

ANNUAL REPORT

Department of Health Services
2070/71 (2013/2014)



Government of Nepal
Ministry of Health and Population
Department of Health Services
Teku, Kathmandu

Contents

Abbreviation

Message, Preface, Foreword and Acknowledgement

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ACRONYMS

ACT	Artemisinin-based Combination Therapy
AEFI	Adverse Events Following Immunization
AES	Acute Encephalitis Syndrome
AFP	Acute Flaccid Paralysis
AI	Avian Influenza
AIDS	Acquired Immuno-deficiency Syndrome
AMR	Anti Microbial Resistant
AMTSL	Active Management of Third Stage of Labor
AR	Anti-Retroviral Therapy
BMI	Body Mass Index
BPCR	Birth Preparedness and Complication Readiness
CB-IMCI	Community Based Integrated Management of Childhood Illness
CB-NCP	Community Based Newborn Care Program
CMAM	Community-based Management of Acute Malnutrition
DOTS	Directly Observed Treatment Short Course
DSS	Dengue Shock Syndrome
DST	Drug Susceptibility Testing
EQA	External Quality Assurance
GFATM	Global Fund against AIDS, TB and Malaria
HPAI	Highly Pathogenic Avian Influenza
IDA	Iron Deficiency Anaemia
IDD	Iodine Deficiency Disorder
IDU	Injecting Drug Users
IFA	Iron and Folic Acid
IMAM	Integrated Management of Acute Malnutrition
IMNMP	Intensification of Maternal and Neonatal Micronutrient Program
IPD	Immunization Preventable Diseases
IRS	Indoor Residual Spraying
JE	Japanese Encephalitis
LF	Lymphatic Filariasis
LLIN	Long-lasting Insecticide Treated bed Net
MARP	Most At Risk Population
MCV	Measles Containing Vaccine
MDVP	Multi Dose Vial Policy
MIYCN	Maternal, Infant and Young Child Nutrition
MMNP	Multiple Micronutrient Powder
NEQAS	National External Quality Assurance Scheme
NHP	National Health Policy
NHSP	Nepal Health Sector Program
NHTS	National Health Training Strategy
NIC	National Influenza Centre
NISN	National Influenza Surveillance Network
NML	National Medicines Laboratory

NMR	Neonatal Mortality Rate
NNSC	National Nutrition Steering Committee
NQC	National Quality Control Centre
NTAG-M	National Technical Advisory Group for Malaria
OPV	Oral Polio Vaccine
ORS	Oral Rehydration Solution
ORT	Oral Rehydration Therapy
OTP	Out-patient Therapeutic Program
PAL	Practical Approach to Lung
PEM	Protein-Energy Malnutrition
PEP	Post Exposure Prophylaxis
PHC/ORC	Primary Health Care Outreach Clinics
PHCRD	Primary Health Care Revitalization
PLAMAHS	Planning and Management of Assets in Health Care System
PLHA	People Living with HIV/AIDS
PLHIV	People Living with HIV
PMTCT	Prevention of Mother-to-Child Transmission
PPH	Post-partum Haemorrhage
PPM	Public Private Mix
PR	Prevalence Rate
PSBI	Possible Severe Bacterial Infection
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
RHCC	Reproductive Health Coordination Committee
SAM	Severe Acute Malnutrition
SAS	Safe Abortion Services
SLTHP	Second Long Term Health Plan
SMART	Standardized Methodology of Nutrition Assessment during Relief and Transition
SOP	Standard Operating Procedures
STI	Sexually Transmitted Infection
SUN	Scaling-Up Nutrition
Td	Tetanus diphtheria
TTI	Transfusion Transmissible Infection
VAD	Vitamin Deficiency Disorder
VAS	Vitamin A Supplementation
VBD	Vector-Borne Diseases
VCT	Voluntary Counseling and Test
VPD	Vaccine Preventable Diseases
VSC	Voluntary Surgical Contraception
WASH	Water, Sanitation and Hygiene



Government of Nepal

Phone : 4-262534, Fax : 4-262565

Ministry Of Health & Population

Ramshahpath, Kathmandu, Nepal

Ref :

Hon'ble Khaga Raj Adhikari

Minister for Health and Population

Date :

MESSAGE

Government of Nepal, Ministry of Health and Population is committed to deliver highest possible quality health care to all citizens. The Ministry is committed to materialize "Universal Health Coverage" by plan, policies implementation, monitoring and evaluation in collaboration with public and private sectors and external development partners to get desired outcomes. Publication of Annual Report by Department of Health Services is relevant as it makes us informed about health care status.

I am pleased to note the release of Annual Report of Department of Health Services for fiscal year 2070/71. The Annual Report is a comprehensive document based on the performance review process of the completed activities against the set targets at district, regional and national levels of the health care delivery system. It provides a detailed and updated information with regard to resources, services provided, analytical trends and disease patterns in the country. The demand for this document both within Nepal and elsewhere proves its value. It is hoped that a maximum use is made of this document for the further improvement of health services in Nepal.

I am hopeful that the 20th Annual Report of Department of Health Services will be helpful for managers, planners, decision makers, evaluators and researchers in the way that it makes aware and adds strength to health service provider to analyze in-depth health situation and measure the progress in the health sector.

I would like to extend my sincere thanks to the Department of Health Services and all those who are involved in the preparation of this report. I also offer my thanks to our external development partners for their continuous support.

Khaga Raj Adhikari

Minister

February, 2015



Ref:

Government of Nepal

Ministry of Health & Population



Phone : 4.

262987
262590
262802
262706
262935
262862

Ramshahpath, Kathmandu
Nepal

Date :



PREFACE

It is my pleasure to share with you the Annual Report of the Department of Health Services (DoHS) for the year 2070/71 (2013/2014). The Annual Report, which is published regularly for the past twenty years, is a comprehensive report covering all major activities of the DoHS, along with key activities of other departments of the Ministry of Health and Population. The report also highlights the contributions of external development partners, non-governmental organizations and the private sector in achieving the milestones set out by the Ministry of Health and Population. As indicated by this annual report, I am grateful and pleased to know of all the efforts that have been made in the stated year, and areas where we still to strive for as we work towards realizing an efficient health care delivery system, based on improved strategic information and evidence informed activities in the country. I am also delighted to inform you that Country is introducing eHealth system and working towards achieving Universal Health Coverage (UHC).

Although report indicates progress made in many health areas during the last fiscal year, Ministry of Health and Population (MoHP) is equally aware of additional efforts that are needed to maintain quality ensured health services that serves every Nepali, including those who for various reasons have been unable to access health services. I deeply appreciate the hard work done by DoHS, the Regional Health Directorates, all DHO/DPHOs, all Hospital Directors and their teams, and all health personnel including FCHVs working at the various levels of health service delivery for their hard work. Going through the progress being made, I believe this report will serve as a commendable tool to decide on scaling up the best practices, and also on rethinking implementation approaches based on the lessons learnt so far.

I am equally thankful for all the efforts put in by all divisions and Centers of the Department of Health Services, Regional Health Directorates, District Health and Public Health Offices, all levels of health workers, stakeholders and partners, and volunteers engaged in the health sector.

Finally, I would like to extend my sincere thanks and congratulate the Director General of the DoHS, Director of Management Division and his team, especially the HMIS section team and all Divisional and Centre Directors, and other concerned personnel for their valuable contribution in bringing out this report.

Shanta Bahadur Shrestha
Secretary
January, 2015



Government of Nepal
Ministry of Health & Population

DEPARTMENT OF HEALTH SERVICES

Tel. : 4261436

: 4261712

Fax : 4262238

Pachali, Teku
Kathmandu, Nepal

Ref. No.

