Item	2	Procured
9	Printing Materials	Item	1	Procured
<b>B. Family Health Division</b>				
1	SMNH (BEOC, CEOC, Birthing Centre, CAC, SBA) Service Delivery and Training Equipment and Instruments	package	19	9 package procured
2	Contraceptives (Male Condom, Oral Pills, IUD, DMPA)	Item	4	Procured
3	IEC Printing Materials (BPP action Kit , Training Manuals, Guidelines Identity Card )	Package	1	Procured
4	Medicine for medical abortion and PPH	Item	2	Procured
<b>C. Child Health Division</b>				
1	Cold Chain Equipments (Spare parts, Iceline Refrigerators, Icepack Freezer, Solar Hybrid, Vaccine Carrier, Walking Refrigerator, ATS System, Chest Freezer)	Package	13	7 package procured
2	Weighing Machine, ARI Sound Timer and Clean Delivery Kit	Package	2	Procured
3	EPI Vaccines(BCG, TT, OPV, JE, MR)	Item	5	Procured
4	CB IMCI Drugs Package	Package	1	Not Procured due to no NOL from WB
5	ORS, Iron, Co-trim, Albendazole	Item	4	Procured
6	Printing Materials (Nutrition and Immunization)	Package	1	Procured
7	Fortified Flour	Item	1	Procured

**Annex 1: Major Activities Carried out in FY 2068/69**

SN	Activities	Unit	Number	Remarks
8	AD syringes, Reconstitution syringes, Safety Box	Item	7	6 Procured
<b>D. Management Division</b>				
1	Computer, Multimedia, Camera, UPS etc.	Package	1	Procured
2	HMIS Forms Printing	Package	1	Procured
3	Annual Report	Item	2	Procured
<b>E. Leprosy Control Division</b>				
1	Printing Materials	Package	1	Procured
2	Medicines	package	1	Not procured due to no NOL from WB
<b>F. Primary Health Care Revitalization Division</b>				
1	Medicines for Free Health Services	Item	42	Procured

**Management**

SN	Activities	Target	Budget allocated	Weightage	Expenditure
1	Furniture procurement for central and regional offices	1	400	0.31	400
2	Construction and maintenance at DoHS	3	2500	0.47	597
3	Manual and guideline development (planning at district level, mental health booklet, Integrated supervision, oral health, AHW/ANM procedure etc)	6	1500	0.55	700
4	Planning meeting at regional level	1	1500	1.00	1274
5	Computer and projector for centre and region	9	2550	2.00	2550
6	PBMS review and follow up	2	800	0.24	300
8	Maintenance of medical equipment and cold chain of regional and district hospitals and PHCC (including matching fund)	1	26640	20.38	25991
9	Mental health training	10	4778	2.26	2884
10	Overhead tank construction in DoHS	1	2000	0.11	138
11	Service contract (IT expert, data analyst, computer assistant, driver, peon and sweeper)	16	2600	1.69	2156
12	Integrated supervision	150	6000	4.68	5971
13	Periodic review in DoHS	3	300	0.11	141
14	Health care waste management orientation and interaction	1	1500	0.46	589
15	Orientation and material development for awareness against mercury effect	1	500	0.23	293
16	District health service management strengthening program	1	500	0.38	484
17	AI training for monitoring and supervision	2	1000	0.45	568
18	Quality improvement orientation for supervisors in the region	1	400	0.22	279
19	Orientation on nursing home guideline to public, private and NGOs	2	500	0.34	435
20	Orientation and interaction for patient safety and service access increment	5	500	0.21	267

**Annex 1: Major Activities Carried out in FY 2068/69**

<b>SN</b>	<b>Activities</b>	<b>Target</b>	<b>Budget allocated</b>	<b>Weightage</b>	<b>Expenditure</b>
21	Interaction on immunization to stakeholders, political parties, DAO and the institutions approved for vaccination of hepatitis	3	300	0.20	250
22	Follow up to staffs and institutions having HF level quality system	3	300	0.21	268
23	Health Facility upgrades				
24	Orientation for nursing leadership	1	400	0.27	343
25	AI training for nursing staffs	6	1800	1.07	1363
26	Orientation on nursing standard	1	400	0.26	332
27	Basic training on tooth removal (280 persons, HA/SAHW/AHW)	280	8500	5.81	7414
28	Oral health training for health workers	30	800	0.50	636
29	Oral health orientation for VHW, MCHW, FCHV and teachers and students of public schools	5	2500	1.53	1955
30	Oral health program on effect of tobacco products in oral health	1	400	0.22	275
31	O and M survey	30	1000	0.78	1000
32	Operational and meeting cost for human organ transplant	12	400	0.23	298
33	Meetings on doctor mobilization	3	100	0.08	100
34	Regional level orientation on financial discipline and public procurement regulations	1	3790	0.25	323
35	Computer procurement for hospital database expansion	33	3300	2.04	2600
36	HMIS tools updation and annual report writing	1	750	0.44	559
37	HMIS tools printing	1	13000	8.65	11033
38	Annual report printing	1	1100	0.86	1100
39	Health facility mapping survey	2	4850	2.45	3120
40	Training on use of GIS in PME	1	700	0.28	363
41	National annual review workshop	1	900	0.55	704
42	Central support to regional and district level data verification	3	450	0.16	201
43	Software development and training for disaggregated data reporting to see social inclusion in health	1	1000	0.31	397
44	Continuation of HSIS piloting	2	1200	0.54	692
45	Training to regional and district data managers on data analysis and interpretation	1	500	0.27	346
46	ICD 10 training	1	1000	0.57	731
47	HMIS training for new staffs and refresher training	1	650	0.23	299
48	Internet, email and website operation	1	500	0.35	444
49	Software and antivirus procurement for HMIS	2	500	0.39	497
50	Minor and not conducted activities		19950	4.46	5689
	<b>Total</b>		127508	70	89349

## Annex 1: Major Activities Carried out in FY 2068/69

### Drug Administration Department

- Awareness on the rational use of medicines by different media
- Regular publication of Drug Bulletin of Nepal (DBN)
- Audit of drug industries for Good Manufacturing Practice (GMP)
- Inspection of retail & wholesale pharmacies
- Drug Analysis to check the quality of marketed drugs
- Inspection of Foreign Manufacturers before registration for the importation purposes
- Conducting examination of veterinary drug sellers' training
- Conducting refresher trainings for retailers and wholesalers
- Revision of Nepalese National Formulary
- Development of Good Manufacturing Practice Regulation (Draft)
- Revision of National Medicine Policy (Draft)
- Revision of National List of Essential Medicines

### Target Vs Achievement, FY 2068/2069

Activities	Unit	Target	Achieve.	Target Vs Ach. (%)
Drug information to the public by different media	Number	45	62	138
Publication of Drug Bulletin of Nepal	Number/ Issue	15000 (3 issues)	15,000 (3 issues)	100
Inspection of Pharmaceutical Industries	Number	100	109	109
Inspection to drug retailers & wholesalers	Number	1600	1987	124
Drug Analysis	Number	700	670	96
Audit of Pharmaceutical Analytical Laboratories	Number	30	33	110
Inspection of Foreign Companies	Times	5	5	100
Examination of Veterinary Drug Sellers' Training	Times	2	2	100

## Annex 2: Program Targets for FY 2069/70

## Child health: Immunisation

SN	Activities	Unit	Targets
1	Routine Immunisation activities aiming for higher coverage	Children <1 yr	630,429
2	TT2+ Immunisation for all pregnant women	Pregnant women	736,163

Source: EPI/CHD, DoHS

## Child health: CB-IMCI and NCP

SN	Activities	Unit	Targets
1	ORS purchase	Pkts.	9,240,000
2	Zinc tablet purchase	Tab.	42,000,000
1	Purchase of ARI Sound Timer	Units	27,400
2	Procurement of Cotrim. Paed	Tab.	35,700,000

## Epidemiology, Malaria Kala-azar Control and Natural Disaster Management

SN	Activities	Unit	Targets
<b>Epidemic disease control</b>			
1	Orientation training for district/community RRT members and health workers on epidemic control and management	No. of times	2
2	Activities for the effective implementation of IHR 2005 and Integrated Disease Surveillance System	No. of times	1
3	RRT Mobilization for outbreak /emergency preparedness, prevention, control and management	No. of times	2
<b>Malaria control</b>			
4	Master Training of Trainers (MTOT) for DHO/PHO/VCI/VCS/MI/M&E Officer in 31 districts	No. of person	155
5	Basic Malaria Microscopy Training for Lab technician & Lab Assistant	No. of person	25
6	Malaria Microscopic Cross-checking Training for Quality Assurance for Lab technician & Lab Assistant	No. of person	10
7	Purchasing medicines and diagnostic materials for malaria control	No. of times	1
8	Purchasing insecticides for malaria and kala-azar control	No. of times	1
9	Medicine, Reagent, kit for Malaria through WHO	No. of times	1
<b>Kala-azar control</b>			
10	Orientation training on kala-azar case management and control health workers	No. of person	30
11	Purchasing medicines and medical goods for Kala-azar control	No. of times	1
<b>Natural disaster management</b>			
12	orientation to RRT for RH promotion in emergency and natural disaster and prepare district level contingency planning	No. of times	2

**Annex 2: Program Targets for FY 2069/70**

SN	Activities	Unit	Targets
<b>Lymphatic filariasis elimination</b>			
13	Post MDA survey in 12 districts (previous year's payment)	No. of times	1
14	Procurement of Tab DEC	No. of times	2
15	Management of Post MDA complication, treatment of filaria cases and organise treatment camps.	No. of times	1
16	Monitoring of M.D.A Orientation and Management of Adverse Effect (Regions and Hospitals)	No. of times	1
<b>Zoonotic disease control</b>			
17	Procurement of ARV Tissues culture vaccine for approx? 5000 persons.	No. of times	120000
18	Procurement of ASVS for district	No. of piece	16000
<b>Dengue control</b>			
19	Procurement of dengue and chickun guniya diagnostic test kits	No. of times	1
20	emergency management for dengue outbreak control	No. of times	1

**Disease control: Leprosy**
**Central level**

SN	Program	Target	Budget
1	New strategy 2011-15	5	200
2	MO Training for leprosy	30	930
3	Consultancy service for MCBR study & program implementation	3	300
4	MDT Management	3	175
5	Purchase & distribution of supportive device for Disable leprosy affected people	5	250
6	Purchase drugs for Leprosy complications	1	750
7	Leprosy survey at 5 municipality for slum area	4	500
8	Special intervention program in PR >1 endemic districts	2	4,500
9	Purchase & distribution of supportive device for Disable leprosy affected people	3	450
10	Disability Study	2	800
11	Field level study & locally management and endemic districts	20	650
12	Medical, community based rehabilitation	2	400
13	Vocational training for Leprosy affected and their family	40	400
14	Record update and CBR prepare for Khokana leprosy affected	1	150
15	Transportation cost for those patients who have complication and admit at referral centre or hospital	1700	1,700
16	Leprosy referral & service centre	17	850
17	Message production for television	3	300
18	Poster, leaflet, chase card, flip chart & bulletin Printing	3	300

**Annex 2: Program Targets for FY 2069/70**

SN	Program	Target	Budget
19	World Leprosy Day celebration at centre & regional level	1	800
20	Annual report & Nirdesika publication	400	100
21	Four monthly performance review meeting central & regional level	3	360
22	Four monthly performance review meeting regional level	3	1,200
23	Four monthly coordination meeting with supporting partners at all region	3	150
24	Monitoring store and MDT from Regional Medical Store	6	180
25	Program Supervision, monitoring & follow up central & regional level	40	400
26	Supervision & monitoring	30	300
27	Grant for leprosy patient of Khokana Leprosarium & other groups	3	1,050

**District Level**

SN	Program	Target	Budget
1	2 days program orientation for BHS staff	5	563
2	2 days program orientation for BHS staff	3	446
3	Patients & patients neighbor family examination	85760	5,000
4	Transportation for RFT patients	3000	3,000
5	Community leprosy clinic	35	1,500
6	Skin Camp	30	1,500
7	Leprosy message broadcasting through local FM	1000	600
8	Leprosy message broadcasting through local FM	999	600
9	Flex board	400	200
10	Marginalized group participatory program	51	1,122
11	Marginalized group participatory program	150	3,300
12	School health education program	1500	750
13	Mainstreaming of leprosy related disability to general disabilities orientation on UNCRPD)	16	800
14	IGP and micro saving schemes for PLD/PWD through DPOs	25	1,500
15	World Leprosy Day celebration	50	1,220
16	World Leprosy Day celebration	25	425
17	District, PHC, HP level Program monitoring & follow-up workshop	3	5,500
18	District, PHC, HP level Program monitoring & follow up workshop	1	3,000
19	Supervision & Monitoring	1500	4,500

**National Health Training Centre**

SN	Activities	Unit	Target
<b>A</b>	<b>Safe Motherhood Training</b>		
1	SBA training for ANM/SN/Doctors	Person	425
2	ASBA (C/S) training	Person	10
3	Clinical Skills Training for SBA trainers	Person	16



**Annex 2: Program Targets for FY 2069/70**

<b>B</b>	<b>Family Planning Training</b>		
4	Minilap for Medical Officer & Nursing Staff	Person	100
5	Non Scalpel Vasectomy	Person	50
6	IUCD training for nurses	Person	16
7	Implant (Nurse/Paramedic)	Person	80
<b>C</b>	<b>Upgrading Training</b>		
8	Continuation of MCHW to ANM Training (of F/Y 2068/069)	Person	60
9	Continuation of ANM to Sr. ANM Training (of F/Y 2068/069)	person	100
10	Continuation of AHW to Sr. AHW Training (of F/Y 2068/069)	person	295
<b>D</b>	<b>Health Trainings</b>		
11	Bio-medical Equipment & Maintenance Training	Person	16
12	Ultra sound training for Medical officers (Continuation of F/Y 2068/069)	Person	14
13	Anesthesia Assistant Training (Continuation of F/Y 2068/069)	Person	9

**Logistics Management**

SN	Activities	Target
<b>Central Level (Budget Subhead No. 3701213/3701214)</b>		
1	Procurement of Office Furniture for centre	1
2	Procurement of Photocopy, Laptop, Desktop Computer, Printer for centre, RMS and District Web Based LMIS Program	1
3	Procurement and Payment of Hospital instrument, Equipment and Furniture of Different Division under Department of Health services	2
4	Maintenance of Biomedical Equipment, Vehicle, Cold chain equipment and other	200
5	Web based LMIS, Inventory and Internal Mailing System Basic/Refresher Training	170
6	Rural Telemedicine Basic Training for 5 new districts	15
7	Service Contract for office security-15, helper-5 and driver-4(for Teku and Pathalaiya Store)	24
8	Service Contract for Web-based LMIS, Inventory System and Internal Mailing System in districts	2
9	Service Contract for Upgrading and maintenance of Telemedicine software	1
10	Procurement of Service for Bio medical engineer-5, Bio medical Technician-6, Mechanical Assistant Engineer-1, and IT personnel-1	13
11	Repacking of Drug and Equipment for centre(Teku and Pathalaiya)	200
12	Repacking of Drug Vaccine and Equipment for RMS	100
13	Preparation and Publication of Tender Document and Logistics Related Works	3
14	Transportation work of equipments, medicine, vaccine and other health commodities for centre	450
15	Transportation work of equipments, medicine, vaccine and other health commodities for RMS	300
16	Procurement and payment of Essential Drugs	3
17	E-tendering Operation, Strengthen and internet Bill Payment	2
18	Upgrading of Web-based LMIS and Inventory Management System	1
19	Maintenance Contract management Software for Procurement	2
20	Printing of LMIS Stock Book and Standard list of Hospital Equipments	1
21	Workshop on Essential Biomedical Equipments and Instruments List for Health Facilities and Revision of LMIS and Stock Book including printing	1
22	Supervision and monitoring of logistics program for Centre	300
23	Supervision, monitoring and maintenance visited by RMS and Biomedical staffs to the districts	300
24	Fuel and other expenditure for Generator Operation in Cold Chain Maintain (For Centre, Pathalaiya and 5 RMS)	18
25	Inspection, Test and quality control of medicines at centre, region and districts	3
26	Cold Chain Maintenance and strengthening	1
27	Maintenance of V-SAT, Monthly Internet Fee for 25 Rural Telemedicine District	3
28	Received of Zithromax for Trachoma Program	1
29	Payment of Custom duties for Zithromax	1

**Annex 2: Program Targets for FY 2069/70**

SN	Activities	Target
<b>District Level (Budget Subhead No. 370804)</b>		
1	Transportation of Drugs, Vaccine Instrument and Equipment	150
2	Repacking, supply and other service for Drugs, Instrument and Equipment	150
3	Supervision and monitoring for Logistics management Programme	300
4	Rural Telemedicine Programme Operation 30 districts	55

**Public Health Laboratory Services**

Activities	Target
Procurement of Analyzer to run biochemistry service for districts	20
Procurement of Electrolyte analyzer for Zonal Hospital	5
Procurement of equipment and human resource to establish a Regional Laboratory	1
Support to establish laboratory in health post by providing infrastructure and human resource from VDC	10
Providing training and handover the equipment for the establishment of Biochemistry service if separate room and human resources is provided by hospital of corresponding districts.	15
Continuing the construction work of new building	1
Expansion of BTSC in 5 remote districts	5
Procurement of fully automatic machine and other necessary equipment for different tests	1
Maintenance and upgradation of old building and waste management.	1
Providing 2 days Biochemistry Analyzer training to laboratory staff working in districts	70
Preparation and printing of National Health Laboratory Policy and guidelines	1
Providing opportunity to study Bachelor level to government Lab Technician	5
Providing 2 weeks in-service training for newly appointed Lab Technician and Lab Assistant	12
Distribution of budget to the corresponding region to run 2 days waste management training for office helper working in the laboratory	60
Providing Bacteriology training for the Lab Technician working in laboratory	150
Providing Quality Control Training for the staff working in laboratory	40
Providing budget to run Western Regional Laboratory	75
Providing Quality Control Training to run NEQAS	1
Procurement of kits, chemicals and reagents for routine and specialized tests.	12
Providing 4 days training related to electrolyte to the staff working at Zonal Hospital	100
Providing motivation program to motivate female for Blood Donation	500
Procurement of chemicals and reagents to test and control outbreak.	1
Procurement of equipments and reagents and chemicals for National Influenza Center	1
Procurement of kits/chemicals for endocrinology tests, antiepileptic drug test and other drug level tests.	1
Management of kits and chemicals for testing HIV	700
Distribution of cash in district hospital and PHC of 68 districts for the procurement of reagent and kits.	68
Management and maintenance of cold room and maintenance of computer and laboratory software update	1
Supervision and monitoring of government and private hospital, laboratory and BTSCs	150
Giving continuity to the secretariat established for BTS	1
Giving continuity to the Quality Control program of all laboratories within the country	1000
Hiring human resources in contract for the central and regional laboratory	12

**Annex 2: Program Targets for FY 2069/70****Personnel Administration Management**

SN	Activities	Unit	Targets
1	Registration of health institutions, posts and personnel in Department of Civil Personnel Record, Ministry of General Administration	1	Continued
2	Updating of personal records in DoHS and HuRIC unit	1	Continued
3	Supervise and monitor administrative work	1	Continued
4	Update health institutions and created posts in Civil Service Registration Department, Ministry of General Administration	1	Continued
5	Appointment of MBBS graduates under government scholarship		Continued
6	Capacity building of administrative staff of health institutions	1	Continued
7	O&M survey	30	Institutions

**Department of Drug Administration**

SN	Activities	Unit	Target
1	Drug information to the public by different media	Number	45
2	Publication of Drug Bulletin	Number/ issue	15000 (3 issues)
3	Inspection of Pharmaceutical Industries	Number	90
4	Inspection to drug retailers & whole sellers	Number	1400
5	Drug Analysis	Number	600
6	Audit of Pharmaceutical Analytical Laboratories	Number	16

**Ayurveda****Ayurved vibhagh (3701293/4)**

- Procurement & payment of essential Ayurveda drugs & transportation to districts
- Procurement of Photocopy, Fax, Scanner, computer for Zonal Ayurveda Aushadhalaya & District Ayurveda health centre
- Establishment of patient recording reporting networking system software among Ayurveda institutions
- Procurement of office furniture for centre
- Establishment of Regional Ayurveda Hospital at Dhangadi & Janakpur
- Strengthening program of Naturopathy, Yoga, Homeopathy, Unani, Aamchi etc.
- Purvakarma, Naturopathy & Yoga Health camp
- Total Quality Management & GESI Training to Ayurveda Physician
- Translation of traditional books of Amchi & other Alternative medicine
- Quality monitoring of different Ayurvedic productions in Nepalese market
- Monitoring of services provided by private Ayurveda & Alternative therapies
- Procurement of books and magazine
- Panchakarma & Yoga training for Kaviraj & Vaidya
- Annual review meeting in each district and center
- Revision, evaluation, monitoring and update of Ayurvedic health policy and development of code of ethics
- Free health camps
- Preparation of Ayurveda pharmacopeias
- Evaluation and monitoring

**Ayurveda Sewa karyakarm (3708093/4)**

- Connection of Internet at Zonal Ayurveda Aushadhalaya & District Ayurveda health centre
- Powder (Churna) medicine production in ZAD & DAHC
- Strengthening of herbal garden
- Workshop and discussion with local traditional healers
- Preparation of informative books, pamphlets & brochure related to Ayurveda
- School Ayurveda health program
- Construction of compound wall in Ayurvedic institutions
- Building construction of 28 Ayurvedic institutions
- Promotive Panchakarma/Rasayan/Yoga programme for older population
- Awareness program for medicinal plants
- Program for lactating mother (Distribution of galactogogue medicine)
- Observation tour
- Skill development training
- Awareness program on Epidemic diseases & commonly used medicinal plants
- Procurement of treatment equipment
- Ayurveda message development & publications
- Procurement of vehicle for ayurveda institutions, Ambulance for the central & regional Ayurveda hospital & motorcycle for zonal ayurveda aushadhalaya & district ayurveda health centres









**Raw Data**  
Health Institution  
Sheet 2 of 3

District Code	District Name	Sub Health Post						PHC/Outreach Clinic						EPI Clinic								
		Received Reports		Current Month Received Reports	Total No. of Reports Received	Service Provided to Total Patients (New+Old)	Integrated Supervision		Total No. of Clinics	Current Month Received Reports		Total No. of Reports Received	Service Provided to Total Patients (New+Old)	Integrated Supervision		Total No. of EPI Clinics	Current Month Received Reports		Total No. of Reports Received	Service Provided to Total Patients (New+Old)	Integrated Supervision	
		Total No. of Sub Health Post	Received Reports				Total Institution Supervised	Number of visits		Total Institution Supervised	Number of visits			Total Institution Supervised	Number of visits		Total Institution Supervised	Number of visits				
	Mountain	192	364	343	4223	1001952	478	446	1610	1201	14556	274034	508	470	1901	1577	19570	264319	621	562		
	Hill	468	1509	1492	18044	5321591	4505	3041	6283	5419	65245	1383255	7827	6665	7874	7438	88012	1446058	10688	9250		
	Terai	240	1114	1105	13329	6008416	3061	2699	4928	4245	50710	1137374	6530	5963	6871	6640	77581	1976572	9352	8294		
	<b>National Total</b>	<b>900</b>	<b>2987</b>	<b>2940</b>	<b>35596</b>	<b>12331959</b>	<b>8044</b>	<b>6186</b>	<b>12821</b>	<b>10865</b>	<b>130511</b>	<b>2794663</b>	<b>14865</b>	<b>13098</b>	<b>16646</b>	<b>15655</b>	<b>185163</b>	<b>3686949</b>	<b>20661</b>	<b>18106</b>		
1	Taplejung	12	43	42	500	85521	54	54	200	176	2049	31255	67	67	188	183	2064	20648	65	65		
2	Panchthar	12	30	30	339	86763	3	3	156	147	1700	42764	12	9	211	205	2308	34734	9	9		
3	Ilam	12	38	38	456	109230	68	60	188	180	2142	58045	286	261	177	177	2077	41808	233	215		
4	Jhapa	12	38	38	456	296319	27	30	163	144	1726	52361	155	166	268	252	2801	135302	233	237		
5	Morang	12	49	49	588	337093	253	254	257	247	2940	113386	894	950	319	312	3699	157603	1148	1149		
6	Sunsari	12	40	40	480	422731	129	129	168	160	1837	38805	273	273	297	287	3427	122397	302	302		
7	Dhankuta	12	16	16	192	57773	116	142	80	76	877	19197	33	25	152	149	1709	43308	75	56		
8	Tehrathum	12	14	14	168	36222	10	11	68	57	719	9285	10	11	118	112	1269	12835	16	16		
9	Sankhuwasabha	12	20	17	217	67115	11	29	113	79	1129	18303	16	16	200	158	2026	19938	19	21		
10	Bhojpur	12	51	51	612	141246	87	87	196	196	2335	33511	111	111	196	196	2344	23737	160	160		
11	Solukhumbu	12	23	22	267	93851	21	21	86	56	738	10333	29	28	123	102	1240	13044	39	39		
12	Okhaldhunga	12	45	45	540	152783	243	135	169	156	1871	25474	197	151	168	167	1919	17372	186	148		
13	Khotang	12	58	45	670	176263	125	106	230	151	2195	28720	105	100	233	173	2346	27719	124	105		
14	Udaypur	12	35	35	420	142615	0	0	157	129	1629	34947	7	7	208	194	2289	47794	20	20		
15	Saptari	12	103	103	1236	457071	137	135	407	396	4421	98468	345	326	459	459	5133	117395	411	423		
16	Siraha	12	93	93	1115	464410	428	425	276	264	3046	64058	1458	1458	488	478	5406	120225	1814	1814		
	<b>Eastern</b>	<b>192</b>	<b>696</b>	<b>678</b>	<b>8256</b>	<b>3127006</b>	<b>1712</b>	<b>1621</b>	<b>2914</b>	<b>2614</b>	<b>31354</b>	<b>678912</b>	<b>3998</b>	<b>3959</b>	<b>3805</b>	<b>3604</b>	<b>42057</b>	<b>955859</b>	<b>4854</b>	<b>4779</b>		
17	Dhanusha	12	88	86	1050	399596	347	291	505	248	3318	81165	201	150	525	489	5628	121458	233	175		
18	Mahottari	12	67	65	802	365900	502	351	304	289	3267	106355	1248	890	376	370	4310	122075	1652	1110		
19	Sarlahi	12	78	78	936	411805	30	33	308	206	2403	59736	144	158	425	398	4655	139552	348	367		
20	Sindhuli	12	35	35	419	95721	4	3	195	140	1503	23949	4	9	205	192	2241	39569	4	10		
21	Ramechhap	12	35	35	420	102721	0	0	139	138	1592	24573	0	0	187	186	2169	24754	1	1		
22	Dolkha	12	43	43	514	127760	2	2	148	147	1705	22128	1	1	169	169	1995	24791	0	0		
23	Sindhupalchowk	12	65	64	779	157303	41	38	240	195	2373	39178	42	40	254	238	2744	33718	63	62		
24	Kavre	12	80	80	960	281701	125	101	306	281	3477	77247	521	451	332	317	2914	42934	649	463		
25	Lalitpur	12	29	29	348	0	0	0	61	61	732	0	0	0	110	110	1320	0	0	0		
26	Bhaktapur	12	12	12	142	68005	15	15	50	44	525	9166	52	52	144	150	1700	36348	73	73		
27	Kathmandu	12	43	43	516	207707	389	409	134	124	1462	33771	747	756	174	168	2001	70008	954	946		
28	Nuwakot	12	53	53	611	103167	53	85	180	156	1852	31074	100	139	229	215	2504	37257	156	169		
29	Rasuwa	12	6	6	72	11145	12	12	42	38	445	7927	72	63	57	51	635	6343	69	55		
30	Dhading	12	24	24	334	138182	91	61	191	172	2107	52255	460	246	225	221	2576	55033	552	311		
31	Makawanpur	12	30	28	328	114854	47	49	156	140	1541	38320	31	32	238	224	2525	46037	67	68		
32	Rautahat	12	85	81	974	361177	207	163	366	304	3946	75942	360	288	482	396	5212	138127	522	419		
33	Bara	12	83	83	996	416044	543	432	297	255	2985	45588	568	490	492	482	5704	105586	1100	862		
34	Parsa	12	71	71	852	0	0	0	330	330	3960	0	0	0	384	384	4608	0	0	0		
35	Chitwan	12	31	31	372	207697	5	3	106	91	1134	26579	54	41	226	226	2605	81674	97	90		
	<b>Central</b>	<b>228</b>	<b>958</b>	<b>947</b>	<b>11425</b>	<b>3570485</b>	<b>2413</b>	<b>2048</b>	<b>4058</b>	<b>3359</b>	<b>40327</b>	<b>754953</b>	<b>4605</b>	<b>3806</b>	<b>5234</b>	<b>4996</b>	<b>58046</b>	<b>1125264</b>	<b>6540</b>	<b>5181</b>		
36	Gorkha	12	55	53	658	182014	55	53	240	191	2350	40749	539	373	257	242	2813	31401	699	521		
37	Lamjung	12	45	45	551	118409	67	67	170	170	1946	32276	105	105	197	195	2339	25561	140	140		
38	Tanahun	12	31	31	371	92102	181	181	170	128	1630	26726	281	281	235	230	2733	43513	435	435		
39	Syangja	12	55	55	660	182239	154	154	208	190	2363	49789	518	562	240	240	2851	49275	735	1449		
40	Kaski	12	34	34	408	105350	176	189	157	149	1737	62282	630	622	190	187	2243	89647	718	701		
41	Manang	12	3	3	40	1615	10	8	13	11	121	488	16	13	20	19	222	240	16	12		
42	Mustang	12	7	7	83	10476	26	27	25	21	199	1315	39	39	48	41	410	1371	61	61		
43	Myagdi	12	27	27	355	72634	68	69	103	79	902	14522	57	49	109	111	1258	18355	59	46		
44	Parbat	12	42	42	495	136476	63	63	104	89	1089	15901	218	218	163	139	1645	18005	261	261		
45	Baglung	12	49	49	588	198682	1459	161	124	113	1235	27402	364	153	182	2	1744	37205	694	217		
46	Gulmi	12	64	64	768	271624	28	18	236	196	2307	42334	874	508	311	318	3728	43914	1268	552		
47	Palpa	12	53	53	636	167376	96	97	187	174	2129	32019	230	227	266	266	3170	31476	415	415		
48	Nawalparasi	12	53	53	636	310273	269	269	224	196	2402	42338	404	401	343	336	3923	96944	898	886		
49	Rupandehi	12	58	58	696	0	0	0	229	229	2748	0	0	0	317	317	3804	0	0	0		
50	Kapilvastu	12	58	57	712	361514	125	125	278	278	3217	76265	91	91	385	385	4443	100569	131	131		
51	Arghakhanchi	12	31	31	353	121022	121	116	69	66	798	17234	284	284	184	178	1953	28806	451	422		
	<b>Western</b>	<b>192</b>	<b>665</b>	<b>662</b>	<b>8010</b>	<b>2331806</b>	<b>2898</b>	<b>1597</b>	<b>2537</b>	<b>2280</b>	<b>27173</b>	<b>481640</b>	<b>4650</b>	<b>3926</b>	<b>3447</b>	<b>3206</b>	<b>39279</b>	<b>616282</b>	<b>6981</b>	<b>6249</b>		
52	Pyuthan	12	29	29	348	136174	14	14	155	131	1474	24299	10	10	251	249	2873	41744	28	28		
53	Rolpa	12	34	34	405	125917	4	4	180	165	1808	34050	14	14	215	212	2447	34577	18	18		
54	Rukum	12	34	34	401	103778	34	30	125	100	1109	20486	27	27	165	153	1712	31588	61	53		
55	Salyan	12	36	36	432	172829	28	28	165	102	1464	30318	25	25	227	220	2455	34209	45	45		
56	Dang	12	21	21	252	188394	0	0	124	105	1213	31890	0	14	197	190	2127	91204	1	1		
57	Banke	12	35	35	420	305982	0	0	145	129	1448	42090	0	0	303	301	3483	88286	0	0		
58	Bardiya	12	22	22	264	268464	0	0	156	131	1643	64246	81	82	190	181	2143	63784	80	81		
59	Surkhet	12	23	23	276	136091	129	129	159	158	1816	46565	356	304	188	187	2215	58844	346	297		
60	Dailekh	12	45	45	540	202650	6															





**Analysed Data**  
**Reporting Status Sheet 1 of 2**

District Code	District Name	Received Report	Reporting Status (%)									
			District	Hospital (Reported to Public Health)	PHC	HP	SHP	ORC	EPIC	FCHV	NGO	PHI
	<b>Mountain</b>	<b>192</b>	<b>100</b>	<b>99.48</b>	<b>99.58</b>	<b>97.73</b>	<b>95.91</b>	<b>76.15</b>	<b>85.69</b>	<b>82.63</b>	<b>58.47</b>	<b>52.54</b>
	<b>Hill</b>	<b>468</b>	<b>100</b>	<b>97.84</b>	<b>99.75</b>	<b>99.36</b>	<b>98.99</b>	<b>86.9</b>	<b>93.02</b>	<b>89.67</b>	<b>72.52</b>	<b>57.35</b>
	<b>Terai</b>	<b>240</b>	<b>100</b>	<b>97.02</b>	<b>99.31</b>	<b>99.73</b>	<b>99.45</b>	<b>85.96</b>	<b>94.13</b>	<b>95.24</b>	<b>76.18</b>	<b>70.34</b>
	<b>National Total</b>	<b>900</b>	<b>100</b>	<b>97.88</b>	<b>99.55</b>	<b>99.11</b>	<b>98.78</b>	<b>85.19</b>	<b>92.64</b>	<b>90.73</b>	<b>72.74</b>	<b>61.43</b>
1	Taplejung	12	100	100.00	100	100	96.9	85.38	91.49	91.12	63.33	73.33
2	Panchthar	12	100	100.00	100	100	94.17	90.81	91.15	94.65	58.33	
3	Ilam	12	100	100.00	100	100	100	94.95	97.79	81.35	100	100
4	Jhapa	12	100	100.00	100	100	100	88.24	87.1	95.79	68.28	55.83
5	Morang	12	100	100.00	100	100	100	96.58	96.63	98.94	100	97.22
6	Sunsari	12	100	100.00	100	100	100	91.12	96.16	92.42	97.73	98.61
7	Dhankuta	12	100	70.83	100	100	100	91.35	93.7	92.65	100	100
8	Teharthur	12	100	100.00	100	100	100	88.11	89.62	81.65		
9	Sankhuwasabha	12	100	91.67	95.83	97.4	90.42	83.26	84.42	70.65		60.61
10	Bhojpur	12	100	100.00	100	100	100	99.28	99.66	98.34		25
11	Solukhumbu	12	100	100.00	100	100	96.74	71.51	82.45	81.54	100	
12	Okhaldhunga	12	100	91.67	100	100	100	92.76	95.19	84.9	66.67	66.67
13	Khotang	12	100	91.67	95.83	88.34	93.97	81.48	83.91	89.23		75
14	Udaypur	12	100	100.00	100	100	100	86.46	91.71	84.98	87.5	66.67
15	Saptari	12	100	100.00	100	100	100	90.52	93.19	94.9		
16	Siraha	12	100	100.00	100	100	99.91	92.08	92.32	96.29	38.24	15.15
	<b>Eastern</b>	<b>192</b>	<b>100</b>	<b>95.83</b>	<b>99.66</b>	<b>98.8</b>	<b>98.65</b>	<b>89.98</b>	<b>92.05</b>	<b>90.23</b>	<b>80.37</b>	<b>67.03</b>
17	Dhanusha	12	100	100.00	100	100	99.43	56.11	89.33	96.31	33.33	58.33
18	Mahottari	12	100	100.00	100	100	99.75	89.56	95.52	95.5	87.5	72.92
19	Sarlahi	12	100	100.00	100	100	100	65.02	91.27	95.12	86.67	31.94
20	Sindhuli	12	100	100.00	100	100	99.76	64.23	91.1	92.36	16.67	0
21	Ramechhap	12	100	100.00	100	100	100	95.44	96.66	90.24	100	
22	Dolkha	12	100	100.00	100	99.07	99.61	95.89	98.37	82.67	62.5	33.33
23	Sindhupalchowk	12	100	100.00	100	100	99.87	82.34	90.09	87.86	66.67	
24	Kavre	12	100	100.00	100	100	100	94.56	73.23	94.08	49.14	58.33
25	Lalitpur	12	100	100.00	100	100	100	100	100	100	100	100
26	Bhaktapur	12	100	100.00	100	100	98.61	87.5	98.38	93.92	72.5	85.42
27	Kathmandu	12	100	100.00	100	100	100	90.92	95.83	91.7	56.99	49.5
28	Nuwakot	12	100	100.00	94.44	96.97	96.07	93.54	93.15	72.81	72.92	28.57
29	Rasuwa	12	100	100.00	100	100	100	88.29	92.84	90.99	91.67	16.67
30	Dhading	12	100	100.00	100	97.54	97.09	87.5	91.8	91.99	62.39	16
31	Makawanpur	12	100	100.00	100	100	91.11	82.32	88.41	91.28	94.05	100
32	Rautahat	12	100	100.00	97.92	95.83	95.49	89.85	90.11	99.02	83.33	
33	Bara	12	100	100.00	100	100	100	83.75	96.61	98.14	100	
34	Parsa	12	100	100.00	100	100	100	100	100	100	100	100
35	Chitwan	12	100	100.00	88.89	100	100	88.59	96.34	90.9	64.04	60.06
	<b>Central</b>	<b>228</b>	<b>100</b>	<b>100.00</b>	<b>98.89</b>	<b>99.37</b>	<b>98.9</b>	<b>83.15</b>	<b>92.37</b>	<b>91.7</b>	<b>71.05</b>	<b>56.04</b>
36	Gorkha	12	100	100.00	100	100	99.7	81.6	91.21	89.53	51.39	100
37	Lamjung	12	100	100.00	100	100	99.28	97.06	98.94	99.29	96.63	100
38	Tanahu	12	100	100.00	100	100	99.73	79.9	96.91	93.63	83.33	95.83
39	Syangja	12	100	87.50	100	100	100	94.67	98.99	99.46	87.5	91.67
40	Kaski	12	100	100.00	100	100	100	92.2	98.38	85.39	97.22	93.18
41	Manang	12	100	100.00	100	100	100	77.56	92.5	78.74	44.44	
42	Mustang	12	100	100.00	100	97.92	98.81	66.33	71.18	69.68	70.59	
43	Myagdi	12	100	100.00	100	100	99.72	72.98	96.18	91.44	30	91.67
44	Parbat	12	100	100.00	100	98.33	98.21	87.26	84.1	93.28	50	
45	Baglung	12	100	100.00	100	100	100	83	79.85	88.92		84.62
46	Gulmi	12	100	100.00	100	100	100	85.79	97.87	94.24	100	60.42
47	Palpa	12	100	100.00	100	100	100	94.88	99.31	96.76	100	100
48	Nawalparasi	12	100	100.00	100	100	100	89.36	95.31	96.13	91.76	97.37
49	Rupandehi	12	100	100.00	100	100	100	100	100	100	100	100
50	Kapilvastu	12	100	95.83	100	98.63	97.4	96.03	96.09	95.43	31.82	
51	Arghakhanchi	12	100	100.00	100	97.92	94.89	96.38	88.09	77.51	100	
	<b>Western</b>	<b>192</b>	<b>100</b>	<b>97.46</b>	<b>100</b>	<b>99.59</b>	<b>99.31</b>	<b>89.74</b>	<b>94.75</b>	<b>92.46</b>	<b>81.38</b>	<b>93.24</b>
52	Pyuthan	12	100	100.00	100	100	100	79.25	95.39	93.84	20.83	
53	Rolpa	12	100	100.00	100	100	99.26	83.7	94.84	87.44		
54	Rukum	12	100	100.00	100	100	98.28	73.93	86.46	76.46		66.67
55	Salyan	12	100	100.00	100	100	100	73.94	90.12	96.34		
56	Dang	12	100	100.00	100	100	100	81.52	89.97	89.7	87.5	20.51
57	Banke	12	100	41.67	100	100	100	83.22	95.79	94.12	100	90.48
58	Bardiya	12	100	100.00	100	100	100	87.77	93.99	94.07	34.9	15.38
59	Surkhet	12	100	100.00	100	100	100	95.18	98.18	91.85	100	
60	Dailekh	12	100	100.00	100	100	100	87.64	93.92	95.87	75	100
61	Jajarkot	12	100	100.00	100	100	100	91.09	95.93	92.07		
62	Dolpa	12	100	100.00		91.67	69.05	33.67	57.25	33.21		
63	Jumla	12	100	100.00	100	100	100	82.18	89.58	81.15	8.33	
64	Kailikot	12	100	100.00	100	100	99.44	68.75	91.37	85.93		
65	Mugu	12	100	100.00	100	100	80.7	47.33	42.17	64.7	2.08	
66	Humla	12	100	100.00		92.11	78.13	47.94	80.27	79.18	100	
	<b>Mid Western</b>	<b>180</b>	<b>100</b>	<b>96.57</b>	<b>100</b>	<b>98.47</b>	<b>97.14</b>	<b>78.53</b>	<b>89.99</b>	<b>88.08</b>	<b>50.68</b>	<b>66.25</b>
67	Bajura	12	100	100.00	100	100	100	70.18	86.41	89.88	33.33	
68	Bajhang	12	100	100.00	100	99.17	100	68.45	93.03	86.92		100
69	Achham	12	100	100.00	100	99.31	99.58	86.01	99.48	88.72	100	
70	Doti	12	100	100.00	100	100	100	71.22	92.27	88.04	60	
71	Kailali	12	100	91.67	100	100	100	87.94	93.3	92.26	71.43	54.41
72	Kanchanpur	12	100	100.00	100	100	100	90.34	98.06	87.63	91.3	100
73	Dadeldhura	12	100	100.00	100	100	100	66.33	93.94	79.47	87.5	
74	Baitadi	12	100	100.00	100	100	99.85	97.61	97.92	93.78	100	
75	Darchula	12	100	100.00	100	96.97	97.99	85.42	93.86	95.19		
	<b>Far Western</b>	<b>108</b>	<b>100</b>	<b>98.48</b>	<b>100</b>	<b>99.43</b>	<b>99.68</b>	<b>82.01</b>	<b>94.64</b>	<b>89.5</b>	<b>79.4</b>	<b>61.73</b>

**Analysed Data**  
Reporting Status Sheet 2 of 2

District Code	District Name	Received Report	Average no of People Served								
			Hospital (per day)	PHC (per day)	HP (per day)	SHP (per day)	ORC (per clinic)	EPIC (per clinic)	FCHV (reporting period)	NGO (per day)	PHI (per day)
	Mountain	192	73	37	14	10	19	14	11	13	20
	Hill	468	126	39	21	12	21	16	17	23	35
	Terai	240	198	56	37	19	22	25	28	14	39
	National Total	900	137	46	23	14	21	20	20	18	36
1	Taplejung	12	123	13	15	7	15	10	6	23	14
2	Panchthar	12	151	23	16	11	25	15	20	8	
3	Ilam	12	88	22	14	10	27	20	10	51	19
4	Jhapa	12	254	65	54	27	30	48	63	17	37
5	Morang	12	405	61	47	24	39	43	57	39	79
6	Sunsari	12	175	55	57	37	21	36	39	10	16
7	Dhankuta	12	146	34	15	13	22	25	24	26	7
8	Teharthur	12	91	17	14	9	13	10	7		
9	Sankhuwasabha	12	117	27	18	13	16	10	21		15
10	Bhojpur	12	139	28	20	10	14	10	18	7	12
11	Solukhumbu	12	74	37	17	15	14	11	9	19	
12	Okhaldhunga	12	52	20	24	12	14	9	13	115	6
13	Khotang	12	138	24	15	11	13	12	5		2
14	Udaypur	12	102	76	27	14	21	21	19	7	12
15	Saptari	12	221	42	34	15	22	23	33		
16	Siraha	12	78	48	38	17	21	22	22	1	8
	Eastern	192	155	42	24	16	22	23	24	22	38
17	Dhanusha	12	672	52	42	16	24	22	25	45	16
18	Mahottari	12	117	79	42	19	33	28	35	9	18
19	Sarlahi	12	107	69	30	18	25	30	14	20	52
20	Sindhuli	12	66	28	13	10	16	18	15	5	
21	Ramechhap	12	73	34	17	10	15	11	15	29	
22	Dolkha	12	78	42	16	10	13	12	6	14	34
23	Sindhupalchowk	12	141	63	17	8	17	12	13	11	25
24	Kavre	12	305	35	27	12	22	15	16	14	8
25	Lalitpur	12	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	91	36	28	20	17	21	19	24	48
27	Kathmandu	12	146	31	23	17	23	35	17	41	24
28	Nuwakot	12	67	23	13	7	17	15	6	13	19
29	Rasuwa	12	19	30	10	6	18	10	13	3	10
30	Dhading	12	105	82	25	17	25	21	20	17	8
31	Makawanpur	12	204	144	24	15	25	18	38	13	34
32	Rautahat	12	106	63	26	15	19	27	21	14	
33	Bara	12	149	39	34	17	15	19	23	25	
34	Parsa	12	0	0	0	0	0	0	0	0	0
35	Chitwan	12	345	127	47	23	23	31	45	13	57
	Central	228	149	53	22	13	19	19	17	17	24
36	Gorkha	12	130	27	13	12	17	11	13	16	35
37	Lamjung	12	176	19	13	9	17	11	13	6	19
38	Tanahu	12	105	52	15	10	16	16	15	15	25
39	Syangja	12	52	71	24	12	21	17	20	2	5
40	Kaski	12	716	25	21	11	36	40	21	91	203
41	Manang	12	21		3	2	4	1	2	1	
42	Mustang	12	33	18	6	5	7	3	2	5	
43	Myagdi	12	98	43	14	9	16	15	15	2	11
44	Parbat	12	112	27	19	11	15	11	18	6	
45	Baglung	12	145	39	19	14	22	21	11		32
46	Gulmi	12	192	38	26	15	18	12	16	5	15
47	Palpa	12	31	41	48	11	15	10	37	130	345
48	Nawalparasi	12	153	52	24	20	18	25	32	12	37
49	Rupandehi	12	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	81	55	35	21	24	23	12	15	
51	Arghakhanchi	12	59	67	23	14	22	15	12	0	
	Western	192	113	38	20	12	18	16	15	25	69
52	Pyuthan	12	114	35	24	16	16	15	22	7	
53	Rolpa	12	59	42	18	13	19	14	17		
54	Rukum	12	122	23	30	11	18	18	12		143
55	Salyan	12	175	42	22	17	21	14	27		
56	Dang	12	206	66	43	31	26	43	22	74	4
57	Banke	12	723	57	41	30	29	25	35	38	178
58	Bardiya	12	99	61	61	42	39	30	41	17	23
59	Surkhet	12	126	65	27	21	26	27	17	11	
60	Dailekh	12	78	40	21	16	21	15	26	22	18
61	Jajarkot	12	105	20	24	14	25	21	14		
62	Dolpa	12	70		5	5	10	9	3		
63	Jumla	12	49	28	12	11	20	22	12	3	
64	Kalikot	12	80	12	14	8	19	19	19		
65	Mugu	12	49	10	10	7	12	15	7	0	
66	Humla	12	96		10	9	33	12	7	37	
	Mid Western	180	126	44	24	18	23	21	23	26	141
67	Bajura	12	64	78	26	16	45	17	26	2	
68	Bajhang	12	52	43	17	10	24	21	18		15
69	Achham	12	116	39	29	13	29	17	18	25	
70	Doti	12	78	15	21	14	34	13	17	1	
71	Kailali	12	276	66	48	34	39	35	53	3	39
72	Kanchanpur	12	290	58	56	46	37	47	43	10	5
73	Dadeldhura	12	104	55	25	23	66	26	24	3	
74	Baitadi	12	81	46	20	12	25	15	18	7	
75	Darchula	12	105	51	17	13	27	16	12		
	Far Western	108	138	51	27	17	33	22	29	7	32





## Raw Data

EPI

Sheet 3 of 3

District Code	District Name	Received Reports	Communicable & Immunizable Diseases										
			Measles	Diphtheria	Whooping Cough	Neonatal Tetanus	Tetanus	Tuberculosis	Acute Flacid Paralysis(AFP)	Rubella	Mumps	Chicken Pox	Hepatitis B
Mountain		192	416	1	91	0	5	624	15	32	3466	1405	143
Hill		468	2271	121	811	29	258	8434	165	531	18879	7584	1213
Terai		240	675	16	693	3	96	10437	397	238	13529	4725	265
National Total		900	3362	138	1595	32	359	19495	577	801	35874	13714	1621
1 Taplejung		12	32	0	2	0	0	28	8	9	463	218	56
2 Panchthar		12	10	0	11	1	0	24	0	0	492	113	8
3 Ilam		12	41	0	0	0	2	51	0	17	677	162	2
4 Jhapa		12	32	0	3	0	0	1207	138	20	1546	626	18
5 Morang		12	96	0	4	0	2	849	89	36	1205	706	134
6 Sunsari		12	12	0	10	0	0	202	3	2	940	156	0
7 Dhankuta		12	20	0	0	0	1	52	0	4	347	165	0
8 Teharthur		12	19	1	8	0	0	30	18	0	297	364	5
9 Sankhuwasabha		12	48	1	3	0	2	59	0	11	640	235	2
10 Bhojpur		12	237	6	0	0	3	32	0	3	1086	144	0
11 Solukhumbu		12	0	0	0	0	0	27	0	0	335	116	4
12 Okhaldhunga		12	24	0	7	2	1	145	23	10	603	141	1
13 Khotang		12	52	0	12	0	0	17	0	30	784	319	3
14 Udaypur		12	21	0	23	0	2	218	0	1	847	296	3
15 Saptari		12	0	2	20	0	3	100	2	3	451	1	0
16 Siraha		12	8	0	0	0	24	225	3	1	485	2	1
Eastern		192	652	10	103	3	40	3266	284	147	11198	3764	237
17 Dhanusha		12	22	1	1	1	0	314	30	0	141	46	0
18 Mahottari		12	76	0	11	0	15	593	4	0	363	150	2
19 Sarlahi		12	115	0	111	0	11	614	14	89	532	174	0
20 Sindhuli		12	310	0	17	0	9	207	24	8	444	45	3
21 Ramechhap		12	69	15	26	0	7	42	0	0	884	99	0
22 Dolkha		12	40	0	22	0	1	141	4	0	446	84	9
23 Sindhupalchowk		12	188	0	18	0	1	40	0	6	729	325	17
24 Kavre		12	153	1	4	0	0	116	1	49	563	171	1
25 Lalitpur		12	0	0	0	0	0	0	0	0	0	0	0
26 Bhaktapur		12	150	1	88	0	0	196	1	4	171	196	5
27 Kathmandu		12	264	46	162	2	90	2598	43	43	427	506	917
28 Nuwakot		12	90	3	144	1	6	63	6	5	382	121	10
29 Rasuwa		12	1	0	0	0	0	3	0	1	60	71	0
30 Dhading		12	58	1	49	0	2	233	3	70	1225	254	17
31 Makawanpur		12	71	0	1	0	1	263	6	3	770	315	7
32 Rautahat		12	26	1	5	0	10	281	4	13	384	97	17
33 Bara		12	68	0	221	0	7	615	9	11	1162	141	22
34 Parsa		12	0	0	0	0	0	0	0	0	0	0	0
35 Chitwan		12	28	0	144	0	7	791	7	3	486	469	30
Central		228	1729	69	1024	4	167	7110	156	305	9169	3264	1057
36 Gorkha		12	37	0	0	0	0	361	0	0	789	454	0
37 Lamjung		12	10	0	5	0	0	20	4	7	321	155	4
38 Tanahu		12	27	0	23	0	5	250	5	16	426	243	1
39 Syangja		12	101	0	0	0	4	248	0	23	801	272	33
40 Kaski		12	38	0	79	0	2	253	7	14	324	299	64
41 Manang		12	0	0	3	0	0	1	0	1	1	0	0
42 Mustang		12	0	0	0	0	0	0	1	0	44	25	1
43 Myagdi		12	8	0	4	0	1	71	0	7	408	188	17
44 Parbat		12	23	0	5	0	0	73	1	12	287	129	1
45 Baglung		12	1	0	0	3	4	40	0	44	486	87	5
46 Gulmi		12	8	0	1	0	0	51	1	16	432	159	5
47 Palpa		12	53	0	2	0	39	1240	6	11	365	276	58
48 Nawalparasi		12	15	0	2	2	2	1129	5	14	671	208	9
49 Rupandehi		12	0	0	0	0	0	0	0	0	0	0	0
50 Kapilvastu		12	50	0	110	0	0	426	63	0	975	199	0
51 Arghakhanchi		12	4	0	0	0	0	47	0	3	519	121	3
Western		192	375	0	234	5	57	4210	93	168	6849	2815	201
52 Pyuthan		12	3	0	0	0	0	270	1	0	446	67	1
53 Rolpa		12	36	7	10	6	66	120	1	3	424	129	6
54 Rukum		12	0	0	0	0	0	128	0	50	187	163	5
55 Salyan		12	73	0	0	0	1	69	1	1	199	164	1
56 Dang		12	26	0	0	0	0	1025	2	0	1147	303	0
57 Banke		12	8	8	4	0	4	224	3	12	355	152	19
58 Bardiya		12	12	0	2	0	2	519	6	10	1331	231	0
59 Surkhet		12	28	0	2	2	0	379	0	0	598	328	9
60 Dailekh		12	0	0	0	0	3	49	2	14	1081	158	0
61 Jajarkot		12	59	38	49	11	1	15	3	0	172	114	8
62 Dolpa		12	0	0	0	0	0	0	0	0	0	0	0
63 Jumla		12	1	0	1	0	0	1	0	0	20	45	0
64 Kalikot		12	89	0	4	0	0	3	1	3	116	79	2
65 Mugu		12	10	0	0	0	0	0	0	0	9	3	0
66 Humla		12	0	0	11	0	0	0	0	0	236	13	2
Mid Western		180	345	53	83	19	77	2802	20	93	6321	1949	53
67 Bajura		12	0	0	23	0	0	43	0	0	146	40	1
68 Bajhang		12	2	0	4	0	1	90	0	1	138	134	49
69 Achham		12	11	0	16	1	0	62	6	0	187	314	8
70 Doti		12	5	1	19	0	2	68	0	27	51	85	0
71 Kailali		12	69	3	43	0	6	510	12	24	795	438	6
72 Kanchanpur		12	12	1	2	0	3	813	3	0	560	626	7
73 Dadeldhura		12	9	0	43	0	0	192	0	3	194	133	1
74 Baitadi		12	148	1	1	0	6	141	2	33	183	135	1
75 Darchula		12	5	0	0	0	0	188	1	0	83	17	0
Far Western		108	261	6	151	1	18	2107	24	88	2337	1922	73



**Analysed Data**  
**EPI**

District Code	District Name	Received Report	Coverage (%)							Drop Out Rate (%)			Wastage Rate(%)						
			BCG	DPT3	Polio3	Measles	JE	TT1	TT2	TT2+	BCG Vs Measles	DPT1 Vs DPT3	Polio1 Vs Polio3	BCG	DPT	Polio3	Measles	JE	TT
	Mountain	192	92.09	90.5	89.83	88.09	0	37.89	35.92	27.65	4.34	2.72	2.81	84.03	11.72	30.33	71.63	0	51.8
	Hill	468	91.11	85.04	84.91	82.4	15.96	29.64	34.75	29.31	9.56	-0.31	-0.23	82.73	8.75	26.33	69.88	50.24	44.04
	Terai	240	100.91	94.26	94.01	89.77	66.35	37.73	42.05	42.68	11.04	-0.72	-0.46	73.99	7.63	17	56.01	42.22	27.1
	<b>National Total</b>	<b>900</b>	<b>95.96</b>	<b>89.93</b>	<b>89.7</b>	<b>86.4</b>	<b>39.46</b>	<b>34.17</b>	<b>38.39</b>	<b>35.72</b>	<b>9.97</b>	<b>-0.3</b>	<b>-0.13</b>	<b>79.26</b>	<b>8.41</b>	<b>22.19</b>	<b>64.35</b>	<b>44.01</b>	<b>36.58</b>
1	Taplejung	12	92.07	87.69	87.69	90.18		40.19	48.67	24.13	2.06	4.68	4.68	89.16	4.97	32.15	79.53		39.08
2	Panchthar	12	84.94	84.72	84.5	82.04		29.93	30.82	43.74	3.42	0.68	0.76	88.03	6.07	20.72	77.56		34.32
3	Ilam	12	80.84	76.18	76.18	74.1		11.15	21.42	48.59	8.34	1.53	1.53	82.39	1.56	18.82	67.17		37.53
4	Jhapa	12	85.73	93.71	93.72	95.07	62.56	45.78	51.4	22.72	-10.89	2.5	2.52	63.2	1.79	8.9	34.1	26.16	10.88
5	Morang	12	94.33	86.11	86.11	80.22	62.39	15.25	20.33	44.59	14.96	-1.09	-1.09	62.1	4.04	7.64	43.81	23.34	22.96
6	Sunsari	12	96.39	89.13	89.13	84.47	64.41	33.75	32.36	47.72	12.36	2.92	2.92	72.56	4.42	18.51	55.38	43.32	31.25
7	Dhankuta	12	78.66	78.99	78.99	77.33		21.86	23.75	44.95	1.69	0.44	-0.08	85.38	5.14	27.15	73.42		51.72
8	Tehrathum	12	65.23	68.72	68.91	64.35		26.53	34.28	21.15	1.35	0.32	0.36	89.64	7.36	36.92	80.51		48.14
9	Sankhuwasabha	12	76.97	75.73	74.93	74.91		4.87	8.93	54.78	2.68	3.05	2.77	89.81	3.09	29.82	80.4		54.37
10	Bhojpur	12	71.43	71.94	72.12	67.53		9.15	13.1	37.22	5.46	0.33	0.08	88.93	1.38	32.09	78.11		67.22
11	Solukhumbu	12	76.08	72.76	72.48	74.79		35.19	44.59	37.86	1.7	0.34	-0.19	86.91	18.43	38.74	77.51		52.9
12	Okhaldhunga	12	75.83	70.54	64.14	67.38		20.34	27.25	24.71	11.14	3.78	12.76	90.49	25.96	58.29	82.55		68.94
13	Khotang	12	77.13	74.44	74.34	72.01		28.36	29.43	32.26	6.64	5.23	5.04	88.08	16.44	42.73	80.37		66.24
14	Udayapur	12	96.74	90.34	90.34	87.3	72.2	35.57	31.14	39.75	9.75	3.5	3.5	82.5	5.6	26.54	68.48	47.26	47.3
15	Saptari	12	102.14	96.94	95.15	90.64	63.18	50.3	40.29	47.58	11.26	1.23	1.3	82.54	8.5	27.47	70.27	48.42	46.66
16	Siraha	12	111.96	106.56	106.56	102.07	76.43	39.05	33.67	62.03	8.84	3.72	3.72	77.87	5.29	11.95	59.47	33.8	32.92
	<b>Eastern</b>	<b>192</b>	<b>90.92</b>	<b>87.85</b>	<b>87.48</b>	<b>84.66</b>	<b>45.09</b>	<b>30.71</b>	<b>32.15</b>	<b>41.61</b>	<b>6.88</b>	<b>1.94</b>	<b>2.11</b>	<b>80.08</b>	<b>5.77</b>	<b>21.41</b>	<b>65</b>	<b>37.56</b>	<b>39.03</b>
17	Dhanusha	12	117.07	110.19	108.97	103.8	55.82	51.68	53.13	52.6	11.34	5.1	5.02	76.66	6.94	15.75	61.41	33.77	30.7
18	Mahottari	12	100.8	97.61	97.61	95.73	71.29	87.93	87.75	8.98	5.02	1.93	4.03	80.83	17.13	21.57	65.16	69.81	18.96
19	Sarlahi	12	126.34	110.37	110.55	102.33	59.62	67.49	76.29	49.93	19	9.35	9.18	68.15	5.47	13.51	52.39	38.01	22.62
20	Sindhuli	12	85.09	77.3	77.12	72.98		35.1	29.29	19.65	14.24	7.09	7.13	82.37	22.01	32.45	71.05		58.11
21	Ramechhap	12	69.42	73.29	72.86	70.37		33.08	36.98	11.49	-1.37	-4.06	-3.48	88.83	17.43	37.09	77.67		53.94
22	Dolkha	12	71.52	72.34	72.34	70.49		32.05	36.31	18.2	1.45	-0.76	-0.5	87.47	19.85	41.92	77.39		57.23
23	Sindhupalchowk	12	63.14	71.48	71.46	68.59		13.15	18.55	23.87	-8.63	0.05	0.15	85.8	4.05	27.94	70.35		50.98
24	Kavre	12	67.88	72.43	72.33	68.61	30.08	38.89	34.98	13.16	-1.07	-0.43	-0.29	83.98	2.9	6.7	69.64	67.53	6.94
25	Lalitpur	12	99.9	69.92	69.92	65.73	41.8	8.45	72.11	34.24	34.21	-23.76	-23.76	59.36	39.12	47.59	62.96	41.05	-57.76
26	Bhaktapur	12	41.95	67.42	67.58	70.31	54.35	32.92	29.14	5.59	-67.61	-8.88	-8.79	80.58	-1.26	17.76	56.77	36.45	17.56
27	Kathmandu	12	143.07	103.59	103.72	101.91	36.98	69.17	51.98	8.76	28.77	-3.31	-3.27	53.24	4.29	10.67	38.32	32.94	13.66
28	Nuwakot	12	66.61	71.48	71.51	62.51		19.73	19.94	26.17	6.16	0.59	0.39	87.7	14.97	27.45	76.9		49.45
29	Rasuwa	12	85.63	89.8	89.8	84.86		12.24	44.57	24.4	0.89	0.94	0.94	88.75	11.88	34.35	79.06		63.08
30	Dhading	12	82.93	83.04	83.04	85.77	8.18	14.83	33.06	36.7	-3.42	0.82	0.82	83.2	5.63	17.29	66.14	32.01	37.27
31	Makawanpur	12	79.28	78.06	78.06	75.02	42.44	31.77	28.28	15.46	5.38	2.83	4.96	79.9	7.06	22.25	64.63	58.16	40.6
32	Rautahat	12	125.85	115.52	113.36	103.42	64.35	93.59	59.66	43.42	17.82	6.45	8.73	68.61	6.95	15.02	54.48	69.88	24.61
33	Bara	12	114.14	105.63	105.25	100.15	60.78	43.81	39.87	49.8	12.26	5.63	6.08	78.25	9.94	17.93	64.27	46.72	28.75
34	Parsa	12	86.26	87.18	87.02	79.63	62.17	0	17.14	39.7	7.69			74.89	71.48	72.66	61.48	51.88	61.33
35	Chitwan	12	88.76	73.58	73.58	70.61	56.34	36.37	30.85	16.44	20.45	1.89	1.89	72.58	3.52	16.72	56.26	45.29	22.33
	<b>Central</b>	<b>228</b>	<b>99.98</b>	<b>90.5</b>	<b>90.25</b>	<b>86.18</b>	<b>42.12</b>	<b>44.98</b>	<b>45.69</b>	<b>27.63</b>	<b>13.8</b>	<b>-4.46</b>	<b>-3.93</b>	<b>75.88</b>	<b>13.76</b>	<b>23.23</b>	<b>61.73</b>	<b>52.8</b>	<b>28.75</b>
36	Gorkha	12	67.11	71.58	71.58	66.79		28.17	33.03	16.2	0.47	-0.93	-0.93	88.89	9.45	35.28	78.69		57.1
37	Lamjung	12	69.18	71.51	71.51	71.04		28.11	37.81	21.35	-2.68	1.41	1.41	89.31	0	35.29	79.55		52.46
38	Tanahu	12	69.47	74.66	74.66	70.26		30.43	34.48	13.29	-1.14	0.69	0.73	85.89	7.65	35.4	73.3		56.78
39	Syangja	12	66.82	77.38	77.49	75.1		4.49	33.06	39.49	-12.39	0.04	-0.16	87.18	0	27.72	70.82		45.58
40	Kaski	12	107.76	80.56	80.56	79.64	29.58	20.07	35.62	39.08	26.09	-5.97	-5.97	73.44	3.68	23.24	58.95	58.63	31.34
41	Manang	12	13.13	21.89	21.89	20.88		12.93	9.2	3.45	-58.97	-44.44	-44.44	92.78	16.67	81.32	86.3		77.64
42	Mustang	12	57.67	65.08	65.08	67.99		17.12	36.07	20.55	-17.89	-1.23	-1.23	89.81	12.71	59.49	80.6		74.16
43	Myagdi	12	75.56	83.71	83.71	78.9		27.25	29.18	34.08	-4.43	-0.56	-0.45	86.15	2.22	24.57	71.75		47.54
44	Parbat	12	64.92	70.89	70.89	70.44		9.69	24.03	37.92	-8.51	-0.73	-0.73	88.74	4.8	35.7	76.59		56.17
45	Baglung	12	83.3	82.44	82.44	79.89		39.87	42.71	11.15	4.08	0.98	0.98	78.71	4.29	18.63	62.44		29.33
46	Gulmi	12	80.71	81.54	81.41	80.37		7.95	34.04	49.33	0.42	-0.71	-0.53	87.01	1.28	23.5	73.61		40.16
47	Palpa	12	84.31	72.71	72.71	69.47	38.23	6.17	5.8	48.3	17.6	-0.05	-0.05	87.07	2.37	35.94	77.04	60.29	55.02
48	Nawalparasi	12	79.75	81.22	81.22	82.78	64.96	33.12	39.23	23.41	-3.8	2.14	2.14	79.7	0.89	13.56	57.91	37.49	23.01
49	Rupandehi	12	121.3	104	104	102.19	90.86	0	55.06	79.76	15.75	-0.28	-0.28	69.4	0	18.41	45.99	41.1	30.1
50	Kapilvastu	12	120.93	105.48	105.49	91.3	80.58	25.36	48.46	96.76	24.51	4.4	4.74	78.29	3.46	11.98	67.71	35.27	23.91
51	Arghakhanchi	12	80.06	80.92	80.99	79.49		17.77	33.47	32.54	0.71	3.91	4.33	86.74	10.87	31.72	76.11		52.45
	<b>Western</b>	<b>192</b>	<b>89.93</b>	<b>84.61</b>	<b>84.62</b>	<b>81.67</b>	<b>35.5</b>	<b>18.87</b>	<b>37.99</b>	<b>44.3</b>	<b>9.19</b>	<b>0.46</b>	<b>0.53</b>	<b>81.92</b>	<b>3.05</b>	<b>24.06</b>	<b>67.48</b>	<b>43.68</b>	<b>38.74</b>
52	Pyuthan	12	114.74	110.94	110.94	111.94		32.57	37.53	42.71	2.44	1.7	1.7	87.06	0	30.44	74.96		64.14
53	Rolpa	12	102.58	99.02	97.26	98.3		23.06	34.03	32.67	4.18	1.19	1.14	85.66	14.97	27.03	73.19		46.32
54	Rukum	12	97.31	92.91	92.91	88.32		46.06	40.51	22.87	9.25	3.07	3.07	82.78	19.71	30.25	72.2		59.22
55	Salvan	12	94.54	92.06	92.06	90.65		28.58	34.99	33.63	4.11	0.18	0.18	85.14	3.44	24.28	71.9		55.5
56	Dang	12	93.3	92.04	92.04	91.56	72.97	13.6	44.5	37.33	1.86	0.73	0.73	67.45	1.58	10	38.8	20.05	22.67
57	Banke	12	119.58																

Raw Data  
Nutrition  
Sheet 1 of 2

District Code	District Name	Weighing Status according to age group (New Visit)														Weighing Status according to age group (Repeated Visit)													
		0-11 Months		12-23 Months		24-35 Months		36-59 Months		Total		Grand Total	0-11 Months		12-23 Months		24-35 Months		36-59 Months		Total		Grand Total						
		Low	Normal	Low	Normal	Low	Normal	Low	Normal	Low	Normal		Low	Normal	Low	Normal	Low	Normal	Low	Normal	Low	Normal							
	Mountain	192	1656	54234	1700	24205	1169	18198	965	18916	5490	115553	121043	2552	93222	1788	39293	1273	32070	1064	27060	6677	191645	198322					
	Hill	468	3635	278027	2510	110921	1614	80206	1731	98165	9490	567319	576809	4718	539182	7278	210371	5950	162717	3495	162581	21441	1074851	1096292					
	Terai	240	6978	266080	5472	116024	3912	99585	4138	110230	20500	591919	612419	4812	376639	6677	183676	4730	123709	3657	134581	19876	818605	838481					
	National Total	900	12269	598341	9682	251150	6695	197989	6834	227311	35480	1274791	1310271	12082	1009043	15743	433340	11953	318496	8216	324222	47994	2085101	2133095					
1	Taplejung	12	29	4288	0	450	0	358	0	310	29	5406	5435	1228	10321	523	3944	383	3111	321	3271	2455	20647	23102					
2	Panchthar	12	31	4939	12	1336	1	809	3	959	47	8043	8090	47	6972	36	4128	14	2939	14	2771	111	16810	16921					
3	Ilam	12	100	7937	62	2213	18	1548	17	2263	197	13961	14158	146	13229	32	3153	20	1952	22	2530	220	20864	21084					
4	Jhapa	12	277	21407	127	6863	560	4663	657	4963	1621	37896	39517	124	39147	167	13789	123	8014	108	8300	522	69250	69772					
5	Morang	12	479	27255	337	3564	256	2002	208	2518	1280	35339	36619	312	54397	304	21760	129	10828	235	14569	980	101554	102534					
6	Sunsari	12	278	12992	89	3685	63	2982	101	3613	531	23272	23803	102	17460	216	10004	151	7758	126	10071	595	45293	45888					
7	Dhankuta	12	18	4046	2	337	0	291	0	244	20	4918	4938	7	10387	5	3042	7	1817	0	1997	19	17243	17262					
8	Tehrathum	12	1	2157	1	319	0	181	0	250	2	2907	2909	4	3614	2	2143	1	1574	0	1810	7	9141	9148					
9	Sankhuwasabha	12	27	3225	4	805	0	531	3	737	34	5298	5332	87	9226	26	2700	7	1787	14	2202	134	15915	16049					
10	Bhojpur	12	2	4076	7	1751	5	1426	7	1774	21	9027	9048	5	14947	3	5604	1	4270	1	4980	10	29801	29811					
11	Solkhumbu	12	23	2910	12	1898	5	1374	5	1553	45	7735	7780	20	6643	66	6970	61	6582	26	4837	173	25032	25205					
12	Okhaldhunga	12	109	6391	84	3398	45	2357	74	2955	312	15101	15413	29	8576	21	3226	16	2279	32	2735	98	16816	16914					
13	Khotang	12	53	5840	29	1790	26	1499	19	1382	127	10511	10638	54	8728	40	4126	34	2971	29	3010	157	18835	18992					
14	Udaypur	12	109	18772	56	7291	36	2125	26	2385	227	29673	29900	62	11338	44	5517	45	3820	27	4519	178	25194	25372					
15	Saptari	12	337	14376	164	5815	101	4237	100	3719	702	28147	28849	202	17467	179	9578	162	6791	158	7059	701	40895	41596					
16	Siraha	12	243	15481	44	2164	11	1392	19	1616	317	20653	20970	185	26166	157	14942	99	11414	150	13459	591	65981	66572					
	<b>Eastern</b>	192	2116	155192	1030	43679	1127	27775	1239	31241	5512	257887	263399	2614	258618	1821	114626	1253	77907	1263	88120	6951	539271	546222					
17	Dhanusha	12	363	12382	397	9746	269	8433	267	8981	1296	39542	40038	205	11686	370	9218	274	7770	280	8269	1129	36943	38072					
18	Mahottari	12	483	17697	388	12056	260	21077	251	22794	1382	73624	75006	376	21598	630	17842	309	16203	255	19786	1570	75429	76999					
19	Sarlahi	12	351	15691	466	12691	442	11185	410	11046	1669	50613	52282	114	11402	198	8878	200	7746	202	7691	714	35717	36431					
20	Sindhuli	12	51	7416	39	3737	33	2839	34	3123	157	17115	17272	46	9110	82	2590	43	1996	33	1784	204	15480	15684					
21	Ramechhap	12	9	4274	8	1793	11	1284	5	1613	33	8964	8997	8	7777	25	1793	18	1222	8	1568	59	12360	12419					
22	Dolkha	12	6	5572	81	1716	51	1204	46	1549	184	10041	10225	16	12461	12	2202	4	1331	1	1562	33	17556	17589					
23	Sindhupalchowk	12	56	7251	28	2112	26	1523	27	2086	137	12972	13109	47	18356	30	2169	8	1379	14	1582	99	23486	23585					
24	Kavre	12	86	6193	66	4668	54	3510	32	4960	238	19331	19569	285	24376	87	9202	74	5908	55	7626	501	47112	47613					
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
26	Bhaktapur	12	27	3672	4	493	0	328	0	334	31	4827	4858	5	9376	6	2478	0	774	1	815	12	13443	13455					
27	Kathmandu	12	231	23286	216	8938	137	5512	89	6797	673	44533	45206	515	43689	1362	15790	1635	13722	283	5742	3795	78943	82738					
28	Nuwakot	12	80	6220	51	2034	26	1514	47	1819	204	11587	11791	81	9955	30	1781	12	1253	16	1470	139	14459	14598					
29	Rasuwa	12	26	1577	21	875	24	536	29	683	100	3671	3771	10	1568	26	1024	11	728	19	760	66	4080	4146					
30	Dhading	12	81	8689	34	1392	20	1026	24	1431	159	12538	12697	89	26519	161	9668	97	6928	103	9156	540	52271	52721					
31	Makawanpur	12	89	9374	54	2040	51	1317	43	1461	237	14192	14429	167	18943	102	3747	88	1697	162	2625	519	27012	27531					
32	Rautahat	12	448	11764	1087	11258	481	9577	467	11463	2483	44062	46545	267	8590	158	5603	430	4805	290	4753	1145	23741	24886					
33	Bara	12	308	11862	432	8759	327	7530	327	8009	1394	36160	37554	156	13057	187	7442	205	6717	233	6322	781	33538	34319					
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
35	Chitwan	12	129	13253	64	1728	15	805	8	909	216	16695	16911	439	24587	618	9056	357	4586	237	4875	1651	43104	44755					
	<b>Central</b>	228	2824	166173	3436	86036	2227	79200	2106	89058	10593	420467	431060	2826	273040	4084	110483	3765	84765	2192	86386	12867	554674	567541					
36	Gorkha	12	54	6733	28	3143	23	2415	26	2964	131	15255	15386	61	16185	70	4302	15	3286	34	4588	180	28361	28541					
37	Lamjung	12	14	6319	6	2894	4	2421	3	4159	27	15793	15820	5	11839	3	4362	0	3361	0	5551	8	25113	25121					
38	Tanahu	12	39	9325	18	3991	14	3009	20	3394	91	19719	19810	22	16415	9	3142	10	2034	12	1974	53	23565	23618					
39	Syngja	12	11	6328	9	3557	6	3254	9	4305	35	17444	17479	12	24817	6	5030	6	4006	8	5955	32	39808	39840					
40	Kaski	12	67	17448	27	3812	16	2939	15	4084	125	28283	28408	306	31587	44	6679	11	4027	12	6438	373	48731	49104					
41	Manang	12	0	110	0	95	0	87	0	69	0	361	361	0	112	0	60	0	59	0	58	0	289	289					
42	Mustang	12	0	382	1	150	0	107	0	140	1	779	780	2	821	1	468	1	292	0	378	4	1959	1963					
43	Myagdi	12	20	3254	15	2116	20	1470	24	1692	79	8532	8611	53	8404	36	2742	22	1908	26	2441	137	15495	15632					
44	Parbat	12	36	4091	91	1995	57	1585	53	2138	237	9809	10046	15	11596	13	2553	12	1926	26	2893	66	18968	19034					
45	Baglung	12	16	8295	18	4654	6	2914	13	3764	53	19627	19680	24	20224	24	3546	13	2951	22	3712	83	30433	30516					
46	Gulmi	12	47	10358	71	6171	46	4623	174	6313	338	27465	27803	50	21124	40	6008	29	3904	99	6611	218	37647	37865					
47	Paipa	12	275	5638	24	276	3	142	6	180	308	6236	6544	44	18880	21	5565	4	2667	21	4169	90	31281	31371					
48	Nawalparasi	12	211	13068	49	2392	22	1407	19	1951	301	18818	19119	237	23730	249	7565	114	2820	55	2258	655	36373	37028					
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0										



Raw Data  
Nutrition  
Sheet 2 of 2

District Code	District Name	Received Reports	Treated (<5 Yrs)					Total	Anthelmintic	Students received Anthelmintic Tabs.	No. of Pregnant Women				No of Postpartum mother within 6 week.	
			Vitamin A				Iron (180 Tabs)				Iron (45 Tabs)	Vitamin 'A'				
			Eye	Measles	Diarrhoea	Severe Malnourish							Anthelmintic	Iron (New)	Iron (Repeated)	
Mountain	192	1368	233	1155	1415	4171	14557	164084	41974	42167	50152	23031	28673	29856		
Hill	468	2488	1698	2168	3342	9696	46568	956925	193635	205218	326680	122821	143324	164515		
Terai	240	3635	938	3510	5477	13560	62055	179670	260386	275221	391238	181203	199603	238190		
National Total	900	7491	2869	6833	10234	27427	123180	1300679	495995	522606	768070	327055	371600	432561		
1 Taplejung	12	246	2	6	7	261	1634	5680	2913	2796	2103	1673	2156	2299		
2 Panchthar	12	27	16	16	16	75	454	34115	4141	4171	6136	2108	2486	2508		
3 Ilam	12	50	15	32	49	146	1127	6325	4496	4936	6148	2899	3583	4129		
4 Jhapa	12	136	44	175	96	451	4851	8275	15419	14746	18511	8270	9900	11919		
5 Morang	12	18	27	17	65	127	2597	6032	18102	18300	29885	9912	10311	24079		
6 Sunsari	12	124	28	61	198	411	3499	0	14516	15510	32227	7460	9954	21201		
7 Dhankuta	12	47	4	0	0	51	518	1275	3145	3183	5755	1919	2476	2647		
8 Teharthurm	12	19	3	2	4	28	426	306	1843	1748	2369	746	938	975		
9 Sankhuwasabha	12	10	8	13	10	41	712	19939	2695	2550	3225	1179	1866	2103		
10 Bhojpur	12	18	88	25	17	148	749	50427	3272	3257	4997	1112	2896	2990		
11 Solukhumbu	12	43	13	81	22	159	821	0	2250	2388	3056	1607	1549	1585		
12 Okhaldhunga	12	39	15	16	18	88	889	28554	2911	2950	4312	1435	1974	3410		
13 Khotang	12	177	50	146	71	444	2590	29940	4842	4965	5275	2195	2783	3015		
14 Udayapur	12	31	9	22	44	106	1984	976	6512	5810	9390	3086	3380	3967		
15 Saptari	12	297	17	164	317	795	3479	5378	16699	17054	33392	10938	9687	9977		
16 Siraha	12	86	16	46	51	199	2554	1887	16388	16149	28562	10271	9651	10147		
Eastern	192	1368	355	822	985	3530	28884	199109	120144	120513	195343	66810	75590	106951		
17 Dhanusha	12	210	24	170	149	553	4729	59053	4909	7818	8266	5851	9075	10782		
18 Mahottari	12	248	156	185	95	684	5586	8749	17538	15983	12323	10425	12840	13176		
19 Sarlahi	12	452	76	217	390	1135	3957	0	19682	22692	24831	9039	11122	12014		
20 Sindhuli	12	94	145	88	31	358	1253	2327	5008	4652	7159	3096	3677	4250		
21 Ramechhap	12	17	18	13	31	79	291	37339	3558	3545	6805	2326	2364	2427		
22 Dolkha	12	65	10	24	38	137	965	917	3895	3899	4654	2352	2578	2746		
23 Sindhupalchowk	12	19	80	93	89	281	431	81344	4427	4030	7259	1626	2629	3231		
24 Kavre	12	69	81	18	71	239	419	67846	6709	7464	16951	2598	3965	6530		
25 Lalitpur	12	26	75	6	9	116	0	0	3179	1457	0	11262	10691	10680		
26 Bhaktapur	12	8	42	1	2	53	418	9619	1869	2349	3636	830	1324	1453		
27 Kathmandu	12	176	89	30	47	342	1110	408	5624	8189	9714	4096	3403	6128		
28 Nuwakot	12	78	105	113	68	364	1118	18800	4167	5057	4491	1754	3269	3486		
29 Rasuwa	12	0	0	15	4	19	187	5662	914	923	1179	522	470	475		
30 Dhading	12	128	28	72	108	336	1584	50365	7162	12081	12924	6117	5764	6180		
31 Makawanpur	12	55	33	56	89	233	1329	9033	5922	6542	12707	3126	3317	4337		
32 Rautahat	12	509	69	733	610	1921	6084	5611	15812	17414	14583	8386	8670	10693		
33 Bara	12	210	26	103	284	623	3747	3027	14050	15341	22884	8423	11167	11764		
34 Parsa	12	81	10	113	134	338	0	0	0	0	0	8462	8272	9565		
35 Chitwan	12	4	9	18	62	93	1685	1806	8966	12556	17859	4194	5139	4507		
Central	228	2449	1076	2068	2311	7904	34893	361906	133391	151992	188225	94485	109736	124424		
36 Gorkha	12	23	24	18	52	117	909	58198	6981	4970	5207	2486	3436	3576		
37 Lamjung	12	4	6	0	10	20	197	41594	4344	4313	8050	2740	2864	2377		
38 Tanahu	12	42	5	19	4	70	1946	2228	5479	6779	6360	3499	3851	4323		
39 Syangja	12	37	47	10	4	98	682	101336	5376	5606	14675	4262	4393	4315		
40 Kaski	12	7	46	5	2	60	209	69151	8395	8013	15934	4121	2672	11121		
41 Manang	12	0	0	1	0	1	8	23	73	106	45	13	31	33		
42 Mustang	12	4	0	6	7	17	17	2289	209	209	295	91	98	98		
43 Myagdi	12	1	4	8	6	19	1324	18777	2577	2695	3658	1852	1956	2084		
44 Parbat	12	3	25	6	17	51	185	6525	2667	2793	6174	2407	2199	2160		
45 Baglung	12	157	221	201	131	710	1158	2750	5175	6122	6425	3269	4139	4484		
46 Gulmi	12	12	6	17	38	73	664	7571	6076	6225	13003	5149	5429	5523		
47 Palpa	12	3	17	4	15	39	172	0	5159	5371	12091	3012	5338	5049		
48 Nawalparasi	12	15	45	10	20	90	1330	2200	11694	10963	18683	5857	6738	6496		
49 Rupandehi	12	55	8	72	114	249	0	0	19221	16975	0	26873	24167	25464		
50 Kapilvastu	12	887	188	1088	967	3130	6568	1319	13986	15783	18958	8717	9378	9276		
51 Arghakhanchi	12	53	0	26	1	80	1011	298	3526	3873	4578	3056	3272	3201		
Western	192	1303	642	1491	1388	4824	16380	314259	100938	100796	134136	77404	79961	89580		
52 Pyuthan	12	23	16	50	100	189	1008	523	5354	5649	9739	2081	3655	4019		
53 Rolpa	12	85	104	102	101	392	1505	0	4010	4158	5470	2659	2974	3029		
54 Rukum	12	109	11	247	288	655	2895	21555	4661	4226	2488	1596	2073	2494		
55 Salyan	12	89	17	34	82	222	968	67427	6757	5548	12013	2295	4144	4506		
56 Dang	12	79	110	137	104	430	3098	21744	10789	13490	14850	7618	8956	12126		
57 Banke	12	113	42	91	277	523	2471	49349	10818	11635	14754	8798	8286	8535		
58 Bardiya	12	23	7	60	673	763	2072	0	9103	9349	25179	5636	7705	7545		
59 Surkhet	12	93	7	73	106	279	3513	0	8886	9433	16731	5527	7804	8354		
60 Dailekh	12	12	0	22	39	73	1203	45241	7011	6943	19614	4126	5730	6003		
61 Jajarkot	12	259	34	238	608	1139	4225	563	4048	4232	4102	1972	2033	2117		
62 Dolpa	12	24	12	17	10	63	390	1064	1092	1008	129	193	398	329		
63 Jumla	12	127	61	105	85	378	771	15151	3409	4430	2794	2595	2553	2573		
64 Kalikot	12	262	33	198	293	786	1454	11660	4250	3955	2203	1716	2175	2332		
65 Mugu	12	75	5	234	372	686	1610	975	2009	1550	1377	918	1024	1184		
66 Humla	12	290	6	210	92	598	1740	58	1580	1508	797	978	919	810		
Mid Western	180	1663	465	1818	3230	7176	28923	235310	83777	87114	132240	48708	60429	65956		
67 Bajura	12	86	0	54	207	347	1111	18757	2878	2989	4344	1270	2518	2278		
68 Bajhang	12	92	1	88	115	296	1883	299	5949	6084	8135	3854	4363	4434		
69 Achham	12	194	3	246	693	1136	2441	66353	7119	7011	11382	4068	5646	5750		
70 Doti	12	88	3	79	135	305	1880	3673	5527	6425	11796	4088	5041	4961		
71 Kailali	12	35	24	32	84	175	1940	5207	13834	14115	31243	9769	10683	10407		
72 Kanchanpur	12	53	12	18	787	870	1808	33	8860	9348	24248	6304	7902	8517		
73 Dadeldhura	12	62	146	49	74	331	766	46635	4171	6420	6787	4152	2708	2555		

## Analysed Data

Nutrition Sheet 1 of 2

District Code	District Name	Received Report	New Growth Monitoring(%)		Children among New visits (%)		Children among Repeated visits (%)		Avg. no of Growth Monitoring Visits made by				Children Treated With Vitamin A (%) for				Children Treated for Anthelmintics (%)
			Under 1 Yrs	Under 5 Yrs	Normal	Mainnourished	Normal	Mainnourished	0-11 Months	12-23 Months	24-35 Months	36-59 Months	Eye	Measles	Chronic Diarrhoea	Severe Malnutrition	
	Mountain	192	120.65	49.77	95.46	4.54	96.63	3.37	2.71	2.59	2.72	2.41	0.56	0.1	0.47	0.58	5.99
	Hill	468	96.89	40.69	98.35	1.65	98.04	1.96	2.93	2.92	3.06	2.66	0.18	0.12	0.15	0.24	3.29
	Terai	240	84.81	37.87	96.65	3.35	97.63	2.37	2.4	2.57	2.24	2.21	0.22	0.06	0.22	0.34	3.84
	National Total	900	92.65	39.97	97.29	2.71	97.75	2.25	2.67	2.72	2.61	2.42	0.23	0.09	0.21	0.31	3.76
1	Taplejung	12	116.8	28.73	99.47	0.53	99.37	10.63	3.68	10.93	10.76	12.59	1.3	0.01	0.03	0.04	8.64
2	Panchthar	12	89.55	28.44	99.42	0.58	99.34	0.66	2.41	4.09	4.65	3.9	0.09	0.06	0.06	0.06	1.6
3	Ilam	12	94.36	41.82	98.61	1.39	98.96	1.04	2.66	2.4	2.26	2.12	0.15	0.04	0.09	0.14	3.33
4	Jhapa	12	94.63	49.5	95.9	4.1	99.25	0.75	2.81	3	2.56	2.5	0.17	0.06	0.22	0.12	6.08
5	Morang	12	106.62	35.42	96.5	3.5	99.04	0.96	2.97	6.66	5.85	6.43	0.02	0.03	0.02	0.06	2.51
6	Sunsari	12	69.72	28.33	97.77	2.23	98.7	1.3	2.32	3.71	3.6	3.75	0.15	0.03	0.07	0.24	4.17
7	Dhankuta	12	84.3	24.07	99.59	0.41	99.89	0.11	3.56	9.99	7.27	9.18	0.23	0.02	0	0	2.52
8	Teharhum	12	67.78	20.66	99.93	0.07	99.92	0.08	2.68	7.7	9.7	8.24	0.13	0.02	0.01	0.03	3.02
9	Sankhuwasabha	12	74.52	25.33	99.36	0.64	99.17	0.83	3.86	4.37	4.38	3.99	0.05	0.04	0.06	0.05	3.38
10	Bhojpur	12	75.74	36.23	99.77	0.23	99.97	0.03	4.67	4.19	3.98	3.8	0.07	0.35	0.1	0.07	3
11	Solukhumbu	12	102.55	55.08	99.42	0.58	99.31	0.69	3.27	4.68	5.82	4.12	0.3	0.09	0.57	0.16	5.81
12	Okhaldhunga	12	159.2	69.58	97.98	2.02	99.42	0.58	2.32	1.93	1.96	1.91	0.18	0.07	0.07	0.08	4.01
13	Khotang	12	98	31.86	98.81	1.19	99.17	0.83	2.49	3.29	2.97	3.17	0.53	0.15	0.44	0.21	7.76
14	Udaypur	12	222.34	70.76	99.24	0.76	99.3	0.7	1.63	1.76	2.79	2.89	0.07	0.02	0.05	0.1	4.7
15	Saptari	12	96.87	35.88	97.57	2.43	98.31	1.69	2.2	2.63	2.6	2.89	0.37	0.02	0.2	0.39	4.33
16	Siraha	12	104.15	24.75	98.49	1.51	99.11	0.89	2.68	7.84	9.21	9.32	0.1	0.02	0.05	0.06	3.01
	Eastern	192	101.62	37.3	97.91	2.09	98.73	1.27	2.66	3.6	3.74	3.75	0.19	0.05	0.12	0.14	4.09
17	Dhanusha	12	74.65	40.46	96.83	3.17	97.03	2.97	1.93	1.95	1.92	1.92	0.21	0.02	0.17	0.15	4.68
18	Mahottari	12	131.87	89.03	98.16	1.84	97.96	2.04	2.21	2.48	1.77	1.87	0.29	0.19	0.22	0.11	6.63
19	Sarlahi	12	96.75	52.93	96.81	3.19	98.04	1.96	1.72	1.69	1.68	1.69	0.46	0.08	0.22	0.39	4.01
20	Sindhuli	12	96.96	39.7	99.09	0.91	98.7	1.3	2.23	1.71	1.71	1.58	0.22	0.33	0.2	0.07	2.88
21	Ramechhap	12	80.12	30	99.63	0.37	99.52	0.48	2.82	2.01	1.96	1.97	0.06	0.06	0.04	0.1	0.97
22	Dolkha	12	101.31	40.31	98.2	1.8	99.81	0.19	3.24	2.23	2.06	1.98	0.26	0.04	0.09	0.15	3.8
23	Sindhupalchowk	12	88.45	33.02	98.95	1.05	99.58	0.42	3.52	2.03	1.9	1.76	0.05	0.2	0.23	0.22	1.09
24	Kavre	12	56.89	40.51	98.78	1.22	98.95	1.05	4.93	2.96	2.68	2.54	0.14	0.17	0.04	0.15	0.87
25	Lalitpur	12	0	0									0.09	0.25	0.02	0.03	0
26	Bhaktapur	12	47.51	23.45	99.36	0.64	99.91	0.09	3.54	6	3.36	3.44	0.04	0.2	0	0.01	2.02
27	Kathmandu	12	81.78	32.56	98.51	1.49	95.41	4.59	2.88	2.87	3.72	1.87	0.13	0.06	0.02	0.03	0.8
28	Nuwakot	12	80.53	32.31	98.27	1.73	99.05	0.95	2.59	1.87	1.82	1.8	0.21	0.29	0.31	0.19	3.06
29	Rasuwa	12	136.31	64.46	97.35	2.65	98.41	1.59	1.98	2.17	2.32	2.09	0	0	0.26	0.07	3.2
30	Dhading	12	92.78	26.53	98.75	1.25	99.15	0.85	4.03	7.89	7.72	7.36	0.27	0.06	0.15	0.23	3.31
31	Makawanpur	12	85.44	26.08	98.36	1.64	98.11	1.89	3.02	2.84	2.3	2.85	0.1	0.06	0.1	0.16	2.4
32	Rautahat	12	84.46	52.36	94.67	5.33	95.4	4.6	1.72	1.47	1.52	1.42	0.57	0.08	0.82	0.69	6.84
33	Bara	12	80.55	41.64	96.29	3.71	97.72	2.28	2.09	1.83	1.88	1.79	0.23	0.03	0.11	0.31	4.15
34	Parsa	12	0	0									0.1	0.01	0.15	0.17	0
35	Chitwan	12	88.27	29.79	98.72	1.28	96.31	3.69	2.87	6.4	7.03	6.57	0.01	0.02	0.03	0.11	2.97
	Central	228	76.4	38.52	97.54	2.46	97.73	2.27	2.63	2.28	2.09	1.97	0.22	0.1	0.18	0.21	3.12
36	Gorkha	12	86.33	41.48	99.15	0.85	99.37	0.63	3.39	2.38	2.35	2.55	0.06	0.06	0.05	0.14	2.45
37	Lamjung	12	129.17	73.23	99.83	0.17	99.97	0.03	2.87	2.51	2.39	2.33	0.02	0.03	0	0.05	0.91
38	Tanahu	12	102.92	47.71	99.54	0.46	99.78	0.22	2.76	1.79	1.68	1.58	0.1	0.01	0.05	0.01	4.69
39	Syangja	12	71.22	40.64	99.8	0.2	99.92	0.08	4.92	2.41	2.23	2.38	0.09	0.11	0.02	0.01	1.59
40	Kaski	12	145.61	65.84	99.56	0.44	99.24	0.76	2.82	2.75	2.37	2.57	0.02	0.11	0.01	0	0.48
41	Manang	12	37.04	51.28	100	0	100	0	2.02	1.63	1.68	1.84	0	0	0.14	0	1.14
42	Mustang	12	101.06	60.8	99.87	0.13	99.8	0.2	3.15	4.11	3.74	3.7	0.31	0	0.47	0.55	1.33
43	Mvagdhi	12	101.43	51.96	99.08	0.92	99.12	0.88	3.58	2.3	2.3	2.44	0.01	0.02	0.05	0.04	7.99
44	Parbat	12	92.26	48.19	97.64	2.36	99.65	0.35	3.81	2.23	2.18	2.33	0.01	0.12	0.03	0.08	0.89
45	Baglung	12	104.7	51.1	99.73	0.27	99.73	0.27	3.44	1.76	2.02	1.99	0.41	0.57	0.52	0.34	3.01
46	Gulmi	12	126.69	64.37	98.78	1.22	99.42	0.58	3.03	1.97	1.84	2.03	0.03	0.01	0.04	0.09	1.54
47	Palpa	12	78.25	17.24	95.29	4.71	99.71	0.29	4.2	19.62	19.42	23.53	0.01	0.04	0.01	0.04	0.45
48	Nawalparasi	12	79.56	24.16	98.43	1.57	98.23	1.77	2.8	4.2	3.05	2.17	0.02	0.06	0.01	0.03	1.68
49	Rupandehi	12	0	0									0.05	0.01	0.07	0.11	0
50	Kapilvastu	12	107.26	44.02	93.51	6.49	89.5	10.5	2.04	2.29	2.32	2.61	1.21	0.26	1.48	1.32	8.95
51	Arghakhanchi	12	110.64	44.65	99.5	0.5	99.62	0.38	2.78	1.65	1.54	1.56	0.18	0	0.09	0	3.34
	Western	192	85.85	37.49	98.35	1.65	98.44	1.56	3.07	2.4	2.23	2.32	0.21	0.1	0.24	0.22	2.61
52	Pyuthan	12	139.29	50.35	96.6	3.4	98.47	1.53	2.92	1.98	1.81	1.89	0.06	0.04	0.14	0.28	2.79
53	Rolpa	12	116.37	40.12	99.06	0.94	95.96	4.04	2.21	2.67	2.7	2.74	0.24	0.3	0.29	0.29	4.27
54	Rukum	12	111.23	63.58	97.49	2.51	98.14	1.86	1.42	1.42	1.37	1.33	0.41	0.04	0.92	1.07	10.78
55	Salyan	12	91.12	36.63	97.87	2.13	97.6	2.4	2.14	2.58	2.7	1.87	0.22	0.04	0.08	0.2	2.42
56	Dang	12	132.5	54.78	96.31	3.69	97.5	2.5	2.13	2.42	2.28	1.91	0.12	0.16	0.2	0.15	4.52
57	Banke	12	134.36	58.55	95.47	4.53	94.84	5.16	2.19	2.24	2.12	1.63	0.2	0.07	0.16	0.49	4.4
58	Bardiya	12	90.25	59.03	97.31	2.69	98.21	1.79	2.05	1.91	1.79	1.78	0.04	0.01	0.11	1.23	3.78
59	Surkhet	12	98.71	51.02	98.77	1.23	99.19	0.81	2.18	2.22	2.37	2.09	0.21	0.02	0.16	0.24	7.87
60	Dailekh	12	93.96	22.62	96.06	3.94	97.8	2.2	3.07	4.9	5.37	5.59	0.03	0	0.05	0.1	3.01
61	Jajarkot	12	129.57	75.1	93.96	6.04	94.01	5.99	2.03	2.18	2.32	2.31	1.32	0.17	1.21	3.09	21.5
62	Dolpa	12	178.7	69.67	97.32	2.68	99.53	0.47	1.24	1.06	1.05	1.05	0.55	0.28	0.39	0.23	8.98
63	Jumla	12	231.87	70.66	95.48	4.52	93.8	6.2	2.13	2.44	2.24	1.76	0.91	0.44	0.75	0.61	5.53
64	Kalikot	12	125.31	75.22	89.82	10.18	88.47	11.53	1.14	1.21	1.19	1.19	1.55	0.19	1.17	1.73	8.58
65	Mugu	12	101.51	65.25	84.33	15.67	79.82	20.18	1.39	1.37	1.42	1.36	0.98	0.07	3.07	4.87	21.1
66	Humla	12	160.05	117.99	89.8	10.2	85.02	14.98	1.15	1.2	1.21	1.18	4.17	0.09	3.02	1.32	25.02
	Mid Western	180	119.13	53.45	95.95	4.05	96.76	3.24	2.13	2.1	2.05	1.88	0.35	0.1	0.39	0.68	6.13
67	Bajura	12															

## Analysed Data

Nutrition Sheet 2 of 2

District Code	District Name	Received Report	% of pregnant woman receiving Anthelmintic	% of pregnant woman receiving Iron Tabs		% of postpartum mothers receiving		Iron Compliance
				New	Repeated	Iron Tabs	Vitamin A	
	Mountain	192	77.07	77.43	92.09	52.65	54.82	42.29
	Hill	468	57.05	60.47	96.25	42.23	48.47	36.19
	Terai	240	69.28	73.23	104.1	53.11	63.38	48.21
	National Total	900	64.44	67.9	99.79	48.28	56.2	42.49
1	Taplejung	12	67.45	64.74	48.69	49.92	53.23	38.74
2	Panchthar	12	63.91	64.38	94.71	38.37	38.71	32.54
3	Ilam	12	45.21	49.63	61.82	36.03	41.52	29.15
4	Jhapa	12	57.65	55.13	69.21	37.01	44.56	30.92
5	Morang	12	59.63	60.28	98.45	33.97	79.32	32.65
6	Sunsari	12	65.34	69.81	145.06	44.81	95.43	33.58
7	Dhankuta	12	55.9	56.58	102.29	44.01	47.05	34.11
8	Teharthur	12	49.6	47.04	63.75	25.24	26.24	20.08
9	Sankhuwasabha	12	52.87	50.03	63.27	36.61	41.26	23.13
10	Bhojpur	12	52.07	51.83	79.52	46.09	47.58	17.7
11	Solukhumbu	12	67.39	71.52	91.52	46.39	47.47	48.13
12	Okhaldhunga	12	61.1	61.92	90.51	41.44	71.58	30.12
13	Khotang	12	69.03	70.79	75.21	39.68	42.99	31.29
14	Udaypur	12	69.02	61.58	99.52	35.82	42.05	32.71
15	Saptari	12	94.14	96.14	188.24	54.61	56.24	61.66
16	Siraha	12	92.99	91.64	162.07	54.76	57.58	58.28
	Eastern	192	66.49	66.69	108.1	41.83	59.19	36.97
17	Dhanusha	12	24.63	39.22	41.47	45.53	54.09	29.35
18	Mahottari	12	108.95	99.29	76.55	79.76	81.85	64.76
19	Sarlahi	12	101.71	117.27	128.32	57.48	62.08	46.71
20	Sindhuli	12	55.71	51.75	79.64	40.91	47.28	34.44
21	Ramechhap	12	57	56.79	109.02	37.87	38.88	37.26
22	Dolkha	12	60.58	60.64	72.38	40.09	42.71	36.58
23	Sindhupalchowk	12	45.98	41.86	75.39	27.31	33.56	16.89
24	Kavre	12	52.08	57.95	131.6	30.78	50.69	20.17
25	Lalitpur	12	23.27	10.67	0	78.27	78.19	82.45
26	Bhaktapur	12	20.57	25.85	40.01	14.57	15.99	9.13
27	Kathmandu	12	16.72	24.34	28.87	10.11	18.21	12.17
28	Nuwakot	12	45.61	55.35	49.15	35.78	38.15	19.2
29	Rasuwa	12	66.57	67.23	85.87	34.23	34.6	38.02
30	Dhading	12	64.93	109.52	117.16	52.25	56.02	55.45
31	Makawanpur	12	45.81	50.61	98.31	25.66	33.55	24.18
32	Rautahat	12	93.66	103.15	86.38	51.35	63.34	49.67
33	Bara	12	79.7	87.02	129.81	63.34	66.73	47.78
34	Parsa	12	0	0	0	52.9	61.17	54.12
35	Chitwan	12	50.67	70.95	100.92	29.04	25.47	23.7
	Central	228	51.65	58.85	72.88	42.49	48.18	36.59
36	Gorkha	12	76.1	54.17	56.76	37.45	38.98	27.1
37	Lamjung	12	75.89	75.35	140.64	50.03	41.53	47.87
38	Tanahu	12	51.58	63.82	59.88	36.25	40.7	32.94
39	Syangja	12	51.77	53.98	141.31	42.3	41.55	41.04
40	Kaski	12	59.78	57.06	113.47	19.03	79.2	29.35
41	Manang	12	20.98	30.46	12.93	8.91	9.48	3.74
42	Mustang	12	47.72	47.72	67.35	22.37	22.37	20.78
43	Myagdi	12	68.3	71.43	96.95	51.84	55.23	49.09
44	Parbat	12	51.07	53.49	118.23	42.11	41.36	46.09
45	Baglung	12	55.87	66.09	69.36	44.68	48.41	35.29
46	Gulmi	12	63.4	64.96	135.69	56.65	57.63	53.73
47	Palpa	12	58.48	60.88	137.06	60.51	57.23	34.14
48	Nawalparasi	12	60.01	56.26	95.87	34.58	33.34	30.06
49	Rupandehi	12	79.66	70.35	0	100.16	105.54	111.38
50	Kapilvastu	12	92.41	104.29	125.27	61.97	61.29	57.6
51	Arghakhanchi	12	52.01	57.12	67.52	48.26	47.21	45.07
	Western	192	66	65.91	87.71	52.29	58.58	50.62
52	Pyuthan	12	77.91	82.2	141.72	53.19	58.48	30.28
53	Rolpa	12	59.15	61.34	80.69	43.87	44.68	39.22
54	Rukum	12	72.43	65.67	38.66	32.21	38.76	24.8
55	Salyan	12	95.84	78.7	170.4	58.78	63.91	32.55
56	Dang	12	65.04	81.32	89.52	53.99	73.1	45.92
57	Banke	12	81.55	87.71	111.22	62.46	64.34	66.32
58	Bardiya	12	66.55	68.35	184.08	56.33	55.16	41.2
59	Surkhet	12	85.54	90.81	161.06	75.13	80.42	53.21
60	Dailekh	12	94.65	93.74	264.8	77.36	81.04	55.7
61	Jajarkot	12	90.06	94.15	91.26	45.23	47.1	43.87
62	Dolpa	12	116.54	107.58	13.77	42.48	35.11	20.6
63	Jumla	12	118.66	154.19	97.25	88.86	89.56	90.32
64	Kailikot	12	117.79	109.62	61.06	60.28	64.63	47.56
65	Mugu	12	152.43	117.6	104.48	77.69	89.83	69.65
66	Humla	12	73.08	69.75	36.86	42.51	37.47	45.24
	Mid Western	180	80.67	83.88	127.33	58.18	63.51	46.9
67	Bajura	12	87.29	90.66	131.76	76.37	69.09	38.52
68	Bajhang	12	112.56	115.12	153.93	82.55	83.9	72.92
69	Achham	12	98.06	96.57	156.78	77.77	79.2	56.03
70	Doti	12	82.98	96.46	177.09	75.68	74.48	61.37
71	Kailali	12	62.55	63.82	141.26	48.3	47.05	44.17
72	Kanchanpur	12	65.47	69.08	179.19	58.39	62.94	46.59
73	Dadeldhura	12	100.02	153.96	162.76	64.94	61.27	99.57
74	Baitadi	12	78.32	79.38	152.48	48.19	44.59	48.48
75	Darchula	12	85.63	93.39	213.55	83.5	83.5	60.99
	Far Western	108	78.08	84.09	159.72	62.04	61.72	53.61