Date:-.....

Foreword



This is the 20th edition in the uninterrupted series of Annual Reports published by the Department of Health Services. The annual report is one of the outcomes of the annual performance review workshops conducted at various levels. It reflects the performances of all the major programs and activities implemented by various health institutions at all levels from community to centre. The reports covers major health issues, challenges and way forward to improve identify issues.

The fact and figure presented in the report are based on the information was generated by Health Management Information System (HMIS) as other sources within the health information system. This report provides comprehensive information regarding health policies, strategies, plan activities, achievement carried out, three years trend service coverage as well as program issues emerge during the fiscal year 2070/71. This report also covers the progress of activities carried out by other departments under Ministry of Health and Population and External Development Partners (EDPs) during the reference year.

I am pleased to report that most of the activities planned by different Divisions/Centres have been carried out with successfully. This would not be possible without the commitment and dedications of the staff of the Department of Health Services working in the difficult and remote areas. However, more collaborative efforts are required for improvement to meet the aspiration of the people and to deliver quality health care services as envisaged by Nepal Health Sector Program.

I would like to extend my sincere appreciation to Female Community Health Volunteers, all levels of health workers working in the health facilities for their untiring efforts in providing health services at the community level. I should thanks to Regional Health Directors, Directors of Division and Centres, Chief of Sections for their meticulous support to the district teams to execute their activities in time. I also wish to offer my appreciation to External Development Partners, INGOs, NGOs and Private health sector for contributing significantly to improve health status of people at all corners of the country.

I wish to place on record my appreciation and grateful thanks to all officials of the Department of Health Services for their support and coordination extended by providing necessary information. I also thank the Director of the Management Division and in particular the staff of the HMIS section for the valuable service rendered in coordinating the preparation and publication of the report.

Dr. Senendra Raj Upreti
Director General

January, 2015



Government of Nepal
Ministry of Health & Population

DEPARTMENT OF HEALTH SERVICES

Management Division

Tel. : 4261436

: 4261712

Fax : 4262238

Pachali, Teku
Kathmandu, Nepal

Ref. No.

Date:-----



ACKNOWLEDGEMENT

It is my pleasure to offer this Annual Report, 20th in consecutive of its kind of the Department of Health Services (DoHS) for the fiscal year 2070/71 (2013/2014). This annual report is also a reflection of annual performance review workshops conducted at various levels of health service delivery. It is a compilation of major activities carried by the 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) and others sources.

The report includes information about health care services and activities of public and private institutions providing health care to the Nepalese people. The report also highlights the trend and patterns in service coverage and continuum of care. Furthermore, it also informs us about the program target and achievement 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 day to come. This imperative publication provides detailed statistical analysis of health program against its target and indicators.

I express my sincere gratitude to the Hon'ble Minister for Health and Population Mr. Khaga Raj Adhikari, for his commendable message and direction. I am also thankful to the Secretary for Health and Population Mr. Shanta Bahadur Shrestha for providing a meaningful preface about the report. Dr. Senendra Raj Uptri, Director General of the Department of Health Services deserves special thanks for his thoughtful guidance. I also extend my thanks to the Directors of the different Divisions, Centers and Section Chiefs for providing their analytical reports. My colleague in the Management Division Mr. Mukti Nath Khanal, Chief of HMIS Section and his team members Mr. Deepak Dahal, Mr. Diwakar Sapkota, Mr. Manoj Tamrakar, Mr. Binod Poudel, Mr. Gunja Bahadur G.C, Mr. Girish Jha, Mr. Navraj Bhatta, Mr. Gopal Adhikari, Mr. Puspa Lal Shrestha, and Mr. Durga Nath Khanal deserve special appreciation for their hard work and effort to bring out this report. I feel indebted to all those who worked restlessly for recording, reporting, compiling, processing and analyzing service delivery and progress reports timely without which this report publication would not have been possible.

I take this opportunity to offer my sincere appreciation to EDPs, INGOs and NGOs who have joined us in service delivery programs and submitting their brief annual activity progress report.

Finally, I hope that this report will be of great help in strengthening the health services in Nepal. I also hope that it will provide valid a information to all those who work for uplifting the health status of all citizens, particularly the poor and vulnerable group of the Nepalese society.

Dr. Bhim Acharya
Director

January, 2015

Executive Summary

A. INTRODUCTION

The Annual Report of the Department of Health Services (DoHS) for fiscal year 2070/71 (2013/2014) is the 20th consecutive report of its kind. The report focuses on the objectives, targets, strategies adopted by the programs and analyses the achievements of the major activities and attempts to highlight trends in the service coverage of the services over the preceding three fiscal years. This report also identifies issues, problems, constraints and suggests actions to be taken by the related health institutions for further improvements. The executive summary highlights the key issues and observations emerging from the analysis of each programme. Detail programme information is available in specific reports following this summary.

The information and statistics used in this report are based on the data collected by the Health Management Information System (HMIS) under the Department of Health Services (DoHS) from health institutions across the country. A total of 102 public hospitals, 208 Primary Health Care Centres (PHCCs), 1,559 Health Posts (HPs) and 2,247 Sub Health Posts (SHPs) reported to HMIS in 2070/71. This report also includes service coverage by 12,618 Primary Health Care/outreach Clinics (PHC/ORC), 16,840 Expanded Programme of Immunisation (EPI) clinics and 50,024 Female Community Health Volunteers (FCHVs). A total of 459 NGO/INGOs and 645 Private Health Institutions (PHI) also reported to HMIS this year. This implies that all 75 district health office/district public health offices (DHOs/DPHOs), 81% of public hospitals, 100% of PHCCs/HCs, 100% of HPs, 100% of SHPs, 85% of PHC/ORCs, 91% of EPI clinics, 89% of FCHVs and 70% of NGO/INGOs reported to HMIS in fiscal year 2070/71.

B. CHILD HEALTH

IMMUNIZATION

National immunization program is the priority 1 (P1) program. Since the inception of immunization program to the date it has been an established and successfully public health intervention. Nepal is one of the countries recognized for the well functioning immunization system. The accessibility of immunization has reached to the 97% population and serves equally, successfully to the poor and rich, also does not discriminate child's sex. The contribution of immunization in achieving the MDG 4 goal is immense. Nepal has achieved polio free status in 27th March 2014, sustained maternal and neonatal tetanus elimination since 2005, and Japanese encephalitis is in control status and conducting measles case based surveillance to meet the target of elimination by 2019.

The national coverage of BCG is the highest of all antigens indicates that almost 99% mother have access in immunization services, while DPT-HepB-Hib and OPV- 3 coverage are more than 91%. The measles/rubella vaccine coverage is 88% and Td2+ coverage (Td2 and Td2+) coverage is 75%. The JE coverage (31 districts) is 75%.

NUTRITION

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. Commitment at high level for nutrition in the country has shown an increased interest to improve the nutritional status of women and children focusing on first 1,000 days.

The coverage of growth monitoring has increased by 1 percent as compared to last fiscal year 2069/70. However, the average number for GM visit marginally increased in the fiscal year 2070/71. The proportion of malnutrition children has decreased by 1 percent as compared to last fiscal year 2069/70. In reporting year 2070/071, 11 IMAM districts have admitted 7,137 severely acute

malnourished children at out patient's therapeutic program and discharged 5,925 children. Among them 80% children have recovered and similarly defaulter rate is 14% and death rate is 0.19%.

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

To reduce morbidity and mortality among 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 counseling on breastfeeding for young infants less than 2 months of age.

In FY 2070/71, a total of 54,240 infant of under 2 months were treated at health facilities which is slightly high in comparison to FY 2069/70. Treated of infection cases (PSBI) has been decreased (7,528) in FY 2070/71 compared to 2068/69 and 2067/68. The incidence of diarrhoea per 1,000 under-five years' children has increased slightly to 629/1,000 in FY 2070/71 from 528/1,000 of FY 2068/69 and 578/1,000 of 2069/70. In the case of Severe Dehydration, it has slightly increased in FY 2070/71 compared to FY 2069/70. Number ARI Cases (2,671,922) has decreased in FY 2070/71 compared to FY 2069/70 and FY 2068/69.

C. FAMILY HEALTH

FAMILY PLANNING

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 outreach services. The Contraceptive Prevalence Rate (CPR) is one of the main indicators for monitoring and evaluating the National Family Planning Program. The contraceptive prevalence rate (CPR) for modern family planning method is 45% at national level in fiscal year 2070/71. There is wide variation in CPR at the regional level in the reporting year.

SAFE MOTHERHOOD

In the fiscal year 2070/71 national level ANC first visit as percentage of expected pregnancy has 86 percent. Institutional delivery has increased 50 percent in FY 2070/71 as compare to FY 2068/69 and it was 44 percent. Percentage of mothers who received first postnatal care at the health facility among expected live births has also increased 59 percent in the reporting year. In FY 2070/71, percentage of women who had first PNC visits among estimated live birth increased 59 percent and it was 56 percent in the FY 2068/69. In fiscal year 2070/71, a total of 90,468 CAC and PAC service has been provided out of which 78,101 women received Comprehensive Abortion Care (CAC) service from 776 listed sites. Out of the total 24 percent women received long acting contraceptive methods and there was 1.3 percent post abortion complication.

FEMALE COMMUNITY HEALTH VOLUNTEERS

The major role of the Female Community Health Volunteers (FCHVs) is promotion of safe motherhood, child health, family planning, and other community based health services to promote health and healthy behavior of mothers and community people with support from health workers and health facilities. At present there are 51,470 FCHVs (47,328 FCHVs at rural/VDC level and 4,142 at urban/municipality level) actively working all over the country. FCHVs contributed significantly in the distribution of oral contraceptive Pills, Condoms and Oral Rehydration Solution (ORS) packets and counseling and referring to mothers in the health facilities for the service utilization.

FCHVs have contributed in distribution of 53 percent oral pills and 47 percent ORS packets at the national level. FCHVs distributed a total of 14,506,525 packets of condoms in the FY 2070/71. Service statistics shows that more than one half of the diarrhoea and ARI cases were treated by FCHVs.

PRIMARY HEALTH CARE OUTREACH CLINICS

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. Primary health care outreach clinics (PHC/ORC) extend basic health care services to the community level.

Total number of clinics expected to run in a year 151,416 (12,618 PHC/ORC Clinics x 12 times) and clinics have been conducted 85 percent in the reporting year. On an average 22 clients were served per clinic during the fiscal year 2070/71 and it was increased by 1 percent compared to fiscal year 2069/70.

ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH

National ASRH program is being gradually scaled up to meet the NHSP II target of making 1,000 public health facilities adolescent-friendly by 2015. As of July 2014, a total of more than 1,000 health facilities in 59 districts are providing adolescent-friendly services (AFS) in support of different stakeholders.

DEMOGRAPHY AND REPRODUCTIVE HEALTH RESEARCH

Planning, monitoring and evaluation of reproductive health (RH) activities are the key functions of Program, Budget and 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 activities such as (a) Annual program and Budget (b) Target population setting, monitoring and research/study (c) Guideline/ documents development and (d) other major Family Health related studies published in the fiscal year 2070/71.

D. DISEASE CONTROL

MALARIA

Nepal has surpassed the Millennium Development Goal #6 by reducing malaria morbidity and mortality rates by more than 50% in 2010 as compared to 2000. Therefore, Government of Nepal has set a vision of Malaria free Nepal in 2025.

Confirmed cases dropped from 2,634 in fiscal year 2068/69 to 1,674 in 2070/71. The proportion of *P. falciparum* infections has sharply declined and reached 13 percent in reporting year. Recorded malaria deaths are drastically declined from more than 200 during the 2006 (outbreak years) to less than 10 in 2010 and maintained zero deaths due to malaria from 2012 to till date. There is a decreasing trend of confirmed case, case severity with sustaining zero death due to scaling up access to RDT and ACT to public health facilities, high coverage of LLINs in endemic districts and increased socio-economic status of community people. There is rapid decreasing trend of indigenous *PF*, where as slow decreasing trend of indigenous *Plasmodium vivax* cases indicates that *P. vivax* may remain a challenge for malaria elimination in Nepal.

KALA-AZAR

Kala-azar is a major public health problem in 11 districts in Eastern and Central Tarai. The trend of KA cases has been decreasing significantly for the last several years. In the fiscal year 2070/71, a total of 367 cases were reported, of which 339 cases were native and the rest (28) were foreign cases. Among 339 native cases, 295 cases reported from 11 programme districts and remaining 44 were reported from 20 non program districts. Incidence of Kala-azar at national as well as district level is less than 1/10,000 population. At district level incidence per 10,000 in areas at risk populations ranged from 0.84 in Morang to 0.01 in Bara reflecting the incidence of 0.33 per 10,000 in 12 programme districts (excluding foreign cases).

LYMPHATIC FILARIASIS

Lymphatic Filariasis (LF) is a public health problem in Nepal. All endemic districts will complete the recommended six rounds of MDA by 2018. The LF elimination programme has also indirectly contributed to strengthening of health system through trainings and capacity building activities. TAS done in 21 districts has revealed that the prevalence of LF infection has significantly reduced and contributed in preventing disabilities and sufferings due to LF. Over the period of last 11 years, more than 87 million populations at risk have been treated with MDA medicines. In this fiscal year, 14,762,884 people living in 41 districts were targeted for MDA, of which 10,929,305 (68.9%) were treated.

DENGUE

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 2005. In the fiscal year 2070/71 total number of dengue case reported from 15 districts were 785. Among them, 371 cases were reported from Chitawan, 202 cases from Jhapa and 99 cases from Parsa district where outbreak was recorded. Remaining 113 cases were reported from Rupandehi, Nawal parasi, Kailali, Kanchanpur, Dang, Kapilbastu, Banke, Parsa, Bara, Makawanpur Ilam, Mahottari, Kaski and Kathmandu.

ZOONOSES

Nepal has dual burden of disease and zoonotic diseases of epidemic, endemic and pandemic potentials are major public health concerns. Globally more than 300 Zoonotic diseases are identified among which about 60 have been identified in Nepal as emerging and re-emerging diseases. The six zoonoses like Taeniosis/cysticercosis /Neurocysticercosis, Leptospirosis, Hydatidosis, Brucellosis; Toxoplasmosis and Avian Influenza has been identified as Priorities Zoonotic Diseases in Nepal which epidemic potentials. Annually about 18,000 cases of snake bites occur in Nepal. Though only 20% of bites are venomous, 80-100 people die every year due to poisonous snake bites.

DISASTER MANAGEMENT

This collaborative programme between MoHP/DoHS/EDCD and WHO-EHA has been committed to enhancing health sector emergency preparedness, disaster response and epidemiology and outbreak management capabilities in close coordination & collaboration with key players in the country. To fulfill of its objectives such activities (a) Expediting the process of health sector contingency planning (b) Providing training to the health workers in emergency preparedness and disaster response and (c) Strengthening the mechanism for multi-sectoral coordination and collaboration in relation to health sector disaster management has been carried out in the fiscal year 2070/71.