Raw Data

CBI-IMCI

Sheet 1 of 3

District Code	District Name	Received Reports		Health Facility Level																																			
				Classification and Treatment for Less than 2 Months																		Classification and Treatment for Greater than 2 Months and Less than 5 years																	
				Total	SBI	LBI	Judice	Hyperthermia	Feeding Problem/Low Weight	Treatment by Cotrim	Treatment by Zimamycine	Refer	Death Cases	Total	Very Severe Disease/Severe	Pneumonia	No Pneumonia	Sever Dehydration	Some Dehydration	No Dehydration	Dysantria/Blood	Severe Fever	Malaria	Other Fever	Ear Problem	Total followup	Total Referr	Death	Medicine	IV Fluid Treatment for Diarrhoea	ORS & Jinc Treatment	Other Classification							
Mountain	192	6024	793	2863	259	110	1063	2526	853	298	38	168754	1532	34731	41879	641	15407	31161	10253	1051	552	13162	10117	39833	556	20	11	36	47825	21348	1645	44491	29207						
Hill	468	23740	3586	9258	1338	181	2449	7560	3974	1352	180	793650	5951	160167	200812	2172	41700	134759	33278	3449	7805	70766	43962	129023	1818	52	24	105	202738	122130	3612	164022	186295						
Terai	240	24837	5179	10823	746	150	2299	11872	5589	1032	43	855078	4039	143205	210212	1645	46103	146856	34033	3452	49074	39981	61036	147326	1267	10	10	26	236185	111810	3859	184330	192102						
National Total	900	54601	9558	22944	2343	441	5811	21958	10416	2682	261	1817482	11522	338103	452903	4458	103210	312576	77562	7952	57431	123909	115115	316182	3641	82	45	167	486748	255288	9116	392843	407604						
1 Taplejung	12	1295	54	808	99	1	283	719	85	58	3	15095	50	872	3921	24	2292	2505	1854	393	190	944	1026	6507	119	2	0	2	4512	1561	66	3621	1858						
2 Panchthar	12	247	33	158	4	0	38	65	30	19	0	16545	110	3884	4769	16	1351	1634	305	105	10	665	643	3148	76	0	0	0	3820	2413	54	3023	3715						
3 Ilam	12	215	19	111	6	0	24	41	51	13	0	11747	73	3840	3001	9	610	1022	190	49	272	527	387	2817	4	1	0	1	4455	2297	8	1580	3562						
4 Jhapa	12	1420	236	786	92	5	211	700	168	154	12	32874	292	8275	10211	68	1942	6107	892	209	4652	1078	2386	8750	15	0	0	0	10498	4981	139	6641	6012						
5 Morang	12	2689	892	723	43	0	112	1477	859	37	2	52960	137	9758	17694	61	1728	6664	951	172	7659	879	3126	7462	64	0	1	1	14058	5588	69	6609	13099						
6 Sunsari	12	1838	574	757	32	18	351	1071	641	73	0	54948	249	14512	15959	21	3952	5570	1454	256	43	4197	3880	12623	170	0	0	0	18619	7970	56	9281	12688						
7 Dhankuta	12	608	76	235	12	1	61	262	73	11	2	16569	57	3637	5463	1	226	2307	544	12	6	374	779	2989	50	0	0	0	4788	1999	14	2549	4523						
8 Teharathum	12	312	94	140	33	3	14	73	49	15	3	9700	87	2259	2895	50	637	1254	195	16	2	72	424	1276	362	0	0	0	2393	1037	27	1601	2087						
9 Sankhuwasabha	12	790	68	239	16	11	198	72	52	29	2	13914	103	3218	2930	32	418	2511	426	35	30	927	732	1859	0	3	1	4	2077	2686	43	2702	4257						
10 Bhojpur	12	394	55	235	31	0	73	146	55	22	5	23771	95	4292	5316	7	1198	3209	1084	126	20	1627	1431	4003	11	0	0	0	5598	3801	24	4147	5366						
11 Solukhumbu	12	420	9	199	7	0	32	203	5	24	2	14065	54	3371	3944	20	1629	2267	315	81	2	498	844	3119	86	3	2	4	4842	1332	58	3181	2119						
12 Okhaldhunga	12	469	59	261	8	3	45	163	57	270	3	22638	134	5718	5835	70	2280	2258	617	150	17	110	1159	5405	29	0	0	0	7254	3548	185	3510	2880						
13 Khotang	12	712	66	461	18	11	80	294	111	54	4	20716	123	5105	5443	44	2372	3047	1256	41	17	1311	2146	6597	17	6	0	11	7190	4526	79	4398	1686						
14 Udayapur	12	688	74	469	57	8	36	192	104	23	1	21858	181	3665	5974	143	1861	3128	1172	73	65	1149	1693	3763	77	0	0	0	5829	2888	97	5072	5467						
15 Saptari	12	1164	55	752	7	4	163	518	64	47	0	53225	255	7360	9708	264	5712	9229	1531	269	559	3343	4362	8592	74	0	0	0	13977	5966	236	14358	9452						
16 Siraha	12	863	127	519	8	0	55	311	192	73	1	56674	269	8776	18073	73	4645	8567	1458	177	179	5149	4705	11187	18	1	0	1	16360	8391	105	12887	16500						
Eastern	192	14124	2491	6853	473	65	1776	6307	2596	922	40	437299	2268	88542	121346	903	32853	61279	14244	2004	13723	23850	29723	90297	1172	16	4	24	127000	60984	1260	85160	95251						
17 Dhanusha	12	452	39	373	10	5	151	215	129	37	4	49006	48	8192	13453	29	2265	8392	1418	26	3938	629	5181	9476	2	0	0	0	14244	4744	99	11449	9931						
18 Mahottari	12	880	276	424	6	2	133	609	329	9	1	40876	59	4258	9476	49	2432	4175	3636	114	5732	506	4023	10186	180	6	8	14	14757	4065	1078	6404	6102						
19 Sarlahi	12	970	179	567	3	16	46	472	347	47	1	40854	264	7899	10244	111	2584	7827	1488	60	144	2595	3786	8389	43	0	0	0	12029	4372	278	10221	11292						
20 Sindhuli	12	230	66	112	8	2	17	98	61	15	3	12360	127	3547	2621	46	977	1891	305	59	679	1193	835	2908	31	1	4	5	4111	1845	130	2127	1947						
21 Ramechhap	12	452	31	175	7	1	19	57	22	24	0	17764	65	4270	4040	44	368	2507	604	34	5	1445	669	2615	49	0	0	0	4252	2134	54	2525	4444						
22 Dolkha	12	200	10	124	10	1	21	36	19	11	2	15849	43	3316	4363	25	1077	2504	877	8	1	1405	837	2555	10	5	0	5	4826	1372	44	3807	2893						
23 Sindhupalchowk	12	443	83	224	43	4	10	147	35	50	0	19938	266	4736	4912	101	1046	2701	944	112	48	1869	915	3610	65	2	1	2	6110	2819	119	3685	2865						
24 Kavre	12	558	91	215	16	6	31	221	64	22	1	25075	78	5666	6921	26	1192	4205	688	26	10	1275	978	4420	43	1	0	3	5625	4102	83	4747	4807						
25 Lalitpur	12	0	0	0	0	0	0	0	0	0	0	14500	107	4517	5740	19	457	3660	0	0	0	0	0	3453	0	0	0	0	2955	5558	16	3864	0						
26 Bhaktapur	12	150	12	74	10	0	8	10	0	17	1	10178	8	1685	3068	9	158	1803	416	91	6	1213	412	700	48	0	0	0	52033	1450	30	1995	1998						
27 Kathmandu	12	328	35	164	24	4	26	110	6	45	1	23988	43	4538	6110	115	898	4789	733	34	22	1643	1269	4847	4	0	0	0	4737	2357	26	5441	4130						
28 Nuwakot	12	420	38	248	30	2	26	196	54	44	0	11689	136	2433	2959	42	725	2078	510	148	14	763	883	2336	13	0	0	0	83304	1936	99	2805	1809						
29 Rasuwa	12	37	4	19	3	0	2	17	5	0	0	4631	26	1201	1006	0	223	375	190	7	0	435	215	861	2	0	0	0	996	568	121	757	623						
30 Dhading	12	1015	155	473	144	7	77	241	95	95	5	29361	344	7353	5942	65	1704	4537	2127	120	25	2714	1516	5917	88	1	0	1	18604	4730	103	6487	7817						
31 Makawanpur	12	692	34	194	41	3	30	114	59	33	2	15030	62	3185	3161	20	1051	2212	562	75	43	858	966	1783	9	1	2	3	40899	2256	38	2857	2181						
32 Rautahat	12	775	86	459	25	20	122	356	204	43	0	42995	368	5391	7741	272	3837	4236	4660	1269	781	4230	4832	12090	46	0	0	0	13946	5095	715	9907	8574						
33 Bara	12	483	56	274	9	2	33	203	88	37	1	46204	161	6056	9460	24	2303	8718	1405	35	55	4665	4757	7292	110	1	0												

Raw Data  
CBI-IMCI  
Sheet 3 of 3

District Code	District Name	Received Reports	VHW/MCHW												
			Total ARI Treated	Cotrim Treatment		Reffer:		Follow up	No Pneumonia	Death reported	Diahhorea total	ORS & Jinc Treatment	Diahhorea Cases Treatment	ORS Expenditure	Zinc Expenditure
				Treatment by Cotrim	Followup	< 2 months	>2 M. & <5 Yrs.								
	Mountain	192	40804	14830	12204	243	973	3872	28073	19	27612	25133	2968	45695	234575
	Hill	468	178348	51148	42524	604	2854	11487	129406	9	117507	111282	2067	190304	1016372
	Terai	240	300458	51171	48641	422	1201	20486	186548	4	166574	141838	5441	187203	992124
	National Total	900	519610	117149	103369	1269	5028	35845	344027	32	311693	278253	10476	423202	2243071
1	Taplejung	12	5741	2567	2292	17	194	853	3137	0	3409	3222	2342	6339	31027
2	Panchthar	12	3592	1078	1034	0	27	130	2514	0	2040	2057	23	3401	19710
3	Ilam	12	5041	2435	1909	17	171	429	2649	0	3192	2855	50	6086	26795
4	Jhapa	12	10721	2676	2330	25	65	512	8011	0	7140	6849	47	13400	68877
5	Morang	12	10736	2764	2617	3	21	192	7961	1	5378	5159	77	9015	51925
6	Sunsari	12	8520	3248	3151	70	61	445	5314	0	6682	5617	75	10377	51368
7	Dhankuta	12	2991	849	829	0	7	65	2135	0	1519	1508	9	2414	14685
8	Teharthur	12	1900	562	386	6	42	125	1324	0	1163	1131	8	2191	9702
9	Sankhuwasabha	12	1795	533	407	2	3	18	1290	0	753	734	0	1310	6684
10	Bhojpur	12	4434	1238	1020	12	39	426	3094	0	2451	2477	14	4000	24410
11	Solukhumbu	12	2820	1098	850	47	156	380	1819	2	1752	1319	38	3162	9540
12	Okhaldhunga	12	4549	1943	1370	33	175	617	2628	1	2573	1944	26	3794	22031
13	Khotang	12	5252	2352	1982	46	118	783	3547	1	2890	2740	17	5367	23878
14	Udaypur	12	3768	1118	958	4	50	398	2676	1	2424	2444	26	4102	25125
15	Saptari	12	12135	2464	2237	46	193	827	9676	0	9205	8297	118	14573	66991
16	Siraha	12	11687	3408	3396	16	17	33	8417	0	7672	7586	16	11303	75930
	Eastern	192	95682	30333	26768	344	1339	6233	66192	6	60243	55939	2886	100834	528678
17	Dhanusha	12	14333	2917	2717	4	26	208	11269	0	9115	8879	14	13719	92973
18	Mahottari	12	12208	2786	2728	31	35	185	8801	0	7903	7258	88	11383	65972
19	Sarlahi	12	15141	3071	3023	7	30	621	11957	0	9442	8448	43	12372	82078
20	Sindhuli	12	5586	1549	1407	8	97	218	3784	0	3713	3638	44	6173	33712
21	Ramechhap	12	3193	1017	924	10	2	61	2176	0	1581	1533	28	2503	15420
22	Dolkha	12	3954	1687	1270	18	86	446	2523	0	2762	2561	267	4773	24622
23	Sindhupalchowk	12	4045	1591	1021	46	213	327	2571	0	2795	2601	61	4532	20586
24	Kavre	12	5262	1345	1161	6	43	325	3945	0	3633	3615	126	6973	36420
25	Lalitpur	12	9708	1001	1051	0	32	1123	9513	0	6137	5564	1	917	0
26	Bhaktapur	12	1526	231	149	3	147	110	1340	0	1185	1124	10	2291	11360
27	Kathmandu	12	4795	984	777	10	139	546	3940	0	4364	4129	61	9507	39981
28	Nuwakot	12	4690	1811	1402	35	146	701	3173	0	3063	2819	58	5271	27457
29	Rasuwa	12	924	257	173	0	2	23	669	0	839	797	0	1601	7670
30	Dhading	12	5856	1877	1518	61	169	581	4011	0	4007	3935	73	6776	39110
31	Makawanpur	12	2958	939	659	1	0	32	2016	0	2492	2439	11	3849	24366
32	Rautahat	12	10648	3259	3186	6	33	543	7494	0	8697	7839	4203	10678	77927
33	Bara	12	10120	2469	2460	6	1	63	7611	0	7586	7438	15	10307	76610
34	Parsa	12	24862	7445	7889	0	264	11163	24862	0	20595	16755	75	5410	0
35	Chitwan	12	5045	1329	1275	25	14	277	3678	2	4387	4317	49	7360	42734
	Central	228	144854	37565	34790	277	1479	17553	115333	2	104296	95689	5227	126395	718998
36	Gorkha	12	4917	1714	1480	12	74	457	3210	0	2719	2508	32	4925	24609
37	Lamjung	12	3205	601	585	0	0	9	2605	0	1997	1999	0	2865	20100
38	Tanahu	12	3635	1089	887	15	93	319	2620	0	2449	2165	54	4265	19881
39	Syangja	12	6847	933	893	1	9	92	5919	0	3065	3017	43	4806	30272
40	Kaski	12	2819	667	456	3	69	59	2171	1	1830	1765	7	3103	17060
41	Manang	12	45	12	10	0	0	13	36	0	27	27	0	51	360
42	Mustang	12	137	12	12	0	9	13	128	0	94	94	1	180	970
43	Myagdi	12	3221	916	855	29	29	395	2259	0	2003	1757	48	3175	17170
44	Parbat	12	4355	1182	1021	0	0	13	3194	0	2031	1967	29	3440	19440
45	Baglung	12	4754	1734	1732	7	83	90	3027	0	2252	2248	10	4749	22320
46	Gulmi	12	5807	1821	1622	6	79	372	4044	0	3298	3058	103	6038	29106
47	Palpa	12	3441	786	706	7	11	40	2655	0	2142	2130	13	3504	21250
48	Nawalparasi	12	5425	1425	1337	2	5	29	3968	1	3620	3584	5	5190	32330
49	Rupandehi	12	114566	2563	2347	0	0	3416	41508	0	35493	22257	94	15214	0
50	Kapilvastu	12	9677	3554	2634	131	378	1571	6816	0	8295	7547	255	14562	73115
51	Arghakhanchi	12	2580	1375	630	34	83	141	1314	0	1219	1049	20	1963	7102
	Western	192	175431	20384	17207	247	922	7029	85474	2	72534	57172	714	78030	335285
52	Pyuthan	12	4614	1585	1529	0	7	44	2997	2	2455	2409	41	3132	22678
53	Rolpa	12	5540	1924	1390	47	114	598	3659	0	4411	4020	133	7955	36363
54	Rukum	12	4320	1789	536	51	198	220	2268	0	3313	3267	155	5834	32600
55	Salyan	12	3711	1075	965	4	7	8	2736	0	2837	2758	6	3647	27070
56	Dang	12	3653	1211	935	9	5	79	2591	0	3192	3134	71	5001	31360
57	Banke	12	6278	1583	1548	12	5	159	4758	0	3952	3607	41	6224	34943
58	Bardiya	12	5043	1238	1226	20	17	60	3792	0	3087	2775	30	3773	27645
59	Surkhet	12	5423	1687	1423	12	61	275	3736	0	4334	4135	41	6206	36198
60	Dailekh	12	6415	1273	1187	10	4	43	5135	1	4201	4006	10	6244	38570
61	Jajarkot	12	4254	1425	829	71	182	365	2658	1	3475	2751	109	5866	25469
62	Dolpa	12	443	210	111	0	13	55	262	3	239	219	0	437	2190
63	Jumla	12	2170	970	1018	24	54	181	1219	0	1523	1308	45	2523	16383
64	Kalikot	12	2910	1114	969	13	39	141	1790	0	2142	1929	85	3400	20920
65	Mugu	12	905	416	287	14	74	139	539	14	566	438	30	969	3996
66	Humla	12	1095	1191	672	38	73	159	1580	0	1978	1906	57	3856	9803
	Mid Western	180	56774	18691	14625	325	853	2526	39720	21	41705	38662	854	65067	366188
67	Bajura	12	4209	1077	1058	7	12	1012	3047	0	2418	2353	3	3328	23193
68	Bajhang	12	4963	1040	999	10	22	82	3877	0	3329	2659	11	4833	27849
69	Achham	12	7711	1537	1316	10	150	821	6661	0	6970	6878	106	12759	66955
70	Doti	12	6446	1292	1122	10	106	164	5037	0	5250	4759	491	9045	47590
71	Kailali	12	6618	1266	1114	8	31	86	5557	0	3613	2956	113	4516	2394



Raw Data  
CBI-IMCI  
Sheet 3 of 3

District Code	District Name	Received Reports	FCHV												
			Total ARI Treated	Cotrim Treatment		Referer:		Follow up	No Pneumonia	Death reported	Diahorea total	ORS & Jinc Treatment	Diahorea Cases Treatment	ORS Expenditure	Zinc Expenditure
				Treatment by Cotrim	Followup	< 2 months	>2 M. & <5 Yrs.								
	Mountain	192	138778	41535	37491	764	3657	13583	96945	26	91746	75872	6854	121200	623126
	Hill	468	732709	142108	125684	2535	12344	31436	570909	31	461691	433748	17922	635365	4128616
	Terai	240	692411	131898	129047	3836	11322	20428	541273	30	446269	413328	22049	587171	4081265
	National Total	900	1563898	315541	292222	7135	27323	65447	1209127	87	999706	922948	46825	1343736	8833007
1	Taplejung	12	10765	4063	3732	15	362	1127	6560	1	5286	5196	3383	9490	48242
2	Panchthar	12	17062	2820	2749	7	188	207	14244	3	8722	8737	29	10941	85689
3	Ilam	12	19125	3493	2668	68	759	752	15517	0	11680	9485	426	16991	68470
4	Jhapa	12	54725	13549	12948	500	2007	3211	39004	1	32951	31037	2174	47674	301052
5	Morang	12	54286	14920	14672	260	401	1292	38762	14	29008	27876	1743	67008	286250
6	Sunsari	12	42187	11317	10922	794	2147	1948	28554	1	33009	28926	3307	40179	258585
7	Dhankuta	12	14851	3683	3618	16	75	410	11077	4	7530	7502	34	8654	71410
8	Tehrathum	12	7846	1149	884	5	267	303	6195	0	3995	3867	15	5687	32508
9	Sankhuwasabha	12	8431	2049	1696	36	79	63	6447	12	2856	2786	60	3937	26714
10	Bhojpur	12	21562	4256	3815	20	215	1586	16779	0	10607	10171	391	13192	101728
11	Solukhumbu	12	7627	2800	2228	223	910	1175	4774	1	4413	3086	318	6122	7967
12	Okhaldhunga	12	16547	4781	3877	72	690	2046	11437	2	7822	5861	289	9134	60133
13	Khotang	12	13539	4527	4200	85	508	1537	8217	0	5891	5217	243	9865	37166
14	Udaypur	12	15410	4464	3605	129	363	1435	10905	0	10602	10537	275	14620	105816
15	Saptari	12	40076	2983	2600	44	485	1274	36591	0	24571	20372	651	29787	143924
16	Siraha	12	43844	7950	7939	94	335	424	35468	5	21074	20573	110	24114	205770
	Eastern	192	387883	88804	82153	2368	9800	18790	290531	44	220017	201229	13448	317395	1841424
17	Dhanusha	12	47231	6096	5834	10	64	572	38454	1	23902	21905	84	31011	230441
18	Mahottari	12	34352	5407	5333	28	164	455	28571	0	16666	16316	135	20723	139966
19	Sarlahi	12	54458	7167	6887	66	331	1854	46984	0	19992	18707	752	23566	171323
20	Sindhuli	12	24881	5980	5633	55	200	847	13639	0	12225	11930	165	17183	114015
21	Ramechhap	12	19440	2742	2353	11	98	192	16698	0	11801	11403	396	14186	107528
22	Dolkha	12	13883	3453	2633	82	558	1381	10034	0	9539	8979	1173	14673	79059
23	Sindhupalchowk	12	11799	1773	1281	112	715	568	9871	1	7780	6862	715	9970	50750
24	Kavre	12	22619	2669	2485	34	383	851	19947	0	15012	14628	784	23088	147430
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	4276	208	126	18	549	197	4025	0	4159	3941	139	7008	39720
27	Kathmandu	12	21808	564	741	87	582	1970	20618	0	16995	15513	1333	28617	146205
28	Nuwakot	12	10835	2573	1930	104	545	1211	8445	0	6544	6104	251	10391	57908
29	Rasuwa	12	3185	482	449	0	13	78	2696	0	2809	2665	8	4259	25440
30	Dhading	12	20042	4076	3427	76	673	1368	15812	0	14523	14253	599	19947	108429
31	Makawanpur	12	21034	4766	4315	160	370	529	15908	1	20047	18410	770	22564	342819
32	Rautahat	12	30291	6845	6706	7	47	1163	23352	0	16437	15569	74	18232	153938
33	Bara	12	38406	6822	7068	34	65	379	28455	0	20983	19883	381	25322	196103
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	23283	5532	5364	158	338	913	17486	1	16512	16135	737	23283	161280
	Central	228	401823	67155	62565	1042	5695	14528	320995	4	235926	223203	8496	314023	2304754
36	Gorkha	12	18391	4484	3557	75	465	1108	14030	0	7332	6783	330	11839	64614
37	Lamjung	12	15908	1837	1812	7	11	43	13985	0	10825	10825	74	12701	108250
38	Tanahu	12	12561	2654	2402	1	105	1045	10060	0	7462	6943	231	11955	66740
39	Syangja	12	28756	3408	3276	25	119	465	25365	0	10677	10656	440	14768	106060
40	Kaski	12	23581	1826	1620	118	228	364	21517	0	12336	11099	622	18649	109120
41	Manang	12	213	20	18	0	4	51	190	0	156	139	0	289	1390
42	Mustang	12	330	7	4	0	4	91	323	0	246	246	3	438	2440
43	Miyagdi	12	7984	1099	905	23	127	629	6683	0	5151	4608	35	8333	38533
44	Parbat	12	17459	2857	2647	37	74	47	14692	2	7246	7004	264	10137	69917
45	Baglung	12	15100	3611	3611	59	297	356	11492	0	6269	6263	177	11294	62210
46	Gulmi	12	29620	5223	4901	27	215	1548	23399	0	14049	12113	1057	20515	91944
47	Palpa	12	18251	4467	4170	27	37	228	13783	0	11848	11843	14	16665	118150
48	Nawalparasi	12	28793	4891	5368	89	386	396	20759	1	20377	19574	700	23816	183560
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	14909	2748	2411	122	597	1901	11836	0	12770	11592	469	20664	108150
51	Arghakhanchi	12	12837	1614	1037	80	589	1092	10457	0	6144	4210	666	8572	13869
	Western	192	244693	40746	37739	690	3258	9364	198571	3	132888	123898	5082	190635	1144947
52	Pyuthan	12	22904	6932	6666	28	86	138	15909	0	11707	11398	331	13478	108840
53	Rolpa	12	19453	5744	5056	54	324	2069	13553	2	15251	14973	668	22275	112153
54	Rukum	12	7056	2547	1062	119	390	335	4053	2	5159	5156	386	7109	51350
55	Salyan	12	22205	6913	5360	93	144	79	16663	0	16795	17282	664	20300	163820
56	Dang	12	26799	7414	6998	217	1058	729	19269	0	24899	24202	1744	29227	459076
57	Banke	12	30726	7766	7658	181	498	1001	22722	0	24697	22937	1955	33738	214572
58	Bardiya	12	42928	6733	6664	588	516	655	35512	1	24526	23049	1124	29085	227343
59	Surkhet	12	32925	8290	7535	102	497	1473	24635	0	29349	27699	804	37352	206429
60	Dailekh	12	46322	7600	7336	61	137	248	34075	1	34190	30117	508	41854	288456
61	Jajarkot	12	13004	2455	1453	139	573	743	5788	3	6463	5396	457	9792	46875
62	Dolpa	12	728	403	351	7	68	167	415	0	474	460	16	913	4400
63	Jumla	12	13961	5493	5387	85	224	1057	7280	0	8260	7327	210	13310	66229
64	Kalikot	12	12682	3894	3786	47	165	573	8575	2	8146	7736	510	11488	78765
65	Mugu	12	2775	1435	1037	26	160	383	1514	7	1226	1136	101	2090	9367
66	Humla	12	3838	2212	1817	90	174	353	3402	0	3571	3569	119	7396	60250
	Mid Western	180	298306	75831	68166	1837	5014	10003	213365	18	214713	202437	9597	279407	2043725
67	Bajura	12	18373	6620	6509	0	66	6106	11235	2	9879	9650	26	11972	89416
68	Bajhang	12	18290	5471	5203	30	103	347	13117	0	10531	8443	133	14395	55748
69	Achham	12	33183	5671	5164	107	653	2705	27318	0	22457	20606	468	31990	174787
70	Doti	12	20005	3513	3217	70	339	494	16082	4	17759	15820	1939	26324	158200
71	Kailali	12	51473	9116	9142	526	1504	1838	41500	1	42634	34643	3674	51108	251601
72	Kanchanpur	12	33644	4642	4533	118	379	423	27994	4	41261	40032	2235	48634	388331
73	Dadeldhura	12	14408	1917	1931	312	297	380	12738	3	13556	12792	1181	17447	132431
74	Baitadi	12	29919	4695	4540	24	163	406	25169	4	21511	22603	467	29948	176494
75	Darchula	12	11898	1360	1360	11	52	63	10512	0	16574	7592	79	10458	71149
	Far Western	108	231193	43005	41599	1198	3556	12762	185665	18	196162	172181	10202	242276	1498157

Analysed Data

ARI

District Code	District Name	Received Report	ARI Incidence per 1000	Incidence of Pneumonia (Mild and Severe) per 1000	Incidence of Severe Pneumonia per 1000	% of Pneumonia (Mild and Severe) among new ARI cases	% of Severe Pneumonia among new ARI cases	% Treated with Antibiotic	ARI Case Fatality	% of ARI Cases at		
										HF	VHW/MCHW	FCHV
	Mountain	192	1059.69	380.86	6.3	35.94	0.59	48.71	0.03	30.32	15.83	53.85
	Hill	468	901.52	253.51	4.2	28.12	0.47	40.54	0.01	28.71	13.96	57.33
	Terai	240	835.07	204.27	2.5	24.46	0.3	39.33	0	26.47	22.25	51.28
	National Total	900	880.48	238.67	3.52	27.11	0.4	40.7	0.01	27.81	18	54.19
1	Taplejung	12	1128.5	399.2	2.64	35.37	0.23	59.5	0.04	22.68	26.89	50.42
2	Panchthar	12	1033.99	277.4	3.87	26.83	0.37	34.44	0	29.79	12.21	58
3	Ilam	12	918.11	290.71	2.16	31.66	0.23	40.8	0.01	22.25	16.22	61.53
4	Jhapa	12	1055.08	310.57	3.66	29.44	0.35	37.64	0	22.3	12.73	64.98
5	Morang	12	895.8	266.77	1.33	29.78	0.15	40.31	0	29.79	11.59	58.62
6	Sunsari	12	969.27	349.08	2.96	36.02	0.31	50.54	0	37.73	10.46	51.81
7	Dhankuta	12	1316	400.96	2.78	30.47	0.21	41.92	0	33.92	11.08	55.01
8	Tehrathum	12	1064.19	288.08	6.18	27.07	0.58	34.3	0	34.97	12.68	52.35
9	Sankhuwasabha	12	782.83	280.45	4.89	35.83	0.63	49.01	0.05	37.94	10.89	51.17
10	Bhojpur	12	1429.56	395.68	3.8	27.68	0.27	41.72	0	27.18	12.42	60.4
11	Solkhumbu	12	1261.31	518.44	3.82	41.1	0.3	56.53	0.04	41.36	15.83	42.81
12	Okhaldhunga	12	1479.24	567.46	6.05	38.36	0.41	53.46	0	35.65	13.88	50.47
13	Khotang	12	882.31	362.57	3.68	41.09	0.42	63.12	0.06	36.22	17.83	45.95
14	Udaypur	12	686.23	223.11	4.28	32.51	0.62	49.31	0	33.86	12.99	53.14
15	Saptari	12	864.82	162.46	3.17	18.79	0.37	36.51	0	24.91	17.45	57.64
16	Siraha	12	975.59	240.84	3.18	24.69	0.33	43.69	0	32.81	14.14	53.05
	Eastern	192	984.99	297.33	3.21	30.19	0.33	44.16	0.01	30.47	13.76	55.77
17	Dhanusha	12	824.78	170.91	0.48	20.72	0.06	33.63	0	26.06	17.22	56.73
18	Mahottari	12	716.4	148.5	0.7	20.73	0.1	44.76	0.04	22.85	20.23	56.92
19	Sarlahi	12	890.9	186.28	2.67	20.91	0.3	30.27	0	20.92	17.2	61.88
20	Sindhuli	12	844.89	257.48	2.92	30.47	0.35	36.68	0.02	17.12	15.2	67.68
21	Ramechhap	12	1048.81	284.86	2.17	27.16	0.21	32.25	0	28.05	10.15	61.8
22	Dolkha	12	1007.61	335.05	1.7	33.25	0.17	44.36	0.06	30.21	15.47	54.32
23	Sindhupalchowk	12	648.9	210.76	6.7	32.48	1.03	47.72	0.02	38.49	15.7	45.81
24	Kavre	12	839.34	202	1.61	24.07	0.19	33.89	0.01	31.24	12.98	55.79
25	Lalitpur	12	674.28	188.96	3.59	28.02	0.53	47.4	0	51.63	48.37	0
26	Bhaktapur	12	509.87	102.91	0.39	20.18	0.08	37.13	0	45.07	14.45	40.48
27	Kathmandu	12	268.59	44.14	0.31	16.43	0.12	23.17	0	28.67	12.86	58.48
28	Nuwakot	12	576.87	190.52	3.73	33.03	0.65	45.71	0	26.26	22.28	51.47
29	Rasuwa	12	1084.1	336.07	4.44	31	0.41	36.31	0	35.21	14.57	50.22
30	Dhading	12	826.1	285.21	7.19	34.52	0.87	48.78	0.01	34.5	14.81	50.69
31	Makawanpur	12	549.52	161.82	1.12	29.45	0.2	39.64	0.02	21.08	9.73	69.19
32	Rautahat	12	612.46	178.46	4.14	29.14	0.68	53.54	0	24.8	19.56	55.64
33	Bara	12	711.85	171.94	1.79	24.15	0.25	48.37	0.01	24.42	15.76	59.82
34	Parsa	12	463.92	177.45	4.58	38.25	0.99	38.23	0	30.87	69.13	0
35	Chitwan	12	716.27	255.09	0.85	35.61	0.12	56.39	0	30.33	12.41	57.26
	Central	228	672.18	178.32	2.33	26.53	0.35	40.53	0.01	27.33	19.26	53.42
36	Gorkha	12	906.44	319.53	1.64	35.25	0.18	51.11	0	30.67	14.63	54.7
37	Lamjung	12	1221.64	280.47	10.65	22.96	0.87	27.26	0.01	27.58	12.14	60.28
38	Tanahu	12	553.27	150.97	0.94	27.29	0.17	38.28	0	29.51	15.82	54.67
39	Syangja	12	1007.18	157.3	0.84	15.62	0.08	23.01	0	17.81	15.81	66.39
40	Kaski	12	792.59	109.88	0.44	13.86	0.06	18.98	0	22.8	8.24	68.96
41	Manang	12	822.44	214.49	8.52	26.08	1.04	33.16	0	55.44	7.77	36.79
42	Mustang	12	1251.75	300.86	28.06	24.03	2.24	47.88	0	70.92	8.53	20.55
43	Myagdi	12	1019.19	252.41	1.69	24.77	0.17	34.13	0.02	33.66	19.07	47.27
44	Parbat	12	1394.75	381.22	2.54	27.33	0.18	34.17	0	24.97	14.98	60.05
45	Baglung	12	812.25	265.31	2.47	32.66	0.3	47.73	0	36.53	15.2	48.28
46	Gulmi	12	1089.12	264.6	4.33	24.29	0.4	35.27	0	24.69	12.35	62.97
47	Palpa	12	808.4	250.32	3.4	30.97	0.42	40.64	0.08	29.31	11.21	59.48
48	Nawalparasi	12	619.38	166.81	1.09	26.93	0.18	43.2	0	30.17	11.07	58.76
49	Rupandehi	12	1311.57	78.85	0.16	6.01	0.01	8.5	0	12.94	87.06	0
50	Kapilvastu	12	534.12	155.1	5.74	29.04	1.07	65.2	0	37.27	24.69	38.04
51	Arghakhanchi	12	732.17	208.92	4.26	28.53	0.58	43.39	0.01	30.46	11.64	57.9
	Western	192	890.33	188.24	2.5	21.14	0.28	31.77	0.01	24.93	31.35	43.73
52	Pyuthan	12	1042.11	366.2	2.35	35.14	0.23	47.98	0.01	26.89	12.26	60.85
53	Rolpa	12	1016.91	386.55	7.66	38.01	0.75	53.77	0.03	30.25	15.46	54.29
54	Rukum	12	747.97	326.33	16.53	43.63	2.21	81.93	0	43.38	21.5	35.12
55	Salyan	12	830.69	294.99	4.5	35.51	0.54	44.79	0	22.07	11.16	66.77
56	Dang	12	641.81	211.54	2.12	32.96	0.33	56.24	0.01	30.77	8.3	60.92
57	Banke	12	946.61	292.65	3.96	30.92	0.42	47.77	0	30.34	11.82	57.84
58	Bardiya	12	1201.01	291.96	4.78	24.31	0.4	36.34	0	27.14	7.66	65.2
59	Surkhet	12	1211.93	353.89	4.95	29.2	0.41	48.19	0	29.1	10.03	60.87
60	Dailekh	12	1572.28	338.5	4.82	21.53	0.31	29.14	0	16.2	10.19	73.61
61	Jajarkot	12	1321.55	364.28	25.18	27.56	1.91	53.81	0.06	33.56	16.38	50.06
62	Dolpa	12	607.55	276.6	5.76	45.53	0.95	64.71	0	55.61	16.79	27.6
63	Jumla	12	1584.12	671.55	7.11	42.39	0.45	48.87	0	26.91	9.83	63.26
64	Kalikot	12	1159.74	408.54	8.2	35.23	0.71	47.86	0.05	20.7	14.8	64.5
65	Mugu	12	794.13	394.57	8.65	49.69	1.09	64.17	0	39.27	14.93	45.79
66	Humla	12	1250.65	671.41	20.56	53.69	1.64	74.86	0.05	43.28	12.59	44.13
	Mid Western	180	1042.48	330.65	6.33	31.72	0.61	47.45	0.01	27.81	11.54	60.64
67	Bajura	12	1571.08	606.27	7.58	38.59	0.48	50.82	0	23.24	14.31	62.45
68	Bajhang	12	1092	364.69	8.9	33.4	0.82	40.16	0.01	27.09	15.56	57.35
69	Achham	12	1533.42	364.66	7.69	23.78	0.5	39.52	0.01	35.13	12.23	52.64
70	Doti	12	1072.68	268.13	4.93	25	0.46	40.15	0.04	25.35	18.19	56.46
71	Kailali	12	824.58	173.21	2.65	21.01	0.32	32.52	0	26.24	8.4	65.35
72	Kanchanpur	12	865.38	191.86	2.17	22.17	0.25	45.2	0.01	28.75	5.91	65.34
73	Dadeldhura	12	1296.32	330.34	20.45	25.48	1.58	44.72	0.08	36.92	9.22	53.87
74	Baitadi	12	1338.54	348.25	9.05	26.02	0.68	33.27	0.07	23.89	14.04	62.07
75	Darchula	12	1179.98	287.7	4.01	24.38	0.34	35.47	0	24.1	21.32	54.58
	Far Western	108	1098.17	279.62	5.92	25.46	0.54	39.17	0.02	28.11	12.12	59.77

### Analysed Data

#### CDD

District Code	District Name	Received Report	CDD Incidence per 1000	Dehydration (Mild and Severe) among new Cases	Severe Dehydration among new Cases	% Treated With		CDD Case Fatality	% of CDD Cases at		
						ORS	IV Fluid		HF	VHW/MCHW	FCHV
	Mountain	192	684.88	70.27	0.38	96.43	3.57	0.01	28.34	16.58	55.08
	Hill	468	534.59	77.71	0.29	97.85	2.15	0	23.57	15.51	60.92
	Terai	240	499.22	74.69	0.2	97.95	2.05	0	24.08	20.63	55.28
	National Total	900	528.29	75.59	0.26	97.73	2.27	0	24.27	18	57.73
1	Taplejung	12	714.45	79.42	0.18	98.21	1.79	0	35.67	25.22	39.11
2	Panchthar	12	483.76	88.36	0.12	98.25	1.75	0	21.8	14.82	63.37
3	Ilam	12	487.8	78.48	0.05	99.5	0.5	0	9.94	19.33	70.73
4	Jhapa	12	603.91	82.76	0.14	97.95	2.05	0	16.84	14.81	68.35
5	Morang	12	414.37	81.29	0.14	98.97	1.03	0	19.73	12.55	67.71
6	Sunsari	12	586.06	78.23	0.04	99.4	0.6	0	19.38	13.57	67.05
7	Dhankuta	12	564.58	79.75	0.01	99.45	0.55	0	21.88	13.11	65.01
8	Teharthur	12	504.08	80.08	0.7	98.34	1.66	0	27.34	16.38	56.28
9	Sankhuwasabha	12	312.14	60.43	0.49	98.43	1.57	0.02	45.07	11.46	43.47
10	Bhojpur	12	699.66	79.29	0.04	99.42	0.58	0	25.26	14.03	60.71
11	Solukhumbu	12	713.7	60.05	0.2	98.21	1.79	0.02	38.85	17.38	43.78
12	Okhaldhunga	12	676.97	67.69	0.47	94.99	5.01	0	30.71	17.15	52.14
13	Khotang	12	426.57	72.82	0.31	98.24	1.76	0	38.35	20.29	41.36
14	Udaypur	12	429.7	82.53	0.79	98.12	1.88	0	28.26	13.35	58.39
15	Saptari	12	609.19	70.73	0.54	98.38	1.62	0	31.04	18.79	50.16
16	Siraha	12	496.13	78.22	0.17	99.19	0.81	0	31.61	18.25	50.14
	Eastern	192	531.49	77.52	0.24	98.54	1.46	0	25.32	16.05	58.63
17	Dhanusha	12	432.94	75.69	0.07	99.14	0.86	0	24.45	20.86	54.69
18	Mahottari	12	370.65	83.44	0.16	85.59	14.41	0.03	21.32	25.31	53.37
19	Sarlahi	12	404.48	74.71	0.28	97.35	2.65	0	26.33	23.63	50.04
20	Sindhuli	12	433.27	88.01	0.24	94.24	5.76	0.02	15.46	19.7	64.85
21	Ramechhap	12	543.48	81.88	0.27	97.91	2.09	0	17.91	9.7	72.39
22	Dolkha	12	627.1	79.47	0.16	98.86	1.14	0	22.67	17.36	59.97
23	Sindhupalchowk	12	363.35	73.56	0.7	96.87	3.13	0.01	26.68	19.38	53.94
24	Kavre	12	498.23	80.86	0.11	98.28	1.72	0	22.53	15.09	62.37
25	Lalitpur	12	345.1	58.79	0.18	99.59	0.41	0	40.26	59.74	0
26	Bhaktapur	12	353.04	71.53	0.12	98.52	1.48	0	26.93	16.2	56.86
27	Kathmandu	12	195.6	76.04	0.42	99.52	0.48	0	21.36	16.07	62.58
28	Nuwakot	12	341.2	77.82	0.34	96.59	3.41	0	22.85	24.6	52.55
29	Rasuwa	12	787.35	80	0	86.22	13.78	0	20.8	18.22	60.99
30	Dhading	12	518.93	80.36	0.26	98.44	1.56	0	25.39	16.13	58.48
31	Makawanpur	12	466.77	84.89	0.08	98.69	1.31	0.01	12.71	9.65	77.64
32	Rautahat	12	376.65	82.19	0.81	93.27	6.73	0	24.93	25.98	49.1
33	Bara	12	439.22	74.84	0.06	98.55	1.45	0	27.88	19.15	52.97
34	Parsa	12	387.34	63.74	0.28	97.91	2.09	0	31.42	68.58	0
35	Chitwan	12	443.35	82.53	0.07	97.96	2.04	0	16.96	17.43	65.61
	Central	228	397.81	77.7	0.25	96.75	3.25	0	23.58	23.43	52.99
36	Gorkha	12	378.58	73.48	0.11	99.42	0.58	0	28.42	19.36	52.22
37	Lamjung	12	708.93	86.8	0.16	99.54	0.46	0	16.28	13.04	70.68
38	Tanahu	12	301.5	78.24	0.09	99.16	0.84	0	20.84	19.56	59.6
39	Syangja	12	388.56	83.92	0.06	97.3	2.7	0	17.77	18.34	63.89
40	Kaski	12	381.15	80.02	0.02	99.09	0.91	0.01	13.86	11.13	75.01
41	Manang	12	413.35	69.07	1.03	100	0	0	37.11	9.28	53.61
42	Mustang	12	653.94	60.67	1.19	99.61	0.39	0	59.48	11.2	29.32
43	Myagdi	12	641.2	66.92	0.2	99.9	0.1	0	32.67	18.85	48.48
44	Parbat	12	538.09	81.62	0.22	97.88	2.12	0	17.3	18.11	64.6
45	Baglung	12	334.88	77.23	0.17	97.95	2.05	0	33.93	17.46	48.61
46	Gulmi	12	503.1	74.45	0.95	99.69	0.31	0	20.17	15.18	64.66
47	Palpa	12	478.28	81.72	0.41	96.41	3.59	0	22.94	11.8	65.26
48	Nawalparasi	12	401.9	74.37	0.09	99.44	0.56	0	24.53	11.38	64.08
49	Rupandehi	12	506.07	46.72	0.02	99.21	0.79	0	30.1	69.9	0
50	Kapilvastu	12	465.47	67.08	0.67	98.23	1.77	0	38.33	24.28	37.39
51	Arghakhanchi	12	345.97	59.67	0.39	98.07	1.93	0.01	29.72	11.64	58.65
	Western	192	442.28	70.17	0.26	98.75	1.25	0	26.11	26.09	47.8
52	Pyuthan	12	544.63	74.4	0.02	99.15	0.85	0	28.01	12.48	59.51
53	Rolpa	12	775.04	74.41	0.16	97.24	2.76	0.03	28	16.15	55.84
54	Rukum	12	518.39	71.73	0.98	86.49	13.51	0	39.16	23.79	37.05
55	Salyan	12	601.99	86.19	0.12	98.41	1.59	0	18.54	11.77	69.69
56	Dang	12	523.35	78.36	0.04	99.8	0.2	0	21.69	8.9	69.41
57	Banke	12	688.62	75.29	0.22	99.02	0.98	0	25.86	10.23	63.91
58	Bardiya	12	638.76	77.8	0.11	99.55	0.45	0	21.15	8.82	70.04
59	Surkhet	12	940.02	79.42	0.13	99.26	0.74	0	19.72	10.33	69.95
60	Dailekh	12	1133.81	79.55	0.14	99.01	0.99	0	15.4	9.26	75.34
61	Jajarkot	12	836.22	62.04	1.16	88.56	11.44	0.01	39.54	21.14	39.32
62	Dolpa	12	345.23	60.37	0.73	98.53	1.47	0	52.43	15.94	31.62
63	Jumla	12	942.22	75.58	0.5	97.38	2.62	0	25.47	11.6	62.92
64	Kalikot	12	798.68	80.83	0.77	96.83	3.17	0.01	24.02	15.82	60.16
65	Mugu	12	429.17	65.62	2.11	81.84	18.16	0.09	45.28	17.28	37.44
66	Humla	12	1229.94	76.52	0.77	97.5	2.5	0.02	35.12	23.13	41.75
	Mid Western	180	716.97	76.92	0.29	97.15	2.85	0	24.2	12.33	63.47
67	Bajura	12	979.39	77.54	0.29	97.42	2.58	0	32.95	13.18	53.87
68	Bajhang	12	669.45	64.29	0.23	92.55	7.45	0.01	29.11	17.03	53.86
69	Achham	12	1095.99	66.95	0.39	98.11	1.89	0	34.69	15.47	49.84
70	Doti	12	859.75	76.73	0.15	98.87	1.13	0	18.98	18.49	62.53
71	Kailali	12	576.97	70.91	0.25	99.2	0.8	0	16.08	6.56	77.36
72	Kanchanpur	12	864	82.27	0.05	98.92	1.08	0	16.78	2.96	80.26
73	Dadeldhura	12	989.68	74.06	0.73	99.24	0.76	0.01	25	8.62	66.39
74	Baitadi	12	947.79	88.22	0.29	97.53	2.47	0.01	22.12	14.85	63.02
75	Darchula	12	1215.11	50.75	0.06	99.2	0.8	0	12.87	13.3	73.83
	Far Western	108	837.19	73.51	0.25	97.93	2.07	0	22.31	11.16	66.53







Raw Data  
PHC-ORC

District Code	District Name	Received Reports	PHC-ORC Conduction (Times)	Primary Treatment (Persons)	Depo Service Provide (Persons)	ANC Checkup	PNC Serice (Persons)	Growth Monitoring <5 yrs
	Mountain	192	13714	118198	27138	17801	7353	110475
	Hill	468	63567	550212	128050	84920	29629	557662
	Terai	240	42908	332423	96195	170874	46945	517940
	<b>National Total</b>	<b>900</b>	<b>120189</b>	<b>1000833</b>	<b>251383</b>	<b>273595</b>	<b>83927</b>	<b>1186077</b>
1	Taplejung	12	1963	17027	2837	1931	1270	13131
2	Panchthar	12	1696	13706	6755	2347	682	10856
3	Ilam	12	2142	18253	12966	3185	1733	18393
4	Jhapa	12	1711	19684	7343	5260	1536	25342
5	Morang	12	3040	30912	14302	11224	3656	49533
6	Sunsari	12	1816	10335	4514	10035	1070	9168
7	Dhankuta	12	874	8510	2818	959	524	6782
8	Teharhum	12	717	4902	816	548	246	3185
9	Sankhuwasabha	12	993	6145	2322	983	277	7862
10	Bhojpur	12	2341	13735	3581	1202	684	11140
11	Solukhumbu	12	604	3940	789	521	284	3173
12	Okhaldhunga	12	1853	15683	3064	1321	359	7339
13	Khotang	12	1821	11968	2441	1711	892	8208
14	Udaypur	12	1735	13065	4495	3340	1306	14007
15	Saptari	12	4448	19359	7761	18397	3790	34918
16	Siraha	12	2946	19426	3741	8727	2443	51585
	<b>Eastern</b>	<b>192</b>	<b>30700</b>	<b>226650</b>	<b>80545</b>	<b>71691</b>	<b>20752</b>	<b>274622</b>
17	Dhanusha	12	3212	29104	2332	15116	5140	30394
18	Mahottari	12	3254	24120	8297	19480	6593	53304
19	Sarlahi	12	2222	25572	1490	6994	3048	25256
20	Sindhuli	12	1376	15130	2925	1972	680	7788
21	Ramechhap	12	1592	14806	4370	1829	348	7751
22	Dolkha	12	1617	13365	2561	1795	625	4887
23	Sindhupalchowk	12	2305	15044	12929	2011	993	10129
24	Kavre	12	3558	28736	11014	3449	1059	34128
25	Lalitpur	12	0	0	0	0	0	0
26	Bhaktapur	12	707	5670	1532	300	103	1816
27	Kathmandu	12	1712	17065	6536	1451	551	9870
28	Nuwakot	12	1920	18687	4826	1913	1121	10751
29	Rasuwa	12	432	5221	514	527	174	3168
30	Dhading	12	2099	21287	8074	3569	2238	22205
31	Makawanpur	12	1478	11792	9542	3150	509	14961
32	Rautahat	12	3377	22709	3674	14238	4767	30574
33	Bara	12	2848	16673	2437	7815	2890	18147
34	Parsa	12	0	0	0	0	0	0
35	Chitwan	12	1126	9689	2836	3963	697	10349
	<b>Central</b>	<b>228</b>	<b>34835</b>	<b>294670</b>	<b>85889</b>	<b>89572</b>	<b>31536</b>	<b>295478</b>
36	Gorkha	12	2327	23436	3050	2128	1017	15395
37	Lamjung	12	1924	18339	772	1928	330	10652
38	Tanahu	12	1603	10004	2666	2133	1030	10331
39	Syangja	12	2261	18179	1255	2538	580	13056
40	Kaski	12	1704	19666	1710	2830	1257	23371
41	Manang	12	96	313	5	8	0	95
42	Mustang	12	186	1116	76	8	1	146
43	Myagdi	12	803	6814	458	890	230	5005
44	Parbat	12	1167	8295	333	965	219	6201
45	Baglung	12	1199	18015	1128	1694	917	6180
46	Gulmi	12	2220	18192	2869	4351	1307	15387
47	Palpa	12	2122	16622	2776	2896	367	8457
48	Nawalparasi	12	2432	15791	1687	5266	915	19166
49	Rupandehi	12	0	0	0	0	0	0
50	Kapilvastu	12	3186	29005	11667	13176	5764	34717
51	Arghakhanchi	12	657	10793	536	1883	99	2802
	<b>Western</b>	<b>192</b>	<b>23887</b>	<b>214580</b>	<b>30988</b>	<b>42694</b>	<b>14033</b>	<b>170961</b>
52	Pyuthan	12	1487	11024	2554	2109	723	9633
53	Rolpa	12	1843	12705	2311	2203	378	17468
54	Rukum	12	800	8146	1672	937	313	6589
55	Salyan	12	1402	7627	4527	1659	395	13486
56	Dang	12	1127	10938	6874	2769	638	17565
57	Banke	12	1451	11189	2821	9036	882	18157
58	Bardiya	12	1635	14658	3844	8763	1170	31427
59	Surkhet	12	1730	20059	3823	4220	839	18597
60	Daiilekh	12	2175	9283	1990	3104	494	29294
61	Jajarkot	12	906	7411	2852	2019	779	11222
62	Dolpa	12	148	717	252	281	87	1061
63	Jumla	12	1086	7592	1007	2066	907	9470
64	Kalikot	12	609	6097	405	832	258	4168
65	Mugu	12	279	2481	242	459	229	1870
66	Humla	12	308	6165	616	596	233	3272
	<b>Mid Western</b>	<b>180</b>	<b>16986</b>	<b>136092</b>	<b>35790</b>	<b>41053</b>	<b>8325</b>	<b>193279</b>
67	Bajura	12	494	7617	855	1001	321	10976
68	Bajhang	12	981	13774	654	1488	744	8195
69	Achham	12	2229	24674	894	3166	1492	39316
70	Doti	12	2070	16959	1876	3021	1119	41979
71	Kailali	12	2083	15971	8689	8196	1688	46277
72	Kanchanpur	12	994	7288	1886	2419	258	12061
73	Dadeldhura	12	773	10945	887	2911	1946	32211
74	Baitadi	12	2544	20029	1356	3089	763	31850
75	Darchula	12	1613	11584	1074	3294	950	28872
	<b>Far Western</b>	<b>108</b>	<b>13781</b>	<b>128841</b>	<b>18171</b>	<b>28585</b>	<b>9281</b>	<b>251737</b>



## Analysed Data

### FCHV PROGRAM

District Code	District Name	Received Report	% of distributor		% of Mothers group meeting held
			Pills	Condom	
	Mountain	192	50.64	24.63	64.81
	Hill	468	41.89	26.28	82.27
	Terai	240	53.73	41.42	75.62
	<b>National Total</b>	<b>900</b>	<b>48.37</b>	<b>33.12</b>	<b>77.67</b>
1	Taplejung	12	39.08	35.92	60.64
2	Panchthar	12	42.34	31.41	81.45
3	Ilam	12	18.44	20.79	51.4
4	Jhapa	12	68.16	34.21	92.03
5	Morang	12	82.57	32.68	93.79
6	Sunsari	12	58.1	46.58	80.11
7	Dhankuta	12	36.93	16.19	93.2
8	Teharhum	12	33.4	18.67	72.59
9	Sankhuwasabha	12	50.22	15.49	62.1
10	Bhojpur	12	54.35	39.31	101.45
11	Solukhumbu	12	19.06	10.92	54.84
12	Okhaldhunga	12	47.64	27.09	92.66
13	Khotang	12	35.73	27.33	69.23
14	Udaypur	12	63.35	50.93	91.83
15	Saptari	12	37.96	45.59	88.89
16	Siraha	12	54.7	53.96	94.53
	<b>Eastern</b>	<b>192</b>	<b>51.75</b>	<b>36.03</b>	<b>80.4</b>
17	Dhanusha	12	41.56	29.95	85.57
18	Mahottari	12	60.67	44.23	94.57
19	Sarlahi	12	30.37	34.16	73.03
20	Sindhuli	12	59.24	38.51	80.22
21	Ramechhap	12	70.93	36.14	85.48
22	Dolkha	12	41.93	28.48	58.41
23	Sindhupalchowk	12	29.3	16.8	73.75
24	Kavre	12	41.03	22.69	84.04
25	Lalitpur	12	7.12	0.16	70.55
26	Bhaktapur	12	20.02	11.54	82.63
27	Kathmandu	12	24.93	19.48	80.03
28	Nuwakot	12	52.16	37.14	54.78
29	Rasuwa	12	79.77	51.05	77.79
30	Dhading	12	38.83	15.18	85.88
31	Makawanpur	12	87.82	23.53	110.58
32	Rautahat	12	66.65	53.19	74.67
33	Bara	12	49.84	55.96	96.18
34	Parsa	12	2.65	2.68	17.31
35	Chitwan	12	39.05	53.55	80.28
	<b>Central</b>	<b>228</b>	<b>40.67</b>	<b>30.98</b>	<b>75.5</b>
36	Gorkha	12	67.91	28.55	82.25
37	Lamjung	12	44.54	26.65	80.47
38	Tanahu	12	58.74	13.2	73.22
39	Syangja	12	36.95	29.81	90.42
40	Kaski	12	25.91	21.54	82.2
41	Manang	12	12.74	5.5	49.6
42	Mustang	12	0.46	4.74	36.05
43	Myagdi	12	66.52	20.08	74.51
44	Parbat	12	56.88	29.78	72.91
45	Baglung	12	47.39	30.61	47.22
46	Gulmi	12	39.94	28.57	89.9
47	Palpa	12	57.84	24.9	88.22
48	Nawalparasi	12	55.24	36.89	89.07
49	Rupandehi	12	3.43	0.94	0
50	Kapilvastu	12	30.77	36.28	66.96
51	Arghakhanchi	12	83.38	40.14	78.92
	<b>Western</b>	<b>192</b>	<b>37.07</b>	<b>24.33</b>	<b>67.02</b>
52	Pyuthan	12	30.69	23.4	91.66
53	Rolpa	12	48.94	22.76	79.24
54	Rukum	12	39.81	16.97	41.45
55	Salyan	12	66.24	36.66	82.54
56	Dang	12	52.74	38.82	81.2
57	Banke	12	99.21	41.35	93.4
58	Bardiya	12	77.26	47.88	80.25
59	Surkhet	12	51.13	38.22	152.78
60	Dailekh	12	46.01	41.74	91.73
61	Jajarkot	12	57.54	28.81	78.71
62	Dolpa	12	32.45	4.68	17.33
63	Jumla	12	118.68	20.7	75.18
64	Kalikot	12	98.99	18.91	63.25
65	Mugu	12	52.58	19.41	50.92
66	Humla	12	85.45	51.35	52.92
	<b>Mid Western</b>	<b>180</b>	<b>57.7</b>	<b>34.04</b>	<b>88.82</b>
67	Bajura	12	73.32	30.37	69.27
68	Bajhang	12	60.34	35.69	76.04
69	Achham	12	49.12	26.87	78.02
70	Doti	12	31.35	32.77	73.69
71	Kailali	12	65.62	74.94	90.74
72	Kanchanpur	12	64.92	39.72	94.83
73	Dadeldhura	12	45.5	39.51	94.69
74	Baitadi	12	65.14	22.82	83.51
75	Darchula	12	59.42	33.94	84.22
	<b>Far Western</b>	<b>108</b>	<b>61.05</b>	<b>42.43</b>	<b>84.21</b>



Raw Data  
Family Planning  
Sheet 1 of 3

District Code	District Name	Received Reports	New Acceptors													Total (Temporary Methods)
			Temporary Methods													
			Condom	Pills			Depo			IUD			Implant			
	<20 Years	=>20 Years	Total	<20 Years	=>20 Years	Total	<20 Years	=>20 Years	Total	<20 Years	=>20 Years	Total				
Mountain		192	14163	706	8626	9332	1807	21117	22924	143	1611	1754	40	2605	2645	50818
Hill		468	82961	4554	53748	58302	9567	108554	118121	1025	15117	16142	868	15486	16354	291880
Terai		240	82833	3038	41964	45002	6332	98045	104377	888	13948	14836	353	8505	8858	255906
National Total		900	179957	8298	104338	112636	17706	227716	245422	2056	30676	32732	1261	26596	27857	598604
1 Taplejung		12	750	43	622	665	284	1745	2029	0	198	198	0	88	88	3730
2 Panchthar		12	1360	80	837	917	116	1959	2075	30	298	328	5	162	167	4847
3 Ilam		12	2036	119	1403	1522	350	2761	3111	12	558	570	0	197	197	7436
4 Jhapa		12	3173	273	4515	4788	645	6623	7268	16	779	795	22	872	894	16918
5 Morang		12	4200	156	2306	2462	656	6406	7062	6	1805	1811	14	691	705	16240
6 Sunsari		12	4086	75	1174	1249	323	4172	4495	7	348	355	8	399	407	10592
7 Dhankuta		12	1375	176	1490	1666	128	2389	2517	2	116	118	7	139	146	5822
8 Teharthur		12	903	31	421	452	63	979	1042	0	21	21	0	62	62	2480
9 Sankhuwasabha		12	913	61	636	697	176	1663	1839	93	54	147	8	229	237	3833
10 Bhojpur		12	1316	40	510	550	97	1260	1357	0	124	124	0	234	234	3581
11 Solukhumbu		12	1092	77	1104	1181	137	2444	2581	0	25	25	1	276	277	5156
12 Okhaldhunga		12	757	75	814	889	151	1986	2137	0	28	28	5	215	220	4031
13 Khotang		12	1134	115	1000	1115	130	1670	1800	2	268	270	3	165	168	4487
14 Udaypur		12	882	116	1147	1263	295	2722	3017	5	207	212	0	93	93	5467
15 Saptari		12	3689	76	2387	2463	60	4355	4415	0	126	126	0	43	43	10736
16 Siraha		12	3744	471	2092	2563	88	6438	6526	15	672	687	17	404	421	13941
Eastern		192	31410	1984	22458	24442	3699	49572	53271	188	5627	5815	90	4269	4359	119297
17 Dhanusha		12	4140	152	1924	2076	188	4995	5183	39	361	400	16	166	182	11981
18 Mahottari		12	3423	134	2085	2219	270	4108	4378	253	759	1012	1	179	180	11212
19 Sarlahi		12	3674	354	4039	4393	441	4460	4901	7	1182	1189	26	950	976	15133
20 Sindhuli		12	1315	90	1034	1124	182	2155	2337	4	104	108	8	363	371	5255
21 Ramechhap		12	836	22	236	258	116	1493	1609	3	225	228	9	258	267	3198
22 Dolkha		12	879	80	1218	1298	217	3442	3659	0	114	114	2	223	225	6175
23 Sindhupalchowk		12	1048	46	660	706	258	2457	2715	44	709	753	4	189	193	5415
24 Kavre		12	2631	103	1383	1486	345	4273	4618	38	800	838	17	1227	1244	10817
25 Lalitpur		12	2193	0	1992	1992	0	5017	5017	0	1470	1470	0	665	665	11337
26 Bhaktapur		12	813	35	937	972	270	2827	3097	28	674	702	5	363	368	5952
27 Kathmandu		12	3458	369	4475	4844	1160	10976	12136	35	2517	2552	71	2054	2125	25115
28 Nuwakot		12	1190	102	962	1064	267	3068	3335	102	767	869	0	166	166	6624
29 Rasuwa		12	542	18	237	255	76	699	775	0	7	7	0	58	58	1637
30 Dhading		12	4124	167	1409	1576	429	3847	4276	28	744	772	19	613	632	11380
31 Makawanpur		12	3016	185	1566	1751	880	5557	6437	33	428	461	12	1382	1394	13059
32 Rautahat		12	3224	65	1360	1425	181	4317	4498	61	435	496	1	508	509	10152
33 Bara		12	3654	32	862	894	77	3625	3702	0	1005	1005	0	209	209	9464
34 Parsa		12	2382	0	1146	0	3000	3000	0	87	87	0	0	133	133	6748
35 Chitwan		12	3045	119	1384	1503	497	3064	3561	39	856	895	17	497	514	9518
Central		228	45587	2073	28909	30982	5854	73380	79234	714	13244	13958	208	10203	10411	180172
36 Gorkha		12	1153	113	1374	1487	227	2825	3052	0	62	62	0	128	128	5882
37 Lamjung		12	1528	60	650	710	120	1353	1473	9	383	392	1	443	444	4547
38 Tanahu		12	2127	96	1317	1413	193	1757	1950	2	232	234	1	103	104	5828
39 Syangja		12	1854	44	881	925	46	1293	1339	3	258	261	1	35	36	4415
40 Kaski		12	2906	173	2098	2271	313	2928	3241	19	1143	1162	17	331	348	9928
41 Manang		12	141	4	79	83	6	63	69	0	0	0	0	66	66	359
42 Mustang		12	227	7	97	104	21	201	222	0	47	47	0	52	52	652
43 Myagdi		12	1436	33	1033	1066	103	1030	1133	4	138	142	12	272	284	4061
44 Parbat		12	1154	37	514	551	68	809	877	8	373	381	1	93	94	3057
45 Baglung		12	1742	77	2491	2568	104	2263	2367	1	367	368	0	375	375	7420
46 Gulmi		12	3821	61	2188	2249	99	3019	3118	0	134	134	0	138	138	9460
47 Palpa		12	1970	50	630	680	170	1615	1785	31	313	344	11	206	217	4996
48 Nawalparasi		12	4536	104	1405	1509	265	3679	3944	33	485	518	10	330	340	10847
49 Rupandehi		12	5665	0	4189	4189	0	8163	8163	0	681	681	0	247	247	18945
50 Kapilvastu		12	3236	186	2896	3082	247	6902	7149	18	485	503	86	58	144	14114
51 Arghakhanchi		12	1813	44	627	671	59	999	1058	0	94	94	3	122	125	3761
Western		192	35309	1089	22469	23558	2041	38899	40940	128	5195	5323	143	2999	3142	108272
52 Pyuthan		12	4353	95	1429	1524	150	1956	2106	2	93	95	3	269	272	8350
53 Rolpa		12	3979	123	996	1119	437	3341	3778	389	222	611	63	1230	1293	10780
54 Rukum		12	829	561	1999	2560	433	3442	3875	1	21	22	3	247	250	7536
55 Salyan		12	1924	63	856	919	257	2291	2548	4	360	364	464	519	983	6738
56 Dang		12	3922	209	1416	1625	662	3335	3997	87	732	819	31	346	377	10740
57 Banke		12	4462	141	1881	2022	441	5981	6422	90	889	979	22	560	582	14467
58 Bardiya		12	5603	78	1019	1097	473	3943	4416	50	574	624	55	615	670	12410
59 Surkhet		12	3934	341	2045	2386	768	4039	4807	55	489	544	30	518	548	12219
60 Dailekh		12	3224	265	2240	2505	307	3298	3605	0	119	119	3	594	597	10050
61 Jajarkot		12	670	261	1219	1480	530	2994	3524	85	431	516	91	181	272	6462
62 Dolpa		12	840	16	334	350	36	657	693	1	36	37	0	0	0	1920
63 Jumla		12	1478	82	530	612	206	932	1138	1	111	112	10	192	202	3542
64 Kalikot		12	1391	30	431	461	41	1099	1140	0	54	54	4	229	233	3279
65 Mugu		12	382	21	202	223	64	516	580	3	44	47	0	40	40	1272
66 Humla		12	275	118	508	626	122	937	1059	0	19	19	3	204	207	2186
Mid Western		180	37266	2404	17105	19509	4927	38761	43688	768	4194	4962	782	5744	6526	111951
67 Bajura		12	1304	32	593	625	67	1321	1388	1	36	37	2	296	298	3652
68 Bajhang		12	1874	40	392	432	60	1469	1529	0	35	35	6	221	227	4097
69 Achham		12	2842	68	1088	1156	69	2507	2576	0	107	107	1	174	175	6856
70 Doti		12	2982	27	1477	1504	45	2420	2465	2	91	93	0	185	185	7229
71 Kailali		12	7606	126	2433	2559	448	6638	7086	60	538	598	17	750	767	18616
72 Kanchanpur		12	5361	287	1451	1738	370	3841	4211	107	1149	1256	10	548	558	13124
73 Dadeldhura		12	1294	67	753	820	42	1846	1888	83	33	116	1	166	167	4285
74 Baitadi		12	6070	70	4227	4297	48	5590	5638	5	305	310	1	799	800	17115
75 Darchula		12	1018	31	983	1014	36	1472	1508	0	122	122	0	242	242	3904
Far Western		108	30351	748	13397	14145	1185	27104	28289	258	2416	2674	38	3381	3419	78878

Raw Data  
Family Planning  
Sheet 2 of 3

District Code	District Name	Received Reports	New Acceptors											Distribution					
			Sterilization											Total All Methods	Condom	Pills	Depo	IUD	Norplant
			Government				Non-government				Total								
			Institutions		Camp		Institutions		Camp		Female	Male							
Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Total Sterilization									
	Mountain	192	13	420	125	1600	0	93	0	3	138	2116	2254	53043	2124459	95977	127282	1721	2791
	Hill	468	820	2456	1463	4711	576	1803	193	480	3052	9450	12502	304390	12444267	716433	702152	15654	16209
	Terai	240	11108	469	8875	317	11879	1348	2352	81	34214	2215	36429	292335	12425055	824379	649170	15224	8714
	<b>National Total</b>	<b>900</b>	<b>11941</b>	<b>3345</b>	<b>10463</b>	<b>6628</b>	<b>12455</b>	<b>3244</b>	<b>2545</b>	<b>564</b>	<b>37404</b>	<b>13781</b>	<b>51185</b>	<b>649768</b>	<b>26993781</b>	<b>1636789</b>	<b>1478604</b>	<b>32599</b>	<b>27714</b>
1	Taplejung	12	0	22	0	13	0	0	0	0	0	35	35	3765	112648	11818	11587	144	82
2	Panchthar	12	0	0	0	8	0	0	0	0	0	8	8	4855	204135	21274	18120	345	179
3	Ilam	12	0	1	11	20	0	0	0	0	11	21	32	7468	305492	54839	40970	398	233
4	Jhapa	12	64	0	644	4	2085	277	32	0	2825	281	3106	20024	475996	76627	59635	795	889
5	Morang	12	110	0	1026	3	1785	165	0	0	2921	168	3089	19329	630028	61338	48195	1599	713
6	Sunsari	12	700	2	0	0	272	53	411	3	1383	58	1441	12033	612962	68946	51167	365	417
7	Dhankuta	12	0	6	0	11	0	0	0	0	0	17	17	5839	206307	19272	16978	149	150
8	Tehrathum	12	0	16	0	2	0	0	0	0	0	18	18	2498	135526	7419	6696	79	209
9	Sankhuwasabha	12	0	41	0	0	0	0	0	0	0	41	41	3874	136990	6139	9854	150	373
10	Bhojpur	12	0	22	0	33	0	0	0	0	0	55	55	3636	197468	15890	15752	124	234
11	Solkhumbu	12	0	5	0	15	0	0	0	0	0	20	20	5176	163800	9752	17875	28	277
12	Okhaidhunga	12	0	18	0	66	16	25	0	8	16	117	133	4164	113567	13698	15005	28	382
13	Khotang	12	2	22	2	87	0	0	0	4	109	113	4600	170127	16801	14226	269	157	
14	Udayapur	12	0	1	137	101	7	7	54	1	198	110	308	5775	132415	22882	20138	251	95
15	Saptari	12	1425	0	470	0	913	2	0	0	2808	2	2810	13546	553428	53963	36410	126	43
16	Siraha	12	319	5	857	0	1827	10	10	0	3013	15	3028	16969	561681	35191	31928	814	430
	<b>Eastern</b>	<b>192</b>	<b>2620</b>	<b>161</b>	<b>3147</b>	<b>363</b>	<b>6905</b>	<b>539</b>	<b>507</b>	<b>12</b>	<b>13179</b>	<b>1075</b>	<b>14254</b>	<b>133551</b>	<b>4712570</b>	<b>495849</b>	<b>414536</b>	<b>5664</b>	<b>4863</b>
17	Dhanusha	12	317	3	68	0	422	3	972	7	1779	13	1792	13773	621027	22680	25791	452	328
18	Mahottari	12	1138	1	0	0	862	24	0	0	2000	25	2025	13237	513483	37034	32346	1012	180
19	Sarlahi	12	979	0	733	0	1024	13	0	0	2736	13	2749	17882	551101	48421	21675	1189	976
20	Sindhuli	12	2	13	99	49	0	0	3	0	104	62	166	5421	197374	18815	16418	108	371
21	Ramechhap	12	0	0	0	55	3	10	0	0	3	65	68	3266	125533	7877	17915	228	269
22	Dolkha	12	1	1	64	115	0	4	0	0	65	120	185	6360	131883	10667	15478	104	216
23	Sindhupalchowk	12	0	0	37	232	0	15	0	0	37	247	284	5699	157334	15855	35523	767	193
24	Kavre	12	0	0	59	78	135	199	18	4	212	281	493	11310	394735	26827	40418	841	1269
25	Lalitpur	12	47	710	0	0	0	0	0	0	47	710	757	12094	328987	20993	32537	1707	829
26	Bhaktapur	12	6	2	14	4	6	115	4	1	30	122	152	6104	122020	18198	24602	706	368
27	Kathmandu	12	338	406	42	67	136	400	32	46	548	919	1467	26582	518781	64805	90797	2552	2125
28	Nuwakot	12	0	0	51	132	39	60	6	12	96	204	300	6924	178540	10560	17075	497	166
29	Rasuwa	12	0	0	18	68	0	0	0	0	18	68	86	1723	81425	1794	2945	7	58
30	Dhading	12	0	8	54	428	8	11	0	0	62	447	509	11889	618675	26517	31882	772	632
31	Makawanpur	12	4	123	0	1065	6	105	57	286	67	1579	1646	14705	452415	24437	35040	552	1421
32	Rautahat	12	1662	0	1505	0	0	0	0	0	3167	0	3167	13319	483684	18248	16457	850	168
33	Bara	12	546	4	420	0	1051	137	0	0	2017	141	2158	11622	548187	18937	23698	1005	218
34	Parsa	12	1863	12	0	0	0	0	0	0	1863	12	1875	8623	357348	12914	15788	106	132
35	Chitwan	12	68	79	75	88	150	409	0	0	293	576	869	10387	456848	27078	20501	861	506
	<b>Central</b>	<b>228</b>	<b>6971</b>	<b>1362</b>	<b>3239</b>	<b>2381</b>	<b>3842</b>	<b>1505</b>	<b>1092</b>	<b>356</b>	<b>15144</b>	<b>5604</b>	<b>20748</b>	<b>200920</b>	<b>6839380</b>	<b>432657</b>	<b>516886</b>	<b>14316</b>	<b>10425</b>
36	Gorkha	12	99	166	0	0	0	0	0	0	99	166	265	6147	172985	10944	13856	53	143
37	Lamjung	12	58	128	6	131	0	0	0	0	64	259	323	4870	229328	9035	7612	353	144
38	Tanahu	12	0	0	106	168	2	7	0	0	108	175	283	6111	319066	11298	9888	363	104
39	Syangja	12	0	0	110	58	7	0	0	0	117	58	175	4590	278200	20365	10234	209	22
40	Kaski	12	69	47	41	109	82	259	19	20	211	435	646	10574	436005	26495	13800	1140	362
41	Manang	12	0	0	0	1	0	0	0	0	0	1	1	360	21272	463	362	0	73
42	Mustang	12	0	12	3	4	0	0	0	0	3	16	19	671	34088	1313	1024	47	52
43	Myagdi	12	0	14	42	62	0	0	0	0	42	76	118	4179	215430	4919	4428	148	245
44	Parbat	12	0	0	26	71	0	0	0	0	26	71	97	3154	173122	7363	4379	29	45
45	Baglung	12	2	3	86	174	0	0	0	0	88	177	265	7685	261329	13584	7732	310	340
46	Gulmi	12	0	257	0	0	1	6	0	0	1	263	264	9724	573265	22041	14245	255	184
47	Palpa	12	19	66	77	42	128	40	0	0	224	148	372	5368	295631	14937	12376	489	228
48	Nawalparasi	12	28	5	289	56	522	51	850	67	1689	179	1868	12715	680462	31758	27144	502	300
49	Rupandehi	12	1090	81	0	0	0	0	0	0	1090	81	1171	20116	849790	53085	41650	710	253
50	Kapilvastu	12	216	0	0	0	0	0	0	0	216	0	216	14330	485542	35923	33310	503	144
51	Arghakhanchi	12	0	215	0	0	0	0	0	0	215	215	3976	272002	7279	5325	91	111	
	<b>Western</b>	<b>192</b>	<b>1581</b>	<b>994</b>	<b>786</b>	<b>876</b>	<b>742</b>	<b>363</b>	<b>869</b>	<b>87</b>	<b>3978</b>	<b>2320</b>	<b>6298</b>	<b>114570</b>	<b>5297517</b>	<b>270802</b>	<b>207365</b>	<b>5202</b>	<b>2750</b>
52	Pyuthan	12	0	1	66	45	0	0	0	0	66	46	112	8462	653046	40240	19975	95	272
53	Rolpa	12	0	0	0	100	0	0	0	4	0	104	104	10884	596926	12216	14944	134	1167
54	Rukum	12	0	0	0	176	0	0	0	0	176	176	7712	124470	11109	12490	101	139	
55	Salvan	12	0	0	0	170	0	0	0	0	170	170	6908	288715	12306	17029	386	525	
56	Dang	12	37	8	216	25	271	67	0	0	524	100	624	11364	588437	44731	39262	821	377
57	Banke	12	181	144	169	9	190	90	23	4	563	247	810	15277	669447	22990	30683	959	578

Raw Data  
Family Planning  
Sheet 3 of 3

District Code	District Name	Received Reports	Current Users									Total all Methods	Defaulter			
			Temporary Methods					Sterilization					Pills	Depo	IUD	Norplant
			Condom	Pills	Depo	IUD	Norplant	Total (Temporary Methods)	Male	Female	Total Sterilization					
Mountain	192	14163	9631	36727	5690	8397	74608	42779	7883	50662	125270	7184	19156	506	358	
Hill	468	82961	83630	222320	58220	63517	510648	240583	167158	407741	918389	48637	121205	2099	3090	
Terai	240	82833	83680	192153	47500	33742	439908	92243	870476	962719	1402627	26473	68973	2211	1921	
<b>National Total</b>	<b>900</b>	<b>179957</b>	<b>176941</b>	<b>451200</b>	<b>111410</b>	<b>105656</b>	<b>1025164</b>	<b>375605</b>	<b>1045517</b>	<b>1421122</b>	<b>2446286</b>	<b>82294</b>	<b>209334</b>	<b>4816</b>	<b>5369</b>	
1 Taplejung	12	750	1341	4539	938	108	7676	2019	3	2022	9698	569	974	6	0	
2 Panchthar	12	1360	1922	4963	970	871	10086	1877	379	2256	12342	5945	7495	23	124	
3 Ilam	12	2036	6577	12669	1782	1225	24289	1967	6913	8880	33169	1442	2341	162	277	
4 Jhapa	12	3173	10184	19216	4513	2730	39816	9281	52792	62073	101889	2817	7888	56	53	
5 Morang	12	4200	7806	18072	6196	4316	40590	5442	90392	95834	136424	2587	6797	100	158	
6 Sunsari	12	4086	5484	12787	1794	1667	25818	3286	40046	43332	69150	2225	8041	154	284	
7 Dhankuta	12	1375	3029	5398	516	958	11276	1978	1761	3739	15015	475	1353	8	52	
8 Teharthur	12	903	629	1873	341	445	4191	1813	146	1959	6150	340	866	113	59	
9 Sankhuwasabha	12	913	665	3359	969	1169	7075	2846	54	2900	9975	665	1855	47	72	
10 Bhojpur	12	1316	1617	4427	707	807	8874	2729	133	2862	11736	808	1818	3	0	
11 Solukhumbu	12	1092	1318	5190	95	686	8381	858	185	1043	9424	989	1949	220	0	
12 Okhaldhunga	12	757	1384	5064	403	1076	8684	2432	295	2727	11411	548	1667	3	10	
13 Khotang	12	1134	5199	11591	440	182	18546	2633	213	2846	21392	451	895	127	0	
14 Udaypur	12	882	1874	5676	279	278	8989	4376	4270	8646	17635	1022	2438	64	4	
15 Saptari	12	3689	5404	12748	745	0	22586	616	56479	57095	79681	883	1917	12	12	
16 Siraha	12	3744	2548	6841	1682	1721	16536	1210	55475	56685	73221	875	3106	17	23	
<b>Eastern</b>	<b>192</b>	<b>31410</b>	<b>56981</b>	<b>134413</b>	<b>22370</b>	<b>18239</b>	<b>263413</b>	<b>45363</b>	<b>309536</b>	<b>354899</b>	<b>618312</b>	<b>22641</b>	<b>51400</b>	<b>1115</b>	<b>1128</b>	
17 Dhanusha	12	4140	1948	6241	251	113	12693	1741	78578	80319	93012	196	1600	350	411	
18 Mahottari	12	3423	5697	13679	1935	500	25234	463	53105	53568	78802	1101	2309	0	0	
19 Sarlahi	12	3674	5294	6999	3158	2541	21666	2754	64877	67631	89297	1629	3124	87	146	
20 Sindhuli	12	1315	1987	4725	737	1277	10041	4517	4905	9422	19463	754	1667	26	14	
21 Ramechhap	12	836	642	4848	1249	1235	8810	3500	197	3697	12507	266	2153	52	16	
22 Dolkha	12	879	809	3848	317	695	6548	4803	3146	7949	14497	778	2834	17	0	
23 Sindhupalchowk	12	1048	1382	8753	1454	1180	13817	7747	2105	9852	23669	1038	4063	109	82	
24 Kavre	12	2631	2030	12574	3986	7297	28518	9032	9596	18628	47146	1143	5343	137	208	
25 Lalitpur	12	2193	2811	12885	5334	6149	29372	19490	9792	29282	58654	0	0	0	0	
26 Bhaktapur	12	813	1317	6157	2280	1870	12437	3804	8446	12250	24687	1394	5045	2	56	
27 Kathmandu	12	3458	7389	28779	13924	8890	62440	19406	32458	51864	114304	5573	18996	837	878	
28 Nuwakot	12	1190	1175	5775	996	836	9972	7647	7337	14984	24956	1013	5517	1	68	
29 Rasuwa	12	542	163	873	51	417	2046	1908	695	2603	4649	186	526	1	0	
30 Dhading	12	4124	3741	11475	2361	3323	25024	9526	1630	11156	36180	1380	2681	61	514	
31 Makawanpur	12	3016	1703	8626	1124	4320	18789	29067	3922	32989	51778	1171	4756	0	0	
32 Rautahat	12	3224	1559	3817	1020	830	10450	771	58316	59087	69537	446	1134	22	1	
33 Bara	12	3654	1817	7908	2113	1369	16861	2056	40530	42586	59447	364	1867	9	36	
34 Parsa	12	2382	919	4128	382	455	8266	3119	71299	74418	82684	0	0	0	0	
35 Chitwan	12	3045	2807	5148	2958	1935	15893	26275	12759	39034	54927	1484	3129	202	122	
<b>Central</b>	<b>228</b>	<b>45587</b>	<b>45190</b>	<b>157238</b>	<b>45630</b>	<b>45232</b>	<b>338877</b>	<b>157626</b>	<b>463693</b>	<b>621319</b>	<b>960196</b>	<b>19916</b>	<b>66744</b>	<b>1913</b>	<b>2552</b>	
36 Gorkha	12	1153	959	3709	444	292	6557	6465	6086	12551	19108	1103	3094	10	1	
37 Lamjung	12	1528	888	2047	728	514	5705	5952	2119	8071	13776	1865	4605	7	2	
38 Tanahu	12	2127	1181	2807	2148	645	8908	7445	6292	13737	22645	697	1370	75	51	
39 Syangja	12	1854	1907	2468	521	58	6808	4357	9422	13779	20587	1463	1780	42	22	
40 Kaski	12	2906	3690	5009	3256	1626	16487	12991	11155	24146	40633	1479	2040	46	75	
41 Manang	12	141	65	124	9	171	510	194	17	211	721	13	41	0	4	
42 Mustang	12	227	135	369	131	187	1049	322	260	582	1631	41	75	0	0	
43 Myagdi	12	1436	556	1710	922	606	5230	3087	931	4018	9248	263	712	32	16	
44 Parbat	12	1154	712	1192	469	532	4059	4293	1051	5344	9403	294	615	0	0	
45 Baglung	12	1742	2660	2446	1396	436	8680	6272	3474	9746	18426	685	969	1	0	
46 Gulmi	12	3821	1994	4340	1542	1421	13118	3598	5900	9498	22616	1423	2148	3	3	
47 Palpa	12	1970	1599	3750	814	1438	9571	5393	8367	13760	23331	1059	1887	40	26	
48 Nawalparasi	12	4536	3036	7978	1533	703	17786	8551	30284	38835	56621	673	2819	404	193	
49 Rupandehi	12	5665	5028	11193	1637	1275	24798	2544	29006	31550	56348	0	0	0	0	
50 Kapilvastu	12	3236	2449	10045	1388	807	17925	1825	13411	15236	33161	4751	3174	0	0	
51 Arghakhanchi	12	1813	1017	1378	405	498	5111	3134	2794	5928	11039	272	489	3	0	
<b>Western</b>	<b>192</b>	<b>35309</b>	<b>27876</b>	<b>60565</b>	<b>17343</b>	<b>11209</b>	<b>152302</b>	<b>76423</b>	<b>130569</b>	<b>206992</b>	<b>359294</b>	<b>16081</b>	<b>25818</b>	<b>663</b>	<b>393</b>	
52 Pyuthan	12	4353	3586	5522	678	658	14797	3032	2069	5101	19898	1919	2543	16	20	
53 Rolpa	12	3979	1472	4332	1148	4403	15334	3589	107	3696	19030	1322	3128	25	142	
54 Rukum	12	829	1612	4448	172	335	7396	3605	214	3819	11215	1359	4560	0	0	
55 Salyan	12	1924	965	4540	1196	1535	10160	5669	815	6484	16644	1390	5183	47	69	
56 Dang	12	3922	5408	12904	5884	1356	29474	4078	19884	23962	53436	1156	3069	201	1	
57 Banke	12	4462	3000	8708	2720	2770	21660	6376	16565	22941	44601	1656	5119	108	151	
58 Bardiya	12	5603	2210	5879	3981	3358	21031	3149	25428	28577	49608	386	1080	101	107	
59 Surkhet	12	3934	2826	5158	2504	1639	16061	12135	10334	22469	38530	1827	3715	0	0	
60 Dailekh	12	3224	1767	3469	1031	2470	11961	6294	77	6371	18332	2079	3912	10	10	
61 Jajarkot	12	670	908	2789	258	227	4852	3521	213	3734	8586	1152	2705	25	56	
62 Dolpa	12	840	351	528	72	0	1791	786	12	798	2589	223	787	4	6	
63 Jumla	12	1478	366	863	456	612	3775	5422	219	5641	9416	295	648	6	75	
64 Kalikot	12	1391	575	1201	234	795	4196	2309	8	2317	6513	339	875	1	13	
65 Mugu	12	382	96	487	83	134	1182	1775	30	1805	2987	103	490	0	4	
66 Humla	12	275	360	1016	90	400	2141	1274	54	1328	3469	219	290	18	25	
<b>Mid Western</b>	<b>180</b>	<b>37266</b>	<b>25502</b>	<b>61844</b>	<b>20507</b>	<b>20692</b>	<b>165811</b>	<b>63014</b>	<b>76029</b>	<b>139043</b>	<b>304854</b>	<b>15425</b>	<b>38104</b>	<b>562</b>	<b>679</b>	
67 Bajura	12	1304	804	1528	304	675	4615	3265	383	3648	8263	505	1234	9	5	
68 Bajhang	12	1874	429	2055	218	656	5232	4401	162	4563	9795	358	1241	54	30	
69 Achham	12	2842	737	2930	251	860	7620	2909	311	3220	10840	1007	2561	8	90	
70 Doti	12	2982	980	2922	346	773	8003	3592	595	4187	12190	800	2325	36	116	
71 Kailali	12	7606	6909	11423	1728	3142	30808	4535	41165	45700	76508	2594	7088	371	106	
72 Kanchanpur	12	5361	4173	6439	1882	2154	20009	4171	20085	24256	44265	650	5712	17	117	
73 Dadeldhura	12	1294	1274	3457	80	202	6307	3140	849	3989	10296	709	295			



Analysed Data

FP Sheet 1 of 2

District Code	District Name	Received Report	Temporay Method												CPR	CYP				
			New Acceptors as % of MWRA						Current Users as % of MWRA							Condom	Pills	Depo	IUD	Norplant
			Condom	Pills	Depo	IUD	Norplant	Total	Condom	Pills	Depo	IUD	Implant	Total						
Mountain	192	3.56	2.35	5.77	0.44	0.67	12.78	3.56	2.42	9.24	1.43	2.11	18.77	31.56	14163.06	7382.85	31820.5	13768	13955	
Hill	468	3.3	2.32	4.69	0.64	0.65	11.59	3.3	3.32	8.83	2.31	2.52	20.28	36.46	82961.78	55110.23	175538	125232	81045	
Terai	240	3.01	1.63	3.79	0.54	0.32	9.28	3.01	3.04	6.97	1.72	1.22	15.96	50.93	82833.7	63413.77	162292.5	121792	43570	
National Total	900	3.17	1.99	4.33	0.58	0.49	10.55	3.17	3.12	7.96	1.96	1.86	18.08	43.15	179958.54	125906.85	369651	260792	138570	
1 Taplejung	12	2.4	2.12	6.47	0.63	0.28	11.9	2.4	4.28	14.48	2.99	0.34	24.48	31	750.99	909.08	2896.75	1152	410	
2 Panchthar	12	2.87	1.93	4.37	0.69	0.35	10.21	2.87	4.05	10.45	2.04	1.83	21.24	26	1360.9	1636.46	4530	2760	895	
3 Ilam	12	2.86	2.14	4.37	0.8	0.28	10.44	2.86	9.24	17.79	2.5	1.72	34.11	46.58	2036.61	4218.38	10242.5	3184	1165	
4 Jhapa	12	1.68	2.54	3.85	0.42	0.47	8.96	1.68	5.4	10.18	2.39	1.45	21.1	53.98	3173.31	5894.38	14908.75	6360	4445	
5 Morang	12	1.91	1.12	3.22	0.82	0.32	7.4	1.91	3.56	8.23	2.82	1.97	18.49	62.14	4200.19	4718.31	12048.75	12792	3565	
6 Sunsari	12	2.55	0.78	2.8	0.22	0.25	6.6	2.55	3.42	7.97	1.12	1.04	16.09	43.1	4086.41	5303.54	12791.75	2920	2085	
7 Dhankuta	12	3.34	4.05	6.12	0.29	0.36	14.16	3.34	7.37	13.13	1.25	2.33	27.42	36.52	1375.38	1482.46	4244.5	1192	750	
8 Teaharthur	12	3.33	1.67	3.84	0.08	0.23	9.14	3.33	2.32	6.9	1.26	1.64	15.44	22.73	903.51	570.69	1674	632	1045	
9 Sankhuwasabha	12	2.42	1.85	4.88	0.39	0.63	10.17	2.42	1.77	8.92	2.57	3.1	18.78	26.59	913.27	472.23	2463.5	1200	1865	
10 Bhojpur	12	2.79	1.17	2.88	0.26	0.5	7.59	2.79	3.43	9.39	1.5	1.71	18.81	24.93	1316.45	1222.31	3938	992	1170	
11 Solukhumbu	12	4.34	4.69	10.25	0.1	1.1	20.47	4.34	5.23	20.61	0.38	2.72	33.28	37.44	1092	750.15	4468.75	224	1385	
12 Okhaldhunga	12	2.1	2.47	5.93	0.08	0.61	11.19	2.1	3.84	14.06	1.12	2.99	24.11	31.69	757.11	1053.69	3751.25	224	1910	
13 Khotang	12	2.17	2.13	3.44	0.52	0.32	8.57	2.17	9.93	22.14	0.84	0.35	35.42	40.85	1134.18	1292.38	3556.5	2152	785	
14 Udaypur	12	1.29	1.84	4.39	0.31	0.14	7.96	1.29	2.73	8.26	0.41	0.4	13.09	25.68	882.77	1760.15	5034.5	2008	475	
15 Saptari	12	2.68	1.79	3.2	0.09	0.03	7.79	2.68	3.92	9.25	0.54	0	16.39	57.82	3689.52	4151	9102.5	1008	215	
16 Siraha	12	2.76	1.89	4.8	0.51	0.31	10.26	2.76	1.88	5.03	1.24	1.27	12.17	53.89	3744.54	2707	7982	6512	2150	
Eastern	192	2.37	1.84	4.01	0.44	0.33	8.99	2.37	4.29	10.12	1.68	1.37	19.84	46.58	31417.13	38142.23	103634	45312	24315	
17 Dhanusha	12	2.66	1.33	3.33	0.26	0.12	7.7	2.66	1.25	4.01	0.16	0.07	8.15	59.75	4140.18	1744.62	6447.75	3616	1640	
18 Mahottari	12	2.69	1.74	3.43	0.79	0.14	8.8	2.69	4.47	10.73	1.52	0.39	19.8	61.82	3423.22	2848.77	8086.5	8096	900	
19 Sarlahi	12	2.5	2.99	3.33	0.81	0.66	10.29	2.5	3.6	4.76	2.15	1.73	14.73	60.7	3674.01	3724.69	5418.75	9512	4880	
20 Sindhuli	12	2.03	1.73	3.6	0.17	0.57	8.1	2.03	3.06	7.28	1.14	1.97	15.48	30	1315.83	1447.31	4104.5	864	1855	
21 Ramechhap	12	1.74	0.54	3.34	0.47	0.55	6.64	1.74	1.33	10.07	2.59	2.57	18.3	25.98	836.89	605.92	4478.75	1824	1345	
22 Dolkha	12	1.8	2.66	7.51	0.23	0.46	12.67	1.8	1.66	7.89	0.65	1.43	13.43	29.89	879.22	820.54	3869.5	832	1080	
23 Sindhupalchowk	12	1.47	0.99	3.8	0.05	0.27	7.58	1.47	1.93	12.25	2.03	1.65	19.33	33.12	1048.89	1219.62	8880.75	6136	965	
24 Kavre	12	2.83	1.6	4.97	0.9	1.34	11.63	2.83	2.18	13.52	4.29	7.85	30.66	50.69	2631.57	2063.62	10104.5	6728	6345	
25 Lalitpur	12	2.32	2.11	5.32	1.56	0.7	12.01	2.32	2.98	13.65	5.65	6.52	31.12	62.15	2193.25	1614.85	8134.25	13656	4145	
26 Bhaktapur	12	1.32	1.58	5.02	1.14	0.6	9.65	1.32	2.13	9.98	3.7	3.03	20.16	40.02	813.47	1399.85	6150.5	5648	1840	
27 Kathmandu	12	1.2	1.68	4.21	0.89	0.74	8.72	1.2	2.57	9.99	4.83	3.09	21.68	39.69	3458.54	4985	2269.25	20416	10625	
28 Nuwakot	12	1.77	1.59	4.97	1.3	0.25	9.88	1.77	1.75	8.61	1.48	1.25	14.87	37.21	1190.27	812.31	4268.75	3976	830	
29 Rasuwa	12	5.39	2.53	7.7	0.07	0.58	16.25	5.39	1.62	8.67	0.51	4.14	20.32	46.16	542.83	138	736.25	56	290	
30 Dhading	12	5.12	1.96	5.31	0.96	0.79	14.14	5.12	4.65	14.26	2.93	4.13	31.09	44.97	4124.5	2039.77	7970.5	6176	3160	
31 Makawanpur	12	3.24	1.88	6.92	0.5	1.5	14.04	3.24	1.83	9.27	1.21	4.64	20.2	55.67	3016.1	1879.77	8760	4416	7105	
32 Rautahat	12	2.54	1.12	3.54	0.39	0.4	8	2.54	1.23	3.01	0.8	0.65	8.24	54.8	3224.56	1403.69	4114.25	6800	840	
33 Bara	12	2.77	0.68	2.8	0.76	0.16	7.17	2.77	1.38	5.99	1.6	1.04	12.77	45.03	3654.58	1456.69	5924.5	8040	1090	
34 Parsa	12	2.01	0.97	2.53	0.07	0.11	5.68	2.01	0.77	3.48	0.32	0.38	6.96	70.74	2382.32	993.38	3947	848	660	
35 Chitwan	12	2.45	1.21	2.86	0.72	0.41	7.65	2.45	2.26	4.14	2.38	1.56	12.78	44.2	3045.65	2082.92	5125.25	6888	2530	
Central	228	2.33	1.59	4.06	0.71	0.53	9.22	2.33	2.31	8.05	2.34	2.32	17.35	49.23	45595.87	33281.31	129221.5	114528	52125	
36 Gorkha	12	1.63	2.1	4.31	0.09	0.18	8.31	1.63	1.35	5.24	0.63	0.41	9.26	26.99	1153.23	841.85	3464	424	715	
37 Lamjung	12	3.47	2.1	3.35	0.89	1.01	10.33	3.47	2.02	4.65	1.65	1.17	12.97	31.68	1528.85	695	1903	2824	720	
38 Tanahu	12	2.69	1.79	2.47	0.3	0.13	7.38	2.69	1.5	3.56	2.72	0.82	11.28	28.68	2127.11	869.08	2472	2904	520	
39 Syangja	12	2.39	1.19	1.72	0.34	0.05	5.69	2.39	2.46	3.18	0.67	0.77	8.77	26.51	1854.67	1566.54	2558.5	1672	110	
40 Kaski	12	2.87	2.24	3.2	1.15	0.34	9.8	2.87	3.64	4.95	3.21	1.61	16.28	40.12	2906.7	2038.08	3450	9120	1810	
41 Manang	12	5.33	3.12	2.59	0	2.48	13.5	5.33	2.44	4.66	0.34	6.43	19.18	27.12	141.81	35.62	90.5	0	365	
42 Mustang	12	6.76	3.1	6.61	1.4	1.55	19.4	6.76	4.02	10.98	3.9	5.57	31.22	48.54	227.25	101	256	376	260	
43 Myagdi	12	5.12	3.8	4.04	0.51	1.01	14.48	5.12	1.98	6.1	3.29	2.16	18.64	32.97	1436.2	378.38	1107	1184	1225	
44 Parbat	12	2.98	1.42	2.27	0.98	0.24	7.9	2.98	1.84	3.08	1.21	1.37	10.49	24.3	1154.15	566.38	1094.75	232	225	
45 Baglung	12	2.59	3.82	3.52	0.55	0.56	11.03	2.59	3.95	3.64	2.08	0.65	12.9	27.39	1742.19	1044.92	1933	2480	1700	
46 Gulmi	12	5.32	3.13	4.34	0.19	0.19	13.18	5.32	2.78	6.04	2.15	1.98	27.37	31.86	3821.77	1695.46	3561.25	2040	920	
47 Palpa	12	3.01	1.04	2.73	0.53	0.33	7.64	3.01	2.45	5.74	1.25	2.2	14.64	35.69	1970.87	1149	3094	3912	1140	
48 Nawalparasi	12	3.23	1.07	2.81	0.37	0.24	7.72	3.23	2.16	5.68	1.09	0.5	12.66	40.3	4536.41	2442.92	6786	4016	1500	
49 Rupandehi	12	3.24	2.4	4.67	0.39	0.14	10.84	3.24	2.88	6.4	0.94	0.73	14.18	32.23	5665.27	4083.46	10412.5	5680	1265	
50 Kapilvatu	12	2.87	2.74	6.35	0.45	0.13	12.53	2.87	2.17	8.92	1.23	0.72	15.92	29.45	3236.95	2763.31	8327.5	4024	720	
51 Arghakhanchi	12	3.58	1.33	2.09	0.19	0.25	7.43	3.58	2.01	2.72	0.8	0.98	10.1	22.24	1813.35	559.92	1331.25	728	555	
Western	192	3.13	2.09	3.63	0.47	0.28	9.6	3.13	2.47	5.37	1.54	0.99	13.5	31.9	35316.78	20830.92	51841.25	41616	13750	
52 Pyyuthan	12	8.53	2.98	4.12	0.19	0.53	16.35	8.53	7.02	10.81	1.33	1.29	28.98	38.96	4353.64	3095.38	4993.75	760	1360	
53 Rolpa	12	8.05	2.26	7.64	1.24	2.61	21.8	8.05	2.98	8.76	2.32	8.9	31	38.48	3979.51	939.69	3736	1072	5835	
54 Rukum	12	1.8	5.54	8.38	0.05	0.54	16.3	1.8	3.49	9.62	0.37	0.72	16	24.27	829.8	854.54	3122.5	808	695	
55 Salyan	12	3.82	1.82	5.06	0.72	1.95	13.38	3.82	1.92	9.02	2.38	3.05	20.18	33.05	1924.77	946.62	4257.25	3088	2625	
56 Dang	12	3.37	1.4	3.43	0.7	0.32														

Analyzed Data

FP Sheet 2 of 2

District Code	District Name	Received Report	Permanent Method								Target Vs Achievement	
			New Acceptors as % of MWRA	Current Users as % of MWRA	% of VSC new Cases		Proportion of VSC new acceptors at		Proportion of VSC provided by		as % of Current Users	as % of VSC new Cases
					Female	Male	HF	Camp	Government	NGO		
	Mountain	192	0.57	12.79	6.12	93.88	23.34	76.66	95.74	4.26	102.92	69.35
	Hill	468	0.5	16.18	24.41	75.59	45.23	54.77	75.59	24.41	91.55	72.27
	Terai	240	1.32	34.97	93.92	6.08	68.09	31.91	57.01	42.99	96.47	73.67
	National Total	900	0.9	25.08	73.08	26.92	60.54	39.46	63.25	36.75	94.86	73.12
1	Taplejung	12	0.11	6.52	0	100	62.86	37.14	100	0	90.84	70
2	Panchthar	12	0.02	4.75	0	100	0	100	100	0	74.8	8
3	Ilam	12	0.04	12.47	34.38	65.63	3.13	96.88	100	0	94.77	21.33
4	Jhapa	12	1.65	32.89	90.95	9.05	78.11	21.89	22.92	77.08	97.04	103.53
5	Morang	12	1.41	43.65	94.56	5.44	66.69	33.31	36.87	63.13	97.45	77.23
6	Sunsari	12	0.9	27.01	95.98	4.02	71.27	28.73	48.72	51.28	82.32	96.07
7	Dhankuta	12	0.04	9.1	0	100	35.29	64.71	100	0	85.82	17
8	Teharthur	12	0.07	7.28	0	100	88.89	11.11	100	0	75.22	36
9	Sankhuwasabha	12	0.11	7.81	0	100	100	0	100	0	87.1	27.33
10	Bhojpur	12	0.12	6.11	0	100	40	60	100	0	80.53	55
11	Solukhumbu	12	0.08	4.16	0	100	25	75	100	0	101.39	40
12	Okhaldhunga	12	0.37	7.57	12.03	87.97	44.36	55.64	63.16	36.84	81.51	66.5
13	Khotang	12	0.22	5.44	3.54	96.46	21.24	78.76	100	0	95.08	113
14	Udaypur	12	0.45	12.59	64.29	35.71	4.87	95.13	77.6	22.4	81.27	102.67
15	Saptari	12	2.04	41.43	99.93	0.07	83.27	16.73	67.44	32.56	99.6	112.4
16	Siraha	12	2.23	41.72	99.5	0.5	71.37	28.63	39	61	96.34	75.7
	Eastern	192	1.07	26.74	92.46	7.54	71.73	28.27	44.13	55.87	92.79	87.18
17	Dhanusha	12	1.15	51.6	99.27	0.73	41.57	58.43	21.65	78.35	91.83	39.82
18	Mahottari	12	1.59	42.03	98.77	1.23	100	0	56.25	43.75	105.07	67.5
19	Sarlahi	12	1.87	45.97	99.53	0.47	73.34	26.66	62.28	37.72	108.9	91.63
20	Sindhuli	12	0.26	14.52	62.65	37.35	9.04	90.96	98.19	1.81	83.89	41.5
21	Ramechhap	12	0.14	7.68	4.41	95.59	19.12	80.88	80.88	19.12	89.34	45.33
22	Dolkha	12	0.38	16.45	35.14	64.86	3.24	96.76	97.84	2.16	84.69	61.67
23	Sindhupalchowk	12	0.4	13.79	13.03	86.97	5.28	94.72	94.72	5.28	86.07	71
24	Kavre	12	0.53	20.03	43	57	67.75	32.25	27.79	72.21	93.36	82.17
25	Lalitpur	12	0.8	31.03	6.21	93.79	100	0	100	0	80.35	108.14
26	Bhaktapur	12	0.25	19.86	19.74	80.26	84.87	15.13	17.11	82.89	68.58	30.4
27	Kathmandu	12	0.51	18.01	37.36	62.64	87.25	12.75	58.15	41.85	79.93	73.35
28	Nuwakot	12	0.45	22.34	32	68	33	67	61	39	92.43	37.5
29	Rasuwa	12	0.85	25.85	20.93	79.07	0	100	100	0	92.98	86
30	Dhading	12	0.63	13.88	12.18	87.82	5.3	94.7	96.27	3.73	114.92	84.83
31	Makawanpur	12	1.77	35.47	4.07	95.93	14.46	85.54	72.42	27.58	96.78	82.3
32	Rautahat	12	2.5	46.57	100	0	52.48	47.52	100	0	105.36	63.34
33	Bara	12	1.63	32.26	93.47	6.53	80.54	19.46	44.95	55.05	107.11	71.93
34	Parsa	12	1.58	63.77	99.36	0.64	100	0	100	0	90.78	48.7
35	Chitwan	12	0.7	31.42	33.72	66.28	81.24	18.76	35.67	64.33	79.09	57.93
	Central	228	1.06	31.88	72.99	27.01	65.93	34.07	67.25	32.75	92.18	64.04
36	Gorkha	12	0.37	17.73	37.36	62.64	100	0	100	0	84.92	53
37	Lamjung	12	0.73	18.71	19.81	80.19	57.59	42.41	100	0	92.93	107.67
38	Tanahu	12	0.36	17.4	38.16	61.84	3.18	96.82	96.82	3.18	94.35	56.6
39	Syangja	12	0.23	17.75	66.86	33.14	4	96	96	4	91.5	58.33
40	Kaski	12	0.64	23.84	32.66	67.34	70.74	29.26	41.18	58.82	82.92	80.75
41	Manang	12	0.04	7.94	0	100	0	100	100	0	103	2
42	Mustang	12	0.57	17.32	15.79	84.21	63.16	36.84	100	0	108.73	38
43	Myagdi	12	0.42	14.32	35.59	64.41	11.86	88.14	100	0	96.33	59
44	Parbat	12	0.25	13.81	26.8	73.2	0	100	100	0	94.03	48.5
45	Baglung	12	0.39	14.49	33.21	66.79	1.89	98.11	100	0	94.49	88.33
46	Gulmi	12	0.37	13.59	0.38	99.62	100	0	97.35	2.65	117.3	88
47	Palpa	12	0.57	21.05	60.22	39.78	68.01	31.99	54.84	45.16	84.23	74.4
48	Nawalparasi	12	1.33	27.64	90.42	9.58	32.44	67.56	20.24	79.76	92.07	143.69
49	Rupandehi	12	0.67	18.04	93.08	6.92	100	0	100	0	87.36	78.07
50	Kapilvastu	12	0.19	13.53	100	0	100	0	100	0	89.62	30.86
51	Arghakhanchi	12	0.42	12.14	0	100	100	0	100	0	87.92	86
	Western	192	0.56	18.4	63.16	36.84	58.43	41.57	67.28	32.72	90.6	81.26
52	Pyuthan	12	0.22	9.99	58.93	41.07	0.89	99.11	100	0	90.45	32
53	Rolpa	12	0.21	7.47	0	100	0	100	96.15	3.85	128.58	34.67
54	Rukum	12	0.38	8.27	0	100	0	100	100	0	110	88
55	Salyan	12	0.34	12.88	0	100	0	100	100	0	104.03	42.5
56	Dang	12	0.54	20.58	83.97	16.03	61.38	38.62	45.83	54.17	97.16	52
57	Banke	12	0.85	24.2	69.51	30.49	74.69	25.31	62.1	37.9	99.11	81
58	Bardiya	12	1.14	30.23	95.18	4.82	0	100	100	0	104.44	77.07
59	Surkhet	12	1.69	31.42	40.43	59.57	37.13	62.87	80.94	19.06	107.03	93.23
60	Dailikh	12	0.79	12.03	3.59	96.41	19.62	80.38	100	0	114.58	83.6
61	Jajarkot	12	0.61	11.31	0	100	10.5	89.5	100	0	90.38	100
62	Dolpa	12	0.93	11.1	0	100	28.36	71.64	100	0	117.68	67
63	Jumla	12	1.9	27.02	3	97	82	18	81.5	18.5	129.74	100
64	Kalikot	12	0.74	8.93	0	100	0	100	100	0	180.92	64
65	Mugu	12	2.16	18.25	0	100	22.43	77.57	100	0	110.63	107
66	Humla	12	0.81	13.45	0	100	37.5	62.5	100	0	157.68	53.33
	Mid Western	180	0.8	18.94	46.04	53.96	33.58	66.42	83.71	16.29	105.15	73.23
67	Bajura	12	0.8	14.64	0	100	0	100	100	0	127.12	57.14
68	Bajhang	12	0.66	11.7	0	100	0	100	100	0	115.24	64
69	Achham	12	0.35	5.98	8.99	91.01	5.82	94.18	100	0	127.53	94.5
70	Doti	12	0.26	8.73	26.19	73.81	38.1	61.9	100	0	116.52	42
71	Kailali	12	1.23	29.7	89.62	10.38	39.92	60.08	76.28	23.72	100.67	75.56
72	Kanchanpur	12	0.7	25.73	91.55	8.45	43.44	56.56	76.17	23.83	105.39	66.3
73	Dadeldhura	12	0.62	13.5	18.58	81.42	2.19	97.81	46.45	53.55	68.64	73.2
74	Baitadi	12	0.63	8.72	5.48	94.52	94.52	5.48	5.48	94.52	212.92	115.67
75	Darchula	12	0.6	11.68	1.72	98.28	0	100	98.28	1.72	144.82	87
	Far Western	108	0.76	18.52	59.75	40.25	35.58	64.42	74.3	25.7	110.67	73.22