TUBERCULOSIS

In the fiscal year 2070/71, NTP registered 37,025 TB cases; among positive proportion was 51% (18,738). The cohort of all the TB cases registered were 15,947 (43%), New Smear Positive TB cases were 2,305 (6%), Smear Positive Retreatment TB cases were 8,445 (22.8%), Sputum Smear Negative were 8,583 (23.1%) and Extra Pulmonary TB cases were 1,259 (3.4%) cases. The case finding rate of New Smear positive TB cases was 83%. Case Notification Rate was 67/100k population in the fiscal year 2070/71. Similarly the Treatment Success Rate of new smear positive cases registered in fiscal year of 2069/70 (2012/13) was 89%.

LEPROSY

During the FY 2070/71 a total number of 3,223 new leprosy cases were detected and were put under MDT and 2,271 cases were under treatment at the end of the fiscal year. At the end of FY 2070/71 there were 2,271 leprosy cases receiving MDT in the country, which makes the registered prevalence

rate of 0.83/10,000 populations at national level. This rate is well below the cut-off point of <1 /10,000 population. 109 cases of visible disability (G2D) were recorded in the fiscal year 2070/71.

HIV/AIDS AND STI

Making up 8% of the total estimated population of 40,723, there are about 3,282 children aged up to 14 years are living with HIV in Nepal in 2013, while the adults aged 15 years and above account for 92%. There are 3,385 infections estimated among population aged 50 years and above (8.3%). By sex, males account for two-thirds (66%) of the infections and the remaining more than one-third (34%) of infections are in females, out of which around 92.2% are in the reproductive age group of 15-49 years. The male to female sex ratio of total infection came down from 2.15 of 2006 to 1.95 for the year 2013 and projected to be 1.86 by 2020.

E. SUPPORTING PROGRAMMES

HEALTH TRAINING

The National Health Training Centre (NHTC) operationalizes its training activities in line with National Health Training Strategy. In-service training is delivered through a network of National Health Training Programmes, which provide technical as well as managerial training at all levels. There are five regional training centers, one sub regional, 75 district and 14 training health posts. In addition, there are ten Family Planning, ten safe abortion, twenty one skill birth attendants, eleven Mid level practicum, four USG, six anesthesia assistant training sites under NHTC. A training working group (TWG) comprising various supporting partners was formed under the leadership of NHTC with the purpose of ensuring the efficient running of national health training programs, maintaining the quality of the training and improving the coordination of all training provided under NHTC. The NHTC is the apex body for the development of human resources for the health sector.

HEALTH EDUCATION, INFORMATION AND COMMUNICATION

The National Health Education, Information and Communication Centre (NHEICC) is responsible for planning, implementing, monitoring and evaluating awareness raising, information, education and communication program related to health programmes and services. The physical and financial achievement of the regular IEC/BCC activities carried out 100 percent during the FY 2070/71. Similarly the physical achievement on Health Tax Fund-Tobacco control activities also carried out 100 percent in the fiscal year 2070/71,

LOGISTICS MANAGEMENT

The major function of Logistic Management Division (LMD) is to procure, store and distribute quality 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.

LMD has been implementing and monitoring the 'pull system' for contraceptives, programme commodities, vaccines and essential drugs at levels of health facility levels. The web-based Logistics Management Information System (LMIS) and Inventory Management System have facilitated evidence based logistics 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 carries out Regional Logistic Review Meeting (RLRM) in all regions of the country to address the problems and issues for supply better management of health commodities serve the users.

HEALTH LABORATORY SERVICES

NHSP II (2010-2015) envisages Public Health Laboratory (NPHL) service strengthening at all levels. It has been designated as nodal institute for Policy, guidelines and over all frameworks for capacity building & development in laboratory sector. Attention has been given to strengthen laboratory

procedure and communication between national, regional and district levels. It also gives to new recruitment of staff as well as training of existing staff.

Health laboratory services have been expanded from central level to PHC level in public 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 are providing lab services. In the private sector there are above 1,300 laboratories providing services in the fiscal year 2070/71. NPHL is also conducting the laboratory surveillance activities on various disease pathogens such as Measles/Rubella surveillance, Japanese encephalitis surveillance, Influenza surveillance and Antimicrobial resistance surveillance.

PERSONNEL ADMINISTRATIVE MANAGEMENT

The Personnel Administration Section is responsible for managing Nepal's health workforce to deliver quality health services. This section manages the posting, transfer, upgrades and disciplinary action to health workers. Ministry of Health and Population (MoHP) has a total 30,703 employees of them 24,403 are technical personnel and 6,300 are administrative staff. Department of Health Services (DoHS) has a total 23,886 work force including all five development region's health facilities and of them 196 post (technical and administrative) for all divisions and sections under the DoHS.

FINANCIAL MANAGEMENT

Out of total National Budget of Rs. 5,17,24,00,00,000 a sum of Rs. 30,43,21,96,000 (5.89%) was allocated for the health sector during the fiscal year 2071/72. Of the total health sector budget, Rs. 21,00,22,30,000 (69.02 %) was allocated for the execution of programs under the Department of Health Services Network

PRIMARY HEALTH CARE REVITALIZATION

The concern of the poor and marginalized people both in urban and rural areas has been in high priority of 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 with special consideration for the poor/ultra-poor, destitute, disabled, senior citizens and Female Community Health Volunteers (FCHV).

It is estimated that about 70% people in Nepal utilized public health services in the fiscal year 2070/71. Among the total reported morbidity cases (21,661,849) 79 percent of population was found utilizing free health care services. This information shows that remarkable chunk of people utilize the free health care services. Among health facilities, the free health service provided by HP/SHP is 91 percent, free health care service provided by PHCC and Hospital are 5.2 percent and 3.25 percent respectively.

Health Service Coverage Fact Sheet

Fiscal Year 2068/69 - 2070/71 (2011/12 - 2013/14)

INDICATORS	2068/69 (2011/12)	2069/70 (2012/13)	2070/71 (2013/14)
REPORTING STATUS			
% of public hospitals reporting to HMIS	98	83	81
% of primary health care centers reporting to HMIS	100	95	100
% of health posts reporting to HMIS	99	98	100
% of sub health posts reporting to HMIS	99	96	100
% of PHC-ORC clinics reporting to HMIS	85	87	85
% of EPI clinics reporting to HMIS	93	94	91
% of Female Community Health Volunteers (FCHVs) reporting to HMIS	91	88	89
% of NGO health facilities reporting to HMIS	73	71	70
IMMUNIZATION			
% of children under one year immunized with BCG	96	99	99
% of children under one year immunized with DPT-HepB-Hib3	90	93	92
% of children under one year immunized with OPV 3	90	93	92
% of one-year-old children immunized against Measles/Rubella (90)*	86	88	88
NUTRITION			
% of children under five years growth monitored	40	44	45
% of malnourished children under five years among new growth monitored cases	3	3	2
ACUTE RESPIRATORY INFECTION (ARI)			
Incidence of acute respiratory infection (ARI) per 1,000 children under five years (new visits)	880	918	951
Incidence of Pneumonia (mild + severe) per 1,000 children under five years (new visits)	239	243	244
Proportion of severe Pneumonia among new cases	0.40	0.38	0.36
% of children under 5 with ARI who received antibiotics (50)*	41	42	41
DIARRHEA			
Incidence of diarrhea per 1,000 under five years children (new cases)	528	578	629
% of severe dehydration cases among children under five years (new cases)	0.26	0.27	0.36
% of children under 5 with diarrhea treated with Zinc and ORS (40)*	79	97	98
SAFE MOTHERHOOD			
% of pregnant women who received TT2	38	41	40
% of pregnant women who received TT2+	36	37	35
% of pregnant women attending first ANC among estimated number of pregnancies	83	89	86
% of pregnant women attending at least four ANC visits (80)*	53	55	59
% of pregnant women receiving IFA tablets or syrup during their last pregnancy (90)*	68	75	72
% of postpartum mothers who received Vitamin A supplements	56	57	53
% of institutional deliveries (40)*	44	45	50
% of deliveries conducted by a skilled birth attendant (60)*	44	45	50
% of deliveries by caesarian section (4.5)*	5.9	6.3	6.7
% of women who had first post natal care (PNC) visit among estimated live birth	56	55	59