## Raw Data

## Logistic Management

District Code	District Name	Received Reports	Stock at the End of Month											
			Condom	Pills	Depo	ORS	Conrim (120 mg)	Vitamin A	Iron	Albendazole	Cetamol	Tetracyclin (250 mg)	IUCD	Implant
	Mountain	192	7997501	1068456	1174965	1187770	6440338	1624463	10934409	3939951	21292574	2636520	13953	6372
	Hill	468	39767505	4570771	4526171	5127221	26002112	6268114	48248566	18164233	119549945	9981271	100331	40610
	Terai	240	29983428	3308469	3130860	15842323	19625107	3925983	44576169	23047127	133798663	10645775	52855	22462
	National Total	900	77748434	8947696	8831996	22157314	52067557	11818560	103759144	45151311	274641182	23263566	167139	69444
1	Taplejung	12	821800	146083	140451	112172	602906	158819	875149	531396	3263571	263925	736	0
2	Panchthar	12	1456852	117378	135569	134097	509740	173230	1278005	320724	3679460	261686	584	559
3	Ilam	12	1551438	157270	154281	167472	689702	244216	900610	408401	3099832	268064	407	40
4	Jhapa	12	1227000	382275	190124	151929	988077	152980	1441086	482079	6572536	478406	1474	828
5	Morang	12	2599133	140110	122469	139787	1511480	173269	1413950	319109	15757530	1089764	1358	1237
6	Sunsari	12	1939002	250414	226922	297961	1304922	255260	1323055	425407	9720989	619908	2975	303
7	Dhankuta	12	488545	64467	43436	75104	447668	114214	699367	308990	2727960	371438	389	560
8	Tehrathum	12	325939	61726	48793	52874	221946	56151	565983	135217	1872825	148188	1721	67
9	Sankhuwasabha	12	696886	51344	104339	57698	192070	98736	326763	254251	1784776	276160	3213	1300
10	Bhojpur	12	2309377	229705	356129	206810	466925	201497	1003194	757458	4268152	299525	890	0
11	Solukhumbu	12	291188	59090	108288	90100	314905	80835	516206	149881	700728	74741	230	251
12	Okhaldhunga	12	336952	86951	76520	84550	592708	51474	842130	336526	1482570	137737	18994	2352
13	Khotang	12	407278	70127	82703	119276	225222	136192	518034	405939	1187125	257358	32	19
14	Udayapur	12	396594	93950	91164	99571	525596	117179	908635	352804	2268085	265044	1144	295
15	Saptari	12	1852708	205551	201934	215316	970675	125353	3468798	873636	7001706	744483	1786	25
16	Siraha	12	2395421	197946	318730	124340	755626	167505	2792860	671153	9749669	669510	684	486
	Eastern	192	19096113	2314387	2401922	2129057	10320168	2306910	18873825	6732971	75137514	6225937	36617	8322
17	Dhanusha	12	2235593	90860	95445	13248701	1895189	267504	3095610	1219371	9209124	692244	4810	3684
18	Mahottari	12	1887858	156524	237763	90098	654663	81310	3582249	748503	7066140	236777	449	107
19	Sarlahi	12	1020696	171336	208086	134753	932653	157352	4343770	876042	14632760	631268	7823	285
20	Sindhuli	12	990806	163246	112789	144036	488865	251117	779946	532164	5045345	159548	1598	595
21	Ramechhap	12	475074	67669	115490	71093	337980	107123	819375	324335	2210496	223695	785	694
22	Dolkha	12	814327	133209	93184	150800	577679	299800	1293097	445519	2727860	227551	1819	177
23	Sindhupalchowk	12	910777	172013	269761	167024	826707	263410	1442115	657333	3652563	382850	2702	1050
24	Kavre	12	1000678	181342	229970	149621	885914	417916	2095655	424656	2678358	495397	1179	825
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	238285	48821	55545	94229	290210	56391	464720	125745	2550658	167220	1226	544
27	Kathmandu	12	1795210	887449	327745	259971	2390132	170054	2092485	931021	19931383	758060	2403	1959
28	Nuwakot	12	954621	189675	178428	120096	595155	123394	1483590	465941	2620686	196655	177	60
29	Rasuwa	12	636065	18911	30014	49962	634890	44297	968788	126285	1118370	119030	185	282
30	Dhading	12	1485896	150804	196602	187349	1044995	182316	2043031	400296	4716646	523016	2663	1833
31	Makawanpur	12	1392744	186440	231004	147131	905568	284642	2017044	341071	2164609	304536	20549	6846
32	Rautahat	12	1237453	105883	124242	54836	439160	141837	1841156	551623	4444092	346305	115	141
33	Bara	12	1143356	152684	108943	93644	718943	151475	2210225	650706	44505808	493605	2990	342
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	1504208	109820	133387	158086	1000590	272213	1282715	11367641	9272683	636065	1757	906
	Central	228	19723647	2986666	2748398	15314150	14619293	3272151	31855571	20188252	98047581	6598822	53230	20330
36	Gorkha	12	1141436	94168	147776	131249	1170328	144166	1334864	868751	3937838	366995	525	179
37	Lamjung	12	761522	68651	75277	106160	674189	106429	1203576	930123	2771983	46309	841	230
38	Tanaha	12	394862	55402	62464	110742	653320	122410	820008	415401	1900030	36470	647	309
39	Syangja	12	2547589	141862	107449	109415	709749	273979	2623096	622416	2534114	285629	1160	367
40	Kaski	12	1219009	71928	75889	276182	895361	132270	1399831	519105	4273609	53154	697	107
41	Manang	12	29339	16886	6670	10198	48831	15062	115445	16700	121685	9870	20	20
42	Mustang	12	891662	15919	14011	14562	102787	14332	490705	19215	567300	12717	25	30
43	Myagdi	12	2647816	70117	109520	95978	962868	110406	2375002	1168267	4539101	417810	2983	1261
44	Parbat	12	653644	49015	88291	107859	317077	93493	1288068	259944	1589536	109491	123	100
45	Baglung	12	732274	104959	109356	154507	648654	110040	1048328	716241	2987811	303298	660	182
46	Gulmi	12	1789380	137587	174923	195050	713283	392893	2143518	837160	4261921	505876	14084	266
47	Palpa	12	2132834	176971	171955	209923	1559427	306107	2567242	1629817	6604760	180070	1672	9035
48	Nawalparasi	12	2506644	146235	239468	123194	810980	362797	1429114	683124	5160520	486503	12851	9072
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	734235	553412	43301	113535	404990	133910	2122130	433295	3572200	305870	338	14
51	Arghakhanchi	12	550279	56200	58079	32361	124426	72313	311990	182975	999216	143900	1003	55
	Western	192	18732525	1759312	1484429	1790915	9796270	2390607	21272917	9302534	45821624	3263962	37629	21227
52	Pyuthan	12	2544800	136149	196087	77259	428597	122762	1124733	521929	2589320	182675	1078	735
53	Roopna	12	1433843	114609	135048	196573	924574	220999	1172746	596299	1684810	200552	3661	3114
54	Rukum	12	256700	68358	77060	55314	389127	82062	474797	366476	525402	144716	836	33
55	Salyan	12	582162	82580	155249	103747	861674	142570	1061850	371807	2343510	114015	1596	2000
56	Dang	12	873336	151152	282145	123073	2841535	176495	1236368	1226353	6531447	302115	2620	441
57	Banka	12	1815841	119402	150320	247360	1034951	185681	1760916	598155	6320556	1127482	5121	833
58	Bardiya	12	1749768	128897	155817	89726	1147490	300999	1202015	1201837	6435190	8923010	3133	1934
59	Surkhet	12	1028450	113876	109419	175698	685574	114237	1372484	279920	1979033	313444	3689	1633
60	Daiilekh	12	804928	68430	60998	139458	594751	114569	1188965	152633	1881997	361540	637	254
61	Jajarkot	12	138854	45921	33432	100884	152187	50256	596571	277746	713488	94015	340	200
62	Dolpa	12	54870	51043	10664	22154	36940	10012	118680	77671	96870	11100	200	0
63	Jumla	12	613342	138296	36884	63368	383692	36529	956970	591372	1021970	108679	1076	672
64	Kalikot	12	128035	29867	27578	25396	253683	51703	338255	58636	251113	70540	147	135
65	Mugu	12	106291	14963	50671	19408	82190	29726	148393	98903	508354	48805	550	320
66	Humla	12	46737	33881	13614	48104	103432	13067	354337	27011	161898	72972	2	0
	Mid Western	180	12177957	1297424	1494986	1487522	9920397	1651667	13108080	6446748	33044958	4045660	24686	12304
67	Bajura	12	303433	34711	69690	74721	433410	59013	500435	187196	786770	273681	555	90
68	Bajhang	12	1177077	72027	72323	178837	1354878	371627	1558684	553795	3594430	4050534	2142	2002
69	Achham	12	585085	24883	22777	171291	1061276	264884	1023237	269634	1913071	453625	407	456
70	Doti	12	655103	60808	44929	210116	716055	221390	1510467	272383	2371573	310716	2352	848
71	Kailali	12	1883692	176535	225856	133345	1490633	392434	8675627	293105	5566943	173650	1171	1158
72	Kanchanpur	12	1											

Tuberculosis: Annual Case Finding Report 2068/69  
Tuberculosis Sheet 1 of 3

District	Smear Positive								Smear Negative		Extra Pulmonary		Transfer In		Others		Total		Proportion	
	New		Relapse		Failure		RAD		F	M	F	M	F	M	F	M	F	M	%	Re Tx / S+ve
	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	%	%
<b>Grand Total</b>	<b>4818</b>	<b>10241</b>	<b>573</b>	<b>1707</b>	<b>63</b>	<b>168</b>	<b>36</b>	<b>167</b>	<b>3317</b>	<b>5814</b>	<b>3511</b>	<b>4358</b>	<b>378</b>	<b>649</b>	<b>366</b>	<b>598</b>	<b>13062</b>	<b>23702</b>	<b>47</b>	<b>15</b>
Bhojpur	14	29	0	5	0	2	0	0	1	5	24	18	3	9	0	3	42	71	47	14
Dhankuta	13	46	1	3	0	0	0	0	1	11	15	28	0	2	0	1	30	91	52	6
Ilam	18	54	1	6	1	0	0	0	5	10	25	24	1	7	1	1	52	102	53	10
Jhapa	213	444	32	78	2	7	1	6	124	236	116	140	11	17	7	11	506	939	52	16
Khotang	20	24	1	3	0	1	0	0	6	20	8	13	0	3	1	0	36	64	48	10
Morang	197	380	14	54	2	4	2	6	66	144	150	182	14	23	8	20	453	813	52	12
Okhaldhunga	19	25	3	4	0	1	0	2	5	11	9	8	0	2	0	2	36	55	57	19
Panchthar	19	51	1	4	1	0	0	0	6	13	6	8	1	2	0	0	34	78	68	8
Sankhuwasabha	10	33	4	1	0	0	0	0	1	15	17	15	3	7	0	1	35	72	47	10
Saptari	75	167	4	10	0	1	0	1	115	200	35	29	8	8	5	7	242	423	39	6
Siraha	94	253	13	25	1	2	2	2	62	122	35	47	3	9	0	0	210	460	57	11
Solukhumbu	13	14	0	4	0	0	0	0	3	3	15	10	5	0	0	0	36	31	47	13
Sunsari	125	367	5	43	3	4	2	11	61	104	146	188	12	22	14	32	368	771	50	12
Taplejung	7	19	1	1	0	2	0	0	5	14	7	4	2	1	0	0	22	41	46	13
Terathum	2	13	0	0	0	0	0	0	0	10	13	15	0	1	0	1	15	40	28	0
Udayapur	59	101	3	18	0	0	0	1	23	54	22	35	1	2	0	0	108	211	54	12
<b>Eastern Total</b>	<b>898</b>	<b>2020</b>	<b>83</b>	<b>259</b>	<b>10</b>	<b>24</b>	<b>7</b>	<b>29</b>	<b>484</b>	<b>972</b>	<b>643</b>	<b>764</b>	<b>64</b>	<b>115</b>	<b>36</b>	<b>79</b>	<b>2225</b>	<b>4262</b>	<b>50</b>	<b>12</b>
Bara	156	329	21	35	1	10	2	0	141	236	61	79	2	2	0	6	384	697	48	12
Bhaktapur	69	130	12	27	0	0	0	1	39	61	100	89	9	19	11	7	240	334	41	17
Chitawan	130	303	21	74	2	3	1	7	119	183	100	139	18	28	12	26	403	763	44	20
Dhading	27	112	5	19	0	0	0	0	14	36	30	47	4	6	2	3	82	223	52	15
Dhanusha	117	270	13	44	1	2	1	4	143	251	58	77	5	9	10	14	348	671	42	14
Dolkha	8	25	3	6	0	0	1	2	8	17	25	28	4	11	0	1	49	90	30	27
Kathmandu	407	666	58	139	4	10	4	13	233	276	620	692	71	130	67	88	1464	2014	37	18
Kavre	57	118	3	25	1	3	1	3	15	45	59	57	5	9	2	7	143	267	50	17
Lalitpur	104	157	13	34	4	2	0	1	53	80	135	146	12	23	15	23	336	466	39	17
Mahottari	140	250	6	23	1	5	2	3	388	564	23	33	2	4	4	3	566	885	28	9
Makawanpur	112	242	16	49	0	3	0	1	62	88	51	70	9	17	2	11	252	481	57	16
Nuwakot	21	79	2	17	0	0	0	0	23	44	22	31	0	2	1	4	69	177	45	16
Parsa	131	249	9	36	0	1	2	7	108	218	67	75	5	6	6	1	328	593	45	13
Ramechhap	22	39	1	9	0	0	0	0	3	19	23	27	8	13	1	3	58	110	46	14
Rasuwa	9	19	0	0	0	0	0	0	1	1	5	3	1	2	0	0	16	25	74	0
Rautahat	81	176	6	18	1	0	0	1	150	260	50	70	20	23	4	10	312	558	33	9
Sarlahi	218	396	27	63	3	6	0	9	146	292	58	75	13	8	25	34	490	883	52	15
Sindhuli	54	138	5	13	0	0	0	1	16	47	25	35	4	3	1	5	105	242	61	9
Sindhupalchok	28	78	4	15	0	0	0	3	24	44	23	60	7	14	6	9	92	223	41	17
<b>Central Total</b>	<b>1891</b>	<b>3776</b>	<b>225</b>	<b>646</b>	<b>18</b>	<b>45</b>	<b>14</b>	<b>56</b>	<b>1686</b>	<b>2762</b>	<b>1535</b>	<b>1833</b>	<b>199</b>	<b>329</b>	<b>169</b>	<b>255</b>	<b>5737</b>	<b>9702</b>	<b>42</b>	<b>15</b>
Arghakhanchi	22	63	3	18	0	0	0	0	15	49	37	44	1	3	2	5	80	182	37	20
Baglung	29	63	5	7	0	0	0	1	12	19	19	35	1	5	0	0	66	130	52	12
Gorkha	40	96	3	16	1	3	1	1	13	36	23	34	2	9	2	1	85	196	56	16
Gulmi	25	84	8	22	0	2	0	0	22	58	47	86	0	2	1	6	103	260	34	23
Kapilbastu	128	280	7	30	1	6	1	1	40	65	48	58	1	3	2	2	228	445	66	10
Kaski	68	180	9	21	2	4	0	1	16	33	64	93	5	9	8	22	172	313	66	10
Lamjung	13	59	4	10	0	1	0	0	9	25	16	19	6	3	1	1	49	118	49	16
Manang	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	51	17
Mustang	1	1	0	0	0	0	0	0	0	1	0	2	0	0	0	0	1	4	40	0
Mygadi	14	20	1	4	0	1	0	1	1	9	10	11	0	3	2	2	28	51	52	17
Nawalparasi	124	310	15	53	1	8	0	3	76	143	80	122	3	8	4	7	303	654	51	16
Palpa	43	107	4	25	2	4	1	1	16	48	47	74	5	5	5	11	123	275	45	20
Parbat	11	37	2	6	0	0	0	2	5	14	10	8	0	3	2	5	30	75	56	17
Rupandehi	220	467	29	70	4	6	1	8	97	207	121	113	10	9	17	9	499	889	56	15
Syangja	35	97	9	23	0	0	1	1	29	36	33	49	1	0	0	0	108	206	47	20
Tanahun	54	109	10	24	3	3	0	5	21	23	34	37	1	6	4	8	127	215	59	22
<b>Western Total</b>	<b>827</b>	<b>1926</b>	<b>109</b>	<b>329</b>	<b>14</b>	<b>38</b>	<b>5</b>	<b>25</b>	<b>372</b>	<b>766</b>	<b>589</b>	<b>785</b>	<b>36</b>	<b>68</b>	<b>50</b>	<b>79</b>	<b>2002</b>	<b>4016</b>	<b>52</b>	<b>16</b>
Banke	140	322	19	53	2	4	2	9	113	172	91	88	6	15	11	19	384	682	50	16
Bardiya	105	247	12	34	1	5	0	1	62	94	53	56	3	8	13	27	249	472	57	13
Dailekh	22	68	0	6	0	0	0	3	16	33	33	48	2	5	0	1	73	164	41	9
Dang	163	288	26	75	0	7	2	2	109	201	87	140	10	15	7	19	404	747	46	20
Dolpa	0	6	0	0	0	0	0	0	3	2	0	2	8	8	0	0	11	18	46	0
Humla	6	3	0	0	0	1	0	0	2	3	3	3	3	2	0	0	14	12	45	10
Jajarkot	18	30	5	5	0	1	0	1	22	22	15	12	0	3	2	0	62	74	40	20
Jumla	7	21	0	3	0	0	0	0	9	11	4	5	3	9	0	0	23	49	49	10
Kalikot	7	18	1	1	0	0	1	1	10	7	11	32	0	1	0	0	30	60	29	14
Mugu	6	8	0	1	0	0	0	0	3	3	1	5	1	2	0	0	11	19	54	7
Pyuthan	38	102	6	20	2	1	1	0	14	34	28	37	2	4	4	5	95	203	55	18
Rolpa	63	78	7	27	2	3	0	1	23	43	25	46	1	2	3	9	124	209	51	22
Rukum	46	44	8	10	0	1	0	1	28	28	26	28	7	7	3	3	118	122	45	18
Salyan	30	66																		

**Tuberculosis:Annual CaseFindingReport 2068/69**  
**Tuberculosis Sheet 2 of 3**

District	By regimen				Male and Female together										Case detection per population		ARTI	Expected case	Case Finding Rate
	Treatment regimen			All treated Cases	Smear Positive				Smear Negative	Extra Pulmonary	Transfer in	Other	Total	New S+	All				
	I	II	0-8years		New	Relapse	Failure	RAD											
				M + F	M + F	M + F	M + F	M + F	M + F	M + F	M + F	M + F	M + F	M + F	M + F				
<b>National</b>	<b>32564</b>	<b>3138</b>	<b>1512</b>	<b>37214</b>	<b>15059</b>	<b>2280</b>	<b>231</b>	<b>203</b>	<b>9131</b>	<b>7869</b>	<b>1027</b>	<b>964</b>	<b>36764</b>	<b>53</b>	<b>129</b>	<b>1.45</b>	<b>20649</b>	<b>73</b>	
Bhojpur	92	6	2	100	43	5	2	0	6	42	12	3	113	18	47	1.1	131	33	
Dhankuta	106	4	6	116	59	4	0	0	12	43	2	1	121	30	61	1.1	109	54	
Ilam	132	16	2	150	72	7	1	0	15	49	8	2	154	21	44	1.1	190	38	
Jhapa	1323	103	24	1450	657	110	9	7	360	256	28	18	1445	76	167	2.1	908	72	
Khotang	78	4	3	85	44	4	1	0	26	21	3	1	100	16	36	1.1	151	29	
Morang	1314	99	46	1459	577	68	6	8	210	332	37	28	1266	56	122	2.1	1,089	53	
Okhaldhunga	67	16	0	83	44	7	1	2	16	17	2	2	91	23	48	1.1	103	43	
Panchthar	109	4	3	116	70	5	1	0	19	14	3	0	112	29	46	1.1	134	52	
Sankhuwasabha	97	9	6	112	43	5	0	0	16	32	10	1	107	23	56	0.7	67	64	
Saptari	650	22	43	715	242	14	1	1	315	64	16	12	665	35	95	2.1	733	33	
Siraha	682	56	18	756	347	38	3	4	184	82	12	0	670	49	95	2.1	740	47	
Solukhumbu	60	3	0	63	27	4	0	0	6	25	5	0	67	21	52	0.7	45	60	
Sunsari	1031	81	40	1152	492	48	7	13	165	334	34	46	1139	63	146	2.1	819	60	
Taplejung	62	2	0	64	26	2	2	0	19	11	3	0	63	16	39	0.7	57	46	
Terhathum	56	1	3	60	15	0	0	0	10	28	1	1	55	11	41	1.1	74	20	
Udayapur	250	21	4	275	160	21	0	1	77	57	3	0	319	45	90	1.1	196	82	
<b>Eastern Total</b>	<b>6109</b>	<b>447</b>	<b>200</b>	<b>6756</b>	<b>2918</b>	<b>342</b>	<b>34</b>	<b>36</b>	<b>1456</b>	<b>1407</b>	<b>179</b>	<b>115</b>	<b>6487</b>	<b>45</b>	<b>99</b>	<b>1.45</b>	<b>4747</b>	<b>61</b>	
Bara	1029	59	27	1115	485	56	11	2	377	140	4	6	1081	70	155	2.1	733	66	
Bhaktapur	507	63	15	585	199	39	0	1	100	189	28	18	574	71	206	3.1	432	46	
Chitawan	985	147	31	1163	433	95	5	8	302	239	46	38	1166	74	199	2.1	614	71	
Dhading	301	43	8	352	139	24	0	0	50	77	10	5	305	34	74	1.1	227	61	
Dhanusha	855	71	95	1021	387	57	3	5	394	135	14	24	1019	47	124	2.1	864	45	
Dolkha	123	12	8	143	33	9	0	3	25	53	15	1	139	13	56	0.7	87	38	
Kathmandu	3009	320	153	3482	1073	197	14	17	509	1312	201	155	3478	78	251	3.1	2,145	50	
Kavre	351	40	10	401	175	28	4	4	60	116	14	9	410	38	88	1.1	257	68	
Lalitpur	760	66	6	832	261	47	6	1	133	281	35	38	802	62	191	3.1	649	40	
Mahottari	1436	43	65	1544	390	29	6	5	952	56	6	7	1451	57	213	2.1	715	55	
Makawanpur	645	85	19	749	354	65	3	1	150	121	26	13	733	74	153	1.1	264	134	
Nuwakot	185	33	0	218	100	19	0	0	67	53	2	5	246	29	71	1.1	192	52	
Parsa	819	57	30	906	380	45	1	9	326	142	11	7	921	61	149	2.1	650	58	
Ramechhap	178	12	0	190	61	10	0	0	22	50	21	4	168	24	66	1.1	140	44	
Rasuwa	32	0	1	33	28	0	0	0	2	8	3	0	41	52	76	0.72	19	145	
Rautahat	862	31	18	911	257	24	1	1	410	120	43	14	870	38	128	2.1	712	36	
Sarlahi	1163	108	35	1306	614	90	9	9	438	133	21	59	1373	78	174	2.1	827	74	
Sindhuli	340	31	8	379	192	18	0	1	63	60	7	6	347	56	101	1.1	189	101	
Sindhupalchok	259	33	8	300	106	19	0	3	68	83	21	15	315	28	84	0.7	132	81	
<b>Central Total</b>	<b>13839</b>	<b>1254</b>	<b>537</b>	<b>15630</b>	<b>5667</b>	<b>871</b>	<b>63</b>	<b>70</b>	<b>4448</b>	<b>3368</b>	<b>528</b>	<b>424</b>	<b>15439</b>	<b>57</b>	<b>155</b>	<b>1.45</b>	<b>7205</b>	<b>79</b>	
Arghakhanchi	232	23	7	262	85	21	0	0	64	81	4	7	262	34	104	1.1	138	61	
Baglung	184	13	0	197	92	12	0	1	31	54	6	0	196	28	60	1.1	178	52	
Gorkha	257	37	16	310	136	19	4	2	49	57	11	3	281	39	81	1.1	190	71	
Gulmi	288	27	17	332	109	30	2	0	80	133	2	7	363	31	102	1.1	195	56	
Kapilbastu	595	47	5	647	408	37	7	2	105	106	4	4	673	68	113	2.1	627	65	
Kaski	433	46	13	492	198	30	6	1	49	157	14	30	485	42	103	1.1	258	77	
Lamjung	139	21	6	166	72	14	1	0	34	35	9	2	167	34	78	1.1	117	61	
Manang	0	0	0	0	3	0	0	0	0	0	0	0	3	24	24	0.7	4	68	
Mustang	4	0	0	4	2	0	0	0	1	2	0	0	5	12	29	0.7	6	33	
Mygadi	67	15	2	84	34	5	1	1	10	21	3	4	79	25	57	1.1	76	45	
Nawalparasi	893	105	23	1021	434	68	9	3	219	202	11	11	957	62	138	2.1	731	59	
Palpa	353	35	11	399	150	29	6	2	64	121	10	16	398	46	123	1.1	178	85	
Parbat	88	10	4	102	48	8	0	2	19	18	3	7	105	25	56	1.1	104	46	
Rupandehi	1213	133	16	1362	687	99	10	9	304	234	19	26	1388	78	157	2.1	928	74	
Syangja	281	38	14	333	132	32	0	2	65	82	1	0	314	35	83	1.1	208	64	
Tanahun	284	44	8	336	163	34	6	5	44	71	7	12	342	43	90	1.1	210	78	
<b>Western Total</b>	<b>5311</b>	<b>594</b>	<b>142</b>	<b>6047</b>	<b>2753</b>	<b>438</b>	<b>52</b>	<b>30</b>	<b>1138</b>	<b>1374</b>	<b>104</b>	<b>129</b>	<b>6018</b>	<b>49</b>	<b>108</b>	<b>1.45</b>	<b>4042</b>	<b>68</b>	
Banke	847	86	112	1045	462	72	6	11	285	179	21	30	1066	96	221	2.1	506	91	
Bardiya	596	57	63	716	352	46	6	1	156	109	11	40	721	74	152	2.1	500	70	
Dailekh	189	16	32	237	90	6	0	3	49	81	7	1	237	33	86	1.1	151	60	
Dang	954	122	76	1152	451	101	7	4	310	227	25	26	1151	79	201	2.1	601	75	
Dolpa	26	0	1	27	6	0	0	0	5	2	16	0	29	17	82	0.72	13	47	
Humla	25	1	0	26	9	0	1	0	5	6	5	0	26	18	53	0.72	18	51	
Jajarkot	106	10	9	125	48	10	1	1	44	27	3	2	136	29	83	1.1	90	53	
Jumla	66	5	1	72	28	3	0	0	20	9	12	0	72	26	66	0.72	39	72	
Kalikot	79	3	7	89	25	2	0	2	17	43	1	0	90	19	69	0.72	47	53	
Mugu	27	2	0	29	14	1	0	0	6	6	3	0	30	26	56	0.72	19	72	
Pyuthan	245	34	9	288	140	26	3	1	48	65	6	9	298	54	115	1.1	142	98	
Rolpa	274	38	19	331	141	34	5	1	66	71	3	12	333	56	131	1.1	140	101	
Rukum	205	20	15	240	90	18	1	1	56	54	14	6	240	39	104	1.1	127	71	
Salyan	208	25	25	258	96	21	1	3	75	55	5	4	260	37	100	1.1	143	67	
Surkhet	571	44	120	735	200	29	1	2	219	243	10	29	733	57	208	1.1	194	103	
<b>Mid-Western Total</b>	<b>4418</b>	<b>463</b>	<b>489</b>	<b>5370</b>	<b>2152</b>	<b>369</b>	<b>32</b>	<b>30</b>	<b>1361</b>	<b>1177</b>	<b>142</b>								

**Tuberculosis: Treatment Outcome Report 2067-68**  
**Tuberculosis Sheet 3 of 3**

District	New Smear Positive																			TB Indicator						
	Registered		Cured		Completed		Failure		Died		Defaulted		Transferred out		No result											
	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	Cure		Success	Failure	Died	Default	T/O	N/D
																				F	M					
<b>National</b>	<b>4741</b>	<b>10259</b>	<b>4316</b>	<b>9231</b>	<b>100</b>	<b>284</b>	<b>85</b>	<b>148</b>	<b>154</b>	<b>369</b>	<b>93</b>	<b>360</b>	<b>129</b>	<b>220</b>	<b>10</b>	<b>16</b>	<b>91%</b>	<b>90%</b>	<b>90%</b>	<b>93%</b>	<b>2%</b>	<b>3%</b>	<b>3%</b>	<b>2%</b>	<b>0%</b>	<b>0%</b>
Bhojpur	12	30	12	24	0	2	0	1	0	1	0	0	1	1	0	0	100%	80%	86%	90%	2%	2%	0%	5%	0%	0%
Dhankuta	9	33	5	30	0	0	0	0	0	0	0	0	1	1	0	0	56%	91%	83%	83%	0%	0%	0%	5%	0%	0%
Ilam	16	37	17	35	2	2	1	1	0	2	0	3	0	1	0	0	106%	95%	98%	106%	4%	4%	6%	2%	0%	0%
Ilhapa	230	450	227	438	0	5	6	3	5	7	1	7	8	8	0	0	99%	97%	98%	99%	1%	2%	1%	2%	0%	0%
Khotang	13	28	9	24	0	0	0	0	2	0	0	0	0	0	0	0	69%	86%	80%	80%	5%	0%	0%	0%	0%	0%
Morang	188	444	168	403	1	12	4	2	8	15	5	19	6	11	0	0	89%	91%	90%	92%	1%	4%	4%	3%	0%	0%
Okhaldhunga	11	14	10	16	0	0	0	0	1	0	0	0	0	0	0	0	91%	114%	104%	104%	0%	4%	0%	0%	0%	0%
Panchthar	16	43	13	39	0	2	0	0	1	1	0	0	0	1	0	0	81%	91%	88%	92%	0%	3%	0%	2%	0%	0%
Sankhuwasabha	13	33	14	27	1	0	0	0	0	2	0	3	0	0	0	0	108%	82%	89%	91%	0%	4%	7%	0%	0%	0%
Saptari	79	217	73	195	0	0	0	2	4	10	0	0	0	2	0	0	92%	90%	91%	91%	1%	5%	0%	1%	0%	0%
Siraha	113	261	107	251	2	4	1	3	4	10	0	9	0	4	0	0	95%	96%	96%	97%	1%	4%	2%	1%	0%	0%
Solukhumbu	14	8	14	6	0	0	0	0	0	0	0	0	1	0	0	0	100%	75%	91%	91%	0%	0%	0%	5%	0%	0%
Sunsari	146	320	143	264	2	6	2	7	6	12	4	31	8	7	0	0	98%	83%	87%	89%	2%	4%	8%	3%	0%	0%
Taplejung	14	17	15	9	2	2	0	0	0	1	0	0	0	0	0	0	107%	53%	77%	90%	0%	3%	0%	0%	0%	0%
Terhathum	3	20	3	16	0	0	0	1	0	0	0	0	0	0	0	0	100%	80%	83%	83%	4%	0%	0%	0%	0%	0%
Udayapur	36	104	46	98	0	0	0	1	1	3	0	1	0	0	0	0	128%	94%	103%	103%	1%	3%	1%	0%	0%	0%
<b>Eastern Total</b>	<b>913</b>	<b>2059</b>	<b>876</b>	<b>1875</b>	<b>10</b>	<b>35</b>	<b>14</b>	<b>23</b>	<b>29</b>	<b>65</b>	<b>10</b>	<b>73</b>	<b>25</b>	<b>36</b>	<b>0</b>	<b>0</b>	<b>96%</b>	<b>91%</b>	<b>93%</b>	<b>94%</b>	<b>1%</b>	<b>3%</b>	<b>3%</b>	<b>2%</b>	<b>0%</b>	<b>0%</b>
Bara	170	328	142	293	8	31	2	7	6	18	1	3	0	3	0	1	84%	89%	87%	95%	2%	5%	1%	1%	0%	0%
Bhaktapur	66	129	58	115	0	0	1	2	2	2	0	2	2	1	0	1	88%	89%	89%	89%	2%	2%	1%	2%	1%	0%
Chitawan	137	305	108	247	1	8	4	5	3	9	1	11	2	13	0	0	79%	81%	80%	82%	2%	3%	3%	2%	0%	0%
Dhading	29	103	29	79	0	1	0	0	2	2	0	2	0	0	0	0	100%	77%	82%	83%	0%	3%	2%	0%	0%	0%
Dhanusha	110	261	106	224	8	13	0	2	4	15	2	22	3	5	0	0	96%	86%	89%	95%	1%	5%	6%	2%	0%	0%
Dolkha	10	20	9	22	0	1	0	0	0	3	0	1	0	0	0	0	90%	110%	103%	107%	0%	10%	3%	0%	0%	0%
Kathmandu	421	636	325	528	4	26	9	6	10	12	6	30	44	72	1	4	77%	83%	81%	84%	1%	2%	3%	11%	0%	0%
Kavre	39	100	41	93	1	0	1	6	1	5	0	1	0	1	0	0	105%	93%	96%	97%	5%	4%	1%	1%	0%	0%
Lalitpur	83	188	86	180	0	0	4	1	0	5	0	5	1	5	0	0	104%	96%	98%	98%	2%	2%	2%	2%	0%	0%
Mahottari	111	273	123	242	7	23	0	3	1	4	8	15	0	3	2	2	111%	89%	95%	103%	1%	1%	6%	1%	1%	0%
Makawanpur	100	207	98	198	5	18	4	1	2	8	0	3	3	6	0	0	98%	96%	96%	104%	2%	3%	1%	3%	0%	0%
Nuwakot	32	81	33	76	4	6	0	1	2	2	0	0	0	0	0	1	103%	94%	96%	105%	1%	4%	0%	0%	1%	0%
Parsa	120	278	123	266	8	4	0	1	4	6	4	2	0	2	1	0	103%	96%	98%	101%	0%	3%	2%	1%	0%	0%
Ramechhap	19	56	10	42	0	0	0	0	0	3	0	0	0	0	0	0	53%	75%	69%	69%	0%	4%	0%	0%	0%	0%
Rasuwa	6	11	4	14	1	0	0	0	0	1	0	1	0	1	0	0	67%	127%	106%	112%	0%	6%	6%	6%	0%	0%
Rautahat	101	230	81	209	0	1	1	1	4	9	8	1	1	1	0	0	80%	91%	88%	88%	1%	4%	3%	1%	0%	0%
Sarlahi	153	327	138	322	4	10	2	5	7	9	5	16	3	2	0	0	90%	98%	96%	99%	1%	3%	4%	1%	0%	0%
Sindhuli	36	97	42	99	0	0	0	0	0	3	2	2	2	0	0	0	117%	102%	106%	106%	0%	2%	3%	2%	0%	0%
Sindhupalchok	33	81	28	75	2	5	1	1	2	1	0	2	1	0	0	0	85%	93%	90%	96%	2%	3%	2%	1%	0%	0%
<b>Central Total</b>	<b>1776</b>	<b>3711</b>	<b>1584</b>	<b>3324</b>	<b>53</b>	<b>147</b>	<b>29</b>	<b>42</b>	<b>50</b>	<b>117</b>	<b>37</b>	<b>119</b>	<b>62</b>	<b>115</b>	<b>4</b>	<b>9</b>	<b>89%</b>	<b>90%</b>	<b>89%</b>	<b>93%</b>	<b>1%</b>	<b>3%</b>	<b>3%</b>	<b>3%</b>	<b>0%</b>	<b>0%</b>
Argakhanchi	24	66	27	72	1	1	0	0	3	2	0	1	1	1	0	0	113%	109%	110%	112%	0%	6%	1%	2%	0%	0%
Baglung	27	42	27	31	0	0	0	2	0	1	0	3	2	0	0	0	100%	74%	84%	84%	3%	1%	4%	3%	0%	0%
Gorkha	47	107	43	84	4	2	0	1	0	7	0	3	3	1	1	0	91%	79%	82%	86%	1%	5%	2%	3%	1%	0%
Gulmi	37	106	37	104	0	0	1	1	0	1	0	1	1	2	0	0	100%	98%	99%	99%	1%	1%	1%	2%	0%	0%
Kapilbasti	94	298	87	278	0	0	0	6	10	15	6	20	1	2	0	0	93%	93%	93%	93%	2%	6%	7%	1%	0%	0%
Kaski	66	129	60	112	0	0	2	4	2	9	2	1	0	4	0	0	91%	87%	88%	88%	3%	6%	2%	2%	0%	0%
Lamjung	14	51	15	45	0	0	0	2	0	2	0	1	0	0	0	0	107%	88%	92%	92%	3%	3%	2%	0%	0%	0%
Manang	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0										
Mustang	0	5	0	4	0	0	0	0	0	1	0	0	0	0	1	4		80%	80%	80%	0%	20%	0%	0%	100%	0%
Mygadi	15	20	11	20	0	0	0	2	0	1	0	1	0	1	0	0	73%	100%	89%	89%	6%	3%	3%	3%	0%	0%
Nawalparasi	125	300	117	292	0	1	1	4	6	13	2	10	3	3	0	0	94%	97%	96%	96%	1%	4%	3%	1%	0%	0%
Palpa	49	114	40	126	0	0	1	2	3	2	1	2	0	0	0	0	82%	111%	102%	102%	2%	3%	2%	0%	0%	0%
Parbat	9	30	7	21	1	0	0	0	0	2	0	1	1	0	0	0	78%	70%	72%	74%	0%	5%	3%	3%	0%	0%
Rupandehi	208	481	195	453	0	3	4	8	7	13	0	11	0	5	0	1	94%	94%	94%	94%	2%	3%	2%	1%	0%	0%
Syangja	38	90	38	93	0	6	0	0	2	9	1	2	1	0	0	0	100%	103%	102%	107%	0%	9%	2%	1%	0%	0%
Tanahun	65	109	60	94	1	2	3	2	0	4	0	4	2	4	0	0	92%	86%	89%	90%	3%	2%	2%	3%	0%	0%
<b>Western Total</b>	<b>818</b>	<b>1948</b>	<b>764</b>	<b>1829</b>	<b>7</b>	<b>15</b>	<b>12</b>	<b>34</b>	<b>33</b>	<b>82</b>	<b>12</b>	<b>61</b>	<b>15</b>	<b>23</b>	<b>3</b>	<b>5</b>	<b>93%</b>	<b>94%</b>	<b>94%</b>	<b>95%</b>	<b>2%</b>	<b>4%</b>	<b>3%</b>	<b>1%</b>	<b>0%</b>	<b>0%</b>
Banke	155	332	137	261	6	10	5	5	9	14	4	19	2	12	1	0	88%	79%	82%	85%	2%	5%	5%	3%	0%	0%
Bardiya	108	241	83	223	3	7	3	6	8	10	2	10	3	4	0	0	77%	93%	88%	91%	3%	5%	3%	2%	0%	0%
Dailekh	20	50	16	43	0	2	0	1	0	6	1	5	0	1	0	0	80%	86%	84%	87%	1%	9%	9%	1%	0%	0%
Dang	166	329	139	288	1	3	1	2	3	12	3	15	2	7	0	0	84%	88%	86%	87%	1%	3%	4%	2%	0%	0%
Dolpa	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0%	0%	0%	0%	0%	0%	0%	0%	0%
Humla	0	5	0	4	0	0	0	0	0	0	0	0	0	0	0	0		80%	80%	80%	0%	0%	0%	0%	0%	0%
Jajarkot	19	29	16	28	0	2	0	0	0	1	0	0	0	0	0	0	84%	97%	92%	96%	0%	2%	0%	0%	0%	0%
Jumla	14	17	5	7	3																					



Raw Data

Malaria  
Sheet 1 of 4

District Code	District Name	Received Reports			Examined			Positive Cases			Treatment Total	Pregnant Women Treatment	PV Indigenous						PV Imported							
		Slide Collection			RDTs	Microscope	Total	RDTs	Microscope	Total			Under 5 Years		5 Years & Above		Total		Under 5 Years		5 Years & Above		Total			
		ACD	PCDH	Total									Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
	Mountain	192	39	1194	1233	665	399	1064	3	14	17	6	0	0	0	0	3	0	3	0	0	0	6	0	6	
	Hill	468	2641	27875	30516	4658	24914	29572	276	473	749	584	8	7	5	119	157	126	162	7	7	23	90	30	97	
	Terai	240	8664	106504	115168	27997	75097	103094	859	1232	2091	1781	17	9	16	210	567	219	583	4	7	99	523	103	530	
	National Total	900	11344	135573	146917	33320	100410	133730	1138	1719	2857	2371	25	16	21	329	727	345	748	11	14	122	619	133	633	
1	Taplejung	12	0	173	173	66	118	184	1	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	Panchthar	12	9	1004	1013	147	807	954	8	2	10	8	0	0	0	1	0	1	0	0	0	0	0	0	0	0
3	Ilam	12	417	2511	2928	447	2540	2987	19	14	33	15	1	1	1	3	1	4	0	0	0	0	2	0	2	
4	Jhapa	12	1335	6958	8293	2939	5388	8327	60	149	209	209	0	1	1	12	78	13	79	0	0	7	24	7	24	
5	Morang	12	488	9710	10198	2198	8330	10528	28	32	60	60	1	0	0	12	17	12	17	0	1	0	7	0	8	
6	Sunsari	12	4	2599	2603	47	1160	1207	10	7	17	17	0	0	0	1	3	1	3	0	0	0	5	0	5	
7	Dhankuta	12	514	539	1053	13	1040	1053	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8	Tehrathum	12	5	206	211	37	144	181	0	9	9	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	0	503	503	501	2	503	0	1	1	2	0	0	0	0	0	0	0	0	0	0	0	2	0	2
10	Bhojpur	12	52	935	987	1	886	887	0	12	12	9	0	0	0	1	1	1	1	0	1	2	2	2	3	
11	Solukhumbu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12	Okhaldhunga	12	19	106	125	56	54	110	1	6	7	12	0	0	0	0	0	0	0	0	0	7	16	7	16	
13	Khotang	12	0	4	4	0	4	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Udaypur	12	3	501	504	14	431	445	0	10	10	9	0	0	0	1	0	1	0	0	0	1	8	1	8	
15	Saptari	12	359	1892	2251	14	802	816	0	3	3	48	0	0	0	1	5	1	5	0	0	1	1	1	1	
16	Siraha	12	0	3610	3610	854	1589	2443	25	4	29	29	0	0	0	1	14	1	14	0	0	3	5	3	5	
	Eastern	192	3205	31251	34456	7334	23295	30629	152	249	401	428	2	2	2	29	122	31	124	0	2	21	72	21	74	
17	Dhanusha	12	1773	3510	5283	1667	2369	4036	195	38	233	43	0	0	3	4	18	4	21	0	0	4	0	4	4	
18	Mahottari	12	521	6323	6844	2091	4540	6631	55	65	120	120	0	0	2	22	28	22	30	3	0	22	40	25	40	
19	Sarlahi	12	187	3266	3453	101	3453	3554	1	93	94	94	0	0	0	4	5	4	5	1	3	7	69	8	72	
20	Sindhuli	12	231	1890	2121	1134	999	2133	14	4	18	18	1	0	0	1	15	1	15	0	0	0	2	0	2	
21	Ramechhap	12	0	430	430	0	430	430	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Dolkha	12	0	160	160	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	Sindhupalchowk	12	35	168	203	66	130	196	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24	Kavre	12	20	1463	1483	601	1298	1899	1	4	5	4	0	0	0	0	3	0	3	0	0	0	1	0	1	
25	Lalitpur	12	0	972	972	45	927	972	0	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27	Kathmandu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Nuwakot	12	171	18	189	28	13	41	15	1	16	0	1	0	0	0	0	0	0	0	0	1	0	1	0	
29	Rasuwa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30	Dhading	12	101	404	505	78	406	484	5	5	10	1	0	0	0	1	0	1	0	0	0	0	0	0	0	
31	Makawanpur	12	419	4394	4813	738	3445	4183	9	20	29	29	4	0	0	11	8	11	8	6	3	0	0	6	3	
32	Rautahat	12	847	3327	4174	0	3519	3519	0	9	9	9	0	0	0	2	2	2	2	0	0	0	5	0	5	
33	Bara	12	1453	2900	4353	244	1879	2123	11	8	19	15	0	0	0	2	11	2	11	0	0	0	0	0	0	
34	Parsa	12	0	266	266	5	2	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35	Chitwan	12	162	2050	2212	105	1991	2096	12	15	27	27	0	0	0	1	6	1	6	0	0	3	15	3	15	
	Central	228	5920	31541	37461	6903	25401	32304	318	265	583	360	6	0	5	47	97	47	102	10	6	33	136	43	142	
36	Gorkha	12	22	308	330	24	223	247	4	4	8	24	0	0	0	2	1	2	1	0	0	0	3	0	3	
37	Lamjung	12	0	605	605	0	605	605	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
38	Tanahu	12	55	844	899	19	818	837	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
39	Syangja	12	26	791	817	95	700	795	28	0	28	4	0	0	0	0	0	0	0	0	0	0	3	0	3	
40	Kaski	12	54	1370	1424	154	1270	1424	4	38	42	42	0	3	1	9	3	10	1	3	3	8	4	11		
41	Manang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
42	Mustang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
43	Myagdi	12	0	191	191	181	47	228	38	42	80	1	0	0	0	0	0	0	0	0	0	0	1	0	1	
44	Parbat	12	9	99	108	27	65	92	4	1	5	48	0	0	0	4	0	4	0	0	0	0	0	0	0	
45	Baglung	12	0	218	218	0	208	208	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
46	Gulmi	12	0	834	834	206	555	761	26	43	69	10	0	0	0	1	1	1	1	0	0	1	1	1	1	
47	Palpa	12	40	1130	1170	66	1079	1145	16	26	42	70	0	0	0	5	6	5	6	0	0	1	6	1	6	
48	Nawalparasi	12	0	6901	6901	912	5263	6175	14	36	50	50	0	0	0	18	0	18	0	0	3	18	3	18		
49	Rupandehi	12	0	16211	16211	12714	0	12714	137	0	137	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
50	Kapilvastu	12	0	2240	2240	3	2237	2240	4	47	51	51	0	0	2	3	15	3	17	0	0	0	22			





Raw Data  
Malaria  
Sheet 3 of 4

District Code	District Name	Received Reports	Clinical Malaria						Total Treatment					
			Under 5 Years		5 Years & Above		Total		Under 5 Years		5 Years & Above		Total	
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
	Mountain	192	0	2	59	49	59	51	0	2	59	61	59	63
	Hill	468	2179	1797	1878	2129	4057	3926	2105	1734	2037	2388	4142	4122
	Terai	240	7567	7560	18087	26747	25654	34307	7580	7579	18096	27637	25676	35216
	<b>National Total</b>	<b>900</b>	<b>9746</b>	<b>9359</b>	<b>20024</b>	<b>28925</b>	<b>29770</b>	<b>38284</b>	<b>9685</b>	<b>9315</b>	<b>20192</b>	<b>30086</b>	<b>29877</b>	<b>39401</b>
1	Taplejung	12	0	2	0	2	0	4	0	2	0	3	0	5
2	Panchthar	12	6	10	21	33	27	43	6	10	22	39	28	49
3	Ilam	12	10	10	46	42	56	52	14	11	47	51	61	62
4	Jhapa	12	124	136	1115	1298	1239	1434	98	108	962	1191	1060	1299
5	Morang	12	0	0	482	4064	482	4064	2	2	497	4100	499	4102
6	Sunsari	12	4	3	838	903	842	906	4	4	843	915	847	919
7	Dhankuta	12	7	12	32	24	39	36	7	12	32	24	39	36
8	Teharthur	12	2	1	0	0	2	1	2	1	0	0	2	1
9	Sankhuwasabha	12	0	0	0	0	0	0	0	0	0	4	0	4
10	Bhojpur	12	6	4	22	33	28	37	6	5	25	36	31	41
11	Solukhumbu	12	0	0	0	0	0	0	0	0	0	0	0	0
12	Okhaldhunga	12	0	0	1	3	1	3	0	0	9	27	9	27
13	Khotang	12	0	0	3	4	3	4	0	0	3	4	3	4
14	Udaypur	12	6	4	47	90	53	94	6	4	52	101	58	105
15	Saptari	12	9	16	840	748	849	764	9	16	842	754	851	770
16	Siraha	12	56	71	1158	1082	1214	1153	56	71	1166	1103	1222	1174
	<b>Eastern</b>	<b>192</b>	<b>230</b>	<b>269</b>	<b>4605</b>	<b>8326</b>	<b>4835</b>	<b>8595</b>	<b>210</b>	<b>246</b>	<b>4500</b>	<b>8352</b>	<b>4710</b>	<b>8598</b>
17	Dhanusha	12	1139	1248	4705	5404	5844	6652	1139	1251	4709	5433	5848	6684
18	Mahottari	12	0	0	1014	3852	1014	3852	3	2	1058	3927	1061	3929
19	Sarlahi	12	39	22	626	1334	665	1356	40	25	638	1412	678	1437
20	Sindhuli	12	0	0	114	125	114	125	0	0	115	140	115	140
21	Ramechhap	12	6	0	0	0	6	0	6	0	0	0	6	0
22	Dolkha	12	0	0	0	0	0	0	0	0	0	0	0	0
23	Sindhupalchowk	12	0	0	50	37	50	37	0	0	50	37	50	37
24	Kavre	12	2	1	63	78	65	79	2	1	63	82	65	83
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	0	0	0	0	0	0	0	0	0	0	0	0
27	Kathmandu	12	0	0	0	0	0	0	0	0	0	0	0	0
28	Nuwakot	12	0	3	8	7	8	10	0	3	9	7	9	10
29	Rasuwa	12	0	0	0	0	0	0	0	0	0	0	0	0
30	Dhading	12	3	1	25	41	28	42	3	1	25	42	28	43
31	Makawanpur	12	16	13	103	120	119	133	22	16	116	128	138	144
32	Rautahat	12	97	57	1115	1287	1212	1344	106	65	1031	1188	1137	1253
33	Bara	12	15	15	725	912	740	927	15	15	734	927	749	942
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	2	3	79	97	81	100	2	3	83	120	85	123
	<b>Central</b>	<b>228</b>	<b>1319</b>	<b>1363</b>	<b>8627</b>	<b>13294</b>	<b>9946</b>	<b>14657</b>	<b>1338</b>	<b>1382</b>	<b>8631</b>	<b>13443</b>	<b>9969</b>	<b>14825</b>
36	Gorkha	12	3	8	18	24	21	32	3	8	20	28	23	36
37	Lamjung	12	0	0	3	7	3	7	0	0	2	5	2	5
38	Tanahu	12	3	2	0	18	3	20	0	0	12	6	12	6
39	Syangja	12	0	0	1	0	1	0	0	1	1	3	1	4
40	Kaski	12	0	0	40	41	40	41	4	4	49	65	53	69
41	Manang	12	0	0	0	0	0	0	0	0	0	0	0	0
42	Mustang	12	0	0	0	0	0	0	0	0	0	0	0	0
43	Myagdi	12	0	0	0	1	0	1	0	0	0	2	0	2
44	Parbat	12	7	0	9	33	16	33	7	0	9	37	16	37
45	Baglung	12	0	0	0	0	0	0	0	0	0	1	0	1
46	Gulmi	12	0	0	37	69	37	69	0	0	42	75	42	75
47	Palpa	12	0	0	44	74	44	74	0	0	50	86	50	86
48	Nawalparasi	12	74	96	721	763	795	859	75	96	725	808	800	904
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	123	136	544	707	667	843	118	133	441	680	559	813
51	Arghakhanchi	12	40	0	3	5	43	5	25	0	0	0	25	0
	<b>Western</b>	<b>192</b>	<b>250</b>	<b>242</b>	<b>1420</b>	<b>1742</b>	<b>1670</b>	<b>1984</b>	<b>232</b>	<b>242</b>	<b>1351</b>	<b>1796</b>	<b>1583</b>	<b>2038</b>
52	Pyuthan	12	0	0	0	1	0	1	0	0	0	1	0	1
53	Rolpa	12	0	0	4	5	4	5	0	0	4	5	4	5
54	Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0
55	Salyan	12	19	36	68	77	87	113	19	36	68	77	87	113
56	Dang	12	1936	1856	731	810	2667	2666	1956	1876	745	845	2701	2721
57	Banke	12	1462	1423	792	779	2254	2202	1462	1423	798	849	2260	2270
58	Bardiya	12	1457	1475	1695	1742	3152	3217	1463	1480	1729	1830	3192	3310
59	Surkhet	12	1932	1598	1091	1117	3023	2715	1933	1600	1115	1165	3048	2765
60	Dailekh	12	1	2	5	6	6	8	1	2	17	17	18	19
61	Jajarkot	12	0	0	0	0	0	0	0	0	0	0	0	0
62	Dolpa	12	0	0	0	0	0	0	0	0	0	0	0	0
63	Jumla	12	0	0	0	0	0	0	0	0	0	1	0	1
64	Kalikot	12	0	0	0	0	0	0	0	0	0	4	0	4
65	Mugu	12	0	0	0	0	0	0	0	0	0	0	0	0
66	Humla	12	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Mid Western</b>	<b>180</b>	<b>6807</b>	<b>6390</b>	<b>4386</b>	<b>4537</b>	<b>11193</b>	<b>10927</b>	<b>6834</b>	<b>6417</b>	<b>4476</b>	<b>4794</b>	<b>11310</b>	<b>11211</b>
67	Bajura	12	0	0	7	10	7	10	0	0	7	10	7	10
68	Bajhang	12	0	0	2	0	2	0	0	0	2	2	2	2
69	Achham	12	0	0	16	15	16	15	0	1	18	58	18	59
70	Doti	12	74	83	0	0	74	83	5	12	0	0	5	12
71	Kailali	12	1018	990	904	954	1922	1944	1019	993	1046	1409	2065	2402
72	Kanchanpur	12	12	13	3	11	15	24	13	16	49	146	62	162
73	Dadeldhura	12	33	3	28	17	61	20	33	3	44	37	77	40
74	Baitadi	12	3	6	26	19	29	25	1	3	68	39	69	42
75	Darchula	12	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Far Western</b>	<b>108</b>	<b>1140</b>	<b>1095</b>	<b>986</b>	<b>1026</b>	<b>2126</b>	<b>2121</b>	<b>1071</b>	<b>1028</b>	<b>1234</b>	<b>1701</b>	<b>2305</b>	<b>2729</b>



**Analysed Data**

**Malaria**

District Code	District Name	Received Report	Blood slide examination rate	Slide positivity rate	Annual parasite incidence among 1000 population	Clinical Malaria among 1000 population	Proportion of PF	Proportion of imported cases among total +ve	Proportion of Malaria cases by Age among total positive cases		Proportion of Malaria Cases by Sex among total +ve cases		Blood Slide Collection Achievement (%)
									Under 5 yrs	Above 5 Yrs	Female	Male	
	Mountain	192	0.17	1.6	0.01	0.18	0.82	58.33	1.64	98.36	48.36	51.64	24.18
	Hill	468	0.38	2.53	0.08	1.03	0.69	34.31	46.45	53.55	50.12	49.88	72.4
	Terai	240	0.84	2.03	0.14	4.87	0.43	39.75	24.89	75.11	42.17	57.83	112.09
	National Total	900	0.65	2.14	0.11	3.28	0.46	38.8	27.43	72.57	43.13	56.87	97.94
1	Taplejung	12	0.79	0.54	0.04	0.17	0	0	40	60	0	100	28.83
2	Panchthar	12	1.72	1.05	0.14	1.26	9.09	37.5	20.78	79.22	36.36	63.64	112.56
3	Ilam	12	3.45	1.1	0.17	1.25	10.57	40	20.33	79.67	49.59	50.41	75.08
4	Jhapa	12	1.23	2.51	0.31	3.95	3.26	34.93	8.73	91.27	44.93	55.07	83.77
5	Morang	12	1.27	0.57	0.07	5.47	0.3	21.82	0.09	99.91	10.85	89.15	103.01
6	Sunsari	12	0.16	1.41	0.02	2.33	0.23	29.41	0.45	99.55	47.96	52.04	57.84
7	Dhankuta	12	1.39	0	0	0.99	0		25.33	74.67	52	48	140.4
8	Teharthurm	12	0.55	4.97	0.27	0.09	0		100	0	66.67	33.33	28.13
9	Sankhuwasabha	12	1.05	0.2	0.04	0	25	75	0	100	0	100	83.83
10	Bhojpur	12	1.72	1.35	0.17	1.26	0	71.43	15.28	84.72	43.06	56.94	131.6
11	Solukhumbu	12											
12	Okhaldhunga	12	0.57	6.36	0.63	0.21	0	100	0	100	25	75	16.67
13	Khotang	12	0.01	0	0	0.11	0		0	100	42.86	57.14	0.67
14	Udaypur	12	0.14	2.25	0.03	0.46	0	90	6.13	93.87	35.58	64.42	12.92
15	Saptari	12	0.12	0.37	0.07	2.31	0	25	1.54	98.46	52.5	47.5	53.6
16	Siraha	12	0.36	1.19	0.04	3.53	0.25	27.59	5.3	94.7	51	49	92.56
	Eastern	192	0.7	1.31	0.1	3.05	0.92	38.62	3.43	96.57	35.39	64.61	75.07
17	Dhanusha	12	0.51	5.77	0.05	15.94	0.04	25	19.07	80.93	46.66	53.34	64.43
18	Mahottari	12	1.12	1.81	0.2	8.24	0.14	54.03	0.1	99.9	21.26	78.74	114.07
19	Sarlahi	12	0.47	2.64	0.12	2.65	0.24	89.36	3.07	96.93	32.06	67.94	95.92
20	Sindhuli	12	0.66	0.84	0.06	0.74	0	11.11	0	100	45.1	54.9	47.13
21	Ramechhap	12	0.22	0	0	0.03	0		100	0	100	0	71.67
22	Dolkha	12	0	0	0	0	0						53.33
23	Sindhupalchowk	12	0.47	0	0	2.07	0		0	100	57.47	42.53	11.28
24	Kavre	12	1.35	0.26	0.03	1.02	0	25	2.03	97.97	43.92	56.08	38.03
25	Lalitpur	12	0.23	0.31	0	0							129.6
26	Bhaktapur	12											
27	Kathmandu	12											
28	Nuwakot	12	0.02	39.02	0	0.09	0	100	15.79	84.21	47.37	52.63	31.5
29	Rasuwa	12											
30	Dhading	12	0.24	2.07	0	0.35	0	0	5.63	94.37	39.44	60.56	84.17
31	Makawanpur	12	0.94	0.69	0.07	0.57	0.71	33.33	13.48	86.52	48.94	51.06	160.43
32	Rautahat	12	0.54	0.26	0.01	3.94	0	55.56	7.15	92.85	47.57	52.43	115.94
33	Bara	12	0.38	0.89	0.03	2.99	0.06	13.33	1.77	98.23	44.29	55.71	145.1
34	Parsa	12	0	0	0	0	0						11.08
35	Chitwan	12	0.36	1.29	0.05	0.31	0.48	70.37	2.4	97.6	40.87	59.13	56.72
	Central	228	0.5	1.8	0.06	3.77	0.08	55.71	10.97	89.03	40.21	59.79	80.13
36	Gorkha	12	0.11	3.24	0.1	0.23	0	50	18.64	81.36	38.98	61.02	55
37	Lamjung	12	0.28	0	0	0.05	0		0	100	28.57	71.43	100.83
38	Tanahu	12	0.24	0	0	0.07	0		0	100	66.67	33.33	119.87
39	Syangja	12	0.21	3.52	0.01	0	40	80	20	80	20	80	108.93
40	Kaski	12	0.45	2.95	0.13	0.26	8.2	60	6.56	93.44	43.44	56.56	237.33
41	Manang	12											
42	Mustang	12											
43	Myagdi	12	0.17	35.09	0.01	0.01	0	100	0	100	0	100	63.67
44	Parbat	12	0.05	5.43	0.25	0.26	0	0	13.21	86.79	30.19	69.81	36
45	Baglung	12	0.06	0	0	0	0	0	0	100	0	100	29.07
46	Gulmi	12	0.21	9.07	0.03	0.3	5.98	63.64	0	100	35.9	64.1	111.2
47	Palpa	12	0.6	3.67	0.37	0.62	0	38.89	0	100	36.76	63.24	195
48	Nawalparasi	12	0.95	0.81	0.08	2.55	0.65	62	10.04	89.96	46.95	53.05	153.36
49	Rupandehi	12	1.63	1.08	0	0							450.31
50	Kapilvastu	12	0.48	2.28	0.11	3.23	0.73	8.83	18.29	81.71	40.74	59.26	62.22
51	Arghakhanchi	12	1.05	0	0	1.53	0		100	0	100	0	41
	Western	192	0.6	1.84	0.07	0.79	1.1	23.18	13.09	86.91	43.72	56.28	173.75
52	Pyuthan	12	0.11	0	0	0	0		0	100	0	100	91.67
53	Rolpa	12	0.08	0	0	0.04	0		0	100	44.44	55.56	106.67
54	Rukum	12	0.05	0	0	0							24
55	Salyan	12	0.19	0	0	5.7	0		27.5	72.5	43.5	56.5	22.67
56	Dang	12	0.61	0.59	0.04	12.73	0	0	70.68	29.32	49.82	50.18	77.61
57	Banke	12	0.72	2.66	0.16	9.66	0.18	40.79	63.66	36.34	49.87	50.13	70.41
58	Bardiya	12	1.67	2.1	0.32	16.37	0.18	26.98	45.26	54.74	49.09	50.91	133.35
59	Surkhet	12	1.1	2.63	0.29	21.51	0.03	9.09	60.78	39.22	52.43	47.57	97.73
60	Dailekh	12	0.2	4.13	0.08	0.05	0	0	8.11	91.89	48.65	51.35	188
61	Jajarkot	12	0.06	0	0	0							46.33
62	Dolpa	12											
63	Jumla	12	0	0	0	0	0	0	0	100	0	100	0
64	Kalikot	12	0.06	16.05	0.01	0	0	75	0	100	0	100	30.67
65	Mugu	12											
66	Humla	12											
	Mid Western	180	0.56	2.11	0.11	7.4	0.1	23.29	58.84	41.16	50.22	49.78	92.02
67	Bajura	12					0		0	100	41.18	58.82	
68	Bajhang	12	0.05	2	0.01	0.01	0	50	0	100	50	50	34
69	Achham	12	0.12	12.65	0.16	0.11	7.79	75	1.3	98.7	23.38	76.62	55.33
70	Doti	12	0.02	2.56	0	0.62	5.88	100	100	0	29.41	70.59	7
71	Kailali	12	1.8	5.37	0.97	6.23	1.41	55.24	45.04	54.96	46.23	53.77	138.19
72	Kanchanpur	12	3.73	1.46	0.55	0.11	16.07	27.6	12.95	87.05	27.68	72.32	172.48
73	Dadeldhura	12	0.39	5.62	0.23	0.53	2.56	27.78	30.77	69.23	65.81	34.19	26.04
74	Baitadi	12	0.32	15.11	0.31	0.19	3.6	2.35	3.6	96.4	62.16	37.84	140.67
75	Darchula	12	0	0	0	0							0
	Far Western	108	1.2	3.83	0.44	1.93	2.24	45.08	41.7	58.3	45.79	54.21	125.96

Raw Data

Kalazar  
Sheet 1 of 2

District Code	District Name	Received Reports	Affected		Native Cases																					
			No of VDCs	No of Village/Tole	No of Patients					Diagnosis Method					No of Patients Treated					No of Deaths						
					<5 Yrs		>=5 Yrs			Total	RK 39	BM	Sp	Other	Total	SAG/ Miltrefosine	Fungizone	Others	Total	Female	Male					
					Female	Male	Female	Male	Total													Female	Male			
Mountain	192	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Hill	468	8	7	2	1	2	9	14	5	0	0	0	0	5	5	0	0	0	5	0	0	0	0	5	0	0
Terai	240	61	92	5	2	38	59	104	75	16	1	0	0	92	60	33	0	93	0	3	0	0	0	0	3	
National Total	900	69	99	7	3	40	68	118	80	16	1	0	0	97	65	33	0	98	0	3	0	0	0	0	3	
1 Taplejung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2 Panchthar	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3 Ilam	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4 Jhapa	12	10	10	2	0	10	7	19	19	0	0	0	0	19	15	4	0	19	0	1	0	0	0	0	1	
5 Morang	12	1	1	0	0	0	0	1	1	0	0	0	0	1	1	0	0	1	0	0	0	0	0	0	0	
6 Sunsari	12	13	13	1	0	4	11	16	0	16	0	0	0	16	2	14	0	16	0	0	0	0	0	0	0	
7 Dhankuta	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8 Teharhum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9 Sankhuwasabha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
10 Bhojpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11 Solukhumbu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12 Okhaldhunga	12	3	5	2	1	1	5	9	2	0	0	0	0	2	4	0	0	4	0	0	0	0	0	0	0	
13 Khotang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14 Udaypur	12	1	1	0	0	0	1	1	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	
15 Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16 Siraha	12	11	11	2	1	3	5	11	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	
Eastern	192	39	41	7	2	18	30	57	23	16	0	0	0	39	23	18	0	41	0	1	0	0	0	0	1	
17 Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18 Mahottari	12	0	0	0	0	0	2	6	8	0	0	0	0	8	8	0	0	8	0	0	0	0	0	0	0	
19 Sarlahi	12	20	23	0	0	18	27	45	45	0	0	0	0	45	31	14	0	45	0	0	0	0	0	0	0	
20 Sindhuli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21 Ramechhap	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
22 Dolkha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23 Sindhupalchowk	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
24 Kavre	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
25 Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26 Bhaktapur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
27 Kathmandu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
28 Nuwakot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
29 Rasuwa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30 Dhading	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
31 Makawanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
32 Rautahat	12	4	4	0	1	0	1	2	0	0	0	0	0	2	0	0	0	2	0	0	0	0	0	0	2	
33 Bara	12	2	2	0	0	1	1	2	1	0	1	0	0	2	1	1	0	2	0	0	0	0	0	0	0	
34 Parsa	12	0	28	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35 Chitwan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Central	228	26	57	0	1	21	35	57	54	0	1	0	0	55	42	15	0	57	0	2	0	0	0	0	2	
36 Gorkha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
37 Lamjung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
38 Tanahu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
39 Syangja	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
40 Kaski	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
41 Manang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
42 Mustang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
43 Myagdi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
44 Parbat	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
45 Baglung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
46 Gulmi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
47 Palpa	12	1	1	0	0	0	1	1	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	
48 Nawalparasi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
49 Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
50 Kapilvastu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
51 Arghakhanchi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Western	192	1	1	0	0	0	1	1	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	
52 Pyuthan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
53 Rolpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
54 Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
55 Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
56 Dang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
57 Banke	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
58 Bardiya	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
59 Surkhet	12	3	0	0	0	1	2	3	2	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	
60 Dailekh	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
61 Jajarkot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
62 Dolpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
63 Jumla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
64 Kalikot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
65 Mugu	12	0	0	0	0	0																				

Raw Data  
Kalazar  
Sheet 2 of 2

District Code	District Name	Received Reports	Foreigner Cases															
			No of Patients					Diagnosis Method					No of Patients Treated				No of Deaths	
			<5 Yrs		>=5 Yrs		Total	RK 39	BM	Sp	Other	Total	SAG/ Miltefosine	Fungizone	Others	Total	Female	Male
			Female	Male	Female	Male												
	Mountain	192	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Hill	468	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Terai	240	2	4	18	29	53	52	1	0	0	53	31	22	0	53	0	
	National Total	900	2	4	18	29	53	52	1	0	0	53	31	22	0	53	0	
	1 Taplejung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	2 Panchthar	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	3 Ilam	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	4 Jhapa	12	0	0	3	1	4	4	0	0	0	4	4	0	0	4	0	
	5 Morang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	6 Sunsari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	7 Dhankuta	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	8 Teharthur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	9 Sankhuwasabha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	10 Bhojpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	11 Solukhumbu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	12 Okhaldhunga	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	13 Khotang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	14 Udaypur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	15 Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	16 Siraha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Eastern	192	0	0	3	1	4	4	0	0	0	4	4	0	0	4	0	
	17 Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	18 Mahottari	12	1	1	3	14	19	18	1	0	0	19	15	4	0	19	0	
	19 Sarlahi	12	1	3	12	14	30	30	0	0	0	30	12	18	0	30	0	
	20 Sindhuli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	21 Ramechhap	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	22 Dolkha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	23 Sindhupalchowk	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	24 Kavre	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	25 Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	26 Bhaktapur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	27 Kathmandu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	28 Nuwakot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	29 Rasuwa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	30 Dhading	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	31 Makawanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	32 Rautahat	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	33 Bara	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	34 Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	35 Chitwan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Central	228	2	4	15	28	49	48	1	0	0	49	27	22	0	49	0	
	36 Gorkha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	37 Lamjung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	38 Tanahu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	39 Syangja	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	40 Kaski	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	41 Manang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	42 Mustang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	43 Myagdi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	44 Parbat	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	45 Baglung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	46 Gulmi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	47 Palpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	48 Nawalparasi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	49 Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	50 Kapilvastu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	51 Arghakhanchi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Western	192	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	52 Pyuthan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	53 Rolpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	54 Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	55 Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	56 Dang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	57 Banke	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	58 Bardiya	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	59 Surkhet	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	60 Dailekh	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	61 Jajarkot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	62 Dolpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	63 Jumla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	64 Kalikot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	65 Mugu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	66 Humla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Mid Western	180	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	67 Bajura	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	68 Bajhang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	69 Achham	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	70 Doti	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	71 Kailali	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	72 Kanchanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	73 Dadeldhura	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	74 Baitadi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	75 Darchula	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Far Western	108	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

## Analysed Data

### Kalaazar

\* from fiscal year 2064/65 onward multiplier has been changed from 100000 to 10,000 (please adjust previous figures to compare with new one)

District Code	District Name	Received Report	Incidence of Kalaazar /10000*	% of Patients by age		% of Patients by sex		% Treated by		Deaths (%)		Case Fatality
				Under 5 yrs	Above 5 yrs	Female	Male	SAG	Fungizone	Female	Male	
	Mountain	192										
	Hill	468	0.39	21.43	78.57	28.57	71.43	35.71	0	0	0	0
	Terai	240	0.12	6.73	93.27	41.35	58.65	57.69	31.73	0	4.92	2.88
	National Total	900	0.14	8.47	91.53	39.83	60.17	55.08	27.97	0	4.23	2.54
1	Taplejung	12										
2	Panchthar	12										
3	Ilam	12										
4	Jhapa	12	0.22	10.53	89.47	63.16	36.84	78.95	21.05	0	14.29	5.26
5	Morang	12	0.01	0	100	0	100	100	0	0	0	0
6	Sunsari	12	0.21	6.25	93.75	31.25	68.75	12.5	87.5	0	0	0
7	Dhankuta	12										
8	Teharthur	12										
9	Sankhuwasabha	12										
10	Bhojpur	12										
11	Solukhumbu	12										
12	Okhaldhunga	12		33.33	66.67	33.33	66.67	44.44	0	0	0	0
13	Khotang	12										
14	Udayapur	12	0.03	0	100	0	100	100	0	0	0	0
15	Saptari	12	0									
16	Siraha	12	0.16	27.27	72.73	45.45	54.55	0	0	0	0	0
	Eastern	192	0.13	15.79	84.21	43.86	56.14	40.35	31.58	0	3.13	1.75
17	Dhanusha	12	0									
18	Mahottari	12	0.12	0	100	25	75	100	0	0	0	0
19	Sarlahi	12	0.57	0	100	40	60	68.89	31.11	0	0	0
20	Sindhuli	12										
21	Ramechhap	12										
22	Dolkha	12										
23	Sindhupalchowk	12										
24	Kavre	12										
25	Lalitpur	12										
26	Bhaktapur	12										
27	Kathmandu	12										
28	Nuwakot	12										
29	Rasuwa	12										
30	Dhading	12										
31	Makawanpur	12										
32	Rautahat	12	0.03	50	50	0	100	100	0	0	100	100
33	Bara	12	0.03	0	100	50	50	50	50	0	0	0
34	Parsa	12	0									
35	Chitwan	12										
	Central	228	0.13	1.75	98.25	36.84	63.16	73.68	26.32	0	5.56	3.51
36	Gorkha	12										
37	Lamjung	12										
38	Tanahu	12										
39	Syangja	12										
40	Kaski	12										
41	Manang	12										
42	Mustang	12										
43	Myagdi	12										
44	Parbat	12										
45	Baglung	12										
46	Gulmi	12										
47	Palpa	12		0	100	0	100	0	0	0	0	0
48	Nawalparasi	12										
49	Rupandehi	12										
50	Kapilvastu	12										
51	Arghakhanchi	12										
	Western	192		0	100	0	100	0	0	0	0	0
52	Pyuthan	12										
53	Rolpa	12										
54	Rukum	12										
55	Salyan	12										
56	Dang	12										
57	Banke	12										
58	Bardiya	12										
59	Surkhet	12		0	100	33.33	66.67	0	0	0	0	0
60	Dailekh	12										
61	Jajarkot	12										
62	Dolpa	12										
63	Jumla	12										
64	Kailikot	12										
65	Mugu	12										
66	Humla	12										
	Mid Western	180		0	100	33.33	66.67	0	0	0	0	0
67	Bajura	12										
68	Bajhang	12										
69	Achham	12										
70	Doti	12										
71	Kailali	12										
72	Kanchanpur	12										
73	Dadeldhura	12										
74	Baitadi	12										
75	Darchula	12										
	Far Western	108										

Raw Data  
Leprosy (MB)  
Sheet 1 of 3

District	Patients at end previous year	New Patients	Relapse	Re-starter	Transferred In	Total	RFT	Transferred Out	Defaulter	Other Deduction	Total deduction	Patients at the End of this Fiscal Year	Total child	Smear Tested	Positive	New Child	Disability Grade 2	Female among new
<b>National</b>	<b>1516</b>	<b>1817</b>	<b>25</b>	<b>29</b>	<b>32</b>	<b>3419</b>	<b>1613</b>	<b>16</b>	<b>17</b>	<b>73</b>	<b>1719</b>	<b>1700</b>	<b>94</b>	<b>557</b>	<b>235</b>	<b>91</b>	<b>70</b>	<b>486</b>
BHOJPUR	3	1				4	3				3	1		0				0
DHANKUTA	1	1				2	1				1	1		0				
ILAM	5	1				6	4				4	2						0
JHAPA	119	105		2	2	228	128	1	0	10	139	89	7	32	9	7	3	19
KHOTANG	1	3			0	4	1				1	3		0				2
MORANG	109	103	4	0	0	216	118	0		5	123	93	7	93	31	8	13	29
OKHALDHUNGA	3				0	3	3				3	0						
PANCHTHAR	5	5		1		11	5				5	6						
SANKHUWASABHA	2	3			0	5	2				2	3		0				0
SAPTARI	37	52	0	1	2	92	52			0	52	40	0	19	8	2	2	18
SIRAHA	36	65		0	1	102	37			1	38	64	0	42	34	1	1	11
SOLUKHUMBU	0	1			1	2	0				0	2						
SUNSARI	49	83	4	1	1	138	62	2	0	3	67	71	3	70	19	6	4	32
TAPLEJUNG	0	0				0	0				0	0						0
TEHRATHUM	4	0				4	4				4	0	0					
UDAYAPUR	16	14				30	18				18	12		0		0	2	2
<b>EASTERN</b>	<b>390</b>	<b>437</b>	<b>8</b>	<b>5</b>	<b>7</b>	<b>847</b>	<b>438</b>	<b>3</b>	<b>0</b>	<b>19</b>	<b>460</b>	<b>387</b>	<b>17</b>	<b>256</b>	<b>101</b>	<b>24</b>	<b>25</b>	<b>113</b>
BARA	96	72	1	1	0	170	90	1		3	94	76	0	0	0	4	0	20
BHAKTAPUR	2	6	0	0	1	9	2				2	7	1	2				3
CHITWAN	51	63	4	2	0	120	62		2	3	67	53	4			0	0	30
DHADING	6	5		1		12	7	0			7	5						0
DHANUSHA	59	110	0	1		170	79		1	6	86	84	10	38	25	11	0	30
DOLKHA	3	2		1		6	3				3	3	0					0
KATHMANDU	1					1	1				1	0						
KAVRE	2	4				6	4				4	2		0				
LALITPUR	11	1				12	7				7	5		1	1		0	1
MAHOTTARI	56	78			0	134	58			2	60	74	0	34	14	2	0	11
MAKWANPUR	9	14				23	8				8	15						
NUWAKOT	2	2				4	1	0			1	3						
PARSA	48	58		1		107	50	0	0	1	51	56	2			8		21
RAMECHHAP	3	1				4	2				2	2						
RASUWA	1	1			1	3	1				1	2		1				
RAUTAHTAT	60	70				130	58			4	62	68	2			2	0	18
SARLAHI	61	67			0	128	47		1	0	48	80	15	9	6	5	0	3
SINDHULI	14	8	0			22	13				13	9				0		1
SINDHUPALCHOWK	2	0				2	1				1	1						
Lalgadh						0					0	0		0	0	0	0	0
<b>CENTRAL</b>	<b>487</b>	<b>562</b>	<b>5</b>	<b>7</b>	<b>2</b>	<b>1063</b>	<b>494</b>	<b>1</b>	<b>4</b>	<b>19</b>	<b>518</b>	<b>545</b>	<b>34</b>	<b>85</b>	<b>46</b>	<b>32</b>	<b>0</b>	<b>138</b>
ARGHAKHANCHI	5	10		0	1	16	6				6	10		0			1	5
BAGLUNG	7	9	0			16	10				10	6	0	8	5		0	0
GORKHA	8	7	1	1	0	17	9			0	9	8		8	4			0
GULMI	4	5				9	3				3	6						0
KAPILVASTU	32	53	0			85	46				46	39	0	0	0	2		34
KASKI	21	31			2	54	31	1		2	34	20	0	31	5	0	4	12
LAMIJUNG	9	2	1	1		13	4		1		5	8		0	0		0	1
MANANG	1	0				1	1				1	0						
MUSTANG	2	0				2	2				2	0						
MYAGDI	5	4	1	2		12	4				4	8		6	4	0		1
NAWALPARASI	34	66		1	0	101	44			2	46	55	2	9	3	1	0	20
PALPA	16	15			0	31	17			0	17	14	1	15	4	2	0	7
PARBAT	8	10				18	9		1		10	8	0	5	2			4
RUPANDEHI	78	102		3	4	187	79	2	1	5	87	100	0	14	2	7	2	26
SYANGJA	13	16				29	13				13	16	1	25	4	1	0	7
TANAHU	11	18			1	30	13	1			14	16		10	5	1		7
<b>WESTERN</b>	<b>254</b>	<b>348</b>	<b>3</b>	<b>8</b>	<b>6</b>	<b>621</b>	<b>291</b>	<b>4</b>	<b>3</b>	<b>9</b>	<b>307</b>	<b>314</b>	<b>4</b>	<b>131</b>	<b>38</b>	<b>14</b>	<b>7</b>	<b>124</b>
BANKE	53	71	2	0	3	129	44	2	1	6	53	76	14	0	0	8	5	19
BARDIYA	47	54	0	1	1	103	45	0	2	2	49	54	13	0	0	2	4	15
DAILEKH	8	15	0	0	0	23	7	0	1	0	8	15	0	0	0	0	5	0
DANG	24	33	0	0	0	57	26	0	0	0	26	31	2	0	0	0	0	1
DOLPA	1	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	0
HUMLA	4	4	0	0	1	9	4	0	0	2	6	3	1	0	0	1	1	0
JAJARKOT	15	13	0	2	0	30	17	0	0	0	17	13	0	0	0	0	1	1
JUMLA	7	12	0	0	0	19	8	0	0	0	8	11	0	2	2	3	1	2
KALIKOT	3	5	0	0	0	8	7	0	0	0	7	1	0	0	0	0	0	0
MUGU	1	1	0	0	0	2	1	0	0	0	1	1	0	0	0	0	0	1
PYUTHAN	5	9	0	0	0	14	6	0	0	1	7	7	0	0	0	0	0	0
ROLPA	9	12	1	1	0	23	11	0	0	1	12	11	0	0	0	0	0	0
RUKUM	12	18	0	0	0	30	11	1	0	0	12	18	1	0	0	0	0	2
SALYAN	5	8	1	0	0	14	5	0	0	0	5	9	1	0	0	0	0	3
SURKHET	5	20	1	0	1	27	13	0	0	0	13	14	0	0	0	1	1	9
<b>MID-WEST</b>	<b>199</b>	<b>275</b>	<b>5</b>	<b>4</b>	<b>6</b>	<b>489</b>	<b>206</b>	<b>3</b>	<b>4</b>	<b>12</b>	<b>225</b>	<b>264</b>	<b>32</b>	<b>2</b>	<b>2</b>	<b>15</b>	<b>18</b>	<b>53</b>
ACHHAM	14	19		1		34	14	0	0	1	15	19	0	13	13		5	4
BAITADI	10	14		2		26	11		1		12	14		3	2		4	3
BAJHANG	8	11			1	20	9			0	9	11		2	2	1	4	2
BAJURA	7	3		1	0	11	6			1	7	4		2	2			3
DADELHURA	6	9		0	2	17	7	1	0	1	9	8		8	2		2	1
DARCHULA	8	8	1		1	18	10			0	10	8		7	3		0	1
DOTI	11	3				14	11		0	0	11	3	1	2	2	1	0	0
KAILALI	88	89	3	1	2	183	81	2	4	11	98	85	6	22	8	2	5	31
KANCHANPUR	34	39	0	0	3	76	35	2	1	0	38	38	0	24	14	2	0	13
<b>FAR-WEST</b>	<b>186</b>	<b>195</b>	<b>4</b>	<b>5</b>	<b>9</b>	<b>399</b>	<b>184</b>	<b>5</b>	<b>6</b>	<b>14</b>	<b>209</b>	<b>190</b>	<b>7</b>	<b>83</b>	<b>48</b>	<b>6</b>	<b>20</b>	<b>58</b>

Raw Data  
Leprosy (PB)  
Sheet 1 of 3

District	Patients at end previous year	New Patients	Relapse	Re-starter	Transferred In	Total	RFT	Transferred Out	Defaulter	Other Deduction	Total deduction	Patients at the End of this Fiscal Year	Total Child	Smear Tested	Positive	New Child	Disability Grade 2	Female among new
<b>National</b>	<b>699</b>	<b>1664</b>	<b>0</b>	<b>8</b>	<b>5</b>	<b>2376</b>	<b>1577</b>	<b>3</b>	<b>7</b>	<b>59</b>	<b>1646</b>	<b>730</b>	<b>69</b>	<b>330</b>	<b>21</b>	<b>127</b>	<b>5</b>	<b>614</b>
BHOJPUR	1	1				2	2				2	0						
DHANKUTA	0	0				0	0				0	0						
ILAM	3	2				5	4				4	1						0
JHAPA	32	94		1	0	127	79		1	3	83	44	1	29	0	8	0	24
KHOTANG	0	2			0	2	0				0	2	1			1	2	2
MORANG	63	124		1	0	188	125			3	128	60	4	92	1	20	2	58
OKHALDHUNGA	0					0					0	0						
PANCHTHAR	0	1				1	1				1	0						
SANKHUWASABHA	0	3				3	2				2	1		1				1
SAPTARI	12	39				51	34				34	17	2	0		4	0	19
SIRAHA	19	88				107	59			0	59	48	0	30	16	2		23
SOLUKHUMBU	0	0				0	0				0	0						
SUNSARI	32	61	0			93	71	0		2	73	20	4	50		5	0	36
TAPLEJUNG	1	0				1	1				1	0						0
TEHRATHUM	0	0				0	0				0	0						
UDAYAPUR	5	14				19	14				14	5		0		1	1	1
<b>EASTERN</b>	<b>168</b>	<b>429</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>599</b>	<b>392</b>	<b>0</b>	<b>1</b>	<b>8</b>	<b>401</b>	<b>198</b>	<b>12</b>	<b>202</b>	<b>17</b>	<b>41</b>	<b>5</b>	<b>164</b>
BARA	34	55	0		0	89	62		0	3	65	24	0	0		0	0	25
BHAKTAPUR	0	1				1	1				1	0		0				
CHITWAN	29	44	0	0	0	73	50			3	53	20	2			3	0	15
DHADING	0	2				2	1	1			2	0				0		
DHANUSHA	79	190		0		269	191		1	5	197	72	15	30	1	29	0	93
DOLKHA	1	0				1	1				1	0						0
KATHMANDU	0					0	0				0	0						
KAVRE	0	1				1	0				0	1		1				
LALITPUR	1	0				1	1				1	0		0	0			0
MAHOTTARI	37	130			0	167	114			1	115	52	0	28		8		38
MAKWANPUR	0	3				3	2				2	1						
NUWAKOT	0	0				0	0	0			0	0						
PARSA	23	74				97	56	0	0	2	58	39	2			10		35
RAMECHHAP	1	1				2	1				1	1						
RASUWA	0	0				0	0				0	0						
RAUTAHAT	53	107				160	108			6	114	46	6			6		33
SARLAHI	53	120			1	174	119			0	119	55	4	4	1	6		3
SINDHULI	3	5				8	6				6	2				0		2
SINDHUPALCHOWK	0	0				0	0				0	0						
Lalagadh	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
<b>CENTRAL</b>	<b>314</b>	<b>733</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1048</b>	<b>713</b>	<b>1</b>	<b>1</b>	<b>20</b>	<b>735</b>	<b>313</b>	<b>29</b>	<b>63</b>	<b>2</b>	<b>62</b>	<b>0</b>	<b>244</b>
ARGHAKHANCHI	0	0				0	0				0	0		0				0
BAGLUNG	1	0				1	1				1	0	0	0			0	0
GORKHA	3	1				4	4				4	0		1				0
GULMI	2	0				2	2				2	0						0
KAPILVASTU	20	44				64	46				46	18	0	0		1		25
KASKI	2	15				17	11	1		1	13	4	0	15		0	0	4
LAMJUNG	1	2				3	1				1	2		0			0	1
MANANG	0	0				0	0				0	0						
MUSTANG	0	0				0	0				0	0						
MYAGDI	0	0				0	0				0	0		0				0
NAWALPARASI	15	54			1	70	42			5	47	23	5	4	2	3	0	28
PALPA	1	6				7	4				4	3	0	3			0	3
PARBAT	0	3				3	3				3	0	0					
RUPANDEHI	46	68		0	1	115	82			9	91	24	0			0	0	22
SYANGJA	1	3				4	2				2	2		2				0
TANAHU	4	4				8	5				5	3		0				8
<b>WESTERN</b>	<b>96</b>	<b>200</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>298</b>	<b>203</b>	<b>1</b>	<b>0</b>	<b>15</b>	<b>219</b>	<b>79</b>	<b>5</b>	<b>25</b>	<b>2</b>	<b>4</b>	<b>0</b>	<b>91</b>
BANKE	29	72	0	0	0	101	62	0	0	4	66	35	8	0	0	5	0	25
BARDIYA	26	57	0	0	0	83	49	0	0	7	56	27	11	0	0	5	0	26
DAILEKH	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DANG	3	8	0	0	1	12	6	0	0	0	6	6	0	0	0	0	0	0
DOLPA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
HUMLA	0	1	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0
JAJARKOT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
JUMLA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
KALIKOT	1	1	0	0	0	2	2	0	0	0	2	0	0	0	0	0	0	0
MUGU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PYUTHAN	1	1	0	0	0	2	1	0	0	1	2	0	0	0	0	0	0	0
ROLPA	1	4	0	0	0	5	2	0	0	0	2	3	0	0	0	0	0	0
RUKUM	0	4	0	2	0	6	4	0	0	0	4	2	2	0	0	2	0	1
SALYAN	2	1	0	0	0	3	2	0	0	0	2	1	0	0	0	0	0	1
SURKHET	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>MID-WEST</b>	<b>63</b>	<b>149</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>215</b>	<b>128</b>	<b>0</b>	<b>0</b>	<b>12</b>	<b>140</b>	<b>75</b>	<b>21</b>	<b>0</b>	<b>0</b>	<b>12</b>	<b>0</b>	<b>53</b>
ACHHAM	2	0				2	2		0		2	0	0					0
BAITADI	0	1				1					0	1						
BAIHANG	0	0				0	0				0	0						0
BAJURA	1	2		0		3	2				2	1		0	0			2
DADELHURA	0	2				2					0	2		2				1
DARCHULA	1	2	0		0	3	1			0	1	2		0	0			0
DOTI	0	0				0	0		0		0	0	0	0	0	0	0	0
KAILALI	43	130		2	0	175	117	0	4	2	123	52	2	35	0	8	0	47
KANCHANPUR	11	16	0	2	1	30	19	1	1	2	23	7	0	3	0	0		12
<b>FAR-WEST</b>	<b>58</b>	<b>153</b>	<b>0</b>	<b>4</b>	<b>1</b>	<b>216</b>	<b>141</b>	<b>1</b>	<b>5</b>	<b>4</b>	<b>151</b>	<b>65</b>	<b>2</b>	<b>40</b>	<b>0</b>	<b>8</b>	<b>0</b>	<b>62</b>



**Raw Data**  
**Leprosy (MB+PB)**

Sheet 1 of 3

District	Patients at end previous year	New Patients	Relapse	Re-starter	Transferred In	Total	Released From Treatment (RFT)	Transferred Out	Defaulter	Other Deduction	Total deduction	Patients at the End of this Fiscal Year	Total child	Smear Tested	Positive	New Child	Disability Grade 2	Female among new
<b>National</b>	<b>2215</b>	<b>3481</b>	<b>25</b>	<b>37</b>	<b>37</b>	<b>5795</b>	<b>3190</b>	<b>19</b>	<b>24</b>	<b>1346</b>	<b>3365</b>	<b>2430</b>	<b>163</b>	<b>887</b>	<b>256</b>	<b>218</b>	<b>110</b>	<b>1100</b>
BHOJPUR	4	2	0	0	0	6	5	0	0	0	5	1	0	0	0	0	0	0
BHANKUTA	1	1	0	0	0	2	1	0	0	0	1	1	0	0	0	0	0	0
ILAM	8	3	0	0	0	11	8	0	0	0	8	3	0	0	0	0	0	0
JHAPA	151	199	0	3	2	355	207	1	1	13	222	133	8	61	9	15	3	43
KHOTANG	1	5	0	0	0	6	1	0	0	0	1	5	1	0	0	1	2	4
MORANG	172	227	4	1	0	404	243	0	0	8	251	153	11	185	32	28	15	87
OKHALDHUNGA	3	0	0	0	0	3	3	0	0	0	3	0	0	0	0	0	0	0
PANCHTHAR	5	6	0	1	0	12	6	0	0	0	6	6	0	0	0	0	0	0
SANKHUWASABHA	2	6	0	0	0	8	4	0	0	0	4	4	0	1	0	0	0	1
SAPTARI	49	91	0	1	2	143	86	0	0	0	86	57	2	19	8	6	2	37
SIRAHA	55	153	0	0	1	209	96	0	0	1	97	112	0	72	50	3	1	34
SOLUKHUMBU	0	1	0	0	1	2	0	0	0	0	0	2	0	0	0	0	0	0
SUNSARI	81	144	4	1	1	231	133	2	0	5	140	91	7	120	19	11	4	68
TAPLEJUNG	1	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	0
TEHRATHUM	4	0	0	0	0	4	4	0	0	0	4	0	0	0	0	0	0	0
UDAYAPUR	21	28	0	0	0	49	32	0	0	0	32	17	0	0	0	1	3	3
<b>EASTERN</b>	<b>558</b>	<b>866</b>	<b>8</b>	<b>7</b>	<b>7</b>	<b>1446</b>	<b>830</b>	<b>3</b>	<b>1</b>	<b>27</b>	<b>861</b>	<b>585</b>	<b>29</b>	<b>458</b>	<b>118</b>	<b>65</b>	<b>30</b>	<b>277</b>
BARA	130	127	1	1	0	259	152	1	0	6	159	100	0	0	0	4	12	45
BHAKTAPUR	2	7	0	0	1	10	3	0	0	0	3	7	1	2	0	0	1	3
CHITWAN	80	107	4	2	0	193	112	0	2	6	120	73	6	0	0	3	1	45
DHADING	6	7	0	1	0	14	8	1	0	0	9	5	0	0	0	0	0	0
DHANUSHA	138	300	0	1	0	439	270	0	2	11	283	156	25	68	26	40	13	123
DOLKHA	4	2	0	1	0	7	4	0	0	0	4	3	0	0	0	0	0	0
KATHMANDU	1	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	0
KAVRE	2	5	0	0	0	7	4	0	0	0	4	3	0	1	0	0	0	0
LALITPUR	12	1	0	0	0	13	8	0	0	0	8	5	0	1	1	0	0	1
MAHOTTARI	93	208	0	0	0	301	172	0	0	3	175	126	0	62	14	10	15	49
MAKWANPUR	9	17	0	0	0	26	10	0	0	0	10	16	0	0	0	0	0	0
NUWAKOT	2	2	0	0	0	4	1	0	0	0	1	3	0	0	0	0	0	0
PARSA	71	132	0	1	0	204	106	0	0	3	109	95	4	0	0	18	0	56
RAMECHHAP	4	2	0	0	0	6	3	0	0	0	3	3	0	0	0	0	0	0
RASUWA	1	1	0	0	1	3	1	0	0	0	1	2	0	1	0	0	1	0
RAUTAHAT	113	177	0	0	0	290	166	0	0	10	176	114	8	0	0	8	2	51
SARLAHI	114	187	0	0	1	302	166	0	1	0	167	135	19	13	7	11	1	6
SINDHULI	17	13	0	0	0	30	19	0	0	0	19	11	0	0	0	0	0	3
SINDHUPALCHOWK	2	0	0	0	0	2	1	0	0	0	1	1	0	0	0	0	0	0
Lalgadh	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CENTRAL</b>	<b>801</b>	<b>1295</b>	<b>5</b>	<b>7</b>	<b>3</b>	<b>2111</b>	<b>1207</b>	<b>2</b>	<b>5</b>	<b>1253</b>	<b>1253</b>	<b>858</b>	<b>63</b>	<b>148</b>	<b>48</b>	<b>94</b>	<b>35</b>	<b>382</b>
ARGHAKHANCHI	5	10	0	0	1	16	6	0	0	0	6	10	0	0	0	0	1	5
BAGLUNG	8	9	0	0	0	17	11	0	0	0	11	6	0	8	5	0	0	0
GORKHA	11	8	1	1	0	21	13	0	0	0	13	8	0	9	4	0	0	0
GULMI	6	5	0	0	0	11	5	0	0	0	5	6	0	0	0	0	0	0
KAPILVASTU	52	97	0	0	0	149	92	0	0	0	92	57	0	0	0	3	0	59
KASKI	23	46	0	0	2	71	42	2	0	3	47	24	0	46	5	0	4	16
LAMJUNG	10	4	1	1	0	16	5	0	1	0	6	10	0	0	0	0	0	2
MANANG	1	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	0
MUSTANG	2	0	0	0	0	2	2	0	0	0	2	0	0	0	0	0	0	0
MYAGDI	5	4	1	2	0	12	4	0	0	0	4	8	0	6	4	0	0	1
NAWALPARASI	49	120	0	1	1	171	86	0	0	7	93	78	7	13	5	4	0	48
PALPA	17	21	0	0	0	38	21	0	0	0	21	17	1	18	4	2	0	10
PARBAT	8	13	0	0	0	21	12	0	1	0	13	8	0	5	2	0	0	4
RUPANDEHI	124	170	0	3	5	302	161	2	1	14	178	124	0	14	2	7	2	48
SYANGJA	14	19	0	0	0	33	15	0	0	0	15	18	1	27	4	1	0	7
TANAHU	15	22	0	0	1	38	18	1	0	0	19	19	0	10	5	1	0	15
<b>WESTERN</b>	<b>350</b>	<b>548</b>	<b>3</b>	<b>8</b>	<b>10</b>	<b>919</b>	<b>494</b>	<b>5</b>	<b>3</b>	<b>24</b>	<b>526</b>	<b>393</b>	<b>9</b>	<b>156</b>	<b>40</b>	<b>18</b>	<b>7</b>	<b>215</b>
BANKE	69	143	2	0	3	230	106	2	1	10	119	111	22	0	0	13	5	44
BARDIYA	74	111	0	1	1	186	94	0	2	9	105	81	24	0	0	7	4	41
DAILEKH	8	15	0	0	0	23	7	0	1	0	8	15	0	0	0	0	5	0
DANG	33	41	0	0	1	69	32	0	0	0	32	37	2	0	0	0	0	1
DOLPA	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0
HUMLA	4	5	0	0	1	10	4	0	0	2	6	4	1	0	0	1	1	0
JAJARKOT	14	13	0	2	0	30	17	0	0	0	17	13	0	0	0	0	1	1
JUMLA	10	12	0	0	0	19	8	0	0	0	8	11	0	2	2	3	1	2
KALIKOT	10	6	0	0	0	10	9	0	0	0	9	1	0	0	0	0	0	0
MUGU	0	1	0	0	0	2	1	0	0	0	1	1	0	0	0	0	0	1
PYUTHAN	6	10	0	0	0	16	7	0	0	2	9	7	0	0	0	0	0	0
ROLPA	14	16	1	1	0	28	13	0	0	1	14	14	0	0	0	0	0	0
RUKUM	16	22	0	2	0	36	15	1	0	0	16	20	3	0	0	2	0	3
SALYAN	4	9	1	0	0	17	7	0	0	0	7	10	1	0	0	0	0	4
SURKHET	14	20	1	0	1	27	13	0	0	0	13	14	0	0	0	1	1	9
<b>MID-WEST</b>	<b>262</b>	<b>424</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>704</b>	<b>334</b>	<b>3</b>	<b>4</b>	<b>24</b>	<b>365</b>	<b>339</b>	<b>53</b>	<b>2</b>	<b>2</b>	<b>27</b>	<b>18</b>	<b>106</b>
ACHHAM	16	19	0	1	0	36	16	0	0	1	17	19	0	13	13	0	5	4
BAITADI	10	15	0	2	0	27	11	0	1	0	12	15	0	3	2	0	4	3
BAJHANG	8	11	0	0	1	20	9	0	0	0	9	11	0	2	2	1	4	2
BAJURA	8	5	0	1	0	14	8	0	0	1	9	5	0	2	2	0	0	5
DADELHURA	6	11	0	0	2	19	7	1	0	1	9	10	0	10	2	0	2	2
DARCHULA	9	10	1	0	1	21	11	0	0	0	11	10	0	7	3	0	0	1
DOTI	11	3	0	0	0	14	11	0	0	0	11	3	1	2	2	1	0	0
KAILALI	131	219	3	3	2	358	198	2	8	13	221	137	8	57	8	10	5	78
KANCHANPUR	45	55	0	2	4	106	54	3	2	2	61	45	0	27	14	2	0	25
<b>FAR-WEST</b>	<b>244</b>	<b>348</b>	<b>4</b>	<b>9</b>	<b>10</b>	<b>615</b>	<b>325</b>	<b>6</b>	<b>11</b>	<b>18</b>	<b>360</b>	<b>255</b>	<b>9</b>	<b>123</b>	<b>48</b>	<b>14</b>	<b>20</b>	<b>120</b>

### Analysed Data

#### Leprosy

District	New Case Detection Rate	Prevalence Rate	MB proportions among New	Child proportions among new	G II proportion among new	Defaulter proportions	Female proportion among new
<b>National</b>	<b>1.22</b>	<b>0.85</b>	<b>52.2</b>	<b>6.26</b>	<b>3.16</b>	<b>0.41</b>	<b>31.6</b>
BHOJPUR	0.08	0.04	50.00	0.00	0.00	0.00	0.00
DHANKUTA	0.05	0.05	100.00	0.00	0.00	0.00	0.00
ILAM	0.09	0.09	33.33	0.00	0.00	0.00	0.00
JHAPA	2.30	1.54	52.76	7.54	1.51	0.28	21.61
KHOTANG	0.18	0.18	60.00	20.00	40.00	0.00	80.00
MORANG	2.19	1.48	45.37	12.33	6.61	0.00	38.33
OKHALDHUNGA	0.00	0.00				0.00	
PANCHTHAR	0.25	0.25	83.33	0.00	0.00	0.00	0.00
SANKHUWASABHA	0.31	0.21	50.00	0.00	0.00	0.00	16.67
SAPTARI	1.30	0.82	57.14	6.59	2.20	0.00	40.66
SIRAHA	2.17	1.59	42.48	1.96	0.65	0.00	22.22
SOLUKHUMBU	0.08	0.16	100.00	0.00	0.00	0.00	0.00
SUNSARI	1.85	1.17	57.64	7.64	2.78	0.00	47.22
TAPLEJUNG	0.00	0.00				0.00	
TEHRATHUM	0.00	0.00				0.00	
UDAYAPUR	0.79	0.48	50.00	3.57	10.71	0.00	10.71
<b>EASTERN</b>	<b>1.32</b>	<b>0.89</b>	<b>50.46</b>	<b>7.51</b>	<b>3.46</b>	<b>0.07</b>	<b>32.0</b>
BARA	1.82	1.43	56.69	3.15	9.45	0.00	35.43
BHAKTAPUR	0.25	0.25				0.00	42.86
CHITWAN	1.83	1.25	58.88	2.80	0.93	1.04	42.06
DHADING	0.17	0.12	71.43	0.00	0.00	0.00	0.00
DHANUSHA	3.64	1.90	36.67	13.33	4.33	0.46	41.00
DOLKHA	0.08	0.12	100.00	0.00	0.00	0.00	0.00
KATHMANDU	0.00	0.00				0.00	
KAVRE	0.11	0.06	80.00	0.00	0.00	0.00	0.00
LALITPUR	0.02	0.12	100.00	0.00	0.00	0.00	100.00
MAHOTTARI	3.05	1.85	37.50	4.81	7.21	0.00	23.56
MAKWANPUR	0.35	0.33	82.35	0.00	0.00	0.00	0.00
NUWAKOT	0.06	0.09	100.00	0.00	0.00	0.00	0.00
PARSA	2.13	1.54	43.94	13.64	0.00	0.00	42.42
RAMECHHAP	0.08	0.12	50.00	0.00	0.00	0.00	0.00
RASUWA	0.19	0.37	100.00	0.00	100.00	0.00	0.00
RAUTAHAHAT	2.61	1.68	39.55	4.52	1.13	0.00	28.81
SARLAHI	2.37	1.71	35.83	5.88	0.53	0.33	3.21
SINDHULI	0.38	0.32	61.54	0.00	0.00	0.00	23.08
SINDHUPALCHOWK	0.00	0.03				0.00	
Lalgadh	0.00	0.00					
<b>CENTRAL</b>	<b>1.3</b>	<b>0.86</b>	<b>43.4</b>	<b>7.26</b>	<b>2.7</b>	<b>0.24</b>	<b>29.5</b>
ARGHAKHANCHI	0.40	0.40	100.00	0.00	10.00	0.00	50.00
BAGLUNG	0.28	0.19	100.00	0.00	0.00	0.00	0.00
GORKHA	0.23	0.23	87.50	0.00	0.00	0.00	0.00
GULMI	0.14	0.17	100.00	0.00		0.00	0.00
KAPILVASTU	1.62	0.95	54.64	3.09	0.00	0.00	60.82
KASKI	0.98	0.51	67.39	0.00	8.70	0.00	34.78
LAMJUNG	0.19	0.47	50.00	0.00	0.00	6.25	50.00
MANANG	0.00	0.00	0.00	0.00	0.00	0.00	
MUSTANG	0.00	0.00	0.00	0.00	0.00	0.00	
MYAGDI	0.29	0.58	100.00	0.00	0.00	0.00	25.00
NAWALPARASI	1.72	1.12	55.00	3.33	0.00	0.00	40.00
PALPA	0.65	0.53	71.43	9.52	0.00	0.00	47.62
PARBAT	0.69	0.42	76.92	0.00	0.00	4.76	30.77
RUPANDEHI	1.92	1.40	60.00	4.12	1.18	0.33	28.24
SYANGJA	0.50	0.48	84.21	5.26	0.00	0.00	36.84
TANAHU	0.58	0.50	81.82	4.55	0.00	0.00	68.18
<b>WESTERN</b>	<b>0.98</b>	<b>0.7</b>	<b>63.5</b>	<b>3.28</b>	<b>1.28</b>	<b>0.33</b>	<b>39.2</b>
BANKE	2.96	2.30	49.65	9.09	3.50	0.43	30.77
BARDIYA	2.33	1.70	48.65	6.31	3.60	1.08	36.94
DAILEKH	0.55	0.55	100.00	0.00	33.33	4.35	0.00
DANG	0.72	0.65	80.49	0.00	0.00	0.00	2.44
DOLPA	0.00	0.00				0.00	
HUMLA	1.01	0.81	80.00	20.00	20.00	0.00	0.00
JAJARKOT	0.79	0.79	100.00	0.00	7.69	0.00	7.69
JUMLA	1.11	1.01	100.00	25.00	8.33	0.00	16.67
KALIKOT	0.46	0.08	83.33	0.00	0.00	0.00	0.00
MUGU	0.19	0.19	100.00	0.00	0.00	0.00	100.00
PYUTHAN	0.39	0.27	90.00	0.00	0.00	0.00	0.00
ROLPA	0.63	0.55	75.00	0.00	0.00	0.00	0.00
RUKUM	0.96	0.87	81.82	9.09	0.00	0.00	13.64
SALYAN	0.35	0.38	88.89	0.00	0.00	0.00	44.44
SURKHET	0.57	0.40	100.00	5.00	5.00	0.00	45.00
<b>MID-WEST</b>	<b>1.14</b>	<b>0.92</b>	<b>64.86</b>	<b>6.37</b>	<b>4.25</b>	<b>0.57</b>	<b>25.0</b>
ACHHAM	0.68	0.68	100.00	0.00	26.32	0.00	21.05
BAITADI	0.53	0.53	93.33	0.00	26.67	3.70	20.00
BAJHANG	0.54	0.54	100.00	9.09	36.36	0.00	18.18
BAJURA	0.38	0.38	60.00	0.00	0.00	0.00	100.00
DADELHURA	0.72	0.65	81.82	0.00	18.18	0.00	18.18
DARCHULA	0.67	0.67	80.00	0.00	0.00	0.00	10.00
DOTI	0.12	0.12	100.00	33.33	0.00	0.00	0.00
KAILALI	2.79	1.75	40.64	4.57	2.28	2.23	35.62
KANCHANPUR	1.14	0.94	70.91	3.64	0.00	1.89	45.45
<b>FAR-WEST</b>	<b>1.28</b>	<b>0.94</b>	<b>56.03</b>	<b>4.02</b>	<b>5.75</b>	<b>1.79</b>	<b>34.5</b>

## Raw Data

## Morbidity

Sheet 1 of 11

District Code	District Name	Received Reports	Total	Communicable, Immunizable										
				Measles	Diphtheria	Whooping Cough	Neonatal Tetanus	Tetanus	Tuberculosis	Acute Flaccid Paralysis (AFP)	Rubella	Mumps	Chicken pox	Hepatitis B
	Mountain	192	1847212	416	1	91	0	5	624	15	32	3466	1405	143
	Hill	468	10030584	2271	121	811	29	258	8434	165	531	18879	7584	1213
	Terai	240	9792776	675	16	693	3	96	10437	397	238	13529	4725	265
	<b>National Total</b>	<b>900</b>	<b>21670572</b>	<b>3362</b>	<b>138</b>	<b>1595</b>	<b>32</b>	<b>359</b>	<b>19495</b>	<b>577</b>	<b>801</b>	<b>35874</b>	<b>13714</b>	<b>1621</b>
1	Taplejung	12	138975	32	0	2	0	0	28	8	9	463	218	56
2	Panchthar	12	200193	10	0	11	1	0	24	0	0	492	113	8
3	Ilam	12	152714	41	0	0	0	2	51	0	17	677	162	2
4	Jhapa	12	478182	32	0	3	0	0	1207	138	20	1546	626	18
5	Morang	12	560441	96	0	4	0	2	849	89	36	1205	706	134
6	Sunsari	12	497584	12	0	10	0	0	202	3	2	940	156	0
7	Dhankuta	12	146980	20	0	0	0	1	52	0	4	347	165	0
8	Teharthur	12	105979	19	1	8	0	0	30	18	0	297	364	5
9	Sankhuwasabha	12	163462	48	1	3	0	2	59	0	11	640	235	2
10	Bhojpur	12	201678	237	6	0	0	3	32	0	3	1086	144	0
11	Solukhumbu	12	165769	0	0	0	0	0	27	0	0	335	116	4
12	Okhaldhunga	12	225815	24	0	7	2	1	145	23	10	603	141	1
13	Khotang	12	231150	52	0	12	0	0	17	0	30	784	319	3
14	Udaypur	12	242414	21	0	23	0	2	218	0	1	847	296	3
15	Saptari	12	509917	0	2	20	0	3	100	2	3	451	1	0
16	Siraha	12	498772	8	0	0	0	24	225	3	1	485	2	1
	<b>Eastern</b>	<b>192</b>	<b>4520025</b>	<b>652</b>	<b>10</b>	<b>103</b>	<b>3</b>	<b>40</b>	<b>3266</b>	<b>284</b>	<b>147</b>	<b>11198</b>	<b>3764</b>	<b>237</b>
17	Dhanusha	12	574461	22	1	1	1	0	314	30	0	141	46	0
18	Mahottari	12	438584	76	0	11	0	15	593	4	0	363	150	2
19	Sarlahi	12	644503	115	0	111	0	11	614	14	89	532	174	0
20	Sindhuli	12	149836	310	0	17	0	9	207	24	8	444	45	3
21	Ramechhap	12	218816	69	15	26	0	7	42	0	0	884	99	0
22	Dolkha	12	198514	40	0	22	0	1	141	4	0	446	84	9
23	Sindhupalchowk	12	264764	188	0	18	0	1	40	0	6	729	325	17
24	Kavre	12	387669	153	1	4	0	0	116	1	49	563	171	1
25	Lalitpur	12	424468	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	174462	150	1	88	0	0	196	1	4	171	196	5
27	Kathmandu	12	702232	264	46	162	2	90	2598	43	43	427	506	917
28	Nuwakot	12	160011	90	3	144	1	6	63	6	5	382	121	10
29	Rasuwa	12	51938	1	0	0	0	0	3	0	1	60	71	0
30	Dhading	12	338504	58	1	49	0	2	233	3	70	1225	254	17
31	Makawanpur	12	216649	71	0	1	0	1	263	6	3	770	315	7
32	Rautahat	12	499443	26	1	5	0	10	281	4	13	384	97	17
33	Bara	12	523862	68	0	221	0	7	615	9	11	1162	141	22
34	Parsa	12	350366	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	466639	28	0	144	0	7	791	7	3	486	469	30
	<b>Central</b>	<b>228</b>	<b>6785721</b>	<b>1729</b>	<b>69</b>	<b>1024</b>	<b>4</b>	<b>167</b>	<b>7110</b>	<b>156</b>	<b>305</b>	<b>9169</b>	<b>3264</b>	<b>1057</b>
36	Gorkha	12	283079	37	0	0	0	0	361	0	0	789	454	0
37	Lamjung	12	201740	10	0	5	0	0	20	4	7	321	155	4
38	Tanahu	12	206658	27	0	23	0	5	250	5	16	426	243	1
39	Syangja	12	287844	101	0	0	0	4	248	0	23	801	272	33
40	Kaski	12	486697	38	0	79	0	2	253	7	14	324	299	64
41	Manang	12	12832	0	0	3	0	0	1	0	1	1	0	0
42	Mustang	12	33704	0	0	0	0	0	0	1	0	44	25	1
43	Myagdi	12	126681	8	0	4	0	1	71	0	7	408	188	17
44	Parbat	12	195186	23	0	5	0	0	73	1	12	287	129	1
45	Baglung	12	261033	1	0	0	3	4	40	0	44	486	87	5
46	Gulmi	12	390807	8	0	1	0	0	51	1	16	432	159	5
47	Palpa	12	411884	53	0	2	0	39	1240	6	11	365	276	58
48	Nawalparasi	12	431487	15	0	2	2	2	1129	5	14	671	208	9
49	Rupandehi	12	913247	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	470449	50	0	110	0	0	426	63	0	975	199	0
51	Arghakhanchi	12	180806	4	0	0	0	0	47	0	3	519	121	3
	<b>Western</b>	<b>192</b>	<b>4894134</b>	<b>375</b>	<b>0</b>	<b>234</b>	<b>5</b>	<b>57</b>	<b>4210</b>	<b>93</b>	<b>168</b>	<b>6849</b>	<b>2815</b>	<b>201</b>
52	Pyuthan	12	244409	3	0	0	0	0	270	1	0	446	67	1
53	Rolpa	12	171642	36	7	10	6	66	120	1	3	424	129	6
54	Rukum	12	197653	0	0	0	0	0	128	0	50	187	163	5
55	Salyan	12	239562	73	0	0	0	1	69	1	1	199	164	1
56	Dang	12	377485	26	0	0	0	0	1025	2	0	1147	303	0
57	Banke	12	399509	8	8	4	0	4	224	3	12	355	152	19
58	Bardiya	12	411252	12	0	2	0	2	519	6	10	1331	231	0
59	Surkhet	12	392589	28	0	2	2	0	379	0	0	598	328	9
60	Daiilekh	12	289510	0	0	0	0	3	49	2	14	1081	158	0
61	Jajarkot	12	156802	59	38	49	11	1	15	3	0	172	114	8
62	Dolpa	12	34557	0	0	0	0	0	0	0	0	0	0	0
63	Jumla	12	85329	1	0	1	0	0	1	0	0	20	45	0
64	Kailikot	12	89403	89	0	4	0	0	3	1	3	116	79	2
65	Mugu	12	46735	10	0	0	0	0	0	0	0	9	3	0
66	Humla	12	90193	0	0	11	0	0	0	0	0	236	13	2
	<b>Mid Western</b>	<b>180</b>	<b>3226630</b>	<b>345</b>	<b>53</b>	<b>83</b>	<b>19</b>	<b>77</b>	<b>2802</b>	<b>20</b>	<b>93</b>	<b>6321</b>	<b>1949</b>	<b>53</b>
67	Bajura	12	158517	0	0	23	0	0	43	0	0	146	40	1
68	Bajhang	12	159559	2	0	4	0	1	90	0	1	138	134	49
69	Achham	12	346943	11	0	16	1	0	62	6	0	187	314	8
70	Doti	12	225856	5	1	19	0	2	68	0	27	51	85	0
71	Kailali	12	466209	69	3	43	0	6	510	12	24	795	438	6
72	Kanchanpur	12	280384	12	1	2	0	3	813	3	0	560	626	7
73	Dadeldhura	12	206079	9	0	43	0	0	192	0	3	194	133	1
74	Baitadi	12	247554	148	1	1	0	6	141	2	33	183	135	1
75	Darchula	12	152961	5	0	0	0	0	188	1	0	83	17	0
	<b>Far Western</b>	<b>108</b>	<b>2244062</b>	<b>261</b>	<b>6</b>	<b>151</b>	<b>1</b>	<b>18</b>	<b>2107</b>	<b>24</b>	<b>88</b>	<b>2337</b>	<b>1922</b>	<b>73</b>

Raw Data  
Morbidity  
Sheet 2 of 11

District Code	District Name	Received Reports	Communicable, Vector Borne							Communicable, Water/Food Borne							
			Acute Encephalitis like syndrome (AES)	Filariasis	Clinical Malaria	Malaria (PF)	Malaria (PV)	Dangue Fever	Kala-azar	Typhoid (Enteric Fever)	Acute gastro enteritis	Ameobic Dysentery	Bacillary Dysentery	Presumed non infectious diarrhoea	Cholera	Intestinal Worms	Jaundice and Infective Hepatitis
Mountain		192	102	8	378	9	11	0	5	41761	26699	62840	30365	57821	327	99545	4027
Hill		468	387	147	10048	129	460	7	94	253164	145573	267713	183675	290910	811	297588	24436
Terai		240	109	889	70446	606	1575	6	487	203214	140213	282180	125239	292603	606	393815	16118
National Total		900	598	1044	80872	744	2046	13	586	498139	312485	612733	339279	641334	1744	790948	44581
1 Taplejung		12	13	4	33	0	0	0	0	3221	2415	3412	1414	2664	117	10658	916
2 Panchthar		12	0	0	94	8	0	0	0	1895	490	2990	72079	3893	0	6409	391
3 Ilam		12	6	0	102	3	7	0	0	2007	1387	2272	644	3424	10	6762	398
4 Jhapa		12	0	26	2676	77	124	0	21	14678	8287	12458	5932	7293	232	24981	1978
5 Morang		12	36	8	4289	38	65	0	1	13635	10937	11119	6274	13085	2	18227	1786
6 Sunsari		12	0	0	1801	1	6	0	0	4492	4172	14914	5455	20654	0	28408	398
7 Dhankuta		12	0	2	69	0	0	0	0	2762	838	4251	736	4492	0	7348	447
8 Teharthur		12	3	1	66	1	7	0	0	1819	964	2984	1033	2037	2	5742	355
9 Sankhuwasabha		12	10	4	52	0	0	0	0	4742	1556	3028	1064	6360	90	9654	328
10 Bhojpur		12	0	0	148	0	12	0	0	4898	2537	6129	2948	6545	0	8096	538
11 Solukhumbu		12	0	0	0	0	0	0	0	1934	3214	3892	2251	3491	0	10162	345
12 Okhaldhunga		12	7	31	12	1	2	0	3	4071	2589	4545	2200	7985	0	10939	93
13 Khotang		12	1	4	41	0	0	0	29	3699	7651	8594	5028	3187	0	21198	534
14 Udaypur		12	32	35	523	13	42	0	38	6280	4569	7637	3217	8535	0	14783	417
15 Saptari		12	0	0	2026	14	1	0	0	7734	13565	18525	6953	33603	0	35726	367
16 Siraha		12	0	10	2125	7	114	0	42	14369	8633	13024	10099	20011	35	25259	485
Eastern		192	108	125	14057	163	380	0	134	92236	73804	119774	127327	147259	488	244352	9776
17 Dhanusha		12	0	1	12863	8	25	0	5	19257	7817	16229	7542	22765	28	41443	693
18 Mahottari		12	0	44	5501	2	10	0	1	13792	7776	15202	7152	14873	0	31481	622
19 Sarlahi		12	0	119	4048	65	133	6	381	17355	13366	28020	10466	20928	0	36744	1108
20 Sindhuli		12	1	6	969	2	18	0	0	7900	3179	5111	1943	4344	10	7817	251
21 Ramechhap		12	8	3	10	0	0	0	0	4372	1942	4010	1856	8141	0	5751	646
22 Dolkha		12	0	0	1	2	0	0	0	3709	1587	4466	2151	9200	0	9075	387
23 Sindhupalchowk		12	0	0	122	0	6	0	0	7819	3466	7927	2915	9037	0	6857	524
24 Kavre		12	0	4	126	0	4	0	0	9872	2615	10074	3267	15034	0	5223	674
25 Lalitpur		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26 Bhaktapur		12	62	11	2	0	9	0	5	2999	4119	3664	1046	3436	48	2476	596
27 Kathmandu		12	20	3	47	22	32	7	12	11572	19159	10878	5226	11910	94	10391	4006
28 Nuwakot		12	1	10	23	1	11	0	0	5896	3256	4509	1984	5101	86	3802	425
29 Rasuwa		12	0	0	0	0	0	0	0	1064	940	1375	651	1832	0	1734	216
30 Dhading		12	0	10	157	0	0	0	0	12149	3378	10670	4114	12258	14	7515	996
31 Makawanpur		12	1	8	566	3	1	0	1	3423	2475	4612	2385	12879	0	4858	364
32 Rautahat		12	15	34	5288	4	2	0	28	10533	6487	27276	8794	15865	0	25968	357
33 Bara		12	3	47	2332	3	0	0	2	10080	7826	20657	7670	19981	151	25617	834
34 Parsa		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35 Chitwan		12	0	0	353	12	21	0	0	2360	4985	6594	1951	6028	0	10541	711
Central		228	111	300	32408	124	272	13	435	144152	94373	181274	71113	193612	431	237293	13410
36 Gorkha		12	0	0	98	0	7	0	0	6693	5739	8341	2805	6647	0	8208	807
37 Lamjung		12	0	0	9	0	1	0	0	3158	1750	5017	1709	7024	26	5521	374
38 Tanahu		12	0	4	32	1	1	0	0	5655	1451	3949	1596	5510	0	6056	498
39 Syangja		12	0	2	60	6	6	0	0	11376	3225	6536	2091	3079	5	5738	771
40 Kaski		12	3	0	60	13	7	0	1	10878	8945	7484	2548	8636	46	6676	2547
41 Manang		12	0	0	0	0	0	0	0	119	329	527	102	236	0	572	5
42 Mustang		12	0	0	0	0	0	0	0	108	696	551	240	690	0	1023	13
43 Myagdi		12	1	0	1	0	0	0	0	1850	1006	3078	1541	4591	0	4211	241
44 Parbat		12	1	0	12	1	4	0	0	5351	1814	4736	1165	3689	0	4506	342
45 Baglung		12	0	0	0	0	0	0	0	12832	3919	7195	3447	6442	0	7829	1016
46 Gulmi		12	0	0	119	13	3	0	0	8788	5360	10412	2953	5729	0	13699	1422
47 Palpa		12	55	3	118	0	17	0	1	10365	2620	8420	2626	9164	30	6629	481
48 Nawalparasi		12	7	11	2896	17	30	0	6	8295	7143	9338	4492	21543	3	12422	723
49 Rupandehi		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50 Kapilvastu		12	0	567	3740	1	1	0	0	11877	12018	26416	13106	15338	95	17363	568
51 Arghakhanchi		12	0	0	109	0	0	0	0	5910	2360	6217	3076	7054	97	6573	602
Western		192	67	587	7254	52	77	0	8	103255	58375	108217	43497	105372	302	107026	10410
52 Pyuthan		12	0	0	40	21	1	0	0	8194	2863	7283	2985	12558	0	5037	835
53 Rolpa		12	9	0	45	0	0	0	0	6620	3586	6299	2601	4426	0	4659	284
54 Rukum		12	0	2	0	2	4	0	0	8910	4278	7662	4365	8100	0	7035	352
55 Salyan		12	0	0	179	0	0	0	0	9908	4423	11245	5550	6355	0	5925	514
56 Dang		12	9	1	5403	0	15	0	0	12806	6784	11411	4803	10313	0	11668	1412
57 Banke		12	2	4	4438	12	63	0	0	8412	7111	15269	6294	13359	11	12323	423
58 Bardiya		12	0	9	6408	17	98	0	0	12936	5360	14274	8487	12035	49	15659	1108
59 Surkhet		12	6	0	5687	0	47	0	1	13868	9605	12084	5797	7937	0	14573	567
60 Dailekh		12	0	0	28	0	23	0	0	14426	3915	7496	5042	22080	0	9274	248
61 Jajarkot		12	0	0	0	0	0	0	0	4790	4729	6221	3622	5406	0	8437	183
62 Dolpa		12	0	0	0	0	0	0	0	714	602	1619	790	881	0	3706	119
63 Jumla		12	0	0	12	0	0	0	0	936	1677	2744	1571	2888	4	7178	124
64 Kalikot		12	79	0	6	0	0	0	5	1231	1525	4438	2331	2753	3	5945	153
65 Mugu		12	0	0	0	0	0	0	0	514	891	2640	1454	512	0	5068	75
66 Humla		12	0	0	3	0	0	0	0	1396	1822	3727	3041	2074	48	6580	169
Mid Western		180	105	16	22249	52	251	0	6	105661	59171	114412	58733	111677	115	123067	6566
67 Bajura		12	0	0	87	5	0	0	0	4729	2893	7642	4058	6202	0	7466	215
68 Bajhang		12	0	0	55	1	5	0	0	6792	1841	8003	3397	5836	65	8663	339
69 Achham		12	147	1	46	9	84	0	2	5772	4384	16552	6956	19924	3	14587	272
70 Doti		12	0	0	157	1	0	0	0	3333	2945	11136	4565	11044	36	11829	273
71 Kailali		12	37	8	4201	298	766	0	0	11438	5501	11372	4711	15251	0	13020	1881
72 Kanchanpur		12	0	0	58	30	101	0	0	9165	2445	10082	5058	9678	0	6965	664
73 Dadeldhura		12	22	7	151	3	62	0	1	4514	2464	6304	3293	6089	218	4825	411
74 Baitadi		12	1	0	142	5	48	0	0	4359	3044	11116	3636	6225	86	6651	265
75 Darchula		12	0	0	7	1	0	0	0	2733	1245	6849	2935	3165	0	5204	99
Far Western		108	207	16	4904	353	1066	0	3	52835	26762	89056	38609	83414	408	79210	4419

Raw Data  
Morbidity  
Sheet 3 of 11

District Code	District Name	Received Reports	Other Communicable					Other Infectious Disease								
			STD/STI	HIV/AIDS	Leprosy	Confirmed Meningitis	ARI/Lower respiratory tract infection	Upper respiratory tract infection	Pneumonia	Sever Pneumonia	Bronchitis	Asthama	Urinary Tract Infections (UTI)	Viral Influenza	Reproductive Tract Infection (RTI) male	Reproductive Tract Infection (RTI) female
	Mountain	192	3088	256	127	101	101181	102883	40132	2228	24372	35639	28253	16186	882	1385
	Hill	468	18800	1657	338	863	502947	520504	196743	10391	129329	179888	137772	106979	4006	6321
	Terai	240	19482	238	1415	439	425894	400923	159615	7695	141874	155526	115862	78520	6521	6117
	National Total	900	41370	2151	1880	1403	1030022	1024310	396490	20314	295575	371053	281887	201685	11409	13823
1	Taplejung	12	184	0	1	39	6045	6299	3861	137	1090	1654	1656	1063	203	72
2	Panchthar	12	106	0	2	1	7998	7111	4341	170	1238	1616	1140	501	8	48
3	Ilam	12	106	0	3	36	8558	7147	4416	202	1591	1722	1549	3064	73	140
4	Jhapa	12	2895	41	176	7	23150	25124	12792	506	9101	6995	10440	13190	481	705
5	Morang	12	959	21	77	203	30757	29791	11237	401	9816	6144	14939	3714	253	420
6	Sunsari	12	208	1	32	0	35009	29285	14377	277	3348	5924	4813	2436	80	87
7	Dhankuta	12	165	0	0	1	7248	6885	4526	47	2745	1699	1621	1639	10	37
8	Tehrathum	12	145	2	1	1	4965	6383	2448	82	2286	1339	1342	1347	275	48
9	Sankhuwasabha	12	81	2	2	2	7834	6356	4407	80	610	1952	1962	231	44	74
10	Bhojpur	12	133	0	2	3	10567	7375	5788	150	2807	3794	2544	2073	720	327
11	Solukhumbu	12	14	0	0	26	8258	10338	3406	134	2678	3028	2674	385	77	155
12	Okhaldhunga	12	28	0	12	1	14844	15016	5558	111	2593	3093	2463	1381	44	245
13	Khotang	12	182	1	0	8	9992	8973	6586	410	2964	3587	2950	895	31	137
14	Udaypur	12	782	22	42	2	9442	7820	5018	370	3125	2750	2968	1448	159	241
15	Saptari	12	974	0	27	0	27031	18836	8262	201	10523	8446	5889	5941	93	183
16	Siraha	12	309	0	53	26	29700	26019	9754	307	9873	8192	5483	3071	82	120
	Eastern	192	7271	90	430	356	241398	218758	106777	3585	66388	61935	64433	42379	2633	3039
17	Dhanusha	12	562	1	302	2	34361	23597	9952	412	10998	11120	4826	5214	172	243
18	Mahottari	12	1856	20	55	0	24232	20923	7755	267	10040	10275	6401	2892	133	398
19	Sarlahi	12	795	59	79	3	25794	27289	9478	1146	14920	17354	6767	3044	152	245
20	Sindhuli	12	160	36	14	15	5337	5715	4333	124	1837	2745	1740	565	49	64
21	Ramechhap	12	96	5	1	4	11612	9907	4738	157	3657	3312	3368	2851	34	17
22	Dolkha	12	547	2	3	0	14389	10760	2820	47	2195	3364	2836	2728	35	72
23	Sindhupalchowk	12	421	0	0	4	17480	15158	5713	280	4000	5340	3975	4547	167	458
24	Kavre	12	1077	1	4	1	24689	24126	7274	165	4679	8210	3646	3734	56	136
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	160	10	2	3	8602	10375	2918	114	1526	2926	2482	2428	116	168
27	Kathmandu	12	2543	243	14	92	24204	27793	8461	1024	8782	22632	12393	7596	613	1287
28	Nuwakot	12	299	59	16	5	7186	7700	3163	193	1998	5227	2200	2995	36	66
29	Rasuwa	12	114	0	2	0	3187	3184	626	19	437	652	605	1408	7	16
30	Dhading	12	1030	3	15	13	19845	15510	9200	476	4117	6672	3747	11096	113	334
31	Makawanpur	12	816	27	7	24	7445	8910	4384	209	3335	3820	2163	3434	27	43
32	Rautahat	12	1098	13	97	51	14881	14900	7799	551	9558	10727	4100	2577	3173	455
33	Bara	12	1052	1	43	2	17585	18578	5659	434	9296	11093	4324	2399	110	385
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	1043	28	50	18	19379	17932	7631	252	4690	8769	6652	9222	591	766
	Central	228	13669	508	704	237	280208	262357	101904	5870	96065	134238	72225	68530	5584	5153
36	Gorkha	12	215	17	12	3	13009	18242	6990	143	3276	3955	4977	6982	31	71
37	Lamjung	12	129	4	1	0	7362	7474	3833	110	3057	4187	2503	3800	13	20
38	Tanahu	12	350	8	5	4	9974	9433	2620	104	2300	3567	2750	4904	119	134
39	Syangja	12	378	12	9	4	20789	15997	3757	146	5600	6819	4801	2745	73	209
40	Kaski	12	994	71	20	238	24904	26305	6368	395	5998	7170	7264	8468	270	664
41	Manang	12	17	0	0	0	714	720	122	13	149	111	105	27	0	4
42	Mustang	12	70	0	0	0	2084	2987	207	5	113	178	370	127	1	0
43	Myagdi	12	42	3	5	2	7096	12130	1619	73	1027	1306	1605	2115	24	55
44	Parbat	12	33	5	11	0	16325	17431	4280	70	3247	3244	2014	904	29	62
45	Baglung	12	459	7	3	1	18684	24838	6268	310	4945	3173	3693	1723	89	80
46	Gulmi	12	669	1	2	4	20472	16265	6637	401	7736	5112	5231	5533	148	250
47	Palpa	12	179	160	35	303	15780	13594	5827	112	6353	6551	7327	3756	32	45
48	Nawalparasi	12	49	9	88	4	25645	23094	9094	217	5413	7743	5808	2901	69	83
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	1173	0	46	0	15078	20314	8179	756	9042	9195	5636	2756	320	613
51	Argakhanchi	12	659	0	4	1	10214	7240	5084	492	3922	3912	2996	1802	89	93
	Western	192	5416	297	241	564	208130	216064	70885	3347	62178	66223	57080	48543	1307	2383
52	Pyuthan	12	214	0	4	10	11395	13782	5884	510	4798	4782	3136	119	10	32
53	Rolpa	12	535	33	17	0	9300	9238	4784	136	2018	2699	3500	339	37	49
54	Rukum	12	446	11	10	0	9195	11995	6014	680	2176	2738	3774	668	74	80
55	Salyan	12	509	4	3	0	12772	12597	5339	367	3408	6192	4245	470	58	256
56	Dang	12	1400	0	13	0	13679	18167	8105	376	5305	7515	4777	2509	252	292
57	Banke	12	1260	9	53	14	23023	24723	7481	294	3896	6075	4162	3243	46	38
58	Bardiya	12	1849	3	82	6	19160	23523	7333	257	7195	6688	7198	2902	219	633
59	Surkhet	12	1458	0	4	2	20957	24851	6929	298	4580	6556	6692	4368	119	170
60	Dallekh	12	720	12	4	3	23157	17598	6334	329	3322	5982	3955	1850	24	46
61	Jajarkot	12	209	13	8	14	6273	10794	3113	426	2132	3240	2891	1129	121	283
62	Dolpa	12	75	0	0	0	1570	1535	784	21	178	501	562	40	75	108
63	Jumla	12	163	0	0	0	5946	7945	2825	151	1241	1886	1273	103	10	16
64	Kalikot	12	297	5	12	0	4040	3990	1534	268	1854	2777	1818	353	27	51
65	Mugu	12	51	0	0	0	1953	2660	1537	160	1056	1417	1086	52	22	32
66	Humla	12	411	239	98	17	2570	3881	1669	233	1624	2132	1495	331	99	137
	Mid Western	180	9597	329	308	66	164990	187279	69665	4506	44783	61180	50564	18476	1193	2223
67	Bajura	12	288	3	1	0	6323	6391	4110	195	1609	3434	2170	1465	10	28
68	Bajhang	12	193	3	5	13	8838									

## Raw Data

## Morbidity

Sheet 4 of 11

District Code	District Name	Received Reports	Nutritional and Metabolic Disorder								
			Malnutrition	Vitamins and other nutri deficiency	Polyneuritis	Anaemia	Goitre, Cretinism	Diabetic mellitis	Obesity	Dehydration	Night blindness
	Mountain	192	2918	8840	3904	6561	225	1053	240	8220	1305
	Hill	468	8342	59810	30046	35744	4037	34418	2119	31349	3777
	Terai	240	17337	95301	26785	64648	1003	19056	2177	42502	13434
	National Total	900	28597	163951	60735	106953	5265	54527	4536	82071	18516
1	Taplejung	12	134	604	228	425	46	99	69	376	25
2	Panchthar	12	66	858	248	601	0	28	2	515	12
3	Ilam	12	165	973	324	755	12	286	7	466	46
4	Jhapa	12	590	2377	2000	2501	66	926	36	2255	279
5	Morang	12	988	6060	2412	2517	59	5717	50	1903	496
6	Sunsari	12	469	9009	1129	2350	3	144	47	2909	193
7	Dhankuta	12	23	1401	252	148	9	28	5	395	4
8	Teharthur	12	29	536	308	238	10	88	1	247	31
9	Sankhuwasabha	12	47	817	64	279	1	192	2	257	13
10	Bhojpur	12	68	1545	250	784	27	89	22	737	42
11	Solukhumbu	12	89	516	272	950	0	173	20	878	93
12	Okhaldhunga	12	413	930	57	445	17	221	12	600	28
13	Khotang	12	250	1278	345	820	14	10	29	1474	255
14	Udaypur	12	169	1384	859	780	6	201	3	702	93
15	Saptari	12	712	5461	838	4818	12	72	18	4284	1095
16	Siraha	12	581	8345	1509	3754	6	156	207	4535	1088
	Eastern	192	4793	42094	11095	22165	288	8430	530	22533	3793
17	Dhanusha	12	1305	7778	1125	5356	71	212	43	1398	821
18	Mahottari	12	590	3977	721	3725	63	291	23	2096	1679
19	Sarlahi	12	2127	8621	1168	6877	119	1153	290	4527	2349
20	Sindhuli	12	258	1042	266	754	18	15	15	1147	154
21	Ramechhap	12	106	1321	811	527	5	205	10	348	87
22	Dolkha	12	89	597	259	376	18	386	0	293	95
23	Sindhupalchowk	12	171	1035	1302	831	27	108	41	985	44
24	Kavre	12	106	2888	1041	1763	14	707	16	1357	92
25	Lalitpur	12	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	64	1141	131	238	3	850	75	117	5
27	Kathmandu	12	542	3440	707	2640	356	15841	554	2267	316
28	Nuwakot	12	134	971	296	671	2	102	32	544	121
29	Rasuwa	12	3	709	16	109	1	5	2	216	11
30	Dhading	12	268	2305	1362	2024	16	374	24	1218	136
31	Makawanpur	12	99	803	452	888	11	242	83	365	106
32	Rautahat	12	2044	5528	929	5570	50	242	174	4251	1554
33	Bara	12	1022	8373	1677	5081	54	345	86	3799	1255
34	Parsa	12	0	0	0	0	0	0	0	0	0
35	Chitwan	12	282	2983	1076	2566	272	7210	477	513	191
	Central	228	9210	53512	13339	39996	1100	28288	1945	25441	9016
36	Gorkha	12	94	1073	1553	1051	63	603	83	521	17
37	Lamjung	12	50	2340	675	958	7	642	5	519	8
38	Tanahu	12	39	772	311	632	174	688	114	220	109
39	Syangja	12	225	4288	1122	1340	17	459	26	260	270
40	Kaski	12	580	4478	856	1671	1966	7193	588	804	64
41	Manang	12	4	75	7	35	0	31	0	27	2
42	Mustang	12	13	193	19	31	1	27	0	180	1
43	Myagdi	12	117	489	242	166	12	73	11	194	29
44	Parbat	12	43	2079	831	917	23	107	3	157	40
45	Baglung	12	229	1668	1502	1386	77	246	90	641	128
46	Gulmi	12	311	2042	2484	1441	128	284	81	381	14
47	Palpa	12	311	3050	695	1076	480	3175	25	1449	50
48	Nawalparasi	12	436	4925	1107	2108	25	623	33	773	147
49	Rupandehi	12	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	2218	5599	2145	5078	0	218	298	1821	1144
51	Arghakhanchi	12	117	1162	1178	797	84	217	14	758	166
	Western	192	4787	34233	14727	18687	3057	14586	1371	8705	2189
52	Pyuthan	12	160	1165	531	316	4	237	0	69	5
53	Rolpa	12	97	423	357	501	25	5	16	892	27
54	Rukum	12	313	967	1287	848	145	25	7	735	52
55	Salyan	12	160	1208	1413	940	13	141	26	835	239
56	Dang	12	843	1699	1582	1496	1	526	169	1849	194
57	Banke	12	494	3446	1024	2324	51	166	79	1581	488
58	Bardiya	12	724	4355	4021	2346	66	220	8	1286	300
59	Surkhet	12	210	2409	3150	1144	74	34	15	1898	265
60	Dailekh	12	174	1380	890	626	6	46	10	2367	56
61	Jajarkot	12	739	932	852	1090	18	5	17	1098	244
62	Dolpa	12	24	120	97	171	0	0	16	639	17
63	Jumla	12	183	394	67	50	0	0	2	244	169
64	Kalikot	12	333	660	216	766	32	2	6	510	153
65	Mugu	12	363	481	84	202	2	0	0	293	81
66	Humla	12	494	336	60	472	44	3	24	693	108
	Mid Western	180	5311	19975	15631	13292	481	1411	395	14989	2398
67	Bajura	12	553	1132	373	747	34	0	2	1139	98
68	Bajhang	12	326	507	582	619	16	12	36	1253	262
69	Achham	12	973	1912	804	1449	42	211	7	1794	135
70	Doti	12	282	1253	494	1310	31	121	19	1367	105
71	Kailali	12	717	3906	1859	4010	85	711	101	1694	108
72	Kanchanpur	12	1195	2859	463	2171	0	124	38	1028	53
73	Dadeldhura	12	125	1144	587	662	43	523	33	603	50
74	Baitadi	12	233	760	523	1347	85	96	39	1288	176
75	Darchula	12	92	664	258	498	3	14	20	237	133
	Far Western	108	4496	14137	5943	12813	339	1812	295	10403	1120

Raw Data  
Morbidity  
Sheet 5 of 11

District Code	District Name	Received Reports	Skin Diseases							Ear, Nose and Throat Infection and Oral Health related					
			Impetigo/ Boils/ Furunculosis	Abscess	Eczema/ Dermatitis	Fungal Infection	Scabies	Leukoderma	Psoriasis	Lymphadenitis	Acute/ Chronic Suppurative Otitis Media (ASOM)	Sinusitis	Tonsillitis	Pharyngitis/ Sore throat	Foreign body in respiratory tract
	Mountain	192	43597	32601	31713	30512	35972	1140	773	2427	32289	14485	45875	21082	1009
	Hill	468	270486	167521	172777	183206	154051	10775	5552	17798	173721	85515	251979	109335	5069
	Terai	240	484116	230895	183860	232973	271429	6831	4212	13661	237808	52119	107444	60202	2948
	National Total	900	798199	431017	392850	446691	461452	18746	10537	33886	443818	152119	405298	190619	9026
1	Taplejung	12	4793	3339	1733	3181	2720	76	175	356	2928	1227	8484	2550	101
2	Panchthar	12	5748	2399	3992	2798	1976	54	51	321	2051	1004	10377	3317	48
3	Ilam	12	4998	2493	2703	3487	2035	84	111	324	2415	1106	9327	3552	59
4	Jhapa	12	18114	9390	11214	16597	8606	259	331	1968	9321	6601	15057	10046	115
5	Morang	12	28120	11206	10030	15716	8557	112	150	1785	14565	4287	11869	7350	166
6	Sunsari	12	28695	8994	10298	12577	12325	26	39	446	15732	1821	7595	2779	48
7	Dhankuta	12	5612	3265	4131	3166	2030	33	8	478	2568	1182	11931	3556	28
8	Teharthur	12	4392	2045	3175	2287	1924	40	37	393	2174	1318	7126	2996	43
9	Sankhuwasabha	12	4705	1855	3361	2523	2608	29	5	356	2895	807	5547	2596	33
10	Bhojpur	12	7314	5320	5294	3848	4567	128	54	816	4000	1190	13187	6088	275
11	Solukhumbu	12	5526	3173	3986	3242	4372	39	23	115	2705	1782	6314	3705	132
12	Okhaldhunga	12	7004	3631	3425	4075	2877	65	122	367	3477	1584	8200	4208	120
13	Khotang	12	5928	5133	4977	5024	5663	139	26	517	4070	1809	11254	3112	223
14	Udaypur	12	9567	6291	4480	5339	5249	53	161	631	5647	1633	10445	4985	138
15	Saptari	12	30825	18201	8305	9668	21061	231	119	386	17980	2042	4610	3098	197
16	Siraha	12	34934	16625	8726	12753	20787	264	208	610	14983	2211	4673	2453	141
	Eastern	192	206275	103360	89830	106281	107357	1632	1620	9869	107511	31604	145996	66391	1867
17	Dhanusha	12	28476	22783	11788	17414	20674	1155	489	572	18311	2088	4727	2510	296
18	Mahottari	12	25788	16463	6017	8857	13275	256	144	407	13447	2569	3765	1697	223
19	Sarlahi	12	40709	21567	9604	14385	25764	401	228	951	15422	3345	5571	3400	257
20	Sindhuli	12	7336	4436	2826	3116	3737	114	39	297	3017	1156	3562	1766	34
21	Ramechhap	12	7398	3654	3642	4385	1972	199	61	336	4123	1487	7161	3808	144
22	Dolkha	12	5877	2888	3268	2373	2188	217	193	196	3236	1683	5861	2613	89
23	Sindhupalchowk	12	6236	6432	4563	4482	3053	110	40	480	4325	3125	7313	4293	217
24	Kavre	12	11299	5825	6160	6473	3092	77	69	302	6894	2130	11895	4387	29
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	4183	2225	2663	2760	1296	69	75	218	3109	1672	5254	3416	148
27	Kathmandu	12	11609	8473	11542	11528	5974	1143	913	705	8641	8231	17955	7802	350
28	Nuwakot	12	4984	3555	3270	3542	2188	91	152	359	3268	1387	3989	1569	166
29	Rasuwa	12	1481	920	1352	835	631	18	14	47	952	292	1643	379	8
30	Dhading	12	13131	7779	6326	6936	3755	1064	232	854	6193	2266	7853	2920	104
31	Makawanpur	12	9039	5131	4612	4784	2939	102	112	355	4202	1342	4762	1700	62
32	Rautahat	12	31338	16461	6871	10981	22365	311	169	524	14519	1299	3433	1370	235
33	Bara	12	46535	17021	13799	17303	28259	491	85	988	16265	1776	4351	1379	132
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	18597	9516	11186	12910	6301	410	1165	510	13608	7300	10854	6973	277
	Central	228	274016	155129	109489	133064	147463	6228	4180	8101	139532	43148	109949	51982	2771
36	Gorkha	12	7850	5209	5628	4787	3373	391	67	587	5157	3260	8125	3353	56
37	Lamjung	12	5895	4557	4254	5166	3442	89	80	352	3203	1670	4832	1233	33
38	Tanahu	12	5475	3854	4348	4916	4664	150	114	306	3754	2271	4258	1566	150
39	Syangja	12	10379	5170	5910	5638	5135	266	248	409	4957	6370	8486	3048	78
40	Kaski	12	5055	6426	7233	8661	2930	3193	698	1042	11302	9077	14258	8340	578
41	Manang	12	143	145	327	292	155	3	1	11	141	195	388	140	34
42	Mustang	12	307	292	646	405	306	2	0	6	554	351	1553	357	4
43	Myagdi	12	3272	2262	2563	2397	2118	59	72	168	2463	1323	3998	1014	40
44	Parbat	12	4118	3391	3631	3344	2603	33	65	402	3469	3577	6852	2612	33
45	Baglung	12	5541	2941	6126	4489	4349	198	136	463	4244	3104	7990	3262	312
46	Gulmi	12	11855	6585	5783	6199	5633	322	130	1124	4752	4332	8437	3564	188
47	Palpa	12	10247	6447	6583	6410	5302	469	408	764	5856	3747	6744	3037	310
48	Nawalparasi	12	21296	10632	13555	12084	10478	157	54	398	10804	4499	5606	2561	76
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	21754	12150	10975	17353	26295	870	367	935	9274	3760	5543	2897	540
51	Arghakhanchi	12	5556	2902	4050	4481	5545	178	118	622	3843	2301	3857	2026	191
	Western	192	118743	72963	81612	86622	82328	6380	2558	7589	73773	49837	90927	39010	2623
52	Pyuthan	12	12961	4322	3635	4858	4685	12	159	624	5225	1792	3195	1871	58
53	Rolpa	12	4730	2900	3861	3113	3919	114	35	521	3830	1024	2256	1854	29
54	Rukum	12	3830	3561	4348	4353	4413	751	170	866	3869	1146	2604	1450	140
55	Salyan	12	8180	4190	5503	6929	6955	136	36	142	5612	1969	2526	2288	140
56	Dang	12	17407	8789	9888	11301	8501	273	148	930	9620	2713	4453	2795	10
57	Banke	12	29596	11488	9473	12573	12547	544	136	275	14562	904	3134	1597	34
58	Bardiya	12	28346	8799	11144	12633	10016	498	307	1266	9897	2296	5484	3654	57
59	Surkhet	12	14475	6418	8026	9359	8904	99	342	407	8272	2387	5305	2361	79
60	Dailekh	12	7651	6565	5091	4658	8007	85	75	276	5304	978	2814	933	67
61	Jajarkot	12	2779	2767	3386	3809	2797	122	52	293	3560	1247	1963	1237	106
62	Dolpa	12	232	369	244	471	790	11	0	4	366	309	445	211	26
63	Jumla	12	1399	1238	1515	929	2373	49	36	15	1717	407	622	181	30
64	Kailikot	12	2490	1887	1378	1263	4513	81	145	164	1337	712	914	568	102
65	Mugu	12	771	971	681	1069	1314	27	31	73	650	593	767	272	49
66	Humla	12	1580	1966	805	1366	2155	58	5	166	1728	976	1208	1084	57
	Mid Western	180	136427	66230	68978	78684	81889	2860	1677	6022	75549	19453	37690	22356	984
67	Bajura	12	2506	2431	2637	2394	2800	20	17	52	3102	457	1032	595	26
68	Bajhang	12	2656	2459	2473	2454	2522	366	82	236	2710	831	1152	537	53
69	Achham	12	6317	5445	4058	4981	6312	207	88	120	5509	664	1932	1454	



Raw Data  
Morbidity  
Sheet 6 of 11

District Code	District Name	Received Reports	Oral Health				Eye Problem			
			Dental Carries/ Toothache	Periodontal diseases (gum diseases)	Other disorder of teeth	Oral ulcer, mucosa and other related diseases	Conjunctivitis	Trachoma	Cataract	Blindness
Mountain		192	46223	5991	4180	12770	47339	818	410	967
Hill		468	214916	39393	41158	60351	213009	3271	6040	6898
Terali		240	159894	31976	19908	51207	162868	3301	27073	10551
National Total		900	421033	77360	65246	124328	423216	7390	33523	18416
1	Taplejung	12	2968	511	550	881	4480	69	13	12
2	Panchthar	12	2302	513	91	604	4684	44	2	24
3	Ilam	12	2965	569	376	1435	4085	8	7	28
4	Jhapa	12	10371	4050	1798	3181	9920	1534	7972	7005
5	Morang	12	9208	1499	965	4284	10630	101	17470	639
6	Sunsari	12	9279	2012	1061	4396	9369	62	20	81
7	Dhankuta	12	2467	604	336	940	4421	48	11	8
8	Teharthur	12	2548	390	175	776	3514	14	9	49
9	Sankhuwasabha	12	3081	413	341	1165	3886	27	24	45
10	Bhojpur	12	4014	645	272	1434	4916	44	15	31
11	Solukhumbu	12	3831	493	409	704	4557	106	70	217
12	Okhaldhunga	12	4608	667	384	932	5640	40	27	77
13	Khotang	12	5371	1025	429	1067	6269	131	33	73
14	Udaypur	12	4050	993	411	1509	6093	121	15	33
15	Saptari	12	10144	1754	1598	2572	8775	114	37	238
16	Siraha	12	10541	1458	1116	2080	9987	30	85	118
Eastern		192	87748	17596	10312	27960	101226	2493	25810	8678
17	Dhanusha	12	14974	2213	1477	2682	10835	295	53	162
18	Mahottari	12	9828	1584	1199	1610	7210	86	144	307
19	Sarlahi	12	12573	2144	1680	2280	10102	188	161	444
20	Sindhuli	12	3127	602	313	1120	3134	66	42	22
21	Ramechhap	12	6611	816	275	1169	8423	330	148	410
22	Dolkha	12	5088	864	532	1549	5717	89	15	29
23	Sindhupalchowk	12	5383	1043	745	4805	6664	112	108	118
24	Kavre	12	9264	1823	2358	3965	16374	53	225	1698
25	Lalitpur	12	0	0	0	0	0	0	0	0
26	Bhaktapur	12	7660	3343	3243	1889	3593	123	13	48
27	Kathmandu	12	23299	8260	10539	10714	9658	250	430	1106
28	Nuwakot	12	3306	659	250	1328	4982	53	117	169
29	Rasuwa	12	1000	114	153	411	2049	12	10	37
30	Dhading	12	6651	1335	461	2795	9557	33	150	118
31	Makawanpur	12	3280	805	310	2301	5952	131	824	287
32	Rautahat	12	9243	1270	1084	1036	7333	110	93	159
33	Bara	12	11199	1433	996	2164	11690	161	379	192
34	Parsa	12	0	0	0	0	0	0	0	0
35	Chitwan	12	10573	3892	2539	3958	6839	56	66	344
Central		228	143059	32200	28154	45776	130112	2148	2978	5650
36	Gorkha	12	6958	931	466	1906	7219	40	133	79
37	Lamjung	12	4449	812	355	1237	5205	71	212	306
38	Tanahu	12	5320	381	416	680	3565	158	76	101
39	Syangja	12	8393	1026	553	1720	5285	51	68	161
40	Kaski	12	10047	2314	11533	1734	7646	218	1612	110
41	Manang	12	371	23	5	47	544	0	0	1
42	Mustang	12	779	34	12	216	691	0	2	0
43	Myagdi	12	2955	430	215	760	3272	245	61	1037
44	Parbat	12	4089	433	135	691	4446	203	114	107
45	Baglung	12	5842	649	340	1428	4760	58	11	29
46	Gulmi	12	5820	801	474	1004	5422	54	44	31
47	Palpa	12	8108	1985	2226	1254	9029	43	1279	109
48	Nawalparasi	12	5381	899	330	1830	10490	19	55	73
49	Rupandehi	12	0	0	0	0	0	0	0	0
50	Kapilvastu	12	8846	1913	1274	2785	11082	341	68	161
51	Arghakhanchi	12	3625	554	266	836	3365	38	43	33
Western		192	80983	13185	18600	18128	82021	1539	3778	2338
52	Pyuthan	12	4070	357	125	836	5693	11	10	5
53	Rolpa	12	3115	298	109	1256	4341	8	30	28
54	Rukum	12	4994	728	490	893	3588	98	18	10
55	Salyan	12	5780	898	460	1092	4831	25	7	114
56	Dang	12	6865	1636	976	2222	7077	31	37	189
57	Banke	12	7131	1572	402	5836	11877	67	123	79
58	Bardiya	12	5200	1310	492	3762	6427	32	174	245
59	Surkhet	12	6875	847	348	2020	7439	16	79	29
60	Dailekh	12	5338	456	434	1573	4277	13	19	28
61	Jajarkot	12	4246	697	308	797	3093	52	60	138
62	Dolpa	12	725	114	84	82	811	6	2	7
63	Jumla	12	2629	272	115	336	2109	94	8	56
64	Kalikot	12	1756	257	167	459	1236	78	25	81
65	Mugu	12	1674	175	107	126	1087	14	28	31
66	Humla	12	2213	385	319	429	2468	3	13	61
Mid Western		180	62611	10002	4936	21719	66354	548	633	1101
67	Bajura	12	3364	311	187	535	3406	63	16	46
68	Bajhang	12	4692	435	167	515	3089	64	35	186
69	Achham	12	4868	242	205	976	6410	241	24	74
70	Doti	12	5272	350	635	676	5178	44	20	89
71	Kailali	12	4589	833	685	2533	8494	66	115	66
72	Kanchanpur	12	3949	504	236	1996	4731	8	21	49
73	Dadeldhura	12	4592	609	401	1129	2564	77	15	75
74	Baitadi	12	8637	546	441	1875	5086	18	37	24
75	Darchula	12	6669	547	287	510	4545	81	41	40
Far Western		108	46632	4377	3244	10745	43503	662	324	649



Raw Data  
Morbidity  
Sheet 7 of 11

District Code	District Name	Received Reports	Obstetrics Complications													
			Haemorrhage:Antepartum	Haemorrhage: Post-partum	Ectopic pregnancy	Pregnancy included Hypertension (PHI)	Hyperemesis Gravidarum	Antepartum Eclampsia	Postpartum Eclampsia	Prolonged Labour	Obstructed Labour	Ruptured Uterus	Postpartum Sepsis	Retained Placenta	Other Complications/Condition	Abortion Complications
Mountain		192	162	301	23	71	170	15	10	75	94	1	73	259	1422	347
Hill		468	566	989	332	1198	2509	202	143	906	698	111	333	1140	9597	2830
Terai		240	565	842	136	514	1249	187	146	506	3171	60	173	502	8525	1480
<b>National Total</b>		<b>900</b>	<b>1293</b>	<b>2132</b>	<b>491</b>	<b>1783</b>	<b>3928</b>	<b>404</b>	<b>299</b>	<b>1487</b>	<b>3963</b>	<b>172</b>	<b>579</b>	<b>1901</b>	<b>19544</b>	<b>4657</b>
1 Taplejung		12	1	28	0	15	57	1	0	15	6	0	3	27	18	23
2 Panchthar		12	12	23	0	1	1	1	0	22	2	0	1	27	30	24
3 Ilam		12	8	13	6	16	31	5	6	41	6	0	7	23	21	33
4 Jhapa		12	24	23	0	6	16	0	10	14	3	0	6	26	16	17
5 Morang		12	17	76	35	93	107	3	14	29	47	1	2	22	151	60
6 Sunsari		12	1	17	3	1	0	0	0	24	6	0	1	19	70	11
7 Dhankuta		12	0	3	2	6	35	0	0	5	4	0	2	10	22	7
8 Teharthur		12	3	2	2	2	32	1	0	14	46	7	32	22	11	12
9 Sankhuwasabha		12	6	21	0	10	7	0	0	3	52	0	3	13	345	11
10 Bhojpur		12	9	4	0	4	5	0	0	7	3	4	3	12	236	44
11 Solukhumbu		12	5	6	0	5	2	0	0	12	8	0	9	28	71	10
12 Okhaldhunga		12	5	16	0	1	1	0	0	21	4	0	1	55	9	11
13 Khotang		12	11	19	2	0	8	0	0	16	7	0	20	53	13	45
14 Udaypur		12	33	27	0	52	104	6	2	44	3	0	3	53	31	59
15 Saptari		12	40	40	0	62	15	5	10	26	4	4	12	5	76	52
16 Siraha		12	23	30	5	38	95	9	2	6	1	1	2	9	58	74
<b>Eastern</b>		<b>192</b>	<b>198</b>	<b>348</b>	<b>55</b>	<b>312</b>	<b>516</b>	<b>31</b>	<b>44</b>	<b>299</b>	<b>202</b>	<b>17</b>	<b>107</b>	<b>404</b>	<b>1178</b>	<b>493</b>
17 Dhanusha		12	16	9	1	2	24	16	3	0	1	0	0	0	22	11
18 Mahottari		12	102	134	10	47	21	15	18	99	25	0	5	29	74	104
19 Sarlahi		12	33	58	1	11	11	11	8	19	10	0	1	13	44	52
20 Sindhuli		12	10	10	3	5	0	0	0	11	2	3	2	39	4	7
21 Ramechhap		12	14	19	0	5	1	0	2	5	1	0	2	3	7	20
22 Dolkha		12	7	8	3	5	6	2	0	3	14	0	4	30	69	52
23 Sindhupalchowk		12	7	14	5	13	83	3	2	7	3	1	10	25	834	48
24 Kavre		12	14	57	0	1	3	3	2	72	7	0	7	30	23	39
25 Lalitpur		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26 Bhaktapur		12	1	0	4	15	2	0	0	0	0	1	1	0	29	6
27 Kathmandu		12	39	99	166	547	1393	78	31	106	57	37	63	88	1489	498
28 Nuwakot		12	19	13	0	28	34	1	0	5	2	0	0	36	73	22
29 Rasuwa		12	0	1	0	0	0	1	1	1	0	0	2	1	0	3
30 Dhading		12	15	34	0	10	45	2	1	77	19	0	13	54	546	77
31 Makawanpur		12	6	6	8	1	0	27	10	1	5	1	7	44	148	31
32 Rautahat		12	30	33	5	30	4	16	19	24	2876	2	18	38	93	90
33 Bara		12	69	69	20	23	46	27	40	63	12	29	3	63	57	86
34 Parsa		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35 Chitwan		12	55	82	44	60	542	8	2	79	114	8	62	37	152	240
<b>Central</b>		<b>228</b>	<b>437</b>	<b>646</b>	<b>270</b>	<b>803</b>	<b>2215</b>	<b>210</b>	<b>139</b>	<b>572</b>	<b>3148</b>	<b>82</b>	<b>200</b>	<b>530</b>	<b>3664</b>	<b>1386</b>
36 Gorkha		12	3	5	0	0	3	0	2	26	2	0	3	15	5	13
37 Lamjung		12	0	1	0	1	0	0	0	1	0	0	0	2	0	9
38 Tanahu		12	3	9	4	7	8	1	7	6	0	0	4	20	19	27
39 Syangja		12	3	5	0	185	131	1	0	3	4	0	2	39	156	165
40 Kaski		12	27	33	40	193	235	10	24	12	27	36	8	22	5388	178
41 Manang		12	0	0	0	0	0	0	0	0	0	0	0	0	1	1
42 Mustang		12	0	1	0	0	0	0	0	0	0	0	1	0	1	6
43 Myagdi		12	7	6	0	1	5	1	1	28	2	2	5	15	0	20
44 Parbat		12	3	8	3	5	5	0	0	2	0	0	4	17	7	27
45 Baglung		12	44	40	5	32	26	13	8	30	10	8	7	56	23	22
46 Gulmi		12	2	4	6	4	63	5	5	14	3	0	3	11	5	20
47 Palpa		12	27	41	27	35	16	20	20	95	364	1	23	70	154	195
48 Nawalparasi		12	14	26	0	35	51	1	5	11	2	0	11	22	28	54
49 Rupandehi		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50 Kapilvastu		12	56	41	6	56	224	67	6	24	3	0	1	15	5	20
51 Arghakhanchi		12	1	7	1	5	7	5	5	33	23	0	1	29	209	71
<b>Western</b>		<b>192</b>	<b>190</b>	<b>227</b>	<b>92</b>	<b>559</b>	<b>774</b>	<b>124</b>	<b>83</b>	<b>285</b>	<b>440</b>	<b>47</b>	<b>73</b>	<b>333</b>	<b>6001</b>	<b>828</b>
52 Pyuthan		12	11	15	0	1	0	0	0	18	0	0	5	20	7	9
53 Rolpa		12	13	9	1	0	1	1	2	9	7	1	3	9	4	25
54 Rukum		12	5	25	0	4	256	2	1	22	8	0	7	45	128	189
55 Salyan		12	15	30	4	4	3	0	2	10	5	0	6	16	12	21
56 Dang		12	4	53	0	1	15	3	1	33	23	2	2	120	31	202
57 Banke		12	3	15	4	5	4	0	2	16	6	2	2	9	29	25
58 Bardiya		12	23	32	0	17	31	3	3	30	33	0	9	32	40	127
59 Surkhet		12	54	99	25	14	6	5	0	9	10	0	4	20	37	108
60 Dailekh		12	34	63	5	0	9	3	1	14	8	1	3	19	38	64
61 Jajarkot		12	36	64	0	0	1	4	6	23	5	1	16	61	18	79
62 Dolpa		12	36	22	2	0	0	1	0	2	0	0	0	6	6	4
63 Jumla		12	7	23	2	2	0	0	1	0	1	0	1	7	11	1
64 Kalikot		12	22	34	0	4	0	0	2	11	2	0	1	29	8	28
65 Mugu		12	0	4	0	0	0	0	0	5	0	0	0	10	5	6
66 Humla		12	13	30	0	1	0	1	0	3	2	0	2	29	1	7
<b>Mid Western</b>		<b>180</b>	<b>276</b>	<b>518</b>	<b>43</b>	<b>53</b>	<b>326</b>	<b>23</b>	<b>21</b>	<b>205</b>	<b>110</b>	<b>7</b>	<b>61</b>	<b>432</b>	<b>375</b>	<b>895</b>
67 Bajura		12	5	24	0	1	1	0	1	1	0	0	5	4	2	21
68 Bajhang		12	50	76	11	14	14	6	3	9	6	0	26	39	46	108
69 Achham		12	14	63	10	3	0	0	1	13	13	0	15	26	128	122
70 Doti		12	26	50	0	1	2	1	0	3	4	2	17	13	303	192
71 Kailali		12	54	87	1	22	42	3	3	8	4	11	31	31	4643	196
72 Kanchanpur		12	1	17	1	5	1	0	0	1	1	0	5	12	2936	59
73 Dadeldhura		12	12	38	5	9	30	6	3	63	25	0	13	18	102	148
74 Baitadi		12	27	29	3	0	7	0	1	25	10	6	20	48	162	191
75 Darchula		12	3	9	0	1	0	0	0	3	0	0	6	11	4	18
<b>Far Western</b>		<b>108</b>	<b>192</b>	<b>393</b>	<b>31</b>	<b>56</b>	<b>97</b>	<b>16</b>	<b>12</b>	<b>126</b>	<b>63</b>	<b>19</b>	<b>138</b>	<b>202</b>	<b>8326</b>	<b>1055</b>

Raw Data  
Morbidity  
Sheet 8 of 11

District Code	District Name	Received Reports	Gyne Problems							Mental Health related problems						
			Prolapsed uterus	Pelvic Inflammatory Disease (PID)	Leukorrhoea (Vaginal discharge syndrom)	Menstrual disorder	Difunctional uterine bleeding	Breast lumps / Abscess	Mastitis (Ingorged breast)	Dipression	Psychosis	Anxiety (Neurosis)	Mental retardation	Conversive disorder (Hysteria)	Alcoholism	Epileasy
	Mountain	192	1738	9061	3983	4550	2616	1239	737	681	171	1100	88	412	659	569
	Hill	468	13083	56914	36294	28315	15978	9556	4255	17371	5642	24461	1466	2981	8179	7497
	Teral	240	5482	27738	38753	22655	11492	6148	2464	9200	1500	6745	2335	3072	3717	2950
	National Total	900	20303	93713	79030	55520	30086	16943	7456	27252	7313	32306	3889	6465	12555	11016
1	Taplejung	12	58	292	205	249	165	84	70	33	3	197	5	72	137	16
2	Panchthar	12	102	502	111	282	246	136	32	29	6	27	1	2	43	13
3	Ilam	12	61	402	391	501	238	124	68	190	76	295	26	30	104	46
4	Jhapa	12	286	2116	2026	1750	696	521	229	695	63	714	15	48	301	23
5	Morang	12	616	1775	2435	3393	1009	738	326	2159	113	1598	1360	1543	1129	1495
6	Sunsari	12	162	459	1384	914	372	173	72	21	3	16	0	0	6	12
7	Dhankuta	12	172	365	212	290	248	97	54	58	1	57	5	11	94	8
8	Teharthurm	12	97	366	276	242	206	63	27	51	8	53	1	11	21	10
9	Sankhuwasabha	12	73	1019	288	533	237	151	82	78	18	56	19	25	59	20
10	Bhojpur	12	88	311	352	662	277	217	67	37	7	63	0	3	21	84
11	Solukhumbu	12	100	295	297	524	139	102	150	84	22	38	3	11	37	369
12	Okhaldhunga	12	97	583	154	396	194	164	31	889	383	557	1	1	46	455
13	Khotang	12	176	586	494	603	245	299	114	160	16	122	4	47	15	15
14	Udayapur	12	287	1299	2411	1061	457	402	127	160	2	163	0	41	133	27
15	Saptari	12	549	619	1918	936	297	393	143	185	10	129	4	6	32	6
16	Siraha	12	180	589	1279	741	519	290	111	167	34	95	17	34	94	30
	Eastern	192	3104	11578	14233	13077	5545	3954	1703	4996	765	4180	1461	1885	2272	2629
17	Dhanusha	12	147	621	1341	867	539	279	55	77	45	44	15	1	47	2
18	Mahottari	12	275	1032	1862	1337	485	320	87	239	44	231	19	57	100	7
19	Sarlahi	12	116	776	1860	1238	412	332	65	402	153	231	86	419	378	156
20	Sindhuli	12	27	404	364	324	183	116	41	13	1	67	7	3	49	12
21	Ramechhap	12	429	1433	424	1416	455	227	137	226	60	246	44	17	44	30
22	Dolkha	12	412	1275	282	1135	239	128	85	64	64	81	39	79	122	79
23	Sindhupalchowk	12	624	1298	714	683	471	225	109	103	9	287	6	136	123	21
24	Kavre	12	1458	2052	849	1568	653	431	141	199	25	235	2	10	460	59
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	103	834	662	581	183	147	67	105	14	64	11	108	80	14
27	Kathmandu	12	1549	4523	3459	4423	1904	715	730	3157	959	5348	87	782	4068	1641
28	Nuwakot	12	205	996	548	368	274	158	72	131	14	98	9	37	140	36
29	Rasuwa	12	18	276	96	167	93	44	21	2	0	19	0	1	17	2
30	Dhading	12	508	2149	1569	1152	904	463	227	262	32	335	33	105	61	147
31	Makawanpur	12	155	1055	997	560	447	306	96	279	173	329	33	56	193	567
32	Rautahat	12	421	1224	2110	1114	309	243	92	148	12	91	8	17	82	82
33	Bara	12	255	962	1641	857	287	264	221	172	18	164	34	25	233	137
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	924	2433	1131	956	736	624	110	2961	702	1734	555	483	607	248
	Central	228	7626	23343	19909	18746	8574	5022	2356	8540	2325	9604	988	2336	6804	3240
36	Gorkha	12	537	3045	1712	960	609	435	287	2843	30	544	6	45	33	359
37	Lamjung	12	66	1094	883	346	202	145	83	296	21	447	2	37	64	199
38	Tanaha	12	315	1805	1124	723	338	230	47	206	18	149	13	56	97	18
39	Syangja	12	352	1839	1586	708	200	248	130	298	38	547	31	150	98	89
40	Kaski	12	1097	3621	3040	2148	1053	1281	76	2564	2730	4471	302	569	1052	1680
41	Manang	12	1	15	34	16	2	1	4	1	1	4	0	0	0	0
42	Mustang	12	1	118	17	27	28	4	10	8	0	14	6	2	5	6
43	Myagdi	12	83	502	375	747	190	169	95	76	20	174	10	13	31	20
44	Parbat	12	112	1013	483	190	187	81	62	50	9	296	11	10	51	10
45	Baglung	12	199	1701	959	575	293	174	178	302	130	594	101	45	102	86
46	Gulmi	12	392	1574	1031	540	287	191	110	735	110	863	53	81	60	85
47	Palpa	12	825	3742	1470	1322	783	411	263	2127	382	4838	504	375	444	1207
48	Nawalparasi	12	134	1753	3752	1332	707	311	95	137	46	270	10	72	53	58
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	299	1923	3487	1978	612	251	162	312	15	219	14	29	51	15
51	Arghakhanchi	12	220	1272	804	331	263	170	151	267	66	382	7	32	56	20
	Western	192	4633	25017	20757	11943	5754	4102	1753	10222	3616	13812	1070	1516	2197	3852
52	Pyuthan	12	290	1962	613	194	299	332	66	41	0	456	1	5	54	60
53	Rolpa	12	178	1288	519	411	366	216	115	47	13	179	5	10	66	8
54	Rukum	12	370	1401	812	702	364	174	88	185	57	224	61	16	58	47
55	Salyan	12	289	1564	1302	462	338	103	46	134	51	440	3	26	59	27
56	Dang	12	241	2171	2014	902	614	398	252	345	25	497	14	34	243	108
57	Banke	12	66	952	1565	466	497	195	42	66	10	82	8	9	30	10
58	Bardiya	12	188	2176	3667	1546	1011	347	191	155	44	193	27	46	26	155
59	Surkhet	12	393	3086	1791	761	604	250	44	156	19	107	2	31	27	87
60	Dailekh	12	192	1566	786	446	770	206	69	66	19	192	1	31	33	35
61	Jajarkot	12	359	1477	674	414	318	123	98	47	12	149	9	29	41	9
62	Dolpa	12	8	269	130	36	4	18	16	18	0	19	0	27	97	0
63	Jumla	12	2	653	201	29	20	21	7	3	0	19	2	0	11	0
64	Kalikot	12	105	650	196	167	174	109	19	26	2	55	0	21	7	8
65	Mugu	12	42	387	137	84	36	12	10	6	1	0	0	0	1	5
66	Humla	12	45	602	299	236	113	88	44	46	3	11	0	3	19	16
	Mid Western	180	2768	20204	14706	6856	5528	2592	1107	1341	256	2623	133	288	772	575
67	Bajura	12	45	504	277	193	358	83	23	35	0	20	0	0	1	1
68	Bajhang	12	151	688	561	272	307	128	72	167	45	246	7	34	20	26
69	Achham	12	171	1048	642	540	540	157	81	381	36	311	5	39	9	108
70	Doti	12	208	966	425	236	212	112	44	89	22	128	7	15	58	19
71	Kailali	12	300	3241	2419	1462	1483	358	118	897	150	379	142	209	280	392
72	Kanchanpur															

Raw Data  
Morbidity  
Sheet 9 of 11

District Code	District Name	Received Reports	Malignancy				Cardiovascular related problems						
			Breast Cancer	Cervical Cancer	Lung Cancer	Other Cancer	Hypertension	Cardiac failure (COF)	COPD (Corpomoniae)	Acute rheumatic fever	Rheumatic heart disease	Ischemic heart disease	Other cardiovascular problems
Mountain		192	22	2	69	33	12439	780	20334	1943	687	171	204
Hill		468	1054	989	1212	3992	102699	6255	109852	4959	6517	6513	8946
Terai		240	100	90	197	643	65361	2702	65491	4740	2161	1155	2439
National Total		900	1176	1081	1478	4668	180499	9737	195677	11642	9365	7839	11589
1 Taplejung		12	5	0	0	16	1179	51	633	266	42	0	19
2 Panchthar		12	1	0	0	2	1145	13	861	28	4	1	3
3 Ilam		12	1	2	0	28	1968	108	1000	55	52	22	25
4 Jhapa		12	1	2	1	1	5203	27	4428	190	6	3	179
5 Morang		12	2	10	3	38	7680	332	5292	82	16	20	214
6 Sunsari		12	0	0	0	4	2385	33	2395	7	4	1	15
7 Dhankuta		12	8	0	1	4	1203	32	687	6	18	0	0
8 Teharthur		12	0	0	0	2	938	10	532	20	18	2	10
9 Sankhuwasabha		12	2	0	0	2	947	51	1366	126	197	51	39
10 Bhojpur		12	5	2	35	1	1024	16	869	73	22	2	13
11 Solukhumbu		12	0	0	0	4	4177	122	2006	93	79	7	51
12 Okhaldhunga		12	2	1	0	4	1671	282	2101	61	145	1	63
13 Khotang		12	0	0	3	7	1292	42	1614	198	23	3	2
14 Udaypur		12	2	0	1	3	1551	37	1788	300	57	15	33
15 Saptari		12	0	0	0	0	3746	34	4979	429	14	0	9
16 Siraha		12	0	0	1	0	3501	58	3801	103	15	4	19
Eastern		192	29	17	45	112	39610	1248	34352	2037	712	132	694
17 Dhanusha		12	0	0	0	0	6625	120	3398	450	221	0	17
18 Mahottari		12	9	11	0	23	3360	89	2518	449	58	131	370
19 Sarlahi		12	0	2	5	3	3900	450	5373	815	165	11	172
20 Sindhuli		12	1	0	2	4	1511	9	674	86	325	1	78
21 Ramechhap		12	0	0	0	0	1786	29	1963	82	199	1	14
22 Dolkha		12	1	0	2	1	1712	69	2309	50	68	4	4
23 Sindhupalchowk		12	2	0	0	1	1542	46	3669	26	84	2	8
24 Kavre		12	25	51	78	105	1911	82	4672	55	366	233	289
25 Lalitpur		12	0	0	0	0	0	0	0	0	0	0	0
26 Bhaktapur		12	0	1	1	1	2558	126	2703	64	71	61	37
27 Kathmandu		12	68	34	50	515	26814	858	13295	426	393	3181	5217
28 Nuwakot		12	4	2	0	16	1148	157	2392	80	97	27	61
29 Rasuwa		12	0	0	0	0	225	1	481	56	0	0	3
30 Dhading		12	2	4	0	5	2368	129	2868	89	104	18	47
31 Makawanpur		12	4	12	53	77	1868	111	2003	210	63	8	108
32 Rautahat		12	7	1	0	15	2876	198	2849	448	353	330	68
33 Bara		12	25	5	140	133	3259	49	2926	360	56	24	44
34 Parsa		12	0	0	0	0	0	0	0	0	0	0	0
35 Chitwan		12	31	30	9	8	8559	144	4427	286	171	75	528
Central		228	179	153	340	907	72022	2667	58520	4032	2794	4107	7065
36 Gorkha		12	3	1	3	1	3230	80	5340	40	970	3	57
37 Lamjung		12	0	0	0	5	2501	165	1544	47	199	17	25
38 Tanahu		12	2	1	0	2	3119	51	3714	85	153	17	83
39 Syangja		12	23	20	3	20	5589	186	3307	25	9	19	57
40 Kaski		12	876	819	900	2874	13014	1107	9188	968	1629	2262	2141
41 Manang		12	0	0	0	0	417	20	156	0	4	0	0
42 Mustang		12	0	0	0	0	844	4	97	1	5	0	2
43 Myagdi		12	2	0	3	5	647	76	909	42	34	13	4
44 Parbat		12	1	1	3	4	1802	6	1386	15	14	3	10
45 Baglung		12	0	2	1	0	2199	128	3195	151	80	53	36
46 Gulmi		12	2	0	0	4	3619	238	3709	152	113	8	71
47 Palpa		12	5	20	46	284	7392	1059	6680	159	630	174	133
48 Nawalparasi		12	15	7	0	393	3287	253	2603	78	102	10	379
49 Rupandehi		12	0	0	0	0	0	0	0	0	0	0	0
50 Kapilvastu		12	2	8	0	7	2634	164	4716	144	12	0	0
51 Arghakhanchi		12	0	0	0	0	1985	89	3105	104	20	1	12
Western		192	931	879	959	3599	52279	3626	49649	2011	3974	2580	3010
52 Pyuthan		12	0	0	0	0	1291	0	2830	41	1	1	0
53 Rolpa		12	0	15	15	0	382	59	779	86	19	0	7
54 Rukum		12	5	1	10	3	397	298	1046	218	173	55	85
55 Salyan		12	0	0	0	0	584	31	3425	60	11	1	17
56 Dang		12	0	0	0	0	2287	23	3427	61	52	0	49
57 Banke		12	6	2	24	15	681	91	2308	84	25	10	59
58 Bardiya		12	0	2	1	0	2162	20	2751	20	1	0	5
59 Surkhet		12	0	0	0	0	902	16	3377	120	54	0	9
60 Dailekh		12	0	0	2	1	423	27	1887	31	10	0	37
61 Jajarkot		12	0	0	0	0	262	76	1750	117	56	0	42
62 Dolpa		12	0	0	0	0	77	13	339	39	3	0	0
63 Jumla		12	10	0	0	0	95	16	1357	95	9	0	0
64 Kalikot		12	0	0	5	4	191	115	1253	94	43	0	12
65 Mugu		12	0	0	0	1	12	47	476	44	2	0	3
66 Humla		12	0	0	0	0	273	29	1827	78	13	0	4
Mid Western		180	21	20	57	24	10019	861	28832	1188	472	67	329
67 Bajura		12	1	0	0	0	167	60	2048	44	1	1	7
68 Bajhang		12	1	2	62	4	261	109	1035	158	116	99	40
69 Achham		12	1	0	0	9	861	70	2817	163	190	197	4
70 Doti		12	0	0	2	0	514	58	1982	295	40	2	7
71 Kailali		12	1	10	12	7	2559	592	3630	706	883	536	289
72 Kanchanpur		12	1	0	1	0	657	25	3670	28	7	0	23
73 Dadeldhura		12	0	0	0	6	867	358	3593	41	119	79	85
74 Baitadi		12	11	0	0	0	363	36	4267	166	36	32	24
75 Darchula		12	0	0	0	0	320	27	1282	773	21	7	12
Far Western		108	16	12	77	26	55 6569	1335	24324	2374	1413	953	491

Raw Data

Morbidity  
Sheet 10 of 11

District Code	District Name	Received Reports	Other Diseases & Injuries														
			RTA (Road Traffic Accident)	Headache (Migrain)	Pyrexia of Unknown Origin	Falls/Injuries/Fractures	Gastritis (APD)	Insect/Wasp Bite	Abdominal Pain	Arthritis, Rheumatism and Gout	Cirrhosis of liver	Burns and Scalds	Dog Bite	Other Rabies susceptible animal bites	Snake Bite: Poisonous	Snake Bite: Non Poisonous	Physical Disability (Disable Person)
Mountain		192	3305	130277	45387	63186	125037	6356	45491	27525	1318	5438	3319	233	76	249	504
Hill		468	33916	566241	256589	344632	571538	14557	197153	132063	3968	23676	13901	1266	277	1547	2762
Terai		240	38145	367289	445163	170750	409022	12457	225615	131243	3012	20359	14093	712	223	1172	727
<b>National Total</b>		<b>900</b>	<b>75366</b>	<b>1063807</b>	<b>747139</b>	<b>578568</b>	<b>1105597</b>	<b>33370</b>	<b>468259</b>	<b>290831</b>	<b>8298</b>	<b>49473</b>	<b>31313</b>	<b>2211</b>	<b>576</b>	<b>2968</b>	<b>3993</b>
1 Taplejung		12	153	12013	1600	4004	6809	393	3154	996	67	407	305	8	33	63	34
2 Panchthar		12	293	8968	4850	4300	5696	126	2005	1453	20	250	351	15	0	20	6
3 Ilam		12	361	9485	5423	6227	6990	226	3146	1270	26	263	189	36	9	9	24
4 Jhapa		12	2428	18349	11951	6071	25070	685	14140	4547	110	922	220	23	5	10	31
5 Morang		12	4193	21080	12265	12714	25753	458	15289	9087	197	986	814	35	1	3	1
6 Sunsari		12	519	22443	42538	9741	23003	119	11866	10575	50	791	103	6	1	6	5
7 Dhankuta		12	302	9734	6091	6193	7359	105	3102	1207	31	341	227	8	3	34	110
8 Teharthur		12	91	6319	2943	3586	4468	95	2200	1151	12	280	140	9	7	25	1
9 Sankhuwasabha		12	476	10432	2071	6857	10394	941	2367	2052	261	375	298	33	6	51	10
10 Bhojpur		12	97	14911	6138	5637	11490	205	3366	2433	24	490	497	12	1	27	4
11 Solukhumbu		12	27	9959	4143	5038	10898	1981	3155	2620	376	439	216	16	9	30	0
12 Okhaldhunga		12	907	18736	5490	5663	13955	560	6124	2413	18	300	408	21	3	10	10
13 Khotang		12	115	19232	1498	4702	12695	313	4864	2238	88	643	460	15	9	31	21
14 Udaypur		12	1048	12434	10200	7287	11606	312	5256	3732	60	818	523	94	13	197	6
15 Saptari		12	1092	19903	30317	10484	21737	241	12402	11493	65	1447	71	20	3	301	0
16 Siraha		12	1484	19322	32154	6187	23558	525	13698	11332	131	1360	475	37	4	24	179
<b>Eastern</b>		<b>192</b>	<b>13586</b>	<b>233320</b>	<b>179672</b>	<b>104691</b>	<b>221481</b>	<b>7285</b>	<b>106134</b>	<b>68599</b>	<b>1536</b>	<b>10112</b>	<b>5297</b>	<b>388</b>	<b>107</b>	<b>841</b>	<b>442</b>
17 Dhanusha		12	1581	21247	13793	9727	29513	1081	24422	9991	227	1034	249	21	3	0	140
18 Mahottari		12	1910	18531	26569	5386	20822	570	9533	6072	180	1002	615	21	21	214	46
19 Sarlahi		12	2023	29495	59361	9319	29612	913	16222	9370	220	1594	2111	95	1	67	18
20 Sindhuli		12	158	10202	10402	2041	6361	251	3636	1192	29	383	415	5	14	72	42
21 Ramechhap		12	475	16576	10711	8246	14119	298	4110	3565	62	358	758	36	12	24	204
22 Dolkha		12	434	13235	3544	6854	13470	397	3905	2588	90	511	418	40	5	41	60
23 Sindhupalchowk		12	1238	18449	9325	11004	16184	256	4922	4867	38	772	864	15	10	43	156
24 Kavre		12	1389	20384	10626	17376	20130	534	9377	4222	177	895	311	24	18	58	75
25 Lalitpur		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26 Bhaktapur		12	965	5381	6242	6356	8975	301	3121	2609	40	468	408	35	6	9	0
27 Kathmandu		12	11637	27082	14583	27280	33092	932	12616	7780	609	1156	1265	228	10	23	323
28 Nuwakot		12	815	10463	3010	4427	10541	234	3057	1863	90	484	173	7	4	27	202
29 Rasuwa		12	27	3078	2109	2603	4426	71	819	1111	1	123	55	3	1	10	1
30 Dhading		12	966	26469	8306	14454	21044	345	6114	8533	70	724	547	43	8	81	141
31 Makawanpur		12	1319	9312	12167	8070	10175	492	4634	2501	226	550	265	55	14	21	16
32 Rautahat		12	1973	21768	45281	7307	20485	1194	11687	6604	192	1871	862	33	47	217	22
33 Bara		12	1401	22142	44002	7587	21802	1188	14554	7464	461	1623	1462	21	14	62	0
34 Parsa		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35 Chitwan		12	5924	11958	16085	18904	24003	282	8063	7502	186	627	175	65	13	27	17
<b>Central</b>		<b>228</b>	<b>34235</b>	<b>285772</b>	<b>296116</b>	<b>166941</b>	<b>304754</b>	<b>9339</b>	<b>140792</b>	<b>87834</b>	<b>2898</b>	<b>14175</b>	<b>10953</b>	<b>747</b>	<b>201</b>	<b>996</b>	<b>1463</b>
36 Gorkha		12	106	17362	5527	11032	19762	314	5061	7714	36	605	441	33	0	41	95
37 Lamjung		12	295	13855	15520	7330	16267	265	2883	3111	38	425	171	38	7	35	4
38 Tanaha		12	1011	12017	8031	8455	13605	302	5754	3207	22	522	375	44	2	52	65
39 Syangja		12	1211	13917	3496	15174	17851	748	5429	5553	110	626	430	61	13	85	190
40 Kaski		12	2779	16037	8784	16508	26739	484	7894	7780	504	856	339	27	35	101	73
41 Manang		12	4	810	502	496	1813	45	584	290	7	25	5	0	0	1	0
42 Mustang		12	6	1592	514	1797	2451	30	475	562	4	112	47	1	0	0	0
43 Myagdi		12	584	8968	3482	5749	7347	411	1389	1970	137	359	150	10	2	19	6
44 Parbat		12	65	14001	4670	9829	13596	199	3250	2903	29	462	179	15	1	55	91
45 Baglung		12	496	12171	722	11063	16420	768	3063	3358	166	739	288	10	17	75	25
46 Gulmi		12	1405	18754	5425	12320	24724	827	4691	8862	327	1021	526	105	11	15	0
47 Palpa		12	1160	18064	6837	16843	26477	442	5552	6389	180	708	508	9	9	180	59
48 Nawalparasi		12	5575	22486	16284	13064	20483	1733	11012	5198	166	987	1250	73	58	127	15
49 Rupandehi		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50 Kapilvastu		12	2243	20230	28385	6987	23589	1001	12635	7574	381	1004	114	6	3	5	1
51 Arghakhanchi		12	592	8831	4125	5679	12047	710	3531	4271	158	708	178	19	0	34	41
<b>Western</b>		<b>192</b>	<b>17532</b>	<b>199095</b>	<b>112304</b>	<b>142326</b>	<b>243171</b>	<b>8279</b>	<b>73203</b>	<b>68742</b>	<b>2265</b>	<b>9159</b>	<b>5001</b>	<b>451</b>	<b>158</b>	<b>825</b>	<b>665</b>
52 Pyuthan		12	503	17674	3952	9627	13687	287	6320	3261	5	769	303	1	0	6	3
53 Rolpa		12	349	13283	3725	7557	11342	267	3554	2929	49	654	269	17	5	19	303
54 Rukum		12	151	12355	8732	7118	11900	447	4789	1565	89	584	489	24	16	10	6
55 Salyan		12	140	20254	6384	5886	18961	262	8347	2455	43	437	172	5	0	5	0
56 Dang		12	1245	16280	2709	7899	21573	460	10819	4956	22	1042	905	117	18	42	25
57 Banke		12	861	24294	15032	8711	20810	644	10812	3416	95	754	508	34	0	0	0
58 Bardiya		12	1142	20578	14644	9411	20853	468	10768	6440	38	1155	543	13	2	1	4
59 Surkhet		12	413	15087	142	9963	26330	379	10230	2969	50	1342	251	12	5	51	2
60 Dailekh		12	89	23469	5668	11028	16621	101	7386	2981	37	850	285	10	4	45	162
61 Jajarkot		12	157	12140	3252	3234	11067	327	5959	751	32	631	421	69	5	4	5
62 Dolpa		12	0	3056	349	457	2615	146	1381	276	18	45	17	0	0	1	1
63 Jumla		12	90	6279	1370	2406											

Raw Data  
Morbidity  
Sheet 11 of 11

District Code	District Name	Received Reports	Surgical Problems						Others
			Hernia	Hydrocele	Phimosis/Para - Phimosis	Haemorrhoids/(Piles)	Epididymitis/Ochitis	Prostatism (BEP/BPH)	
	Mountain	192	557	343	198	1369	327	228	186930
	Hill	468	5760	3576	1791	9640	1812	4148	1594298
	Terai	240	3852	4782	1179	8298	1663	1194	1907620
	<b>National Total</b>	<b>900</b>	<b>10169</b>	<b>8701</b>	<b>3168</b>	<b>19307</b>	<b>3802</b>	<b>5570</b>	<b>3688848</b>
1	Taplejung	12	46	35	23	97	43	46	13515
2	Panchthar	12	15	16	6	40	12	13	10086
3	Ilam	12	37	25	10	71	18	20	21038
4	Jhapa	12	405	734	125	898	294	71	18972
5	Morang	12	225	641	78	502	110	129	51579
6	Sunsari	12	34	44	4	203	31	5	45499
7	Dhankuta	12	17	10	5	60	21	10	11038
8	Teharthurm	12	35	20	10	50	13	8	8033
9	Sankhuwasabha	12	35	11	12	75	13	19	31263
10	Bhojpur	12	38	35	16	125	39	30	14820
11	Solukhumbu	12	25	13	4	68	8	8	12434
12	Okhaldhunga	12	13	10	6	84	8	6	29587
13	Khotang	12	50	42	23	130	5	4	23051
14	Udaypur	12	59	49	25	268	18	30	23843
15	Saptari	12	17	40	32	228	18	3	20447
16	Siraha	12	26	54	21	239	25	4	22983
	<b>Eastern</b>	<b>192</b>	<b>1077</b>	<b>1779</b>	<b>400</b>	<b>3138</b>	<b>676</b>	<b>406</b>	<b>358188</b>
17	Dhanusha	12	72	60	52	293	71	24	32767
18	Mahottari	12	82	102	60	193	5	3	22093
19	Sarlahi	12	190	334	98	635	81	156	24865
20	Sindhuli	12	36	8	12	100	17	4	11175
21	Ramechhap	12	108	25	15	89	15	12	22045
22	Dolkha	12	98	25	17	131	19	37	26287
23	Sindhupalchowk	12	104	66	26	145	32	17	19256
24	Kavre	12	255	98	74	389	90	220	56554
25	Lalitpur	12	0	0	0	0	0	0	424468
26	Bhaktapur	12	89	35	18	222	39	18	29731
27	Kathmandu	12	1811	931	417	1645	184	991	86811
28	Nuwakot	12	52	73	14	99	23	19	17695
29	Rasuwa	12	5	13	3	31	19	5	4257
30	Dhading	12	117	135	34	251	46	50	21968
31	Makawanpur	12	65	47	14	177	12	20	32701
32	Rautahat	12	51	68	46	133	7	55	41149
33	Bara	12	254	84	25	283	68	6	19751
34	Parsa	12	0	0	0	0	0	0	350366
35	Chitwan	12	1124	563	379	1523	228	455	82591
	<b>Central</b>	<b>228</b>	<b>4513</b>	<b>2667</b>	<b>1304</b>	<b>6339</b>	<b>956</b>	<b>2092</b>	<b>1326530</b>
36	Gorkha	12	97	108	55	250	58	46	23544
37	Lamjung	12	22	37	22	229	22	28	22477
38	Tanahu	12	21	15	1	115	8	25	28925
39	Syangja	12	45	26	21	192	67	165	29094
40	Kaski	12	1216	891	522	1608	483	1313	53769
41	Manang	12	0	0	0	5	0	0	542
42	Mustang	12	2	1	2	27	1	0	8356
43	Myagdi	12	31	29	7	85	31	21	15178
44	Parbat	12	24	22	8	65	16	15	21445
45	Baglung	12	68	54	18	166	30	29	29817
46	Gulmi	12	95	57	18	239	20	6	99834
47	Palpa	12	487	174	115	490	44	662	96831
48	Nawalparasi	12	63	50	6	258	11	18	45799
49	Rupandehi	12	0	0	0	0	0	0	913247
50	Kapilvastu	12	170	225	55	686	80	11	13761
51	Arghakhanchi	12	31	26	13	226	61	43	11602
	<b>Western</b>	<b>192</b>	<b>2372</b>	<b>1715</b>	<b>855</b>	<b>4641</b>	<b>932</b>	<b>2382</b>	<b>1414221</b>
52	Pyuthan	12	80	51	4	43	7	43	36888
53	Rolpa	12	47	27	8	69	36	6	20523
54	Rukum	12	188	25	44	89	52	16	15619
55	Salyan	12	29	43	16	140	63	16	13187
56	Dang	12	128	271	62	459	194	36	60238
57	Banke	12	195	461	19	169	34	10	28795
58	Bardiya	12	202	433	31	807	247	43	27349
59	Surkhet	12	83	95	30	332	38	17	70753
60	Dailekh	12	24	38	20	156	9	23	26040
61	Jajarkot	12	21	35	12	189	26	23	9058
62	Dolpa	12	3	6	5	43	12	0	4661
63	Jumla	12	1	18	2	20	4	0	4658
64	Kalikot	12	40	40	22	178	51	22	4403
65	Mugu	12	16	5	3	21	1	4	1091
66	Humla	12	64	32	14	127	8	0	9570
	<b>Mid Western</b>	<b>180</b>	<b>1121</b>	<b>1580</b>	<b>292</b>	<b>2842</b>	<b>782</b>	<b>259</b>	<b>332833</b>
67	Bajura	12	24	16	13	100	30	0	18388
68	Bajhang	12	79	45	45	233	58	57	10287
69	Achham	12	122	82	37	247	37	44	37449
70	Doti	12	37	26	36	127	13	42	29416
71	Kailali	12	565	543	69	512	104	89	52521
72	Kanchanpur	12	49	75	17	277	55	76	32848
73	Dadeldhura	12	112	94	77	415	90	96	26346
74	Baitadi	12	83	62	16	368	41	14	31859
75	Darchula	12	15	17	7	68	28	13	17962
	<b>Far Western</b>	<b>108</b>	<b>1086</b>	<b>960</b>	<b>317</b>	<b>2347</b>	<b>456</b>	<b>431</b>	<b>257076</b>

### Analysed Data

Morbidity Sheet 1 of 2

District Code	District Name	Received Report	% of new OPD Visits of Total Population	Proportion by sex among total OPD Visit		% of OPD Visits for								
				Female	Male	Communicable, Immunizable	Communicable, Vector Borne	Communicable, Water/Food Borne	Other Communicable Diseases	Other Infected Diseases	Nutritional and Metabolic Disorder	Skin Diseases	Ear, Nose and Throat Infection	Oral Health related Problems
	Mountain	192	90.08	53.44	46.56	0.34	0.03	17.51	0.19	19.12	1.8	9.68	6.21	3.74
	Hill	468	80.24	55.88	44.12	0.4	0.11	14.59	0.22	17.89	2.09	9.84	6.24	3.55
	Terai	240	70.31	54.94	45.06	0.32	0.76	14.85	0.22	15.3	2.88	14.58	4.7	2.69
	National Total	900	76.09	55.24	44.76	0.36	0.4	14.96	0.22	16.83	2.42	11.97	5.54	3.17
1	Taplejung	12	86.04	52.76	47.24	0.59	0.04	17.86	0.16	15.89	1.44	11.78	11	3.53
2	Panchthar	12	82.1	35.35	64.65	0.33	0.05	44.03	0.05	12.07	1.16	8.66	8.39	1.75
3	Ilam	12	44.11	56.3	43.7	0.62	0.08	11.07	0.09	18.64	1.99	10.63	10.78	3.5
4	Jhapa	12	55.29	51.75	48.25	0.75	0.61	15.86	0.65	21.43	2.31	13.9	8.6	4.06
5	Morang	12	54.06	55.91	44.09	0.56	0.79	13.39	0.22	19.18	3.6	13.5	6.82	2.85
6	Sunsari	12	63.77	56.88	43.12	0.27	0.36	15.77	0.05	19.22	3.27	14.75	5.62	3.37
7	Dhankuta	12	73.89	56.2	43.8	0.4	0.05	14.2	0.11	18	1.54	12.74	13.11	2.96
8	Teharthur	12	78.35	54.72	45.28	0.7	0.07	14.09	0.14	19.36	1.4	13.49	12.89	3.67
9	Sankhuwasabha	12	85.57	56.41	43.59	0.61	0.04	16.41	0.05	14.41	1.02	9.45	7.27	3.06
10	Bhojpur	12	84.61	54.85	45.15	0.75	0.08	15.71	0.07	17.92	1.77	13.56	12.27	3.16
11	Solukhumbu	12	129.01	54.63	45.37	0.29	0	15.26	0.02	18.78	1.8	12.35	8.83	3.28
12	Okhaldhunga	12	120.09	57.62	42.38	0.42	0.02	14.36	0.02	20.08	1.21	9.55	7.79	2.92
13	Khotang	12	84.15	53.26	46.74	0.53	0.03	21.58	0.08	15.8	1.94	11.86	8.85	3.41
14	Udaypur	12	68.09	55.97	44.03	0.58	0.28	18.74	0.35	13.75	1.73	13.11	9.43	2.87
15	Saptari	12	73.02	53.63	46.37	0.11	0.4	22.84	0.2	16.75	3.39	17.41	5.48	3.15
16	Siraha	12	70.79	54.95	45.05	0.15	0.46	18.43	0.08	18.57	4.05	19.03	4.9	3.05
	Eastern	192	69.04	54.08	45.92	0.44	0.33	18.03	0.18	17.95	2.56	13.85	7.82	3.18
17	Dhanusha	12	69.79	53.66	46.34	0.1	2.25	20.15	0.15	17.56	3.15	17.99	4.86	3.72
18	Mahottari	12	64.39	53.4	46.6	0.28	1.27	20.73	0.44	18.95	3	16.24	4.95	3.24
19	Sarlahi	12	81.82	52.44	47.56	0.26	0.74	19.86	0.15	16.48	4.23	17.63	4.34	2.9
20	Sindhuli	12	43.52	53.59	46.41	0.71	0.66	20.39	0.15	15.02	2.45	14.62	6.36	3.45
21	Ramechhap	12	85.89	58.7	41.3	0.52	0.01	12.21	0.05	18.12	1.56	9.89	7.64	4.05
22	Dolkha	12	80	58.27	41.73	0.38	0	15.4	0.28	19.77	1.06	8.66	6.79	4.05
23	Sindhupalchowk	12	70.4	56.56	43.44	0.5	0.05	14.56	0.16	21.57	1.72	9.59	7.28	4.52
24	Kavre	12	83.08	58.07	41.93	0.27	0.03	12.06	0.28	19.79	2.06	8.59	6.54	4.49
25	Lalitpur	12	101.33	50.94	49.06	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	62.58	56.85	43.15	0.47	0.05	10.54	0.1	18.14	1.5	7.73	7.79	9.25
27	Kathmandu	12	50.74	54.79	45.21	0.73	0.02	10.43	0.41	16.35	3.8	7.39	6.12	7.52
28	Nuwakot	12	45.87	54.36	45.64	0.52	0.03	15.66	0.24	19.23	1.8	11.34	6.49	3.46
29	Rasuwa	12	96.59	53.75	46.25	0.26	0	15.04	0.22	19.53	2.06	10.2	6.3	3.23
30	Dhading	12	82.03	56.82	43.18	0.56	0.05	15.09	0.31	21.01	2.28	11.84	5.71	3.32
31	Makawanpur	12	45.2	54.96	45.04	0.66	0.27	14.31	0.4	15.59	1.41	12.5	5.57	3.09
32	Rautahat	12	73.65	51.88	48.12	0.17	1.08	19.08	0.25	13.76	4.07	17.82	4.18	2.53
33	Bara	12	75.07	51.31	48.69	0.43	0.46	17.72	0.21	13.34	4.14	23.76	4.56	3.01
34	Parsa	12	56.63	49.98	50.02	0	0	0	0	0	0	0	0	0
35	Chitwan	12	79.8	54.56	45.44	0.42	0.08	7.11	0.24	16.26	3.34	12.99	8.36	4.49
	Central	228	68.29	53.99	46.01	0.35	0.5	13.79	0.22	15.21	2.68	12.34	5.12	3.67
36	Gorkha	12	81.84	58.84	41.16	0.58	0.04	13.86	0.09	20.37	1.79	9.85	7.05	3.62
37	Lamjung	12	94.45	56.99	43.01	0.26	0	12.18	0.07	16.04	2.58	11.81	5.44	3.4
38	Tanaha	12	54.16	57.33	42.67	0.48	0.02	11.96	0.18	17.37	1.48	11.53	5.81	3.29
39	Syangja	12	76.26	58.63	41.37	0.51	0.03	11.4	0.14	21.17	2.78	11.52	7.97	4.06
40	Kaski	12	103.69	55.37	44.63	0.22	0.02	9.81	0.27	18.04	3.74	7.24	8.95	5.27
41	Manang	12	101.33	48.33	51.67	0.05	0	14.73	0.13	15.31	1.41	8.39	7	3.48
42	Mustang	12	195.24	49.75	50.25	0.21	0	9.85	0.21	18.02	1.38	5.83	8.36	3.09
43	Myagdi	12	92.11	56.93	43.07	0.56	0	13.04	0.04	21.35	1.05	10.19	6.98	3.44
44	Parbat	12	103.43	56.79	43.21	0.27	0.01	11.07	0.03	24.39	2.15	9.01	8.48	2.74
45	Baglung	12	80.49	57.74	42.26	0.26	0	16.35	0.18	24.44	2.29	9.29	7.25	3.16
46	Gulmi	12	110.12	59.04	40.96	0.17	0.03	12.38	0.17	17.34	1.83	9.63	5.44	2.07
47	Palpa	12	127.62	57.65	42.35	0.5	0.05	9.79	0.16	14.42	2.5	8.89	4.78	3.3
48	Nawalparasi	12	62	57.81	42.19	0.48	0.69	14.82	0.03	18.56	2.36	15.91	5.46	1.96
49	Rupandehi	12	103.33	57.86	42.14	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	78.78	54.28	45.72	0.39	0.92	20.57	0.26	15.28	3.94	19.28	4.68	3.15
51	Argakhanchi	12	71.86	56.68	43.32	0.39	0.06	17.64	0.37	19.82	2.48	12.97	6.76	2.92
	Western	192	87.79	57.19	42.81	0.31	0.16	10.96	0.13	15.04	2.09	9.37	5.23	2.67
52	Pyuthan	12	94.46	57.36	42.64	0.32	0.03	16.27	0.09	18.19	1.02	12.79	4.97	2.2
53	Roipa	12	67.59	56.66	43.34	0.47	0.03	16.59	0.34	18.7	1.37	11.18	5.24	2.78
54	Rukum	12	85.94	55.82	44.18	0.27	0	20.59	0.24	18.92	2.22	11.28	4.66	3.59
55	Salyan	12	92.07	58.32	41.68	0.21	0.07	18.33	0.22	19.08	2.08	13.39	5.23	3.44
56	Dang	12	65.92	56.36	43.64	0.66	1.44	15.68	0.37	16.15	2.21	15.16	5.19	3.1
57	Banke	12	82.83	56.11	43.89	0.2	1.13	15.82	0.33	18.27	2.42	19.18	5.06	3.74
58	Bardiya	12	86.45	57.99	42.01	0.51	1.59	17	0.47	18.26	3.24	17.75	5.2	2.62
59	Surkhet	12	111.18	62.19	37.81	0.34	1.46	16.41	0.37	19.24	2.34	12.23	4.69	2.57
60	Dailikh	12	105.31	55.18	44.82	0.45	0.02	21.58	0.26	21.62	1.92	11.19	3.49	2.69
61	Jajarkot	12	95.74	53.01	46.99	0.3	0	21.29	0.16	19.39	3.19	10.21	5.17	3.86
62	Dolpa	12	97.34	51.92	48.08	0	0	24.4	0.22	15.55	3.14	6.14	3.93	2.91
63	Jumla	12	78.68	49.43	50.57	0.08	0.01	20.07	0.19	25.07	1.3	8.85	3.47	3.93
64	Kailkot	12	68.19	50.27	49.73	0.33	0.1	20.56	0.35	18.69	3	13.33	4.06	2.95
65	Mugu	12	86.9	50.48	49.52	0.05	0	23.87	0.11	21.34	3.22	10.56	4.99	4.45
66	Humla	12	182.51	50.85	49.15	0.29	0	20.91	0.85	15.71	2.48	8.98	5.6	3.71
	Mid Western	180	87.12	56.54	43.46	0.37	0.7	17.96	0.32	18.75	2.29	13.72	4.84	3.08
67	Bajura	12	120.66	50.45	49.55	0.16	0.06	20.95	0.18	16.23	2.57	8.11	3.29	2.77
68	Bajhang	12	78.42	50.8	49.2	0.26	0.04	21.9	0.13	21.33	2.26	8.3	3.31	3.64
69	Achham	12	123.98	54.99	45.01	0.17	0.08	19.73	0.46	22.16	2.11	7.93	2.78	1.81
70	Doti	12	89.41	54.34	45.66	0.11	0.07	20	0.15	20.31	2.21	8.69	3.43	3.07
71	Kailali	12	59.41	59.48	40.52	0.41	1.14	13.55	0.36	18.86	2.83	13.28	4.18	1.85
72	Kanchanpur	12	58.37	58.69	41.31	0.72	0.07	15.71	0.21	21.87	2.83	13.66	4.68	2.38
73	Dadeldhura	12	134.3	54.82	45.18	0.28	0.12	13.64	0.63	20.49	1.83	9.32	4.49	3.27
74	Baitadi	12	87.29	53.28	46.72	0.26	0.08	14.29	0.21	21.67	1.84	8.26	4.36	4.65
75	Darchula	12	102.95	51.82	48.18	0.19	0.01	14.53	0.11	22.51	1.25	9.66	4.81	5.24
	Far Western	108	82.56	55.28	44.72	0.31	0.29	16.7	0.3	20.59	2.29	10.16	3.92	2.9



## Analysed Data

### Morbidity Sheet 2 of 2

District Code	District Name	Received Report	% of OPD Visits for							
			Eye Problem	Obstetrics Complications	Gyne Problems	Mental Health related problems	Malignancy	Cardiovascular related problem	Other Diseases and Injuries	Surgical Problems
	Mountain	192	2.68	0.16	1.3	0.2	0.01	1.98	24.78	10.28
	Hill	468	2.29	0.21	1.64	0.67	0.07	2.45	21.57	16.16
	Terai	240	2.08	0.18	1.17	0.3	0.01	1.47	18.79	19.69
	National Total	900	2.23	0.2	1.4	0.47	0.04	1.97	20.59	17.26
1	Taplejung	12	3.29	0.14	0.81	0.33	0.02	1.58	21.61	9.93
2	Panchthar	12	2.37	0.07	0.7	0.06	0	1.03	14.16	5.09
3	Ilam	12	2.7	0.14	1.17	0.5	0.02	2.12	22.06	13.89
4	Jhapa	12	5.53	0.03	1.59	0.39	0	2.1	17.68	4.5
5	Morang	12	5.15	0.12	1.84	1.68	0.01	2.43	18.36	9.5
6	Sunsari	12	1.92	0.03	0.71	0.01	0	0.97	24.47	9.21
7	Dhankuta	12	3.05	0.07	0.98	0.16	0.01	1.32	23.71	7.59
8	Teharhum	12	3.38	0.18	1.2	0.15	0	1.44	20.12	7.71
9	Sankhuwasabha	12	2.44	0.29	1.46	0.17	0	1.7	22.41	19.23
10	Bhojpur	12	2.48	0.16	0.98	0.11	0.02	1	22.48	7.49
11	Solukhumbu	12	2.99	0.09	0.97	0.34	0	3.94	23.47	7.58
12	Okhaldhunga	12	2.56	0.05	0.72	1.03	0	1.91	24.19	13.16
13	Khotang	12	2.81	0.08	1.09	0.16	0	1.37	20.3	10.08
14	Udaypur	12	2.58	0.17	2.49	0.22	0	1.56	22.11	10.02
15	Saptari	12	1.8	0.07	0.95	0.07	0	1.81	21.49	4.08
16	Siraha	12	2.05	0.07	0.74	0.09	0	1.5	22.15	4.68
	Eastern	192	3.06	0.09	1.18	0.4	0	1.74	21.09	8.09
17	Dhanusha	12	1.97	0.02	0.67	0.04	0	1.89	19.68	5.8
18	Mahottari	12	1.77	0.16	1.23	0.16	0.01	1.59	20.86	5.14
19	Sarlahi	12	1.69	0.04	0.74	0.28	0	1.69	24.89	4.09
20	Sindhuli	12	2.18	0.06	0.97	0.1	0	1.79	23.49	7.58
21	Ramechhap	12	4.26	0.04	2.07	0.3	0	1.86	27.22	10.2
22	Dolkha	12	2.95	0.1	1.79	0.27	0	2.12	22.97	13.41
23	Sindhupalchowk	12	2.64	0.4	1.56	0.26	0	2.03	25.74	7.42
24	Kavre	12	4.73	0.07	1.84	0.26	0.07	1.96	22.08	14.88
25	Lalitpur	12	0	0	0	0	0	0	0	100
26	Bhaktapur	12	2.16	0.03	1.48	0.23	0	3.22	20.01	17.28
27	Kathmandu	12	1.63	0.67	2.46	2.28	0.09	7.15	19.74	13.21
28	Nuwakot	12	3.33	0.15	1.64	0.29	0.01	2.48	22.12	11.23
29	Rasuwa	12	4.06	0.02	1.38	0.08	0	1.47	27.8	8.34
30	Dhading	12	2.91	0.26	2.06	0.29	0	1.66	25.95	6.68
31	Makawanpur	12	3.32	0.14	1.67	0.75	0.07	2.02	22.99	15.25
32	Rautahat	12	1.54	0.66	1.1	0.09	0	1.43	23.94	8.31
33	Bara	12	2.37	0.12	0.86	0.15	0.06	1.28	23.63	3.91
34	Parsa	12	0	0	0	0	0	0	0	100
35	Chitwan	12	1.57	0.32	1.48	1.56	0.02	3.04	20.11	18.61
	Central	228	2.08	0.21	1.26	0.5	0.02	2.23	20	19.81
36	Gorkha	12	2.64	0.03	2.68	1.36	0	3.43	24.07	8.53
37	Lamjung	12	2.87	0.01	1.4	0.53	0	2.23	29.86	11.32
38	Tanahu	12	1.89	0.06	2.22	0.27	0	3.49	25.87	14.09
39	Syangja	12	1.93	0.24	1.76	0.43	0.02	3.19	22.54	10.29
40	Kaski	12	1.97	1.28	2.53	2.75	1.12	6.23	18.27	12.29
41	Manang	12	4.25	0.02	0.57	0.05	0	4.65	35.71	4.26
42	Mustang	12	2.06	0.03	0.61	0.12	0	2.83	22.52	24.89
43	Myagdi	12	3.64	0.07	1.71	0.27	0.01	1.36	24.14	12.14
44	Parbat	12	2.5	0.04	1.09	0.22	0	1.66	25.28	11.06
45	Baglung	12	1.86	0.12	1.56	0.52	0	2.24	18.92	11.56
46	Gulmi	12	1.42	0.04	1.06	0.51	0	2.02	20.22	25.66
47	Palpa	12	2.54	0.26	2.14	2.4	0.09	3.94	20.25	23.99
48	Nawalparasi	12	2.47	0.06	1.87	0.15	0.1	1.56	22.83	10.71
49	Rupandehi	12	0	0	0	0	0	0	0	100
50	Kapilvastu	12	2.48	0.11	1.85	0.14	0	1.63	22.14	3.19
51	Arghakhanchi	12	1.92	0.22	1.78	0.46	0	2.94	22.63	6.64
	Western	192	1.83	0.21	1.51	0.74	0.13	2.39	18.05	29.16
52	Pyuthan	12	2.34	0.04	1.54	0.25	0	1.7	23.08	15.19
53	Rolpa	12	2.57	0.05	1.8	0.19	0.02	0.78	25.82	12.07
54	Rukum	12	1.88	0.35	1.98	0.33	0.01	1.15	24.42	8.11
55	Salyan	12	2.08	0.05	1.71	0.31	0	1.72	26.44	5.63
56	Dang	12	1.94	0.13	1.75	0.34	0	1.56	18.04	16.26
57	Banke	12	3.04	0.03	0.95	0.05	0.01	0.82	21.52	7.43
58	Bardiya	12	1.67	0.09	2.22	0.16	0	1.21	20.93	7.08
59	Surkhet	12	1.93	0.1	1.76	0.11	0	1.14	17.12	18.17
60	Dailekh	12	1.5	0.09	1.39	0.13	0	0.83	23.74	9.09
61	Jajarkot	12	2.13	0.2	2.21	0.19	0	1.47	24.27	5.97
62	Dolpa	12	2.39	0.23	1.39	0.47	0	1.36	24.2	13.69
63	Jumla	12	2.66	0.07	1.09	0.04	0.01	1.84	25.81	5.51
64	Kalikot	12	1.59	0.16	1.59	0.13	0.01	1.91	25.91	5.32
65	Mugu	12	2.48	0.06	1.51	0.03	0	1.25	23.62	2.44
66	Humla	12	2.82	0.1	1.58	0.11	0	2.47	23.51	10.88
	Mid Western	180	2.13	0.1	1.67	0.19	0	1.29	22.08	10.53
67	Bajura	12	2.23	0.04	0.94	0.04	0	1.47	29.25	11.72
68	Bajhang	12	2.11	0.26	1.37	0.34	0.04	1.14	26.79	6.77
69	Achham	12	1.95	0.12	0.92	0.26	0	1.24	27.31	10.96
70	Doti	12	2.36	0.27	0.98	0.15	0	1.28	23.77	13.15
71	Kailali	12	1.87	1.1	2.01	0.53	0.01	1.97	24.38	11.67
72	Kanchanpur	12	1.72	1.08	2.88	0.08	0	1.57	18.61	11.91
73	Dadeldhura	12	1.33	0.23	2.41	0.75	0	2.5	25.5	13.21
74	Baitadi	12	2.09	0.21	1.45	0.16	0	1.99	25.36	13.11
75	Darchula	12	3.08	0.04	0.99	0.03	0	1.6	24.12	11.84
	Far Western	108	2.01	0.48	1.63	0.29	0.01	1.67	24.76	11.71