INDICATORS	2068/69 (2011/12)	2069/70 (2012/13)	2070/71 (2013/14)
FAMILY PLANNING			
Contraceptive prevalence rate (CPR) (<i>unadjusted</i>) (67)*	43	45	45
CPR Method Mix – Condom	3.2	3.6	3.7
CPR Method Mix - Pills	3.1	3.3	3.1
CPR Method Mix - Depo	7.9	8.0	7.6
CPR Method Mix - IUCD	1.9	2.1	2.5
CPR Method Mix - Implant	1.9	2.2	2.4
CPR Method Mix - Sterilization	25.1	26.2	25.7
FEMALE COMMUNITY HEALTH VOLUNTEERS (FCHV)			
Total number of FCHVs (53,514)*	48,897	50,007	51,470
% of pills distributed by FCHVs among total distribution	48	51	53
% of diarrheal cases treated with ORS and Zinc by FCHVs among diarrhea cases in children under five years	58	62	64
% of ARI cases managed by FCHVs among ARI cases in children under five years	55	57	58
MALARIA / KALA-AZAR			
Annual blood slide examination rate (ABER) per 100	0.65	0.67	0.94
Annual parasite incidence (API) per 1,000 population at risk*	0.11	0.11	0.12
Clinical malaria cases	69,180	49,550	26,526
Incidence of Kala-azar per 10,000 population at risk	0.14	0.27	0.34
TUBERCULOSIS			
TB case finding rate (85)*	73	78	83
Treatment success rate (90)*	90	90	90
Sputum conversion rate	89	90	90
LEPROSY			
New case detection rate (NCDR) per 100,000 population	10.1	11.9	11.8
Prevalence rate (PR) per 10,000*	0.85	0.82	0.83
Disability rate Grade 2 among new cases	3.41	2.9	3.38
HIV/AIDS AND STI			
Cumulative HIV reported cases	20,583	22,994	23,977
CURATIVE SERVICES			
% of population utilizing outpatient (OPD) services*	76	88	79
% of population utilizing in-patient services*	9	9	9
% of population utilizing emergency services*	17	17	17
Bed occupancy rate	50.6	45.1	50.1
Average length of stay	3.2	3.2	3.3

Note: *These indicators are from NHSP-2, Results Framework; and the figures in parenthesis indicate target for 2015.

INTRODUCTION

1.1 BACKGROUND

This is the Annual Report of Department of Health Services (DoHS) for the fiscal year 2070/71 (2013/2014), and it is the 20th consecutive report of its kind. This report analyses the performance and achievements of Department of Health Services in the fiscal year 2070/71. This document not only focuses on the performance of the fiscal year 2070/71 but covers the following areas, which will be the basis for the analysis for actions to be taken to improve performance for the next year.

- Programme specific policy statements, including goals, objectives, strategies major activities and achievement,
- Programme specific indicators for the monitoring & evaluation of programme performance on a regular basis, and
- Problems/Issues/constraints and recommendation for actions to be taken in order to improve performance and target 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 / Centers and Section of DoHS, Central hospitals, and representatives from External Development Partners (EDPs) 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 2070/71 (2013/2014) 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 2070/71 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 improve their coverage and moderate on specific action plan to scale up the level of achievement and highlight the best performing region & districts to be replicated to achieve most gainful results.

- Interaction among regional health directorates, central hospitals, Department of Health Services, Department of Ayurveda, Department of Drug Administration, Ministry of Health & Population, and 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 by programme 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: (1) Administration Division, (2) Curative Services Division, (3) Policy, Planning and International Cooperation Division, (4) Public Health Administration and Monitoring and Evaluation Division, (5) Population Division, and (6) Human Resources and Financial Management Division.

There are five Centres with a degree of autonomy in personnel and financial management (1) National Tuberculosis Centre (NTC), (2) National Health Training Centre (NHTC), (3) National Public Health Laboratory (NPHL), (4) National Centre for AIDS and STD Control (NCASC) and (5) National Health Education, Information and Communication Centre (NHEICC). 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 six Divisions: (1) Management Division with infrastructure, planning, quality of care, management information system and free medication & treatment for very severe disease to impoverished Nepalese citizens. (2) Child Health Division covering EPI, Nutrition and CB-IMCI and Newborn care. (3) Family Health Division with the responsibility of reproductive health care, including safe motherhood and neonatal health, family planning and Female Community Health Volunteers (FCHVs). (4) Logistics Management Division covers procurement, supplies and management of logistics, equipment and services required by DoHS and below level (5) Epidemiology and Disease Control Division with the responsibility of controlling epidemics, pandemic and endemic diseases as well as treatment of animal bites. (6) Primary Health Care Revitalization Division with the responsibility of carrying out activities for primary health care (as shown in Figure 1.1).

Major functions of DoHS include:

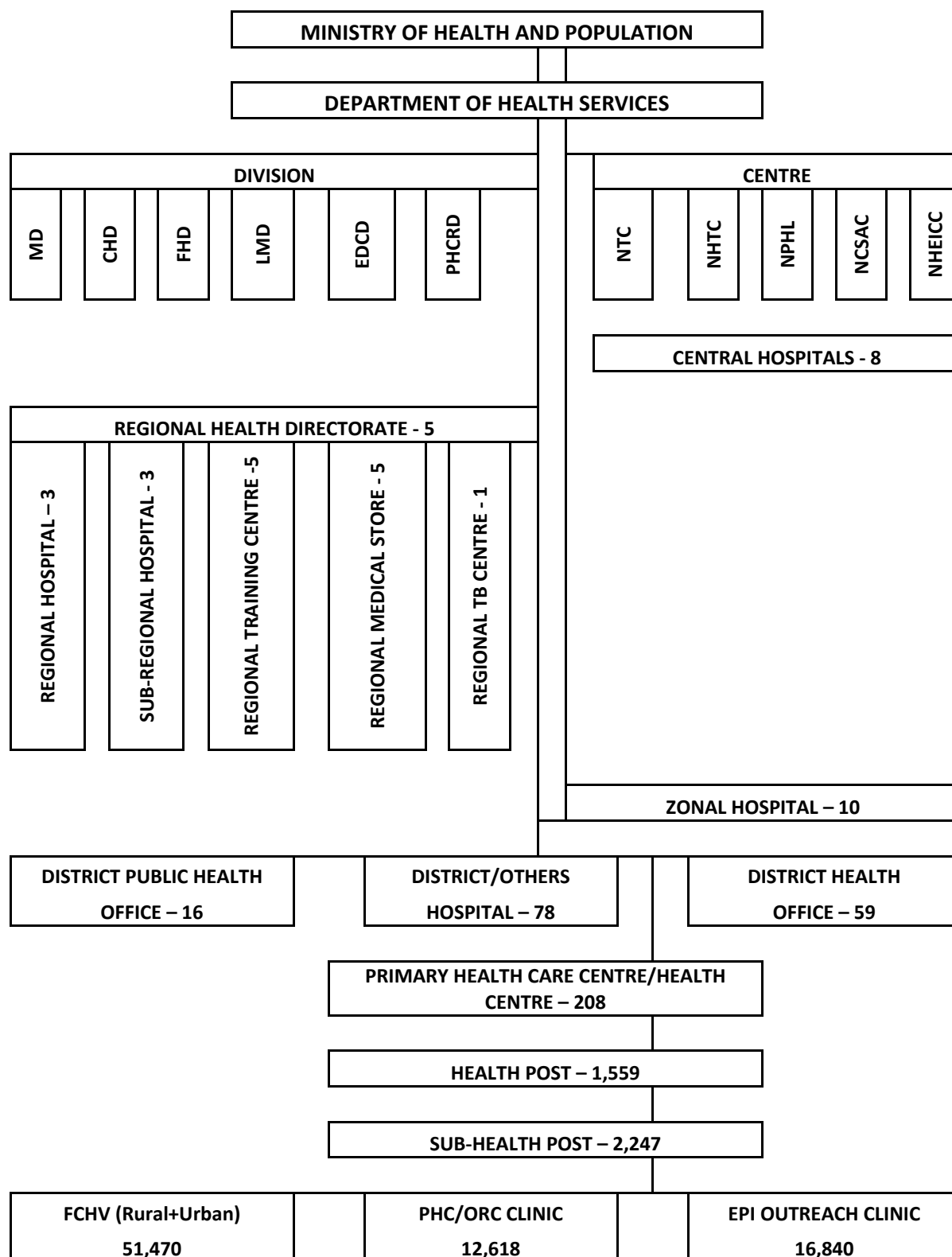
- Provide GoN with necessary technical advice in formulating health related policies, develop and expand health institutions established in line with these policies;
- Determine requirement of human resource for health institutions and develop such human resource by preparing short and long term plans;
- 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 free medication & treatment for very severe disease: Cancer, Heart, Alzaimers and Parkinsons, Head and Spinal injuries and Renal failure (Kidney Disease) to impoverished Nepalese citizens.
- 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. Fifty nine districts are managed by the District Health Office (DHO), whereas the remaining sixteen 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 public service delivery outlets in the country include 2,247 SHPs, 1,559 HPs, 208 PHCC/HC, 78 district/other hospitals, 10 zonal hospitals, 3 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 PHC/ORC 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)



Source: HMIS, 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); Logistics 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 one 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 Monitoring and Evaluation (M&E) program of health sector, Chapter eight presents programs of other departments (Drug Administration (DDA), Ayurveda DoA) and Homeopathic 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 major activities carried out in the last fiscal year 2070/71 by different programs; Annex two shows the program targets for next fiscal year 2071/72; and Annex three provides the raw and analyzed data by health indicators of different programmes disaggregated data by ecological, development regions and districts.

Child Health Programme

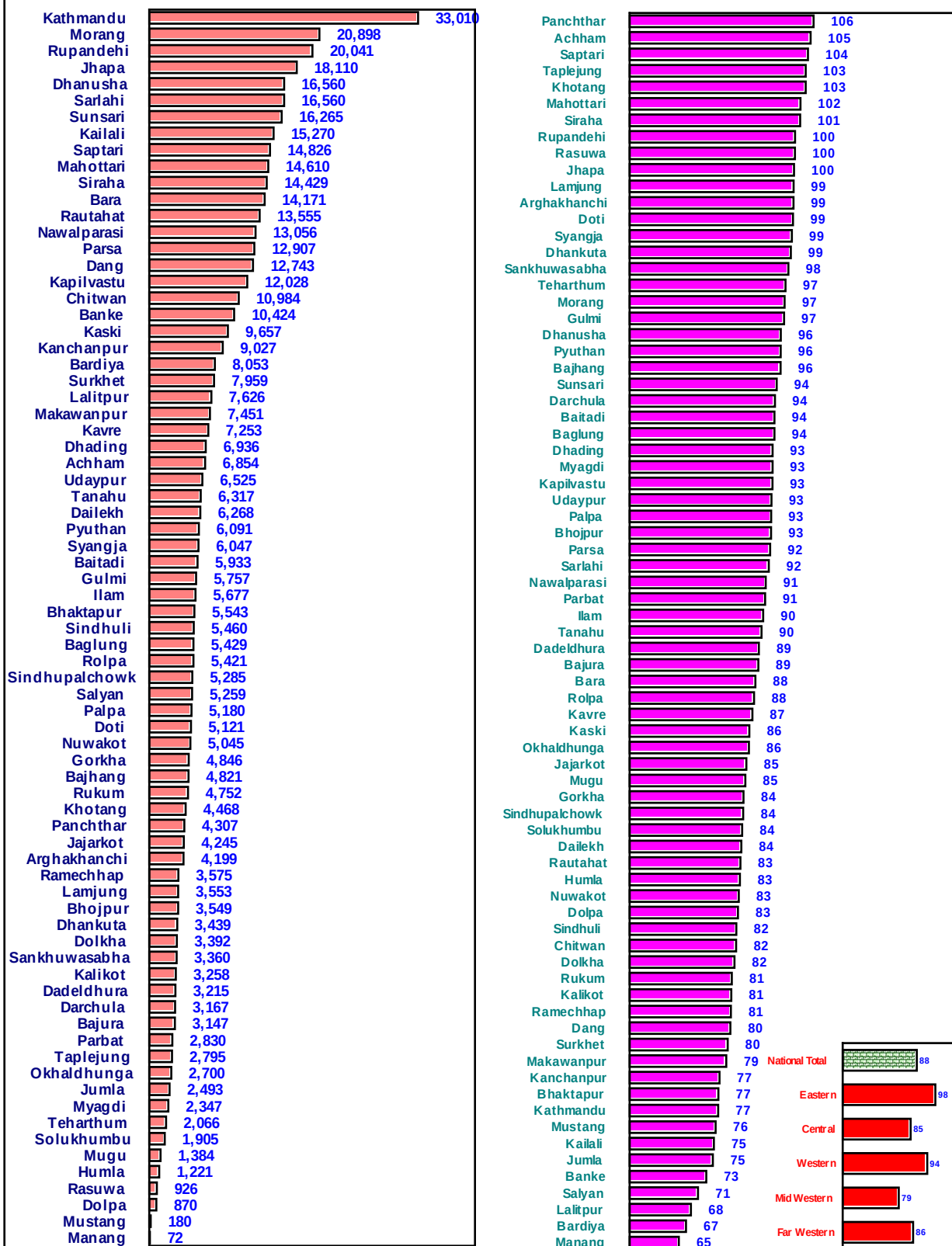
2.1	Immunization -----	6
2.2	Nutrition-----	20
2.3	CB-IMCI and Newborn Care-----	39

Measles vaccination & coverage

Fiscal Year 2070/71 (2013/2014)

No. of infants immunized

Coverage



Source: HMIS

CHILD HEALTH

2.1 National Immunization Programme

1. BACKGROUND

National immunization program is the priority 1 (P1) program. Since the inception of immunization program (Expanded program on immunization 2034 BS) to the date it has been an established and successfully public health intervention. Nepal is one of the countries recognized for the well functioning immunization system. The accessibility of immunization has reached to the 97% population and serves equally, successfully to the poor and rich, also does not discriminate child's sex. Currently ten antigens (*IPV added in RI in 2014, thus totalling 11*) provided through the routine immunization. The contribution of immunization in achieving the MDG 4 goal is immense

The national immunization program has the cMYPoA for 2011-16 aligned with GIVS and GVAP with cost estimated for identified activities for each year. Each year annual activities are planned (new and innovative) in advance based on the activities listed in cMYP.