Raw Data  
Free Health Services  
Sheet 1 of 5

District Code	District Name	Received Reports	OPD						
			Hospital					PHC	Total
			Ultrapoor Destitute	Poor	Disable	Senior Citizen	FCHV		
	Mountain	192	25013	38667	1220	8858	940	63297	137995
	Hill	468	154256	33285	3499	40684	6081	364036	601841
	Terai	240	36375	34642	2667	16857	3039	393880	487460
	<b>National Total</b>	<b>900</b>	<b>215644</b>	<b>106594</b>	<b>7386</b>	<b>66399</b>	<b>10060</b>	<b>821213</b>	<b>1227296</b>
1	Taplejung	12	404	21921	7	169	39	957	23497
2	Panchthar	12	14	0	0	394	269	8083	8760
3	Ilam	12	0	0	0	0	0	0	0
4	Jhapa	12	3005	4647	201	2143	93	29156	39245
5	Morang	12	717	8233	12	4799	41	53378	67180
6	Sunsari	12	0	0	0	0	0	0	0
7	Dhankuta	12	0	0	0	0	0	16097	16097
8	Teharthurm	12	1503	11	56	2427	32	2558	6587
9	Sankhuwasabha	12	19	0	1	1722	13	0	1755
10	Bhojpur	12	15625	0	0	467	0	19060	35152
11	Solukhumbu	12	0	0	0	0	0	4372	4372
12	Okhaldhunga	12	1040	561	147	464	3	0	2215
13	Khotang	12	73	40	70	578	50	0	811
14	Udaypur	12	699	0	129	1281	1390	2938	6437
15	Saptari	12	4549	2930	1656	1233	32	17366	27766
16	Siraha	12	5542	10093	54	1623	70	11883	29265
	<b>Eastern</b>	<b>192</b>	<b>33190</b>	<b>48436</b>	<b>2333</b>	<b>17300</b>	<b>2032</b>	<b>165848</b>	<b>269139</b>
17	Dhanusha	12	0	0	0	0	0	7669	7669
18	Mahottari	12	0	0	0	0	0	40646	40646
19	Sarlahi	12	6630	1055	119	820	121	53268	62013
20	Sindhuli	12	1905	4532	8	538	11	12228	19222
21	Ramechhap	12	701	0	19	655	42	2966	4383
22	Dolkha	12	0	0	0	0	0	0	0
23	Sindhupalchowk	12	2334	565	262	3234	282	30254	36931
24	Kavre	12	0	0	0	0	0	13517	13517
25	Lalitpur	12	2246	0	0	0	48	155	2449
26	Bhaktapur	12	0	0	0	0	0	6395	6395
27	Kathmandu	12	0	0	0	0	0	0	0
28	Nuwakot	12	3757	299	7	1796	247	6127	12233
29	Rasuwa	12	186	142	25	122	42	2	519
30	Dhading	12	18787	0	76	471	54	5380	24768
31	Makawanpur	12	766	1583	10	296	12	1335	4002
32	Rautahat	12	0	0	0	0	0	0	0
33	Bara	12	0	0	0	0	0	25220	25220
34	Parsa	12	0	0	0	0	246	18	264
35	Chitwan	12	0	0	0	0	0	0	0
	<b>Central</b>	<b>228</b>	<b>37312</b>	<b>8176</b>	<b>526</b>	<b>7932</b>	<b>1105</b>	<b>205180</b>	<b>260231</b>
36	Gorkha	12	4972	39	11	3673	716	30088	39499
37	Lamjung	12	108	118	86	1442	29	0	1783
38	Tanahu	12	38133	1	235	6431	41	16422	61263
39	Syangja	12	512	0	186	2847	123	870	4538
40	Kaski	12	0	0	0	0	0	838	838
41	Manang	12	225	240	35	0	60	0	560
42	Mustang	12	315	852	80	420	22	3978	5667
43	Myagdi	12	0	0	0	0	0	5456	5456
44	Parbat	12	422	0	36	445	11	0	914
45	Baglung	12	2	0	0	3	0	5115	5120
46	Gulmi	12	8826	2	1365	5320	1080	18368	34961
47	Palpa	12	10	32	8	1536	1206	18644	21436
48	Nawalparasi	12	483	1062	3	80	979	6213	8820
49	Rupandehi	12	378	465	47	411	29	0	1330
50	Kapilvastu	12	0	0	0	0	0	0	0
51	Arghakhanchi	12	345	0	17	290	19	0	671
	<b>Western</b>	<b>192</b>	<b>54731</b>	<b>2811</b>	<b>2109</b>	<b>22898</b>	<b>4315</b>	<b>105992</b>	<b>192856</b>
52	Pyuthan	12	1312	0	14	2048	35	16539	19948
53	Rolpa	12	1713	1116	112	390	29	14570	17930
54	Rukum	12	2	4	6	8	5	0	25
55	Salyan	12	15629	0	209	1415	38	13482	30773
56	Dang	12	462	10	5	3	5	55151	55636
57	Banke	12	0	0	0	0	0	22697	22697
58	Bardiya	12	0	0	0	0	0	26534	26534
59	Surkhet	12	0	0	0	0	0	69890	69890
60	Dailekh	12	1749	2500	20	1005	40	27810	33124
61	Jajarkot	12	15902	2	16	834	9	0	16763
62	Dolpa	12	2350	870	530	450	207	0	4407
63	Jumla	12	0	0	0	0	0	1552	1552
64	Kalikot	12	1942	11324	153	1155	173	2432	17179
65	Mugu	12	903	637	11	155	6	0	1712
66	Humla	12	1582	0	7	76	14	0	1679
	<b>Mid Western</b>	<b>180</b>	<b>43546</b>	<b>16463</b>	<b>1083</b>	<b>7539</b>	<b>561</b>	<b>250657</b>	<b>319849</b>
67	Bajura	12	13398	0	0	0	0	8833	22231
68	Bajhang	12	0	0	0	0	0	10917	10917
69	Achham	12	12943	0	200	2019	151	301	15614
70	Doti	12	1756	3545	269	544	271	3323	9708
71	Kailali	12	9158	1622	221	4639	1125	19468	36233
72	Kanchanpur	12	5451	4525	349	1106	298	25213	36942
73	Dadeldhura	12	1151	18261	139	467	110	3745	23873
74	Baitadi	12	1653	639	48	600	10	21736	24686
75	Darchula	12	1355	2116	109	1355	82	0	5017
	<b>Far Western</b>	<b>108</b>	<b>46865</b>	<b>30708</b>	<b>1335</b>	<b>10730</b>	<b>2047</b>	<b>93536</b>	<b>185221</b>



Raw Data  
Free Health Services  
Sheet 2 of 5

District Code	District Name	Received Reports	Hospital					PHC	Total
			Emergency						
			Ultrapoor Destitute	Poor	Disable	Senior Citizen	FCHV		
	Mountain	192	4922	9544	611	2487	171	4987	22722
	Hill	468	23051	4499	830	8067	815	17462	54724
	Terai	240	11875	2967	169	2490	226	25951	43678
	National Total	900	39848	17010	1610	13044	1212	48400	121124
1	Taplejung	12	71	2656	0	29	1	1	2758
2	Panchthar	12	0	3	0	6	44	1642	1695
3	Ilam	12	0	0	0	0	0	0	0
4	Jhapa	12	59	462	5	145	5	316	992
5	Morang	12	192	616	0	416	27	4577	5828
6	Sunsari	12	0	0	0	0	0	0	0
7	Dhankuta	12	0	0	0	0	0	1396	1396
8	Teharthur	12	283	8	7	204	19	143	664
9	Sankhuwasabha	12	65	2	1	328	1	0	397
10	Bhojpur	12	1582	1	0	262	1	1327	3173
11	Solukhumbu	12	0	0	0	0	0	313	313
12	Okhaldhunga	12	7	2	1	0	0	0	10
13	Khotang	12	86	50	13	120	11	0	280
14	Udaypur	12	148	0	15	101	0	294	558
15	Saptari	12	3	0	0	0	0	412	415
16	Siraha	12	8692	56	17	162	1	366	9294
	Eastern	192	11188	3856	59	1773	110	10787	27773
17	Dhanusha	12	0	0	0	0	0	0	0
18	Mahottari	12	0	0	0	0	0	8294	8294
19	Sarlahi	12	814	815	64	315	48	2141	4197
20	Sindhuli	12	95	72	2	19	3	474	665
21	Ramechhap	12	710	0	11	180	12	1066	1979
22	Dolkha	12	0	0	0	0	0	0	0
23	Sindhupalchowk	12	362	232	25	518	31	3262	4430
24	Kavre	12	0	0	0	0	0	499	499
25	Lalitpur	12	1179	0	0	0	0	0	1179
26	Bhaktapur	12	0	0	0	0	0	777	777
27	Kathmandu	12	0	0	0	0	0	30	30
28	Nuwakot	12	76	83	28	158	26	176	547
29	Rasuwa	12	82	76	0	22	13	0	193
30	Dhading	12	1751	0	19	124	7	478	2379
31	Makawanpur	12	56	145	0	3	0	89	293
32	Rautahat	12	0	0	0	0	0	0	0
33	Bara	12	0	0	0	0	0	2462	2462
34	Parsa	12	0	0	0	0	0	0	0
35	Chitwan	12	0	0	0	0	0	0	0
	Central	228	5125	1423	149	1339	140	19748	27924
36	Gorkha	12	469	541	50	1672	286	348	3366
37	Lamjung	12	6	16	0	40	0	132	194
38	Tanahu	12	3366	0	34	1767	0	678	5845
39	Syangja	12	238	0	2	69	1	33	343
40	Kaski	12	4	0	0	0	0	358	362
41	Manang	12	0	0	0	0	0	0	0
42	Mustang	12	5	61	40	12	1	100	219
43	Myagdi	12	0	0	0	0	0	25	25
44	Parbat	12	149	0	2	180	3	27	361
45	Baglung	12	0	0	0	0	0	178	178
46	Gulmi	12	2843	119	277	728	164	1677	5808
47	Palpa	12	2	31	5	467	7	324	836
48	Nawalparasi	12	65	135	0	0	16	1021	1237
49	Rupandehi	12	454	398	47	380	31	0	1310
50	Kapilvastu	12	0	0	0	0	0	0	0
51	Arghakhanchi	12	40	0	0	5	0	0	45
	Western	192	7641	1301	457	5320	509	4901	20129
52	Pyuthan	12	1067	0	7	294	2	996	2366
53	Rolpa	12	244	90	38	107	21	366	866
54	Rukum	12	0	0	0	0	0	0	0
55	Salyan	12	784	0	21	99	0	576	1480
56	Dang	12	0	0	0	0	0	3017	3017
57	Banke	12	0	0	0	0	0	1224	1224
58	Bardiya	12	0	0	0	1	0	285	286
59	Surkhet	12	0	0	0	0	0	2224	2224
60	Dailekh	12	1769	255	12	253	14	8	2311
61	Jajarkot	12	2557	0	2	125	3	0	2687
62	Dolpa	12	408	187	26	164	5	0	790
63	Jumla	12	0	0	0	0	0	38	38
64	Kailikot	12	220	1097	39	231	30	122	1739
65	Mugu	12	73	33	0	9	0	0	115
66	Humla	12	291	6	3	11	0	0	311
	Mid Western	180	7413	1668	148	1294	75	8856	19454
67	Bajura	12	1463	0	0	0	0	749	2212
68	Bajhang	12	0	0	0	0	0	402	402
69	Achham	12	2158	0	20	221	21	0	2420
70	Doti	12	131	211	171	145	131	91	880
71	Kailali	12	978	25	4	778	7	0	1792
72	Kanchanpur	12	618	460	32	293	91	1836	3330
73	Dadeldhura	12	145	1003	21	134	20	263	1586
74	Baitadi	12	1106	1869	72	584	19	767	4417
75	Darchula	12	1882	5194	477	1163	89	0	8805
	Far Western	108	8481	8762	797	3318	378	4108	25844

**Raw Data**  
Free Health Services  
Sheet 3 of 5

District Code	District Name	Received Reports	Hospital Inpatients					PHC	Total
			Hospital						
			Ultrapoor Destitute	Poor	Disable	Senior Citizen	FCHV		
	Mountain	192	1869	4334	307	1300	96	703	8609
	Hill	468	13009	1622	526	3784	122	4519	23582
	Terai	240	2442	615	477	438	578	5207	9757
	<b>National Total</b>	<b>900</b>	<b>17320</b>	<b>6571</b>	<b>1310</b>	<b>5522</b>	<b>796</b>	<b>10429</b>	<b>41948</b>
1	Taplejung	12	69	2396	252	41	4	0	2762
2	Panchthar	12	2	2	0	0	0	88	92
3	Ilam	12	0	0	0	0	0	0	0
4	Jhapa	12	0	0	0	0	0	0	0
5	Morang	12	14	7	0	0	70	614	705
6	Sunsari	12	0	0	0	0	0	0	0
7	Dhankuta	12	0	0	0	0	0	129	129
8	Teharhum	12	586	2	1	133	0	0	722
9	Sankhuwasabha	12	188	1	6	338	0	0	533
10	Bhojpur	12	1806	0	0	348	0	952	3106
11	Solukhumbu	12	0	0	0	0	0	106	106
12	Okhaldhunga	12	263	195	42	76	0	0	576
13	Khotang	12	4	2	3	53	0	0	62
14	Udaypur	12	81	0	8	109	0	150	348
15	Saptari	12	0	0	0	0	0	211	211
16	Siraha	12	585	4	2	0	0	21	612
	<b>Eastern</b>	<b>192</b>	<b>3598</b>	<b>2609</b>	<b>314</b>	<b>1098</b>	<b>74</b>	<b>2271</b>	<b>9964</b>
17	Dhanusha	12	0	0	0	0	0	0	0
18	Mahottari	12	0	0	0	0	0	508	508
19	Sarlahi	12	48	214	13	84	19	466	844
20	Sindhuli	12	0	0	0	0	0	0	0
21	Ramechhap	12	204	0	2	193	0	98	497
22	Dolkha	12	0	0	0	0	0	0	0
23	Sindhupalchowk	12	124	80	4	482	5	326	1021
24	Kavre	12	0	0	0	0	0	129	129
25	Lalitpur	12	1	1	1	0	0	0	3
26	Bhaktapur	12	0	0	0	0	0	13	13
27	Kathmandu	12	0	0	0	0	0	0	0
28	Nuwakot	12	61	11	0	139	0	15	226
29	Rasuwa	12	49	57	1	10	4	0	121
30	Dhading	12	551	0	7	40	2	263	863
31	Makawanpur	12	0	0	0	0	0	0	0
32	Rautahat	12	0	0	0	0	0	0	0
33	Bara	12	0	0	0	0	0	255	255
34	Parsa	12	0	0	0	0	0	0	0
35	Chitwan	12	0	0	0	0	0	0	0
	<b>Central</b>	<b>228</b>	<b>1038</b>	<b>363</b>	<b>28</b>	<b>948</b>	<b>30</b>	<b>2073</b>	<b>4480</b>
36	Gorkha	12	185	109	4	453	16	121	888
37	Lamjung	12	17	54	7	182	2	30	292
38	Tanahu	12	1685	0	7	336	1	0	2029
39	Syangja	12	624	0	13	237	1	73	948
40	Kaski	12	0	0	0	0	0	0	0
41	Manang	12	0	0	0	0	0	0	0
42	Mustang	12	22	64	13	66	1	70	236
43	Myagdi	12	0	0	0	0	0	0	0
44	Parbat	12	222	0	1	267	0	0	490
45	Baglung	12	0	0	0	0	0	605	605
46	Gulmi	12	774	0	317	85	23	177	1376
47	Palpa	12	8	14	2	70	0	19	113
48	Nawalparasi	12	5	7	0	0	1	104	117
49	Rupandehi	12	80	65	4	70	6	0	225
50	Kapilvastu	12	0	0	0	0	0	0	0
51	Arghakhanchi	12	15	0	0	4	0	0	19
	<b>Western</b>	<b>192</b>	<b>3637</b>	<b>313</b>	<b>368</b>	<b>1770</b>	<b>51</b>	<b>1199</b>	<b>7338</b>
52	Pyuthan	12	239	0	0	223	0	221	683
53	Rolpa	12	233	61	5	40	2	371	712
54	Rukum	12	0	0	0	0	0	0	0
55	Salyan	12	790	0	7	139	0	141	1077
56	Dang	12	25	8	422	3	424	415	1297
57	Banke	12	0	0	0	0	0	1859	1859
58	Bardiya	12	3	3	7	14	4	0	31
59	Surkhet	12	0	0	0	0	0	729	729
60	Dailekh	12	1466	0	0	156	5	0	1627
61	Jajarkot	12	1176	0	7	88	3	0	1274
62	Dolpa	12	306	105	0	142	78	0	631
63	Jumla	12	0	0	0	0	0	0	0
64	Kalikot	12	101	786	6	59	4	0	956
65	Mugu	12	122	23	1	14	0	0	160
66	Humla	12	107	0	0	9	0	0	116
	<b>Mid Western</b>	<b>180</b>	<b>4568</b>	<b>986</b>	<b>455</b>	<b>887</b>	<b>520</b>	<b>3736</b>	<b>11152</b>
67	Bajura	12	505	0	0	0	0	0	505
68	Bajhang	12	0	0	0	0	0	201	201
69	Achham	12	1508	0	9	158	3	0	1678
70	Doti	12	38	52	69	56	57	2	274
71	Kailali	12	1317	0	0	124	14	0	1455
72	Kanchanpur	12	365	307	29	143	40	754	1638
73	Dadeldhura	12	169	677	13	128	7	54	1048
74	Baitadi	12	301	442	1	71	0	139	954
75	Darchula	12	276	822	24	139	0	0	1261
	<b>Far Western</b>	<b>108</b>	<b>4479</b>	<b>2300</b>	<b>145</b>	<b>819</b>	<b>121</b>	<b>1150</b>	<b>9014</b>

Raw Data  
Free Health Services  
Sheet 4 of 5

District Code	District Name	Received Reports	Reffer						Total
			Hospital					PHC	
			Ultrapoor Destitute	Poor	Disable	Senior Citizen	FCHV		
	Mountain	192	112	135	10	105	11	135	508
	Hill	468	944	204	45	370	32	1496	3091
	Terai	240	276	182	22	207	4	6991	7682
	<b>National Total</b>	<b>900</b>	<b>1332</b>	<b>521</b>	<b>77</b>	<b>682</b>	<b>47</b>	<b>8622</b>	<b>11281</b>
1	Taplejung	12	17	50	1	16	5	0	89
2	Panchthar	12	0	20	0	0	0	43	63
3	Ilam	12	0	0	0	0	0	3	3
4	Jhapa	12	37	39	4	57	0	379	516
5	Morang	12	30	19	0	69	0	520	638
6	Sunsari	12	0	0	0	0	0	0	0
7	Dhankuta	12	0	0	0	0	0	10	10
8	Teharthurm	12	29	3	2	18	0	6	58
9	Sankhuwasabha	12	35	1	1	52	0	0	89
10	Bhojpur	12	12	0	0	30	0	34	76
11	Solukhumbu	12	0	0	0	0	0	15	15
12	Okhaldhunga	12	1	0	0	0	0	0	1
13	Khotang	12	8	5	0	12	0	0	25
14	Udaypur	12	0	0	0	0	0	50	50
15	Saptari	12	105	0	2	0	0	94	201
16	Siraha	12	39	63	5	0	0	36	143
	<b>Eastern</b>	<b>192</b>	<b>313</b>	<b>200</b>	<b>15</b>	<b>254</b>	<b>5</b>	<b>1190</b>	<b>1977</b>
17	Dhanusha	12	0	0	0	0	0	42	42
18	Mahottari	12	0	0	0	0	0	4866	4866
19	Sarlahi	12	40	35	11	67	3	135	291
20	Sindhuli	12	3	5	0	1	0	20	29
21	Ramechhap	12	0	0	0	0	0	30	30
22	Dolkha	12	0	0	0	0	0	0	0
23	Sindhupalchowk	12	0	0	0	12	5	22	39
24	Kavre	12	0	0	0	0	0	569	569
25	Lalitpur	12	0	0	0	0	0	0	0
26	Bhaktapur	12	0	0	0	0	0	33	33
27	Kathmandu	12	0	0	0	0	0	0	0
28	Nuwakot	12	5	7	0	16	0	80	108
29	Rasuwa	12	3	0	0	0	0	0	3
30	Dhading	12	421	0	1	40	0	78	540
31	Makawanpur	12	0	13	0	0	0	5	18
32	Rautahat	12	0	0	0	0	0	56	56
33	Bara	12	0	0	0	0	0	54	54
34	Parsa	12	0	0	0	0	0	0	0
35	Chitwan	12	0	0	0	0	0	0	0
	<b>Central</b>	<b>228</b>	<b>472</b>	<b>60</b>	<b>12</b>	<b>136</b>	<b>8</b>	<b>5990</b>	<b>6678</b>
36	Gorkha	12	18	9	0	18	0	54	99
37	Lamjung	12	0	3	0	1	0	0	4
38	Tanahu	12	19	0	1	2	0	14	36
39	Syangja	12	108	25	30	172	21	1	357
40	Kaski	12	1	0	0	0	0	0	1
41	Manang	12	0	0	0	0	0	0	0
42	Mustang	12	4	13	3	16	0	18	54
43	Myagdi	12	0	0	0	0	0	0	0
44	Parbat	12	8	0	0	1	0	0	9
45	Baglung	12	0	0	0	0	0	0	0
46	Gulmi	12	0	0	0	0	0	2	2
47	Palpa	12	0	0	0	0	0	0	0
48	Nawalparasi	12	1	11	0	0	1	68	81
49	Rupandehi	12	0	0	0	0	0	0	0
50	Kapilvastu	12	0	0	0	0	0	0	0
51	Arghakhanchi	12	1	0	0	0	0	0	1
	<b>Western</b>	<b>192</b>	<b>160</b>	<b>61</b>	<b>34</b>	<b>210</b>	<b>22</b>	<b>157</b>	<b>644</b>
52	Pyuthan	12	0	0	0	0	0	229	229
53	Rolpa	12	13	0	1	7	0	31	52
54	Rukum	12	0	0	0	0	0	0	0
55	Salyan	12	0	0	0	0	0	5	5
56	Dang	12	0	0	0	0	0	660	660
57	Banke	12	0	0	0	3	0	4	7
58	Bardiya	12	0	0	0	0	0	12	12
59	Surkhet	12	0	0	0	0	0	120	120
60	Dalekh	12	0	0	0	0	0	21	21
61	Jajarkot	12	201	0	0	7	0	0	208
62	Dolpa	12	23	5	5	2	1	0	36
63	Jumla	12	0	0	0	0	0	5	5
64	Kalikot	12	3	58	0	3	0	12	76
65	Mugu	12	22	8	0	0	0	0	30
66	Humla	12	5	0	0	4	0	0	9
	<b>Mid Western</b>	<b>180</b>	<b>267</b>	<b>71</b>	<b>6</b>	<b>26</b>	<b>1</b>	<b>1099</b>	<b>1470</b>
67	Bajura	12	0	0	0	0	0	11	11
68	Bajhang	12	0	0	0	0	0	29	29
69	Achham	12	44	0	0	7	0	0	51
70	Doti	12	16	10	10	9	5	1	51
71	Kailali	12	16	0	0	9	0	0	25
72	Kanchanpur	12	8	15	0	2	0	65	90
73	Dadeldhura	12	27	104	0	29	6	0	166
74	Baitadi	12	9	0	0	0	0	57	66
75	Darchula	12	0	0	0	0	0	23	23
	<b>Far Western</b>	<b>108</b>	<b>120</b>	<b>129</b>	<b>10</b>	<b>56</b>	<b>11</b>	<b>186</b>	<b>512</b>



**Health Laboratory Services**  
Sheet 1 of 8

**BACTERIOLOGY**

District Code	District Name	Received Reports	Gram stain	Blood Culture	Urine Culture	Body Fluid Culture/US/AFB	Stool Culture	Water Culture	Pus Culture	Sputum Culture	ENT culture	Sputum AFB		Widal Test	Fungus	Leptospirosis	CSF Culture	Others
												Total	+ve					
												Mountain	192					
Hill	468	2489	7308	14635	883	906	5	908	2475	148	28249	7896	29484	2801	524	433	1125	
Terai	240	1062	746	1796	126	71	1	413	8795	1383	28213	1585	28408	432	154	32	291	
<b>National Total</b>	<b>900</b>	<b>3667</b>	<b>8054</b>	<b>16431</b>	<b>1015</b>	<b>977</b>	<b>6</b>	<b>1321</b>	<b>11270</b>	<b>1531</b>	<b>59788</b>	<b>9684</b>	<b>63169</b>	<b>3240</b>	<b>678</b>	<b>465</b>	<b>1420</b>	
1 Taplejung	12	0	0	0	0	0	0	0	0	0	171	9	762	0	0	0	0	
2 Panchthar	12	2	0	0	0	0	0	0	0	0	399	24	542	0	0	0	0	
3 Ilam	12	1	21	24	3	0	0	7	1	0	514	22	1199	210	0	3	15	
4 Jhapa	12	442	245	1361	118	34	1	296	8736	1379	14011	472	7922	423	4	15	201	
5 Morang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6 Sunsari	12	0	0	0	0	0	0	0	0	0	5966	325	1230	0	0	0	0	
7 Dhankuta	12	0	0	0	0	0	0	0	0	0	972	58	1350	0	0	0	9	
8 Teaharthur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9 Sankhuwasabha	12	0	0	0	0	0	0	0	0	0	68	2	250	0	0	0	0	
10 Bhojpur	12	8	0	0	0	0	0	0	0	0	668	36	1250	0	0	0	0	
11 Solukhumbu	12	1	0	0	0	0	0	0	0	0	132	10	123	0	0	0	4	
12 Okhaldhunga	12	2	0	0	3	0	0	0	0	0	1327	156	169	77	0	0	148	
13 Khotang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14 Udaypur	12	0	0	0	0	0	0	0	39	3	992	91	930	0	0	0	0	
15 Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16 Siraha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>Eastern</b>	<b>192</b>	<b>456</b>	<b>266</b>	<b>1385</b>	<b>124</b>	<b>34</b>	<b>1</b>	<b>303</b>	<b>8776</b>	<b>1382</b>	<b>25220</b>	<b>1205</b>	<b>15727</b>	<b>710</b>	<b>4</b>	<b>18</b>	<b>377</b>	
17 Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18 Mahottari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19 Sarlahi	12	6	3	0	0	0	0	0	0	0	612	71	1605	0	0	0	0	
20 Sindhuli	12	0	0	0	0	0	0	0	0	0	506	47	399	0	0	0	0	
21 Ramechhap	12	0	0	0	0	0	0	0	0	0	156	5	175	0	0	0	0	
22 Dolkha	12	41	0	0	0	0	0	0	0	0	294	10	697	7	0	0	0	
23 Sindhupalchowk	12	0	0	0	0	0	0	0	0	0	216	20	596	0	0	0	0	
24 Kavre	12	18	360	293	0	0	0	51	0	0	701	21	465	0	0	0	0	
25 Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26 Bhaktapur	12	166	779	1057	20	20	0	81	97	5	183	2	257	0	0	290	0	
27 Kathmandu	12	1221	3180	9546	631	565	3	481	1187	79	2315	80	1895	86	8	105	406	
28 Nuwakot	12	0	0	0	0	0	0	0	40	1	385	8	933	0	0	0	3	
29 Rasuwa	12	3	0	0	0	0	0	0	0	0	94	10	313	0	0	0	0	
30 Dhading	12	53	18	1	0	0	0	0	0	0	846	36	1156	0	0	0	0	
31 Makawanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
32 Rautahat	12	0	0	0	0	0	0	0	0	0	112	17	216	0	0	0	0	
33 Bara	12	0	0	0	0	0	0	0	0	0	72	4	1203	0	0	0	1	
34 Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35 Chitwan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>Central</b>	<b>228</b>	<b>1508</b>	<b>4340</b>	<b>10897</b>	<b>651</b>	<b>585</b>	<b>3</b>	<b>613</b>	<b>1324</b>	<b>85</b>	<b>6492</b>	<b>331</b>	<b>9910</b>	<b>93</b>	<b>8</b>	<b>395</b>	<b>410</b>	
36 Gorkha	12	6	54	50	1	48	0	0	0	0	1968	179	2166	31	1	0	28	
37 Lamjung	12	0	15	109	0	0	0	6	0	1	114	1	229	1	2	0	0	
38 Tanahu	12	5	0	13	0	0	2	5	0	0	321	27	1493	84	0	0	281	
39 Syangja	12	42	3	0	2	1	0	22	0	0	1321	130	2353	17	0	0	0	
40 Kaski	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
41 Manang	12	3	0	0	0	0	0	0	0	0	47	2	20	0	0	0	0	
42 Mustang	12	0	0	0	0	0	0	0	0	0	3	0	3	0	0	0	0	
43 Myagdi	12	0	0	0	0	0	0	0	0	0	1400	64	419	0	0	0	0	
44 Parbat	12	0	0	0	0	0	0	0	0	0	434	13	1346	0	0	0	0	
45 Baglung	12	3	0	0	0	0	0	0	0	0	246	11	370	0	0	0	0	
46 Gulmi	12	19	17	12	0	0	0	1	71	2	1196	49	1616	15	0	0	0	
47 Palpa	12	832	2861	3530	213	272	0	254	983	52	1202	6047	572	2263	513	35	87	
48 Nawalparasi	12	0	0	0	0	0	0	0	0	0	2030	239	1275	0	0	0	0	
49 Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
50 Kapilvastu	12	505	439	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
51 Arghakhanchi	12	0	0	0	0	0	0	0	0	0	129	3	297	0	0	0	0	
<b>Western</b>	<b>192</b>	<b>1415</b>	<b>3389</b>	<b>3714</b>	<b>216</b>	<b>321</b>	<b>2</b>	<b>288</b>	<b>1054</b>	<b>55</b>	<b>10411</b>	<b>6765</b>	<b>12159</b>	<b>2411</b>	<b>516</b>	<b>35</b>	<b>396</b>	
52 Pyuthan	12	0	0	0	0	0	0	0	0	0	2135	239	1340	0	0	0	0	
53 Rolpa	12	0	0	0	0	0	0	0	0	0	674	56	547	0	0	0	33	
54 Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
55 Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
56 Dang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
57 Banke	12	83	15	359	8	32	0	117	52	4	998	79	2443	9	0	17	53	
58 Bardiya	12	0	0	0	0	0	0	0	0	0	2846	243	5380	0	0	0	0	
59 Surkhet	12	0	0	0	0	0	0	0	0	0	790	54	618	0	0	0	0	
60 Dailekh	12	6	0	0	0	0	0	0	0	0	1050	67	742	0	0	0	3	
61 Jajarkot	12	0	0	0	0	0	0	0	57	5	551	28	444	0	0	0	0	
62 Dolpa	12	0	0	0	0	0	0	0	0	0	182	3	134	0	0	0	0	
63 Jumla	12	0	0	0	0	0	0	0	0	0	40	2	423	0	0	0	0	
64 Kalikot	12	68	0	0	6	0	0	0	0	0	682	26	190	0	0	0	0	
65 Mugu	12	0	0	0	0	0	0	0	0	0	95	4	61	0	0	0	0	
66 Humla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>Mid Western</b>	<b>180</b>	<b>157</b>	<b>15</b>	<b>359</b>	<b>14</b>	<b>32</b>	<b>0</b>	<b>117</b>	<b>109</b>	<b>9</b>	<b>10043</b>	<b>801</b>	<b>12322</b>	<b>9</b>	<b>0</b>	<b>17</b>	<b>89</b>	
67 Bajura	12	0	0	0	0	0	0	0	0	0	391	17	434	0	0	0	0	
68 Bajhang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
69 Achham	12	56	0	0	10	0	0	0	0	0	1752	112	1784	0	0	0	37	
70 Doti	12	0	0	0	0	0	0	0	0	0	1517	113	856	0	0	0	4	
71 Kailali	12	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
72 Kanchanpur	12	20	44	76	0	5	0	7										

### Health Laboratory Services

Sheet 2 of 8

District Code	District Name	Received Reports	BIOCHEMISTRY																								
			Sugar	Urea	Amylase	NA K+	Total Protein	Albumin	Bilirubin T&D	GPT	Alk. Phosphatase	Uric Acid	Creatinine	Cholesterol	SGOT	LDH	Acid Phosphatase	Calcium	Phosp horus	GGT	CPK	CPK MB	24 Hrs Urinary Protein	Creatinine Clearance	S-tropoin-I	24 hours urinary Uric Acid	Others
Mountain		192	7680	2484	53	597	411	394	4082	251	221	3031	3047	122	284	16	0	22	0	85	0	13	0	0	13	2	18
Hill		468	149988	61756	7143	51139	24637	35112	74073	41452	29034	37220	74246	10925	38023	1297	111	5108	1822	656	892	1239	358	1814	877	21	1669
Terai		240	45586	20113	10087	5700	2143	2585	17183	4544	4645	9567	18867	1677	3939	184	26	608	6	177	61	52	97	106	611	7	330
National Total		900	203254	84353	17283	57436	27191	38091	95338	46247	33900	49818	96160	12724	42246	1497	137	5738	1828	918	953	1304	455	1920	1501	30	2017
1 Taplejung		12	2354	473	0	0	125	103	1406	0	0	903	1232	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2 Panchthar		12	871	150	0	4	1	1	589	2	1	251	191	0	1	0	0	0	0	0	0	0	0	0	0	0	8
3 Ilam		12	4763	2233	147	647	17	32	1309	120	132	960	2300	30	124	16	0	18	10	0	11	7	12	0	16	2	1
4 Jhapa		12	29395	14483	9717	3026	1651	1806	9689	3322	3472	6663	13033	1345	2629	110	26	428	6	174	43	34	82	106	587	7	193
5 Morang		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6 Sunsari		12	1705	224	9	1	5	33	735	6	4	150	216	6	7	0	0	0	0	0	0	0	0	0	0	0	0
7 Dhankuta		12	1125	265	5	0	85	77	677	0	86	199	240	5	118	0	0	0	0	0	0	0	0	0	0	0	73
8 Teharthur		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9 Sankhuwasabha		12	212	73	0	0	0	150	0	110	74	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10 Bhojpur		12	1128	236	27	23	84	90	396	50	68	427	255	39	65	0	0	0	0	0	0	0	0	0	0	0	0
11 Solukhumbu		12	1051	512	46	243	189	178	433	233	192	248	600	43	249	16	0	8	0	85	0	0	0	0	12	0	18
12 Okhaldhunga		12	1950	129	52	16	75	88	1461	183	206	420	1496	46	275	0	0	0	0	0	0	0	0	88	0	0	15
13 Khotang		12	0	0	0	0	0	5	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14 Udaypur		12	1232	220	6	143	51	54	293	61	53	126	136	6	47	5	0	0	0	0	0	0	0	0	0	0	1
15 Saptari		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16 Siraha		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Eastern		192	45786	18998	10009	4103	2283	2462	17143	3977	4214	10459	19773	1520	3515	147	26	454	16	259	54	41	94	194	615	9	309
17 Dhanusha		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18 Mahottari		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19 Sarlahi		12	1137	361	0	49	170	209	0	370	71	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20 Sindhuli		12	2129	73	0	0	0	142	0	95	83	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21 Ramechhap		12	1393	258	55	85	8	14	61	41	21	303	291	29	93	33	2	21	0	0	0	0	0	0	0	0	0
22 Dolkha		12	1756	721	0	313	68	88	567	1	0	631	398	61	14	0	0	13	0	0	0	0	0	0	0	0	0
23 Sindhupalchowk		12	776	116	0	38	3	6	318	17	29	258	207	4	16	0	0	1	0	0	0	0	0	0	0	0	0
24 Kavre		12	3075	44	102	655	46	131	468	0	244	378	102	101	301	0	0	0	0	0	0	75	5	0	63	0	0
25 Lalitpur		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26 Bhaktapur		12	6618	2370	320	3079	99	198	764	603	515	990	2592	569	553	59	5	248	43	10	26	55	3	712	38	0	
27 Kathmandu		12	67425	39623	2405	29842	21911	31056	41257	32450	22245	15015	39273	8458	31360	1009	104	3837	1567	492	812	681	250	898	449	14	116
28 Nuwakot		12	1247	515	1	10	0	28	890	0	0	463	501	1	0	0	0	0	0	0	0	0	0	0	0	0	0
29 Rasuwa		12	216	24	7	0	0	440	0	0	173	25	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30 Dhading		12	1374	554	8	32	3	198	546	3	0	632	468	0	0	0	4	0	0	0	0	0	0	0	0	0	0
31 Makawanpur		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32 Rautahat		12	20	0	0	0	0	15	0	20	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33 Bara		12	258	31	0	0	0	63	0	44	40	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
34 Parsa		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35 Chitwan		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Central		228	87424	44690	2898	34054	22187	31889	45740	33115	23054	19372	44051	9237	32337	1101	111	4124	1610	502	838	811	258	1610	550	14	117
36 Gorkha		12	3835	588	35	168	2	0	1657	32	38	1944	752	21	32	0	5	0	0	0	0	0	0	0	0	0	0
37 Lamjung		12	279	17	7	42	4	7	303	14	8	65	94	39	9	0	0	0	0	0	0	0	0	0	0	0	0
38 Tanahu		12	3961	443	16	80	23	22	2750	189	15	1991	575	256	169	0	0	79	0	0	1	0	0	0	0	0	0
39 Syangja		12	4250	530	0	29	5	158	1845	23	0	1313	608	32	24	0	10	0	0	0	0	0	0	0	0	0	0
40 Kaski		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41 Manang		12	236	92	0	0	0	46	0	88	24	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42 Mustang		12	44	15	0	0	0	10	0	12	16	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
43 Myagdi		12	691	170	0	0	0	397	86	62	310	186	0	86	0	0	0	0	0	0	0	0	0	0	0	0	0
44 Parbat		12	1066	471	0	0	0	443	0	0	359	417	53	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45 Baglung		12	365	154	0	0	0	84	0	0	168	164	0	0	0	0	4	0	0	0	0	0	0	0	0	0	0
46 Gulmi		12	3823	593	13	204	12	4	3638	234	227	1131	1152	97	101	0	0	4	0	0	0	0	0	0	0	0	0
47 Palpa		12	28634	9015	3939	14332	1786	2670	7591	6821	5046	7164	18999	993	4611	170	0	819	202	154	42	421	88				

**Health Laboratory Services**  
Sheet 3 of 8

**Virology**

District Code	District Name	Received Reports	HIV		HCV		Western Blot		HBsAg		HEV		CD4 count	Viral Load	Others
			Total	+Ve	Total	+Ve	Total	+Ve	Total	+Ve	Total	+Ve			
	Mountain	192	1629	12	389	1	8	1	1416	29	4	0	0	0	0
	Hill	468	5190	574	26504	127	2506	3	41850	310	2436	13	644	2	304
	Terai	240	22218	1064	2390	101	136	0	16948	125	20	0	74	0	371
	<b>National Total</b>	<b>900</b>	<b>75437</b>	<b>1650</b>	<b>29283</b>	<b>229</b>	<b>2650</b>	<b>4</b>	<b>60214</b>	<b>464</b>	<b>2460</b>	<b>13</b>	<b>718</b>	<b>2</b>	<b>675</b>
1	Taplejung	12	468	0	87	0	0	0	305	5	0	0	0	0	0
2	Panchthar	12	19	1	1	0	0	0	16	0	0	0	0	0	0
3	Ilam	12	840	0	91	0	0	3	996	1	0	0	0	0	0
4	Jhapa	12	12418	1008	1564	101	86	0	10752	27	0	0	0	0	155
5	Morang	12	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Sunsari	12	3574	0	12	0	0	0	83	1	0	0	0	0	0
7	Dhankuta	12	559	1	3	0	0	0	482	0	0	0	0	0	0
8	Tehrathum	12	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	3	0	0	0	0	0	39	2	0	0	0	0	0
10	Bhojpur	12	117	0	27	1	0	0	280	1	0	0	0	0	0
11	Solukhumbu	12	269	1	74	0	8	1	247	1	0	0	0	0	0
12	Okhaldhunga	12	1389	0	388	0	0	0	1334	3	0	0	0	0	35
13	Khotang	12	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Udaypur	12	302	2	87	0	0	0	182	1	3	0	0	0	0
15	Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Siraha	12	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Eastern</b>	<b>192</b>	<b>19958</b>	<b>1013</b>	<b>2334</b>	<b>102</b>	<b>94</b>	<b>4</b>	<b>14716</b>	<b>42</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>190</b>
17	Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	0	0
18	Mahottari	12	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Sarlahi	12	364	9	1	0	50	0	108	1	0	0	0	0	0
20	Sindhuli	12	647	3	0	0	0	0	65	0	6	0	0	0	0
21	Ramechhap	12	40	5	2	0	0	0	25	0	0	0	0	0	0
22	Dolkha	12	344	1	190	0	0	0	410	2	0	0	0	0	0
23	Sindhupalchowk	12	126	4	1	0	0	0	80	0	0	0	0	0	0
24	Kavre	12	685	0	15	0	0	0	890	0	0	0	0	0	0
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	385	9	174	2	74	0	275	68	5	1	1	0	0
27	Kathmandu	12	24140	167	19956	123	1653	0	24712	137	2305	12	0	2	107
28	Nuwakot	12	336	2	2	0	0	0	306	6	0	0	0	0	0
29	Rasuwa	12	103	0	0	0	0	0	22	0	0	0	0	0	0
30	Dhading	12	267	0	1	0	0	0	270	0	0	0	0	0	0
31	Makawanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Rautahat	12	22	0	0	0	0	0	0	0	0	0	0	0	0
33	Bara	12	43	0	1	0	0	0	59	1	10	0	0	0	4
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Central</b>	<b>228</b>	<b>27502</b>	<b>200</b>	<b>20343</b>	<b>125</b>	<b>1777</b>	<b>0</b>	<b>27222</b>	<b>215</b>	<b>2326</b>	<b>13</b>	<b>1</b>	<b>2</b>	<b>111</b>
36	Gorkha	12	1912	20	14	0	0	0	304	6	0	0	0	0	0
37	Lamjung	12	192	0	2	0	0	0	10	0	0	0	0	0	0
38	Tanahu	12	973	1	10	0	0	0	127	1	0	0	0	0	1
39	Syangja	12	188	19	51	0	0	0	718	1	77	0	0	0	0
40	Kaski	12	0	0	0	0	0	0	0	0	0	0	0	0	0
41	Manang	12	46	1	0	0	0	0	45	1	0	0	0	0	0
42	Mustang	12	0	0	0	0	0	0	0	0	0	0	0	0	0
43	Myagdi	12	347	1	0	0	0	0	266	5	0	0	0	0	0
44	Parbat	12	29	5	0	0	0	0	0	0	0	0	0	0	0
45	Baglung	12	96	0	62	0	0	0	0	0	0	0	0	0	0
46	Gulmi	12	759	11	125	0	0	0	149	3	3	0	0	0	0
47	Palpa	12	10888	163	4401	0	736	0	7070	15	0	0	0	0	158
48	Nawalparasi	12	81	6	2	0	0	0	138	1	0	0	0	0	11
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Arghakhanchi	12	302	0	111	0	42	0	83	0	0	0	0	0	0
	<b>Western</b>	<b>192</b>	<b>15813</b>	<b>227</b>	<b>4778</b>	<b>0</b>	<b>778</b>	<b>0</b>	<b>8910</b>	<b>33</b>	<b>80</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>170</b>
52	Pyuthan	12	538	3	391	0	0	0	491	0	0	0	0	0	0
53	Rolpa	12	200	1	1	0	0	0	80	0	36	0	0	0	0
54	Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0
56	Dang	12	0	0	0	0	0	0	0	0	0	0	0	0	0
57	Banke	12	3329	16	810	0	0	0	3270	69	10	0	74	0	10
58	Bardiya	12	718	7	0	0	0	0	344	5	0	0	0	0	42
59	Surkhet	12	5	0	0	0	0	0	0	0	0	0	0	0	0
60	Datlehk	12	815	7	261	0	0	0	760	6	0	0	0	0	3
61	Jajarkot	12	158	0	0	0	0	0	18	6	1	0	0	0	0
62	Dolpa	12	9	0	0	0	0	0	8	0	4	0	0	0	0
63	Jumla	12	23	0	0	0	0	0	44	11	0	0	0	0	0
64	Kalikot	12	81	2	33	1	0	0	69	4	0	0	0	0	0
65	Mugu	12	2	0	0	0	0	0	2	0	0	0	0	0	0
66	Humla	12	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Mid Western</b>	<b>180</b>	<b>5878</b>	<b>36</b>	<b>1496</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>5086</b>	<b>101</b>	<b>51</b>	<b>0</b>	<b>74</b>	<b>0</b>	<b>55</b>
67	Bajura	12	74	2	0	0	0	0	25	2	0	0	0	0	0
68	Bajhang	12	0	0	0	0	0	0	0	0	0	0	0	0	0
69	Achham	12	2315	82	160	1	0	0	1505	44	0	0	368	0	0
70	Doti	12	809	63	31	0	0	0	150	3	0	0	275	0	0
71	Kailali	12	0	0	0	0	0	0	0	0	0	0	0	0	0
72	Kanchanpur	12	1669	18	0	0	0	0	2194	20	0	0	0	0	149
73	Dadeldhura	12	504	0	71	0	1	0	118	2	0	0	0	0	0
74	Baitadi	12	834	8	66	0	0	0	168	1	0	0	0	0	0
75	Darchula	12	81	1	4	0	0	0	120	1	0	0	0	0	0
	<b>Far Western</b>	<b>108</b>	<b>6286</b>	<b>174</b>	<b>332</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>4280</b>	<b>73</b>	<b>0</b>	<b>0</b>	<b>643</b>	<b>0</b>	<b>149</b>

## Health Laboratory Services

### HISTOLO

District Code	District Name	Received Reports	Histology					Cytology					Immunohistochemistry				
			Biopsy	Pap smear	Sputum smear	Bodyfluid smear	Other	ER	PR	GFAP	S100	Vimentin	Cytokeratin	Others			
	Mountain	192	0	0	670	2	0	0	0	0	0	0	0	0	0	0	6
	Hill	468	4386	2767	1619	345	212	0	0	0	0	0	0	0	0	0	5
	Terai	240	369	223	2086	62	42	0	0	0	0	0	0	0	0	0	103
	National Total	900	4755	2990	4375	409	254	0	0	0	0	0	0	0	0	0	112
1	Taplejung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	Panchthar	12	0	0	25	0	0	0	0	0	0	0	0	0	0	0	0
3	Ilam	12	0	0	183	0	0	0	0	0	0	0	0	0	0	0	0
4	Jhapa	12	194	27	30	28	24	0	0	0	0	0	0	0	0	0	0
5	Morang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Sunsari	12	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0
7	Dhankuta	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8	Tehrathum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	0	0	46	0	0	0	0	0	0	0	0	0	0	0	0
10	Bhojpur	12	0	0	160	0	0	0	0	0	0	0	0	0	0	0	0
11	Solukhumbu	12	0	0	9	0	0	0	0	0	0	0	0	0	0	0	6
12	Okhaldhunga	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	Khotang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Udaypur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15	Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Siraha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Eastern	192	194	27	457	28	24	0	0	0	0	0	0	0	0	0	6
17	Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	Mahottari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Sarlahi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	Sindhuli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21	Ramechhap	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Dolkha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	Sindhupalchowk	12	0	0	9	0	0	0	0	0	0	0	0	0	0	0	0
24	Kavre	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	137	115	70	11	0	0	0	0	0	0	0	0	0	0	0
27	Kathmandu	12	3213	2387	338	225	161	0	0	0	0	0	0	0	0	0	2
28	Nuwakot	12	0	0	24	0	0	0	0	0	0	0	0	0	0	0	0
29	Rasuwa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30	Dhading	12	0	0	9	0	0	0	0	0	0	0	0	0	0	0	0
31	Makawanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Rautahat	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33	Bara	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Central	228	3350	2502	450	236	161	0	0	0	0	0	0	0	0	0	2
36	Gorkha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
37	Lamjung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
38	Tanahu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
39	Syangja	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40	Kaski	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41	Manang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42	Mustang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
43	Myagdi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
44	Parbat	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45	Baglung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
46	Gulmi	12	0	0	40	3	0	0	0	0	0	0	0	0	0	0	0
47	Palpa	12	1036	265	79	103	51	0	0	0	0	0	0	0	0	0	1
48	Nawalparasi	12	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Arghakhanchi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Western	192	1036	265	121	106	51	0	0	0	0	0	0	0	0	0	1
52	Pyuthan	12	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0
53	Rolpa	12	0	0	21	0	0	0	0	0	0	0	0	0	0	0	0
54	Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
56	Dang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
57	Banke	12	175	196	25	13	0	0	0	0	0	0	0	0	0	0	103
58	Bardiya	12	0	0	379	0	18	0	0	0	0	0	0	0	0	0	0
59	Surkhet	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
60	Dailekh	12	0	0	210	0	0	0	0	0	0	0	0	0	0	0	0
61	Jajarkot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
62	Dolpa	12	0	0	114	0	0	0	0	0	0	0	0	0	0	0	0
63	Jumla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
64	Kalikot	12	0	0	355	2	0	0	0	0	0	0	0	0	0	0	0
65	Mugu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
66	Humla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Mid Western	180	175	196	1109	15	18	0	0	0	0	0	0	0	0	0	103
67	Bajura	12	0	0	137	0	0	0	0	0	0	0	0	0	0	0	0
68	Bajhang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
69	Achham	12	0	0	450	3	0	0	0	0	0	0	0	0	0	0	0
70	Doti	12	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0
71	Kailali	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
72	Kanchanpur	12	0	0	1646	21	0	0	0	0	0	0	0	0	0	0	0
73	Dadeldhura	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
74	Baitadi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
75	Darchula	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Far Western	108	0	0	2238	24	0	0	0	0	0	0	0	0	0	0	0



**Health Laboratory**  
Sheet 4 of 8

**PARASITOLOGY**

District Code	District Name	Received Reports	PARASITOLOGY													
			Stool Test	Occult blood	Reducing sugar	Urine test	Bile salts	Bile Pigments	Urobilinogen	Porphobilinogen	Acetone	Chyle	Semen Analysis	Bence Jones Protein	Specific gravity	Others
	Mountain	192	6893	650	347	15525	3	30	0	12	7	2	165	0	0	0
	Hill	468	42813	5108	2057	182007	2812	2054	2192	2	2746	79	1148	45	2592	14285
	Terai	240	18354	1844	546	77197	3	17	29	0	451	0	139	0	4	307
	<b>National Total</b>	<b>900</b>	<b>68060</b>	<b>7602</b>	<b>2950</b>	<b>274729</b>	<b>2818</b>	<b>2101</b>	<b>2221</b>	<b>14</b>	<b>3204</b>	<b>81</b>	<b>1452</b>	<b>45</b>	<b>2596</b>	<b>14592</b>
1	Taplejung	12	2138	251	2	3466	2	13	0	0	7	2	10	0	0	0
2	Panchthar	12	358	6	0	1548	0	0	0	0	0	0	0	0	0	0
3	Ilam	12	613	76	13	5948	180	0	0	0	0	1	4	3	8	5
4	Jhapa	12	12355	1608	114	43077	0	14	18	0	417	0	38	0	0	200
5	Morang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Sunsari	12	781	2	0	6029	1	1	0	0	0	0	3	0	0	0
7	Dhankuta	12	532	7	7	2063	0	0	0	0	0	0	12	0	0	9
8	Teharthur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	257	0	0	628	0	0	0	0	0	0	2	0	0	0
10	Bhojpur	12	1237	35	0	2932	0	0	0	0	4	0	2	0	0	0
11	Solukhumbu	12	587	34	319	2466	1	17	0	0	0	0	3	0	0	0
12	Okhaldhunga	12	1160	132	0	4675	0	0	0	0	4	0	37	0	0	1
13	Khotang	12	2	1	0	3	0	0	0	0	0	0	0	0	0	0
14	Udaypur	12	1262	84	0	2973	0	0	0	0	0	0	2	0	0	0
15	Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Siraha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Eastern</b>	<b>192</b>	<b>21282</b>	<b>2236</b>	<b>455</b>	<b>75808</b>	<b>184</b>	<b>45</b>	<b>18</b>	<b>0</b>	<b>432</b>	<b>3</b>	<b>113</b>	<b>3</b>	<b>8</b>	<b>215</b>
17	Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	Mahottari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Sarlahi	12	870	0	43	7085	2	2	2	0	0	0	2	0	0	0
20	Sindhuli	12	529	0	0	841	0	0	0	0	0	0	3	0	0	0
21	Ramechhap	12	609	3	0	1479	0	0	0	0	0	0	0	0	0	0
22	Dolkha	12	1450	244	4	1936	0	0	0	0	0	0	33	0	0	0
23	Sindhupalchowk	12	357	3	0	1440	0	0	0	0	0	0	8	0	0	0
24	Kavre	12	905	887	0	3056	16	1	0	0	8	0	13	0	0	0
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	2206	93	47	5167	11	8	3	1	114	11	48	1	2	0
27	Kathmandu	12	12017	1646	778	39242	524	531	461	1	603	7	295	33	581	17
28	Nuwakot	12	305	18	33	1292	0	0	0	0	0	0	29	0	0	0
29	Rasuwa	12	269	3	0	545	0	0	0	12	0	0	1	0	0	0
30	Dhading	12	1184	151	711	3409	16	1	0	0	1	0	149	0	194	0
31	Makawanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Rautahat	12	595	0	0	728	0	0	0	0	0	0	0	0	0	0
33	Bara	12	78	0	57	802	0	0	8	0	0	0	0	0	0	0
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Central</b>	<b>228</b>	<b>21374</b>	<b>3048</b>	<b>1673</b>	<b>67022</b>	<b>569</b>	<b>543</b>	<b>474</b>	<b>14</b>	<b>726</b>	<b>18</b>	<b>581</b>	<b>34</b>	<b>777</b>	<b>17</b>
36	Gorkha	12	3042	66	0	12487	172	14	1	0	12	3	24	0	0	0
37	Lamjung	12	108	4	0	773	0	0	0	0	2	0	0	4	0	2
38	Tanahu	12	929	52	0	4023	0	0	0	0	6	0	27	0	0	14
39	Syangja	12	995	17	0	7152	0	0	0	0	5	0	8	0	0	3
40	Kaski	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41	Manang	12	46	16	0	220	0	0	0	0	0	0	2	0	0	0
42	Mustang	12	0	0	0	29	0	0	0	0	0	0	0	0	0	0
43	Myagdi	12	429	14	0	2290	0	0	0	0	0	0	14	1	9	0
44	Parbat	12	325	0	0	2290	0	0	0	0	0	0	2	0	0	0
45	Baglung	12	122	1	0	892	0	0	0	0	0	0	10	0	0	0
46	Gulmi	12	1143	62	126	8145	33	30	25	0	20	0	51	0	359	0
47	Palpa	12	6795	1331	242	44564	825	3	3	0	408	54	108	3	0	14231
48	Nawalparasi	12	498	15	280	3083	0	0	0	0	0	0	2	0	0	0
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Argakhanchi	12	99	24	0	888	180	167	180	0	60	0	10	0	0	0
	<b>Western</b>	<b>192</b>	<b>14531</b>	<b>1602</b>	<b>648</b>	<b>86836</b>	<b>1210</b>	<b>214</b>	<b>209</b>	<b>0</b>	<b>513</b>	<b>57</b>	<b>258</b>	<b>8</b>	<b>368</b>	<b>14250</b>
52	Pyuthan	12	357	77	0	3212	77	0	0	0	0	0	23	0	0	0
53	Rolpa	12	763	25	0	2484	0	0	0	0	0	0	21	0	0	0
54	Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
56	Dang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
57	Banke	12	891	110	52	4577	0	0	0	0	34	0	76	0	4	0
58	Bardiya	12	719	0	0	4160	0	0	1	0	0	0	6	0	0	16
59	Surkhet	12	93	0	0	1415	0	0	0	0	0	0	1	0	0	0
60	Dailekh	12	368	25	0	2918	0	0	0	0	0	0	73	0	0	3
61	Jajarkot	12	156	1	0	959	0	0	0	0	0	0	9	0	0	0
62	Dolpa	12	56	0	0	66	0	0	0	0	0	0	10	0	0	0
63	Jumla	12	629	18	0	871	0	0	0	0	0	0	5	0	0	0
64	Kalikot	12	268	3	0	1289	0	0	0	0	0	0	47	0	0	0
65	Mugu	12	16	0	20	75	0	0	0	0	0	0	6	0	0	0
66	Humla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Mid Western</b>	<b>180</b>	<b>4316</b>	<b>259</b>	<b>72</b>	<b>22026</b>	<b>77</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>34</b>	<b>0</b>	<b>277</b>	<b>0</b>	<b>4</b>	<b>19</b>
67	Bajura	12	72	9	2	386	0	0	0	0	0	0	4	0	0	0
68	Bajhang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
69	Achham	12	1676	100	0	5957	778	1299	1519	0	1499	1	45	0	1439	0
70	Doti	12	1531	112	0	4073	0	0	0	0	0	2	56	0	0	0
71	Kailali	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
72	Kanchanpur	12	1567	109	0	7656	0	0	0	0	0	0	12	0	0	91
73	Dadeldhura	12	352	9	100	1528	0	0	0	0	0	0	29	0	0	0
74	Baitadi	12	611	49	0	1329	0	0	0	0	0	0	43	0	0	0
75	Darchula	12	748	69	0	2108	0	0	0	0	0	0	34	0	0	0
	<b>Far Western</b>	<b>108</b>	<b>6557</b>	<b>457</b>	<b>102</b>	<b>23037</b>	<b>778</b>	<b>1299</b>	<b>1519</b>	<b>0</b>	<b>1499</b>	<b>3</b>	<b>223</b>	<b>0</b>	<b>1439</b>	<b>91</b>



Health Laboratory Services

Sheet 6.2 of 8

IMMUNOLOGY

District Code	District Name	Received Reports	IMMUNOLOGY															Rapid MP Test			
			µF. Protein	PSA	Ferritin	Cysticercosis	Brucella	Thyroglobulin	Electrophoresis	B.HCG	CA 15.3	K-39		JE		Dengue		Total	+ve		
												Total	+ Ve	Total	+ Ve	Total	+ Ve		Total	PV	PF
	Mountain	192	0	0	0	0	0	0	0	144	0	0	0	0	0	0	0	102	2	2	
	Hill	468	11712	914	245	227	166	10	2	991	6	227	15	15	0	104	6	4794	239	89	
	Terai	240	1954	7	0	10	6	9	0	1890	13	926	48	202	0	37	1	6587	224	24	
	National Total	900	13666	921	245	237	172	19	2	3025	19	1153	63	217	0	141	7	11483	465	115	
1	Taplejung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	61	0	1	
2	Panchthar	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	51	0	0	
3	Ilam	12	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	290	4	1	
4	Jhapa	12	1949	0	0	0	0	0	0	1690	0	28	0	0	0	0	0	4169	179	17	
5	Morang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6	Sunsari	12	0	0	0	0	0	0	0	0	0	335	7	0	0	0	0	572	6	1	
7	Dhankuta	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8	Teharhum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9	Sankhuwasabha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	7	0	1	
10	Bhojpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	18	0	0	
11	Solukhumbu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	
12	Okhaldhunga	12	0	0	0	0	0	0	0	4	0	76	9	0	0	0	0	63	7	10	
13	Khotang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14	Udaypur	12	0	0	0	0	0	0	0	0	0	85	1	0	0	0	0	111	0	1	
15	Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16	Siraha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Eastern	192	1949	0	0	0	1	0	0	1694	0	524	17	0	0	0	0	5342	198	32	
17	Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18	Mahottari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19	Sarlahi	12	0	0	0	0	0	0	0	0	0	331	31	0	0	28	0	351	9	1	
20	Sindhuli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	15	0	0	
21	Ramechhap	12	0	0	0	0	0	0	0	0	0	4	0	0	0	0	0	0	0	0	
22	Dolkha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23	Sindhupalchowk	12	0	0	0	0	0	0	0	46	0	0	0	0	0	0	0	4	0	0	
24	Kavre	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	89	0	0	
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26	Bhaktapur	12	2	5	0	0	4	1	0	9	1	3	0	3	0	2	0	23	0	0	
27	Kathmandu	12	11710	637	46	19	68	6	2	55	5	10	1	9	0	55	3	829	21	0	
28	Nuwakot	12	0	13	13	13	13	0	0	18	0	0	0	0	0	15	1	154	26	2	
29	Rasuva	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30	Dhading	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	90	2	0	
31	Makawanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
32	Rautahat	12	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	
33	Bara	12	0	5	0	0	0	0	0	0	0	7	0	0	0	0	0	0	0	0	
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35	Chitwan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Central	228	11712	660	59	32	85	7	2	128	6	356	32	12	0	100	4	1555	58	3	
36	Gorkha	12	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	47	2	0	
37	Lamjung	12	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	0	
38	Tanahu	12	0	186	186	186	79	0	0	0	0	1	0	0	0	22	0	31	0	1	
39	Syangja	12	0	0	0	0	0	0	0	216	0	0	0	0	0	0	0	473	4	5	
40	Kaski	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
41	Manang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
42	Mustang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
43	Myagdi	12	0	0	0	0	0	0	0	13	0	0	0	0	0	0	0	101	17	0	
44	Parbat	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	55	4	0	
45	Baglung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
46	Gulmi	12	0	0	0	0	0	0	0	60	0	0	0	0	0	0	0	77	4	3	
47	Palpa	12	0	69	0	9	1	3	0	191	0	14	1	0	0	0	0	129	55	0	
48	Nawalparasi	12	5	0	0	0	0	0	0	30	0	202	1	200	0	6	0	85	1	0	
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
50	Kapilvastu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
51	Arghakhanchi	12	0	0	0	0	0	0	0	25	0	0	0	0	0	0	0	0	0	0	
	Western	192	5	259	186	195	80	3	0	535	0	218	2	202	0	28	0	998	87	9	
52	Pyuthan	12	0	0	0	0	0	0	0	16	0	0	0	0	0	0	0	513	18	53	
53	Rolpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	42	0	0	
54	Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
55	Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
56	Dang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
57	Banke	12	0	2	0	10	6	9	0	14	13	16	9	2	0	2	1	167	11	1	
58	Bardiya	12	0	0	0	0	0	0	0	156	0	0	0	0	0	0	0	679	12	2	
59	Surkhet	12	0	0	0	0	0	0	0	375	0	0	0	0	0	0	0	0	0	0	
60	Dailekh	12	0	0	0	0	0	0	0	5	0	0	0	1	0	0	0	1	0	0	
61	Jajarkot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
62	Dolpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	8	0	0	
63	Jumla	12	0	0	0	0	0	0	0	19	0	0	0	0	0	0	0	0	0	0	
64	Kalikot	12	0	0	0	0	0	0	0	79	0	0	0	0	0	0	0	4	0	0	
65	Mugu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
66	Humla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Mid Western	180	0	2	0	10	6	9	0	664	13										

**Health Laboratory Services**

Sheet 7 of 8

**HAEMATOLOGY**

District Code	District Name	Received Reports	HAEMATOLOGY															
			TC	DC	Hb	ESR	PCV	Reticulocyte	Platelet	MCV	MCH	MCHC	RBC	Aldehyde	MP		MF	
															T	P	T	P
	Mountain	192	14874	14709	14739	11964	5	3	583	30	0	1	9	1	570	7	2	1
	Hill	468	184446	177748	167444	100444	41959	492	45616	40283	20482	22580	22191	51	13619	301	4496	15
	Terai	240	85528	94127	99689	36548	12444	188	27829	16651	16703	15343	18757	45	15332	142	2570	6
	<b>National Total</b>	<b>900</b>	<b>284848</b>	<b>286584</b>	<b>281872</b>	<b>148956</b>	<b>54408</b>	<b>683</b>	<b>74028</b>	<b>56964</b>	<b>37185</b>	<b>37924</b>	<b>40957</b>	<b>97</b>	<b>29521</b>	<b>450</b>	<b>7068</b>	<b>22</b>
1	Taplejung	12	3955	3955	3978	3895	0	0	271	0	0	0	0	0	94	0	0	0
2	Panchthar	12	1418	1418	1672	468	1	0	75	0	0	0	2	0	404	2	0	0
3	Ilam	12	5597	5678	6857	1379	1	0	70	0	0	0	10	0	47	5	0	8
4	Jhapa	12	51208	55397	63382	21113	12049	59	26545	16021	16073	14713	18269	0	2403	9	2209	5
5	Morang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Sunsari	12	3653	3662	5742	2113	1	0	33	1	1	1	5	0	683	5	0	0
7	Dhankuta	12	2003	1956	1427	1158	8	82	489	80	0	0	13	13	356	0	0	0
8	Tehrathum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	435	423	489	352	0	0	0	0	0	0	0	0	12	0	2	1
10	Bhojpur	12	2492	2487	1058	1161	1	0	42	0	0	0	14	1	539	5	1	0
11	Solukhumbu	12	1420	1365	1717	692	4	2	164	30	0	0	5	0	4	0	0	0
12	Okhaldhunga	12	3586	3572	4604	1476	0	0	899	48	33	27	87	0	77	4	0	0
13	Khotang	12	15	15	16	16	0	0	1	0	0	0	0	0	0	0	0	0
14	Udaypur	12	2842	2831	2397	1670	0	0	15	0	0	0	0	0	236	1	0	0
15	Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Siraha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Eastern</b>	<b>192</b>	<b>78624</b>	<b>82759</b>	<b>93339</b>	<b>35493</b>	<b>12065</b>	<b>143</b>	<b>28604</b>	<b>16180</b>	<b>16107</b>	<b>14741</b>	<b>18405</b>	<b>14</b>	<b>4855</b>	<b>31</b>	<b>2212</b>	<b>14</b>
17	Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	Mahottari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Sarlahi	12	5245	5350	3541	2286	0	0	0	0	0	0	0	10	905	18	0	0
20	Sindhuli	12	320	320	422	256	16	0	10	10	10	10	10	0	28	21	0	0
21	Ramechhap	12	2417	2396	2385	1463	6	0	29	3	0	0	6	0	49	1	0	0
22	Dolkha	12	2780	2697	2859	2203	0	0	15	0	0	0	0	0	0	0	0	0
23	Sindhupalchowk	12	1588	1588	1545	1396	0	0	57	0	0	0	0	0	80	0	0	0
24	Kavre	12	3462	3385	4141	729	22	17	3196	0	0	0	0	0	454	0	0	0
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	4621	4673	5457	2449	51	12	814	42	26	29	22	6	40	0	0	0
27	Kathmandu	12	67287	67548	71009	45483	22333	243	28726	37576	17420	17643	20052	0	4762	9	4108	0
28	Nuwakot	12	1411	1411	1430	1227	0	0	12	0	0	0	0	0	177	10	0	0
29	Rasuwa	12	327	326	373	177	0	1	5	0	0	1	0	1	2	0	0	0
30	Dhading	12	3147	3142	3386	2630	950	0	953	950	950	950	952	0	324	0	0	0
31	Makawanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Rautahat	12	703	603	684	698	0	0	0	0	0	0	0	0	74	0	0	0
33	Bara	12	1171	1170	1217	922	0	0	10	0	0	0	0	0	55	0	0	0
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Central</b>	<b>228</b>	<b>94479</b>	<b>94609</b>	<b>98449</b>	<b>61919</b>	<b>23378</b>	<b>273</b>	<b>33817</b>	<b>38581</b>	<b>18406</b>	<b>18633</b>	<b>21042</b>	<b>17</b>	<b>6950</b>	<b>59</b>	<b>4108</b>	<b>0</b>
36	Gorkha	12	8387	6732	5835	3825	1	0	135	0	0	0	0	0	261	3	0	0
37	Lamjung	12	610	588	314	177	0	0	55	0	0	0	0	0	2	0	0	0
38	Tanaha	12	4071	2473	3526	2584	0	0	132	0	0	0	150	0	63	1	5	0
39	Syangja	12	7406	7992	5763	2194	0	0	61	0	0	0	678	5	552	0	0	0
40	Kaski	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41	Manang	12	199	193	144	110	0	0	14	0	0	0	0	110	4	0	0	0
42	Mustang	12	4	10	13	3	0	0	0	0	0	0	0	0	0	0	0	0
43	Myagdi	12	1594	1593	1735	971	1	0	15	0	0	0	0	0	104	0	0	0
44	Parbat	12	2196	2196	1176	498	0	0	9	0	0	0	0	0	0	0	0	0
45	Baglung	12	980	980	668	283	1	0	4	0	0	0	1	0	20	0	0	0
46	Gulmi	12	7140	7140	4760	2751	28	0	551	0	0	0	12	0	238	6	17	3
47	Palpa	12	29398	25230	14486	11706	16160	132	6221	968	953	1229	168	24	913	19	185	0
48	Nawalparasi	12	4048	8364	3984	1446	1	49	489	0	0	0	0	3	831	1	0	0
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Arghakhanchi	12	1289	1289	460	308	0	6	4	0	0	0	0	0	306	0	0	0
	<b>Western</b>	<b>192</b>	<b>67322</b>	<b>64780</b>	<b>42864</b>	<b>26856</b>	<b>16192</b>	<b>187</b>	<b>7690</b>	<b>968</b>	<b>953</b>	<b>1229</b>	<b>1009</b>	<b>32</b>	<b>3294</b>	<b>30</b>	<b>207</b>	<b>3</b>
52	Pyuthan	12	2364	2364	2637	1088	0	0	15	0	0	0	14	0	481	62	0	0
53	Rolpa	12	1745	1745	1625	1322	0	0	0	0	0	0	0	0	52	0	0	0
54	Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
56	Dang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
57	Banke	12	7623	7631	7791	1983	119	80	401	629	629	629	483	32	1131	13	0	0
58	Bardiya	12	3416	3490	4527	2319	274	0	7	0	0	0	0	0	2571	28	3	0
59	Surkhet	12	605	606	995	614	0	0	0	0	0	0	0	0	336	11	0	0
60	Dailekh	12	1537	1534	2477	1258	0	0	59	0	0	0	0	2	557	23	0	0
61	Jajarkot	12	723	723	474	616	0	0	6	0	0	0	0	0	249	0	0	0
62	Dolpa	12	85	85	68	78	0	0	0	0	0	0	0	0	0	0	0	0
63	Jumla	12	761	761	636	487	0	0	0	0	0	0	0	0	1	0	0	0
64	Kalikot	12	1127	1115	1351	656	0	0	28	0	0	0	0	0	118	4	0	0
65	Mugu	12	63	64	52	22	1	0	0	0	0	0	0	0	3	0	0	0
66	Humla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Mid Western</b>	<b>180</b>	<b>20049</b>	<b>20118</b>	<b>22633</b>	<b>10443</b>	<b>394</b>	<b>80</b>	<b>516</b>	<b>629</b>	<b>629</b>	<b>629</b>	<b>497</b>	<b>34</b>	<b>5499</b>	<b>141</b>	<b>3</b>	<b>0</b>
67	Bajura	12	221	221	231	85	0	0	0	0	0	0	0	0	1	0	0	0
68	Bajhang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
69	Achham	12	5810	5760	6292	3825	2324	0	2755	606	1090	2692	0	0	1134	93	173	4
70	Doti	12	3984	3982	4478	2301	12	0	129	0	0	0	0	0	136	0	0	0
71	Kailali	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
72	Kanchanpur	12	8461	8460	8821	3668	0	0	344	0	0	0	0	0	6679	68	358	1
73	Dadeldhura	12	2341	2341	1905	1411	0	0	20	0	0	0	0	0	7	0	7	0
74	Baitadi	12	1648	1648	1577	1147	43	0	124	0	0	0	0	0	715	25	0	0
75	Darchula	12	1909	1906	1283	1808	0	0	29	0	0	0	4	0	251	3	0	0
	<b>Far Western</b>	<b>10</b>																

## Health Laboratory Services

Sheet 7.2 of 8

### HAEMATOLOGY

District Code	District Name	HAEMATOLOGY													
		LE	BTCT	CSF	Bone Marrow	Spleenic Asp.	PT	APTT	FDP/ D-dimer	Factor VIII	Factor IX	ALC	HbA1c	HB Elec. phorosis	Others
	Mountain	2	134	0	0	1	8	0	0	0	0	0	0	0	15
	Hill	707	11245	541	195	66	6738	386	106	17	21	6	5377	2	6794
	Terai	16	9558	51	21	2	5192	40	0	0	0	0	335	0	209
	National Total	725	20937	592	216	69	11938	426	106	17	21	6	5712	2	7018
1	Taplejung	0	70	0	0	0	0	0	0	0	0	0	0	0	0
2	Panchthar	0	71	0	0	0	0	0	0	0	0	0	0	0	0
3	Ilam	0	128	1	10	0	40	7	0	0	0	0	2	0	1
4	Jhapa	6	8704	4	0	0	5020	21	0	0	0	0	322	0	14
5	Morang	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Sunsari	0	1	0	0	0	0	0	0	0	0	0	0	0	0
7	Dhankuta	0	68	0	0	0	0	0	0	0	0	0	0	0	1
8	Tehrathum	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	0	4	0	0	0	0	0	0	0	0	0	0	0	0
10	Bhojpur	0	51	0	0	0	0	0	0	0	0	0	0	0	0
11	Solukhumbu	2	15	0	0	1	1	0	0	0	0	0	0	0	0
12	Okhaldhunga	0	121	3	0	0	144	0	0	0	0	0	0	0	161
13	Khotang	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Udaypur	0	17	0	0	0	0	0	0	0	0	0	0	0	0
15	Saptari	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Siraha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Eastern	8	9250	8	10	1	5205	28	0	0	0	0	324	0	177
17	Dhanusha	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	Mahottari	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Sarlahi	0	0	0	0	0	0	0	0	0	0	0	0	0	82
20	Sindhuli	0	3	0	0	0	0	0	0	0	0	0	0	0	0
21	Ramechhap	0	120	0	0	0	0	0	0	0	0	0	0	0	0
22	Dolkha	0	0	0	0	0	7	0	0	0	0	0	0	0	0
23	Sindhupalchowk	0	26	0	0	0	0	0	0	0	0	0	0	0	0
24	Kavre	0	86	1	0	0	110	24	0	0	0	0	0	0	0
25	Lalitpur	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	0	190	0	0	0	202	13	1	0	0	0	80	0	0
27	Kathmandu	11	2298	190	71	0	3746	327	95	17	21	5	4389	2	78
28	Nuwakot	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29	Rasuwa	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30	Dhading	0	29	0	0	0	1	0	0	0	0	0	0	0	0
31	Makawanpur	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Rautahat	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33	Bara	10	15	12	10	0	0	0	0	0	0	0	0	0	5
34	Parsa	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Central	21	2767	203	81	0	4066	364	96	17	21	5	4469	2	165
36	Gorkha	0	112	0	0	0	0	0	0	0	0	0	30	0	0
37	Lamjung	0	6	0	0	0	0	0	0	0	0	0	0	0	0
38	Tanahu	0	1010	0	0	0	26	0	0	0	0	0	2	0	0
39	Syangja	2	45	0	0	0	0	0	0	0	0	0	0	0	0
40	Kaski	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41	Manang	0	2	0	0	0	0	0	0	0	0	0	0	0	0
42	Mustang	0	1	0	0	0	0	0	0	0	0	0	0	0	0
43	Myagdi	0	21	0	0	0	0	0	0	0	0	0	0	0	0
44	Parbat	0	15	0	0	0	0	0	0	0	0	0	0	0	0
45	Baglung	0	7	0	0	0	0	0	0	0	0	0	0	0	0
46	Gulmi	0	61	2	0	0	0	0	0	0	0	0	0	0	1
47	Palpa	694	5333	344	114	66	2433	8	10	0	0	1	874	0	6552
48	Nawalparasi	0	5	0	0	0	0	0	0	0	0	0	0	0	0
49	Rupandehi	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Argakhanchi	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Western	696	6618	346	114	66	2459	8	10	0	0	1	906	0	6553
52	Pyuthan	0	24	0	0	0	0	0	0	0	0	0	0	0	0
53	Rolpa	0	22	0	0	0	0	0	0	0	0	0	0	0	0
54	Rukum	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Salyan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
56	Dang	0	0	0	0	0	0	0	0	0	0	0	0	0	0
57	Banke	0	779	35	11	2	172	19	0	0	0	0	13	0	47
58	Bardiya	0	0	0	0	0	0	0	0	0	0	0	0	0	0
59	Surkhet	0	0	0	0	0	0	0	0	0	0	0	0	0	0
60	Dailekh	0	134	0	0	0	0	0	0	0	0	0	0	0	0
61	Jajarkot	0	8	0	0	0	0	0	0	0	0	0	0	0	0
62	Dolpa	0	0	0	0	0	0	0	0	0	0	0	0	0	0
63	Jumla	0	0	0	0	0	0	0	0	0	0	0	0	0	0
64	Kalikot	0	8	0	0	0	0	0	0	0	0	0	0	0	15
65	Mugu	0	3	0	0	0	0	0	0	0	0	0	0	0	0
66	Humla	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Mid Western	0	978	35	11	2	172	19	0	0	0	0	13	0	62
67	Bajura	0	1	0	0	0	0	0	0	0	0	0	0	0	0
68	Bajhang	0	0	0	0	0	0	0	0	0	0	0	0	0	0
69	Achham	0	972	0	0	0	9	7	0	0	0	0	0	0	0
70	Doti	0	145	0	0	0	1	0	0	0	0	0	0	0	0
71	Kailali	0	0	0	0	0	0	0	0	0	0	0	0	0	0
72	Kanchanpur	0	54	0	0	0	0	0	0	0	0	0	0	0	61
73	Dadeldhura	0	18	0	0	0	0	0	0	0	0	0	0	0	0
74	Baitadi	0	130	0	0	0	26	0	0	0	0	0	0	0	0
75	Darchula	0	4	0	0	0	0	0	0	0	0	0	0	0	0
	Far Western	0	1324	0	0	0	36	7	0	0	0	0	0	0	61

**Health Laboratory Services**

Sheet 8 of 8

**ENDOCRINOLOGY**

District Code	District Name	Received Reports	ENDOCRINOLOGY														
			FSH	LH	Prolactin	Testosterone	T3	T4	TSH	Lipid Profile	Microalbumin	Carbamazepin	Cyclosporine	Valproic Acid	Phenytoin	Digoxine	Others
	Mountain	192	0	0	0	0	0	0	0	31	0	0	0	0	0	0	10
	Hill	468	119	103	211	4	6592	6876	14064	10951	2228	7	24	41	1	0	4219
	Terai	240	11	10	26	43	901	907	1049	2028	252	8	0	0	0	0	189
	National Total	900	130	113	237	47	7493	7783	15113	13010	2480	15	24	41	1	0	4418
1	Taplejung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	Panchthar	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3	Ilam	12	0	0	0	0	0	0	3	44	0	0	0	0	0	0	0
4	Jhapa	12	3	0	0	43	613	615	736	1798	248	8	0	0	0	0	175
5	Morang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Sunsari	12	0	2	0	0	0	0	6	0	0	0	0	0	0	0	0
7	Dhankuta	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8	Tehrathum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	Bhojpur	12	0	0	0	0	0	5	9	0	0	0	0	0	0	0	0
11	Solukhumbu	12	0	0	0	0	0	0	31	0	0	0	0	0	0	0	0
12	Okhaldhunga	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	8
13	Khotang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Udayapur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15	Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Siraha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Eastern	192	3	2	0	43	613	615	744	1888	248	8	0	0	0	0	183
17	Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	Mahottari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Sarlahi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	Sindhuli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21	Ramechhap	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Dolkha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	Sindhupalchowk	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24	Kavre	12	0	0	0	0	62	64	72	93	0	0	0	0	0	0	0
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	0	0	3	0	177	142	187	545	18	0	0	0	0	0	0
27	Kathmandu	12	119	103	208	4	5903	5891	11330	9379	2123	7	24	41	1	0	1726
28	Nuwakot	12	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0
29	Rasuwa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30	Dhading	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31	Makawanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Rautahat	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33	Bara	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Central	228	119	103	211	4	6142	6097	11589	10020	2141	7	24	41	1	0	1726
36	Gorkha	12	0	0	0	0	0	0	7	1	0	0	0	0	0	0	0
37	Lamjung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
38	Tanahu	12	0	0	0	0	0	0	0	17	0	0	0	0	0	0	0
39	Syangja	12	0	0	0	0	0	0	25	0	0	0	0	0	0	0	0
40	Kaski	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41	Manang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42	Mustang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
43	Myagdi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
44	Parbat	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45	Baglung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
46	Gulmi	12	0	0	0	0	13	13	13	11	0	0	0	0	0	0	1
47	Palpa	12	0	0	0	0	437	766	2445	681	87	0	0	0	0	0	2484
48	Nawalparasi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Arghakhanchi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Western	192	0	0	0	0	450	779	2465	735	87	0	0	0	0	0	2485
52	Pyuthan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
53	Rolpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
54	Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
56	Dang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
57	Banke	12	8	8	26	0	288	292	313	224	4	0	0	0	0	0	14
58	Bardiya	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
59	Surkhet	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
60	Dailekh	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
61	Jajarkot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
62	Dolpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
63	Jumla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
64	Kalikot	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	10
65	Mugu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
66	Humla	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Mid Western	180	8	8	26	0	288	292	313	224	4	0	0	0	0	0	24
67	Bajura	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
68	Bajhang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
69	Achham	12	0	0	0	0	0	0	0	100	0	0	0	0	0	0	0
70	Doti	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
71	Kailali	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
72	Kanchanpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
73	Dadeldhura	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
74	Baitadi	12	0	0	0	0	0	0	2	43	0	0	0	0	0	0	0
75	Darchula	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Far Western	108	0	0	0	0	0	0	2	143	0	0	0	0	0	0	0

Hospital Analysis Major Indicators									
Hospital Code	Hospital Name	Received Reports	Average Length of Stay	Bed Occupancy Rate	Bed Turnover Interval	Throughput	% of Inpatients	% of OPD	% of Emergency
	Mountain	207	2.7	51.57	2.72	67.9	6.95	78.87	14.17
	Hill	678	3.55	47.15	4.17	47.76	7.96	77.13	14.91
	Terai	432	2.81	56.13	2.03	75.86	12.74	65.9	21.36
	National Total	1317	3.17	50.61	3.09	58.87	9.5	73.46	17.04
1	Bhojpur	12	2.75	75.97	0.87	100.95	11	79.92	9.07
2	Dhankuta	12	2.4	28.06	6.07	43.48	3.47	76.29	20.24
3	Ilam	12	2.67	70.4	1.17	95.12	9.87	60.15	30.18
3.1	Dr.MBPCH	12	1.75				9.66	61.02	29.33
4	Mechi Zonal	12	2.99	54.68	2.52	66.75	12.99	68.11	18.9
	AMDA Hospital	2	2.69	7.23	37.67	9.8	16.78	17.47	65.75
4.2	Life Line	12	1.96	71.29	0.55	145.54	28.68	48.42	22.9
4.4	Bajrang Medical and Diagnostic Center	5						0	100
	Amde Mechi Hospital	7	3.2	24.46	10.22	27.93	15.85	22.36	61.79
	Kankai Hospital	10	1.52	15.11	8.05	38.85	9.08	64.6	26.32
	Om International Mechi	5	0	0	3.84	95.2	17.62	70.77	11.61
	Damak Hospital and Research Center	5	1.81	3.51	50.29	7.42	23.32	17.72	58.96
	Mechi Model Hospital & Research Center	12	1.89	26.17	6.56	43.73	10.78	62.76	26.46
	Om Sai Pathibhara Hospital	12	2.9	32.18	6.18	40.73	19.02	66.79	14.19
	Kanchanjangha Hospital	12	1.84	46.2	2.15	91.64	17.12	59.89	22.99
5	Khotang	12	2.74	67.73	1.31	90.25	5.3	78.9	15.8
	Morang Co-operative Hospital	6	6.49	5.58	1.15	3.14	2.81	95.08	2.11
	Green Cross Hospital & Research Center	12	1	9.37	8.13	40.47	3.59	87.88	8.53
	Biratnagar City Asptal, Biratnagar	3	0.13	0.64	20.17	18.67	93.08	0	6.92
6	Koshi Zonal	12	3.53	59.08	2.16	64.47	9.8	74.34	15.86
6.1	Rangeli	12	1.25	3.4	39.22	9.93	0.67	70.14	29.19
6.2	Birat Nursing Home	12	3.46	71.75	1.37	75.64	15.58	78.52	5.9
	Neuro Hospital	12	4	209.11	-2.15	196.81	26.34	60.23	13.44
	Aswadnarayan Hospital	6	2.32	1.44	1.80	2.27	11.04	88.96	0
7	Okhaidhunga UMN	12	4.23	123.02	0.51	98.19	11.98	63.15	3.64
	Rumjhatar Hospital	12	2.05	27.84	4.83	53.25	3.57	85.88	10.55
8	Panchthar	12	2.31	88.28	0.3	139.36	10.35	54.19	35.46
9	Sankhuwasabha	12	1.69	63.96	0.94	138.44	11.27	75.03	13.71
10	Sagarmatha Zonal	12	2.58	65.46	1.12	98.62	14.43	61.83	23.95
11	Siraha	12	1.82	40.71	2.61	82.8	6.05	69.46	24.89
11.1	Lahan	12	2	49.45	1.51	104.02	15.98	65.13	28.89
	Pasang Lhamu Hospital	9	0.24	3.59	45.38	8.72	17.06	78.63	4.31
12	Solukhumbu	12	3.98	117.24	-0.83	115.4	7.31	83.13	9.57
12.1	Khunde Hospital	11	2.64	5.15	49.43	7.33	1.78	95.19	3.03
	Sunsari Hospital	12	1.98	73.02	0.72	135.4	7.9	69.07	23.03
14	Taplejung	12	2.72	63.86	1.16	94.29	8.82	61.02	10.16
16.1	Kalati	12	0.11	2.47	4.29	83	1.02	85.45	13.53
15	Tehrathum	12	1.87	57.53	1.44	110.93	8.34	75	16.66
16	Udayapur	12	2.1	51.23	1.69	96.88	8.51	69.74	21.75
	Eastern	405	2.85	60	1.79	78.9	11.86	70.32	17.83
17	Kalalya	11	1.55	46.49	1.77	110.16	7.01	58.25	34.74
18	Bhaktapur	12	3.04	35.28	4.68	47.6	3.36	75.29	21.55
19	Bharatpur	12	3.15	59.35	1.88	75.83	15.76	64.44	19.8
20	Dhading	12	2.45	85.21	0.44	126.27	4.18	73.01	22.81
21	Janakpur Zonal	12	3.01	71.91	1.32	84.5	19.83	51.22	28.94
22	Jiri	10	3.06	49.66	2.64	64.07	5.94	73.74	20.32
23	Bir	12	4.19	39.19	13.14	21.15	4.57	80.09	15.34
23.1	Kanti	10	4.29	42.08	7.07	92.62	5.44	63.15	31.41
23.2	Sukraraj Tropical and I. D.	11	3.67	28.65	8.47	30.21	14.15	78.01	7.84
23.4	Maternity	12	3.55	81.75	0.79	84.43	16.79	83.21	0
24	Shir Memorial	12	2.9	38.81	4.67	48.65	11.93	75.98	12.09
24.1	Dhulikhel	12	3.98	42.39	5.36	39.18	8.99	83.23	7.78
26	Mahottari (PH)	12	5.66	63.38	3.45	40.16	2.87	85.2	11.85
27	Hetaula	12	2.49	53.29	2.51	73.02	6.63	60.75	32.63
23.8	Nepal Police Hospital	11	12.22	42.68	15.38	13.51	2.31	92.05	5.63
	International Friendship Children Hospital	10	0.24	2.64	7.51	47.84	13.44	72.59	13.97
28	Trishuli	12	2.43	103.97	-0.14	159.44	13.86	66.18	19.96
30	Ramechhap	12	5.01	80.46	1.07	60	4.45	82.17	13.37
	Raymng semudaik Asptal, Malekhu	8	6.04	2.87	1.93		1.61	59.48	34.1
	Gajuri Asptal Pvt Ltd	10	2.94	5.21	30.09	11.53	2.99	58.85	38.16
	Shahid Memorial Dhading Pvt Ltd	10	0.87	4.37	20.53	17.87	7.92	39.62	52.46
31	Rasuwa	12	2.61	7.49	33.6	10.93	2.86	88.33	8.81
32	Gaur	9	1.95	32.58	3.75	64.36	7.28	68.88	23.84
33	Sarlahi	9	4.58	77.26	9	63.07	4.29	53.64	42.08
34	Sindhuli	12	2.1	41.96	3.19	71.96	7.29	89.9	8.81
35	Sindhupalchowk	11	3.95	93.12	0.49	82.35	4.45	88.51	7.04
	Central	296	3.56	50.74	3.57	51.4	8.91	74.15	16.94
36	Argakhanchi	6	2.08				20.91	61.79	17.3
37	Baglung	11	2.04	36.09	3.57	65.13	9.94	64.47	25.58
38	Gorkha	11	2.3	97.67	0.06	154.56	5.66	68.51	25.84
38.1	Amp Pipal UMN	11	4.74	45.84	5.88	34.74	8.32	69.91	27.77
	Ama-Ba Hospital	4	4.28	6.22	68.4	5.3	2.04	68.09	29.86
40	P. Bir	11	1.62	40.04	2.76	83.87	7.08	79.96	12.96
40.1	Shiva Raj	9	1.13	71.23	0.42	236.2	6.15	89.76	4.08
41	Western Regional	12	3.34	65.59	2.19	73.43	10.45	70.25	19.3
41.1	Manipal Teaching	7	5.94	29.71	14.28	18.27	7.99	85.99	7
42	Lamjung	12	2.99	58.52	1.84	70.86	9.02	80.44	10.54
43	Manang	7	4	6.89	56.67	6.29	1.48	93.23	5.28
44	Mustang	11	2.31	17.88	9.83	30.13	5.02	79.38	15.6
45	Beni	12	1.89	60.93	1.21	117.61	10.44	71.06	18.5
46	P. Chandra	10	1.9	40.08	2.89	76.39	6.24	67.8	25.96
46.1	Kail Gandaki	11	2.34	18.25	10.21	29.55	12.48	42.82	44.7
47	Palpa	12	2.64	15.21	13.86	22.73	3.48	88.15	8.37
47.1	Palpa UMN	12	4.35	85.21	0.58	74.04	12.26	72.94	14.8
	Lumbini Medical College	12	4.07	24.02	15.11	19.2	7.65	84.77	7.57
48	Parbat	12	2.43	80.4	0.48	125.8	8.07	69.83	22.11
50	Syangja	12	2.19	43.85	4.98	80.07	5.63	70.61	18.61
51	Bandipur	12	1.93	35.47	3.58	66.8	8.01	78.15	13.83
51.1	Damauli	12	1.81	25.34	5.08	53.04	3.91	73.54	22.55
	Western	228	3.6	43.16	4.81	43.88	8.73	76.15	15.12
52	Bheri Zonal	5	2.86	33.61	5.76	42.97	16.82	79.85	3.33
53	Bardiya	12	2.03	33.11	4.14	59.8	5.32	78.54	16.15
54	Dalekh	12	2.66	39.68	3.96	55.53	8.06	79.05	12.89
64.1	HDCS-Chaurjahari	12	5.64	98.22	0.38	60.85	11.54	80.2	8.26
55	Dang Sub Regional Hospital	12	2.33	82.75	0.41	133.3	11.51	61.88	26.61
55.1	Rapti Zonal Hospital	12	1.77	39.8	2.68	82.23	8.93	78.91	12.16
56	Dolpa	12	1.6	9.26	15.76	21.2	1.77	92.74	5.49
57	Humla	12	3.49	64.27	1.94	67.4	4.23	84.69	11.08
58	Jajarkot	12	2.12	51.29	1.74	84.87	5.47	82.04	12.49
59	Jumla	12	2.42	34.45	4.58	52.31	10.78	51.74	37.48
60	Kalikot	12	2.55	45.94	2.95	66.72	6.25	84.42	9.33
61	Mugu	12	2.54	35.01	4.59	51.6	8.51	83.39	8.1
62	Pyuthan	12	1.39	32.17	2.79	87.42	6.58	78.81	14.61
63	Rolpa	12	3.46	59	2.3	63.6	7.4	76.08	16.52
64	Rukum	12	2.52	106.88	-0.23	159.94	7.77	84.36	7.94
65	Salyan	12	2.83	46.85	3.15	61.33	4.96	89.83	5.21
66	Surkhet Regional Hospital	12	2.65	75.14	0.75	107.5	10.86	77.66	11.48
	Mid Western	197	2.66	51.32	2.45	71.53	8.74	78.05	13.22
67.1	Bail Pata	12	4.4	59.73	1.83	58.93	2.24	89.91	7.85
67	Achham	12	2.65	80.55	0.63	111.13	5.79	80.12	14.09
68	Baitadi	12	2.19	34.16	4.19	57.6	3.78	77.43	18.79
	Amisha Asptal Pvt Ltd	8	2.13	36.21	3.74	62.38	22.5	70.25	7.26
69	Bajhang	12	2.66	68.85	1.1	97.1	13.43	71.75	14.82
70	Bajura	12	2.3	32.99	4.98	50.5	3.4	87.09	9.51
71	Dadeldhura	12	2.19	54.38	1.81	91.33	4.04	90.87	5.09
71.1	Team	12	2.72	39.48	4.27	52.58	6.53	77.38	14.09
74.2	Ghodaghodi	12	1.88				10.35	76.3	13.55
74.3	Sewa Nursing Home	11	3.86	7.59	20.33	15.63	2.99	54.52	42.49
74.4	Lalratna	12	1	5.77	16.38	21.4	1.86	33.03	65.11
72	Darchula	12	3.05	85.94	0.44	104.6	5.73	54.87	39.4
73	Doti	12	2.78	34.28	5.33	45.07	3.36	80.42	16.22
73.1	Sujan	12	1.68	10.92	12.92	25.06	9.27	77.49	13.24
74	Seti Zonal	12	2.13	62.4	1.26	107.88	17.98	51.99	30.03
74.1	Tikapur	12	1.69	61.28	1.01	135.5	6.4	77.28	16.32
75	Mahakali Zonal	12	2.3	46.3	2.56	75.39	11.31	52.88	35.81
	Far Western	191	2.31	44.06	2.8	71.95	8.3	68.59	23.11

Raw Data Summary																				
Hospital Code	Hospital Name	Received Reports	Total no of Bed Sanctioned	Total no of Bed available	Total no of Inpatient	Total Inpatients Stay (Days)	Total Inpatient Discharged	Total OPD	Total Emergency	Total Preventive	Others	Total OPD + Emergency + Others	Services Provided in Hospital					Safe Motherhood service provided	Examined in Laboratory	Nonfatal Services Provided
													X-Ray	Ultra Sound	Endoscopy / Colonoscopy	ECG / Ecocardiography	CT-Scan / MRI			
Mountain		207	330	22407	62118	22987	260695	46849	29338	15844	29337	11690	120	1717	228	18376	162195	5621		
Hill		678	4450	4327	206744	744697	209923	2035091	393504	209380	85879	2933777	420508	161714	9364	59208	34755	264733	3401838	82434
Teral		432	2421	2650	201028	542901	193328	998333	323991	322541	53159	1802851	282025	121775	3504	29613	17192	95066	1899496	35230
National Total		112	7201	7307	430179	1349716	426238	3295619	764344	561258	154882	520243	731648	295139	12988	90538	52175	38175	5462439	123285
1 Bhojpur		12	15	22	2221	6100	2217	16102	1828	18415	1560	40122	1458	72	0	85	0	476	15206	199
2 Dhankuta		12	50	27	1174	2765	1153	25332	6719	19053	7557	59614	1990	240	0	175	0	4278	17776	441
3 Ilam		12	15	25	2378	6424	2402	14945	7498	404	3709	28958	999	0	762	0	718	40187	132	
3.1 Dr.MBPCH		12	15	0	422	888	507	3204	1540	94	0	5345	1695	575	0	172	0	180	8805	22
4 Mechi Zonal		12	50	114	7609	22754	7613	39921	11079	11173	3259	73045	9858	5313	0	2233	0	1785	77820	1777
AMDA Hospital		2	15	15	147	396	147	153	26	0	0	876	404	0	0	33	0	0	378	0
4.2 Life Line		12	50	90	13099	23418	11955	20183	9546	4529	300	46513	7357	9908	11	996	0	7132	24688	9968
4.4 Boring Medical and Diagnostic Center		5	0	0	0	0	0	1057	0	0	0	1057	491	597	87	245	0	0	3539	0
Amda Mechi Hospital		7	15	15	419	1339	419	591	1633	0	0	2643	1150	0	0	110	0	0	1223	0
Kankai Hospital		10	55	55	2137	3034	2000	14225	5795	0	825	22845	8394	5748	1232	1280	0	0	60115	0
Om International Mechi		5	15	15	1428	0	1428	5735	341	0	0	8104	41	1479	13	49	0	1050	8593	835
Om International Mechi		5	50	50	371	640	364	289	895	121	175	1814	455	166	0	0	0	13	0	0
Om International Mechi		12	15	15	656	1433	758	4414	1861	0	438	7471	1066	0	0	323	0	0	17134	0
Om Sri Pathbhara Hospital		12	100	100	4073	11744	4047	14210	3018	108	1198	22581	7929	5076	225	2081	1938	42	65204	44
Kanchanjanaha Hospital		12	25	25	2291	4216	2290	8013	3076	2	881	14262	6111	7154	40	1544	682	1	48736	2
5 Khotang		12	15	20	1805	4844	1805	20871	5379	2811	4007	40873	3748	1289	0	185	0	1468	9224	264
Mechi Convent Hospital		6	50	50	157	1019	157	5315	118	100	1183	6823	1601	0	0	98	0	0	390	0
Om Sri Pathbhara Hospital		12	15	15	607	513	513	12552	1218	0	0	14283	5683	2160	0	280	0	0	8949	0
Strathgair City Hospital, Strathgair		3	15	15	280	35	269	0	20	0	9	298	238	168	0	39	0	0	263	0
6 Koshi Zonal		12	250	350	22565	75477	21406	162338	34635	29906	14618	262903	48843	18081	417	4539	0	11203	212697	1020
6.1 Rangeli		12	15	15	149	186	149	15609	6495	3491	1287	27031	845	0	0	0	0	100	10504	0
6.2 Birat Nursing Home		12	100	100	7524	26190	7274	38155	2368	2371	3457	54243	19047	21214	944	5474	2228	338	281531	836
Neuro Hospital		12	100	100	19681	76324	19081	43635	9734	0	3142	75592	35697	7282	0	1687	11430	0	0	0
Aswadnaryan Hospital		6	15	15	34	79	34	274	0	488	0	796	38	85	0	0	0	168	1154	30
7 Okhaldhunga UMN		12	32	32	14416	3408	23953	1092	2778	0	31231	3771	2736	0	579	0	1919	33911	754	
Rumthar Hospital		12	15	8	426	813	396	9528	1171	378	2384	13857	24	128	0	2	0	253	1901	58
8 Panchthar		12	15	25	3484	8056	3480	16226	11288	8797	1117	48548	2166	564	0	188	0	2821	15774	737
9 Sankhuasabha		12	25	25	3461	5836	3461	22941	4191	2615	235	33427	6274	2201	0	546	0	1934	2553	140
10 Sagarmatha Zonal		12	100	100	9862	23892	9257	39548	15366	0	0	64171	5646	0	0	575	0	5497	8708	205
11 Siraha		12	15	15	1242	2229	1225	14066	4960	0	9	20260	872	0	0	0	0	110	5989	106
11.1 Lahan		12	50	50	5201	9024	4503	15540	8143	0	0	28186	2876	207	0	3	0	2644	25137	346
Pasang Ushnu Hospital		9	25	25	218	328	1355	6244	342	57	313	8311	195	202	0	86	0	262	1770	31
12 Solukhumbu		12	15	15	10281	16419	16419	18331	240	0	0	22523	1699	0	0	0	0	11860	1285	0
12.1 Khunde Hospital		11	15	15	110	282	107	5724	182	176	480	6669	123	163	0	32	0	244	281	64
Sunsari Hospital		12	25	25	3385	6663	3364	29409	9808	7945	0	50526	1614	1397	0	0	0	0	6537	0
14 Taplejung		12	15	28	2640	6526	2402	22064	2766	2441	13071	42724	2607	99	0	87	0	2060	22681	1236
16.1 Katarai		12	15	3	249	27	249	20934	3315	3213	135	27846	905	0	0	0	0	1498	1614	247
15 Tehrathum		12	15	15	1654	3150	1689	15180	3371	2834	0	25347	1907	568	0	90	0	1178	1487	140
16.2 Udayapur		12	25	25	2422	4675	2231	18285	8704	2055	2747	31022	1738	1408	0	10	0	1399	9121	1017
Eastern		405	1452	1654	130504	362254	126996	753076	190921	126335	68096	1265424	197425	97465	2990	24547	16278	52036	1090497	21228
17 Kalaya		11	25	25	2754	4242	2741	22783	13586	0	0	39110	2757	376	0	0	0	2001	6930	143
18 Bhaktapur		12	75	50	2380	6439	2121	47518	13476	8997	0	72112	10331	3131	7	647	0	2855	30156	0
19 Bharatpur		12	300	400	30332	86655	27472	112333	34526	9894	6005	190230	27686	15434	368	3231	0	9968	206207	781
20 Dhading		12	15	15	1894	4665	1904	33375	10396	501	381	46457	9230	966	0	1045	0	1167	44411	753
21 Lankapur Zonal		12	200	200	18900	52404	1748	45066	2543	103070	2547	193984	187049	0	672	0	15223	79257	140	
22 Jiri		10	15	15	961	2719	888	11032	3040	2779	230	17969	2158	718	0	97	0	749	8942	104
23 Bir		12	426	460	9731	65800	15708	275271	52727	0	0	343706	65876	13788	2142	21004	195	46914	342122	28889
23.1 Kanti		10	300	305	8425	46847	7442	86423	42990	11230	993	149078	37592	6111	0	200	7015	0	208519	1101
23.2 Sakrawa Tropical and I. D.		11	100	100	3021	10458	2847	15693	1577	0	0	20117	2605	101	0	160	0	0	84707	0
23.4 Maternity		12	350	350	29367	100281	2848	140028	1472	19468	0	437769	1747	27385	0	445	0	87678	317696	1306
24 Shir Memorial		12	150	150	7828	21250	7315	46595	7410	0	0	61310	16433	3740	154	1925	0	1267	63180	9643
24.1 Dhulikhel		12	317	325	12735	50282	12649	117132	10952	5545	621	146899	31629	11516	3694	2059	19930	14782	267300	2435
26 Mahottari (PH)		12	25	25	1004	5783	1021	30357	4251	0	0	35629	5391	0	0	0	0	826	84146	814
27 Hetauda		12	25	50	3651	9726	3905	35797	19227	0	0	58929	9540	426	71	855	165	13937	48284	1493
23.8 Nepal Police Hospital		11	150	150	2027	23369	1912	76665	4053	0	0	82530	14221	4641	648	3095	0	5633	162464	3628
28.1 Biratnagar Children Hospital		10	50	50	2392	4892	1997	10765	2016	2432	0	10785	6171	1644	0	0	0	0	53079	9
28 Trishuli		12	15	25	3986	9487	3912	16864	5634</											





**Raw Data**  
Annex A1 Sheet 2 of 14

Hospital Code	Hospital Name	Received Reports	29 days - <1 Yrs																		All Total
			Recovered		Not Improved		Referral		Lama		Absconded		Dead within 48 hrs		Dead after 48 hrs		Total				
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male			
1	Bhojpur	12	28	51	0	0	3	1	2	3	0	1	0	0	0	0	33	56	89		
2	Dhankuta	12	27	40	0	0	0	2	0	1	0	0	0	0	0	0	27	43	70		
3	Ilam	12	16	21	0	0	0	1	1	1	0	0	1	0	0	18	23	41			
3.1	Dr. MBPCH	12	5	14	0	0	2	1	0	0	0	0	0	0	0	7	15	22			
4	Mechi Zonal	12	208	368	0	0	13	31	8	10	0	0	0	1	2	230	411	641			
4.2	AMDA Hospital	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1		
4.2	Life Line	12	123	162	21	14	11	11	0	2	0	0	0	0	0	155	189	344			
4.4	Barang Medical and Diagnostic Center	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1		
	Amida Mechi Hospital	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Kankai Hospital	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Om International Mechi	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Damak Hospital and Research Center	5	1	0	1	2	1	2	2	0	0	0	1	0	0	5	5	10			
	Mechi Model Hospital & Research Center	12	0	11	0	0	0	0	0	0	0	0	0	0	0	0	11	11			
	Om Sai Pathibhara Hospital	12	123	199	0	0	2	1	1	4	0	0	0	0	0	126	204	330			
	Kanchanjanga Hospital	12	7	28	0	0	0	0	0	0	0	0	0	0	0	7	26	33			
5	Khotang	12	57	55	0	0	2	5	0	1	1	0	1	0	0	61	61	122			
	Morang Co-operative Hospital	6	6	4	0	0	0	0	0	0	0	0	0	2	1	8	5	13			
	Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Birahagar City Asptal, Birahagar	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
6	Koshi Zonal	12	586	1311	0	0	22	42	3	7	1	0	2	4	4	628	1366	1994			
6.1	Rangeli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
6.2	Birat Nursing Home	12	51	139	0	0	6	9	0	1	0	0	0	2	0	57	151	208			
	Neuro Hospital	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Aswadnaryan Hospital	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
7	Okhaidunga UMN	12	94	125	0	0	3	1	0	0	0	0	1	0	0	95	129	224			
	Rumjhatar Hospital	12	3	4	0	0	0	0	1	0	0	0	0	0	0	4	4	8			
8	Panchthar	12	102	143	0	0	8	15	0	1	0	0	0	0	0	110	159	269			
9	Sankhuwasabha	12	62	93	0	0	6	6	0	2	0	0	1	4	0	69	105	174			
10	Sagarmatha Zonal	12	196	480	0	0	3	5	0	0	14	50	1	0	0	214	535	749			
11	Siraha	12	18	25	0	0	1	1	1	1	0	0	0	0	0	20	27	47			
11.1	Lahan	12	12	38	0	0	1	2	1	0	0	0	1	0	0	14	41	55			
	Pasang Lhamu Hospital	9	5	1	0	0	0	0	0	0	0	0	0	0	0	5	1	6			
	Solkhumbu	12	16	27	0	0	0	1	0	1	0	0	0	0	0	16	29	45			
12.1	Khunde Hospital	11	1	2	0	0	0	0	0	0	0	0	0	0	0	1	2	3			
	Sunsari Hospital	12	73	130	0	0	0	1	0	0	0	0	0	0	0	73	131	204			
14	Taplejung	12	53	59	0	0	3	3	0	0	0	0	1	0	0	57	62	119			
16.1	Katari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
15	Tehrathum	12	32	33	3	7	2	3	0	0	0	0	0	0	0	37	43	80			
16	Udayapur	12	59	74	0	0	5	4	2	2	0	0	0	0	0	66	80	146			
	<b>Eastern</b>	<b>405</b>	<b>1974</b>	<b>3637</b>	<b>25</b>	<b>23</b>	<b>91</b>	<b>150</b>	<b>23</b>	<b>37</b>	<b>16</b>	<b>51</b>	<b>7</b>	<b>13</b>	<b>7</b>	<b>5</b>	<b>2143</b>	<b>3916</b>	<b>6059</b>		
17	Kalaya	11	6	7	0	0	0	1	1	3	0	1	0	0	0	7	12	19	0		
18	Shaktapur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
19	Bharatpur	12	754	1124	0	0	50	94	12	15	6	3	2	3	0	824	1239	2063			
20	Dhading	12	59	97	7	0	5	10	1	0	0	0	0	0	0	72	107	179			
21	Janakpur Zonal	12	178	168	0	0	7	5	7	10	5	13	0	0	0	197	196	393			
22	Jiri	10	30	26	0	0	1	3	0	0	0	0	0	0	0	31	29	60			
23	Bir	12	7	11	1	1	0	0	0	0	0	0	0	0	0	8	12	20			
23.1	Kanti	10	845	1782	1	2	0	5	16	23	2	0	0	22	38	886	1850	2736			
23.2	Sukraraj Tropical and I. D.	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
23.4	Maternity	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
24	Shir Memorial	12	72	83	0	0	5	0	0	3	0	0	0	0	0	77	86	163			
24.1	Dhulikhel	12	5	5	0	0	0	0	0	0	0	0	0	0	0	5	5	10			
26	Mahottari (PH)	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
27	Hetauda	12	12	47	0	0	8	4	1	0	0	1	0	0	0	21	52	73			
23.8	Nepal Police Hospital	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	International Friendship Children Hospital	10	313	413	0	0	0	0	0	0	0	0	1	3	6	320	424	744			
28	Trishuli	12	70	116	0	0	8	5	1	2	0	0	0	0	0	79	123	202			
30	Ramechhap	12	22	24	0	0	0	0	0	0	0	0	0	0	0	22	26	48			
	Rajmang samudak Asptal, Malekhu	8	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	1		
	Gajuri Asptal Pvt Ltd	10	0	3	0	0	0	1	0	1	0	0	0	0	0	0	0	5	5		
	Shahid Memorial Dhading Pvt Ltd	10	12	9	2	0	1	0	0	0	0	0	0	0	0	15	9	24			
31	Rasawa	12	3	3	0	0	0	0	0	0	0	0	0	0	0	3	3	6			
32	Gaur	9	0	2	0	0	0	0	1	0	0	0	0	0	0	1	2	3			
33	Sarlahi	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
34	Sindhuli	12	22	26	0	0	5	0	1	4	1	1	0	2	0	29	34	63			
35	Sindhupalchowk	11	17	29	1	0	0	0	3	0	0	0	0	0	0	18	32	50			
	<b>Central</b>	<b>288</b>	<b>2427</b>	<b>3975</b>	<b>12</b>	<b>3</b>	<b>90</b>	<b>132</b>	<b>41</b>	<b>63</b>	<b>14</b>	<b>19</b>	<b>3</b>	<b>8</b>	<b>28</b>	<b>47</b>	<b>2615</b>	<b>4247</b>	<b>6862</b>		
36	Argakhanchi	6	36	65	0	0	3	8	0	0	0	0	0	0	0	39	73	112			
37	Baglung	11	109	143	0	0	10	7	0	1	0	0	0	0	0	119	151	270			
38	Gorkha	11	82	72	0	0	2	7	1	0	0	0	0	0	0	58	80	135			
38.1	Amp Pipal UMN	11	43	67	0	0	0	0	1	2	0	0	1	0	0	44	70	114			
	Ama-Ba Hospital	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
40	P. Bir	9	21	27	0	0	5	3	2	11	0	0	0	1	0	28	42	70			
40.1	Shiva Raj	9	14	27	0	0	0	0	0	0	0	0	0	0	0	14	27	41			
41	Western Regional	12	411	690	0	1	1	3	0	0	0	2	0	0	0	417	700	1117			
41.1	Manipal Teaching	7	104	184	4	12	0	0	4	1	0	0	1	3	2	115	205	320			
42	Lamjung	12	57	92	0	0	2	7	1	6	0	0	0	0	0	60	105	165			
43	Manang	7	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1			
44	Mustang	11	2	7	0	0	1	0	0	0	0	0	0	0	0	3	7	10			
45	Beni	12	65	111	0	0	7	12	1	0	0	1	0	0	0	73	125	198			
46	P. Chandra	10	25	34	0	0	1	6	2	5	0	0	0	0	0	28	45	73			
46.1	Kali Gandaki	11	7	12	0	0	0	1	0	0	0	0	0	0	0	7	13	20			
47	Palpa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
47.1	Palpa UMN	12	282	576	6	7	0	0	0	0	0	0	4	3	7	299	595	894			
	Lumbini Medical College	12	42	42	0	0	11	0	0	0	0	0	0	0	0	44	44	119	163		
48	Parbat	12	33	48	0	0	5	8	0	0	0	1	0	0	0	39	57	96			
50	Syangja	10	9	5	0	0	1	0	0	1	0	0	0	0	0	10	6	16			
51	Bandipur	12	2	5	0	0	1	1	1	0	0	0	0	0	0	4	6	10			
51.1	Damauli	12	8	5	0	0	0	1	0	0	0	0	0	0	0	8	6	14			
	<b>Western</b>	<b>228</b>	<b>1322</b>	<b>2282</b>	<b>10</b>	<b>20</b>	<b>41</b>	<b>63</b>	<b>16</b>	<b>38</b>	<b>1</b>	<b>2</b>	<b>7</b>	<b>12</b>	<b>9</b>	<b>16</b>	<b>1406</b>	<b>2433</b>	<b>3839</b>		
52	Bheri Zonal	5	55	112	0	0	1	5													