Nepal has achieved polio free status in 27th March 2014, sustained maternal and neonatal tetanus elimination since 2005, and Japanese encephalitis is in control status and conducting measles case based surveillance to meet the target of elimination by 2019. Measles elimination strategy was developed; partners (new and existing stakeholders) to work for measles elimination are on board.

Immunization section of Child Health Division, DoHS has the lead role in identification, implementation and monitoring the immunization activities at National level. The Regional Health Directorate (RHD) which continuously monitors district immunization performances makes supervisory visit to increase the performances and also helps in implementation immunization activities, validates the information through conduction of DQSA, provides feedback to the districts. District Health Offices which implement the immunization activities through the health facilities under them at VDC and municipalities level are reportable to RHDS, CHD.

Immunization services are delivered through static immunization sessions (clinic) in the health facilities, outreach sessions (established at different locations in VDC in consensus of local leaders, stakeholders and health facilities staffs) and are the main outlets of service delivery. Mobile clinics designed especially for geographically remote districts and health workers provide immunization services for days, until all the targets are not immunized. The sessions are established in the way that all the targets have better access for the service and sites are usually 3-5 in a VDC but may be more municipalities. Almost 16,000 immunization sessions held each month and 1, 92,000 sessions per annum nationwide and are delivered through different types of health facilities such as Government and Private health facilities or Hospitals, NGO/INGO clinics and medical colleges in urban areas.

After the end of immunization sessions, the health facilities generate data on usage rate of vaccine (total vaccine doses given to the target population) and expressed as coverage. Generally once the targeted population enrolled for vaccination is assumed to complete all scheduled doses of vaccine, if does not, is calculated as dropout rate. Knowing vaccine wastage rate is important because this rate is used during vaccine estimation for procurement and helps to know how effectively multi dose vial policy has been practiced. Reports on these indicators are collected through HMIS section of Management Division in DoHS. HMIS collects and analyzes this information and sends to immunization section of CHD for review and feed back to the districts. Child Health Division receives the information on VPD surveillance through HMIS but same is reported through WHO/IPD networks

after in-depth investigation on Acute Flaccid Paralysis Measles like illnesses, Maternal and Neonatal Tetanus and Acute Encephalitis Syndrome. Sentinel sites are established throughout reports to field offices of WHOIPD and DHO weekly the VPD cases, if the cases are nil even then the health facilities report as there are zero cases.

2. GUIDING DOCUMENTS OF NATIONAL IMMUNIZATION PROGRAM

2.1 Nepal Health Sector Support Program- II (NHSP IP II):

NHSP-2 focuses on increasing access and utilisation of essential health care services, especially to reduce disparities between the wealthier and the poor, vulnerable and marginalised populations. It has given high priority for immunization program.

2.2 Comprehensive Multi Years Plan of Action (2011- 2016)

The comprehensive multi-year plan (cMYP) is a five years plan (2011-16) of national immunization program which includes the goal, objectives, strategies and activities are reflected with their time frame of implementation by the incurring costs of each activity. Each year review of cMYP is done and revision made so that the objectives mentioned could be met. The cMYP has been aligned with various policy documents on national immunization programs, the Millennium Development Goals (MDGs), Global Immunization Vision and Strategy (GIVS) and World Health Assembly (WHAs) resolutions and lastly vaccine action plan.

Goal, Objectives and milestones of cMYP 2011-2016 are as follows:

2.2.1 GOAL: To reduce child mortality, morbidity and disability associated with vaccine preventable diseases.

2.2.2 Objectives and strategies

Objective 1: Achieve and maintain at least 90% vaccination coverage for all antigens at national and district level by 2016

Key strategies:

- Increase access and utilization to vaccination by implementing RED strategies in every district
- Enhance human resources capacity for immunization management
- Strengthen immunization monitoring system at all levels
- Strengthen communication, social mobilization, and advocacy activities
- Strengthen immunization services in the municipalities

Objective 2: Ensure access to vaccines of assured quality and with appropriate waste management

Key strategies:

- Strengthen the vaccine management system at all levels

Objective 3: Achieve and maintain polio free status

Key strategies:

- Achieve and maintain high immunity levels against Polio by strengthening routine immunization and conducting high quality national polio immunization campaigns.
- Respond adequately and timely to outbreak of poliomyelitis with appropriate vaccine
- Achieve and maintain certification standard AFP surveillance

Objective 4: Maintain maternal and neonatal tetanus elimination status**Key strategies:**

- Achieve and maintain at least >80% TT2+ coverage for pregnant women in every districts
- Conduct Td follow up campaigns in high risk districts
- Expand school based immunization program
- Continue surveillance of NT

Objective 5: Initiate measles elimination**Key strategies:**

- Achieve and sustain high population immunity to reduce measles incidence to elimination level
- Investigate all suspected measles like outbreaks with program response
- Use platform of measles elimination for Rubella / CRS control
- Continue case-based measles surveillance

Objective 6: Accelerate control of vaccine-preventable diseases through introduction of new and underused vaccines**Key strategies:**

- Introduction of new and under-used vaccines (rubella, pneumococcal, typhoid, rota) based on disease burden and financial sustainability

Objective 7: Strengthen and expand VPD surveillance**Key strategies:**

- Expand VPD surveillance to include vaccine preventable diseases of public health concern.
- Strengthen and expand laboratory support for surveillance.

Objective 8: Continue to expand immunization beyond infancy**Key strategies:**

- Consider for booster dose of currently used antigen based on evidence and protection of adult from potential VPDs.

Table 1: MILESTONES OF NIP 2011-2016 are as follows:

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 district 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 WPV	Zero cases of WPV	Zero cases of WPV	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	-

Objectives	2011/12	2012/13	2013/14	2014/15	2015/16
5. Initiate 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 a measles incidence of less than one confirmed case per million population per year		
6. Expand VPD surveillance with possibility of integration	Continue penumo and rota sentinel sites, initiate typhoid & cholera sentinel surveillance	Continue penumo, typhoid, cholera and rota sentinel sites, initiate CRS surveillance, conduct HepB sero survey	Continue penumo, typhoid, cholera, rota & CRS sentinel surveillance	Continue penumo, typhoid, cholera, rota & CRS sentinel surveillance	Continue penumo, typhoid, cholera rota & CRS sentinel surveillance
7. Accelerate control of vaccine-preventable diseases through introduction of new and underused vaccines	-	Introduce rubella vaccine into RI	Introduce pneumococcal vaccine into RI, Consider HepB birth dose	-	Introduce Rota vaccine into RI
8. Continue to expand immunization beyond infancy	Expand school based Td vaccination in 2 additional districts with school health program, 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 districts

3. TARGET POPULATION

- 3.1 Under 1 years of age for BCG, DPT-HepB-Hib, OPV, and Measles/ Rubella vaccine.
- 3.2 12-23 months children for JE vaccine.
- 3.2 Pregnant women for Tetanus Toxoid containing (Td) vaccine.