Raw Data

Annex A1 Sheet 3 of 13

Hospital Code	Hospital Name	Received Reports	1 - 4 Yrs																All Total
			Recovered		Not Improved		Referral		Lama		Absconded		Dead within 48 hrs		Dead after 48 hrs		Total		
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	
1	Bhojpur	12	50	50	0	0	6	6	2	4	3	1	0	0	0	0	61	61	122
2	Dhankuta	12	31	53	0	0	3	1	0	2	0	0	0	0	0	0	34	56	90
3	Ilam	12	33	28	0	0	1	1	0	0	0	0	0	0	0	0	34	29	63
3.1	Dr.MBPCH	12	7	20	0	0	1	0	0	0	0	0	1	0	0	0	9	20	29
4	Mechi Zonal	12	209	313	0	0	10	4	4	4	1	1	0	0	0	0	224	322	546
4.1	AMDA Hospital	2	6	5	0	0	0	0	0	2	0	0	0	0	0	0	6	7	13
4.2	Life Line	12	159	198	29	17	15	19	1	1	2	0	0	0	0	0	206	235	441
4.4	Bajraj Medical and Diagnostic Center	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	AMDA Mechi Hospital	7	13	7	0	0	1	2	0	4	0	0	0	0	0	0	14	13	27
	Kankai Hospital	10	4	4	0	0	0	0	0	0	0	0	0	0	0	0	4	4	8
	Om International Mechi	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Damak Hospital and Research Center	5	4	8	0	0	0	1	0	0	0	0	0	0	0	0	4	9	13
	Mechi Model Hospital & Research Center	12	22	25	0	0	0	0	0	1	0	0	0	0	0	0	22	26	48
	Om Sai Pathibhara Hospital	12	86	90	0	0	12	12	1	1	0	0	0	0	0	0	99	103	202
	Kanchanjanga Hospital	12	19	51	0	0	1	1	2	0	0	0	0	0	0	0	22	52	74
5	Khojung	12	85	75	0	0	2	1	0	0	0	0	0	0	0	0	89	84	153
	Morang Co-operative Hospital	6	21	15	0	0	0	0	0	0	0	0	0	0	0	0	21	15	36
	Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Biratnagar City Asptal, Biratnagar	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Koshi Zonal	12	525	1006	0	0	12	26	2	5	2	2	3	4	2	3	546	1046	1592
6.1	Rangeli	12	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
6.2	Birat Nursing Home	12	128	284	0	0	4	2	2	0	0	0	0	1	0	0	134	292	426
	Neuro Hospital	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Aawadnaryan Hospital	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	Okhaldhunga UMN	12	94	137	1	0	3	1	0	0	0	0	1	1	0	0	99	139	238
	Rumjhat Hospital	12	5	7	0	0	1	1	0	0	0	0	0	0	0	0	6	8	14
8	Panchthar	12	121	154	0	0	5	5	1	2	1	2	1	0	0	0	129	163	292
9	Sankhuwasabha	12	125	176	2	0	6	1	0	0	0	0	1	0	0	0	133	192	325
10	Sagarmatha Zonal	12	143	316	0	0	1	2	0	0	0	16	20	0	0	0	180	338	498
11	Siraha	12	36	54	0	0	3	7	1	2	0	0	0	0	0	0	40	63	103
11.1	Lahan	12	29	66	0	0	1	0	0	1	0	0	0	0	0	0	30	67	97
	Pasang Lhamu Hospital	9	5	4	0	1	0	0	1	0	0	0	0	0	0	0	6	5	11
12	Solukhumbu	12	37	40	0	0	3	4	1	1	0	0	0	0	0	0	41	45	86
12.1	Khunde Hospital	12	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
	Sunsari Hospital	12	101	154	0	0	1	0	0	0	0	0	0	0	0	0	102	154	256
14	Taplejung	12	100	110	0	0	0	0	0	0	0	0	0	0	0	0	100	110	210
16.1	Katari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15	Tehrathum	12	63	84	1	0	1	6	0	0	0	0	0	0	0	0	65	91	156
16	Udayapur	12	75	75	0	0	4	5	3	5	1	0	0	0	0	0	83	85	168
	Eastern	405	2317	3612	33	19	97	126	21	44	28	27	6	6	2	3	2504	3837	6341
17	Kalaya	11	13	11	0	0	0	0	1	3	5	1	0	0	0	0	17	17	34
18	Bhaktapur	12	3	2	0	0	0	0	0	0	0	0	0	0	0	0	3	2	5
19	Bharatpur	12	911	1263	7	5	39	62	11	18	8	9	2	0	0	0	978	1357	2335
20	Dhading	12	93	117	3	0	5	10	1	0	0	0	0	0	0	0	102	127	229
21	Janakpur Zonal	12	114	196	0	0	3	5	8	8	4	5	0	0	0	0	129	214	343
22	Jiri	10	27	34	0	0	0	0	0	0	0	0	0	0	0	0	28	38	66
23	Bir	12	12	38	1	0	0	0	2	0	0	0	0	0	0	0	15	39	54
23.1	Kanti	10	333	750	1	0	4	4	5	7	2	1	0	0	5	11	350	773	1123
23.2	Sukraraj Tropical and I. D.	11	2	1	0	0	0	0	0	0	0	0	0	0	0	0	2	1	3
23.4	Maternity	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24	Shri Memorial	12	117	147	0	0	5	1	3	4	0	0	0	0	0	0	125	152	277
24.1	Dhulikhel	12	34	103	0	0	0	0	0	0	0	0	0	0	0	0	34	103	137
26	Mahottari (PH)	12	4	4	0	0	0	0	0	0	0	0	0	0	0	0	4	5	9
27	Hetauda	12	32	70	0	0	11	7	0	3	1	3	0	0	0	0	44	83	127
23.8	Nepal Police Hospital	11	2	9	0	0	0	0	0	0	0	0	0	0	0	0	2	9	11
	International Friendship Children Hospital	10	353	435	0	0	0	0	0	0	0	0	5	5	7	10	365	450	815
28	Trishuli	12	128	160	0	0	1	4	7	0	4	0	0	0	0	0	132	172	304
30	Ramechhap	12	25	43	0	0	1	3	0	4	0	0	0	0	0	0	26	52	78
	Rajmang samudra Asptal, Malekhu	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Gajuri Asptal Pvt Ltd	10	4	7	0	0	0	0	0	0	0	0	0	0	0	0	5	8	13
	Shahid Memorial Dhading Pvt Ltd	10	14	8	0	0	1	1	0	0	0	0	0	0	0	0	15	9	24
31	Rasuwa	12	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
32	Gaur	9	2	7	0	0	0	0	1	3	0	0	0	0	0	0	3	10	13
33	Sarlahi	9	4	11	0	0	0	0	0	0	0	0	0	0	0	0	4	1	5
34	Sindhuli	12	23	38	0	1	3	7	0	6	0	1	0	0	0	0	26	53	79
35	Sindhupalchowk	11	35	35	0	0	4	6	1	0	2	1	0	0	0	0	42	42	84
	Central	288	2285	3500	12	7	81	118	35	65	19	21	7	5	12	22	2451	3738	6189
36	Argakhanchi	6	79	101	0	0	5	5	0	0	0	0	0	0	1	0	85	106	191
37	Baglung	11	119	203	11	0	10	6	1	0	0	0	0	0	0	0	141	209	350
38	Gorkha	11	55	98	0	0	2	4	1	0	0	0	0	0	0	0	59	93	152
38.1	Amp Pipal UMN	11	66	128	0	0	0	2	1	3	0	0	0	0	0	0	67	133	200
	Ama-Ba Hospital	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40	P. Bir	11	23	26	0	0	1	3	5	6	0	1	0	0	0	0	29	36	65
40.1	Shiva Raj	9	34	46	0	0	2	0	0	0	0	0	0	0	0	0	36	46	82
41	Western Regional	12	443	743	0	0	0	1	2	0	0	0	2	0	1	445	747	1192	
41.1	Marnipal Teaching	7	142	215	9	10	2	0	1	3	0	0	0	0	0	2	153	234	387
42	Lamtung	12	123	144	0	0	0	3	0	3	6	0	0	0	0	0	129	154	283
43	Manang	7	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
44	Mustang	11	9	13	0	0	2	1	0	0	0	0	0	0	0	0	11	14	25
45	Beni	12	68	122	1	3	3	11	0	0	1	0	0	0	0	0	73	136	209
46	P. Chandra	10	38	40	1	1	1	3	2	3	0	0	0	0	0	0	42	47	89
46.1	Kail Gandaki	11	10	24	0	0	0	1	3	0	0	0	0	0	0	0	10	24	34
47	Palpa	12	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
47.1	Palpa UMN	12	400	697	3	7	0	0	0	0	0	0	1	2	1	405	706	1111	
	Lumbini Medical College	12	91	185	0	0	0	0	2	2	0	0	0	0	1	94	188	282	
48	Parbat	12	47	82	0	1	2	5	0	1	0	0	0	0	0	0	49	89	138
50	Syangja	10	15	22	0	0	0	1	1	0	0	0	0	0	0	0	16	23	39
51	Bandipur	12	16	13	0	0	0	0	0	0	0	0	0	0	0	0	16	14	30
51.1	Damauli	12	18	20	0	0	0	3	1	1	0	0	0	0	0	0	19	24	

**Raw Data**  
Annex A1 Sheet 4 of 14

Hospital Code	Hospital Name	Received Reports	5 - 14 Yrs																		All Total
			Recovered		Not Improved		Referral		Lama		Absconded		Dead within 48 hrs		Dead after 48 hrs		Total				
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male			
1	Bhojpur	12	45	80	0	0	12	12	0	1	1	0	2	0	0	0	60	93	153		
2	Dhankuta	12	26	56	0	0	4	6	0	0	1	0	0	0	0	0	31	62	93		
3	Ilam	12	71	87	0	0	4	13	2	0	0	0	0	0	0	0	77	100	177		
3.1	Dr.MBPCH	12	21	27	0	0	1	1	0	0	0	0	0	1	0	1	22	30	52		
4	Mechi Zonal	12	177	180	0	0	17	14	2	1	0	1	0	0	0	0	196	196	392		
	AMDA Hospital	2	5	6	0	0	0	1	0	0	0	0	0	0	0	0	5	7	12		
4.2	Life Line	12	331	171	24	21	17	24	0	0	0	0	0	0	3	0	375	216	591		
4.4	Jaipang Medical and Diagnostic Center	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Amda Mechi Hospital	7	14	12	0	0	0	1	2	0	0	0	0	0	0	0	16	13	29		
	Kankal Hospital	10	15	20	1	0	4	1	0	0	4	0	0	0	0	0	24	21	45		
	Om International Mechi	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Damak Hospital and Research Center	5	17	20	0	0	0	3	0	0	0	0	0	0	0	0	17	23	40		
	Mechi Model Hospital & Research Center	12	50	41	0	0	0	0	0	0	0	0	0	0	0	0	50	41	91		
	Om Sai Pathbhara Hospital	12	102	123	0	0	11	2	0	0	9	0	0	0	0	0	121	134	255		
	Kanchanja Hospital	12	64	87	0	0	2	2	1	1	0	0	0	0	0	0	67	90	157		
5	Khotang	12	49	70	0	1	12	17	0	1	0	0	0	0	0	0	61	89	150		
	Morang Co-operative Hospital	6	16	16	0	0	0	0	0	0	0	0	0	0	0	0	16	16	32		
	Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Biratnagar City Asptal, Biratnagar	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
6	Koshi Zonal	12	324	528	0	0	10	10	3	4	2	1	3	4	2	0	344	547	891		
6.1	Rangeli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
6.2	Birat Nursing Home	12	138	200	0	0	6	10	6	9	0	0	0	0	0	0	150	219	369		
	Neuro Hospital	12	962	1024	7	7	23	40	22	59	0	0	0	0	0	0	1014	1130	2144		
	Aawadharayan Hospital	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
7	Oxalischung UMN	12	140	234	0	0	4	10	1	11	0	0	1	0	0	0	146	245	391		
	Rumjhatar Hospital	12	17	25	0	0	0	1	0	0	0	0	0	0	0	0	17	26	43		
8	Panchthar	12	122	141	0	0	7	12	3	6	0	2	0	0	0	0	132	161	293		
9	Sankhuwasabha	12	129	173	0	1	23	23	3	6	0	1	0	0	0	0	155	204	359		
10	Sagarmatha Zonal	12	103	154	0	0	2	6	0	0	17	17	1	0	0	1	123	178	301		
11	Siraha	12	28	30	0	0	1	3	0	0	0	1	0	0	0	0	28	34	62		
11.1	Lahan	12	60	78	0	0	1	3	0	0	0	0	0	0	0	0	61	81	142		
	Pasang Lhamu Hospital	9	10	5	0	1	0	0	0	0	0	0	0	0	0	0	10	6	16		
12	Solukhumbu	12	57	62	0	0	6	9	6	3	0	0	0	0	0	0	69	74	143		
12.1	Khunde Hospital	11	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1		
	Sunsari Hospital	12	36	62	0	0	0	4	1	0	0	0	0	0	0	0	37	66	103		
14	Taplejung	12	124	105	0	0	5	3	0	0	0	0	0	0	0	0	129	108	237		
16.1	Katari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
15	Tehrathum	12	73	70	2	0	6	10	1	2	0	1	0	0	0	0	82	81	163		
16	Udayapur	12	49	70	0	1	3	8	0	2	0	0	0	0	0	0	52	81	133		
	<b>Eastern</b>	<b>405</b>	<b>3375</b>	<b>3963</b>	<b>34</b>	<b>32</b>	<b>180</b>	<b>249</b>	<b>61</b>	<b>103</b>	<b>25</b>	<b>24</b>	<b>7</b>	<b>5</b>	<b>5</b>	<b>2</b>	<b>3687</b>	<b>4378</b>	<b>8065</b>		
17	Katlaya	11	22	22	0	0	2	1	3	7	0	0	0	0	0	0	27	30	57		
18	Bhaktapur	12	29	38	0	0	0	0	0	0	0	0	0	0	0	0	29	38	67		
19	Bharatpur	12	912	1312	0	0	52	45	10	20	6	10	2	4	0	0	982	1391	2373		
20	Dhading	12	89	99	0	0	8	5	0	0	0	0	0	0	0	0	97	104	201		
21	Janakpur Zonal	12	291	327	0	0	5	3	13	9	5	0	0	0	0	0	314	339	653		
22	Jiri	10	47	61	0	1	2	6	0	1	0	0	0	0	0	0	49	69	118		
23	Bir	12	136	300	1	9	1	0	2	1	0	0	0	1	0	1	140	312	452		
23.1	Kantl	10	827	1569	9	6	0	1	7	17	0	4	1	0	18	25	852	1622	2484		
23.2	Sukraraj Tropical and L. D.	11	40	36	0	0	0	0	0	0	0	0	0	0	0	0	40	36	76		
23.4	Maternity	12	11	0	0	0	0	0	0	0	0	0	0	0	0	0	11	0	11		
24	Shir Memorial	12	253	280	0	0	0	3	2	3	0	0	1	0	0	0	256	286	542		
24.1	Dhulikhel	12	170	385	0	0	0	0	0	0	0	0	0	0	0	1	170	386	556		
25	Mahottari (PH)	12	12	22	0	0	1	2	0	5	1	0	0	0	0	0	13	25	38		
27	Hetauda	12	78	81	0	0	13	15	6	1	0	0	0	0	0	0	97	97	194		
23.8	Nepal Police Hospital	11	20	33	0	0	0	0	0	0	0	0	0	0	0	0	20	33	53		
	International Friendship Children Hospital	10	181	198	0	0	0	0	0	0	0	0	0	3	0	0	181	201	382		
28	Trishuli	12	87	106	0	0	11	13	0	2	0	0	0	0	0	0	98	119	217		
30	Ramechhap	12	23	24	0	0	1	3	2	2	0	0	0	0	0	0	26	29	55		
	Nepang Samudra Asptal, Malekhu	8	1	2	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3		
	Gajuri Asptal Pvt Ltd	10	4	12	0	0	3	3	3	3	0	0	0	0	0	0	10	18	28		
	Shahid Memorial Dhading Pvt Ltd	10	13	16	0	0	0	1	0	0	0	0	0	0	0	0	13	17	30		
31	Rasuwa	12	4	4	0	0	1	0	0	1	0	0	0	0	0	0	5	5	10		
32	Gaur	9	7	10	0	0	4	4	1	1	0	1	0	0	0	0	12	16	28		
33	Sarlahi	9	8	7	0	0	0	0	0	0	0	0	0	0	0	0	8	8	16		
34	Sindhuli	12	81	69	0	0	4	7	0	3	2	0	0	0	0	0	68	78	146		
35	Sindhupalchowk	11	50	64	0	0	5	7	1	1	1	0	0	0	0	0	57	72	129		
	<b>Central</b>	<b>288</b>	<b>3376</b>	<b>5077</b>	<b>10</b>	<b>16</b>	<b>113</b>	<b>119</b>	<b>53</b>	<b>70</b>	<b>12</b>	<b>15</b>	<b>4</b>	<b>9</b>	<b>18</b>	<b>27</b>	<b>3586</b>	<b>5333</b>	<b>8919</b>		
36	Argakhanchi	6	84	95	0	0	9	17	1	0	0	0	0	0	0	0	94	112	206		
37	Baglung	11	131	137	0	0	7	7	1	0	0	0	0	0	0	0	139	144	283		
38	Gorkha	11	51	76	0	0	5	8	0	2	0	0	1	0	0	0	57	86	143		
38.1	Amj Pipal UMN	11	62	114	0	0	1	4	0	2	0	0	0	0	0	0	65	121	186		
	Ama-Ba Hospital	4	0	10	0	0	0	0	0	0	0	0	0	0	0	0	0	10	10		
40	P. Bir	11	14	25	0	0	2	2	4	1	1	0	0	0	0	0	21	28	49		
40.1	Shiva Raj	9	47	48	0	0	0	0	0	0	0	0	0	0	0	0	47	48	95		
41	Western Regional	12	466	886	0	0	0	0	1	1	0	0	1	0	0	1	468	888	1356		
41.1	Manjpal Teaching	7	161	336	10	14	0	0	0	0	0	0	0	0	0	0	175	369	544		
42	Lamjung	12	117	229	0	0	4	14	5	3	0	0	0	0	0	0	128	246	374		
43	Manang	7	2	1	0	0	0	1	0	0	0	0	0	0	0	0	2	2	4		
44	Mustang	11	22	8	0	0	2	6	0	0	0	0	0	0	0	0	24	14	38		
45	Beni	12	82	96	0	3	11	12	0	0	0	0	0	0	0	0	93	111	204		
46	P.Chandra	10	29	26	1	1	2	9	3	3	0	0	0	0	0	0	35	39	74		
46.1	Kail Gandaki	11	37	0	0	0	0	0	0	2	0	0	0	0	0	0	23	3	26		
47	Palpa	12	12	8	0	0	1	0	0	0	0	0	0	0	0	0	13	8	21		
47.1	Palpa UMN	12	522	1008	6	6	0	0	0	0	0	0	0	2	5	530	1019	1549			
	Lumbini Medical College	12	196	337	0	0	1	2	3	0	0	0	1	1	0	199	342	541			
48	Parbat	12	90	74	0	0	5	4	0	1	0	0	0	0	0	0	95	79	174		
50	Syangja	10	19	18	0	0	3	2	0	2	0	0	0	0	0	0	22	22	44		
51	Bandipur	12	48																		

**Raw Data**  
Annex A1 Sheet 5 of 14

Hospital Code	Hospital Name	Received Reports	15 - 19 Yrs																All Total
			Recovered		Not Improved		Referral		Lama		Absconded		Dead within 48 hrs		Dead after 48 hrs		Total		
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	
1	Bhojpur	12	142	79	0	0	14	15	3	0	0	0	0	0	0	0	159	94	253
2	Dhankuta	12	80	23	0	0	9	1	2	0	0	0	0	0	0	0	91	24	115
3	Ilam	12	212	32	0	0	15	3	3	1	0	0	0	0	0	0	230	36	266
3.1	Dr.MBPCH	12	28	12	0	0	3	2	0	0	0	0	0	0	0	0	31	14	45
4	Mechi Zonal	12	559	131	0	0	53	7	9	2	1	0	0	0	0	0	622	140	762
4.2	AIMDA Hospital	12	4	7	0	0	1	0	0	0	0	0	0	0	0	0	5	7	12
4.2	Life Line	12	1970	144	46	31	29	19	1	2	0	0	0	0	0	0	2046	196	2242
4.4	Bajrang Medical and Diagnostic Center	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	Amda Mechi Hospital	7	24	14	0	0	1	0	3	0	0	0	0	0	0	0	28	14	42
	Kankai Hospital	10	48	34	1	0	3	3	0	3	2	0	0	0	0	0	55	39	94
	Om International Mechi	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Damak Hospital and Research Center	5	14	14	0	0	0	0	0	0	0	0	0	0	0	0	14	14	28
	Mechi Modi Hospital & Research Center	12	46	43	0	0	0	0	0	0	0	0	0	0	0	0	46	43	89
	Om Sai Pathibhara Hospital	12	136	174	0	0	4	1	0	6	0	0	0	0	0	0	140	181	321
	Kanchanjanga Hospital	12	113	84	0	0	2	1	0	3	1	0	0	0	0	0	116	88	204
5	Khotang	12	137	52	1	0	14	6	3	0	0	0	0	1	0	0	156	58	214
	Morang Co-operative Hospital	6	12	9	0	0	0	0	0	0	0	0	0	0	0	0	12	9	21
	Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Biratnagar City Aspalat, Biratnagar	3	22	21	0	0	0	0	0	0	0	0	0	0	0	0	22	21	43
6	Koshi Zonal	12	1865	219	0	0	19	1	25	1	2	0	1	2	5	2	1917	225	2142
6.1	Rangeli	12	11	0	0	0	0	4	0	0	0	0	0	0	0	0	15	0	15
6.2	Birat Nursing Home	12	202	143	0	0	4	7	7	4	1	0	0	0	0	0	214	154	368
	Neuro Hospital	12	1001	1049	131	17	21	29	45	37	0	0	0	0	0	0	1080	1132	2212
	Aswadnaryan Hospital	6	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
7	Okhaldhunga UMN	12	233	82	0	0	5	6	0	1	0	0	1	0	0	0	239	89	328
	Rumjhat Hospital	12	30	11	0	0	5	4	1	0	1	3	0	0	0	0	37	18	55
8	Panchthar	12	300	80	0	0	13	14	3	1	0	0	0	0	0	0	316	95	411
9	Sankhuwasabha	12	297	86	0	0	17	9	6	1	0	0	0	0	0	0	310	96	406
10	Sagarmatha Zonal	12	675	69	0	0	11	4	0	0	112	5	1	0	0	0	799	78	877
11	Siraha	12	81	19	0	0	12	3	2	0	0	0	0	0	0	0	95	22	117
11.1	Lahan	12	535	27	0	0	14	2	8	1	0	0	0	0	0	0	557	30	587
	Pasang Lhamu Hospital	9	14	3	0	2	0	0	0	0	0	0	0	0	0	0	14	5	19
12	Solukhumbu	12	89	44	0	0	8	4	1	1	0	0	0	0	0	0	98	49	147
12.1	Khunde Hospital	11	8	3	0	0	0	0	0	0	0	0	0	0	0	0	9	3	12
	Sunsari Hospital	12	370	35	0	0	40	3	11	0	1	0	0	0	0	0	412	38	450
14	Taplejung	12	287	155	0	0	2	1	0	0	0	0	0	0	0	0	289	156	445
16.1	Katari	12	58	0	0	0	5	0	0	0	0	0	0	0	0	0	63	0	63
15	Tehrathum	12	108	48	4	2	13	4	2	1	0	0	0	0	0	0	127	55	182
16	Udayapur	12	190	53	0	0	16	4	1	2	0	0	0	0	0	0	209	58	267
	<b>Eastern</b>	<b>405</b>	<b>9893</b>	<b>2999</b>	<b>65</b>	<b>52</b>	<b>357</b>	<b>153</b>	<b>128</b>	<b>63</b>	<b>124</b>	<b>10</b>	<b>3</b>	<b>2</b>	<b>6</b>	<b>2</b>	<b>10574</b>	<b>3281</b>	<b>13855</b>
17	Kailasya	11	95	6	0	0	7	1	4	2	0	1	0	0	0	0	106	10	116
18	Bhaktapur	12	130	37	3	0	9	2	2	1	0	0	0	0	0	0	146	40	186
19	Bharatpur	12	2344	512	0	0	16	12	11	13	11	3	0	3	0	0	2382	543	2925
20	Dhading	12	152	43	0	0	3	12	7	3	0	0	0	0	0	0	167	53	220
21	Janakpur Zonal	12	2394	276	0	0	6	11	20	15	6	3	0	1	2	0	2428	306	2734
22	Jiri	10	42	30	0	0	3	1	0	0	0	0	0	0	0	0	45	31	76
23	Bir	12	251	403	6	9	1	4	7	0	0	0	1	3	6	0	267	427	694
23.1	Kanti	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23.2	Sukraraj Tropical and I. D.	11	126	151	0	0	0	0	0	0	0	0	0	1	2	0	127	153	280
23.4	Maternity	12	3774	0	0	0	2	0	37	0	2	0	0	0	0	0	3815	0	3815
24	Shri Memorial	12	327	265	0	0	2	4	5	2	0	0	1	0	0	0	335	271	606
24.1	Dhulikhel	12	669	182	0	0	0	0	0	0	0	0	0	0	0	0	669	182	851
26	Mahottari (PH)	12	119	8	0	0	5	0	0	0	0	0	0	0	0	0	124	8	132
27	Hetauda	12	358	42	0	0	30	5	3	0	0	1	0	0	0	0	391	48	439
23.8	Nepal Police Hospital	11	32	17	0	0	0	2	0	0	0	0	0	0	0	0	32	19	51
	International Friendship Children Hospital	10	40	32	0	0	0	0	0	0	0	0	0	0	0	0	40	32	72
28	Trishuli	12	367	52	0	0	39	5	2	0	1	0	0	0	0	0	409	57	466
30	Ramechhap	12	65	20	0	0	1	0	0	0	0	0	0	0	0	0	66	20	86
	Ramraj samstak Aspalat, Maleku	8	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3
	Gajuri Aspalat Pvt Ltd	10	3	6	0	0	0	0	2	2	3	0	0	0	0	0	5	11	16
	Shahid Memorial Dhading Pvt Ltd	10	23	12	0	0	0	0	0	0	0	0	0	0	0	0	23	12	35
31	Rasuwa	12	15	4	0	0	0	0	0	0	0	0	0	0	0	0	15	4	19
32	Gaur	9	90	6	0	0	9	2	11	3	0	0	0	0	0	0	110	11	121
33	Sarlahi	9	150	7	0	0	9	0	0	0	0	0	0	0	0	0	159	7	166
34	Sindhuli	12	144	32	0	0	13	6	2	2	1	0	0	0	0	0	160	40	200
35	Sindhupalchowk	11	95	36	0	0	4	4	1	1	2	0	0	0	0	0	102	41	143
	<b>Central</b>	<b>288</b>	<b>11806</b>	<b>2180</b>	<b>11</b>	<b>12</b>	<b>168</b>	<b>65</b>	<b>107</b>	<b>50</b>	<b>24</b>	<b>8</b>	<b>1</b>	<b>5</b>	<b>7</b>	<b>8</b>	<b>12124</b>	<b>2328</b>	<b>14452</b>
36	Argakhanchi	6	114	43	0	0	13	4	1	0	0	1	1	0	0	0	129	48	177
37	Baglung	11	280	74	0	0	11	0	0	1	0	0	0	0	0	0	291	75	366
38	Gorkha	11	278	39	0	0	16	6	6	3	0	0	0	0	0	0	300	48	348
38.1	Amp Pipal UMN	11	119	57	1	1	1	0	7	0	0	0	0	0	0	0	128	60	188
	Ama-Ba Hospital	4	4	5	0	0	0	0	0	0	0	0	0	0	0	0	4	5	9
40	P. Bir	11	67	7	0	0	9	0	2	1	0	0	0	0	0	0	78	8	86
40.1	Shiva Raj	9	60	69	0	0	2	0	0	0	0	0	0	0	0	0	62	69	131
41	Western Regional	12	1869	317	0	0	1	1	3	0	1	0	3	0	2	0	1877	320	2197
41.1	Manjapa Teaching	7	375	210	23	9	0	0	7	5	0	1	2	1	3	0	407	229	636
42	Lamjung	12	305	56	0	0	5	5	8	3	0	0	0	0	1	0	319	64	383
43	Manang	7	2	1	0	0	0	0	0	0	0	0	0	0	0	0	2	1	3
44	Mustang	11	28	9	0	0	3	3	1	0	0	0	0	0	0	0	32	12	44
45	Beni	12	203	45	2	0	16	3	0	2	0	0	0	0	0	0	221	50	271
46	P. Chandra	10	131	25	0	0	8	6	4	1	0	0	0	0	0	0	143	32	175
46.1	Kail Gandaki	11	37	21	0	0	1	4	0	0	0	0	0	0	0	0	38	23	61
47	Palpa	12	14	9	0	0	1	0	0	0	0	0	0	0	0	0	16	9	25
47.1	Palpa UMN	12	590	288	3	4	0	0	0	0	0	0	4	0	1	0	597	293	890
	Lumbini Medical College	12	458	127	0	0	0	0	2	5	0	0	0	1	2	0	461	134	595
48	Parbat	12	206	87	0	0	13	6	0	0	0	0	0	0	0	0	219	93	312
50	Syangja	10	149	16	1	0	15	2	0	0	0	0	0						

**Raw Data**  
Annex A1 Sheet 6 of 14

Hospital Code	Hospital Name	Received Reports	20 - 29 Yrs																	
			Recovered		Not Improved		Referral		Lama		Absconded		Dead within 48 hrs		Dead after 48 hrs		Total		All Total	
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		
1	Bhojpur	12	307	91	0	0	47	16	9	3	2	1	0	2	0	1	365	114	479	
2	Dhankuta	12	335	21	0	0	55	3	3	0	2	0	0	0	1	395	25	420		
3	Ilam	12	807	43	1	0	20	5	6	0	0	0	0	0	0	834	48	882		
3.1	Dr.MBPCH	12	65	20	0	0	7	5	0	0	1	0	0	0	0	73	25	98		
4	Mechi Zonal	12	1934	200	0	0	164	16	18	4	4	0	3	1	1	2124	221	2345		
4	AMDA Hospital	2	15	13	0	0	2	1	2	1	0	0	0	0	0	19	15	34		
4.2	Life Line	12	5739	195	80	42	46	28	5	3	0	0	0	2	0	5872	268	6140		
4.4	Birang Medical and Diagnostic Center	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Amda Mechi Hospital	7	35	20	0	0	2	1	5	1	0	0	0	0	0	42	22	64		
	Kankal Hospital	10	114	67	0	0	7	8	1	1	10	6	0	0	1	132	83	215		
	Om International Mechi	5	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1		
	Damak Hospital and Research Center	5	59	25	0	0	0	1	2	2	0	0	0	0	0	61	28	89		
	Nicos Model Hospital & Research Center	12	89	42	0	0	3	0	0	0	0	0	0	0	0	92	42	134		
	Om Sai Pathibhara Hospital	12	426	245	0	0	2	8	6	12	0	0	0	0	0	434	265	699		
	Kanchanjangha Hospital	12	247	177	0	0	3	2	0	0	0	0	0	0	0	250	179	429		
5	Khotang	12	443	65	1	0	27	6	2	1	1	0	1	0	0	475	72	547		
	Morang Co-operative Hospital	6	11	8	0	0	0	0	0	0	0	0	0	0	0	11	8	19		
	Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Biratnagar City Asptal, Biratnagar	3	14	23	1	0	0	0	0	0	0	0	0	0	0	15	23	38		
6	Koshi Zonal	12	8330	330	0	0	126	1	100	2	24	0	4	5	4	8588	339	8927		
6.1	Rangeli	12	94	0	0	0	17	0	1	0	0	0	0	0	0	112	0	112		
6.2	Birat Nursing Home	12	1001	307	0	0	15	9	18	6	0	0	1	1	1	1036	323	1359		
	Neuro Hospital	12	1146	1186	10	28	44	41	35	32	0	0	0	5	0	1235	1292	2527		
	Aawadharayan Hospital	6	24	0	0	0	0	0	0	0	0	0	0	0	0	24	0	24		
7	Okhaldhunga UMN	12	723	108	1	0	10	5	2	0	0	1	1	1	0	737	115	852		
	Rumjhat Hospital	12	47	16	0	0	5	1	1	0	0	1	0	0	0	53	18	71		
8	Panchthar	12	844	120	0	0	50	23	8	4	5	0	0	0	0	907	147	1054		
9	Sankhuwasabha	12	729	103	0	0	46	19	5	2	0	0	2	0	0	782	124	906		
10	Sagarmatha Zonal	12	4104	109	0	0	45	5	0	0	474	17	0	0	1	4524	131	4755		
11	Biraha	12	446	15	0	0	65	0	18	0	1	0	0	0	0	520	16	536		
11.1	Lahan	12	2582	49	0	0	70	1	39	0	4	0	3	0	0	2698	50	2748		
	Pasang Lhamu Hospital	9	35	11	1	0	3	2	2	0	0	0	0	0	0	41	13	54		
12	Solukhumbu	12	207	59	2	0	32	11	10	3	0	0	0	0	0	251	73	324		
12.1	Khunde Hospital	11	10	7	0	0	1	1	0	0	0	0	0	0	0	11	8	19		
	Sursati Hospital	12	1457	47	0	0	280	18	3	0	0	0	0	0	0	1740	69	1809		
14	Taplejung	12	398	178	0	0	4	2	0	0	0	0	0	0	0	402	180	582		
16.1	Katari	12	162	0	0	0	20	0	0	0	0	0	0	0	0	182	0	182		
15	Tehrathum	12	248	89	6	2	24	12	2	0	0	0	0	0	0	280	103	383		
16	Udayapur	12	916	56	2	0	53	9	2	1	2	1	0	0	0	975	67	1042		
	Eastern	405	34143	4045	105	72	1285	260	306	78	530	29	15	15	9	4	36393	4503	40896	
17	Kailasya	12	1948	12	1	0	29	1	27	2	7	0	0	0	0	2012	15	2027		
18	Bhaktapur	12	834	54	17	0	51	1	20	1	4	0	0	0	1	927	56	983		
19	Bharatpur	12	8895	594	0	0	68	18	29	17	11	10	10	3	2	9015	644	9659		
20	Dhading	12	375	39	0	0	57	11	5	0	0	0	0	0	0	437	50	487		
21	Janakpur Zonal	12	5826	440	0	0	19	18	35	34	6	9	3	0	6	5895	504	6399		
22	Jiri	10	88	37	0	0	2	3	1	1	0	0	0	0	0	91	41	132		
23	Bir	12	503	828	18	12	1	0	7	13	0	0	4	14	8	547	884	1411		
23.1	Kanti	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23.2	Sukraraj Tropical and I. D.	11	352	265	0	0	0	0	0	0	0	0	0	2	7	354	272	626		
23.4	Maternity	12	19730	0	0	0	25	0	159	0	23	0	1	0	0	19938	0	19938		
24	Shir Memorial	12	1700	724	0	0	5	6	2	3	0	0	2	1	0	1709	734	2443		
24.1	Dhulikhel	12	3001	399	0	0	0	0	0	0	0	0	0	0	0	3001	399	3400		
25	Mahottari (PH)	12	659	17	0	0	21	0	0	0	0	0	0	0	0	680	18	698		
27	Hetauda	12	1578	68	0	0	107	19	19	0	5	0	0	1	0	1710	87	1797		
23.8	Nepal Police Hospital	11	136	588	0	0	3	5	0	0	0	0	0	0	0	139	593	732		
	International Friendship Children Hospital	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
28	Trishuli	12	971	72	0	0	108	16	6	0	0	0	1	0	0	1086	88	1174		
30	Ramechhap	12	153	15	2	0	9	0	1	3	3	0	0	0	0	167	19	186		
	Rajmang samadok Asptal, Malekhu	8	2	2	0	0	0	0	0	0	0	0	0	0	0	2	2	4	4	
	Gajuri Asptal Pvt Ltd	10	14	7	0	0	1	1	5	6	0	0	0	0	0	20	14	34		
	Shahid Memorial Dhading Pvt Ltd	10	18	10	0	0	1	0	0	0	0	0	0	0	0	19	10	29		
31	Rasuwa	12	38	6	0	0	6	0	0	0	0	0	0	0	0	44	6	50		
32	Gaur	9	884	3	0	0	74	4	85	4	2	0	0	0	0	1045	11	1056		
33	Sarlahi	9	583	5	0	0	20	0	0	0	0	0	0	0	0	603	5	608		
34	Sindhuli	12	403	33	0	0	28	10	9	2	1	0	0	0	0	441	45	486		
35	Sindhupalchowk	11	279	31	0	0	17	7	2	0	1	1	0	0	0	299	39	338		
	Central	288	48970	4249	38	12	652	122	414	86	60	20	21	7	26	20	50181	4516	54697	
36	Argachandi	6	384	77	1	0	39	8	3	1	1	1	0	0	0	428	88	516		
37	Baglung	11	1027	64	0	0	59	7	1	1	0	0	0	0	0	1087	72	1159		
38	Gorkha	11	706	29	0	0	47	8	8	2	1	0	0	0	0	762	40	802		
38.1	Amp Pipal UMN	11	210	37	0	0	1	0	6	2	1	0	0	0	1	219	39	258		
	Ama-Ba Hospital	4	8	5	0	0	0	0	0	0	0	0	0	0	0	8	5	13		
40	P. Bir	11	578	15	0	0	74	4	10	3	8	1	0	0	0	670	23	693		
40.1	Shiva Raj	9	245	69	0	0	15	0	0	0	0	0	0	0	0	260	69	329		
41	Western Regional	12	8560	448	1	0	9	10	4	2	0	5	4	5	5	8577	463	9040		
41.1	Manpal Teaching	7	1252	379	88	29	0	2	19	5	0	0	5	3	1	1345	421	1766		
42	Lamjung	12	957	49	0	0	21	9	16	2	0	0	0	0	1	994	61	1055		
43	Manang	7	7	10	0	0	0	0	0	0	0	0	0	0	0	7	10	17		
44	Mustang	11	75	31	0	0	9	8	1	0	0	0	0	0	0	85	39	124		
45	Beni	12	496	42	2	1	34	6	2	0	0	1	0	0	1	534	51	585		
46	P. Chandra	12	443	27	1	0	39	7	10	4	1	1	0	0	0	502	41	543		
46.1	Kail Gandaki	11	67	43	0	0	4	2	1	1	0	0	0	0	0	72	46	118		
47	Palpa	12	39	14	1	0	2	0	1	0	0	0	0	0	0	43	14	57		
47.1	Palpa UMN	12	2047	412	8	6	0	0	0	0	0	0	1	3	1	4	2057	425	2482	
	Lumbini Medical College	12	1497	291	0	0	1	0	7	3	0	0	0	1	2	1607	295	1802		
48	Parbat	12	392	62	2	3	30	9	2	0	0	0	0	0	0	426	74	500		
50	Syangja	10	356	16	0	0	38	2	6	0	1	0	0	0	0	401	18	419		
51	Bandipur	12	122	32	0	0	14	1	0	1	0	0	0	0	0	136	34	170		
51.1	Damauli	12	434	19	0	0	36	1	0	0	0	0	0	0	0	470	20	490		
	Western	228	19902	2171	84	39	465	77	105	31	12	4	12	11	10	15	2059			

Raw Data

Annex A1 Sheet 7 of 14

30 - 39 Yrs

Hospital Code	Hospital Name	Received Reports	Recovered		Not Improved		Referral		Lama		Absconded		Dead within 48 hrs		Dead after 48 hrs		Total		All Total	
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		
			1	Bhojpur	12	149	53	0	0	20	10	5	6	0	0	0	0	0		0
2	Dhankula	12	81	12	0	0	16	0	1	0	0	0	0	0	0	0	0	98	12	110
3	Ilam	12	204	52	0	0	8	2	5	0	0	0	1	0	0	0	0	218	54	272
3.1	Dr.MBPCH	12	38	17	0	0	6	1	0	0	0	0	0	0	0	0	0	44	18	62
4	Mechi Zonal	12	525	190	0	0	49	18	5	7	0	0	1	5	4	584	220	804		
	AMDA Hospital	2	9	9	0	0	0	1	1	1	0	0	0	0	0	0	0	10	11	21
4.2	Life Line	12	1156	141	45	27	16	14	1	1	0	3	0	0	0	0	0	1218	186	1404
4.4	Bairang Medical and Diagnostic Center	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Amida Mechi Hospital	7	31	21	0	0	1	4	3	2	0	0	0	0	0	0	0	35	27	62
	Kankai Hospital	10	103	97	0	2	6	2	1	3	5	2	0	0	0	0	0	115	106	221
	Om International Mechi	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Danakh Hospital and Research Center	5	31	19	0	0	0	1	1	0	0	0	0	0	0	0	0	32	20	52
	Mechi Model Hospital & Research Center	12	68	36	0	0	0	0	2	0	0	0	0	0	0	0	0	70	36	106
	Om Sai Pathibhara Hospital	12	392	323	0	0	7	9	1	3	0	0	0	0	0	0	0	400	335	735
	Kanchanjangha Hospital	12	221	189	0	0	4	4	2	1	0	0	0	0	0	0	0	227	194	421
5	Khotang	12	116	17	0	0	19	5	1	1	0	0	0	0	0	0	0	138	23	159
	Morang Co-operative Hospital	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Biratnagar City Asptal, Biratnagar	3	27	24	0	0	0	0	0	0	0	0	0	0	0	0	0	27	24	51
6	Koshi Zonal	12	1488	330	0	0	26	2	34	3	7	0	2	1	5	2	1562	338	1900	
6.1	Rangeli	12	13	0	0	3	0	0	0	0	0	0	0	0	0	0	0	16	0	16
6.2	Birat Nursing Home	12	756	365	0	0	14	7	22	11	0	0	0	0	1	794	384	1178		
	Neuro Hospital	12	1239	1213	26	38	37	43	22	46	0	0	7	10	0	0	0	1331	1350	2681
	Aawadnaryan Hospital	16	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	7	0	7
7	Okhaldhunga UMN	12	232	86	1	0	2	2	0	0	0	0	4	1	0	0	0	239	89	328
	Rumjhar Hospital	12	21	7	0	0	1	1	0	1	0	0	0	0	0	0	0	22	9	31
8	Panchthar	12	289	68	0	0	4	28	4	1	2	0	2	1	1	0	0	319	177	396
9	Sankhuwasabha	12	234	87	0	0	19	16	4	1	0	0	0	1	0	0	0	257	105	362
10	Sagarmatha Zonal	12	518	104	0	0	14	6	0	0	56	11	0	0	1	0	0	589	121	710
11	Siraha	12	100	20	0	0	9	0	1	1	0	1	0	0	0	0	0	110	22	132
11.1	Lahan	12	338	39	0	0	9	2	14	0	0	0	0	0	0	0	0	361	41	402
	Passang Lhamu Hospital	9	27	16	0	0	1	4	1	1	0	0	2	0	0	0	0	31	21	52
12	Solukhumbu	12	87	40	0	0	13	12	2	0	0	0	0	0	1	0	0	103	52	155
12.1	Khunde Hospital	11	8	9	0	1	0	0	0	0	0	0	0	1	0	0	0	8	11	19
	Sunsari Hospital	12	198	40	0	0	22	1	1	0	0	0	0	0	0	0	0	221	41	262
14	Taplejung	12	230	155	0	0	3	3	0	0	0	0	0	0	0	0	0	233	158	391
16.1	Katari	12	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	8	0	8
15	Tehrathum	12	83	35	1	0	14	6	0	0	0	1	0	0	0	0	0	99	41	140
16	Udayapur	12	145	28	1	0	11	3	1	1	0	0	0	0	0	1	158	33	191	
	Eastern	405	9172	3842	74	68	378	183	132	92	69	19	19	16	12	8	9856	4228	14084	
17	Kalaya	11	171	18	0	0	2	1	6	1	1	0	0	0	0	0	0	180	20	200
18	Bhaktapur	12	401	58	0	0	18	1	12	1	2	1	0	0	1	433	62	495		
19	Bharatpur	12	1836	522	0	0	24	12	21	17	10	9	8	15	5	3	1904	578	2482	
20	Dhading	12	75	30	0	1	8	5	0	0	0	0	0	0	0	0	0	83	36	119
21	Janakpur Zonal	12	3167	380	0	0	36	37	70	71	18	18	5	3	8	2	3304	511	3815	
22	Jiri	10	36	19	0	0	0	2	1	2	0	0	0	0	0	0	0	37	23	60
23	Bir	12	507	685	11	28	0	1	3	17	0	0	3	11	19	26	543	768	1311	
23.1	Kanti	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23.2	Sukraraj Tropical and I. D.	11	318	320	0	0	0	0	0	0	0	0	0	0	4	23	322	343	665	
23.4	Maternity	12	3525	0	0	0	8	0	32	0	19	0	1	0	3	0	3588	0	3588	
24	Shri Memorial	12	500	336	0	0	5	8	8	0	0	0	1	0	0	0	514	350	864	
24.1	Dhulikhel	12	718	382	0	0	0	0	0	0	0	0	0	0	0	0	0	718	382	1100
26	Mahottari (PH)	12	101	12	0	0	4	0	0	0	0	0	0	0	0	0	0	105	12	117
27	Hetauda	12	248	35	0	0	40	7	6	2	0	0	0	1	0	2	294	47	341	
23.8	Nepal Police Hospital	11	107	363	0	0	3	5	0	0	0	0	0	0	0	0	0	110	368	478
	International Friendship Children Hospital	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Trishuli	12	211	63	0	0	20	7	1	1	0	0	0	0	0	0	0	232	71	303
30	Ramechhap	12	51	21	0	0	6	0	4	0	0	0	0	0	0	0	0	61	21	82
	Rajmang samudai Asptal, Maleku	8	4	2	0	0	0	0	0	0	0	0	0	0	0	0	0	4	2	6
	Gajuri Asptal Pvt Ltd	10	6	7	0	0	0	3	3	0	0	0	0	0	0	0	0	9	10	19
	Shahid Memorial Dhading Pvt Ltd	10	14	13	0	0	0	0	0	0	0	0	0	0	0	0	0	14	13	27
31	Rasuwa	12	20	4	0	0	3	2	0	1	0	0	0	0	0	0	0	23	7	30
32	Gaur	9	166	5	0	0	15	3	25	2	0	0	0	0	1	9	207	10	217	
33	Sarlahi	9	80	11	0	0	5	0	0	0	0	0	0	0	0	0	0	85	11	96
34	Sindhuli	12	93	24	0	0	8	1	2	2	0	0	0	0	1	0	0	104	27	131
35	Sindhupalchowk	11	108	34	0	0	7	2	1	0	0	0	0	0	0	0	0	117	39	156
	Central	288	12463	3344	11	29	212	94	195	125	51	31	18	31	41	57	12991	3711	16702	
36	Argakhanchi	6	113	44	0	0	10	5	0	0	0	0	0	0	0	0	0	123	49	172
37	Baglung	11	218	64	0	0	12	3	0	0	0	0	0	0	0	0	0	230	67	297
38	Gorkha	11	123	41	0	0	13	3	0	5	2	0	0	0	0	0	0	139	57	196
38.1	Amp Pipal UMN	11	73	36	0	0	0	3	3	1	0	0	0	0	0	0	0	76	40	116
	Ama-Ba Hospital	4	3	0	0	0	1	2	0	0	0	0	0	0	0	0	0	4	2	6
40	P. Bir	11	146	17	0	0	26	2	8	0	1									



Raw Data

Annex A1 Sheet 8 of 14

40 - 49 Yrs

Hospital Code	Hospital Name	Received Reports	Recovered		Not Improved		Referral		Lama		Absconded		Dead within 48 hrs		Dead after 48 hrs		Total		All Total
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	
1	Bhojpur	12	100	79	0	0	19	15	5	4	0	2	1	2	0	0	125	102	227
2	Dhankuta	12	54	20	0	0	1	2	2	0	0	0	0	0	0	0	57	22	79
3	Ilam	12	82	38	0	0	1	1	0	0	0	0	0	0	0	0	83	39	122
3.1	Dr.MBPCH	12	13	13	0	0	1	4	0	0	0	0	0	0	0	0	14	17	31
4	Mechi Zonal	12	227	187	0	0	29	18	3	2	1	0	1	2	2	2	263	211	474
4	AMDA Hospital	2	4	3	0	0	0	2	2	1	0	0	0	0	0	0	6	6	12
4.2	Life Line	12	299	89	37	15	8	19	1	0	0	0	1	0	0	0	346	123	469
4.4	Bajrang Medical and Diagnostic Center	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Amda Mechi Hospital	7	23	8	0	0	0	2	4	2	0	0	0	0	0	0	27	12	39
	Kankai Hospital	10	105	71	0	0	4	5	0	0	6	7	0	0	0	0	115	83	198
	Om International Mechi	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Damak Hospital & Research Center	5	18	17	0	0	0	0	0	2	1	0	0	0	0	0	20	18	38
	Mechi Model Hospital & Research Center	12	31	58	0	0	0	1	0	0	0	0	0	0	0	0	31	59	90
	Om Sai Pathibhara Hospital	12	303	288	0	0	6	2	11	3	0	0	1	0	0	0	320	294	614
	Kanchanja Hospital	12	184	162	0	0	0	0	0	0	0	0	0	0	0	0	184	162	346
5	Khotang	12	61	31	0	0	11	7	0	0	1	0	1	0	0	0	74	38	112
	Morang Co-operative Hospital	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Queen Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Biratnagar City Asptal, Biratnagar	3	14	52	0	1	1	1	0	0	0	0	0	0	0	0	15	54	69
6	Koshi Zonal	12	473	357	0	0	5	4	11	4	1	1	4	4	6	4	500	374	874
6.1	Rangeli	12	0	2	0	0	1	0	0	0	0	0	0	0	0	0	1	2	3
6.2	Birat Nursing Home	12	582	244	0	0	14	16	12	19	0	0	4	4	1	0	613	283	896
	Neuro Hospital	12	941	1145	24	17	32	32	48	66	0	0	8	26	0	0	1053	1286	2339
	Aawadnaryan Hospital	6	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2
7	Okhaldhunga UMN	12	146	124	2	2	7	6	1	1	0	0	0	3	1	1	157	137	294
	Rumjhatar Hospital	12	17	12	0	0	0	0	1	0	0	0	0	0	0	0	18	12	30
8	Panchthar	12	140	58	0	0	21	13	1	2	0	1	0	1	0	0	162	75	237
	Sankhuwasabha	12	119	55	0	0	18	14	5	3	0	0	0	0	0	0	143	72	215
10	Sagarmatha Zonal	12	189	107	0	0	5	9	0	0	21	5	0	0	0	0	215	121	336
11	Siraha	12	27	19	1	0	2	1	2	0	0	0	1	0	0	0	33	20	53
11.1	Lahan	12	57	46	0	0	1	1	1	0	0	0	0	0	0	0	59	47	106
	Pasang Lhamu Hospital	9	8	10	0	0	2	5	0	0	0	0	0	0	0	1	10	16	26
12	Solukhumbu	12	61	35	0	0	9	8	1	2	0	0	0	0	0	0	71	45	116
12.1	Khunde Hospital	11	6	12	0	0	0	0	0	0	0	0	0	0	0	0	6	12	18
	Sunsari Hospital	12	58	43	0	0	0	1	0	0	0	0	0	0	0	0	58	44	102
14	Taplejung	12	100	106	0	0	5	8	0	0	0	0	1	0	0	0	106	114	220
16.1	Katari	12	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
15	Tehrathum	12	87	42	0	1	17	5	0	0	0	0	0	0	0	0	104	48	152
16	Udayapur	12	34	29	0	1	7	3	2	0	0	0	0	0	0	0	43	36	79
	Eastern	405	4566	3562	64	37	227	208	115	110	30	16	22	43	11	8	5035	3984	9019
17	Kalैया	11	31	18	0	1	4	1	2	1	0	0	0	0	0	0	37	21	58
18	Bhaktapur	12	42	33	1	0	0	0	1	0	0	0	0	0	0	0	44	34	78
19	Bharatpur	12	733	592	0	0	15	13	15	13	2	6	10	9	3	6	778	639	1417
20	Dhading	12	52	36	0	1	4	8	2	0	0	0	0	0	0	0	58	45	103
21	Janakpur Zonal	12	401	465	0	0	11	6	19	11	8	5	0	1	5	7	444	495	939
22	Jiri	10	49	30	0	0	5	1	5	0	0	0	0	0	0	0	54	32	86
23	Bir	12	501	726	10	34	1	0	5	22	0	0	11	12	19	25	547	819	1366
23.1	Kanti	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23.2	Sukraraj Tropical and I. D.	11	207	210	0	0	0	0	0	0	0	0	0	3	12	210	222	432	
23.4	Maternity	12	584	0	0	0	2	0	5	0	1	0	0	0	0	0	592	0	592
24	Shir Memorial	12	438	279	0	0	5	6	2	8	0	0	0	3	0	3	451	286	747
24.1	Dhulikhel	12	567	395	0	0	0	0	0	0	0	0	0	1	0	1	567	397	964
26	Mahottari (PH)	12	6	11	0	0	0	0	0	0	0	0	0	0	0	0	6	11	17
27	Hetauda	12	100	50	0	0	25	9	3	3	0	0	0	0	0	0	128	62	190
23.8	Nepal Police Hospital	11	95	160	0	0	0	2	0	0	0	0	0	0	0	0	95	162	257
	International Friendship Children Hospital	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Trishuli	12	153	75	0	0	14	9	0	0	0	0	1	2	1	0	169	88	257
30	Ramechhap	12	37	19	0	0	4	5	2	1	0	0	0	0	0	0	43	25	68
	Rajmang samudai Asptal, Malekhu	8	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
	Gajuri Asptal Pvt Ltd	10	5	6	0	0	0	0	3	4	0	0	0	0	0	0	8	10	18
	Shahid Memorial Dhading Pvt Ltd	10	4	8	0	0	1	0	0	0	0	0	0	0	0	0	5	8	13
31	Rasuwa	12	4	9	0	0	1	1	0	0	0	0	0	0	0	0	5	10	15
32	Gaur	9	35	3	0	0	3	1	2	0	0	0	0	0	0	0	40	4	44
33	Sarlahi	9	8	11	0	0	0	0	0	0	0	0	0	0	0	0	8	11	19
34	Sindhuli	12	38	33	0	0	5	2	3	0	1	0	0	0	0	1	47	36	83
35	Sindhupalchowk	11	95	51	0	0	9	6	0	1	0	0	0	0	0	0	104	58	162
	Central	288	4185	3222	11	36	109	70	64	67	12	11	25	25	34	56	4440	3487	7927
36	Argakhanchi	6	89	50	0	0	11	11	1	0	0	0	0	0	0	0	101	61	162
37	Baglung	11	87	57	0	0	1	0	0	1	15	0	0	1	1	0	89	61	150
38	Gorkha	11	71	40	0	0	1	4	3	2	0	2	0	1	0	1	77	50	127
38.1	Amp Pipal UMN	11	64	37	0	1	1	3	2	2	0	1	0	0	0	1	67	45	112
	Ama-Ba Hospital	4	6	0	0	0	0	0	0	0	0	0	0	0	0	0	6	0	6
40	P. Bir	11	31	18	0	0	3	2	4	2	1	0	0	0	0	0	39	22	61
40.1	Shiva Raj	7	78	57	0	0	2	0	0	0	0	0	0	0	0	0	80	57	137
41	Western Regional	12	536	452	1	0	2	3	3	0	0	0	3	10	5	10	550	477	1027
41.1	Manipal Teaching	7	396	326	16	21	0	1	7	4	0	0	6	11	5	5	430	368	798
42	Lamjung	12	147	66	0	0	5	3	1	1	0	0	0	0	0	0	153	70	223
43	Manang	7	4	4	0	0	0	0	0	0	0	0	0	0	0	0	4	4	8
44	Mustang	11	26	17	0	0	2	7	0	0	0	0	0	0	0	0	28	24	52
45	Beni	12	60	30	0	2	1	6	2	0	0	0	0	0	0	0	70	36	106
46	P.Chandra	10	43	20	0	0	10	2	4	1	0	0	0	0	0	0	57	23	80
46.1	Kali Gandaki	11	34	34	0	0	0	0	1	0	0	0	0	0	0	0	35	34	69
47	Palpa	12	12	19	0	0	0	3	0	0	2	0	0	0	0	0	14	22	36
47.1	Palpa UMN	12	444	399	13	7	0	0	0	0	0	0	7	8	1	6	465	420	885
	Lumbini Medical College	12	252	214	0	0	1	0	10	12	0	0	1	3	2	6	206	235	501
48	Parbat	12	42	37	0	0	3	0	1	1	0	0	0	0	0	0	46	43	89
50	Syangja	10	50	16	0	0	4	5	1	0	0	0	0	0	0	0	55	21	76
51	Bandipur	12	59	26	1														



**Raw Data**  
Annex A1 Sheet 9 of 14

Hospital Code	Hospital Name	Received Reports	50 - 59 Yrs																		All Total
			Recovered		Not Improved		Referral		Lama		Absconded		Dead within 48 hrs		Dead after 48 hrs		Total				
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male			
1	Bhojpur	12	80	58	0	0	20	21	4	2	0	0	0	0	4	1	0	105	85	190	
2	Dhankula	12	25	20	0	0	2	2	0	0	0	0	0	0	0	0	0	27	22	49	
3	Ilam	12	60	35	0	0	2	6	2	0	0	0	0	2	1	0	0	66	42	108	
3.1	Dr. MBPCH	12	12	7	0	0	1	2	0	0	0	0	0	1	1	0	0	14	10	24	
4	Mechi Zonal	12	155	164	0	0	25	25	2	2	0	0	0	0	1	2	183	193	376		
	AMDA Hospital	2	9	10	0	0	0	3	0	1	0	0	0	0	0	0	0	9	14	23	
4.2	Life Line	12	185	105	25	24	19	14	1	3	1	0	0	2	1	0	232	148	380		
4.4	Bajrang Medical and Diagnostic Center	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Amda Mechi Hospital	7	36	24	0	0	2	3	1	6	0	0	0	0	0	0	0	39	33	72	
	Kankai Hospital	10	87	59	0	0	5	2	0	1	7	5	2	0	0	0	101	67	168		
	Om International Mechi	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Damak Hospital and Research Center	5	19	27	0	0	1	1	0	0	0	0	0	0	0	0	0	20	28	48	
	Mechi Model Hospital & Research Center	12	29	6	0	0	0	2	0	0	0	0	0	0	0	0	0	29	8	37	
	Om Sai Pathibhara Hospital	12	211	198	0	0	1	14	0	2	0	0	0	0	2	2	214	216	430		
	Kanchanjangha Hospital	12	143	89	0	0	2	0	0	0	0	0	0	0	0	0	145	89	234		
5	Khotang	12	47	31	0	0	8	9	1	1	0	0	0	1	0	0	56	41	97		
	Morang Co-operative Hospital	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Biratnagar City Asptal, Biratnagar	3	15	20	1	0	0	1	0	0	0	0	0	0	0	0	16	21	37		
6	Koshi Zonal	12	346	402	0	0	6	5	8	6	0	0	3	5	4	7	367	425	792		
6.1	Rangeli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6.2	Birat Nursing Home	12	489	275	0	0	20	14	21	7	0	0	8	7	1	0	533	305	838		
	Neuro Hospital	12	1151	1202	22	26	32	42	28	37	0	0	13	24	0	0	1246	1331	2577		
	Aawadnaryan Hospital	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
7	Okhaldhunga UMN	12	108	103	0	1	5	8	0	1	0	0	2	1	0	3	115	117	232		
	Rumjharar Hospital	12	14	9	0	0	1	0	1	0	0	0	0	0	0	0	16	9	25		
8	Panchthar	12	111	53	0	0	17	13	2	1	0	0	0	0	0	0	131	66	197		
9	Sankhuwasabha	12	97	56	1	0	13	21	1	3	0	0	0	1	0	0	112	81	193		
10	Sagarmatha Zonal	12	123	134	0	0	8	12	0	0	10	6	0	1	0	2	141	155	296		
11	Siraha	12	24	22	0	0	2	3	0	1	0	0	0	0	0	0	26	26	52		
11.1	Lahan	12	55	58	0	0	0	2	1	0	0	0	0	0	0	1	56	61	117		
	Passang Lhamu Hospital	9	6	4	0	1	2	0	0	0	0	0	1	0	0	0	8	6	14		
12	Solukhumbu	12	46	26	0	0	7	9	2	1	0	0	0	1	0	1	56	36	92		
12.1	Khunde Hospital	11	1	4	1	0	0	0	0	0	0	0	0	0	0	0	2	4	6		
	Sunsari Hospital	12	37	27	0	0	1	3	0	0	0	0	0	0	0	0	38	30	68		
14	Taplejung	12	87	85	0	0	13	12	0	0	0	0	0	0	0	0	100	97	197		
16.1	Katari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15	Tehrathum	12	48	35	2	1	10	3	1	1	0	0	0	0	0	0	61	39	100		
16	Udayapur	12	26	17	0	1	5	1	0	1	1	0	0	0	0	0	32	20	52		
	<b>Eastern</b>	<b>405</b>	<b>3882</b>	<b>3365</b>	<b>52</b>	<b>54</b>	<b>230</b>	<b>253</b>	<b>76</b>	<b>74</b>	<b>20</b>	<b>11</b>	<b>25</b>	<b>51</b>	<b>11</b>	<b>17</b>	<b>4296</b>	<b>3825</b>	<b>8121</b>		
17	Kalaya	11	28	15	0	0	2	0	4	2	1	0	0	0	0	0	35	18	53		
18	Bhaktapur	12	32	12	0	0	1	2	0	0	0	0	0	0	0	1	33	15	48		
19	Bharatpur	12	569	507	0	0	8	18	12	17	0	10	8	12	2	5	599	569	1168		
20	Dhading	12	51	35	0	0	1	6	1	1	0	0	0	0	0	0	53	42	95		
21	Lamaktapur Zonal	12	392	218	0	0	1	4	12	11	3	3	8	7	3	6	409	249	658		
22	Jiri	10	37	26	0	0	2	2	1	0	0	0	0	0	0	0	40	28	68		
23	Bir	12	401	693	13	17	2	4	8	12	0	0	7	16	24	32	455	774	1229		
23.1	Kanti	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23.2	Sukraraj Tropical and I. D.	11	170	136	0	0	0	0	0	0	0	0	0	0	3	2	173	138	311		
23.3	Maternity	12	208	0	0	0	0	0	1	1	0	0	0	0	0	0	209	0	209		
24	Shri Memorial	12	316	242	0	0	4	3	4	7	3	0	1	2	0	4	327	256	583		
24.1	Dhulikhel	12	403	360	0	0	0	0	0	0	0	0	0	1	1	404	361	765			
26	Mahottari (PH)	12	4	4	0	0	0	1	0	2	0	0	0	0	0	0	4	7	11		
27	Helada	12	63	54	0	0	11	9	8	3	0	0	0	0	0	0	82	66	148		
23.8	Nepal Police Hospital	11	70	136	0	0	0	2	0	0	0	0	0	0	0	1	70	139	209		
	International Friendship Children Hospital	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
28	Trishuli	12	139	88	0	1	9	9	0	1	1	0	1	1	0	149	99	248			
30	Ramechhap	12	29	23	0	0	0	2	1	1	1	0	0	0	0	0	31	26	57		
	Rajmang samudai Asptal, Maleku	8	1	1	0	0	1	0	0	0	0	0	0	0	0	0	2	1	3		
	Gajuri Asptal Pvt Ltd	10	3	4	0	0	1	0	2	1	0	0	0	0	0	0	6	5	11		
	Sushil Memorial Dhading Pvt Ltd	10	6	7	0	0	0	0	0	0	0	0	0	0	0	0	6	7	13		
31	Rasuwa	12	8	3	0	0	0	2	0	0	0	0	0	0	0	0	8	5	13		
32	Gaur	9	8	2	0	0	0	0	0	0	0	0	0	0	0	0	8	2	10		
33	Sarlahi	9	6	5	0	0	0	0	0	0	0	0	0	0	0	0	6	5	11		
34	Sindhuli	12	28	30	0	0	0	2	1	1	0	1	0	0	0	0	29	34	63		
35	Sindhupalchowk	11	82	47	0	0	4	4	0	1	1	2	0	0	0	0	89	53	142		
	<b>Central</b>	<b>288</b>	<b>3044</b>	<b>2648</b>	<b>13</b>	<b>18</b>	<b>46</b>	<b>71</b>	<b>58</b>	<b>54</b>	<b>6</b>	<b>17</b>	<b>27</b>	<b>38</b>	<b>33</b>	<b>52</b>	<b>3227</b>	<b>2899</b>	<b>6126</b>		
36	Argakhanchi	6	58	44	0	0	10	7	0	0	0	1	1	0	0	0	69	52	121		
37	Baglung	11	102	42	0	0	4	3	0	1	0	0	0	0	0	0	106	46	152		
38	Gorkha	11	55	42	0	0	4	4	1	2	0	1	0	1	0	0	60	50	110		
38.1	Amp Pipal UMN	11	62	52	1	0	4	3	2	1	0	0	0	1	0	0	69	57	126		
	Ama-Ba Hospital	4	4	0	0	0	0	1	0	0	0	0	0	0	0	0	4	1	5		
40	P. Bir	12	21	23	0	0	1	3	0	3	0	0	0	0	0	0	27	27	54		
40.1	Shiva Raj	9	52	45	0	0	0	0	0	0	0	0	0	0	0	0	52	45	97		
41	Western Regional	12	468	459	0	0	0	0	1	1	0	0	5	5	6	10	480	476	956		
41.1	Manipal Teaching	7	539	455	15	19	1	0	10	7	0	5	11	10	8	580	500	1080			
42	Lamjung	12	94	80	0	0	8	7	3	0	0	0	0	1	0	1	105	89	194		
43	Manang	7	2	1	0	0	0	2	0	0	0	0	0	0	0	0	2	3	5		
44	Mustang	11	11	14	0	0	0	0	0	2	0	0	0	0	0	0	13	18	31		
45	Beni	12	39	44	0	0	7	4	1	0	0	0	0	0	0	0	47	48	95		
46	P.Chandra	10	32	19	0	0	0	5	1	3	2	0	0	0	0	0	40	22	62		
46.1	Kali Gandaki	11	21	23	0	0	0	1	2	0	0	0	0	0	0	0	23	24	47		
47	Palpa	12	12	28	0	1	1	3	2	0	0	0	0	0	0	0	15	32	47		
47.1	Palpa UMN	12	415	408	0	17	0	0	0	0	0	4	6	3	9	438	440	878			
	Lumbini Medical College	12	285	209	0	0	2	0	11	13	0	0	1	2	2	7	301	231	532		
48	Parbat	12	47	48	1	0	6	5	0	0	0	0	0	0	0	0	54	53	107		
50	Syangja	10	47	28	0	1	1	6	0	0	0	1	0	0	0	0					





**Raw Data**  
Annex A1 Sheet 12of 14

Hospital Code	Hospital Name	Received Reports	Inpatient Surgeries										Total Deliveries in Hospital				CAC	PAC	Late Neonatal death	Maternal Death (all)	Post-operative deaths (excluding maternal neonatal)	Other Deaths	Total Deaths in Hospital		
			Major		Intermediate		Minor		OPD Surgery		OPD Plaster		Normal	Forceps	Vacuum	Breach								C/S	
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male													
			33230	7628	3663	4658	19684	15643	16955	19071	8257	11178	104929	530	4681	1555	20580	12888	7626	800	76	46	2834	3756	
1	Bhojpur	12	2	2	0	0	13	7	5	4	28	33	178	0	2	4	2	59	38	1	0	0	19	20	
2	Dhankuta	12	82	66	0	0	22	0	141	201	0	4	288	0	13	7	8	137	27	0	0	0	3	6	
3	Ilam	12	154	2	5	5	15	3	24	21	27	14	479	13	45	3	174	111	84	0	0	0	0	6	
3.1	Dr.MBPCH	12	12	6	0	0	63	71	7	6	18	32	57	0	4	0	9	0	0	1	0	0	0	9	
4	Mechi Zonal	12	716	79	8	67	205	227	190	235	0	0	1096	0	17	7	665	80	201	5	2	0	40	47	
	AMDA Hospital	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.2	Life Line	12	3196	114	117	70	539	420	0	0	5	3735	10	280	90	2574	0	0	7	0	0	0	4	11	
4.4	Bairang Medical and Diagnostic Center	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Amda Mechi Hospital	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
	Kankai Hospital	10	5	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Om International Mechi	5	87	0	0	0	5	0	0	0	0	0	92	0	10	0	74	0	0	0	0	0	0	0	0
	Damak Hospital and Research Center	15	16	15	9	9	7	23	73	63	22	24	0	0	0	0	0	0	0	0	0	0	0	0	0
	Mechi Model Hospital & Research Center	12	0	0	0	0	18	20	20	20	1	6	0	0	0	0	0	0	0	0	0	0	0	0	0
	Om Sai Pathibhara Hospital	12	385	239	64	96	240	239	51	76	188	257	15	0	1	25	0	2	0	0	0	0	0	14	14
	Kanchanjanga Hospital	12	8	10	0	20	43	39	24	38	2	0	0	0	0	1	0	0	0	0	0	0	0	0	0
5	Khotang	12	27	0	0	0	33	38	12	13	50	40	316	2	18	5	30	293	24	0	0	0	0	6	6
	Morning Co-operative Hospital	6	0	0	0	53	37	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Biratnagar City Aspal, Biratnagar	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Koshi Zonal	12	2679	338	75	210	339	117	315	486	453	887	6533	16	574	133	2110	101	344	42	6	7	140	195	
6.1	Rangeli	12	0	0	0	0	0	0	2	11	0	4	96	0	0	1	0	0	0	0	0	0	0	0	0
6.2	Birat Nursing Home	12	951	284	246	188	416	262	0	0	57	118	158	5	0	239	107	5	1	0	0	0	55	61	
	Neuro Hospital	12	171	328	0	0	156	253	0	0	0	51	0	0	0	94	72	0	0	0	0	0	151	151	
	Aawadnaryan Hospital	6	22	0	0	0	0	0	0	0	0	9	0	0	0	11	0	0	0	0	0	0	0	0	0
7	Okhaidhunga UMN	12	126	56	30	49	254	380	211	220	3	5	471	1	27	16	70	0	47	5	0	0	41	46	
	Rumjhatar Hospital	12	0	0	0	0	1	0	25	31	4	3	48	0	0	0	15	3	0	0	0	0	2	2	
8	Panchthar	12	115	0	0	0	84	4	198	368	81	115	583	0	45	11	113	200	80	11	0	0	6	17	
9	Sankhuwasabha	12	22	0	0	0	0	0	61	91	20	32	428	0	95	9	22	584	81	1	0	0	28	29	
10	Sagarmatha Zonal	12	0	0	3	5	2	2	0	0	0	1	3432	0	14	46	419	30	220	1	3	0	15	19	
11	Siraha	12	0	0	0	0	0	0	0	0	0	441	2	1	2	24	1	1	0	0	0	0	8	8	
11.1	Lahan	12	0	0	0	0	0	0	0	0	0	2464	1	22	4	105	1	103	0	1	0	0	6	7	
	Pasang Lhamu Hospital	9	0	0	0	0	0	0	0	0	0	0	34	0	0	0	0	0	0	0	0	0	0	0	0
12	Solukhumbu	12	0	0	0	0	0	0	43	73	53	73	118	0	6	0	17	92	0	0	0	0	3	3	
12.1	Khunde Hospital	11	0	0	0	0	0	0	0	0	1	9	10	0	1	0	0	0	0	0	0	0	0	0	0
	Sunsari Hospital	12	0	0	0	0	0	0	0	0	0	1444	0	1	1	0	0	49	0	0	0	0	0	0	0
14	Taplejung	12	0	0	29	49	91	126	167	211	122	160	331	5	7	3	10	384	41	1	0	0	1	2	
16.1	Katari	12	0	0	0	0	0	0	0	0	0	245	0	0	0	7	0	31	9	0	0	0	0	0	
15	Tehrathum	12	0	0	0	0	0	119	131	97	113	125	2	1	2	1	38	38	17	0	0	0	37	37	
16	Udayapur	12	0	0	0	0	2	2	6	5	5	8	941	0	60	8	16	8	0	0	0	0	0	0	0
	Eastern	405	8776	1555	639	805	2558	2233	1694	2304	1237	1945	24218	52	1243	360	6802	2245	1505	80	13	7	559	659	
17	Kalैया	11	39	0	0	0	0	0	0	0	0	1955	0	14	16	67	0	44	0	0	0	0	0	0	
18	Bhaktapur	12	41	15	6	1	72	4	3268	2460	269	284	511	0	0	6	90	47	0	0	0	0	10	10	
19	Bharatpur	12	2695	529	347	327	388	285	1872	2007	105	135	7402	269	156	40	1778	489	365	11	0	0	191	202	
20	Dhading	12	0	0	0	10	50	42	64	49	578	535	449	1	7	9	12	524	52	0	0	0	3	3	
21	Janakpur Zonal	12	1643	0	0	0	0	0	290	362	299	378	7854	0	442	137	1643	22	101	130	20	0	63	213	
22	Jiri	10	0	0	0	0	72	90	194	193	148	174	81	0	1	11	75	14	1	0	0	2	3		
23	Bir	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	386	386	
23.1	Kanti	10	143	336	93	457	43	68	301	711	84	258	0	0	0	0	0	0	0	0	0	0	100	179	
23.2	Sukraraj Tropical and I. D.	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	61	61	
23.4	Maternity	12	8828	0	0	0	5437	0	0	49	343	0	0	16369	9	819	164	4601	2773	1634	214	3	0	1	218
24	Shir Memorial	12	484	107	103	171	381	384	325	456	309	533	949	14	13	8	162	0	143	0	0	0	42	42	
24.1	Dhulikhel	12	1993	1725	0	0	3705	5750	138	0	0	307	0	0	0	106	0	1	0	0	0	0	19	19	
26	Mahottari (PH)	12	0	0	0	0	0	17	26	11	16	39	803	7	5	11	0	10	26	0	0	0	0	0	
27	Hetauda	12	80	17	1	0	34	34	33	0	0	147	24	33	11	9	80	4	168	0	0	0	4	4	
23.8	Nepal Police Hospital	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	International Friendship Children Hospital	10	9	32	43	100	2	2	0	0	0	7	0	0	0	0	0	0	0	0	0	0	0	0	
	Trishuli	12	127	0	0	0	0	54	52	104	126	865	8	65	11	127	96	65	1	0	0	0	21	22	
30	Ramechhap	12	0	0	0	0	0	0	365	405	59	54	124	0	3	2	104	8	0	0	0	0	0	0	
	Rajmang samudai Aspal, Malekhu	8	0	0	0	0</																			



**Raw Data**  
Annex A1 Sheet 14 of 14

Hospital Code	Hospital Name	Received Reports	Maturity Status				Multiple Pregnancy		Neonate From		Maternal Age			Antenatal Care					
			22-27 Weeks	28-36 Weeks	37-41 Weeks	42+ Weeks	Twin	Triplet	M/Mini	Multi	Grand Multi	<20 Year	20-34 Year	35+ Year	None	Public	Private	1-3 ANC	4+ ANC
1	Bhojpur	12	3	12	162	9	1	0	118	59	9	49	130	7	79	107	0	40	67
2	Dhankuta	12	1	11	300	11	2	0	182	102	3	49	231	9	59	65	0	432	229
3	Ilam	12	0	0	69	9	1	0	19	8	1	20	32	4	0	0	0	0	0
3.1	Dr.MBPCB	12	9	0	0	0	0	0	0	0	0	1	9	0	0	0	0	0	0
4	Mechi Zonal	12	9	74	1647	55	8	0	1013	754	18	290	1442	53	0	0	0	0	0
	Amda PHC for Refugees	0																	
4.2	Life Line	12	71	512	3651	197	38	0	1988	1627	270	325	668	119	30	0	801	200	100
4.3	Maata Pathivara	0																	
	Amda Mechi Hospital	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Kankai Hospital	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Mechi Dental	0																	
	Budhabare Manakamana Hospital	0																	
	Mechi Model Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Om Sai Pathibhara Hospital	12	0	0	39	0	0	0	22	20	0	3	39	0	0	0	0	0	0
	Kanchanjaingha Hospital	12	0	0	3	0	0	0	3	0	0	0	3	0	0	0	0	0	0
5	Khotang	12	0	0	0	0	2	0	73	36	14	26	85	3	0	0	0	0	45
	Morang Co-operative Hospital	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Shree Hospital Pvt Ltd, Biratnagar	0																	
6	Koshi Zonal	12	0	0	0	0	59	1	0	0	0	531	2098	272	0	0	0	0	0
6.1	Rangeli	12	2	26	71	0	0	0	27	67	6	9	90	1	0	0	221	210	11
6.2	Brat Nursing Home	12	4	66	320	5	9	1	204	148	43	37	351	7	0	0	0	71	19
6.3	Life Guard	0																	
	Aawadnaryan Hospital	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	Okhaldhunga UMN	12	2	16	578	25	12	0	302	216	100	122	478	31	0	0	0	551	191
	Rumjatar Hospital	12	0	0	47	1	1	0	21	19	1	8	37	8	0	0	0	35	42
8	Panchthar	12	2	46	659	53	6	0	479	276	9	151	579	43	0	58	0	58	23
9	Sankhuwasabha	12	4	26	484	30	4	0	383	207	18	125	408	21	0	0	0	0	0
10	Sagarmatha Zonal	12	0	0	0	0	37	1	0	0	0	334	2600	45	0	0	0	0	0
11	Siraha	12	0	0	0	0	4	0	0	0	0	2	37	0	0	0	0	0	0
11.1	Lahan	12	0	0	0	0	10	0	0	0	0	159	842	0	0	0	0	0	0
	Pasang Lhamu Hospital	9	0	0	0	0	0	0	0	0	0	6	27	1	0	0	0	0	27
12	Solukhumbu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	122	78
12.1	Khunde Hospital	11	0	0	13	1	0	0	5	6	1	1	9	2	0	0	0	0	12
	Sunsari Hospital	12	0	0	0	0	3	0	0	0	0	250	1256	40	0	0	0	0	0
14	Taplejung	12	0	0	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0
16	Katari	12	0	4	244	0	2	0	120	81	4	54	191	4	61	0	0	407	312
15	Tehrathum	12	1	22	80	1	1	0	102	46	4	32	85	6	0	0	196	99	
16	Udayapur	12	0	9	92	0	3	0	324	220	23	86	390	50	0	0	0	0	0
	Eastern	405	99	824	8479	397	209	3	5385	3886	524	2673	12117	726	229	230	1022	2322	1255
17	Kalैया	11	0	0	0	0	0	0	0	0	0	92	1957	105	0	0	0	0	0
18	Bhaktapur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Bharatpur	12	6	141	3571	88	34	2	532	390	14	762	4138	62	397	543	0	68	485
20	Dhading	12	0	22	440	20	1	0	245	223	11	105	355	8	6	152	8	69	283
21	Janakpur Zonal	12	0	0	0	0	91	0	0	0	0	0	0	0	0	0	0	0	0
22	Jiri	10	0	2	183	14	0	0	49	40	4	20	77	11	8	2	11	29	57
23	Bir	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23.1	Kanti	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23.2	Sukraraj Tropical and I. D.	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23.3	Birendra	0																	
23.7	Teaching	0																	
24	Dhulikhel	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	Patan	0																	
27	Hetauda	12	0	0	0	0	0	0	0	0	0	369	1186	104	0	0	0	180	0
23.8	Nepal Police Hospital	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	International Friendship Children Hospital	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Blue Cross, Tripureshwar	0																	
29	Narayani zonal	0																	
	Rajmarg samudaik Asptal, Malekhu	8	0	3	16	8	0	0	9	13	0	0	27	0	4	8	8	3	3
	Gajun Asptal Pvt Ltd	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Shahid Memorial Dhading Pvt Ltd	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31	Rasuwa	12	0	0	18	13	0	0	14	22	0	9	25	3	0	0	0	7	32
32	Gaur	9	0	134	306	94	3	0	0	0	0	50	501	60	0	0	0	0	0
33	Sarlahi	9	0	397	333	0	3	0	0	0	0	145	640	21	0	0	0	0	0
34	Sindhuli	12	0	0	0	0	3	0	0	0	0	82	312	17	0	0	0	0	0
35	Sindhupalchowk	11	0	20	214	3	2	0	136	93	3	42	172	18	27	172	35	148	48
	Central	288	15	648	6607	630	385	3	13756	11177	201	2083	10936	536	546	1448	3111	38690	7050
36	Argakhanchi	6	0	3	56	12	1	0	0	0	0	0	0	0	0	0	0	0	0
37	Baglung	11	3	40	924	53	4	0	522	490	110	233	836	56	0	0	0	0	0
38	Gorkha	11	5	68	641	152	3	0	473	376	17	211	633	22	0	0	0	271	211
38.1	Amp Pipal UMN	11	0	17	131	8	0	0	85	60	20	48	113	6	0	119	21	111	38
	Arma-Ba Hospital	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
39	Tamghans	0																	
40	Shiva Raj	9	0	37	345	2	0	0	131	184	54	11	273	91	8	173	0	288	58
41	Western Regional	12	10	205	9313	191	68	0	5105	4257	357	1469	7974	276	0	0	0	0	0
41.1	Manipal Teaching	7	0	215	792	45	19	1	555	457	23	168	840	32	0	0	0	1455	1144
	Western Regional Hospital	0																	
43	Manang	7	0	0	3	0	0	0	1	2	0	0	5	1	0	0	0	3	0
44	Mustang	11	0	2	38	0	0	0	16	21	3	5	33	2	4	0	0	9	24
45	Beni	12	3	28	495	29	3	0	302	185	63	149	390	13	0	0	0	0	105
46	P.Chandra	10	4	74	357	29	3	0	152	101	36	69	289	10	0	0	0	0	0
46.1	Kali Gandaki	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
47	Palpa	12	0	0	8	1	0	0	3	3	0	0	9	0	0	0	0	0	0
47.1	Palpa UMN	12	0	142	1529	59	12	0	962	770	33	384	1284	37	4	4	0	760	501
	Lumbini Medical College	12	193	330	502	53	13	0	0	0	0	320	1677	68	0	0	0	1704	158
	Palpa Lions Lakaul Aakha Asptal	0																	
49	Bhairahawa	0																	
51	Bandipur	12	0	8	61	4	0	0	41	36	2	18	54	1	7	0	0	44	33
51.1	Damul	12	0	4	569	1	27	1	215	263	27	178	389	15	0	0	0	287	42
	Western	228	222	1252	17353	804	170	3	9458	8026	825	3692	16164	676	184	1034	99	5445	2615
52	Bheri Zonal	12	0	0	0	0	11	1	0	0	0	504	2061	91	0	0	0	0	0
53	Bardiya	12	5	28	774	0	12	0	490	250	40	187	639						

**Raw Data**  
**Annex A2**

ICD Code	Diseases	Inpatient Morbidity																										Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male					
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male							
	National Total	4494	6560	6193	10983	7083	10972	8532	11824	30811	5965	11109	8842	28450	8049	10971	7879	8600	7422	15198	15018	231441	93514	324955	989	1288				
A00	Cholera	0	0	0	1	0	0	0	0	0	1	2	0	1	0	1	0	0	0	0	0	4	2	6	0	0				
A01	Typhoid and paratyphoid fevers	0	0	0	0	273	396	1027	1287	760	566	1175	717	702	473	593	368	352	304	413	360	5295	4471	9766	4	5				
A01.0	Typhoid fever	0	0	0	1	3	7	11	13	21	15	47	30	23	9	18	13	10	8	9	12	142	108	250	0	0				
A03	Shigellosis	0	0	22	45	42	63	39	28	27	29	60	35	43	27	40	24	27	21	50	16	350	288	638	0	0				
A03.9	Shigellosis, unspecified	0	0	0	0	0	1	0	2	1	0	1	1	2	0	0	0	2	1	1	0	7	5	12	0	0				
A04	Other bacterial intestinal infections	0	0	3	5	5	12	12	24	5	10	10	3	5	4	0	2	6	2	2	2	48	64	112	0	0				
A05	Other bacterial foodborne intoxications, not elsewhere classified	0	0	0	2	1	1	3	3	0	0	3	2	0	0	0	1	0	1	2	0	9	10	19	0	0				
A06	Amoebiasis	0	0	9	9	10	7	10	10	6	6	18	8	11	8	12	8	6	6	14	11	96	73	169	0	0				
A06.3	Amoeboma of intestine	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	1	1	3	4	0	0				
A06.4	Amoebic liver abscess	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0				
A06.9	Amoebiasis, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	2	1	3	0	0	0				
A07	Other protozoal intestinal diseases	0	0	2	0	5	3	5	6	0	1	2	1	1	1	2	0	1	2	1	1	19	15	34	0	0				
A08	Viral and other specified intestinal infections	0	0	1	0	1	3	0	1	0	0	3	1	1	1	3	0	0	0	0	0	9	6	15	0	0				
A08.2	Adenoviral enteritis	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0				
A08.4	Viral intestinal infection, unspecified	0	0	9	5	8	15	0	4	2	0	5	3	3	1	16	0	2	0	0	0	45	28	73	0	0				
A09	Diarrhoea and gastroenteritis of presumed infectious origin	35	37	996	1619	1077	1672	621	769	437	399	983	616	686	411	538	377	507	284	846	573	6726	6757	13483	14	19				
A15	Respiratory tuberculosis, bacteriologically and histologically confirmed	0	0	2	0	4	4	12	14	22	25	47	61	43	78	37	78	39	96	84	208	290	564	854	7	24				
A15.0	Tuberculosis of lung, confirmed by sputum microscopy with or without culture	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	3	2	3	2	9	11	1	1				
A15.9	Respiratory tuberculosis unspecified, confirmed bacteriologically and histologically	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0				
A16	Respiratory tuberculosis, not confirmed bacteriologically or histologically	0	0	1	7	13	18	26	41	25	33	83	68	49	96	81	102	86	128	151	242	515	735	1250	11	21				
A16.1	Tuberculosis of lung, bacteriological and histological examination not done	0	0	1	1	0	0	1	5	0	0	0	0	0	0	0	0	0	0	0	2	6	8	0	1					
A16.2	Tuberculosis of lung, without mention of bacteriological or histological confirmation	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	1	0	1	4	1	4	6	10	0	0				
A16.5	Tuberculous pleurisy, without mention of bacteriological or histological confirmation	0	0	0	0	0	0	2	0	0	1	1	5	1	0	0	1	0	0	1	2	5	9	14	0	0				
A16.9	Respiratory tuberculosis unspecified, without mention of bacteriological or histological confirmation	0	0	0	0	2	3	1	2	5	3	6	14	6	19	6	13	8	15	6	20	40	89	129	0	3				
A17+	Tuberculosis of nervous system	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	1	0	0				
A18	Tuberculosis of other organs	0	0	0	0	2	5	9	11	4	5	7	6	4	4	3	4	3	5	2	3	34	43	77	0	1				
A18.2	Tuberculous peripheral lymphadenopathy	0	0	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	1	0	0	1	3	4	0	0				
A18.3	Tuberculosis of intestines, peritoneum and mesenteric glands	0	0	0	0	0	0	0	1	1	0	3	0	6	6	3	1	6	2	2	0	21	10	31	1	0				
A18.4	Tuberculosis of skin and subcutaneous tissue	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0				
A19	Miliary tuberculosis	0	0	1	0	0	0	0	0	0	0	1	3	2	1	1	0	1	0	0	1	5	6	11	0	0				
A19.9	Miliary tuberculosis, unspecified	0	0	0	0	0	1	0	0	0	1	1	0	1	0	1	0	0	0	0	0	2	2	4	0	0				
A23	Brucellosis	0	0	0	0	0	0	0	1	3	1	1	3	1	2	1	1	0	0	0	1	6	9	15	0	0				
A27.9	Leptospirosis, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	1	0	0				
A30	Leprosy [Hansen's disease]	0	0	0	0	0	0	0	0	0	0	1	1	2	5	3	1	2	1	3	2	5	10	16	26	0	0			
A30.1	Tuberculoïd leprosy	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	0				
A33	Tetanus neonatorum	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
A35	Other tetanus	0	0	0	0	1	1	0	4	1	2	1	3	1	6	0	3	1	7	2	3	7	29	36	1	5				
A36	Diphtheria	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0				
A37	Whooping cough	0	0	5	14	2	6	0	1	0	1	0	0	0	0	0	0	0	0	0	1	7	23	30	1	1				
A38	Scarlet fever	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0				
A39	Meningococcal infection	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0				
A39.4	Meningococcaemia, unspecified	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0				
A40	Streptococcal septicaemia	1	1	0	1	0	0	0	3	1	4	1	2	2	1	0	1	3	5	5	17	14	31	3	0					
A41	Other septicaemia	4	9	104	160	25	33	18	21	7	7	15	11	13	12	13	3	15	7	17	30	231	293	524	15	8				
A41.0	Septicaemia due to Staphylococcus aureus	1	0	22	38	3	5	5	6	0	0	2	0	0	0	0	0	0	0	0	33	49	82	5	2					
A41.9	Septicaemia, unspecified	186	314	19	22	1	4	3	3	5	5	9	5	10	3	7	4	5	4	7	6	252	370	622	7	13				
A46	Erysipelas	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	2	1	3	0	0				
A48	Other bacterial diseases, not elsewhere classified	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0				
A49	Bacterial infection of unspecified site	2	8	1	3	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3	12	15	0	0					



ICD Code	Diseases	Inpatient Morbidity																				Grand Total	Total Deaths					
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs			Total		Female	Male		
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male				
A50	Congenital syphilis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	
A51	Early syphilis	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
A52	Late syphilis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	2	2	0	0
A53	Other and unspecified syphilis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0
A54	Gonococcal infection	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
A64	Unspecified sexually transmitted disease	0	0	0	1	0	0	0	0	1	0	2	0	1	0	0	0	1	2	1	1	6	4	10	0	0	0	0
A80	Acute poliomyelitis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0
A80.9	Acute poliomyelitis, unspecified	0	0	0	0	0	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1	4	0	0	0	0
A82	Rabies	0	0	0	0	1	0	1	1	1	2	1	2	1	2	7	0	0	0	0	1	12	8	20	0	0	0	0
A83	Mosquito-borne viral encephalitis	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0
A85	Other viral encephalitis, not elsewhere classified	0	0	0	0	0	0	1	0	0	1	0	0	0	1	0	1	0	0	0	0	1	3	4	0	0	0	0
A86	Unspecified viral encephalitis	0	0	4	7	9	16	36	38	9	11	24	9	8	7	4	8	6	6	4	15	104	117	221	8	5	0	0
A87	Viral meningitis	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	0	0
A90	Dengue fever [classical dengue]	0	0	0	0	0	1	4	1	4	3	6	5	0	2	3	3	1	3	0	1	18	19	37	0	1	0	0
A91	Dengue haemorrhagic fever	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
A92	Other mosquito-borne viral fevers	2	4	9	8	28	27	31	42	27	27	34	18	21	15	19	6	7	5	13	11	191	163	354	0	0	0	0
A92.3	West Nile virus infection	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0
A94	Unspecified arthropod-borne viral fever	4	3	3	4	17	19	11	28	11	29	23	35	32	7	10	18	3	0	4	2	118	145	263	0	0	0	0
A95	Yellow fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	2	0	0	0	0
A99	Unspecified viral haemorrhagic fever	3	1	3	3	12	5	14	9	15	7	22	21	9	2	7	3	2	4	3	2	90	57	147	0	0	0	0
B00	Herpesviral [herpes simplex] infections	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	2	2	2	0	0	0	0
B00.1	Herpesviral vesicular dermatitis	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	0
B00.9	Herpesviral infection, unspecified	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
B01	Varicella [chickenpox]	1	1	2	7	8	7	12	11	9	13	8	9	0	4	1	0	1	1	1	2	43	55	98	0	1	0	0
B01.9	Varicella without complication	0	0	0	0	0	1	2	2	0	0	0	1	0	0	0	0	0	0	0	0	2	4	6	0	0	0	0
B02	Zoster [herpes zoster]	0	0	0	0	2	0	3	0	1	1	3	3	0	1	2	3	1	0	1	3	13	11	24	0	0	0	0
B02.9	Zoster without complication	0	0	0	0	0	0	1	0	0	0	1	0	0	1	2	0	0	0	3	1	7	2	9	0	0	0	0
B03	Smallpox	0	0	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	0	0
B05	Measles	0	1	4	3	2	4	24	28	12	8	15	7	2	2	0	0	1	0	2	0	62	53	115	0	0	0	0
B05.9	Measles without complication	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2	2	2	0	0	0	0
B06	Rubella [German measles]	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	0	0	0
B06.9	Rubella without complication	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0
B08.5	Enteroviral vesicular pharyngitis	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0	0
B08.8	Other specified viral infections characterized by skin and mucous membrane lesions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	0
B15	Acute hepatitis A	0	0	0	0	1	1	7	8	11	4	22	13	7	8	4	3	0	2	3	1	55	40	95	1	1	0	0
B15.9	Hepatitis A without hepatic coma	0	0	1	0	2	8	15	9	2	0	4	1	0	0	0	0	1	0	1	0	26	18	44	0	1	0	0
B16	Acute hepatitis B	0	0	1	0	0	7	10	22	8	11	9	10	4	7	3	4	4	7	2	12	41	80	121	0	5	0	0
B16.9	Acute hepatitis B without delta-agent and without hepatic coma	0	0	0	0	0	3	1	4	1	0	1	2	0	1	0	0	0	0	1	0	4	10	14	0	0	0	0
B17	Other acute viral hepatitis	0	0	1	0	6	1	1	5	0	0	1	1	1	3	1	3	0	5	0	4	11	22	33	0	0	0	0
B17.1	Acute hepatitis C	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	2	0	1	0	0	1	3	4	0	0	0	0
B17.2	Acute hepatitis E	0	0	0	1	0	0	1	0	1	0	3	2	1	1	0	3	0	1	0	1	6	9	15	0	0	0	0
B19	Unspecified viral hepatitis	0	0	1	1	9	11	13	20	22	16	13	27	8	14	6	10	5	3	3	7	80	109	189	0	0	0	0
B19.0	Unspecified viral hepatitis hepatic with coma	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	0	2	0	5	5	0	0	0	0
B19.9	Unspecified viral hepatitis without hepatic coma	0	0	0	1	0	0	3	6	2	1	3	2	0	1	1	0	1	2	1	0	11	13	24	0	0	0	0
B20	Human immunodeficiency virus [HIV] disease resulting in infectious and parasitic diseases	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0
B24	Unspecified human immunodeficiency virus [HIV] disease	0	0	0	1	1	2	3	8	8	6	49	51	111	221	76	122	45	54	27	30	320	495	815	18	63	0	0
B26	Mumps	0	1	1	1	3	10	17	32	12	10	4	10	7	1	2	1	1	2	0	3	47	71	118	0	0	0	0
B26.9	Mumps without complication	0	0	0	0	1	4	2	8	0	1	1	1	1	0	0	0	1	0	0	0	6	14	20	0	0	0	0
B34	Viral infection of unspecified site	0	1	7	7	7	8	5	6	4	4	4	3	1	2	3	0	0	2	2	1	33	34	67	0	0	0	0
B35	Dermatophytosis	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0
B36	Other superficial mycoses	0	0	0	0	1	0	2	0	0	0	3	1	0	4	0	0	0	0	0	0	6	5	11	0	0	0	0
B36.9	Superficial mycosis, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0
B37	Candidiasis	0	2	1	1	3	1	1	0	0	0	2	0	0	0	1	0	1	0	0	0	9	4	13	0	0	0	0
B48.1	Rhinosporidiosis	0	0	0	0	0	0	0	0	1	0	0	3	2	1	1	0	1	3	0	0	5	7	12	0	0	0	0
B49	Unspecified mycosis (Fungaemia NOS)	2	0	0	2	1	0	0	0	4	1	0	2	0	0	0	0	0	0	0	0	7	5	12	0	0	0	0
B50	Plasmodium falciparum malaria	0	0	0	0	0	0	4	5	3	4	8	10	5	8	2	3	1	1	2	4	25	35	60	0	0	0	0
B50.9	Plasmodium falciparum malaria, unspecified	0	0	0	0	0	0	1	0	1	0	1	2	1	0	1	0	0	0	1	2	6	8	0	0	0	0	0
B51	Plasmodium vivax malaria	0	0	0	0	0	3	8	4	1	12	13	19	6	14	3	7	1	2	1	3	33	64	97	0	0	0	0
B52	Plasmodium malariae malaria	0	0	0	0	0	0	1	3	0	1	0	1	0	0	0	0	0	0	0	0	1	5	6	0	0	0	0
B53	Other parasitologically confirmed malaria	0	0	0	0	0	0	0	0	0	2	0	1	0	2	0	1	0	0	0	0	0	6	6	0	0	0	0
B54	Unspecified malaria	0	0	1	2	0	13	8	14	18	26	40	33	31	24	23	17	9	10	4	5	134	144	278	0	0	0	0
B55	Leishmaniasis	0	0	0	1	21	11	25	60	9	19	39	35	12	19	39	24	11	7	8	41	164	217	381	0	1	0	0
B55.0	Visceral leishmaniasis	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	



ICD Code	Diseases	Inpatient Morbidity																		Grand Total	Total Deaths					
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs			60+ Yrs		Total		Female	Male
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male	Female	Male		
B56	African trypanosomiasis	0	0	0	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	1	2	2	4	0	0
B58	Toxoplasmosis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0
B64	Unspecified protozoal disease	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0
B67	Echinococcosis	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	2	1	1	3	2	7	5	12	0	0
B67.9	Echinococcosis, other and unspecified	0	0	0	0	1	0	0	1	1	0	1	0	1	0	0	0	1	0	1	0	6	1	7	0	0
B68	Taeniasis	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0
B69	Cysticercosis	0	0	0	0	0	0	1	1	0	1	1	0	0	1	1	0	1	6	0	1	4	10	14	0	0
B69.0	Cysticercosis of central nervous system	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	
B71	Other cestode infections	0	0	0	0	0	0	1	2	0	0	0	0	0	1	0	0	0	0	1	1	2	4	6	0	0
B74	Filariasis	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	1	1	2	3	0	1	
B74.9	Filariasis, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0
B76	Hookworm diseases	0	0	0	0	0	0	1	0	2	0	0	2	0	0	0	2	0	0	0	0	5	2	7	0	0
B77	Ascariasis	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0
B77.9	Ascariasis, unspecified	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0
B81	Other intestinal helminthiases, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	1	2	0	0
B82	Unspecified intestinal parasitism	0	0	0	0	0	0	3	1	2	1	1	0	2	0	1	0	1	1	1	0	11	3	14	0	0
B82.0	Intestinal helminthiasis, unspecified	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0
B83	Other helminthiases	0	0	0	0	1	0	4	5	3	6	1	0	1	0	2	1	2	2	1	1	15	15	30	0	0
B83.9	Helminthiasis, unspecified	0	0	0	0	9	12	0	3	4	0	1	0	0	0	1	0	0	0	1	0	16	15	31	0	0
B86	Scabies	0	0	1	2	2	3	1	6	0	0	0	0	1	0	0	2	0	1	0	7	12	19	0	0	
B88	Other infestations	0	0	1	0	1	3	5	6	2	2	2	9	0	4	3	5	4	10	15	14	33	53	86	4	4
B90	Sequelae of tuberculosis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	1	0	0	
B90.9	Sequelae of respiratory and unspecified tuberculosis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	
B99	Other and unspecified infectious diseases	1	0	1	0	0	0	0	1	0	0	0	2	0	0	0	0	1	0	1	0	4	3	7	0	0
C02	Malignant neoplasm of other and unspecified parts of tongue	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	2	0	1	0	7	7	0	0	
C02.9	Tongue, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	3	3	0	0	
C06	Malignant neoplasm of other and unspecified parts of mouth	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	
C10.4	Branchial cleft	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	1	2	0	0	0	
C11.9	Nasopharynx, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	1	0	1	0	5	5	0	0
C15	Malignant neoplasm of oesophagus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	2	1	3	0	0	
C15.9	Oesophagus, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	2	0	5	5	0	0	
C16	Malignant neoplasm of stomach	0	0	0	0	0	0	0	0	0	0	1	0	0	4	1	1	6	5	16	10	24	34	1	1	
C16.9	Stomach, unspecified	0	0	0	0	0	0	0	0	0	2	1	2	1	7	13	4	10	4	18	19	43	62	3	4	
C18	Malignant neoplasm of colon	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	1	0	3	1	5	6	0	2	
C18.9	Colon, unspecified	0	0	0	0	0	0	0	0	0	0	5	4	13	13	13	0	14	2	6	19	51	70	0	2	
C20	Malignant neoplasm of rectum	0	0	0	0	0	0	0	0	0	12	8	2	2	3	17	1	8	5	7	23	42	65	0	0	
C22	Malignant neoplasm of liver and intrahepatic bile ducts	0	0	0	0	0	0	0	0	1	0	0	0	2	2	0	3	2	0	2	5	7	12	1	0	
C22.0	Liver cell carcinoma	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2	2	0	0	
C22.1	Intrahepatic bile duct carcinoma	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	1	
C22.9	Liver, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	1	3	1	4	1	0	
C23	Malignant neoplasm of gallbladder	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3	1	1	2	5	4	10	7	17	1	0
C25	Malignant neoplasm of pancreas	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	1	2	0	0	
C25.9	Pancreas, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0	
C30	Malignant neoplasm of nasal cavity and middle ear	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0
C30.0	Nasal cavity	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
C32	Malignant neoplasm of larynx	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	3	0	2	0	8	8	0	1
C32.9	Larynx, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	3	0	5	1	9	10	0	0	0	
C34	Malignant neoplasm of bronchus and lung	0	0	0	0	0	0	0	1	2	1	0	5	3	8	5	15	15	51	68	81	93	174	2	2	
C34.1	Upper lobe, bronchus or lung	0	0	0	0	0	0	0	1	0	0	0	0	0	1	11	14	7	18	32	34	50	84	2	3	
C34.9	Bronchus or lung, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	2	5	6	7	8	15	0	0	0	
C37	Malignant neoplasm of thymus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	
C44	Other malignant neoplasms of skin	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	1	1	2	0	0	
C44.3	Skin of other and unspecified parts of face	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	
C44.9	Malignant neoplasm of skin, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0	
C49.9	Connective and soft tissue, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0	
C50	Malignant neoplasm of breast	0	0	0	0	0	0	0	0	0	3	0	2	0	10	0	10	0	6	0	31	0	31	2	0	
C50.9	Breast, unspecified	0	0	0	0	0	0	0	1	0	0	0	5	0	5	0	7	0	7	0	25	0	25	3	0	
C51.9	Vulva, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	1	0	0	
C52	Malignant neoplasm of vagina	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	1	0	
C53	Malignant neoplasm of cervix uteri	0	0	0	0	0	0	0	0	0	3	0	13	0	22	0	26	0	47	0	111	0	111	0	0	
C53.9	Cervix uteri, unspecified	0	0	0	0	0	0	0	0	0	0	0	4	0	3	0	6	0	3	0	16	0	16	1	0	
C55	Malignant neoplasm of uterus, part unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	1	0	3	0	3	0	0	
C56	Malignant neoplasm of ovary	0	0	0	0	0	0	0	0	0	3	0	2	0	6	0	2	0	13	0	26	0	26	1	0	

ICD Code	Diseases	Inpatient Morbidity																				Grand Total	Total Deaths						
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs			Total	Female	Male				
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male								
C57	Malignant neoplasm of other and unspecified female genital organs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0				
C60	Malignant neoplasm of penis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
C60.9	Penis, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2	2	0	0		
C61	Malignant neoplasm of prostate	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3	3	0	0		
C62.9	Testis, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0		
C64	Malignant neoplasm of kidney, except renal pelvis	0	0	1	1	0	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	1	5	6	0	0		
C67	Malignant neoplasm of bladder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3	0	2	0	6	6	0	0		
C67.9	Bladder, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	2	3	12	5	14	19	0	1			
C68	Malignant neoplasm of other and unspecified urinary organs	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0		
C69.2	Retina	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
C71	Malignant neoplasm of brain	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	3	3	3	0	0		
C71.3	Parietal lobe	0	0	0	0	0	0	0	1	0	0	1	1	0	0	0	0	0	0	0	1	1	2	3	5	0	1		
C71.9	Brain, unspecified	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0		
C73	Malignant neoplasm of thyroid gland	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	1	0	1	1	5	1	6	1	0	0		
C74	Malignant neoplasm of adrenal gland	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	1	0	0		
C74.9	Adrenal gland, unspecified	0	0	0	2	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0	0		
C76	Malignant neoplasm of other and ill-defined sites	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	1	2	3	0	0	0		
C76.2	Abdomen	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	1	0	1	
C76.7	Other ill-defined sites	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	
C77	Secondary and unspecified malignant neoplasm of lymph nodes	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0	0	
C78	Secondary malignant neoplasm of respiratory and digestive organs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	
C79	Secondary malignant neoplasm of other sites	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
C79.3	Secondary malignant neoplasm of brain and cerebral meninges	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	1	0	1	
C79.8	Secondary malignant neoplasm of other specified sites	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	2	0	2	2	4	0	0	0	0	
C80	Malignant neoplasm without specification of site	0	1	0	0	1	0	7	7	3	4	12	12	25	12	24	13	27	42	74	117	173	208	381	1	4	0	0	
C81.9	Hodgkin's disease, unspecified	0	0	1	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	3	4	0	0	0	0	
C82.7	Other types of follicular non-Hodgkin's lymphoma	0	0	1	0	0	0	2	1	0	0	0	0	0	0	0	0	0	0	0	0	3	1	4	1	0	0	0	
C83	Diffuse non-Hodgkin's lymphoma	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	
C85	Other and unspecified types of non-Hodgkin's lymphoma	0	0	0	0	0	1	1	1	1	1	0	1	1	0	0	1	1	0	2	0	6	5	11	0	0	0	0	
C85.9	Non-Hodgkin's lymphoma, unspecified type	0	0	0	0	0	0	2	1	0	3	2	8	1	3	1	3	1	10	7	4	14	32	46	0	2	0	0	
C90	Multiple myeloma and malignant plasma cell neoplasms	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	2	0	1	0	0	
C90.0	Multiple myeloma	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	0	
C91	Lymphoid leukaemia	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	
C92	Myeloid leukaemia	0	2	2	2	3	1	6	6	2	2	12	7	2	3	0	3	4	5	5	33	36	69	0	0	0	0	0	
C92.0	Acute myeloid leukaemia	0	0	0	0	0	0	0	0	0	0	3	0	1	1	0	0	0	0	0	1	4	5	0	1	0	0	0	
C92.1	Chronic myeloid leukaemia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3	0	4	0	4	1	0	0	0	
C94.0	Acute erythraemia and erythroleukaemia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0	0	
C95	Leukaemia of unspecified cell type	0	0	1	2	3	1	3	5	0	1	2	2	0	1	1	0	0	1	1	11	13	24	1	0	0	0	0	
C95.9	Leukaemia, unspecified	0	0	0	0	1	0	1	0	1	0	0	0	0	0	0	0	0	1	0	4	0	4	0	4	0	0	0	
D00	Carcinoma in situ of oral cavity, oesophagus and stomach	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	1	2	0	0	0	0	
D01	Carcinoma in situ of other and unspecified digestive organs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	2	0	0	0	0	
D01.0	Colon	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	
D01.5	Liver, gallbladder and bile ducts	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0	0	0	
D02.2	Bronchus and lung	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	0	
D05	Carcinoma in situ of breast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	0	
D06	Carcinoma in situ of cervix uteri	0	0	0	0	0	0	0	0	2	0	2	0	0	0	0	0	0	0	0	0	4	0	4	0	0	0	0	0
D07	Carcinoma in situ of other and unspecified genital organs	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	2	0	0	0	0	
D07.5	Prostate	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	0	
D12.6	Colon, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0	0	
D17	Benign lipomatous neoplasm	0	0	0	2	0	0	2	1	0	1	2	0	2	3	0	3	1	1	1	0	8	11	19	0	0	0	0	0
D17.9	Benign lipomatous neoplasm, unspecified	0	0	0	0	0	0	0	2	1	3	0	1	2	2	0	2	1	1	0	11	4	15	0	0	0	0	0	
D18	Haemangioma and lymphangioma, any site	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	1	0	3	0	3	0	0	0	0	
D21.5	Connective and other soft tissue of pelvis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	0	
D23	Other benign neoplasms of skin	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0
D23.2	Skin of ear and external auricular canal	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
D23.3	Skin of other and unspecified parts of face	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
D23.9	Skin, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0		
D24	Benign neoplasm of breast	0	0	0	0	0	0	1	0	0	0	3	0	0	0	0	0	0	0	0	0	0	4	0	4	0		
D25	Leiomyoma of uterus	0	0	0	0	0	0	0	0	1	0	5	0	18	0	35	0	7	0	1	0	67	0	67	0	0		
D25.9	Leiomyoma of uterus, unspecified	0	0	0	0	0	0	0	0	1	0	21	0	53	0	150	0	44	0	1	0	270	0	270	0	0		
D27	Benign neoplasm of ovary	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	1	0	0	0	4	0	4	0	0		
D32.9	Meninges, unspecified	0	0	0	0	0	0	0	0	0	1	1	1	1	2	0	1	1	2	0	7	3	10	0	1			
D34	Benign neoplasm of thyroid gland	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			
D36	Benign neoplasm of other and unspecified sites	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	2	0	2	0	0		
D39	Neoplasm of uncertain or unknown behaviour of female genital organs	0	0	0	0	0	0	0	0	0	0	0	0	5	0	12	0	18	0	16	0	51	0	51	0	0		
D39.0	Uterus	0	0	0	0	0	0	0	0	0	0	2	0	0	0	3	0	2	0	2	0	9	0	9	0	0		
D39.1	Ovary	0	0	0	0	0	0	0	0	0	0	1	0	2	0	4	0	0	0	1	0	8	0	8	0	0		
D41.4	Bladder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	0	0	1	2	3	0	0		
D46	Myelodysplastic syndromes	0	1	0	0	1	0	0	0	0	0	1	0	0	0	1	1	2	1	0	0	5	3	8	0	0		
D47	Other neoplasms of uncertain or unknown behaviour of lymphoid, haematopoietic and related tissue	0	0	0	0	0	0	0	0	2	0	4	0	1	0	0	0	0	0	0	0	7	0	7	0	0		
D48	Neoplasm of uncertain or unknown behaviour of other and unspecified sites	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	1	2	0	0			
D50	Iron deficiency anaemia	0	0	0	0	0	0	0	0	2	1	0	0	1	2	1	0	0	1	4	2	8	6	14	0	0		
D50.9	Iron deficiency anaemia, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	1	1	2	0	0		
D53.9	Nutritional anaemia, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	1	0	0		
D56	Thalassaemia	0	0	1	8	28	46	101	224	36	49	0	3	1	0	0	0	0	0	0	0	167	330	497	0	0		
D56.1	Beta thalassaemia	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
D56.9	Thalassaemia, unspecified	0	0	0	2	2	4	1	9	0	2	0	0	0	0	0	0	1	1	1	4	19	23	0	0			
D57.1	Sickle-cell anaemia without crisis	0	0	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0		
D58	Other hereditary haemolytic anaemias	0	0	0	1	0	0	5	0	0	1	0	1	1	1	1	0	0	0	0	0	7	4	11	0	0		
D58.9	Hereditary haemolytic anaemia, unspecified	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	2	0	0		
D59	Acquired haemolytic anaemia	0	0	0	0	0	1	0	2	0	0	0	0	0	1	0	0	0	1	0	1	4	5	0	0			
D59.9	Acquired haemolytic anaemia, unspecified	0	0	0	0	0	2	1	3	0	0	0	1	0	0	0	0	0	0	0	1	6	7	0	1			
D60	Acquired pure red cell aplasia [erythroblastopenia]	0	0	0	1	0	0	2	4	0	0	0	0	0	0	0	0	0	0	0	2	5	7	0	0			
D61	Other aplastic anaemias	2	0	0	6	0	2	11	11	0	6	14	4	8	11	3	6	2	3	22	3	62	52	114	0	2		
D61.9	Aplastic anaemia, unspecified	0	0	1	0	0	0	0	0	2	8	2	5	2	2	1	1	1	4	3	2	12	22	34	0	0		
D62	Acute posthaemorrhagic anaemia	0	0	0	2	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	2	2	4	6	0	0		
D64	Other anaemias	3	9	20	41	39	60	127	112	112	78	232	104	157	100	148	86	124	90	208	223	1170	903	2073	25	7		
D64.0	Hereditary sideroblastic anaemia	2	12	6	5	12	0	52	6	4	14	23	4	14	7	11	8	20	15	3	7	147	78	225	0	2		
D64.9	Anaemia, unspecified	0	0	3	4	2	7	15	9	23	14	56	10	36	12	13	21	12	8	27	13	187	98	285	0	2		
D65	Disseminated intravascular coagulation [defibrination syndrome]	0	0	0	0	0	0	0	0	1	3	2	0	2	2	1	2	0	3	3	10	9	19	2	0			
D66	Hereditary factor VIII deficiency	0	0	0	5	1	5	5	14	1	4	0	9	0	1	0	1	0	0	0	0	7	39	46	0	1		
D69	Purpura and other haemorrhagic conditions	0	1	2	5	7	10	34	31	1	0	2	3	1	1	0	1	1	0	1	0	49	52	101	0	0		
D69.0	Allergic purpura	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0		
D69.3	Idiopathic thrombocytopenic purpura	0	0	0	0	0	0	0	2	6	1	5	4	2	8	0	1	0	0	0	1	13	17	30	0	0		
D69.6	Thrombocytopenia, unspecified	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1		
D69.9	Haemorrhagic condition, unspecified	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	1		
D70	Agranulocytosis	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
D72	Other disorders of white blood cells	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	1	0	0	0	1	2	3	0	0		
D72.1	Eosinophilia	0	0	0	1	2	0	1	6	0	0	0	0	0	0	0	0	0	0	0	0	3	7	10	0	0		
D72.8	Other specified disorders of white blood cells	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
D73	Diseases of spleen	0	0	0	0	0	0	0	0	1	0	5	0	0	0	0	0	0	0	0	0	6	0	6	0	0		
D73.1	Hypersplenism	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	3	3	0	0	0		
D76.0	Langerhans' cell histiocytosis, not elsewhere classified	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0		
D80	Immunodeficiency with predominantly antibody defects	0	0	0	0	0	0	0	4	0	193	0	14	0	0	0	0	0	0	0	0	211	0	211	0	0		
D81.1	Severe combined immunodeficiency [SCID] with low T- and B-cell numbers	0	1	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	4	5	0	0		
D89	Other disorders involving the immune mechanism, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
E03	Other hypothyroidism	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	3	0	3	0	0		
E03.9	Hypothyroidism, unspecified	0	0	0	0	0	0	0	0	0	2	1	0	0	4	1	0	0	2	0	8	2	10	0	0			
E04	Other nontoxic goitre	0	0	0	0	0	1	0	0	0	1	0	1	0	1	0	2	1	1	11	7	12	19	0	0			
E04.1	Nontoxic single thyroid nodule	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	0	0	3	0	3	0	0			
E04.9	Nontoxic goitre, unspecified	0	0	0	0	0	0	0	0	0	2	0	4	0	4	0	2	1	1	0	13	1	14	0	0			

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
E05	Thyrotoxicosis [hyperthyroidism]	0	0	0	0	0	0	0	0	0	0	2	0	1	0	1	2	0	0	0	0	4	2	6	0	0		
E05.9	Thyrotoxicosis, unspecified	0	0	0	0	0	0	0	0	0	0	1	1	0	3	0	0	0	0	0	0	4	1	5	0	0		
E06	Thyroiditis	0	0	0	0	0	0	0	0	1	0	0	1	0	0	1	0	0	0	0	0	2	1	3	0	0		
E06.9	Thyroiditis, unspecified	0	0	0	0	0	0	1	0	0	0	1	1	1	0	0	0	0	0	0	0	3	1	4	0	0		
E07	Other disorders of thyroid	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	3	0	3	0	0		
E07.1	Dyshormogenetic goitre	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	1	2	0	0		
E07.9	Disorder of thyroid, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
E10	Insulin-dependent diabetes mellitus	0	0	0	0	0	0	1	3	1	0	3	0	0	0	0	0	0	0	1	3	6	6	12	0	0		
E10.1	Insulin-dependent diabetes mellitus With ketoacidosis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
E11	Non-insulin-dependent diabetes mellitus	0	0	0	0	0	0	0	1	2	1	5	4	15	12	20	21	38	33	54	69	134	141	275	4	8		
E11.8	Non-insulin-dependent diabetes mellitus With unspecified complications	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	2	0	0			
E12	Malnutrition-related diabetes mellitus	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	2	0	0			
E14	Unspecified diabetes mellitus	0	0	0	2	1	1	4	8	12	16	35	25	36	78	109	115	145	185	310	356	652	786	1438	15	20		
E15	Nondiabetic hypoglycaemic coma	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	1	2	1	0			
E16	Other disorders of pancreatic internal secretion	0	0	0	1	1	1	0	1	1	1	6	0	4	0	5	3	3	13	8	8	28	28	56	0	2		
E16.1	Other hypoglycaemia	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			
E16.2	Hypoglycaemia, unspecified	0	4	1	1	0	0	0	1	1	0	1	0	0	0	2	2	2	4	2	9	12	21	0	1			
E27.1	Primary adrenocortical insufficiency	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0			
E27.4	Other and unspecified adrenocortical insufficiency	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	2	0	0			
E27.8	Other specified disorders of adrenal gland	0	0	0	0	0	0	0	0	3	0	6	0	5	0	1	0	1	0	2	0	18	0	18	0	0		
E32	Diseases of thymus	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0			
E34.3	Short stature, not elsewhere classified	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			
E40	Kwashiorkor	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			
E43	Unspecified severe protein-energy malnutrition	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	2	0	1	2	3	5	0	0			
E46	Unspecified protein-energy malnutrition	3	7	72	108	139	179	43	45	4	2	4	3	2	2	1	0	0	1	1	269	347	616	5	3			
E50	Vitamin A deficiency	0	0	0	0	1	1	0	1	0	0	0	0	2	0	2	0	1	0	0	1	6	3	9	0	0		
E56	Other vitamin deficiencies	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
E58	Dietary calcium deficiency	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0			
E61.1	Iron deficiency	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0			
E64	Sequelae of malnutrition and other nutritional deficiencies	0	0	0	0	0	1	0	0	0	0	1	0	0	1	0	0	1	0	0	1	3	4	0	0			
E66	Obesity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	3	3	0	0		
E74	Other disorders of carbohydrate metabolism	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0		
E74.8	Other specified disorders of carbohydrate metabolism	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0		
E79	Disorders of purine and pyrimidine metabolism	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0		
E79.0	Hyperuricaemia without signs of inflammatory arthritis and tophaceous disease	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	1	2	0	0			
E80	Disorders of porphyrin and bilirubin metabolism	1	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	1			
E80.4	Gilbert's syndrome	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	1			
E83	Disorders of mineral metabolism	0	0	0	0	0	0	0	0	0	0	3	0	1	0	1	0	0	1	0	0	5	1	6	0	0		
E83.0	Disorders of copper metabolism	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
E83.5	Disorders of calcium metabolism	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
E86	Volume depletion	4	11	40	76	30	63	7	9	5	26	4	7	17	3	0	3	5	4	14	7	126	209	335	2	2		
E87	Other disorders of fluid, electrolyte and acid-base balance	0	0	0	0	0	0	1	0	0	1	2	2	0	1	1	1	3	0	0	0	7	5	12	0	0		
E87.1	Hypo-osmolality and hyponatraemia	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	2	1	4	5	0	0		
E87.2	Acidosis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	0		
E87.6	Hypokalaemia	0	0	0	0	0	0	0	0	0	1	1	1	2	3	0	0	1	3	1	8	6	14	2	1			
E88	Other metabolic disorders	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	0		
F03	Unspecified dementia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0			
F05	Delirium, not induced by alcohol and other psychoactive substances	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
F06.4	Organic anxiety disorder	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	0	0		
F07.1	Postencephalitic syndrome	0	0	0	0	1	1	2	1	0	0	0	0	0	0	0	0	0	0	0	3	2	5	0	0			
F10	Mental and behavioural disorders due to use of alcohol	0	0	0	0	0	1	2	2	2	2	6	29	23	109	24	145	24	88	26	59	107	435	542	1	10		
F10.2	Mental and behavioural disorders due to use of alcohol - Dependence syndrome	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	2	0	0	2	2	4	0	0			
F10.3	Mental and behavioural disorders due to use of alcohol - Withdrawal state	0	0	0	0	0	0	0	0	0	1	3	0	11	1	5	0	6	0	2	2	27	29	0	1			

ICD Code	Diseases	Inpatient Morbidity																		Grand Total	Total Deaths						
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs			60+ Yrs		Total		Female	Male	
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male	Female	Male			
F14	Mental and behavioural disorders due to use of cocaine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0
F19	Mental and behavioural disorders due to multiple drug use and use of other psychoactive substances	0	0	0	0	0	0	0	0	0	0	2	2	2	1	0	0	1	0	0	0	0	5	3	8	1	0
F19.4	Mental and behavioural disorders due to multiple drug use and use of other psychoactive substances - Withdrawal state with delirium	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0
F20	Schizophrenia	0	0	0	0	0	0	0	0	0	1	1	5	2	0	1	0	0	0	1	0	5	6	11	0	0	
F20.2	Catatonic schizophrenia	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	
F22.9	Persistent delusional disorder, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	
F23	Acute and transient psychotic disorders	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	2	0	0	
F25	Schizoaffective disorders	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	1	0	0	1	2	3	0	0	
F29	Unspecified nonorganic psychosis	0	0	0	0	0	2	3	2	16	5	28	27	18	18	16	14	16	7	6	8	103	83	186	1	0	
F30	Manic episode	0	0	0	0	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	2	1	3	0	0	
F31	Bipolar affective disorder	0	0	0	0	0	0	0	0	1	1	2	0	2	1	0	0	0	0	0	0	5	2	7	0	0	
F32	Depressive episode	1	0	0	0	1	7	0	23	7	37	16	30	16	26	10	20	4	19	10	163	64	227	0	0		
F32.9	Depressive episode, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
F34.1	Dysthymia	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
F39	Unspecified mood [affective] disorder	0	0	0	0	0	0	0	0	0	1	0	2	0	0	1	0	0	0	0	0	3	1	4	0	0	
F40.9	Phobic anxiety disorder, unspecified	0	0	0	0	5	13	20	28	12	8	5	4	4	3	5	2	4	1	1	0	56	59	115	0	0	
F41	Other anxiety disorders	0	0	0	0	0	0	2	11	55	11	107	17	61	29	43	11	25	14	7	4	300	97	397	0	0	
F41.1	Generalized anxiety disorder	0	0	0	0	0	0	0	0	0	1	2	1	1	1	0	1	1	0	0	0	4	4	8	0	0	
F41.9	Anxiety disorder, unspecified	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0	
F42	Obsessive-compulsive disorder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	
F43.2	Adjustment disorders	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	
F44	Dissociative [conversion] disorders	0	0	0	0	0	1	16	3	97	6	85	11	25	5	6	5	4	3	1	3	234	37	271	0	0	
F44.8	Other dissociative [conversion] disorders	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	
F44.9	Dissociative [conversion] disorder, unspecified	0	0	0	1	0	0	2	0	5	0	5	0	1	0	1	0	0	0	0	0	14	1	15	0	0	
F45	Somatoform disorders	0	0	0	0	0	0	0	0	0	0	0	0	3	0	1	0	0	0	1	0	5	0	5	0	0	
F45.1	Undifferentiated somatoform disorder	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
F45.3	Somatoform autonomic dysfunction	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	4	0	4	2	6	0	0		
F45.8	Other somatoform disorders	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	2	0	2	0	0		
F45.9	Somatoform disorder, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	1	2	3	0	0		
F48	Other neurotic disorders	0	0	0	0	0	0	3	0	0	0	2	2	1	3	1	0	1	1	0	0	8	6	14	0	0	
F50	Eating disorders	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
F53	Mental and behavioural disorders associated with the puerperium, not elsewhere classified	0	0	0	0	0	0	0	0	1	0	5	0	2	0	0	0	0	0	0	0	8	0	8	0	0	
F79	Unspecified mental retardation	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	2	2	0	0	
F91.9	Conduct disorder, unspecified	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
F98	Other behavioural and emotional disorders with onset usually occurring in childhood and adolescence	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
F99	Mental disorder, not otherwise specified	0	0	0	0	0	0	0	0	1	1	2	2	2	0	1	2	0	0	1	0	7	5	12	0	0	
G00	Bacterial meningitis, not elsewhere classified	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	
G00.9	Bacterial meningitis, unspecified	0	0	0	3	0	0	0	2	0	0	0	0	1	0	0	0	0	0	1	0	2	5	7	0	0	
G01*	Meningitis in bacterial diseases classified elsewhere	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	1	
G03	Meningitis due to other and unspecified causes	0	0	34	71	25	57	90	141	34	26	40	28	23	15	15	10	10	9	13	17	284	374	658	7	14	
G03.1	Chronic meningitis	0	0	0	0	0	0	2	0	0	0	0	1	1	0	2	0	1	0	0	0	6	1	7	0	0	
G03.9	Meningitis, unspecified	0	0	2	9	4	3	5	9	2	5	7	4	2	3	1	1	4	2	1	3	28	39	67	0	3	
G04	Encephalitis, myelitis and encephalomyelitis	0	0	0	2	0	1	13	16	1	4	4	2	2	2	16	2	0	0	4	3	40	32	72	2	3	
G04.2	Bacterial meningoencephalitis and meningomyelitis, not elsewhere classified	0	0	0	1	0	2	3	5	1	0	0	0	0	0	0	0	0	0	0	4	8	12	0	1		
G04.9	Encephalitis, myelitis and encephalomyelitis, unspecified	0	0	1	3	13	20	41	39	7	4	15	8	6	4	5	9	4	9	8	14	100	110	210	4	8	
G06	Intracranial and intraspinal abscess and granuloma	0	0	0	0	0	0	0	2	0	1	0	1	0	1	0	0	0	0	1	0	6	6	0	0	0	
G06.0	Intracranial abscess and granuloma	0	0	0	0	1	0	0	1	0	0	0	1	0	0	0	1	0	0	0	0	1	3	4	0	0	
G06.1	Intraspinal abscess and granuloma	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	
G08	Intracranial and intraspinal phlebitis and thrombophlebitis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
G09	Sequelae of inflammatory diseases of central nervous system	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	
G10	Huntington's disease	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
G20	Parkinson's disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	2	2	2	4	0	0	
G24	Dystonia	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	
G25	Other extrapyramidal and movement disorders	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
G30	Alzheimer's disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	
G31	Other degenerative diseases of nervous system, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	0	
G37.3	Acute transverse myelitis in demyelinating disease of central nervous system	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	1	0	1	1	3	4	0	0		
G40	Epilepsy	0	0	6	3	10	23	13	26	27	8	9	31	15	7	7	9	2	5	1	4	90	116	206	1	0		
G40.1	Localization-related (focal)(partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures	0	0	0	0	0	0	3	0	1	3	4	2	2	4	4	6	0	2	1	0	15	17	32	0	0		
G40.2	Localization-related (focal)(partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0		
G40.3	Generalized idiopathic epilepsy and epileptic syndromes	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	2	0	0		
G40.9	Epilepsy, unspecified	0	0	0	0	0	0	1	1	0	0	0	0	1	0	0	0	0	1	0	3	1	4	0	0	0		
G41	Status epilepticus	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	
G41.9	Status epilepticus, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2	2	0	0	0	
G43	Migraine	0	0	0	0	0	0	3	0	6	1	3	1	1	3	4	2	0	0	0	0	17	7	24	0	0		
G43.1	Migraine with aura [classical migraine]	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
G43.9	Migraine, unspecified	0	0	0	0	0	0	0	0	2	2	1	0	0	0	0	2	0	0	0	5	2	7	0	0	0		
G44	Other headache syndromes	0	0	0	0	0	0	0	1	0	4	0	0	0	3	0	0	1	0	9	0	9	0	9	0	0	0	
G44.2	Tension-type headache	0	0	0	0	0	0	0	0	0	1	0	0	1	2	1	0	0	0	0	3	2	5	0	0	0		
G45	Transient cerebral ischaemic attacks and related syndromes	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	4	2	5	7	0	0	0		
G45.9	Transient cerebral ischaemic attack, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	3	3	0	0		
G47	Sleep disorders	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0	
G51	Facial nerve disorders	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2	2	0	0	0	
G51.0	Bell's palsy	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0	0	2	1	3	0	0	0		
G52.7	Disorders of multiple cranial nerves	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	
G58	Other mononeuropathies	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	2	0	2	0	0	0	0	
G58.9	Mononeuropathy, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	2	0	2	0	0	0	0	
G61	Inflammatory polyneuropathy	0	0	0	0	3	1	0	0	1	0	0	2	2	0	0	1	0	0	1	7	4	11	0	0	0	0	
G61.0	Guillain-Barré syndrome	0	0	0	0	1	0	1	2	0	3	0	2	0	0	1	0	0	0	3	7	10	0	0	0	0	0	
G62	Other polyneuropathies	0	0	0	0	0	0	0	1	0	0	1	1	2	0	1	0	2	1	1	7	4	11	0	0	0	0	
G62.9	Polyneuropathy, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	1	0	3	1	4	0	0	0	0	
G64	Other disorders of peripheral nervous system	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	0	0	
G70	Myasthenia gravis and other myoneura disorders	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	2	1	3	0	0	0	
G72	Other myopathies	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	
G72.9	Myopathy, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	0	0	
G80	Cerebral palsy	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	0	
G80.9	Cerebral palsy, unspecified	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0	0	
G81	Hemiplegia	0	0	0	0	1	0	1	1	4	1	0	0	0	1	5	5	4	6	12	15	27	29	56	0	2	0	
G81.9	Hemiplegia, unspecified	0	0	0	0	0	0	1	0	0	0	0	0	0	2	1	4	3	1	11	7	16	23	0	1	0		
G82	Paraplegia and tetraplegia	0	0	0	0	0	0	0	1	3	3	3	1	8	2	3	4	9	3	9	14	35	49	0	2	0		
G82.2	Paraplegia, unspecified	0	0	0	0	0	0	1	0	1	1	3	0	1	1	0	1	2	1	2	6	9	15	2	0	0		
G82.3	Flaccid tetraplegia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	1	0	0	
G82.5	Tetraplegia, unspecified	0	0	0	0	1	0	1	0	1	0	0	1	0	0	1	0	2	0	2	1	8	9	0	1	0	0	
G83	Other paralytic syndromes	0	0	0	0	6	6	6	9	1	1	1	0	0	0	1	0	1	2	2	16	20	36	0	1	0	0	
G83.3	Monoplegia, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	0	0	
G83.9	Paralytic syndrome, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	
G91	Hydrocephalus	0	0	6	6	0	2	4	6	4	1	2	6	1	0	2	1	2	2	4	0	25	24	49	2	3	0	
G91.9	Hydrocephalus, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	
G92	Toxic encephalopathy	0	0	0	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	2	1	3	0	0	0	0	
G93	Other disorders of brain	0	0	0	0	0	0	0	1	0	0	2	0	0	1	0	0	2	0	1	0	5	2	7	0	0	0	
G93.0	Cerebral cysts	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	
G93.4	Encephalopathy, unspecified	0	0	0	0	0	1	7	1	0	0	1	0	0	0	0	0	0	0	0	8	2	10	0	0	0	0	
G93.6	Cerebral oedema	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	
G93.8	Other specified disorders of brain	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	1	2	3	1	0	0	0	
G93.9	Disorder of brain, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	1	0	1	1	2	4	6	0	0	0	0	
G96	Other disorders of central nervous system	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	
G98	Other disorders of nervous system, not elsewhere classified	0	0	0	0	0	0	1	0	1	1	0	1	1	0	0	0	0	1	0	1	2	5	7	0	0	0	

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
G99.8*	Other specified disorders of nervous system in diseases classified elsewhere	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	
H00	Hordeolum and chalazion	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	
H05	Disorders of orbit	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	
H10	Conjunctivitis	0	0	0	0	1	1	2	3	1	0	4	6	0	0	1	0	2	4	0	12	13	25	0	0	0	0	
H17	Corneal scars and opacities	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	1	0	
H26	Other cataract	0	0	0	0	0	0	0	2	2	0	1	3	2	2	9	6	13	7	53	60	80	80	160	0	0	0	
H46	Optic neuritis	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	
H53.6	Night blindness	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	
H54	Blindness and low vision	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	1	0	0	
H57	Other disorders of eye and adnexa	0	0	0	0	0	0	0	2	1	0	0	0	0	0	0	0	0	0	0	1	1	3	4	0	0	0	
H60	Otitis externa	0	0	0	1	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	1	2	3	0	0	0	
H60.3	Other infective otitis externa	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	
H60.9	Otitis externa, unspecified	0	0	0	0	1	1	1	0	1	0	0	2	0	2	1	2	0	0	0	0	4	7	11	0	0	0	
H61	Other disorders of external ear	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	
H61.2	Impacted cerumen	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	2	0	0	0	
H65	Nonsuppurative otitis media	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	2	0	0	0	
H65.2	Chronic serous otitis media	0	0	0	0	0	0	4	14	12	19	14	28	23	16	3	3	1	1	0	0	57	81	138	0	1	0	
H65.9	Nonsuppurative otitis media, unspecified	0	0	0	0	0	0	0	0	0	0	0	2	1	0	0	0	0	0	0	1	2	3	0	0	0	0	
H66	Suppurative and unspecified otitis media	0	0	3	6	4	10	22	35	17	15	40	17	21	12	13	9	193	1	3	3	316	108	424	0	0	0	
H66.9	Otitis media, unspecified	0	0	0	0	0	1	0	1	0	0	0	1	0	0	0	0	0	0	0	1	2	3	0	0	0	0	
H69	Other disorders of Eustachian tube	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
H70	Mastoiditis and related conditions	0	0	0	0	1	2	0	2	0	1	0	0	0	0	0	0	0	0	0	2	1	7	8	0	0	0	
H70.0	Acute mastoiditis	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	
H70.9	Mastoiditis, unspecified	0	0	0	0	0	0	0	1	1	0	0	0	0	1	0	0	0	0	0	0	1	2	3	0	0	0	
H74.4	Polyp of middle ear	0	0	0	0	0	0	2	1	0	0	0	0	1	0	1	0	0	0	1	0	5	1	6	0	0	0	
H81	Disorders of vestibular function	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	1	0	
H81.1	Benign paroxysmal vertigo	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	1	2	0	0	0	
H83	Other diseases of inner ear	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	2	2	0	0	0	
H93	Other disorders of ear, not elsewhere classified	0	0	0	0	0	1	1	2	0	0	1	1	0	1	0	1	0	1	2	1	4	8	12	0	0	0	
I00	Rheumatic fever without mention of heart involvement	0	0	0	0	2	4	29	17	15	21	4	0	11	2	2	1	2	1	0	3	65	49	114	0	0	0	
I01	Rheumatic fever with heart involvement	0	0	0	1	0	1	5	3	2	2	1	0	3	0	0	0	1	2	1	1	13	10	23	1	1	0	
I01.9	Acute rheumatic heart disease, unspecified	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	2	0	2	1	3	0	0	0	
I02	Rheumatic chorea	0	0	0	0	0	0	2	1	1	0	4	0	0	1	0	1	0	1	0	4	7	8	15	0	0	0	
I02.0	Rheumatic chorea with heart involvement	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	0	
I02.9	Rheumatic chorea without heart involvement	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	
I05	Rheumatic mitral valve diseases	0	0	0	0	0	0	2	4	0	2	5	4	7	2	7	3	6	3	6	0	33	18	51	1	2	0	
I08	Multiple valve diseases	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	2	1	3	0	0	0	
I09	Other rheumatic heart diseases	2	1	7	14	4	12	25	39	18	14	30	21	23	11	30	11	11	4	27	16	177	143	320	3	3	0	
I09.0	Rheumatic myocarditis	0	0	0	0	0	0	0	0	0	0	1	0	0	3	0	0	1	0	0	2	3	5	0	0	0	0	
I09.8	Other specified rheumatic heart diseases	0	0	0	0	0	0	0	0	1	0	0	1	2	0	0	0	0	0	1	0	4	1	5	0	0	0	
I09.9	Rheumatic heart disease, unspecified	0	0	1	3	1	1	4	7	1	4	7	4	14	9	11	6	4	17	11	6	54	57	111	3	5	0	
I10	Essential (primary) hypertension	0	0	0	0	0	0	0	0	22	24	73	60	121	173	273	248	350	321	878	940	1717	1766	3483	6	13	0	
I11.9	Hypertensive heart disease without (congestive) heart failure	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	2	0	0	0	
I12	Hypertensive renal disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	1	0	3	0	3	0	0	0	
I15	Secondary hypertension	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	1	0	0	
I20	Angina pectoris	0	0	0	0	0	2	1	3	0	0	1	1	2	0	2	1	1	5	5	2	12	14	26	0	0	0	
I20.0	Unstable angina	0	0	0	1	1	0	2	0	1	0	0	0	1	1	2	2	1	1	2	8	7	15	2	0	0		
I20.9	Angina pectoris, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	3	3	7	3	11	7	18	0	0		
I21	Acute myocardial infarction	0	0	0	0	0	0	2	0	0	0	0	4	1	2	1	0	0	1	3	11	7	18	25	1	0	0	
I21.0	Acute transmural myocardial infarction of anterior wall	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	
I21.3	Acute transmural myocardial infarction of unspecified site	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0	
I21.9	Acute myocardial infarction, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	3	2	5	4	9	13	1	2	0	
I22	Subsequent myocardial infarction	0	0	0	0	0	0	0	0	1	0	0	1	0	0	1	0	1	2	0	0	3	3	6	0	0	0	
I23	Certain current complications following acute myocardial infarction	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	
I24	Other acute ischaemic heart diseases	0	0	0	0	0	0	1	1	1	1	0	0	3	1	8	6	14	5	67	41	94	55	149	0	2	0	
I24.9	Acute ischaemic heart disease, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	1	0	0	
I25	Chronic ischaemic heart disease	0	0	0	0	0	0	3	0	0	7	3	2	4	3	6	14	5	16	8	42	29	71	0	2	0	0	
I25.1	Atherosclerotic heart disease	0	0	0	0	0	0	0	4	3	5	3	6	4	3	3	13	13	20	14	51	40	91	3	1	0	0	
I25.4	Coronary artery aneurysm	0	0	0	0	0	0	0	0	0	1	0	1	1	3	1	3	4	3	8	11	14	25	1	0	0	0	
I25.5	Ischaemic cardiomyopathy	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	4	3	4	6	10	0	0	0	

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
I25.9	Chronic ischaemic heart disease, unspecified	0	0	0	0	0	0	0	0	0	1	0	0	1	2	3	2	17	6	18	8	39	19	58	0	0		
I26	Pulmonary embolism	0	0	0	0	0	1	0	0	0	0	0	1	2	3	1	1	1	1	6	3	10	10	20	1	1		
I26.9	Pulmonary embolism without mention of acute cor pulmonale	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	2	0	0			
I27	Other pulmonary heart diseases	0	0	0	0	0	0	1	0	0	0	0	2	0	0	1	0	2	4	8	5	12	11	23	1	1		
I27.9	Pulmonary heart disease, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	6	1	8	1	9	1	0			
I30	Acute pericarditis	0	0	0	0	0	2	1	0	0	0	0	2	0	0	2	1	1	1	4	0	8	6	14	0	0		
I30.1	Infective pericarditis	0	0	0	0	0	0	2	2	0	1	0	0	0	0	0	0	3	11	0	0	5	14	19	1	0		
I31	Other diseases of pericardium	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0		
I31.3	Pericardial effusion (noninflammatory)	0	0	0	0	0	1	0	0	0	0	0	1	1	2	0	1	2	0	2	4	6	10	1	0			
I31.9	Disease of pericardium, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	0	2	1	3	0	0		
I35	Nonrheumatic aortic valve disorders	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	2	0	2	0	0		
I35.8	Other aortic valve disorders	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0		
I35.9	Aortic valve disorder, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0		
I38	Endocarditis, valve unspecified	0	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	0	0	0	3	0	3	0	0		
I40	Acute myocarditis	0	0	0	0	0	0	0	0	0	0	0	2	0	3	4	7	7	16	15	28	26	54	0	1			
I40.0	Infective myocarditis	0	0	0	0	0	0	0	0	1	0	1	0	0	1	1	0	4	2	6	12	13	15	28	0	1		
I42	Cardiomyopathy	0	0	0	0	0	4	2	1	2	2	1	2	1	3	5	2	9	32	31	46	51	97	3	6			
I42.0	Dilated cardiomyopathy	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	3	2	3	5	0	0	0			
I42.9	Cardiomyopathy, unspecified	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	1	0	0	1	3	1	4	1	0			
I44	Atrioventricular and left bundle-branch block	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3	0	7	7	11	7	18	0	0		
I44.7	Left bundle-branch block, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0		
I45.9	Conduction disorder, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0		
I46	Cardiac arrest	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	4	0	5	5	0	3			
I46.9	Cardiac arrest, unspecified	0	0	0	0	0	0	0	0	0	1	0	2	1	2	2	0	1	1	3	6	7	13	6	6			
I47.1	Supraventricular tachycardia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0		
I48	Atrial fibrillation and flutter	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	1	4	1	5	0	0			
I49	Other cardiac arrhythmias	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	0	0	2	2	0	4	3	7	0	0		
I49.4	Other and unspecified premature depolarization	0	0	0	0	0	0	0	0	5	0	20	1	7	0	2	0	0	0	0	34	1	35	0	0			
I50	Heart failure	13	14	24	69	2	15	11	20	3	3	13	8	19	15	43	30	84	47	216	150	428	371	799	18	15		
I50.0	Congestive heart failure	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	1	6	15	7	18	25	0	1		
I50.1	Left ventricular failure	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	5	1	5	3	8	1	1		
I50.9	Heart failure, unspecified	0	0	0	0	0	0	2	4	2	1	0	0	6	1	5	3	16	4	29	31	60	44	104	4	6		
I51	Complications and ill-defined descriptions of heart disease	0	0	0	0	0	2	1	1	3	4	1	8	9	15	2	12	7	36	26	78	49	127	5	0			
I51.2	Rupture of papillary muscle, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	1	3	1	4	1	0			
I51.5	Myocardial degeneration	0	0	0	0	1	0	0	1	0	0	4	0	0	0	0	0	0	1	0	6	1	7	1	0			
I51.6	Cardiovascular disease, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	2	6	6	12	6	9	11	28	25	53	1	1			
I51.7	Cardiomegaly	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0		
I51.9	Heart disease, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	2	0	0			
I60	Subarachnoid haemorrhage	0	0	0	0	0	0	0	1	0	0	1	0	0	2	5	0	2	3	4	6	12	18	2	2			
I60.1	Subarachnoid haemorrhage from middle cerebral artery	0	0	0	0	1	0	0	1	0	2	3	4	3	5	6	3	5	8	4	23	22	45	3	2			
I61	Intracerebral haemorrhage	0	0	0	0	0	0	2	0	0	0	0	1	1	0	1	0	3	2	6	3	13	16	1	1			
I61.5	Intracerebral haemorrhage, intraventricular	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	1	2	0	0			
I62	Other nontraumatic intracranial haemorrhage	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	1	2	2	4	0	0			
I62.9	Intracranial haemorrhage (nontraumatic), unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0			
I63	Cerebral infarction	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	1	2	3	0	0		
I64	Stroke, not specified as haemorrhage or infarction	0	0	0	0	0	0	0	2	2	5	3	13	20	16	60	46	100	195	257	277	442	719	23	37			
I65	Occlusion and stenosis of precerebral arteries, not resulting in cerebral infarction	0	0	0	0	1	1	0	0	1	4	1	4	0	3	0	2	0	0	0	14	3	17	0	0			
I67	Other cerebrovascular diseases	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	3	2	4	6	0	0		
I70	Atherosclerosis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	2	1	3	0	0		
I70.9	Generalized and unspecified atherosclerosis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
I72	Other aneurysm	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	0		
I73	Other peripheral vascular diseases	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	1	0	1	3	4	0	0	0		
I73.1	Thromboangiitis obliterans [Buerger]	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	2	0	0		
I73.9	Peripheral vascular disease, unspecified	0	0	0	0	0	0	0	0	0	1	0	0	3	2	3	1	4	1	4	5	14	19	0	1			
I77	Other disorders of arteries and arterioles	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	1	2	0	0	0		
I77.1	Stricture of artery	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
I77.6	Arteritis, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0		
I78	Diseases of capillaries	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0		



ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
I80	Phlebitis and thrombophlebitis	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0	0	0	2	1	5	1	6	0	0		
I80.2	Phlebitis and thrombophlebitis of other deep vessels of lower extremities	0	0	0	0	0	0	1	0	0	0	1	1	0	2	0	2	1	2	1	2	4	9	13	1	0		
I81	Portal vein thrombosis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2	2	0	0		
I82	Other venous embolism and thrombosis	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	0	0	0	1	1	4	5	5	0	0		
I82.9	Embolism and thrombosis of unspecified vein	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	1	0	0	1	2	3	0	0		
I83	Varicose veins of lower extremities	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	2	2	0	0		
I83.9	Varicose veins of lower extremities without ulcer or inflammation	0	0	0	0	0	0	0	0	0	1	1	9	3	3	1	4	0	0	0	0	5	17	22	0	0		
I84	Haemorrhoids	0	0	0	0	0	2	4	4	11	12	20	17	25	21	41	17	37	33	38	106	176	282	4	4			
I84.1	Internal haemorrhoids with other complications	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
I84.9	Unspecified haemorrhoids without complication	0	0	0	0	0	1	0	0	0	4	1	1	9	1	2	4	6	1	4	12	22	34	0	0			
I85.9	Oesophageal varices without bleeding	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0			
I86	Varicose veins of other sites	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	2	2	0	0			
I86.1	Scrotal varices	0	0	0	0	0	0	0	0	2	0	4	0	1	0	1	0	0	0	0	0	0	8	8	0	0		
I88	Nonspecific lymphadenitis	0	0	0	0	0	10	17	4	3	3	3	7	0	4	0	6	0	6	9	40	32	72	0	0			
I88.9	Nonspecific lymphadenitis, unspecified	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	1	1	2	0	0			
I95	Hypotension	0	0	0	0	0	0	0	0	0	1	2	2	1	0	0	1	1	2	2	6	6	12	0	0			
I99	Other and unspecified disorders of circulatory system	0	0	0	0	0	0	0	1	1	0	0	0	0	0	2	1	0	1	1	3	4	7	0	0			
J00	Acute nasopharyngitis (common cold)	0	0	3	5	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	5	6	11	0	0			
J01	Acute sinusitis	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	1	0	2	1	3	0	0				
J02	Acute pharyngitis	0	0	2	3	5	3	5	18	8	9	17	14	10	9	5	5	2	3	0	5	54	69	123	0	0		
J02.9	Acute pharyngitis, unspecified	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	2	2	0	0			
J03	Acute tonsillitis	0	0	5	15	18	41	96	93	73	35	105	54	56	34	29	17	12	8	11	5	405	302	707	0	0		
J03.9	Acute tonsillitis, unspecified	0	0	0	0	1	3	9	5	2	11	10	5	1	1	0	0	1	0	26	23	49	0	0				
J04	Acute laryngitis and tracheitis	0	0	0	0	0	0	2	0	1	0	1	4	6	11	8	5	5	2	5	22	28	50	0	0			
J05	Acute obstructive laryngitis [croup] and epiglottitis	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	2	0	2	1	0			
J05.1	Acute epiglottitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0			
J06	Acute upper respiratory infections of multiple and unspecified sites	21	19	72	121	107	163	137	159	93	70	148	78	91	62	98	69	84	53	193	168	1044	962	2006	6	6		
J06.8	Other acute upper respiratory infections of multiple sites	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0		
J06.9	Acute upper respiratory infection, unspecified	0	0	4	6	2	14	1	1	1	0	5	1	1	1	2	1	4	4	6	3	26	31	57	0	0		
J11	Influenza, virus not identified	0	0	0	0	3	4	3	0	5	3	3	1	1	2	2	3	1	2	0	15	18	33	0	0			
J12	Viral pneumonia, not elsewhere classified	0	0	0	1	1	2	0	0	1	0	0	0	0	0	0	0	0	0	0	2	3	5	0	0			
J12.9	Viral pneumonia, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	1	1	2	0	0			
J13	Pneumonia due to Streptococcus pneumoniae	0	0	3	1	6	0	1	0	0	1	0	0	0	0	0	0	0	0	0	10	2	12	0	0			
J15	Bacterial pneumonia, not elsewhere classified	30	55	219	389	208	309	50	60	7	8	24	11	10	8	9	1	3	5	16	12	576	858	1434	7	14		
J15.9	Bacterial pneumonia, unspecified	0	0	1	7	4	2	0	0	0	0	0	0	0	0	0	0	0	0	0	5	9	14	1	1			
J16	Pneumonia due to other infectious organisms, not elsewhere classified	0	1	4	4	2	9	4	6	0	1	0	0	0	2	0	1	1	0	1	13	23	36	0	0			
J18	Pneumonia, organism unspecified	114	257	1516	2720	1259	1812	410	574	104	90	319	86	86	63	82	76	92	101	238	237	4220	6016	10236	28	38		
J18.0	Bronchopneumonia, unspecified	4	6	14	36	28	69	2	9	0	0	0	0	2	0	2	0	0	2	1	54	121	175	0	1			
J18.1	Lobar pneumonia, unspecified	0	0	2	0	1	2	1	3	0	0	1	2	2	0	0	1	3	3	2	3	12	14	26	0	0		
J18.9	Pneumonia, unspecified	72	72	360	754	200	390	61	96	13	22	21	31	13	17	23	29	18	36	75	75	856	1522	2378	26	21		
J20	Acute bronchitis	2	0	7	28	6	14	8	7	1	2	6	8	12	6	5	4	4	16	11	6	62	91	153	0	0		
J20.9	Acute bronchitis, unspecified	2	2	11	16	2	12	0	3	0	0	0	0	0	0	0	0	0	0	0	15	33	48	0	0			
J21	Acute bronchiolitis	0	0	9	7	2	2	0	0	0	0	1	0	0	0	1	0	0	1	0	14	9	23	0	0			
J21.9	Acute bronchiolitis, unspecified	3	6	44	95	28	43	2	5	0	0	1	0	1	1	1	0	0	0	1	80	151	231	1	1			
J22	Unspecified acute lower respiratory infection	91	192	1318	2249	1287	1811	556	608	119	124	205	138	135	99	153	104	148	130	366	366	4378	5821	10199	9	12		
J30	Vasomotor and allergic rhinitis	0	0	0	1	2	3	3	1	1	0	1	1	1	0	1	0	0	1	0	0	9	7	16	0	0		
J31	Chronic rhinitis, nasopharyngitis and pharyngitis	0	0	0	0	0	1	1	1	0	1	0	0	0	0	1	0	0	0	0	3	2	5	0	0			
J31.0	Chronic rhinitis	0	0	0	0	0	1	0	0	1	5	5	7	4	1	2	1	0	1	0	16	12	28	0	0			
J32	Chronic sinusitis	0	0	0	1	0	7	12	15	10	18	4	9	8	8	4	2	0	3	1	62	40	102	0	0			
J32.4	Chronic pansinusitis	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0			
J32.9	Chronic sinusitis, unspecified	0	0	5	17	1	1	2	1	0	0	1	0	0	0	0	0	0	0	1	8	21	29	0	0			
J33	Nasal polyp	0	0	0	0	0	1	2	1	0	5	0	3	2	0	1	0	1	0	0	10	6	16	0	0			
J33.8	Other polyp of sinus	0	0	0	0	0	1	0	0	0	3	0	1	3	0	1	0	0	0	0	6	3	9	0	0			
J33.9	Nasal polyp, unspecified	0	0	0	0	0	0	0	3	1	1	2	0	0	1	1	2	0	0	1	7	5	12	0	0			
J34	Other disorders of nose and nasal sinuses	0	0	0	0	0	1	1	4	7	4	9	1	2	0	1	2	3	0	2	12	25	37	0	0			
J34.2	Deviated nasal septum	0	0	0	1	0	0	1	3	13	7	11	4	7	0	1	1	2	2	0	17	36	53	0	0			
J34.8	Other specified disorders of nose and nasal sinuses	0	0	0	0	0	0	0	1	0	0	0	2	0	0	0	0	0	0	0	3	0	3	0	0			

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
J35	Chronic diseases of tonsils and adenoids	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	2	0	0	
J35.8	Other chronic diseases of tonsils and adenoids	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	2	0	0	
J35.9	Chronic disease of tonsils and adenoids, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0	
J36	Peritonsillar abscess	0	0	0	0	0	0	0	0	1	0	6	1	0	2	2	0	0	0	1	0	10	3	13	0	0		
J39	Other diseases of upper respiratory tract	0	1	5	2	7	16	9	8	8	2	12	5	6	5	4	0	4	3	3	6	58	48	106	0	0		
J40	Bronchitis, not specified as acute or chronic	0	0	124	281	30	79	13	16	1	3	8	5	12	4	14	12	6	17	15	17	223	434	657	1	2		
J41	Simple and mucopurulent chronic bronchitis	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	4	4	0	0		
J42	Unspecified chronic bronchitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	0	2	1	3	0	0		
J43	Emphysema	0	0	0	1	1	0	0	1	1	2	0	1	2	1	2	1	1	2	4	2	11	11	22	0	0		
J43.9	Emphysema, unspecified	0	0	2	0	3	1	4	3	0	0	0	0	0	0	0	0	0	0	0	9	4	13	0	0			
J44	Other chronic obstructive pulmonary disease	0	0	0	0	13	5	19	14	21	14	49	57	155	94	439	255	826	596	3629	3181	5151	4216	9367	103	107		
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	0	6	4	18	27	29	31	60	1	5		
J44.1	Chronic obstructive pulmonary disease with acute exacerbation, unspecified	0	0	0	0	0	2	0	0	1	0	2	0	5	5	13	5	56	37	188	180	265	229	494	6	11		
J44.8	Other specified chronic obstructive pulmonary disease	0	0	0	0	0	0	0	0	0	2	0	2	1	4	0	7	13	58	57	73	71	144	0	5			
J44.9	Chronic obstructive pulmonary disease, unspecified	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	0	0	8	3	11	3	14	0	0			
J45	Asthma	0	0	7	19	26	25	39	48	22	13	45	28	71	33	53	28	33	31	80	81	376	306	682	0	2		
J45.8	Mixed asthma	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
J45.9	Asthma, unspecified	0	0	0	1	2	9	2	4	0	4	5	3	6	8	6	6	5	6	7	8	33	49	82	0	0		
J47	Bronchiectasis	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	1	0	0	1	1	3	4	0	0		
J62	Pneumoconiosis due to dust containing silica	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0		
J63	Pneumoconiosis due to other inorganic dusts	0	0	0	0	0	0	0	0	2	1	0	0	0	1	0	0	0	0	0	0	2	2	4	0	0		
J65	Pneumoconiosis associated with tuberculosis	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	1	1	2	0	0		
J68.3	Other acute and subacute respiratory conditions due to chemicals, gases, fumes and vapours	0	0	2	8	9	21	4	5	0	0	0	0	0	0	0	0	0	0	0	15	34	49	0	0			
J69	Pneumonitis due to solids and liquids	1	1	1	0	1	0	0	1	0	0	0	1	0	0	1	1	0	0	1	2	5	6	11	1	2		
J69.0	Pneumonitis due to food and vomit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	1		
J80	Adult respiratory distress syndrome	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	1	2	3	0	0		
J81	Pulmonary oedema	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	2	0	1	2	4	6	0	1		
J82	Pulmonary eosinophilia, not elsewhere classified	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	3	3	0	0	0		
J84	Other interstitial pulmonary diseases	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	1	1	2	2	4	6	0	0		
J84.1	Other interstitial pulmonary diseases with fibrosis	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	2	0	0		
J85	Abscess of lung and mediastinum	0	0	0	0	0	1	0	1	0	0	0	0	2	1	0	1	2	1	1	0	5	5	10	0	0		
J85.2	Abscess of lung without pneumonia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2	1	2	2	4	0	0		
J86	Pyothorax	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	1	0	1	2	2	2	4	0	0		
J86.9	Pyothorax without fistula	0	0	0	0	1	3	1	2	0	0	1	1	0	1	0	2	0	0	2	4	5	13	18	0	0		
J90	Pleural effusion, not elsewhere classified	0	2	3	16	12	11	32	58	17	26	40	57	29	59	32	40	28	35	89	88	282	392	674	10	9		
J92.9	Pleural plaque without asbestos	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2	2	0	0		
J93	Pneumothorax	0	0	0	0	0	0	0	2	2	5	4	7	3	2	0	4	0	3	4	9	13	32	45	1	2		
J93.1	Other spontaneous pneumothorax	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	0		
J93.9	Pneumothorax, unspecified	0	0	0	1	0	0	0	1	0	3	0	0	0	1	0	3	1	3	3	2	4	14	18	0	1		
J94	Other pleural conditions	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	2	0	2	1	3	0	0	0		
J94.1	Fibrothorax	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
J94.2	Haemothorax	0	0	0	0	0	0	0	0	0	1	2	0	0	2	2	0	0	0	1	3	5	8	0	0	0		
J94.8	Other specified pleural conditions	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	1	0	2	1	3	4	7	0	1		
J94.9	Pleural condition, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
J95.4	Mendelson's syndrome	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0		
J96	Respiratory failure, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	1	3	1	5	6	1	3		
J96.9	Respiratory failure, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2	2	0	1		
J98	Other respiratory disorders	1	0	0	0	1	3	3	4	1	5	1	2	5	3	5	2	2	5	13	25	31	56	0	0	0		
J98.1	Pulmonary collapse	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
J98.4	Other disorders of lung	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	1	1	2	3	0	0		
J98.8	Other specified respiratory disorders	0	0	0	0	2	2	3	2	0	0	0	2	5	9	6	9	9	6	12	18	37	48	85	0	0		
J98.9	Respiratory disorder, unspecified	10	9	4	0	2	3	0	0	0	0	0	0	0	3	2	0	12	24	0	0	30	39	69	1	0		

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
K00.9	Disorder of tooth development, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
K02	Dental caries	0	0	0	0	0	0	3	1	2	1	1	0	0	2	0	0	0	0	1	1	7	5	12	0	0		
K03.5	Ankylosis of teeth	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0		
K04	Diseases of pulp and periapical tissues	0	0	0	0	0	0	2	2	1	2	0	0	1	1	0	1	0	0	0	0	4	6	10	0	0		
K04.7	Periapical abscess without sinus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0		
K05	Gingivitis and periodontal diseases	0	0	0	0	0	0	1	1	1	0	4	0	0	0	0	1	0	0	2	0	8	2	10	0	0		
K05.1	Chronic gingivitis	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
K05.5	Other periodontal diseases	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	
K06	Other disorders of gingiva and edentulous alveolar ridge	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	
K06.8	Other specified disorders of gingiva and edentulous alveolar ridge	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	
K07	Dentofacial anomalies [including malocclusion]	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	2	9	2	12	14	0	1		
K07.0	Major anomalies of jaw size	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	
K08	Other disorders of teeth and supporting structures	0	0	0	0	1	2	3	4	0	2	3	2	7	5	7	2	2	4	2	3	25	24	49	0	0		
K09	Cysts of oral region, not elsewhere classified	0	0	0	0	0	0	1	1	0	0	0	1	3	0	0	0	2	1	0	0	6	3	9	0	0		
K09.0	Developmental odontogenic cysts	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	1	0	0		
K10	Other diseases of jaws	0	0	0	0	3	1	0	1	2	0	1	0	0	0	1	0	0	2	0	8	3	11	0	0			
K11.2	Sialoadenitis	0	0	0	0	1	3	1	0	0	0	0	0	0	0	1	0	0	0	1	3	4	7	0	0			
K11.6	Mucocele of salivary gland	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			
K12	Stomatitis and related lesions	0	0	0	0	25	28	9	3	8	7	2	1	0	0	2	1	0	0	1	0	47	40	87	0	0		
K12.1	Other forms of stomatitis	0	0	1	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	3	0	0		
K12.2	Cellulitis and abscess of mouth	0	0	0	0	0	0	2	0	0	3	0	0	0	0	0	0	0	1	0	4	2	6	0	0			
K13	Other diseases of lip and oral mucosa	0	0	1	1	4	6	3	1	0	0	2	2	2	0	1	0	2	1	0	0	15	11	26	0	0		
K14	Diseases of tongue	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	1	0	2	1	3	0	0			
K14.0	Glossitis	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	1	1	2	0	0			
K20	Oesophagitis	0	0	0	1	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	2	1	3	0	0			
K21	Gastro-oesophageal reflux disease	0	0	0	0	0	0	0	0	0	0	1	2	1	0	1	4	0	1	0	7	3	10	0	0			
K21.9	Gastro-oesophageal reflux disease without oesophagitis	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	0	1	1	3	4	0	0			
K22	Other diseases of oesophagus	0	0	0	0	1	1	0	0	0	0	1	0	1	0	0	0	0	0	0	1	3	4	0	0			
K22.4	Dyskinesia of oesophagus	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2	0	2	0	0			
K25	Gastric ulcer	0	0	0	0	0	0	0	0	0	2	0	0	1	0	0	2	2	1	0	5	3	8	0	0			
K26	Duodenal ulcer	0	0	0	0	0	0	0	19	22	55	48	53	31	32	28	23	25	22	47	204	201	405	1	2			
K27	Peptic ulcer, site unspecified	0	0	0	0	0	4	1	4	1	11	4	17	16	5	5	9	5	13	12	63	44	107	0	0			
K28	Gastrojejunal ulcer	0	0	0	0	0	0	0	0	1	4	3	7	3	6	11	8	14	11	11	36	43	79	0	0			
K29	Gastritis and duodenitis	0	0	0	0	0	69	52	257	110	556	236	466	269	378	242	321	193	404	301	2451	1403	3854	2	2			
K29.0	Acute haemorrhagic gastritis	0	0	0	0	1	1	1	0	1	2	1	0	0	2	8	3	8	7	22	15	42	57	2	1			
K29.1	Other acute gastritis	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	1	1	2	0	0			
K29.2	Alcoholic gastritis	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	2	0	2	0	0			
K29.6	Other gastritis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0			
K29.7	Gastritis, unspecified	0	0	0	0	0	0	0	0	0	3	1	4	1	0	4	3	0	3	3	13	9	22	0	0			
K29.9	Gastroduodenitis, unspecified	0	0	0	0	1	0	0	0	0	2	1	3	2	1	1	0	1	1	0	7	6	13	0	0			
K30	Dyspepsia	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	1	0	0	1	2	3	0	0	0			
K31	Other diseases of stomach and duodenum	0	0	0	3	3	2	17	16	25	7	38	22	30	12	26	20	18	13	31	24	188	119	307	0	0		
K31.0	Acute dilatation of stomach	0	5	1	8	0	1	0	0	0	0	0	0	0	0	0	0	1	1	1	2	16	18	0	2			
K31.1	Adult hypertrophic pyloric stenosis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	2	1	4	5	0	1		
K31.2	Hourglass stricture and stenosis of stomach	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	2	0	0	0	3	3	0	1			
K31.8	Other specified diseases of stomach and duodenum	0	0	0	0	0	0	1	0	1	3	2	0	0	1	0	0	1	3	1	7	6	13	0	0			
K31.9	Disease of stomach and duodenum, unspecified	0	0	0	2	0	0	0	4	0	7	2	6	0	8	3	5	2	6	5	36	14	50	0	1			
K35	Acute appendicitis	0	0	2	2	2	11	113	161	177	181	251	259	161	138	94	102	71	48	35	36	906	938	1844	2	0		
K35.0	Acute appendicitis with generalized peritonitis	0	0	0	0	0	0	1	0	0	1	1	2	1	3	2	1	1	0	0	6	7	13	0	0			
K35.1	Acute appendicitis with peritoneal abscess	0	0	0	0	0	0	1	2	2	1	1	1	0	2	1	0	1	1	1	7	7	14	0	0			
K35.9	Acute appendicitis, unspecified	0	0	0	0	2	1	39	47	49	74	83	62	38	59	29	28	23	17	9	22	272	310	582	1	0		
K36	Other appendicitis	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	1	1	2	0	0			
K37	Unspecified appendicitis	0	0	0	12	4	10	104	108	43	53	75	42	40	47	15	14	16	11	10	4	307	301	608	0	1		
K38	Other diseases of appendix	0	0	0	0	1	0	5	9	3	0	5	8	4	4	9	1	5	3	1	1	33	26	59	0	0		
K38.1	Appendicular concretions	0	0	0	0	0	0	0	4	5	4	3	2	7	1	1	2	4	3	1	16	21	37	0	0			
K40	Inguinal hernia	0	2	5	31	10	40	30	124	16	28	30	83	14	72	17	75	23	84	25	152	170	691	861	0	4		
K40.2	Bilateral inguinal hernia, without obstruction or gangrene	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0		
K40.4	Unilateral or unspecified inguinal hernia, with gangrene	0	0	1	11	1	4	5	9	0	0	0	0	0	0	0	0	0	0	0	7	24	31	0	0			

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
K40.9	Unilateral or unspecified inguinal hernia, without obstruction or gangrene	0	0	0	0	0	5	3	20	2	14	2	31	3	19	5	22	3	28	2	28	20	167	187	0	0		
K41	Femoral hernia	0	0	0	0	0	0	1	0	0	0	2	0	1	0	1	1	4	2	6	2	15	5	20	1	0		
K41.3	Unilateral or unspecified femoral hernia, with obstruction, without gangrene	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	3	0	0	0	4	0	8	8	0	0		
K41.9	Unilateral or unspecified femoral hernia, without obstruction or gangrene	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	1	2	0	0		
K42	Umbilical hernia	0	0	1	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	3	1	4	0	0			
K42.9	Umbilical hernia without obstruction or gangrene	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	1	2	3	0	0			
K43.1	Ventral hernia with gangrene	0	0	0	0	0	0	0	0	0	0	0	1	0	3	2	1	1	0	0	5	3	8	0	0			
K43.9	Ventral hernia without obstruction or gangrene	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	0	2	1	3	0	0			
K44	Diaphragmatic hernia	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0			
K44.9	Diaphragmatic hernia without obstruction or gangrene	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
K46	Unspecified abdominal hernia	3	2	8	52	5	43	16	93	1	36	3	46	6	48	8	49	7	57	14	68	71	494	565	2	0		
K46.9	Unspecified abdominal hernia without obstruction or gangrene	0	0	0	0	0	0	0	1	0	0	0	14	0	0	1	5	0	0	1	0	2	20	22	0	0		
K50	Crohn's disease [regional enteritis]	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	1	1	2	0	0	0		
K51	Ulcerative colitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
K52	Other noninfective gastroenteritis and colitis	1	0	10	13	6	18	10	6	0	5	11	4	6	7	5	4	1	6	3	10	53	73	126	0	0		
K55	Vascular disorders of intestine	0	0	0	0	0	0	1	1	0	0	1	0	0	0	0	2	0	0	1	2	3	5	8	0	0		
K55.0	Acute vascular disorders of intestine	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	2	3	0	0	0		
K56	Paralytic ileus and intestinal obstruction without hernia	0	0	5	15	3	11	24	32	5	7	15	17	30	30	23	28	17	16	28	46	150	202	352	2	8		
K56.0	Paralytic ileus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	0		
K56.1	Intussusception	0	0	0	0	1	7	1	2	0	0	0	1	13	18	0	0	1	0	0	0	16	28	44	1	0		
K56.2	Volvulus	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0	0	0	0	0	4	0	4	0	0		
K56.4	Other impaction of intestine	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	2	0	2	0	0	0		
K56.6	Other and unspecified intestinal obstruction	0	0	0	0	1	1	5	9	4	4	11	11	13	19	18	32	14	25	16	27	82	128	210	8	5		
K57	Diverticular disease of intestine	0	0	0	0	0	1	1	2	5	2	1	5	11	9	1	5	0	3	5	5	24	32	56	1	1		
K57.8	Diverticular disease of intestine, part unspecified, with perforation and abscess	0	0	0	0	1	0	1	2	0	0	0	0	0	0	0	0	0	0	0	2	2	4	0	0	0		
K57.9	Diverticular disease of intestine, part unspecified, without perforation or abscess	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	3	0	1	1	0	1	7	8	0	0		
K58	Irritable bowel syndrome	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0		
K58.9	Irritable bowel syndrome without diarrhoea	0	0	0	0	0	0	0	0	0	0	2	1	0	1	0	0	0	1	2	3	4	7	0	0	0		
K59	Other functional intestinal disorders	0	0	0	0	1	1	4	4	6	7	19	4	21	5	10	8	11	2	11	9	83	40	123	0	0		
K59.0	Constipation	0	0	0	0	0	0	4	1	2	4	2	7	9	2	11	0	0	0	1	14	29	43	0	0	0		
K60	Fissure and fistula of anal and rectal regions	0	0	0	0	1	1	0	1	0	3	5	3	6	4	1	6	1	3	6	2	20	23	43	1	0		
K60.1	Chronic anal fissure	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
K60.2	Anal fissure, unspecified	0	0	0	0	0	0	0	0	0	2	2	0	0	0	0	0	1	0	0	2	3	5	0	0	0		
K60.3	Anal fistula	0	0	1	2	1	2	2	1	3	1	13	11	20	1	8	2	6	0	2	20	58	78	1	5	0		
K60.5	Anorectal fistula	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	0		
K61	Abscess of anal and rectal regions	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	0	0	1	0	4	4	0	0	0		
K61.0	Anal abscess	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	1	0	0		
K61.1	Rectal abscess	0	0	0	0	0	1	1	0	0	0	0	0	0	0	2	0	0	0	0	1	3	4	0	0	0		
K62	Other diseases of anus and rectum	0	0	0	0	1	1	0	1	0	0	0	2	1	0	0	0	1	0	2	1	5	5	10	0	0		
K62.1	Rectal polyp	0	0	0	0	1	0	2	3	0	1	1	2	1	0	2	0	0	0	3	1	10	7	17	0	0		
K62.2	Anal prolapse	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0		
K62.3	Rectal prolapse	0	1	0	0	1	1	0	1	0	0	1	1	2	0	5	1	9	0	6	1	24	6	30	0	1		
K62.4	Stenosis of anus and rectum	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0		
K62.5	Haemorrhage of anus and rectum	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2	0	0	0	4	4	0	0	0		
K63	Other diseases of intestine	0	0	0	0	0	1	3	2	0	0	1	1	2	3	3	0	4	2	2	9	15	24	0	0	0		
K63.1	Perforation of intestine (nontraumatic)	0	0	0	0	0	0	1	1	0	0	0	0	0	0	1	2	0	1	0	2	4	6	0	0	0		
K63.3	Ulcer of intestine	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0		
K65	Peritonitis	0	0	0	0	0	1	2	6	8	9	10	14	7	8	7	9	6	8	6	8	46	63	109	0	2		
K65.9	Peritonitis, unspecified	0	0	1	0	1	0	1	2	2	4	7	10	4	10	5	8	2	11	5	8	28	53	81	4	5		
K66	Other disorders of peritoneum	0	0	0	0	0	2	1	0	3	2	5	2	2	2	2	0	1	3	1	11	15	26	1	0	0		
K66.0	Peritoneal adhesions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	0	1	2	3	0	0		
K66.1	Haemoperitoneum	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	2	2	0	0	0		
K66.8	Other specified disorders of peritoneum	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	0		
K66.9	Disorder of peritoneum, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	0		
K70	Alcoholic liver disease	0	0	0	0	0	0	0	2	3	5	13	32	85	61	119	49	124	62	124	211	468	679	10	15	0		
K70.1	Alcoholic hepatitis	0	0	0	0	0	0	0	0	0	1	0	0	0	2	1	2	1	0	2	5	4	9	1	0	0		

ICD Code	Diseases	Inpatient Morbidity																				Grand Total	Total Deaths			
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs			Total		Female	Male
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male		
K70.3	Alcoholic cirrhosis of liver	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	1	0	0	5	5	0	1
K70.9	Alcoholic liver disease, unspecified	0	0	0	0	0	0	0	1	0	0	0	3	9	18	17	35	6	24	6	24	38	105	143	5	11
K71.8	Toxic liver disease with other disorders of liver	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0
K72	Hepatic failure, not elsewhere classified	0	0	0	0	0	1	2	0	0	1	1	6	4	1	3	3	2	5	2	5	14	22	36	3	4
K72.9	Hepatic failure, unspecified	0	0	0	0	0	1	0	0	0	1	0	0	1	3	0	2	2	2	2	1	5	10	15	2	2
K73	Chronic hepatitis, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	2	2	0	0
K74	Fibrosis and cirrhosis of liver	0	0	0	0	1	1	0	2	1	1	7	7	12	8	16	22	9	30	14	33	60	104	164	4	6
K74.6	Other and unspecified cirrhosis of liver	0	0	0	0	0	0	0	0	0	0	1	2	2	9	4	28	5	11	4	12	16	62	78	2	15
K75	Other inflammatory liver diseases	0	0	0	1	9	5	23	33	14	14	38	21	25	40	38	30	16	25	24	30	187	199	386	3	3
K75.0	Abscess of liver	0	0	0	0	0	0	0	0	0	2	1	1	1	0	1	5	0	1	0	1	3	10	13	0	1
K75.9	Inflammatory liver disease, unspecified	0	0	0	0	0	0	5	11	3	5	27	9	26	13	8	28	4	15	8	4	81	85	166	2	1
K76	Other diseases of liver	0	0	0	0	0	2	1	0	1	1	2	6	6	8	22	4	10	4	4	25	46	71	0	1	
K76.1	Chronic passive congestion of liver	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	1	3	0	0	3	4	7	0	0	
K76.6	Portal hypertension	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	
K76.7	Hepatorenal syndrome	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	
K76.9	Liver disease, unspecified	0	0	0	0	0	0	0	0	0	2	8	10	25	25	64	19	36	26	38	82	171	253	7	23	
K80	Cholelithiasis	0	0	0	3	0	0	8	9	16	5	173	42	170	48	141	61	118	53	139	45	765	266	1031	0	0
K80.1	Calculus of gallbladder with other cholecystitis	0	0	0	0	0	0	0	0	1	3	0	3	0	1	0	1	0	1	1	9	2	11	0	0	
K80.2	Calculus of gallbladder without cholecystitis	0	0	0	0	0	20	2	15	3	200	25	227	54	173	58	119	53	113	44	867	239	1106	1	0	
K80.5	Calculus of bile duct without cholangitis or cholecystitis	0	0	0	0	0	0	0	0	0	3	1	2	3	0	0	4	2	2	1	11	7	18	0	0	
K80.8	Other cholelithiasis	0	0	0	0	0	0	0	0	0	6	0	3	2	3	1	3	1	4	0	19	4	23	0	0	
K81	Cholecystitis	0	0	1	4	5	7	24	11	10	9	66	13	68	27	70	18	49	15	77	33	370	137	507	2	0
K81.0	Acute cholecystitis	0	0	0	0	0	0	0	0	0	1	1	2	0	1	1	3	0	1	2	8	4	12	0	0	
K81.1	Chronic cholecystitis	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	3	0	3	0	0	
K81.9	Cholecystitis, unspecified	0	0	0	0	0	0	2	3	0	4	6	7	1	1	5	1	3	10	2	26	19	45	1	0	
K82	Other diseases of gallbladder	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	1	1	2	0	0	
K82.8	Other specified diseases of gallbladder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0
K82.9	Disease of gallbladder, unspecified	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	2	0	2	0	0	
K83	Other diseases of biliary tract	0	0	0	0	0	0	1	1	0	2	1	3	0	0	3	1	0	5	1	12	6	18	0	0	
K83.0	Cholangitis	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	3	0	3	0	0	
K83.1	Obstruction of bile duct	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	2	2	2	4	0	0	
K83.3	Fistula of bile duct	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0	
K85	Acute pancreatitis	0	3	3	3	1	2	3	11	2	7	9	16	20	33	11	25	19	17	18	11	86	128	214	0	0
K85.0	Idiopathic acute pancreatitis	0	0	0	0	0	0	1	0	1	1	1	2	2	1	4	2	1	1	1	7	11	18	0	0	
K86	Other diseases of pancreas	0	0	0	0	0	0	0	0	0	0	3	0	1	1	0	1	0	0	0	2	4	6	0	0	
K86.1	Other chronic pancreatitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	
K91	Postprocedural disorders of digestive system, not elsewhere classified	0	0	0	0	0	3	1	0	0	0	1	0	0	3	0	0	0	0	0	2	6	8	0	0	
K91.4	Colostomy and enterostomy malfunction	0	0	0	0	2	8	8	6	0	1	0	0	0	4	18	25	0	0	0	0	28	44	72	1	1
K92	Other diseases of digestive system	0	0	1	10	4	6	6	5	5	9	12	11	10	35	27	32	30	51	40	44	135	203	338	2	1
K92.0	Haematemesis	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	2	1	2	3	0	0	
K92.2	Gastrointestinal haemorrhage, unspecified	0	0	0	0	0	0	1	1	2	9	5	14	8	21	9	22	7	26	26	36	58	129	187	5	8
L00	Staphylococcal scalded skin syndrome	0	1	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	2	1	3	0	1	
L01	Impetigo	0	0	6	7	12	12	11	9	6	4	2	1	4	0	2	5	0	3	9	4	52	45	97	0	0
L02	Cutaneous abscess, furuncle and carbuncle	39	27	52	66	133	174	186	263	94	133	162	115	111	98	108	66	78	66	57	75	1020	1083	2103	0	0
L02.1	Cutaneous abscess, furuncle and carbuncle of neck	0	1	2	1	2	1	4	0	0	0	0	0	0	0	0	0	0	0	1	8	4	12	0	0	
L02.2	Cutaneous abscess, furuncle and carbuncle of trunk	0	0	0	0	1	2	0	1	0	0	0	0	2	0	0	0	0	0	0	3	3	6	0	0	
L02.3	Cutaneous abscess, furuncle and carbuncle of buttock	0	0	0	0	0	2	2	4	0	1	0	1	1	1	0	1	0	2	0	3	12	15	0	1	
L02.4	Cutaneous abscess, furuncle and carbuncle of limb	1	0	0	0	6	6	6	12	1	7	2	8	0	3	3	7	0	3	0	4	19	50	69	0	0
L02.8	Cutaneous abscess, furuncle and carbuncle of other sites	0	0	0	0	2	4	1	1	0	1	0	0	0	0	0	0	0	0	1	3	7	10	0	0	
L02.9	Cutaneous abscess, furuncle and carbuncle, unspecified	0	0	2	1	2	5	3	8	2	4	3	1	3	4	1	2	0	1	3	2	19	28	47	0	0
L03	Cellulitis	5	5	8	14	32	37	45	84	38	36	49	55	43	52	48	49	32	48	50	48	350	428	778	0	1
L03.1	Cellulitis of other parts of limb	0	0	0	0	0	1	1	1	1	2	2	0	0	1	1	1	2	1	1	7	8	15	0	0	
L03.2	Cellulitis of face	0	0	1	0	1	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	3	1	4	0	0
L03.3	Cellulitis of trunk	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	1	2	3	5	0	0	
L03.8	Cellulitis of other sites	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	0	0	0	3	3	0	0	
L03.9	Cellulitis, unspecified	0	1	1	1	2	6	5	13	4	8	5	4	4	2	3	4	1	8	9	4	34	51	85	0	0
L04	Acute lymphadenitis	1	1	0	0	3	2	3	6	4	1	2	1	1	0	0	0	1	0	0	0	15	11	26	0	0
L04.1	Acute lymphadenitis of trunk	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0
L04.9	Acute lymphadenitis, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
L05	Pilonidal cyst	0	0	0	0	0	0	0	0	1	0	0	2	0	1	0	0	0	0	1	0	2	3	5	0	0		
L05.9	Pilonidal cyst without abscess	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	0	0	
L08	Other local infections of skin and subcutaneous tissue	3	2	2	0	6	9	3	2	0	0	0	0	1	0	0	0	0	0	0	0	0	15	13	28	0	0	
L08.0	Pyoderma	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	
L08.9	Local infection of skin and subcutaneous tissue, unspecified	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3	3	0	0
L10	Pemphigus	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	1	1	2	0	0	
L10.0	Pemphigus vulgaris	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	
L11	Other acantholytic disorders	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
L20.8	Other atopic dermatitis	0	0	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	0	0	0	1	2	3	0	0	
L20.9	Atopic dermatitis, unspecified	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
L23	Allergic contact dermatitis	0	0	1	1	2	4	3	21	0	0	1	15	14	0	3	0	14	0	1	0	39	41	80	0	0		
L23.9	Allergic contact dermatitis, unspecified cause	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	2	0	0	
L24	Irritant contact dermatitis	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	0	0	0	0	0	2	1	3	0	0	
L26	Exfoliative dermatitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	1	0	0	
L27	Dermatitis due to substances taken internally	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	2	0	2	0	0	
L28	Lichen simplex chronicus and prurigo	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	
L29	Pruritus	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0	1	0	1	0	1	0	6	0	6	0	0	
L30	Other dermatitis	6	2	7	5	7	16	10	8	10	6	10	7	7	0	8	5	5	5	4	8	74	62	136	0	1		
L30.9	Dermatitis, unspecified	0	0	1	0	0	1	0	2	0	1	2	6	0	1	1	2	2	2	2	3	8	18	26	0	0		
L40	Psoriasis	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	1	0	1	1	5	1	6	0	0		
L40.2	Acrodermatitis continua	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0		
L44	Other papulosquamous disorders	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
L50	Urticaria	0	0	1	3	6	16	8	11	3	2	1	1	1	0	0	1	0	0	0	21	33	54	0	0			
L50.9	Urticaria, unspecified	0	0	0	0	1	2	2	2	1	0	2	0	0	0	0	0	0	0	1	0	7	4	11	0	0		
L51	Erythema multiforme	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
L51.1	Bullous erythema multiforme	0	0	0	0	0	0	1	0	0	1	0	0	0	1	0	0	0	0	0	0	1	2	3	0	0		
L53.9	Erythematous condition, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
L56	Other acute skin changes due to ultraviolet radiation	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
L57.9	Skin changes due to chronic exposure to nonionizing radiation, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	
L72	Follicular cysts of skin and subcutaneous tissue	0	0	0	0	0	0	1	0	0	0	1	1	0	0	1	0	0	2	0	2	3	5	8	0	0		
L72.1	Trichilemmal cyst	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
L80	Vitiligo	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2	0	0		
L84	Corns and callosities	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0		
L88	Pyoderma gangrenosum	0	4	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	5	0	0	0		
L89	Decubitus ulcer	0	0	0	0	0	0	0	0	0	1	4	2	2	3	0	1	1	2	2	12	8	20	3	0	0		
L90	Atrophic disorders of skin	0	0	0	0	0	0	3	2	1	0	1	0	0	0	0	0	0	1	0	0	5	3	8	0	0		
L91	Hypertrophic disorders of skin	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	1	1	2	0	0		
L92	Granulomatous disorders of skin and subcutaneous tissue	0	1	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	0	0	1	3	4	0	0			
L93	Lupus erythematosus	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0		
L94.9	Localized connective tissue disorder, unspecified	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0		
L97	Ulcer of lower limb, not elsewhere classified	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	1	1	2	2	4	0	0		
L98	Other disorders of skin and subcutaneous tissue, not elsewhere classified	0	0	2	1	0	3	4	10	1	3	7	0	6	4	6	5	4	2	1	6	31	34	65	0	0		
L98.4	Chronic ulcer of skin, not elsewhere classified	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	1	1	3	2	6	8	0	0		
L98.8	Other specified disorders of skin and subcutaneous tissue	0	0	0	0	0	0	3	0	3	5	10	3	10	1	10	1	5	0	2	10	43	53	0	0			
M00	Pyogenic arthritis	0	0	0	0	1	1	3	4	0	1	1	1	0	2	0	0	0	1	0	6	9	15	0	0			
M00.9	Pyogenic arthritis, unspecified	0	0	0	0	0	2	2	3	0	0	1	1	1	0	0	1	0	1	0	4	8	12	0	0			
M05	Seropositive rheumatoid arthritis	0	0	0	6	0	10	2	3	1	0	0	0	0	0	0	0	0	0	0	3	19	22	0	0			
M06	Other rheumatoid arthritis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	0		
M06.9	Rheumatoid arthritis, unspecified	0	0	0	1	0	0	0	1	0	0	1	0	1	0	0	0	0	0	0	2	2	4	0	0			
M10	Gout	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	2	2	3	5	0	0			
M12	Other specific arthropathies	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0		
M13	Other arthritis	0	0	1	4	7	7	39	49	18	19	34	24	23	19	39	24	44	29	45	35	250	210	460	0	1		
M13.9	Arthritis, unspecified	0	0	0	0	1	1	1	2	0	3	1	0	2	0	2	1	2	1	1	7	11	18	0	1			
M15	Polyarthrosis	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	1	1	1	2	0	0		
M20	Acquired deformities of fingers and toes	0	0	0	0	2	0	0	1	0	3	0	1	1	0	0	0	0	0	0	0	3	5	8	0	0		
M21	Other acquired deformities of limbs	0	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	1	2	3	0	0			
M23	Internal derangement of knee	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0		
M24	Other specific joint derangements	0	0	0	0	0	1	2	1	0	1	0	1	0	0	0	0	0	0	0	2	4	6	0	0			
M25	Other joint disorders, not elsewhere classified	0	0	0	0	0	0	0	0	1	1	0	0	1	0	1	1	0	0	0	2	3	4	7	0	0		
M25.4	Effusion of joint	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	0	0	2	1	3	0	0	0		
M25.5	Pain in joint	0	0	0	0	0	1	2	2	1	2	1	0	2	1	1	0	0	1	2	0	9	7	16	0	0		

ICD Code	Diseases	Inpatient Morbidity																				Grand Total	Total Deaths					
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs			Total		Female	Male		
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male				
M25.9	Joint disorder, unspecified	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
M30	Polyarteritis nodosa and related conditions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	
M32	Systemic lupus erythematosus	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
M32.9	Systemic lupus erythematosus, unspecified	0	0	0	0	0	0	1	0	2	0	2	0	10	0	0	0	0	0	0	0	0	15	0	15	1	0	
M33.2	Polymyositis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
M40.2	Other and unspecified kyphosis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	
M46	Other inflammatory spondylopathies	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	2	2	0	0	0	
M46.4	Discitis, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0	0	
M47	Spondylosis	0	0	0	0	0	0	0	1	0	0	1	0	0	0	1	1	0	1	0	1	2	4	6	0	0	0	
M47.8	Other spondylosis	0	0	0	0	0	0	0	0	0	0	2	0	6	0	14	4	6	4	14	6	42	14	56	0	0	0	
M47.9	Spondylosis, unspecified	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	2	2	3	5	0	0	0	
M50	Cervical disc disorders	0	0	0	0	0	0	0	0	0	1	0	6	0	15	0	0	0	1	0	23	0	23	0	23	0	0	
M51	Other intervertebral disc disorders	0	0	0	0	0	0	0	0	0	0	0	0	4	3	1	1	0	0	1	1	6	5	11	0	0	0	
M51.2	Other specified intervertebral disc displacement	0	0	0	0	0	0	0	0	0	3	6	4	10	3	11	3	5	1	11	14	43	57	0	1	0	0	
M53	Other dorsopathies, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	1	0	0	
M54	Dorsalgia	0	0	0	0	0	0	1	2	6	2	14	3	5	9	10	4	2	2	5	7	43	29	72	0	0	0	
M54.1	Radiculopathy	0	0	0	1	0	1	0	0	0	0	0	0	0	0	2	0	1	0	1	0	4	2	6	0	0	0	
M54.2	Cervicalgia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0	
M54.3	Sciatica	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	1	2	0	0	0	
M60	Myositis	0	0	0	0	1	4	3	6	3	2	4	2	6	1	0	2	3	2	0	5	20	24	44	0	0	0	
M60.0	Infective myositis	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
M60.9	Myositis, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	0	0	
M65	Synovitis and tenosynovitis	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	
M65.9	Synovitis and tenosynovitis, unspecified	0	0	0	0	0	0	0	2	0	0	0	0	0	0	2	0	0	0	0	0	2	2	4	0	0	0	
M66.5	Spontaneous rupture of unspecified tendon	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	
M70	Soft tissue disorders related to use, overuse and pressure	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0	
M71	Other bursopathies	0	0	0	0	0	0	1	0	0	0	0	1	2	0	0	0	0	0	0	0	3	1	4	0	0	0	
M71.2	Synovial cyst of popliteal space [Baker]	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	3	0	1	2	5	7	0	0	0	
M72	Fibroblastic disorders	1	0	0	0	0	0	0	0	0	0	1	1	0	1	0	1	0	0	2	2	4	5	9	0	0	0	
M72.9	Fibroblastic disorder, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	
M75	Shoulder lesions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	
M75.8	Other shoulder lesions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	
M76	Enthesopathies of lower limb, excluding foot	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	
M79	Other soft tissue disorders, not elsewhere classified	0	0	0	0	0	2	2	6	3	4	9	6	7	3	6	4	3	4	10	2	40	31	71	0	0	0	
M79.1	Myalgia	0	0	0	0	0	1	0	0	0	1	1	1	1	1	1	0	1	2	1	1	5	7	12	0	0	0	
M79.6	Pain in limb	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0	
M79.8	Other specified soft tissue disorders	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	1	1	2	0	0	0	
M80	Osteoporosis with pathological fracture	0	0	0	0	0	4	5	4	1	5	4	5	9	19	15	18	18	12	43	67	95	162	3	8	0	0	
M80.1	Postophorectomy osteoporosis with pathological fracture	0	0	0	0	0	0	0	0	0	3	0	8	0	14	0	19	0	20	0	64	0	64	1	0	0	0	
M81	Osteoporosis without pathological fracture	0	0	0	0	0	0	0	1	0	2	0	1	0	0	0	1	2	1	2	6	4	10	0	1	0	0	
M81.4	Drug-induced osteoporosis	0	0	0	0	0	1	0	0	0	2	0	0	1	0	0	1	0	0	0	4	1	5	0	0	0	0	
M84.1	Nonunion of fracture [pseudarthrosis]	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
M85	Other disorders of bone density and structure	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	
M86	Osteomyelitis	0	0	0	0	4	3	25	26	5	4	4	6	5	5	3	7	6	11	8	7	60	69	129	0	0	0	
M86.4	Chronic osteomyelitis with draining sinus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	0	
M86.5	Other chronic haematogenous osteomyelitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	1	0	0	
M86.6	Other chronic osteomyelitis	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
M86.8	Other osteomyelitis	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
M86.9	Osteomyelitis, unspecified	0	0	0	0	0	0	3	0	7	0	0	1	0	0	1	0	1	0	0	1	12	13	0	0	0	0	
M88	Paget's disease of bone [osteitis deformans]	0	0	0	0	0	0	1	1	0	0	1	0	3	0	0	0	2	0	0	1	7	8	0	0	0	0	
M89	Other disorders of bone	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	1	0	3	0	3	0	3	0	0	0	
M89.9	Disorder of bone, unspecified	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	
M91	Juvenile osteochondrosis of hip and pelvis	0	0	0	0	0	0	2	0	0	0	0	0	1	0	0	0	0	0	0	0	3	3	0	1	0	0	
M91.1	Juvenile osteochondrosis of head of femur [Legg-Calvé-Perthes]	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	
M91.8	Other juvenile osteochondrosis of hip and pelvis	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	1	1	2	0	0	0	0	
M93	Other osteochondropathies	0	0	0	0	0	0	1	3	0	2	0	1	0	1	0	1	1	6	1	2	3	16	19	0	0	0	
M93.8	Other specified osteochondropathies	0	0	0	0	0	0	1	0	2	0	0	0	1	0	0	0	1	1	0	1	5	6	0	0	0	0	

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
M93.9	Osteochondropathy, unspecified	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0
M94	Other disorders of cartilage	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	0	1	3	1	4	4	8	0	0	0	0
M95	Other acquired deformities of musculoskeletal system and connective tissue	0	0	0	0	0	0	0	2	1	1	2	1	0	0	2	2	4	0	2	1	11	7	18	0	0	0	0
M99	Biomechanical lesions, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0	0
N00	Acute nephritic syndrome	0	0	0	13	1	3	23	31	9	1	16	2	21	0	14	2	5	6	11	4	100	62	162	0	0	0	0
N00.9	Acute nephritic syndrome - Unspecified	0	0	0	0	0	1	3	3	0	0	2	0	0	1	0	0	0	0	0	0	5	5	10	0	0	0	0
N02	Recurrent and persistent haematuria	0	0	0	0	0	1	2	1	3	2	4	11	6	7	3	5	1	8	1	1	20	36	56	0	0	0	0
N02.0	Recurrent and persistent haematuria - Minor glomerular abnormality	0	0	0	0	0	0	0	3	2	1	2	3	1	4	1	2	1	0	3	1	10	14	24	0	0	0	0
N03	Chronic nephritic syndrome	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	2	3	0	0	0	0	0
N03.9	Chronic nephritic syndrome - Unspecified	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0
N04	Nephrotic syndrome	0	0	0	0	14	37	71	101	27	14	36	18	27	18	7	7	5	0	5	4	192	199	391	1	1	0	0
N04.9	Nephrotic syndrome - Unspecified	0	0	0	0	0	0	4	2	3	0	0	1	0	0	0	0	0	0	0	7	3	10	0	0	0	0	0
N05	Unspecified nephritic syndrome	0	0	3	2	9	26	81	118	15	6	30	12	9	7	7	8	5	9	1	1	160	189	349	2	0	0	0
N05.9	Unspecified nephritic syndrome - Unspecified	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	1	0	0	1	2	3	0	0	0	0	0
N10	Acute tubulo-interstitial nephritis	0	0	0	0	0	0	0	0	2	1	6	0	0	0	1	0	0	0	0	0	9	1	10	0	0	0	0
N11	Chronic tubulo-interstitial nephritis	0	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	0	0	0	3	0	3	0	0	0	0	0
N11.1	Chronic obstructive pyelonephritis	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	2	2	0	0	0	0	0
N12	Tubulo-interstitial nephritis, not specified as acute or chronic	0	0	0	0	1	1	2	5	16	8	36	3	16	14	12	6	1	4	2	2	86	43	129	0	0	0	0
N13	Obstructive and reflux uropathy	0	0	0	0	1	1	4	4	1	0	6	4	4	3	3	2	3	0	0	2	22	16	38	0	0	0	0
N13.3	Other and unspecified hydronephrosis	0	0	0	4	1	2	2	7	1	3	5	0	3	3	3	1	1	1	1	3	17	24	41	0	0	0	0
N13.6	Pyonephrosis	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0
N15	Other renal tubulo-interstitial diseases	0	0	0	0	1	0	0	0	0	0	1	2	0	1	0	0	1	1	0	3	4	7	0	0	0	0	0
N15.1	Renal and perinephric abscess	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	1	0	0	0	3	1	4	0	0	0	0	0
N17	Acute renal failure	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	1	1	1	3	2	5	0	0	0	0
N17.9	Acute renal failure, unspecified	0	0	0	0	0	0	0	3	2	3	3	8	4	8	5	7	1	7	3	9	18	45	63	2	4	0	0
N18	Chronic renal failure	0	0	0	0	0	0	2	1	3	1	1	5	1	9	4	3	1	6	7	20	19	45	64	2	2	0	0
N18.0	End-stage renal disease	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	1	0	0	1	3	4	0	0	0	0
N18.8	Other chronic renal failure	0	0	0	0	0	1	1	1	1	0	1	9	5	9	5	6	7	9	7	6	27	41	68	2	7	0	0
N18.9	Chronic renal failure, unspecified	0	0	0	1	0	0	1	0	0	4	2	5	1	2	3	4	7	8	12	23	27	50	1	3	0	0	
N19	Unspecified renal failure	0	0	0	0	1	0	2	4	4	13	7	10	15	16	16	8	10	18	27	69	82	151	4	5	0	0	0
N20	Calculus of kidney and ureter	0	0	0	6	1	4	18	31	32	21	92	67	59	57	31	48	20	30	20	22	273	286	559	0	0	0	0
N20.0	Calculus of kidney	0	0	0	0	0	0	0	4	1	5	8	4	4	4	3	1	3	6	2	24	21	45	0	0	0	0	
N20.1	Calculus of ureter	0	0	0	0	0	0	1	6	5	20	12	20	6	11	9	15	4	2	58	66	124	0	0	0	0	0	0
N20.9	Urinary calculus, unspecified	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	0	0
N21	Calculus of lower urinary tract	0	0	0	0	0	1	0	9	3	2	5	6	7	8	5	7	3	3	1	2	24	38	62	0	0	0	0
N21.0	Calculus in bladder	0	0	0	0	0	0	1	1	1	2	2	2	0	0	1	1	1	0	0	6	7	13	0	0	0	0	0
N21.1	Calculus in urethra	0	0	0	0	0	0	0	1	2	1	2	1	1	3	2	4	4	2	2	1	13	13	26	0	0	0	0
N23	Unspecified renal colic	0	0	0	0	3	1	9	8	28	18	69	56	45	28	20	27	20	14	16	11	210	163	373	0	1	0	0
N25	Disorders resulting from impaired renal tubular function	0	0	0	0	0	0	0	0	0	0	1	0	8	0	19	0	4	0	0	0	32	0	32	0	0	0	0
N26	Unspecified contracted kidney	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0
N28	Other disorders of kidney and ureter, not elsewhere classified	0	0	0	0	0	0	0	2	1	0	2	2	2	2	0	1	1	1	1	2	7	10	17	0	0	0	0
N28.1	Cyst of kidney, acquired	0	0	0	0	1	3	3	1	0	0	3	5	0	0	0	0	0	0	0	7	9	16	0	0	0	0	0
N28.8	Other specified disorders of kidney and ureter	0	0	0	0	0	0	1	0	0	2	2	1	1	2	1	0	0	0	1	0	6	5	11	0	0	0	0
N28.9	Disorder of kidney and ureter, unspecified	0	0	0	0	0	0	0	1	2	0	3	5	5	3	17	6	8	4	3	6	38	25	63	1	0	0	0
N30	Cystitis	0	0	0	0	1	1	5	8	1	1	11	6	2	3	2	2	2	1	3	4	27	26	53	0	0	0	0
N30.0	Acute cystitis	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	2	0	0	1	3	2	5	0	0	0	0
N30.8	Other cystitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	0	0	0	0
N30.9	Cystitis, unspecified	0	0	0	0	0	0	0	0	0	0	0	2	0	2	1	0	1	1	1	2	3	7	10	0	0	0	0
N31	Neuromuscular dysfunction of bladder, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	4	2	0	0	2	0	1	0	0	1	7	3	10	0	0	0	0
N32	Other disorders of bladder	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	2	2	0	0	0	0	0
N32.1	Vesicointestinal fistula	0	0	0	0	0	0	0	7	2	11	0	6	4	0	0	0	0	0	1	24	7	31	1	0	0	0	0
N34	Urethritis and urethral syndrome	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	1	3	1	5	6	0	0	0	0	0
N34.2	Other urethritis	0	0	0	0	1	7	3	3	0	0	0	0	0	0	0	1	3	0	0	5	13	18	0	0	0	0	0
N35	Urethral stricture	0	0	0	1	1	2	2	0	2	3	10	5	7	2	9	2	4	3	6	18	41	59	0	0	0	0	0
N35.9	Urethral stricture, unspecified	0	0	0	0	0	0	1	0	1	0	2	1	0	0	1	0	0	0	0	1	5	6	0	0	0	0	0
N36	Other disorders of urethra	0	0	0	0	0	0	1	3	3	1	8	3	5	2	3	4	7	6	0	0	27	19	46	0	0	0	0
N36.8	Other specified disorders of urethra	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	2	0	2	0	0	0	0	0
N39	Other disorders of urinary system	0	0	69	108	144	184	346	310	624	195	1359	328	782	262	472	232	367	260	557	461	4720	2340	7060	5	2	0	0
N39.0	Urinary tract infection, site not specified	0	0	0	6	6	10	8	6	8	3	23	16	31	11	13	8	14	14	25	20	128	94	222	1	1	0	0
N39.9	Disorder of urinary system, unspecified	0	0	0	0	0	0	0	3	2	0	5	1	1	0	3	0	0	1	2	4	13	9	22	0	0	0	0



ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
N40	Hyperplasia of prostate	0	0	0	0	0	1	0	0	0	3	0	4	0	4	0	8	0	37	0	222	0	279	279	0	0		
N41	Inflammatory diseases of prostate	0	0	0	0	0	0	0	2	0	1	0	1	0	4	0	3	0	17	0	136	0	164	164	0	0		
N41.2	Abscess of prostate	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
N41.9	Inflammatory disease of prostate, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	2	0	8	0	13	13	0	0		
N42	Other disorders of prostate	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	2	0	0	0	3	3	0	0			
N43	Hydrocele and spermatocele	0	1	0	13	0	46	0	97	0	47	0	58	0	80	0	68	0	69	0	51	0	530	530	0	0		
N43.3	Hydrocele, unspecified	0	0	0	0	0	1	0	1	0	0	0	6	0	4	0	5	0	7	0	3	0	27	27	0	0		
N45	Orchitis and epididymitis	0	1	0	2	0	0	0	14	0	5	0	11	0	6	0	6	0	5	0	5	0	55	55	0	0		
N45.0	Orchitis, epididymitis and epididymo-orchitis with abscess	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
N45.9	Orchitis, epididymitis and epididymo-orchitis without abscess	0	0	0	6	0	7	0	7	0	3	0	1	0	1	0	0	2	0	3	0	30	30	0	0			
N46	Male infertility	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	0	4	4	0	0			
N47	Redundant prepuce, phimosis and paraphimosis	0	1	0	12	0	46	0	102	0	16	0	19	0	13	0	13	0	10	0	15	0	247	247	0	0		
N48	Other disorders of penis	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
N48.1	Balanoposthitis	0	0	0	0	0	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	0			
N48.8	Other specified disorders of penis	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
N49	Inflammatory disorders of male genital organs, not elsewhere classified	0	0	0	1	0	0	0	1	0	0	0	1	0	0	0	3	0	3	0	3	0	12	12	0	0		
N49.2	Inflammatory disorders of scrotum	0	0	0	0	0	1	0	0	0	1	0	1	0	1	0	2	0	1	0	2	0	9	9	0	0		
N49.9	Inflammatory disorder of unspecified male genital organ	0	0	0	0	0	2	0	3	0	0	0	0	0	0	0	0	0	0	0	0	5	5	0	0			
N50	Other disorders of male genital organs	0	0	0	1	0	1	0	1	0	1	0	1	0	1	0	1	0	0	0	0	7	7	0	0			
N50.0	Atrophy of testis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
N50.8	Other specified disorders of male genital organs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0			
N60	Benign mammary dysplasia	0	0	0	0	1	0	3	7	0	2	3	4	1	3	0	4	1	1	0	2	9	23	32	0	0		
N60.0	Solitary cyst of breast	0	0	0	0	0	0	1	2	0	2	0	4	0	1	1	0	1	1	0	2	3	12	15	0	0		
N60.3	Fibrosclerosis of breast	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	1	0	3	0	3	0	0	0		
N61	Inflammatory disorders of breast	2	0	0	0	0	0	1	0	21	0	51	0	14	0	7	0	1	0	1	0	98	0	98	0	0		
N62	Hypertrophy of breast	0	0	0	0	0	0	0	0	0	1	1	5	0	2	0	1	0	0	0	0	1	9	10	0	0		
N63	Unspecified lump in breast	1	0	1	0	1	0	5	0	78	0	154	0	43	0	12	0	1	0	6	0	302	0	302	0	0		
N64	Other disorders of breast	0	0	0	0	0	0	0	0	5	0	14	0	1	0	1	0	0	0	0	0	21	0	21	0	0		
N64.8	Other specified disorders of breast	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	0		
N70	Salpingitis and oophoritis	0	0	0	0	0	0	0	0	1	0	1	0	0	0	1	0	1	0	0	0	4	0	4	0	0		
N71	Inflammatory disease of uterus, except cervix	0	0	0	0	0	0	1	0	5	0	6	0	4	0	2	0	0	0	2	0	20	0	20	0	0		
N71.9	Inflammatory disease of uterus, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0	3	0	3	0	0		
N72	Inflammatory disease of cervix uteri	0	0	0	0	0	0	0	0	0	0	1	0	6	0	9	0	2	0	2	0	20	0	20	0	0		
N73	Other female pelvic inflammatory diseases	0	0	0	0	0	0	2	0	31	0	158	0	163	0	75	0	33	0	22	0	484	0	484	0	0		
N73.3	Female pelvic inflammatory disease, unspecified	0	0	0	0	0	0	0	0	1	0	12	0	8	0	8	0	0	0	2	0	31	0	31	0	0		
N75	Diseases of Bartholin's gland	0	0	0	0	0	0	0	0	0	0	8	0	7	0	8	0	1	0	3	0	27	0	27	0	0		
N75.1	Abscess of Bartholin's gland	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	1	0	0	0	4	0	4	0	0		
N76	Other inflammation of vagina and vulva	0	0	1	0	0	0	1	0	1	0	2	0	1	0	2	0	0	0	1	0	9	0	9	0	0		
N76.2	Acute vulvitis	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0	0	0	3	0	3	0	0		
N76.4	Abscess of vulva	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	0		
N80	Endometriosis	0	0	0	0	0	0	0	0	8	0	22	0	10	0	4	0	0	0	0	0	44	0	44	0	0		
N80.0	Endometriosis of uterus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	2	0	0	0	5	0	5	0	0		
N80.1	Endometriosis of ovary	0	0	0	0	0	0	0	0	0	0	1	0	2	0	3	0	0	0	0	0	6	0	6	0	0		
N80.2	Endometriosis of fallopian tube	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0		
N80.9	Endometriosis, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	1	0	3	0	0	0	0	0	5	0	5	0	0		
N81	Female genital prolapse	0	0	0	0	0	2	0	5	0	59	0	191	0	349	0	333	0	350	0	1289	0	1289	3	0			
N81.1	Cystocele	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	2	0	2	0	0	0		
N81.2	Incomplete uterovaginal prolapse	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	2	0	3	0	3	0	0	0		
N81.3	Complete uterovaginal prolapse	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0		
N81.4	Uterovaginal prolapse, unspecified	0	0	0	0	0	0	0	0	0	0	5	0	17	0	51	0	72	0	86	0	231	0	231	0	0		
N81.6	Rectocele	0	0	0	0	0	0	0	0	0	1	0	4	0	1	0	4	0	2	0	12	0	12	0	0	0		
N82	Fistulae involving female genital tract	0	0	0	0	0	0	0	0	0	0	4	0	2	0	2	0	0	0	0	0	8	0	8	0	0		
N83	Noninflammatory disorders of ovary, fallopian tube and broad ligament	0	0	0	0	0	0	0	0	10	0	47	0	35	0	28	0	13	0	7	0	140	0	140	0	0		
N83.1	Corpus luteum cyst	0	0	0	0	0	0	0	0	0	3	0	1	0	1	0	0	0	0	0	5	0	5	0	0	0		
N83.2	Other and unspecified ovarian cysts	0	0	0	0	0	0	3	0	13	0	36	0	33	0	21	0	3	0	8	0	117	0	117	0	0		
N84	Polyp of female genital tract	0	0	0	0	0	0	1	0	0	0	2	0	4	0	6	0	3	0	0	0	16	0	16	0	0		
N84.1	Polyp of cervix uteri	0	0	0	0	0	0	0	0	0	0	10	0	15	0	35	0	14	0	4	0	78	0	78	0	0		
N84.9	Polyp of female genital tract, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	0	0		
N85	Other noninflammatory disorders of uterus, except cervix	0	0	0	0	0	0	0	0	1	0	2	0	11	0	23	0	11	0	0	0	48	0	48	0	0		

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
N85.2	Hypertrophy of uterus	0	0	0	0	0	0	0	0	1	0	3	0	3	0	5	0	0	0	0	12	0	12	0	0			
N85.7	Haematometra	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	1	0	0	3	0	3	0	0			
N85.8	Other specified noninflammatory disorders of uterus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0			
N86	Erosion and ectropion of cervix uteri	26	0	32	0	1	0	1	0	0	0	0	0	1	0	0	0	0	0	1	0	62	0	62	0	0		
N87	Dysplasia of cervix uteri	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0			
N88	Other noninflammatory disorders of cervix uteri	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	0	0	1	0	4	0	4	0	0		
N89	Other noninflammatory disorders of vagina	0	0	0	0	0	0	1	0	1	0	6	0	0	0	2	0	4	0	2	0	16	0	16	0	0		
N89.8	Other specified noninflammatory disorders of vagina	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0			
N90	Other noninflammatory disorders of vulva and perineum	0	0	0	0	0	0	0	0	0	0	4	0	1	0	3	0	0	0	0	8	0	8	0	0			
N90.8	Other specified noninflammatory disorders of vulva and perineum	0	0	0	0	0	0	0	0	1	0	3	0	1	0	0	0	0	0	0	5	0	5	0	0			
N91	Absent, scanty and rare menstruation	0	0	0	0	0	0	2	0	3	0	8	0	3	0	3	0	0	0	0	19	0	19	0	0			
N91.1	Secondary amenorrhoea	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	0			
N92	Excessive, frequent and irregular menstruation	0	0	0	0	1	0	4	0	27	0	21	0	23	0	48	0	14	0	4	0	142	0	142	0	0		
N92.0	Excessive and frequent menstruation with regular cycle	0	0	0	0	0	0	1	0	3	0	2	0	2	0	11	0	4	0	0	23	0	23	0	0			
N92.1	Excessive and frequent menstruation with irregular cycle	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0	0	3	0	3	0	0			
N92.2	Excessive menstruation at puberty	0	0	0	0	0	0	2	0	8	0	15	0	9	0	4	0	0	0	1	39	0	39	0	0			
N92.3	Ovulation bleeding	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	2	0	2	0	0			
N92.6	Irregular menstruation, unspecified	0	0	0	0	0	0	2	0	14	0	27	0	41	0	101	0	55	0	5	0	245	0	245	0	0		
N93	Other abnormal uterine and vaginal bleeding	0	0	0	0	0	0	16	0	150	0	541	0	267	0	192	0	45	0	13	0	1224	0	1224	2	0		
N93.0	Postcoital and contact bleeding	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0			
N93.8	Other specified abnormal uterine and vaginal bleeding	0	0	0	0	0	0	1	0	2	0	10	0	10	0	30	0	14	0	1	0	68	0	68	0	0		
N93.9	Abnormal uterine and vaginal bleeding, unspecified	0	0	0	0	0	0	0	0	2	0	13	0	3	0	3	0	1	0	0	22	0	22	0	0			
N94	Pain and other conditions associated with female genital organs and menstrual cycle	0	0	0	0	1	0	2	0	7	0	7	0	4	0	5	0	1	0	1	0	28	0	28	0	0		
N94.1	Dyspareunia	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0			
N94.6	Dysmenorrhoea, unspecified	0	0	0	0	0	0	0	0	3	0	1	0	0	0	1	0	0	0	0	5	0	5	0	0			
N94.8	Other specified conditions associated with female genital organs and menstrual cycle	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	0			
N95	Menopausal and other perimenopausal disorders	0	0	0	0	0	0	0	0	1	0	0	0	0	0	5	0	2	0	2	0	10	0	10	0	0		
N95.0	Postmenopausal bleeding	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	3	0	0	5	0	5	0	0			
N95.1	Menopausal and female climacteric states	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	1	0	0			
N97	Female infertility	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	0	0	0	3	0	3	0	0			
N97.9	Female infertility, unspecified	1	0	0	0	0	0	0	0	9	0	33	0	24	0	0	0	0	0	0	67	0	67	0	0			
N99	Postprocedural disorders of genitourinary system, not elsewhere classified	0	0	1	0	0	0	1	0	3	0	5	0	2	0	3	0	0	0	2	0	17	0	17	0	0		
N99.3	Prolapse of vaginal vault after hysterectomy	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3	0	3	0	1	0	8	0	8	0	0		
O00	Ectopic pregnancy	0	0	0	0	0	0	0	0	4	0	51	0	34	0	9	0	0	0	0	98	0	98	0	0			
O00.1	Tubal pregnancy	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	0	3	0	3	0	0			
O00.9	Ectopic pregnancy, unspecified	0	0	0	0	0	0	0	0	6	0	61	0	32	0	10	0	4	0	0	113	0	113	0	0			
O01	Hydatidiform mole	0	0	0	0	0	0	1	0	5	0	22	0	8	0	2	0	2	0	0	40	0	40	0	0			
O01.9	Hydatidiform mole, unspecified	0	0	0	0	0	0	0	0	18	0	100	0	23	0	13	0	4	0	0	158	0	158	0	0			
O02	Other abnormal products of conception	0	0	0	0	0	0	2	0	33	0	150	0	32	0	3	0	0	0	0	220	0	220	0	0			
O02.0	Blighted ovum and nonhydatidiform mole	0	0	0	0	0	0	0	0	1	0	12	0	0	0	0	0	0	0	0	13	0	13	0	0			
O02.1	Missed abortion	0	0	0	0	0	0	0	0	7	0	51	0	20	0	4	0	0	0	0	82	0	82	0	0			
O03	Spontaneous abortion	0	0	0	0	0	0	0	0	17	0	91	0	41	0	8	0	0	0	0	157	0	157	0	0			
O03.0	Spontaneous abortion - Incomplete, complicated by genital tract and pelvic infection	0	0	0	0	0	0	0	0	22	0	114	0	36	0	5	0	0	0	0	177	0	177	0	0			
O03.6	Spontaneous abortion - Complete or unspecified, complicated by delayed or excessive haemorrhage	0	0	0	0	0	0	0	0	7	0	6	0	7	0	2	0	0	0	0	22	0	22	0	0			
O03.8	Spontaneous abortion - Complete or unspecified, with other and unspecified complications	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	2	0	2	0	0			
O03.9	Spontaneous abortion - Complete or unspecified, without complication	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	2	0	2	0	0			
O04	Medical abortion	0	0	0	0	0	0	1	0	28	0	145	0	53	0	10	0	0	0	0	237	0	237	0	0			

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
O04.1	Medical abortion - Incomplete, complicated by delayed or excessive haemorrhage	0	0	0	0	0	0	0	0	0	0	4	0	6	0	1	0	0	0	0	0	0	11	0	11	0	0	
O04.3	Medical abortion - Incomplete, with other and unspecified complications	0	0	0	0	0	0	0	0	2	0	15	0	3	0	0	0	0	0	0	0	0	20	0	20	0	0	
O04.6	Medical abortion - Complete or unspecified, complicated by delayed or excessive haemorrhage	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	
O04.9	Medical abortion - Complete or unspecified, without complication	0	0	0	0	0	0	0	0	4	0	1	0	0	0	0	0	0	0	0	0	0	5	0	5	0	0	
O05	Other abortion	0	0	0	0	0	0	0	0	9	0	42	0	9	0	4	0	0	0	0	0	0	64	0	64	0	0	
O05.9	Other abortion - Complete or unspecified, without complication	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	3	0	3	0	0	
O06	Unspecified abortion	2	0	1	0	0	0	6	0	812	0	3228	0	1186	0	222	0	10	0	0	0	0	5467	0	5467	0	0	
O06.0	Unspecified abortion - Incomplete, complicated by genital tract and pelvic infection	0	0	0	0	0	0	0	0	0	0	8	0	8	0	3	0	0	0	0	0	0	19	0	19	0	0	
O06.3	Unspecified abortion - Incomplete, with other and unspecified complications	0	0	0	0	0	0	0	0	34	0	154	0	56	0	13	0	0	0	0	0	0	257	0	257	0	0	
O06.4	Unspecified abortion - Incomplete, without complication	0	0	0	0	0	0	0	0	1	0	12	0	4	0	0	0	0	0	0	0	0	17	0	17	0	0	
O06.6	Unspecified abortion - Complete or unspecified, complicated by delayed or excessive haemorrhage	0	0	0	0	0	0	0	0	13	0	95	0	31	0	7	0	0	0	0	0	0	146	0	146	0	0	
O06.8	Unspecified abortion - Complete or unspecified, with other and unspecified complications	0	0	0	0	0	0	0	0	1	0	5	0	2	0	0	0	0	0	0	0	0	8	0	8	0	0	
O07	Failed attempted abortion	0	0	0	0	0	0	0	0	12	0	76	0	26	0	2	0	0	0	0	0	0	116	0	116	0	0	
O07.9	Other and unspecified failed attempted abortion, without complication	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	
O08	Complications following abortion and ectopic and molar pregnancy	0	0	0	0	0	0	0	0	7	0	26	0	7	0	2	0	0	0	0	0	0	42	0	42	0	0	
O10	Pre-existing hypertension complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	0	0	0	1	0	1	0	4	0	0	0	0	0	0	0	0	6	0	6	0	0	
O12	Gestational [pregnancy-induced] oedema and proteinuria without hypertension	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
O13	Gestational [pregnancy-induced] hypertension without significant proteinuria	0	0	0	0	0	0	0	0	5	0	11	0	7	0	0	0	0	0	0	0	0	23	0	23	0	0	
O14	Gestational [pregnancy-induced] hypertension with significant proteinuria	0	0	0	0	0	0	1	0	12	0	53	0	11	0	2	0	0	0	0	0	0	79	0	79	2	0	
O15	Eclampsia	0	0	0	0	2	0	0	0	28	0	73	0	20	0	1	0	0	0	0	1	0	125	0	125	0	0	
O15.0	Eclampsia in pregnancy	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0	
O15.2	Eclampsia in the puerperium	0	0	0	0	0	0	0	0	1	0	8	0	1	0	0	0	0	0	0	0	0	10	0	10	0	0	
O15.9	Eclampsia, unspecified as to time period	0	0	0	0	0	0	0	0	4	0	9	0	3	0	0	0	0	0	0	0	0	16	0	16	1	0	
O16	Unspecified maternal hypertension	0	0	0	0	0	0	0	0	6	0	11	0	4	0	0	0	0	0	0	0	0	21	0	21	0	0	
O20	Haemorrhage in early pregnancy	0	0	0	0	0	0	0	0	46	0	130	0	34	0	2	0	0	0	0	0	0	212	0	212	1	0	
O21	Excessive vomiting in pregnancy	0	0	0	0	0	0	1	0	49	0	260	0	28	0	3	0	0	0	1	0	0	342	0	342	0	0	
O21.0	Mild hyperemesis gravidarum	0	0	0	0	0	0	0	0	4	0	26	0	8	0	3	0	0	0	0	0	0	41	0	41	0	0	
O21.1	Hyperemesis gravidarum with metabolic disturbance	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
O21.9	Vomiting of pregnancy, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	
O23	Infections of genitourinary tract in pregnancy	0	0	0	0	0	0	0	0	16	0	44	0	5	0	0	0	0	0	0	0	0	65	0	65	0	0	
O23.0	Infections of kidney in pregnancy	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
O23.1	Infections of bladder in pregnancy	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
O23.3	Infections of other parts of urinary tract in pregnancy	0	0	0	0	0	0	0	0	0	0	5	0	0	0	0	0	0	0	0	0	0	5	0	5	0	0	
O23.4	Unspecified infection of urinary tract in pregnancy	0	0	0	0	0	0	0	0	7	0	30	0	7	0	2	0	0	0	0	0	0	46	0	46	0	0	
O23.9	Other and unspecified genitourinary tract infection in pregnancy	0	0	0	0	0	0	0	0	0	0	2	0	1	0	1	0	0	0	2	0	0	6	0	6	0	0	
O25	Malnutrition in pregnancy	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
O26.9	Pregnancy-related condition, unspecified	0	0	0	0	0	0	0	0	2	0	3	0	1	0	0	0	0	0	0	0	0	6	0	6	0	0	
O28	Abnormal findings on antenatal screening of mother	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	3	0	3	0	0	
O30	Multiple gestation	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0	
O32	Maternal care for known or suspected malpresentation of fetus	0	0	0	0	0	0	0	0	12	0	43	0	12	0	0	0	0	0	0	0	0	67	0	67	0	0	
O32.1	Maternal care for breech presentation	0	0	0	0	0	0	0	0	1	0	3	0	1	0	0	0	0	0	0	0	0	5	0	5	0	0	

ICD Code	Diseases	Inpatient Morbidity																				Grand Total	Total Deaths			
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs			Total		Female	Male
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male		
O33	Maternal care for known or suspected disproportion	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	3	0	3	0	0
O33.9	Maternal care for disproportion, unspecified	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0	0	0	0	0	0	4	0	4	0	0
O34	Maternal care for known or suspected abnormality of pelvic organs	0	0	0	0	0	0	0	0	1	0	5	0	7	0	2	0	2	0	1	0	18	0	18	0	0
O34.2	Maternal care due to uterine scar from previous surgery	0	0	0	0	0	0	0	0	3	0	27	0	6	0	0	0	0	0	0	0	36	0	36	0	0
O36	Maternal care for other known or suspected fetal problems	0	0	0	0	0	0	0	0	1	0	9	0	3	0	0	0	0	0	0	0	13	0	13	0	0
O36.4	Maternal care for intrauterine death	0	0	0	0	0	0	0	0	14	0	60	0	10	0	2	0	0	0	0	0	86	0	86	0	0
O40	Polyhydramnios	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0
O41	Other disorders of amniotic fluid and membranes	0	0	0	0	0	0	0	0	2	0	7	0	1	0	0	0	0	0	0	0	10	0	10	0	0
O41.9	Disorder of amniotic fluid and membranes, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O42	Premature rupture of membranes	0	0	0	0	0	0	0	0	6	0	26	0	2	0	0	0	0	0	0	0	34	0	34	0	0
O42.9	Premature rupture of membranes, unspecified	0	0	0	0	0	0	0	0	2	0	9	0	2	0	0	0	0	0	0	0	13	0	13	0	0
O43	Placental disorders	0	0	0	0	0	0	0	0	5	0	31	0	6	0	0	0	0	0	0	0	42	0	42	0	0
O43.1	Malformation of placenta	0	0	0	0	0	0	0	0	0	0	1	0	3	0	0	0	0	0	0	0	4	0	4	0	0
O44	Placenta praevia	0	0	0	0	0	0	0	0	3	0	16	0	2	0	0	0	0	0	0	0	21	0	21	0	0
O44.1	Placenta praevia with haemorrhage	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	2	0	2	0	0
O45	Premature separation of placenta [abruptio placentae]	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	2	0	2	0	0
O46	Antepartum haemorrhage, not elsewhere classified	0	0	0	0	0	0	0	0	29	0	89	0	29	0	1	0	0	0	0	0	148	0	148	0	0
O46.9	Antepartum haemorrhage, unspecified	0	0	0	0	0	0	0	0	1	0	5	0	2	0	0	0	0	0	0	0	8	0	8	0	0
O47	False labour	0	0	0	0	0	0	7	0	538	0	2139	0	390	0	28	0	2	0	1	0	3105	0	3105	0	0
O47.9	False labour, unspecified	0	0	0	0	0	0	0	0	3	0	55	0	31	0	0	0	0	0	0	0	89	0	89	0	0
O48	Prolonged pregnancy	0	0	0	0	0	0	0	0	26	0	87	0	17	0	3	0	0	0	0	0	133	0	133	0	0
O60	Preterm labour	0	0	0	0	0	0	0	0	98	0	296	0	47	0	4	0	0	0	0	0	445	0	445	0	0
O60.1	Preterm labour with preterm delivery	0	0	0	0	0	0	1	0	0	0	0	0	2	0	1	0	1	0	1	0	6	0	6	2	0
O62	Abnormalities of forces of labour	0	0	0	0	0	0	0	0	5	0	11	0	1	0	0	0	0	0	0	0	17	0	17	0	0
O62.1	Secondary uterine inertia	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O62.3	Precipitate labour	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O63	Long labour	0	0	0	0	0	0	2	0	89	0	382	0	36	0	3	0	0	0	0	0	512	0	512	0	0
O63.9	Long labour, unspecified	0	0	0	0	0	0	0	0	0	0	14	0	0	0	1	0	0	0	0	0	15	0	15	0	0
O64	Obstructed labour due to malposition and malpresentation of fetus	0	0	0	0	0	0	0	0	5	0	12	0	2	0	3	0	0	0	0	0	22	0	22	0	0
O65	Obstructed labour due to maternal pelvic abnormality	0	0	0	0	0	0	0	0	3	0	11	0	0	0	0	0	1	0	0	0	15	0	15	0	0
O65.1	Obstructed labour due to generally contracted pelvis	0	0	0	0	0	0	0	0	11	0	18	0	1	0	0	0	0	0	0	0	30	0	30	0	0
O65.4	Obstructed labour due to fetopelvic disproportion, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O66	Other obstructed labour	0	0	0	0	0	0	0	0	121	0	560	0	99	0	4	0	0	0	1	0	785	0	785	1	0
O66.8	Other specified obstructed labour	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O67	Labour and delivery complicated by intrapartum haemorrhage, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	2	0	2	0	0
O68	Labour and delivery complicated by fetal stress [distress]	1	0	0	0	0	0	0	0	29	0	91	0	33	0	3	0	1	0	0	0	158	0	158	0	0
O68.2	Labour and delivery complicated by fetal heart rate anomaly with meconium in amniotic fluid	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O69	Labour and delivery complicated by umbilical cord complications	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	2	0	2	0	0
O70	Perineal laceration during delivery	0	0	0	0	0	0	0	0	0	0	4	0	2	0	0	0	0	0	0	0	6	0	6	0	0
O70.1	Second degree perineal laceration during delivery	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	3	0	3	0	0
O70.9	Perineal laceration during delivery, unspecified	0	0	0	0	0	0	0	0	28	0	91	0	10	0	0	0	0	0	0	0	129	0	129	0	0
O71	Other obstetric trauma	0	0	0	0	0	0	1	0	3	0	7	0	2	0	3	0	1	0	1	0	18	0	18	0	0
O71.3	Obstetric laceration of cervix	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O71.5	Other obstetric injury to pelvic organs	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	2	0	2	0	0
O71.7	Obstetric haematoma of pelvis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O72	Postpartum haemorrhage	0	0	0	0	0	0	0	0	82	0	376	0	88	0	11	0	0	0	2	0	559	0	559	4	0
O72.1	Other immediate postpartum haemorrhage	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	0	0	0	0	3	0	3	0	0
O72.2	Delayed and secondary postpartum haemorrhage	0	0	0	0	0	0	0	0	7	0	99	0	17	0	0	0	0	0	1	0	124	0	124	1	0
O73	Retained placenta and membranes, without haemorrhage	0	0	0	0	0	0	1	0	124	0	611	0	192	0	15	0	0	0	1	0	944	0	944	2	0
O73.0	Retained placenta without haemorrhage	0	0	0	0	0	0	0	0	1	0	9	0	2	0	1	0	0	0	0	0	13	0	13	0	0

ICD Code	Diseases	Inpatient Morbidity																				Grand Total	Total Deaths			
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs			Total		Female	Male
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male		
O75	Other complications of labour and delivery, not elsewhere classified	0	0	0	0	3	0	3	0	84	0	334	0	76	0	12	0	9	0	4	0	525	0	525	0	0
O75.2	Pyrexia during labour, not elsewhere classified	0	0	0	0	0	0	0	0	2	0	9	0	0	0	0	0	0	0	0	0	11	0	11	0	0
O75.9	Complication of labour and delivery, unspecified	0	0	0	0	0	0	0	0	153	0	262	0	119	0	0	0	0	0	0	0	534	0	534	12	0
O80	Single spontaneous delivery	0	0	0	0	0	0	23	0	14563	0	62457	0	8722	0	376	0	5	0	7	0	86153	0	86153	8	0
O80.0	Spontaneous vertex delivery	0	0	0	0	0	0	0	0	4	0	46	0	7	0	0	0	0	0	0	0	57	0	57	1	0
O80.9	Single spontaneous delivery, unspecified	0	0	0	0	0	0	0	0	2511	0	8016	0	2954	0	15	0	1	0	0	0	13497	0	13497	7	0
O81	Single delivery by forceps and vacuum extractor	0	0	0	0	0	0	0	0	487	0	1417	0	302	0	24	0	2	0	0	0	2232	0	2232	0	0
O81.1	Mid-cavity forceps delivery	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	2	0	2	0	0
O81.3	Other and unspecified forceps delivery	0	0	0	0	0	0	0	0	10	0	60	0	3	0	0	0	0	0	0	0	73	0	73	0	0
O81.4	Vacuum extractor delivery	0	0	0	0	0	0	5	0	168	0	611	0	80	0	3	0	0	0	0	0	867	0	867	0	0
O81.5	Delivery by combination of forceps and vacuum extractor	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	2	0	2	0	0
O82	Single delivery by caesarean section	0	0	0	0	0	0	0	0	1073	0	4666	0	993	0	43	0	4	0	0	0	6779	0	6779	5	0
O82.1	Delivery by emergency caesarean section	0	0	0	0	0	0	0	0	1	0	6	0	0	0	0	0	0	0	0	0	7	0	7	0	0
O82.9	Delivery by caesarean section, unspecified	0	0	0	0	0	0	0	0	784	0	2942	0	746	0	17	0	0	0	0	0	4489	0	4489	5	0
O83	Other assisted single delivery	0	0	0	0	0	0	0	0	100	0	309	0	59	0	7	0	0	0	4	0	479	0	479	0	0
O83.1	Other assisted breech delivery	0	0	0	0	0	0	0	0	68	0	392	0	63	0	5	0	0	0	0	0	528	0	528	0	0
O83.2	Other manipulation-assisted delivery	0	0	0	0	0	0	0	0	0	0	1	0	2	0	1	0	0	0	0	0	4	0	4	0	0
O84	Multiple delivery	0	0	0	0	0	0	0	0	23	0	176	0	35	0	4	0	1	0	1	0	240	0	240	0	0
O84.1	Multiple delivery, all by forceps and vacuum extractor	0	0	0	0	0	0	0	0	1	0	9	0	1	0	0	0	0	0	0	0	11	0	11	0	0
O84.2	Multiple delivery, all by caesarean section	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O84.9	Multiple delivery, unspecified	0	0	0	0	0	0	0	0	8	0	44	0	13	0	1	0	0	0	0	0	66	0	66	0	0
O85	Puerperal sepsis	1	0	3	0	0	0	1	0	56	0	162	0	32	0	2	0	1	0	1	0	259	0	259	1	0
O86	Other puerperal infections	0	0	0	0	0	0	0	0	7	0	37	0	2	0	1	0	1	0	0	0	48	0	48	0	0
O86.4	Pyrexia of unknown origin following delivery	0	0	0	0	0	0	0	0	1	0	11	0	1	0	1	0	0	0	0	0	14	0	14	0	0
O88	Obstetric embolism	0	0	0	0	0	0	0	0	273	0	1265	0	212	0	11	0	0	0	0	0	1761	0	1761	0	0
O90	Complications of the puerperium, not elsewhere classified	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	0	3	0	3	0	0
O90.3	Cardiomyopathy in the puerperium	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O91	Infections of breast associated with childbirth	0	0	0	0	0	0	0	0	2	0	8	0	0	0	0	0	0	0	0	0	10	0	10	0	0
O96	Death from any obstetric cause occurring more than 42 days but less than one year after delivery	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0
O99	Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	0	9	0	359	0	729	0	141	0	40	0	2	0	1	0	1281	0	1281	0	0
O99.8	Other specified diseases and conditions complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	0	0	0	9	0	15	0	1	0	0	0	3	0	0	0	28	0	28	0	0
P00.1	Fetus and newborn affected by maternal renal and urinary tract diseases	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
P01.5	Fetus and newborn affected by multiple pregnancy	1	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2	1	3	0	0
P01.7	Fetus and newborn affected by malpresentation before labour	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
P02	Fetus and newborn affected by complications of placenta, cord and membranes	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0
P02.1	Fetus and newborn affected by other forms of placental separation and haemorrhage	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
P03	Fetus and newborn affected by other complications of labour and delivery	1	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	3	0	3	0	0
P03.1	Fetus and newborn affected by other malpresentation, malposition and disproportion during labour and delivery	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
P03.3	Fetus and newborn affected by delivery by vacuum extractor [ventouse]	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	3	4	0	0
P03.4	Fetus and newborn affected by caesarean delivery	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	4	0	0
P04	Fetus and newborn affected by noxious influences transmitted via placenta or breast milk	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
P05	Slow fetal growth and fetal malnutrition	1	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	3	0	3	0	0	
P07	Disorders related to short gestation and low birth weight, not elsewhere classified	151	130	2	3	13	0	0	12	1	0	2	0	1	0	0	0	0	0	0	0	170	145	315	20	17		
P07.0	Extremely low birth weight	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	1	0		
P07.1	Other low birth weight	9	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	9	14	23	2	4		
P07.3	Other preterm infants	37	59	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	37	59	96	4	8		
P10	Intracranial laceration and haemorrhage due to birth injury	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0		
P11	Other birth injuries to central nervous system	3	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	4	7	0	0		
P11.1	Other specified brain damage due to birth injury	1	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	4	5	0	0		
P15.9	Birth injury, unspecified	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
P20	Intrauterine hypoxia	1	6	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	3	6	9	0	2		
P20.9	Intrauterine hypoxia, unspecified	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	4	0	0		
P21	Birth asphyxia	111	162	1	2	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	113	165	278	11	16			
P21.0	Severe birth asphyxia	2	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	8	10	0	2			
P21.9	Birth asphyxia, unspecified	216	312	3	5	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	220	317	537	42	42			
P22	Respiratory distress of newborn	8	9	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	8	11	19	1	0			
P22.0	Respiratory distress syndrome of newborn	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0			
P22.9	Respiratory distress of newborn, unspecified	1	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	1	1			
P23	Congenital pneumonia	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	0			
P24	Neonatal aspiration syndromes	25	28	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	25	28	53	4	2			
P24.0	Neonatal aspiration of meconium	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0			
P24.1	Neonatal aspiration of amniotic fluid and mucus	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0			
P24.9	Neonatal aspiration syndrome, unspecified	2	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	6	8	0	0			
P25	Interstitial emphysema and related conditions originating in the perinatal period	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
P26	Pulmonary haemorrhage originating in the perinatal period	15	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	15	14	29	0	0			
P35	Congenital viral diseases	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0			
P36	Bacterial sepsis of newborn	1423	2329	60	86	3	12	2	2	2	2	5	1	1	0	1	0	0	0	2	1497	2434	3931	39	69			
P36.4	Sepsis of newborn due to Escherichia coli	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
P36.9	Bacterial sepsis of newborn, unspecified	214	324	2	1	1	1	0	0	1	0	0	0	0	0	0	0	0	0	0	218	326	544	9	14			
P37	Other congenital infectious and parasitic diseases	7	15	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	7	16	23	0	0			
P37.1	Congenital toxoplasmosis	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			
P38	Omphalitis of newborn with or without mild haemorrhage	2	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	4	6	0	0			
P39	Other infections specific to the perinatal period	2	4	1	0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	6	4	10	0	0			
P39.4	Neonatal skin infection	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			
P39.9	Infection specific to the perinatal period, unspecified	58	56	18	18	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	87	74	161	3	2			
P55	Haemolytic disease of fetus and newborn	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
P59	Neonatal jaundice from other and unspecified causes	229	316	11	15	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	241	334	575	6	7			
P59.9	Neonatal jaundice, unspecified	56	70	0	3	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	56	74	130	0	1			
P60	Disseminated intravascular coagulation of fetus and newborn	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	0			
P74.1	Dehydration of newborn	6	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6	10	16	0	0			
P77	Necrotizing enterocolitis of fetus and newborn	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0			
P78.3	Noninfective neonatal diarrhoea	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	0			
P78.9	Perinatal digestive system disorder, unspecified	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0			
P80	Hypothermia of newborn	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	1			
P80.9	Hypothermia of newborn, unspecified	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
P81	Other disturbances of temperature regulation of newborn	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	4	0	0			
P81.9	Disturbance of temperature regulation of newborn, unspecified	7	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	7	6	13	0	0			
P83	Other conditions of integument specific to fetus and newborn	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
P83.5	Congenital hydrocele	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
P90	Convulsions of newborn	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0			
P92	Feeding problems of newborn	3	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	2	5	0	0			
P92.0	Vomiting in newborn	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
P92.8	Other feeding problems of newborn	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
P92.9	Feeding problem of newborn, unspecified	9	16	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	9	16	25	1	0	
P95	Fetal death of unspecified cause	1	0	0	0	0	0	0	0	5	0	14	1	5	0	0	0	0	0	0	0	0	25	1	26	0	0	
P96	Other conditions originating in the perinatal period	13	11	1	3	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	15	15	30	0	0		
Q03.9	Congenital hydrocephalus, unspecified	0	0	1	1	0	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0	1	5	6	1	0		
Q04.9	Congenital malformation of brain, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	1	0	0	
Q05	Spina bifida	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0		
Q18.1	Preauricular sinus and cyst	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3	0	0		
Q21	Congenital malformations of cardiac septa	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	2	0	0		
Q21.0	Ventricular septal defect	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	
Q24	Other congenital malformations of heart	0	0	3	1	2	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	6	2	8	0	0		
Q24.9	Congenital malformation of heart, unspecified	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
Q25	Congenital malformations of great arteries	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2	3	0	0		
Q25.6	Stenosis of pulmonary artery	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
Q27.3	Peripheral arteriovenous malformation	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2	0	2	2	4	0	0	
Q28	Other congenital malformations of circulatory system	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0		
Q31	Congenital malformations of larynx	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
Q35	Cleft palate	0	0	0	0	0	1	1	1	1	0	2	0	0	0	0	0	0	0	0	0	4	2	6	0	0		
Q35.9	Cleft palate, unspecified	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
Q36	Cleft lip	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0		
Q37	Cleft palate with cleft lip	1	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2	1	3	0	0		
Q38	Other congenital malformations of tongue, mouth and pharynx	0	0	0	0	0	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0		
Q38.1	Ankyloglossia	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
Q39	Congenital malformations of oesophagus	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0		
Q39.0	Atresia of oesophagus without fistula	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
Q40.1	Congenital hiatus hernia	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
Q42.8	Congenital absence, atresia and stenosis of other parts of large intestine	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
Q43.1	Hirschsprung's disease	3	10	4	24	3	7	0	3	0	0	0	0	0	0	0	0	0	0	0	10	44	54	1	4			
Q44	Congenital malformations of gallbladder, bile ducts and liver	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0		
Q44.4	Cholelithiasis	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0		
Q45	Other congenital malformations of digestive system	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
Q51.8	Other congenital malformations of uterus and cervix	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	0	0	3	0	3	0	0		
Q52	Other congenital malformations of female genitalia	0	0	0	0	0	0	4	0	4	0	8	0	4	0	2	0	0	0	2	0	24	0	24	0	0		
Q52.8	Other specified congenital malformations of female genitalia	0	0	0	0	0	0	3	0	2	0	5	0	3	0	1	0	2	1	4	0	20	1	21	0	0		
Q53	Undescended testicle	0	0	1	3	0	3	0	2	0	0	0	0	0	0	0	0	0	0	0	0	1	8	9	0	0		
Q53.1	Undescended testicle, unilateral	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	2	0	0		
Q54	Hypospadias	0	0	0	9	2	17	0	12	0	0	0	0	0	0	0	0	0	0	0	2	38	40	0	0			
Q55	Other congenital malformations of male genital organs	0	0	0	0	0	0	0	2	0	7	0	9	0	17	1	5	0	4	0	2	1	46	47	0	0		
Q55.4	Other congenital malformations of vas deferens, epididymis, seminal vesicles and prostate	0	0	0	4	1	7	9	11	0	0	0	0	0	0	0	0	0	0	0	10	22	32	0	0			
Q55.6	Other congenital malformations of penis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0		
Q55.8	Other specified congenital malformations of male genital organs	0	0	0	0	0	1	0	3	0	0	1	4	0	1	0	0	0	3	0	4	1	16	17	0	0		
Q55.9	Congenital malformation of male genital organ, unspecified	0	0	0	0	0	0	0	0	1	0	3	0	17	0	2	0	1	0	0	0	24	24	0	0			
Q56	Indeterminate sex and pseudohermaphroditism	1	0	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	3	4	0	0		
Q60	Renal agenesis and other reduction defects of kidney	0	3	0	0	2	0	7	15	5	6	11	8	8	11	19	15	18	22	40	66	110	146	256	0	0		
Q61	Cystic kidney disease	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	1	1	2	2	4	0	0			
Q64	Other congenital malformations of urinary system	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0		
Q64.2	Congenital posterior urethral valves	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
Q66	Congenital deformities of feet	0	0	0	1	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2	1	3	0	0		
Q67	Congenital musculoskeletal deformities of head, face, spine and chest	0	0	0	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	0	1	2	3	0	0		

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
Q67.4	Other congenital deformities of skull, face and jaw	0	0	0	0	0	0	0	2	2	2	2	13	1	2	2	1	0	2	0	0	7	22	29	0	0		
Q72	Reduction defects of lower limb	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	1	1	2	0	0		
Q75	Other congenital malformations of skull and face bones	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	0		
Q76.1	Klippel-Feil syndrome	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
Q77.2	Short rib syndrome	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0		
Q79.2	Exomphalos	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	0		
Q81	Epidermolysis bullosa	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	2	3	0	0		
Q82.3	Incontinentia pigmenti	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0		
Q85	Phakomatoses, not elsewhere classified	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
Q85.1	Tuberous sclerosis	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0		
Q89.2	Congenital malformations of other endocrine glands	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0		
Q90	Down's syndrome	0	0	2	0	2	0	2	1	0	0	0	0	0	0	0	0	0	0	0	6	1	7	0	0	0		
R00	Abnormalities of heart beat	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
R00.1	Bradycardia, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	0		
R00.2	Palpitations	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	1	1	1	3	4	0	0		
R02	Gangrene, not elsewhere classified	0	0	0	0	1	0	2	2	0	4	2	3	3	3	1	9	5	8	7	10	21	39	60	1	1		
R04	Haemorrhage from respiratory passages	0	0	2	1	1	1	9	7	8	17	17	20	13	25	16	27	21	24	42	43	129	165	294	1	2		
R04.0	Epistaxis	0	0	0	0	0	0	0	0	12	0	1	5	0	4	8	2	2	0	2	11	25	36	0	0			
R04.1	Haemorrhage from throat	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
R04.2	Haemoptysis	0	0	0	0	0	2	0	0	2	4	3	28	19	6	6	29	6	8	9	77	45	122	2	0			
R05	Cough	0	0	2	2	2	2	0	2	0	2	1	0	0	0	1	1	2	2	3	9	13	22	0	0			
R06	Abnormalities of breathing	0	0	0	1	0	0	0	0	1	0	0	1	0	1	1	0	0	1	0	0	2	4	6	0	0		
R06.4	Hyperventilation	0	0	0	0	0	0	0	1	0	1	0	4	0	0	0	1	0	1	0	8	0	8	0	0			
R06.6	Hiccough	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0			
R06.8	Other and unspecified abnormalities of breathing	3	2	2	2	2	4	0	0	2	0	0	0	0	0	1	0	10	0	1	0	21	8	29	2	1		
R07	Pain in throat and chest	0	0	0	0	0	0	1	4	3	2	2	10	3	7	6	5	3	12	2	40	20	60	0	0			
R07.1	Chest pain on breathing	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	1	1	2	3	0	0			
R07.4	Chest pain, unspecified	0	0	0	0	0	0	0	1	3	2	0	1	0	1	4	3	0	4	1	12	8	20	0	0			
R09	Other symptoms and signs involving the circulatory and respiratory systems	0	0	0	0	0	0	1	1	1	1	1	1	0	0	0	0	1	0	0	2	4	6	0	1			
R09.2	Respiratory arrest	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	1	0	0		
R10	Abdominal and pelvic pain	2	1	5	25	26	58	118	193	270	111	503	173	201	127	159	102	78	68	96	92	1458	950	2408	4	0		
R10.0	Acute abdomen	0	0	0	0	1	2	5	9	4	3	4	3	4	1	1	0	5	2	4	4	28	24	52	1	0		
R10.1	Pain localized to upper abdomen	0	0	0	0	0	0	0	0	4	0	6	2	15	17	4	6	13	7	2	0	44	32	76	0	0		
R10.3	Pain localized to other parts of lower abdomen	0	0	0	0	0	0	0	0	0	0	2	0	0	0	1	0	2	0	0	0	5	0	5	0	0		
R10.4	Other and unspecified abdominal pain	0	1	3	2	9	30	28	43	49	24	75	85	83	39	18	37	30	33	23	16	318	310	628	0	0		
R11	Nausea and vomiting	2	5	8	10	32	41	38	30	17	18	40	21	17	14	14	12	10	7	15	27	193	185	378	0	0		
R13	Dysphagia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	1	3	4	0	0	0		
R14	Flatulence and related conditions	1	0	0	0	5	15	0	28	3	0	7	0	4	2	1	28	2	0	0	0	23	73	96	1	0		
R15	Faecal incontinence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0		
R16	Hepatomegaly and splenomegaly, not elsewhere classified	1	0	1	1	1	1	2	6	0	0	13	3	3	8	6	22	3	3	3	5	33	49	82	1	0		
R16.1	Splenomegaly, not elsewhere classified	0	0	0	0	0	1	1	1	1	1	0	0	0	0	1	2	0	0	0	0	3	5	8	1	0		
R16.2	Hepatomegaly with splenomegaly, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0	0		
R17	Unspecified jaundice	21	49	6	10	7	8	10	17	14	13	24	14	11	16	15	14	5	8	8	14	121	163	284	2	1		
R18	Ascites	0	0	0	1	1	1	3	7	6	3	10	5	19	12	27	23	32	16	41	36	139	104	243	1	1		
R19	Other symptoms and signs involving the digestive system and abdomen	0	1	0	0	1	0	1	2	0	1	3	0	0	1	1	0	1	1	3	0	10	6	16	0	0		
R19.0	Intra-abdominal and pelvic swelling, mass and lump	0	0	0	0	0	0	1	0	0	0	0	1	0	1	1	0	0	0	0	0	2	2	4	0	0		
R21	Rash and other nonspecific skin eruption	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	1	0	0	0	2	1	3	0	0		
R22	Localized swelling, mass and lump of skin and subcutaneous tissue	25	53	0	0	1	1	2	1	3	3	11	2	4	7	9	6	8	7	6	17	69	97	166	2	3		
R22.0	Localized swelling, mass and lump, head	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	1	1	2	0	0		
R22.1	Localized swelling, mass and lump, neck	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	1		
R22.4	Localized swelling, mass and lump, lower limb	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0			
R23.8	Other and unspecified skin changes	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	14	19	0	0			
R25	Abnormal involuntary movements	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	0	0	0		
R29	Other symptoms and signs involving the nervous and musculoskeletal systems	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0		
R30	Pain associated with micturition	0	0	0	0	2	0	4	4	0	0	4	2	0	0	2	2	0	0	0	0	12	8	20	0	0		



ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
R31	Unspecified haematuria	0	0	0	0	0	1	1	0	0	0	0	3	1	1	0	0	0	0	1	5	3	10	13	0	0		
R33	Retention of urine	1	1	0	2	1	1	3	4	3	17	38	7	11	4	7	30	11	9	37	54	112	129	241	1	1		
R36	Urethral discharge	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	2	2	0	0		
R40	Somnolence, stupor and coma	0	0	0	0	0	0	0	0	0	1	0	0	2	0	1	0	1	0	1	2	5	3	8	0	0		
R41	Other symptoms and signs involving cognitive functions and awareness	0	0	0	1	0	1	1	5	0	0	4	3	2	5	0	4	3	4	2	11	12	34	46	0	1		
R42	Dizziness and giddiness	0	0	0	0	0	2	2	0	6	7	21	3	30	12	14	3	16	12	28	7	117	46	163	1	0		
R44	Other symptoms and signs involving general sensations and perceptions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0		
R47	Speech disturbances, not elsewhere classified	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	1	0	1	0	4	4	0	0		
R49	Voice disturbances	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	1	2	1	3	0	0		
R50	Fever of other and unknown origin	26	53	111	172	242	299	346	513	318	255	495	301	293	229	218	251	172	181	270	276	2491	2530	5021	4	9		
R50.9	Fever, unspecified	5	15	6	15	23	30	28	48	39	27	73	35	46	28	39	25	13	16	19	26	291	265	556	3	0		
R51	Headache	0	0	0	0	2	5	16	20	37	34	88	60	79	31	46	32	29	21	27	20	324	223	547	0	0		
R52	Pain, not elsewhere classified	0	0	0	1	2	7	0	3	4	2	1	1	1	0	0	0	0	2	2	10	17	27	0	0			
R53	Malaise and fatigue	0	0	0	0	3	3	30	1	42	2	14	84	56	33	33	6	2	5	17	31	197	165	362	0	1		
R55	Syncope and collapse	1	1	0	1	2	3	2	0	15	0	20	2	3	7	5	1	0	3	4	3	52	21	73	4	3		
R56	Convulsions, not elsewhere classified	18	17	56	107	77	190	42	112	40	19	48	19	20	16	6	9	7	7	4	2	318	498	816	0	2		
R56.0	Febrile convulsions	15	17	6	23	21	36	4	15	6	0	7	0	0	0	0	0	0	1	0	60	91	151	0	0			
R56.8	Other and unspecified convulsions	3	9	11	10	39	64	34	54	20	25	16	32	10	15	16	19	6	18	13	27	168	273	441	0	2		
R57	Shock, not elsewhere classified	0	0	0	0	0	0	1	0	0	0	1	0	1	2	0	1	2	1	1	3	6	7	13	0	0		
R57.0	Cardiogenic shock	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	0		
R57.1	Hypovolaemic shock	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	1	2	2	4	0	0		
R57.8	Other shock	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	1	2	3	0	0		
R57.9	Shock, unspecified	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	1	1	2	0	0		
R58	Haemorrhage, not elsewhere classified	2	1	1	2	0	0	2	6	2	1	9	4	9	8	6	15	6	8	5	14	42	59	101	2	4		
R59	Enlarged lymph nodes	5	5	3	18	13	4	6	7	2	4	4	1	2	2	2	1	2	1	1	2	40	45	85	0	0		
R59.0	Localized enlarged lymph nodes	0	0	2	11	0	2	13	2	0	0	0	0	0	0	0	0	0	0	0	0	15	15	30	0	0		
R59.1	Generalized enlarged lymph nodes	0	0	0	0	0	1	1	4	1	1	0	0	0	0	1	1	0	1	0	0	3	8	11	0	0		
R59.9	Enlarged lymph nodes, unspecified	70	58	31	32	1	28	19	2	22	22	22	12	22	23	22	11	20	11	11	11	240	210	450	1	0		
R60	Oedema, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	3	0	1	0	1	1	3	5	8	6	14	0	2		
R60.1	Generalized oedema	0	0	0	0	0	0	1	0	0	0	1	0	0	1	2	0	0	1	0	4	2	6	0	1			
R60.9	Oedema, unspecified	0	0	0	0	0	1	0	0	0	0	0	1	1	1	0	1	0	1	1	5	3	8	0	0			
R62	Lack of expected normal physiological development	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
R62.8	Other lack of expected normal physiological development	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
R63	Symptoms and signs concerning food and fluid intake	3	2	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	3	3	6	0	0		
R63.3	Feeding difficulties and mismanagement	5	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	2	7	0	0		
R64	Cachexia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0		
R68	Other general symptoms and signs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
R68.1	Nonspecific symptoms peculiar to infancy	11	10	7	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	18	19	37	0	0		
R69	Unknown and unspecified causes of morbidity	603	746	90	153	181	272	332	459	478	309	2063	433	691	405	527	433	455	388	898	1010	6318	4608	10926	64	111		
R70	Elevated erythrocyte sedimentation rate and abnormality of plasma viscosity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0		
R73	Elevated blood glucose level	0	0	0	0	0	0	0	0	0	0	4	0	1	0	0	0	0	0	1	0	6	0	6	0	0		
R75	Laboratory evidence of human immunodeficiency virus [HIV]	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	1	1	2	0	0		
R80	Isolated proteinuria	0	0	0	0	0	0	1	1	0	0	0	0	0	0	1	0	0	0	0	0	2	1	3	0	0		
R83	Abnormal findings in cerebrospinal fluid	0	0	0	0	0	0	0	0	2	0	5	0	17	0	1	0	0	0	0	0	25	0	25	0	0		
R96	Other sudden death, cause unknown	0	0	4	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	3	7	0	0		
R98	Unattended death	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	1	0		
R99	Other ill-defined and unspecified causes of mortality	0	0	0	1	1	0	0	0	0	1	0	0	0	1	0	0	0	0	1	3	2	5	0	0			
S00	Superficial injury of head	0	0	0	0	0	1	1	2	0	1	0	0	0	0	1	1	0	0	0	2	2	7	9	0	0		
S01	Open wound of head	0	0	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0		
S01.8	Open wound of other parts of head	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0		
S01.9	Open wound of head, part unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0		
S02	Fracture of skull and facial bones	0	0	0	1	3	1	0	1	0	2	1	2	1	4	1	4	2	1	0	1	8	17	25	0	1		
S02.0	Fracture of vault of skull	0	0	0	0	0	1	0	1	0	0	0	3	0	0	0	0	0	0	0	0	5	5	0	0	0		
S02.1	Fracture of base of skull	0	0	0	0	0	0	2	0	0	1	1	2	1	0	0	2	1	0	0	4	7	11	0	0			
S02.2	Fracture of nasal bones	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	2	2	0	0	0		
S02.4	Fracture of malar and maxillary bones	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	0	0		
S02.6	Fracture of mandible	0	0	0	0	0	0	0	1	1	1	1	5	0	2	1	1	1	2	0	0	4	12	16	0	0		

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
S03	Dislocation, sprain and strain of joints and ligaments of head	0	0	1	1	0	0	0	0	1	1	0	0	0	0	0	0	0	1	0	0	2	3	5	0	0		
S05	Injury of eye and orbit	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	1	1	2	3	0	0	
S06	Intracranial injury	0	0	0	2	1	2	5	1	0	1	2	1	1	2	2	4	0	6	5	4	16	23	39	0	0		
S06.4	Epidural haemorrhage	0	0	0	1	0	0	3	4	0	4	1	12	1	8	0	9	0	6	0	3	5	47	52	0	1		
S06.5	Traumatic subdural haemorrhage	0	0	0	1	1	1	1	0	0	1	0	3	4	4	1	4	1	5	4	13	12	31	43	1	2		
S07	Crushing injury of head	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	1	1	3	1	4	0	0			
S09	Other and unspecified injuries of head	0	0	4	5	10	6	30	59	13	30	38	68	38	51	47	41	22	29	18	29	220	318	538	1	1		
S09.9	Unspecified injury of head	0	0	0	2	0	7	11	21	5	8	6	37	9	14	4	20	4	16	5	7	44	132	176	1	7		
S10	Superficial injury of neck	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	1	0	0	
S12	Fracture of neck	0	0	0	0	0	0	2	2	1	3	8	3	1	3	4	5	4	3	4	8	24	27	51	0	0		
S12.8	Fracture of other parts of neck	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	
S12.9	Fracture of neck, part unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	
S19	Other and unspecified injuries of neck	0	0	0	0	0	2	1	0	0	0	0	3	0	3	1	0	0	0	0	0	2	8	10	0	1		
S20	Superficial injury of thorax	0	0	0	0	0	2	1	3	2	0	2	6	3	10	1	11	4	7	5	12	18	51	69	0	1		
S21	Open wound of thorax	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0
S21.9	Open wound of thorax, part unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
S22	Fracture of rib(s), sternum and thoracic spine	0	0	0	0	0	0	1	0	0	1	2	1	3	0	1	4	0	3	6	9	13	22	0	0	0		
S22.3	Fracture of rib	0	0	0	0	0	0	0	0	0	1	1	0	1	2	8	3	9	4	9	10	28	38	0	0	0		
S22.4	Multiple fractures of ribs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	
S27	Injury of other and unspecified intrathoracic organs	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	1	2	1	4	5	0	0	0	
S27.3	Other injuries of lung	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	0	
S29.9	Unspecified injury of thorax	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0
S30	Superficial injury of abdomen, lower back and pelvis	0	0	0	0	2	0	10	0	3	3	7	0	6	4	3	3	1	0	1	12	31	43	1	2	0	0	
S30.2	Contusion of external genital organs	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	1	1	2	0	0	0	
S30.7	Multiple superficial injuries of abdomen, lower back and pelvis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	
S31	Open wound of abdomen, lower back and pelvis	0	0	0	0	0	0	1	0	1	0	0	0	1	0	1	1	0	0	0	0	4	1	5	0	1	0	
S31.4	Open wound of vagina and vulva	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	
S32	Fracture of lumbar spine and pelvis	0	0	0	0	0	0	0	0	1	2	1	1	1	0	0	1	1	0	0	4	4	8	0	0	0	0	
S32.4	Fracture of acetabulum	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	2	2	0	0	0	
S32.7	Multiple fractures of lumbar spine and pelvis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	
S32.8	Fracture of other and unspecified parts of lumbar spine and pelvis	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	1	0	0	1	3	4	0	0	0	
S33	Dislocation, sprain and strain of joints and ligaments of lumbar spine and pelvis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	1	2	0	0	0	
S36.4	Injury of small intestine	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
S36.6	Injury of rectum	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0	
S36.8	Injury of other intra-abdominal organs	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
S37	Injury of urinary and pelvic organs	0	0	1	0	0	0	2	0	0	2	2	2	1	1	0	0	0	1	0	7	5	12	0	0	0	0	
S37.1	Injury of ureter	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	
S37.3	Injury of urethra	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	
S37.7	Injury of multiple pelvic organs	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	1	0	0	
S38.2	Traumatic amputation of external genital organs	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	2	2	0	0	0	
S39	Other and unspecified injuries of abdomen, lower back and pelvis	0	0	0	0	0	0	0	1	1	1	0	0	1	0	0	0	0	1	0	3	2	5	0	0	0	0	
S39.0	Injury of muscle and tendon of abdomen, lower back and pelvis	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	
S39.9	Unspecified injury of abdomen, lower back and pelvis	0	0	0	0	0	0	2	1	1	2	2	5	4	3	1	0	0	1	0	0	10	12	22	0	0	0	
S40	Superficial injury of shoulder and upper arm	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	2	0	0	0	
S41	Open wound of shoulder and upper arm	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
S42	Fracture of shoulder and upper arm	0	0	0	0	10	13	37	91	6	17	13	15	8	13	5	7	3	5	11	5	93	166	259	0	0	0	
S42.1	Fracture of scapula	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2	2	0	0	0	0	
S42.3	Fracture of shaft of humerus	0	0	0	3	5	3	29	65	1	8	3	7	1	2	4	8	1	2	6	3	50	101	151	0	0	0	
S42.4	Fracture of lower end of humerus	0	0	0	0	0	0	1	1	0	1	0	0	0	0	0	0	0	0	2	0	3	3	6	0	0	0	
S42.9	Fracture of shoulder girdle, part unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	
S43	Dislocation, sprain and strain of joints and ligaments of shoulder girdle	0	0	0	0	0	0	1	3	0	0	1	5	0	0	0	2	1	0	2	2	5	12	17	0	0	0	
S47	Crushing injury of shoulder and upper arm	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	
S50	Superficial injury of forearm	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	0	

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
S52.1	Fracture of upper end of radius	0	0	0	0	0	0	0	2	1	0	0	1	2	2	0	0	0	0	0	0	3	5	8	0	0		
S52.2	Fracture of shaft of ulna	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	1	0	1	1	0	2	4	6	0	0		
S52.3	Fracture of shaft of radius	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0		
S52.5	Fracture of lower end of radius	0	0	0	0	0	0	0	1	0	0	1	0	0	1	0	1	0	0	1	0	2	3	5	0	0		
S52.6	Fracture of lower end of both ulna and radius	0	0	0	0	0	0	0	2	1	0	0	2	0	2	0	1	0	1	0	0	1	8	9	0	0		
S52.7	Multiple fractures of forearm	0	0	0	0	1	0	1	3	4	1	1	3	1	1	2	1	0	1	1	0	11	10	21	0	0		
S52.8	Fracture of other parts of forearm	0	0	0	0	0	0	5	25	3	14	5	9	5	5	7	10	1	5	5	6	31	74	105	0	0		
S52.9	Fracture of forearm, part unspecified	0	0	0	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	1	1	3	4	0	0		
S53	Dislocation, sprain and strain of joints and ligaments of elbow	0	0	0	0	0	0	0	4	2	0	0	0	0	1	0	1	0	0	0	2	2	8	10	0	0		
S53.1	Dislocation of elbow, unspecified	0	0	1	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	3	0	3	0	0		
S58.9	Traumatic amputation of forearm, level unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0		
S59.9	Unspecified injury of forearm	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
S60	Superficial injury of wrist and hand	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0		
S60.8	Other superficial injuries of wrist and hand	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
S61	Open wound of wrist and hand	0	0	0	0	0	1	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	4	4	0	0		
S62	Fracture at wrist and hand level	0	0	0	1	11	8	44	118	5	16	10	17	9	8	11	6	15	6	18	13	123	193	316	0	0		
S62.6	Fracture of other finger	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	0	0	0	0	0	2	1	3	0	0		
S62.7	Multiple fractures of fingers	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0		
S62.8	Fracture of other and unspecified parts of wrist and hand	0	0	0	0	0	1	1	1	0	1	0	1	1	1	1	0	0	3	6	7	9	15	24	1	0		
S63	Dislocation, sprain and strain of joints and ligaments at wrist and hand level	0	0	0	0	0	0	0	0	0	1	0	1	0	1	1	0	0	0	0	0	1	3	4	0	0		
S63.1	Dislocation of finger	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
S67	Crushing injury of wrist and hand	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	2	2	0	0		
S68	Traumatic amputation of wrist and hand	0	0	0	0	1	2	1	0	6	0	3	8	1	0	0	1	0	0	0	11	12	23	0	0			
S68.1	Traumatic amputation of other single finger (complete)(partial)	0	0	0	0	0	0	1	1	1	0	1	0	0	0	0	0	1	1	1	2	5	7	0	0			
S68.9	Traumatic amputation of wrist and hand, level unspecified	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			
S69	Other and unspecified injuries of wrist and hand	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0			
S71	Open wound of hip and thigh	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
S71.7	Multiple open wounds of hip and thigh	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	2	2	0	1		
S72	Fracture of femur	6	5	4	6	9	42	37	118	32	31	33	14	14	37	7	20	19	23	48	41	209	337	546	1	2		
S72.0	Fracture of neck of femur	0	0	0	0	0	1	1	1	0	1	0	0	0	0	0	0	1	0	0	0	2	3	5	0	0		
S72.2	Subtrochanteric fracture	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
S72.3	Fracture of shaft of femur	0	0	0	0	2	2	12	1	5	0	10	0	5	1	3	0	0	3	4	7	41	48	0	0			
S72.4	Fracture of lower end of femur	0	0	0	0	0	0	2	0	0	0	0	1	0	0	1	0	0	0	0	1	3	4	0	0			
S72.9	Fracture of femur, part unspecified	0	0	2	2	4	10	13	33	6	11	5	12	5	18	2	7	10	11	43	30	90	134	224	0	0		
S73	Dislocation, sprain and strain of joint and ligaments of hip	0	0	0	0	2	0	2	5	0	1	1	2	1	2	0	1	3	0	1	1	10	12	22	0	0		
S74.9	Injury of unspecified nerve at hip and thigh level	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
S79	Other and specified injuries of hip and thigh	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0			
S79.9	Unspecified injury of hip and thigh	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
S80	Superficial injury of lower leg	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
S81	Open wound of lower leg	0	0	0	0	1	0	0	1	2	0	1	0	0	0	0	0	0	0	0	0	2	3	5	0	0		
S81.9	Open wound of lower leg, part unspecified	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
S82	Fracture of lower leg, including ankle	0	0	0	0	6	23	37	63	18	43	12	21	19	26	12	32	20	32	10	20	134	260	394	0	0		
S82.0	Fracture of patella	0	0	0	0	0	0	1	0	0	0	0	0	0	0	3	0	1	0	1	0	6	6	0	0			
S82.1	Fracture of upper end of tibia	0	0	0	0	0	0	1	4	1	6	1	11	11	10	5	10	1	3	1	5	21	49	70	0	0		
S82.2	Fracture of shaft of tibia	0	0	0	0	1	0	3	3	1	2	0	5	2	3	0	4	0	1	2	0	9	18	27	0	0		
S82.4	Fracture of fibula alone	0	0	0	0	0	0	0	0	0	0	0	2	0	0	3	1	0	0	0	3	3	6	0	0			
S82.8	Fractures of other parts of lower leg	0	0	0	0	1	2	0	0	2	2	2	2	2	2	0	1	0	0	3	1	9	9	18	0	0		
S82.9	Fracture of lower leg, part unspecified	0	0	0	1	0	0	0	0	2	0	4	2	0	1	0	0	0	1	1	4	8	12	0	0			
S83	Dislocation, sprain and strain of joints and ligaments of knee	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	1	2	0	0	3	3	6	0	0			
S83.1	Dislocation of knee	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	2	0	0			
S84	Injury of nerves at lower leg level	0	0	0	0	1	0	2	0	2	0	0	0	0	2	1	0	1	0	0	2	7	9	0	0			
S85.9	Injury of unspecified blood vessel at lower leg level	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0			
S86	Injury of muscle and tendon at lower leg level	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
S87	Crushing injury of lower leg	0	0	0	0	0	0	0	0	2	0	0	1	0	0	0	0	0	0	0	1	2	3	0	0			
S88	Traumatic amputation of lower leg	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0			
S89	Other and unspecified injuries of lower	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
S90.9	Superficial injury of ankle and foot, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
S91	Open wound of ankle and foot	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0
S92	Fracture of foot, except ankle	0	0	0	0	0	0	1	4	1	7	3	1	6	3	2	1	2	3	1	2	16	21	37	0	0	0	
S92.2	Fracture of other tarsal bone(s)	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	0	
S92.5	Fracture of other toe	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0	
S92.9	Fracture of foot, unspecified	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	1	0	0	0	3	3	0	0	0	
S93	Dislocation, sprain and strain of joints and ligaments at ankle and foot level	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	2	2	0	0	0	
S93.2	Rupture of ligaments at ankle and foot level	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0	
S97	Crushing injury of ankle and foot	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	
S97.8	Crushing injury of other parts of ankle and foot	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	2	2	0	0	0	
S98.1	Traumatic amputation of one toe	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
S99.9	Unspecified injury of ankle and foot	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	
T01	Open wounds involving multiple body regions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0	
T01.3	Open wounds involving multiple regions of lower limb(s)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0	
T01.8	Open wounds involving other combinations of body regions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	1	0	
T01.9	Multiple open wounds, unspecified	0	0	0	0	0	0	0	0	0	0	3	4	0	3	5	1	0	0	0	0	8	8	16	0	0	0	
T03	Dislocations, sprains and strains involving multiple body regions	0	1	0	0	0	1	5	4	2	1	2	4	2	5	0	2	0	0	2	1	13	19	32	0	0	0	
T04	Crushing injuries involving multiple body regions	0	0	0	0	0	2	0	0	1	0	0	1	0	0	1	0	0	0	0	0	2	3	5	0	0	0	
T05.8	Traumatic amputations involving other combinations of body regions	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	0	
T06	Other injuries involving multiple body regions, not elsewhere classified	0	0	0	0	0	0	3	2	0	2	0	0	3	3	0	0	0	0	1	7	7	14	0	0	0	0	
T06.2	Injuries of nerves involving multiple body regions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	0	
T07	Unspecified multiple injuries	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	
T08	Fracture of spine, level unspecified	0	0	0	0	0	1	1	0	0	0	1	2	2	1	1	1	0	1	1	3	6	9	15	0	3	0	
T09	Other injuries of spine and trunk, level unspecified	0	0	0	0	0	0	1	0	0	0	2	0	0	0	0	0	1	1	2	4	3	7	1	0	0	0	
T09.3	Injury of spinal cord, level unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	3	3	0	0	0	
T09.4	Injury of unspecified nerve, spinal nerve root and plexus of trunk	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	2	0	0	0	
T09.9	Unspecified injury of trunk, level unspecified	0	0	0	0	0	1	0	0	0	0	1	0	0	0	2	0	0	0	0	0	4	4	0	0	0		
T10	Fracture of upper limb, level unspecified	0	1	0	0	0	0	1	1	0	1	4	2	0	4	3	2	1	2	2	4	11	17	28	0	0	0	
T11	Other injuries of upper limb, level unspecified	0	0	0	0	0	0	1	0	0	1	1	0	0	0	3	0	0	0	0	1	5	6	0	0	0		
T12	Fracture of lower limb, level unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	0	0		
T14	Injury of unspecified body region	1	5	12	21	84	164	306	555	190	288	310	366	267	309	259	254	204	213	216	257	1849	2412	4261	0	3	0	
T14.0	Superficial injury of unspecified body region	0	0	0	0	0	0	0	7	1	2	6	0	3	5	2	3	1	2	0	5	13	24	37	0	0	0	
T14.1	Open wound of unspecified body region	0	0	0	0	2	1	2	8	4	8	11	9	14	4	10	6	3	6	7	10	53	52	105	0	0	0	
T14.2	Fracture of unspecified body region	0	1	0	1	5	4	13	60	11	27	16	41	17	41	23	42	11	28	22	26	118	271	389	0	1	0	
T14.3	Dislocation, sprain and strain of unspecified body region	0	0	1	0	1	0	0	4	3	6	1	0	2	5	1	4	1	1	4	4	14	24	38	0	1	0	
T14.4	Injury of nerve(s) of unspecified body region	0	0	4	5	2	6	4	4	0	0	0	0	0	0	0	0	0	0	0	0	10	15	25	0	0	0	
T14.5	Injury of blood vessel(s) of unspecified body region	0	0	3	0	4	1	1	3	0	0	0	1	0	0	0	0	0	0	0	0	8	5	13	0	0	0	
T14.6	Injury of muscles and tendons of unspecified body region	0	0	0	0	0	0	1	2	0	1	0	3	3	1	1	1	0	3	4	2	9	13	22	0	0	0	
T14.7	Crushing injury and traumatic amputation of unspecified body region	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2	2	0	0	0	
T14.8	Other injuries of unspecified body region	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0	0	0	0	3	3	0	0	0	0	
T14.9	Injury, unspecified	0	0	0	0	2	13	16	35	16	39	34	50	31	59	21	34	14	30	17	18	151	278	429	0	1	0	
T15	Foreign body on external eye	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	
T16	Foreign body in ear	0	0	0	0	1	1	1	2	0	0	1	0	0	0	0	1	0	0	0	3	4	7	0	0	0	0	
T17	Foreign body in respiratory tract	2	2	0	1	4	3	3	9	1	3	3	1	2	1	2	3	0	2	3	7	20	32	52	2	2	0	
T17.1	Foreign body in nostril	0	0	0	0	1	2	0	0	0	0	0	0	2	0	1	0	0	0	2	2	6	4	10	0	0	0	
T17.2	Foreign body in pharynx	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	1	0	0	1	2	3	0	0	0	0	
T17.9	Foreign body in respiratory tract, part unspecified	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	
T18	Foreign body in alimentary tract	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	1	0	4	4	0	0	0	
T18.2	Foreign body in stomach	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0	
T18.3	Foreign body in small intestine	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	1	0	3	3	0	0	0	

ICD Code	Diseases	Inpatient Morbidity																				Grand Total	Total Deaths				
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs			Total		Female	Male	
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male			
T18.9	Foreign body in alimentary tract, part unspecified	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0
T19	Foreign body in genitourinary tract	0	0	0	1	0	1	2	12	1	3	0	2	1	2	1	5	1	8	2	2	8	36	44	0	0	
T19.2	Foreign body in vulva and vagina	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
T19.8	Foreign body in other and multiple parts of genitourinary tract	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	2	0	0
T20	Burn and corrosion of head and neck	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
T20.2	Burn of second degree of head and neck	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0	0
T21.1	Burn of first degree of trunk	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
T23	Burn and corrosion of wrist and hand	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
T30	Burn and corrosion, body region unspecified	4	3	46	80	148	235	137	161	48	51	81	88	50	40	38	65	23	22	44	25	619	770	1389	10	7	
T30.0	Burn of unspecified body region, unspecified degree	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0
T31	Burns classified according to extent of body surface involved	0	0	1	2	1	0	1	2	1	0	3	3	1	0	2	0	2	1	0	2	12	10	22	0	2	0
T31.1	Burns involving 10-19% of body surface	0	0	0	0	4	3	0	0	8	6	13	16	15	9	2	4	7	2	7	4	56	44	100	18	3	0
T31.2	Burns involving 20-29% of body surface	0	0	0	0	3	2	1	0	2	1	2	0	2	0	1	1	0	0	0	2	11	6	17	1	0	0
T31.3	Burns involving 30-39% of body surface	0	0	0	0	0	1	0	0	1	0	5	0	2	0	2	0	0	1	2	0	12	2	14	2	0	0
T31.4	Burns involving 40-49% of body surface	0	0	0	0	0	2	0	1	0	0	0	0	2	1	0	0	0	0	2	0	4	4	8	2	0	0
T31.5	Burns involving 50-59% of body surface	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	0	0	0	0	2	1	3	1	0	0
T32	Corrosions classified according to extent of body surface involved	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	0	2	1	3	0	0	0	0
T35	Frostbite involving multiple body regions and unspecified frostbite	0	2	11	21	1	3	0	4	0	0	0	0	0	0	0	0	0	0	0	0	12	30	42	0	0	0
T36	Poisoning by systemic antibiotics	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
T36.3	Macrolides	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	0	0
T39	Poisoning by nonopioid analgesics, antipyretics and antirheumatics	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0
T40	Poisoning by narcotics and psychodysleptics [hallucinogens]	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0
T42	Poisoning by antiepileptic, sedative-hypnotic and antiparkinsonism drugs	0	0	0	0	0	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	0	0
T42.4	Benzodiazepines	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0
T44	Poisoning by drugs primarily affecting the autonomic nervous system	0	0	0	0	0	0	0	1	0	0	1	1	2	0	8	2	9	6	53	40	73	50	123	0	0	0
T45	Poisoning by primarily systemic and haematological agents, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	1	1	2	0	0	0
T45.1	Antineoplastic and immunosuppressive drugs	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0
T45.2	Vitamins, not elsewhere classified	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
T46.9	Other and unspecified agents primarily affecting the cardiovascular system	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0
T47.1	Other antacids and anti-gastric-secretion drugs	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0	0
T47.3	Saline and osmotic laxatives	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0
T50	Poisoning by diuretics and other and unspecified drugs, medicaments and biological substances	0	0	0	1	2	1	0	1	1	0	2	1	1	0	1	1	0	0	4	0	11	5	16	0	0	0
T50.9	Other and unspecified drugs, medicaments and biological substances	0	0	0	0	0	0	0	0	3	1	4	3	1	0	1	0	0	0	0	0	9	4	13	0	0	0
T51.3	Fusel oil	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0	0
T52	Toxic effect of organic solvents	0	0	2	1	10	16	0	4	2	3	0	0	1	0	1	0	0	0	0	0	16	24	40	0	0	0
T52.0	Petroleum products	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
T52.2	Homologues of benzene	0	0	1	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	2	1	3	0	0	0
T52.3	Glycols	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
T52.9	Organic solvent, unspecified	0	0	0	0	3	1	3	1	13	5	19	20	13	3	3	3	2	3	1	1	57	37	94	1	0	0
T54.9	Corrosive substance, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	1	1	2	0	0	0
T55	Toxic effect of soaps and detergents	0	0	0	0	0	0	1	0	2	0	2	4	0	0	0	1	0	1	0	0	5	6	11	0	0	0
T56.5	Zinc and its compounds	0	0	0	0	0	0	0	0	3	0	6	0	0	1	0	0	0	1	1	0	10	2	12	0	0	0
T56.6	Tin and its compounds	0	0	0	0	0	0	1	1	5	7	10	0	6	0	1	1	0	0	0	0	23	9	32	0	0	0
T57	Toxic effect of other inorganic substances	0	0	0	0	0	0	0	0	3	2	9	3	7	2	2	0	0	3	0	0	21	10	31	2	3	0
T60	Toxic effect of pesticides	0	1	0	1	2	0	5	3	35	20	36	30	14	18	12	12	4	6	4	5	112	96	208	0	2	0
T60.1	Halogenated insecticides	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	1	0	0	0	0	3	1	4	0	0	0
T60.3	Herbicides and fungicides	0	0	0	0	0	0	0	3	0	0	1	0	0	0	0	0	0	0	0	0	1	3	4	0	0	0

ICD Code	Diseases	Inpatient Morbidity																								Grand Total	Total Deaths	
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs		60+ Yrs		Total		Female	Male			
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
T60.4	Rodenticides	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	3	0	3	0	0	
T60.8	Other pesticides	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
T60.9	Pesticide, unspecified	0	0	0	0	0	1	1	0	3	0	3	0	1	0	0	0	1	0	1	0	10	1	11	0	0		
T61	Toxic effect of noxious substances eaten as seafood	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	1	1	2	0	0		
T62	Toxic effect of other noxious substances eaten as food	0	0	0	4	18	22	31	34	15	16	23	16	11	13	6	3	9	8	1	3	114	119	233	0	0		
T62.2	Other ingested (parts of) plant(s)	0	0	0	0	0	0	0	0	1	0	3	0	1	0	0	1	0	0	0	0	5	1	6	0	0		
T62.9	Noxious substance eaten as food, unspecified	0	0	0	0	1	2	0	0	0	1	1	0	0	0	0	0	0	0	0	0	2	3	5	0	1		
T63	Toxic effect of contact with venomous animals	0	0	0	0	5	3	19	37	23	25	46	26	26	17	16	13	14	11	8	11	157	143	300	1	6		
T63.0	Snake venom	0	0	0	0	0	0	0	2	2	3	1	0	0	0	0	0	0	1	0	0	3	6	9	0	0		
T63.2	Venom of scorpion	0	0	0	0	0	0	0	0	1	0	1	1	1	0	0	1	0	0	0	0	3	2	5	0	0		
T63.3	Venom of spider	1	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	2	1	3	0	0		
T63.4	Venom of other arthropods	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	1	2	3	0	0		
T63.9	Toxic effect of contact with unspecified venomous animal	0	0	0	0	0	0	0	1	0	0	1	0	0	0	2	0	0	0	0	0	3	1	4	0	0		
T65	Toxic effect of other and unspecified substances	0	1	9	8	25	64	40	26	187	76	311	108	150	89	94	65	37	36	13	33	866	506	1372	5	9		
T65.3	Nitroderivatives and aminoderivatives of benzene and its homologues	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0		
T65.9	Toxic effect of unspecified substance	0	0	0	0	1	1	2	0	31	12	54	18	29	13	11	6	7	5	2	6	137	61	198	4	2		
T68	Hypothermia	6	7	0	13	0	0	0	0	1	1	1	0	3	2	16	2	2	0	1	0	30	25	55	0	1		
T71	Asphyxiation	0	0	0	0	0	0	0	0	2	1	0	0	2	0	1	0	0	0	0	0	5	1	6	0	0		
T74	Maltreatment syndromes	0	0	0	0	0	0	0	1	4	0	2	3	2	1	0	0	1	0	0	0	9	5	14	0	0		
T74.2	Sexual abuse	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0		
T75	Effects of other external causes	0	0	0	0	1	2	3	3	5	19	9	4	3	19	1	5	0	2	2	0	24	54	78	0	0		
T75.1	Drowning and nonfatal submersion	0	1	0	3	0	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	6	7	0	0		
T75.3	Motion sickness	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0		
T75.4	Effects of electric current	0	0	0	0	0	0	0	0	1	1	1	2	5	0	2	1	0	0	0	0	9	4	13	0	0		
T78	Adverse effects, not elsewhere classified	1	2	1	0	2	4	6	5	4	4	12	4	8	2	3	4	1	3	3	1	41	29	70	0	0		
T78.2	Anaphylactic shock, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	1	2	0	0		
T78.3	Angioneurotic oedema	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0		
T78.4	Allergy, unspecified	0	0	0	0	1	1	3	2	0	0	1	0	0	1	1	0	0	0	0	0	6	4	10	0	0		
T79	Certain early complications of trauma, not elsewhere classified	0	1	1	3	6	9	15	26	13	7	48	10	25	24	21	13	13	14	17	24	159	131	290	1	2		
T79.0	Air embolism (traumatic)	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0		
T79.2	Traumatic secondary and recurrent haemorrhage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0		
T79.3	Post-traumatic wound infection, not elsewhere classified	0	0	0	0	1	1	1	3	2	0	5	0	0	1	0	2	0	2	1	2	10	11	21	0	0		
T79.4	Traumatic shock	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	1	1	0	0	2	2	5	7	0	0		
T79.9	Unspecified early complication of trauma	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0		
T81	Complications of procedures, not elsewhere classified	0	0	0	0	1	0	0	2	5	0	26	3	5	2	4	0	0	0	0	1	41	8	49	0	0		
T81.2	Accidental puncture and laceration during a procedure, not elsewhere classified	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	2	0	0	1	3	4	0	0		
T81.4	Infection following a procedure, not elsewhere classified	0	0	0	0	1	0	3	5	3	2	18	1	8	4	2	9	2	3	0	2	37	26	63	0	0		
T81.5	Foreign body accidentally left in body cavity or operation wound following a procedure	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0		
T81.8	Other complications of procedures, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0		
T81.9	Unspecified complication of procedure	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
T82	Complications of cardiac and vascular prosthetic devices, implants and grafts	0	0	0	0	1	13	14	17	12	4	1	0	2	1	0	0	0	1	0	0	30	36	66	0	0		
T83	Complications of genitourinary prosthetic devices, implants and grafts	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1	0	0		
T84	Complications of internal orthopaedic prosthetic devices, implants and grafts	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0		
T85	Complications of other internal prosthetic devices, implants and grafts	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0		
T87	Complications peculiar to reattachment and amputation	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	2	0	2	0	0		
T88	Other complications of surgical and medical care, not elsewhere classified	0	0	0	0	0	0	3	3	3	1	4	1	2	0	2	3	0	1	0	1	14	10	24	0	1		
T88.7	Unspecified adverse effect of drug or medicament	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0		

ICD Code	Diseases	Inpatient Morbidity																		Grand Total	Total Deaths						
		<28 days		29 days - 1 Yrs		1 - 4 Yrs		5 - 14 Yrs		15 - 19 Yrs		20 - 29 Yrs		30 - 39 Yrs		40 - 49 Yrs		50 - 59 Yrs			60+ Yrs		Total		Female	Male	
		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male	Female	Male			
T94	Sequelae of injuries involving multiple and unspecified body regions	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0		
T96	Sequelae of poisoning by drugs, medicaments and biological substances	0	0	0	0	0	1	0	1	1	0	2	0	3	0	0	1	0	0	0	1	6	4	10	0	0	
T98	Sequelae of other and unspecified effects of external causes	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	1	2	0	0	
V29	Motorcycle rider injured in other and unspecified transport accidents	0	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	0	0	0	1	2	3	0	0	
V31	Occupant of three-wheeled motor vehicle injured in collision with pedal cycle	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	1	2	0	0	
V39	Occupant of three-wheeled motor vehicle injured in other and unspecified transport accidents	0	0	0	0	0	0	0	0	4	0	3	0	0	1	0	0	2	1	2	3	11	5	16	0	0	
V43.1	Car occupant injured in collision with car, pick-up truck or van - Passenger injured in nontraffic accident	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	6	0	0		
V59.9	Occupant [any] of pick-up truck or van injured in unspecified traffic accident	0	0	0	0	0	0	0	0	0	1	1	1	1	0	0	2	0	0	1	0	3	4	7	0	0	
V89	Motor- or nonmotor-vehicle accident, type of vehicle unspecified	0	1	0	15	15	25	56	88	58	144	88	230	93	191	74	152	58	77	63	57	505	980	1485	3	4	
V89.2	Person injured in unspecified motor-vehicle accident, traffic	0	0	0	0	0	0	0	1	1	1	0	0	1	1	0	0	0	0	0	2	3	5	0	0		
V99	Unspecified transport accident	0	0	0	0	0	0	0	0	0	1	0	2	0	1	0	2	0	1	0	1	0	8	8	0	0	
W14	Fall from tree	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	1	1	2	0	0	
W19	Unspecified fall	1	0	3	4	28	35	96	136	31	47	80	49	61	44	45	54	42	41	59	49	446	459	905	2	0	
W50	Hit, struck, kicked, twisted, bitten or scratched by another person	0	0	0	0	0	0	0	1	0	1	0	0	0	0	1	0	0	0	0	0	1	2	3	0	0	
W54	Bitten or struck by dog	0	1	0	3	3	4	7	14	3	6	5	4	3	4	2	6	4	6	6	4	33	52	85	0	0	
W55	Bitten or struck by other mammals	0	0	0	0	0	0	1	0	0	0	1	0	0	3	0	1	0	0	1	1	2	6	8	0	1	
W57	Bitten or stung by nonvenomous insect and other nonvenomous arthropods	0	0	0	1	3	3	14	14	13	14	9	15	9	10	13	6	5	6	6	15	72	84	156	0	0	
W59	Bitten or crushed by other reptiles	0	0	0	0	1	1	28	28	41	33	59	46	56	32	44	27	35	38	32	31	296	236	532	0	0	
W74	Unspecified drowning and submersion	0	0	0	0	0	2	1	0	0	0	0	0	1	0	0	0	0	1	0	0	2	3	5	0	0	
W76	Other accidental hanging and strangulation	0	0	0	0	0	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	2	1	3	0	0	
W77	Threat to breathing due to cave-in, falling earth and other substances	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
W87	Exposure to unspecified electric current	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	1	0	0	0	2	1	3	0	0	
X09	Exposure to unspecified smoke, fire and flames	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	2	1	3	0	0	
X11	Contact with hot tap-water	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
X20	Contact with venomous snakes and lizards	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
X44	Accidental poisoning by and exposure to other and unspecified drugs, medicaments and biological substances	0	0	0	0	0	0	4	0	0	3	0	0	0	0	2	0	0	0	1	1	7	4	11	0	0	
X59	Exposure to unspecified factor	0	0	0	0	0	3	47	31	4	23	65	71	51	50	44	43	33	26	13	0	257	247	504	1	1	
X61	Intentional self-poisoning by and exposure to antiepileptic, sedative-hypnotic, antiparkinsonism and psychotropic drugs, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
X68	Intentional self-poisoning by and exposure to pesticides	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	0	
X70	Intentional self-harm by hanging, strangulation and suffocation	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	2	0	1	0	0	1	3	4	0	0	
X78	Intentional self-harm by sharp object	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0
X84	Intentional self-harm by unspecified means	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	
X86	Assault by corrosive substance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0	
Y00	Assault by blunt object	0	0	0	0	0	0	0	0	0	0	2	0	0	0	1	0	1	0	0	0	4	0	4	0	0	
Y04	Assault by bodily force	0	0	0	1	3	4	18	48	76	122	255	231	220	271	196	241	93	98	53	29	914	1045	1959	0	0	
Y05	Sexual assault by bodily force	0	0	0	0	0	1	0	1	0	2	0	1	0	0	0	0	0	0	0	0	5	0	5	0	0	
Y06	Neglect and abandonment	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
Y08	Assault by other specified means	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	1	0	0	
Y09	Assault by unspecified means	0	0	0	0	0	1	0	2	6	3	13	10	9	12	3	6	0	4	0	3	31	41	72	0	0	
Y15	Poisoning by and exposure to alcohol, undetermined intent	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	









# Hospital Laboratory Services

Sheet 3 of 8  
Virology

District Code	District Name	Received Reports	HIV		HCV		Western Blot		HBsAg		HEV		CD4 count	Viral Load	Others	
			Total	+Ve	Total	+Ve	Total	+Ve	Total	+Ve	Total	+Ve				
			Mountain	207	1936	20	497	0	0	1	1892	32				0
Birat	678	53119	1128	11408	331	0	29	0	41109	436	12	0	0	2024	0	182
Terai	432	32531	289	7958	46	86	315	0	32826	193	299	0	0	4236	0	739
National Total	1317	87986	1437	19863	377	115	316	0	75827	661	311	0	0	6270	0	921
1 Bhojpur	12	128	0	31	1	0	0	0	284	17	0	0	0	0	0	0
2 Dhanuuta	12	661	1	0	0	0	0	0	642	0	0	0	0	0	0	0
3 Ilam	12	989	0	28	0	0	0	0	1126	11	0	0	0	0	0	0
3.1 Dr-MBPCH	12	72	0	39	0	0	0	0	96	0	0	0	0	0	0	0
4 Mechi Zonal	12	2762	19	0	0	86	0	0	2417	4	0	0	0	0	0	0
AMDA Hospital	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.2 Life Line	12	3710	1	224	0	0	0	0	3814	9	0	0	0	0	0	0
4.4 Bajrang Medical and Diagnostic Center	5	45	0	10	0	0	0	0	47	0	0	0	0	0	0	0
AMDA Mechi Hospital	7	4	0	0	0	0	0	0	4	0	0	0	0	0	0	0
Kankai Hospital	10	857	1	831	5	0	0	0	958	3	0	0	0	0	0	0
Om International Mechi	5	443	0	0	0	0	0	0	443	0	0	0	0	0	0	0
Danak Hospital and Research Center	5	5	0	5	0	0	0	0	11	1	0	0	0	0	0	0
Mechi Model Hospital & Research Center	12	132	0	0	0	0	0	0	30	0	0	0	0	0	0	0
Om Sai Pathabshara Hospital	12	1477	0	35	0	0	0	0	635	0	0	0	0	0	0	170
Kanchanjanga Hospital	12	491	0	29	0	0	0	0	214	0	0	0	0	0	0	2
5 Khotang	12	166	0	31	0	0	0	0	97	1	0	0	0	0	0	0
Morang Co-operative Hospital	6	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0
Green Cross Hospital & Research Center	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Biratnagar City Asptal, Biratnagar	3	0	0	0	0	0	0	0	14	2	0	0	0	0	0	0
6 Koshi Zonal	12	1038	49	686	32	0	315	0	3451	71	0	0	0	0	0	0
6.1 Rangeli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6.2 Birat Nursing Home	12	198	4	185	6	0	0	0	337	18	0	0	0	0	0	0
Neuro Hospital	12	1214	0	1219	0	0	0	0	1219	0	0	0	0	0	0	0
Aawadnaryan Hospital	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7 Okhaldhunga UMN	12	402	0	92	0	0	0	0	397	0	0	0	0	0	0	5
Rumjhat Hospital	12	1	0	0	0	0	0	0	3	0	0	0	0	0	0	0
8 Panchthar	12	23	0	1	0	0	0	0	21	0	0	0	0	0	0	0
9 Sankhuwasabha	12	224	1	0	0	0	0	0	492	6	0	0	0	0	0	0
10 Sagarmatha Zonal	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11 Siraha	12	11	1	0	0	0	0	0	18	2	0	0	0	0	0	0
11.1 Laban	12	178	0	0	0	0	0	0	326	0	0	0	0	0	0	0
Pasang Lhamu Hospital	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12 Solukhumbu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.1 Khunde Hospital	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sunsari Hospital	12	999	0	5	0	0	0	0	60	1	0	0	0	0	0	0
14 Taplejung	12	533	0	117	0	0	0	0	349	5	0	0	0	0	0	0
16.1 Kataru	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15 Tehrathum	12	23	0	0	0	0	0	0	11	0	0	0	0	0	0	0
16 Udayapur	12	91	0	0	0	0	0	0	8	0	0	0	0	0	0	0
Eastern	405	16878	77	3568	44	86	315	0	17672	141	0	0	0	0	0	177
17 Kalaya	11	0	0	0	0	0	0	0	36	0	0	0	0	0	0	9
18 Bhaktapur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19 Bharatpur	12	3999	0	1052	0	0	0	0	4738	0	0	0	0	25	0	7
20 Dhading	12	597	0	0	0	0	0	0	544	0	0	0	0	0	0	0
21 Janakpur Zonal	12	1853	82	29	0	0	0	0	1461	12	0	0	0	178	0	0
22 Jiri	10	199	5	165	0	0	0	0	190	0	0	0	0	0	0	0
23 Bir	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Kanti	10	382	2	0	0	0	0	0	327	0	0	0	0	0	0	0
23.2 Sakrari Tropical and I. D.	11	1038	301	405	75	0	0	0	638	99	0	0	0	0	0	0
23.4 Maternity	12	5912	29	82	7	0	0	0	6092	30	0	0	0	0	0	0
24 Shri Memorial	12	1070	0	36	0	0	0	0	1051	0	0	0	0	0	0	0
24.1 Dhulikhel	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26 Mahotari (PH)	12	0	0	0	0	0	0	0	45	0	0	0	0	0	0	0
27 Hetauda	12	997	0	46	0	0	0	0	1032	0	0	0	0	0	0	0
23.8 Nepal Police Hospital	11	2277	0	597	0	0	0	0	1602	11	7	0	0	0	0	0
International Friendship Children Hospital	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28 Trishuli	12	399	2	2	0	0	0	0	387	5	0	0	0	0	0	0
30 Ramechhap	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Rajmarg samadak Asptal, Malekhu	8	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
Gajuri Asptal Pvt Ltd	10	43	0	20	0	0	0	0	28	0	0	0	0	0	0	0
Shahid Memorial Dhadang Pvt Ltd	10	71	0	11	0	0	0	0	76	0	0	0	0	0	0	0
31 Rasuwa	12	84	0	0	0	0	0	0	42	0	0	0	0	0	0	0
32 Gaur	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33 Sarlahi	9	305	11	0	0	0	0	0	4	0	0	0	0	0	0	0
34 Sindhuli	12	709	175	0	0	0	0	0	89	0	0	0	0	0	0	0
35 Sindhupalchowk	11	39	3	1	0	0	0	0	21	0	0	0	0	0	0	0
Central	288	19074	610	2416	82	0	0	0	18404	157	7	0	0	452	0	16
36 Argakhanchi	6	280	0	39	0	29	0	0	58	0	0	0	0	0	0	0
37 Baglung	11	409	4	250	9	0	0	0	389	0	0	0	0	0	0	0
38 Gorkha	11	1106	11	6	0	0	0	0	66	0	0	0	0	0	0	0
38.1 Amp Pipal UMN	11	320	5	0	0	0	0	0	0	0	0	0	0	0	0	0
Anna-Ba Hospital	4	0	0	0	0	0	0	0	4	0	0	0	0	0	0	0
40 P. Bir	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40.1 Shiva Raj	9	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0
41 Western Regional	12	6503	41	1509	212	0	0	0	6570	31	0	0	0	1095	0	0
41.1 Manipal Teaching	17	3121	15	2733	24	0	0	0	3142	124	5	0	0	0	0	0
42 Lamjung	12	1811	6	7	0	0	0	0	64	0	0	0	0	0	0	0
43 Manang	7	14	1	0	0	0	0	0	15	1	0	0	0	0	0	0
44 Mustang	11	12	0	0	0	0	1	0	46	1	0	0	0	0	0	0
45 Beni	12	375	1	0	0	0	0	0	290	5	0	0	0	0	0	0
46 P. Chandra	10	69	4	0	0	0	0	0	42	1	0	0	0	0	0	5
46.1 Kali Gandaki	11	48	0	46	0	0	0	0	68	0	0	0	0	0	0	0
47 Palpa	12	39	0	0	0	0	0	0	30	0	0	0	0	0	0	1
47.1 Palpa UMN	12	4386	162	1316	0	0	0	0	1358	11	0	0	0	0	0	0
Lumbini Medical College	12	6466	128	295												



**Hospital Laboratory Services**

Sheet 4 of 8  
**PARASITOLOGY**

District Code	District Name	Received Reports	PARASITOLOGY													
			Stool Test	Occult blood	Reaching sugar	Urine test	Bile salts	Bile Pigments	Urobilinogen	Porpho bilinogen	Acetone	Chyle	Serum Analysis	Bence-John's Protein	Specific gravity	Others
Mountain		207	6523	494	82	17955	61	60	47	38	247	38	185	0	38	74
Hill		678	50034	6295	1687	227888	3670	3791	6365	2418	6698	58	1187	292	12736	14227
Terai		432	52252	7692	4645	167988	3047	45	68	319	958	29	879	22	0	804
<b>National Total</b>		<b>1317</b>	<b>108809</b>	<b>14481</b>	<b>6414</b>	<b>413831</b>	<b>6778</b>	<b>3896</b>	<b>6480</b>	<b>2775</b>	<b>7903</b>	<b>125</b>	<b>2251</b>	<b>314</b>	<b>12774</b>	<b>15105</b>
1 Bhojpur		12	865	37	0	2443	0	0	0	0	5	0	2	0	0	0
2 Dhanकुटा		12	449	0	0	1941	0	0	0	0	0	0	3	0	0	10
3 Ilam		12	393	2	696	4832	0	0	0	0	0	0	5	0	0	0
3.1 Dr.MBPCB		12	194	24	0	1104	0	0	0	0	1	3	3	8	1	
4 Mechi Zonal		12	2584	230	0	8231	0	0	0	145	0	0	0	0	7	
4.1 AMDA Hospital		2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.2 Life Line		12	2203	164	0	9979	0	0	0	61	0	6	0	0	0	0
4.4 Injura Medical and Diagnostic Center		5	62	9	0	281	0	0	0	0	0	0	0	0	0	0
Amlda Mechi Hospital		7	0	0	0	88	0	0	0	0	0	0	0	0	0	0
Kankai Hospital		10	2797	926	0	3726	0	0	0	162	0	26	0	0	0	0
Om International Mechi		5	3	0	0	377	0	0	0	0	0	19	0	0	0	0
Injura Hospital and Research Center		5	59	5	0	360	0	0	0	0	0	1	0	0	0	0
Mechi Medical Hospital & Research Center		12	347	3	0	2261	0	0	0	0	0	0	0	0	0	0
Om Sai Paribhara Hospital		12	1569	123	9	8230	0	14	18	0	18	0	0	0	0	151
Kanchanja Hospital		12	1238	10	0	6699	0	0	0	0	0	0	0	0	0	47
5 Khotang		12	748	22	0	2551	0	0	0	0	0	0	9	0	0	0
6 Manang Co-operative Hospital		6	184	0	0	257	0	0	0	0	0	0	0	0	0	0
6.1 Injura City Hospital & Research Center		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6.2 Biratnagar City Hospital, Biratnagar		3	80	6	0	95	0	0	0	0	0	3	0	0	0	0
6 Koshi Zonal		12	7079	1705	205	14133	931	0	22	5	254	27	219	22	0	0
6.1 Rangeli		12	353	0	0	927	0	0	0	0	0	0	0	0	0	0
6.2 Birat Nursing Home		12	1465	570	41	6809	1717	0	0	0	0	0	0	0	0	0
Neuro Hospital		12	2414	555	20	8145	37	0	0	0	0	0	28	0	0	0
Awadnarayan Hospital		6	58	0	0	130	0	0	0	0	0	33	0	0	0	0
7 Okhaldhunga UMN		12	487	53	0	1597	0	0	0	1	0	12	0	0	0	0
Kumjuhar Hospital		12	6	0	0	39	0	0	0	0	0	0	0	0	0	0
8 Panchthar		12	521	10	0	1995	0	0	0	0	0	3	0	0	0	0
9 Sankhuwasabha		12	583	12	0	3505	0	0	0	0	0	5	0	0	74	
10 Sagarmatha Zonal		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11 Siraha		12	225	1	0	654	0	0	0	0	0	0	0	0	0	0
11.1 Lahan		12	615	61	0	2063	0	0	0	0	0	0	0	0	0	0
12 Pasang Lhamu Hospital		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12 Solukhumbu		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.1 Khunde Hospital		11	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sunsari Hospital		12	260	2	0	2862	1	1	0	0	0	0	0	0	0	0
14 Taplejung		12	2343	261	0	3865	2	13	0	0	7	0	12	0	0	0
14.1 Katari		12	217	0	0	451	0	0	0	0	0	0	0	0	0	0
15 Tehrathum		12	323	47	0	1322	0	0	0	1	0	0	0	0	0	0
16 Udayapur		12	463	8	0	797	0	0	0	0	0	0	0	0	0	0
<b>Eastern</b>		<b>405</b>	<b>31167</b>	<b>4846</b>	<b>991</b>	<b>102749</b>	<b>2688</b>	<b>28</b>	<b>40</b>	<b>5</b>	<b>654</b>	<b>28</b>	<b>455</b>	<b>25</b>	<b>8</b>	<b>290</b>
17 Kalaiya		11	31	0	0	853	0	0	0	0	0	0	0	0	0	4
18 Bhaktapur		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19 Bhanuapur		12	3620	208	31	21868	34	30	28	0	134	2	174	0	0	0
20 Dhading		12	1291	74	0	4454	0	0	0	0	0	0	66	0	0	0
21 Janakpur Zonal		12	3504	464	486	8176	0	0	0	195	0	27	0	0	0	0
22 Jiri		10	298	75	4	885	0	0	0	0	0	15	0	0	0	0
23 Bir		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23.1 Kanti		10	3743	180	1	15237	0	0	0	0	0	0	0	0	0	0
23.2 Sukraraj Tropical and U. D.		11	1652	75	0	3776	0	0	0	0	0	0	0	0	0	0
23.4 Maternity		12	2199	11	0	2372	0	0	0	0	0	39	0	0	0	0
24 Shri Memorial		12	1387	1387	0	4600	0	0	0	39	0	21	0	0	0	0
24.1 Dhulikhel		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26 Mahottari (PH)		12	11178	0	1654	14972	0	0	0	0	0	0	0	0	0	0
27 Hetauda		12	2491	0	0	6904	0	0	0	0	0	0	0	0	0	0
23.8 Nepal Police Hospital		11	3474	1442	302	8572	0	0	0	21	0	10	0	0	0	0
International Friendship Children Hospital		10	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28 Trishuli		12	203	0	0	1064	0	0	0	0	0	28	0	0	0	0
30 Ramechhap		12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Rajmang samakh Hospital, Malidaha		8	31	0	0	100	0	0	0	0	0	0	0	0	0	0
Gajuri Aspatal Pvt Ltd		10	175	70	0	739	0	0	0	0	0	1	0	0	0	0
Shahid Memorial Dhangad Pvt Ltd		10	317	3	0	1147	0	0	0	2	0	0	0	0	0	0
31 Rasuwa		12	225	3	0	410	5	0	0	0	0	1	0	0	0	0
32 Gaur		9	20	0	0	995	0	0	0	0	0	0	0	0	0	0
33 Sarlahi		9	491	0	0	2635	327	0	0	0	0	0	0	0	0	0
34 Sindhuli		12	590	0	0	947	0	0	0	0	0	6	0	0	0	0
35 Sindhupalchowk		11	208	6	0	1000	0	0	0	0	0	0	0	0	0	0
<b>Central</b>		<b>288</b>	<b>37128</b>	<b>3998</b>	<b>2478</b>	<b>101706</b>	<b>366</b>	<b>30</b>	<b>28</b>	<b>0</b>	<b>391</b>	<b>2</b>	<b>388</b>	<b>0</b>	<b>0</b>	<b>4</b>
36 Arghakhanchi		12	96	17	41	680	177	180	0	757	60	0	10	0	0	0
37 Baglung		11	598	10	0	3308	2	2	3	0	0	0	0	0	0	0
38 Gorkha		11	834	18	0	5434	0	1	0	23	0	11	0	0	0	0
38.1 Amp Pipal UMN		11	1340	0	0	2566	0	0	0	0	0	1	0	0	0	0
Am-Ba Hospital		4	48	15	0	591	0	0	0	0	0	3	0	0	0	0
40 P. Bir		11	0	0	0	107	0	0	0	0	0	0	0	0	0	0
40.1 Shiva Raj		9	190	0	0	1323	0	0	0	0	0	34	0	0	0	0
41 Western Regional		12	3407	276	188	28180	4	17	27	83	0	234	4	38	0	0
41.1 Manjup Teaching		7	1178	303	30	11033	18	27	15	3	24	0	33	84	6634	0
42 Lamjung		12	1537	57	2	5836	0	1	1	14	0	7	18	0	15	0
43 Manang		7	15	0	0	44	0	0	0	0	0	44	0	0	0	0
44 Mustang		11	197	10	0	733	0	0	0	0	0	3	0	0	0	0
45 Beni		12	437	17	0	2535	0	0	0	0	0	14	0	0	0	0
46 P.Chandra		10	283	11	280	1472	0	0	0	0	0	2	0	0	0	0
46.1 Kahi Gandaki		11	315	11	0	1334	0	0	0	0	0	0	0	0	0	0
47 Palpa		12	407	3												









---

**ACRONYMS**

AAIN	ActionAid International Nepal
ABSA	American Bio Safety Association
ACDP	Annual Commodity Distribution Program
ACSM	Advocacy, Communication and Social Mobilization
ACT	Artemisinin-based Combination Therapy
ADT	ART Dispensing Tools
AEFI	Adverse Events Following Immunization
AES	Acute Encephalitis Syndrome
AF	Adolescent Friendly
AFP	Acute Flaccid Paralysis
AFR	Adolescent Fertility Rate
AFS	Adolescent Friendly Service
AHW	Auxiliary Health Worker
AI	Avian Influenza
AIDS	Acquired Immuno-deficiency Syndrome
AMR	Anti Microbial Resistant
AMTSL	Active Management of Third Stage of Labor
ANM	Auxiliary Nurse Midwife
AR	Anti-Retroviral Therapy
ARI	Acute Respiratory Illness
ARS	Aayurveda Reporting System
ART	Anti-Retroviral Therapy
ASRH	Adolescent Sexual Reproductive Health
BCC	Behaviour Change Communication
BCG	Bacille Calmette-Guerin
BCG	Bacille Calmette-Guerin
BEOC	Basic Emergency Obstetric Care
BMET	Biomedical Equipment Technician
BMI	Body Mass Index
BNMT	Britain Nepal Medical Trust
BPCR	Birth Preparedness and Complication Readiness
CAC	Comprehensive Abortion Care
CBAC	Community Based ARI and CDD
CB-IMCI	Community Based Integrated Management of Childhood Illness
CBLP	Central Bidding Local Payment
CB-NCP	Community Based Newborn Care Program
CBO	Community Based Organizations
CDD	Control of Diarrhoeal Disease
CDR	Central Development Region
CEOC	Comprehensive Emergency Obstetric Care
CLT	Comprehensive Leprosy Training
CMAM	Community-based Management of Acute Malnutrition
CPR	Contraceptive Prevalence Rate

---

CRS	Congenital Rubella Syndrome
CTS	Clinical Training Skills
DACC	District AIDS Coordination Committee
DBN	Drug Bulletin of Nepal
DCP	District Contingency Plan
DDA	Department of Drug Administration
DDC	District Development Committee
DDRMP	District Disaster Risk Management Plan
DF	Dengue Fever
DFID	Department for International Development
DG	Director General
DHF	Dengue Hemorrhagic Fever
DHIB	District Health Information Bank
DHO	District Health Office
DHOMC	District Health Operation and Management Committee
DIN	Drug Information Network
DoA	Department of Ayurveda
DoHS	Department of Health Services
DOTS	Directly Observed Treatment Short Course
DPHO	District Public Health Office
DPT	Diphtheria, Pertussis, Tetanus
DQSA	Data Quality Self Assessment
DSS	Dengue Shock Syndrome
DST	Drug Susceptibility Testing
DTLO	District TB & Leprosy Officer
DUDBC	Department of Urban Development and Building Construction
EAP	Equity and Access Program
ECD	Early Childhood Development
EDAT	Early Diagnosis and Appropriate Treatment
EDCD	Epidemiology and Disease Control Division
EDP	External Development Partners
EDR	Eastern Development Region
EHCS	Essential Health Care Services
EPI	Expanded Program on Immunization
EQA	External Quality Assurance
EWARS	Early Warning Reporting System
FCHVs	Female Community Health Volunteers
FELM	Finnish Evangelical Lutheran Mission
FHD	Family Health Division
FMIS	Financial Management Information System
FPAH	Family Planning Association of Nepal
FSW	Female Sex Workers
FWDR	Far-western Development Region
FY	Fiscal Year
GBV	Gender Based Violence
GDP	Gross Domestic Product
GFATM	Global Fund against AIDS, TB and Malaria

## ACRONYMS

---

GIVS	Global Immunization Vision and Strategy
GIZ	Gesellschaft für Internationale Zusammenarbeit
GMP	Good Manufacturing Practices
GoN	Government of Nepal
HCT	HIV Counselling and Testing
HF	Health Facility
HFMS	Health Facility Mapping Survey
HFOMCM	Health Facility Operation Management Committee Members
HIIS	Health Infrastructure Information System
HIV	Human Immuno-deficiency Virus
HMIS	Health Management Information System
HP	Health Posts
HPAI	Highly Pathogenic Avian Influenza
HSIS	Health Sector Information System
HTC	HIV Testing & Counselling
HuRDIS	Human Resource Development Information System
HuRIS	Human Resource Information System
ICC	Inter-agency Coordination Committee
IDA	Iron Deficiency Anaemia
IDD	Iodine Deficiency Disorder
IDU	Injecting Drug Users
IEC	Information, Education and Communication
IFA	Iron and Folic Acid
IFPSC	Institutionalized Family Planning Service Centre
IMAM	Integrated Management of Acute Malnutrition
IMCI	Integrated Management of Childhood Illness
IMNMP	Intensification of Maternal and Neonatal Micronutrient Program
IPD	Immunization Preventable Diseases
IRS	Indoor Residual Spraying
ISTC	international standard of TB care
IUCD	Intra-uterine Contraceptive Device
IV	Intravenous Fluid
IYCF	Infant and Young Child Feeding
IYCF	Infant and Young Child Feeding
JE	Japanese Encephalitis
JICA	Japan International Co-operation
KAP	Knowledge, Attitude and Practice
LBI	Local Bacterial Infection
LEC	Leprosy Elimination Campaign
LF	Lymphatic Filariasis
LIS	Laboratory Information System
LLIN	Long-lasting Insecticide Treated bed Net
LMD	Logistics Management Division
LMIS	Logistics Management Information System
LQAS	Lot Quality Assurance Sampling
MA	Medical Abortion

---

MARP	Most At Risk Population
MC	Microscopy Centre
MCH	Maternal and Child Health
MCHC	Mother and Child Health Care
MCHW	Maternal and Child Health Worker
MCV	Measles Containing Vaccine
MD	Management Division
MDA	Mass Drug Administration
MDM	Medecins Du Monde
MDT	Multi Drug Therapy
MDVP	Multi Dose Vial Policy
MG-H	Mothers' Group for Health
MI	Micronutrient Initiative
MIS	Management Information Systems
MISP	Minimum Initial Services Package
MIYC	Maternal Infant and Young Child
MIYCN	Maternal, Infant and Young Child Nutrition
MLM	Mid Level Manager
MMNP	Multiple Micronutrient Powder
MNH	Maternal and Neonatal Health
MNIS	Multi-sector Nutrition Information System
MNP	Micro-Nutrient Powder
MNT	Maternal and Neonatal Tetanus
MO	Medical Officers
MoAC	Ministry of Agriculture and Cooperatives
MoF	Ministry of Finance
MoHP	Ministry of Health and Population
MSI	Marie Stopes International
MSM	Men having Sex with Men
MSNP	Multi Sectoral Nutrition Plan
MSPAN	Multi Sector Plan of Action on Nutrition
MTC	Male sex workers, transgender and their clients
MWDR	Mid-western Development Region
MWRA	Married Women of Reproductive Age
NAC	National AIDS Council
NACC	National AIDS Coordinating Committee
NAGA	Nutrition Assessment and Gap Analysis
NAGA	Nepal Nutrition Assessment and Gap Analysis
NAMS	National Academy of Medical Sciences
NASRH	National Adolescent Sexual and Reproductive Health Program
NAWB	Nepal Association for the Welfare of the Blind
NCASC	National Centre for AIDS and STD Control
NCD	Non-Communicable Diseases
NCIP	National Committee for Immunization Practices
NDHS	Nepal Demographic and Health Survey
NDVS	Nepal Development Volunteers Services
NEQAS	National External Quality Assurance Scheme

## ACRONYMS

---

NFHC	National Free Health Care
NGO	Non-Government Organization
NHEICC	National Health Education, Information and Communication Centre
NHP	National Health Policy
NHSP	Nepal Health Sector Program
NHTC	National Health Training Centre
NHTCC	National Health Training Coordination Committee
NHTS	National Health Training Strategy
NIC	National Influenza Centre
NID	National Immunization Day
NIP	National Immunization Program
NISN	National Influenza Surveillance Network
NLR	Netherlands Leprosy Relief
NML	National Medicines Laboratory
NMR	Neonatal Mortality Rate
NNSC	National Nutrition Steering Committee
NPC	National Planning Commission
NPHL	National Public Health Laboratory
NQC	National Quality Control Centre
NRCS	Nepal Red Cross Society
NSI	Nick Simons Institute
NTAG	Nepali Technical Assistance Group
NTAG-M	National Technical Advisory Group for Malaria
NTC	National Tuberculosis Centre
NUTEC	Nutrition Technical Committee
NYF	Nepal Youth Foundation
OPV	Oral Polio Vaccine
ORS	Oral Rehydration Solution
ORT	Oral Rehydration Therapy
OT	Operation Theatre
OTP	Out-patient Therapeutic Program
PAL	Practical Approach to Lung
PEM	Protein-Energy Malnutrition
PEP	Post Exposure Prophylaxis
PHC	Primary Health Care
PHC/ORC	Primary Health Care Outreach Clinics
PHCC	Primary Health Care Centre
PHCRD	Primary Health Care Revitalization
PHO	Public Health Officer
PLAMAHS	Planning and Management of Assets in Health Care System
PLHA	People Living with HIV/AIDS
PLHIV	People Living with HIV
PME	Planning, Monitoring, and Evaluation
PMTCT	Prevention of Mother-to-Child Transmission
PPH	Post-partum Haemorrhage
PPM	Public Private Mix

---

PR	Prevalence Rate
PSBI	Possible Severe Bacterial Infection
PSI	Population Services International
PWID	People Who Inject Drugs
RBM	Roll Back Malaria
REACH	Reaching to End Child Hunger and Malnutrition
REC	Reaching Every Child
RED	Reaching Every District
RH	Reproductive Health
RHCC	Reproductive Health Coordination Committee
RHD	Regional Health Directorate
RHDP	Cooperation/Rural Health Development Project
RHTC	Regional Health Training Centre
RQCC	Regional Quality Control Centre
RTAG-M	Regional Technical Advisory Group on Malaria
RTLO	Regional Tuberculosis and Leprosy Officer
SAM	Severe Acute Malnutrition
SAM	Service Availability Mapping
SAS	Safe Abortion Services
SBA	Skilled Birth Attendants
SDC	Swiss Agency for Development
SDF	SAARC Development Fund
SEARO	South East Asia Regional Office
SHN	School Health and Nutrition
SHN	School Health and Nutrition
SHP	Sub Health Posts
SLTHP	Second Long Term Health Plan
SMART	Standardized Methodology of Nutrition Assessment during Relief and Transition
SO	Standard Operating
SOP	Standard Operating Procedures
SPN	Sunaulo Parivar Nepal
SR	Sub-Recipients
STI	Sexually Transmitted Infection
SUN	Scaling-Up Nutrition
SW	Sex Workers
SWA	Sector-Wide Approach
TB	Tuberculosis
Td	Tetanus diphtheria
TFR	Total Fertility Rate
TG	Transgender
TIMS	Training Information Management System
ToT	Training of Trainers
TT	Tetanus Toxoid
TTI	Transfusion Transmissible Infection
TWG	Technical Working Group
UMN	United Mission to Nepal
UNFPA	United Nations Population Fund

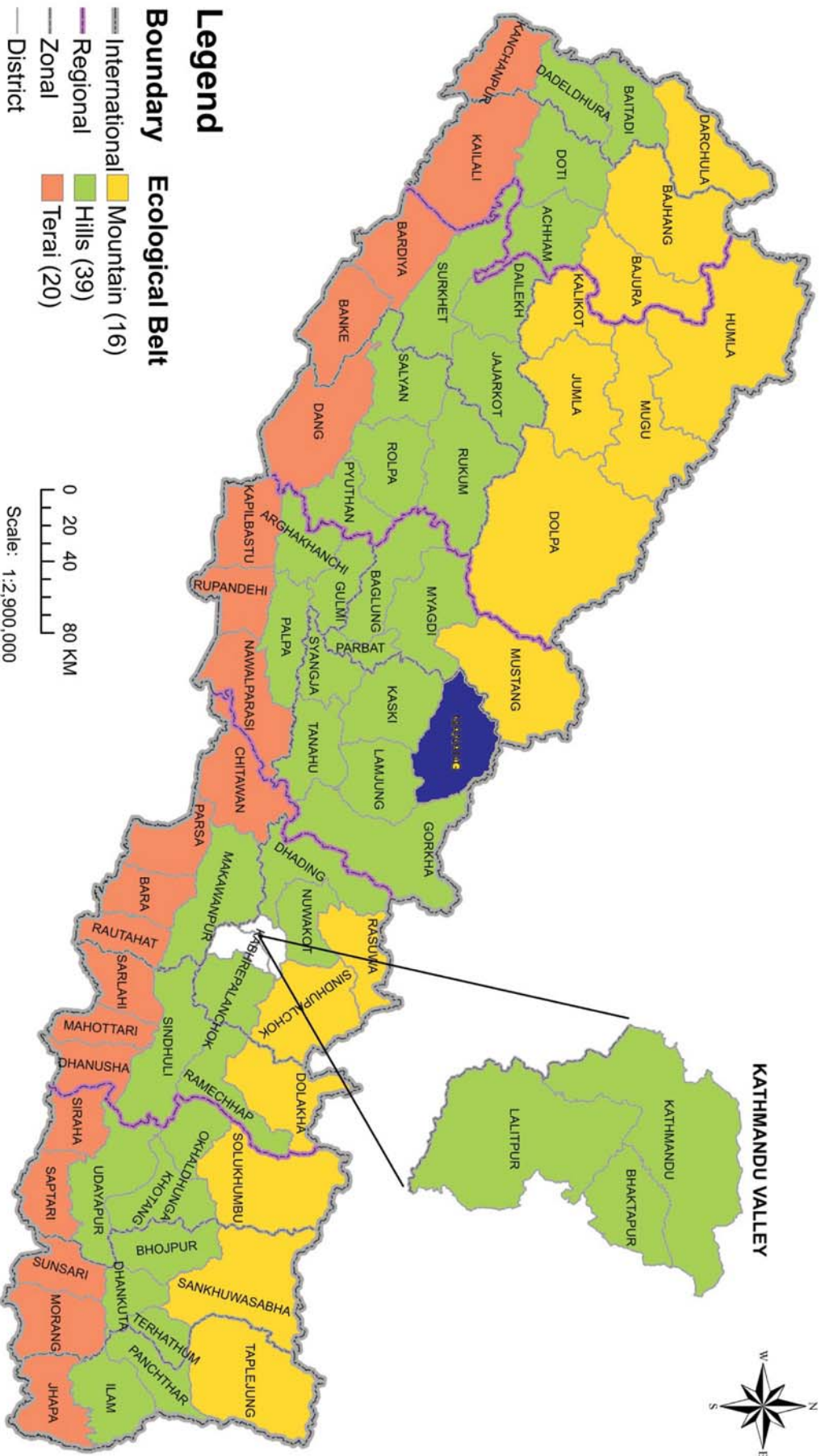
## ACRONYMS

---

UNGASS	United Nation General Assembly Special Session
UNICEF	United Nations Children's Fund
UP	Uterine Prolapse
USAID	United States Agency for International Development
VAD	Vitamin Deficiency Disorder
VAS	Vitamin A Supplementation
VBD	Vector-Borne Diseases
VBDRTC	Vector Borne Disease Research and Training Centre
VCT	Voluntary Counselling and Test
VDC	Village Development Committee
VHW	Village Health Worker
VHW	Village Health Worker
VPD	Vaccine Preventable Diseases
VSC	Voluntary Surgical Contraception
WAN	WaterAid in Nepal
WASH	Water, Sanitation and Hygiene
WDR	Western Development Region
WFP	World Food Program
WHO	World Health Organization

# NEPAL

## ADMINISTRATIVE DIVISION



Spatial Data Source: Department of Survey

Map Produced by: HMIS Section, Department of Health Services, Teku, Kathmandu