4. NATIONAL IMMUNIZATION SCHEDULE.

TABLE 2: Immunization Schedule

Immunization Schedule		
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 - Hep B-Hib	3	6, 10, and 14 weeks of age
Measles- Rubella	1	9 months of age
Td	2	Pregnant women (2 doses of Td)
JE	1	12-23 months of age

5. ANALYSIS OF ACHIEVEMENTS BY MAJOR ACTIVITIES

5.1.1 MAJOR ACTIVITIES CARRIED OUT IN FY 2070 /71 (2013/2014)

- 5.1.1.1 Review of immunization micro plan in 75 districts
- 5.1.1.2 Reaching every child for Routine Immunization scheduled antigens through FCHV in 32 districts
- 5.1.1.3 Training to all Health workers (especially involved in immunization) on new vaccines and safe injection practice in 75 districts
- 5.1.1.4 Training materials (pen drive, PPT slides and flex chart) production, printing on new vaccine and safe injection training
- 5.1.1.5 Appreciative Inquiry for resource mobilization in immunization 12 districts
- 5.1.1.6 Data Quality Self Assessment in 15 districts through RHDs
- 5.1.1.7 Analysis of expenditure in immunization in 3 districts
- 5.1.1.8 Production, printing of guideline on pneumococcal conjugate vaccine(PCV)
- 5.1.1.9 Mid level managers training 2 batches (20 participants/batch)
- 5.1.1.10 AEFI cases' investigation and management
- 5.1.1.11 Freeze tag procurement
- 5.1.1.12 Advocacy of immunization fund establishment
- 5.1.1.13 Polio free certification (SEARO) and celebration

5.1.2 TARGET vs. ACHIEVEMENT, FY 2070/71

15.1 Immunization coverage by antigens doses FY 2070/71

TABLE 3: Immunization coverage by antigens doses FY 2070/71

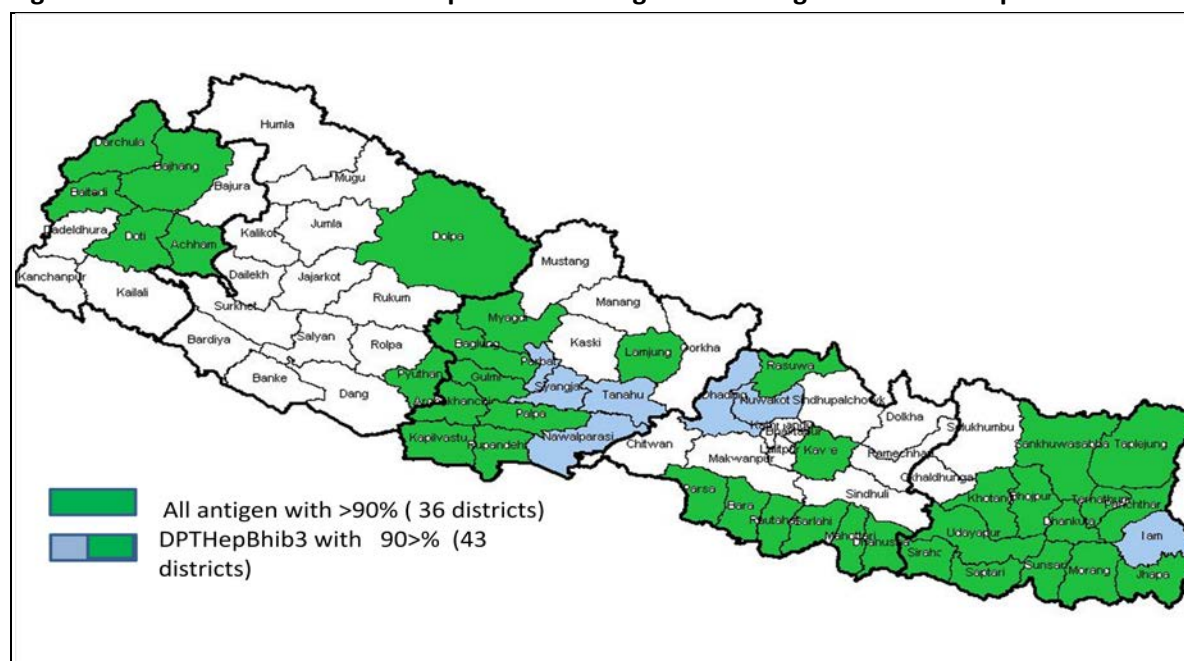
SN	Antigens	Target population	Targets	Achievement	% Achieved
1	BCG	Infants	628,824	621,896	98.9
2	DPT-Hep B Hib 1	Infants	628,824	567,980	90.3
3	DPT-Hep B Hib 2	Infants	628,824	556,966	88.6
4	DPT-Hep B Hib 3	Infants	628,824	576,797	91.7
5	Polio1	Infants	628,824	568,134	90.3
6	Polio2	Infants	628,824	557,316	88.6
7	Polio3	Infants	628,824	575,445	91.5
8	Measles/Rubella	Infants	628,824	554,668	88.2
9	JE	12-23 Month	353,460	267,736	75.7
10	Td 2& Td2 +	Pregnant women	761,661	573,532	75.3

Source: HMIS/MD and EPI/CHD, DoHS

Above table shows that, the national coverage of BCG is the highest of all antigens indicates that almost 99% children have access in immunization services. The coverage of first dose of DPT-HepB-Hib1, OPV1 and DPT-HepB-Hib 3, OPV 3 coverage are more than 90% while DPT-HepB-Hib2 and OPV 2 remained lower than 90%. The measles/rubella vaccine coverage is stagnant to 88.2%. The Td2+ coverage (Td2 and Td2+) coverage is 75.3%. The JE coverage (31 districts) is 75.7%.

5.1.3 EQUITY IN IMMUNIZATION COVERAGE:

Figure 1: District with > 90% DPT-HepB-Hib3 coverage for all antigens and DPT-HepB-Hib3

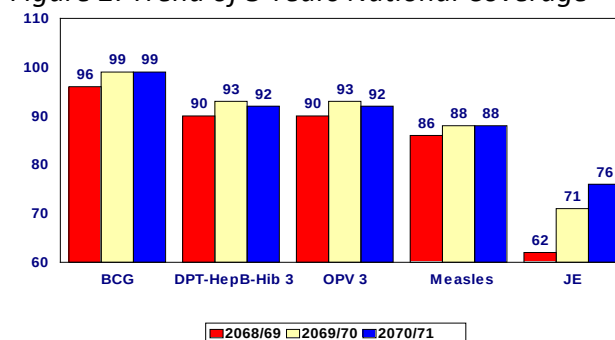


The map above shows that coverage of DPT-HepB-Hib3 is more than 90% in forty three (43) districts and coverage for all antigens more than 90% in 36 districts (Figure 1). As stated in milestone in cMYP 2011-2016 to achieve more than 90% coverage of DPT-HepB-Hib3 in 60 districts and of all antigens in 50 districts has not been achieved.

5.1.4 TREND OF IMMUNIZATION COVERAGE BY REGION FOR LAST 3 YEARS (2068/69-2070/71)

Figure 2 shows that the three years coverage data of BCG, MR shows that there is either increase or decrease for 2 years however certainly increased than 2068/69 while the coverage of DPT-HepB-Hib 3 and OPV 3 is less than 1% comparing to previous year. JE coverage has increased by 5% (Figure 2)

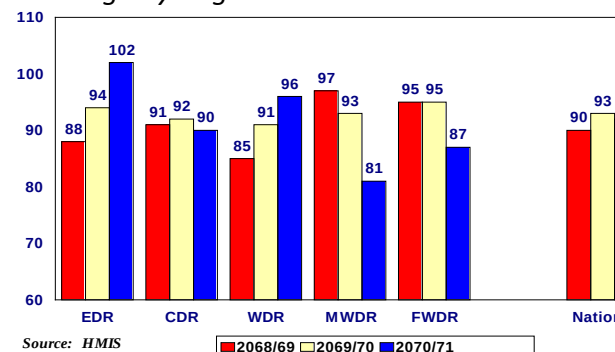
Figure 2: Trend of 3 Years National Coverage



Source: HMIS

Figure 3 shows that the Region wise DPT-HepB-Hib3 coverage has increased in EDR by 8%, WDR by 5% but it has decreased in CDR by 2%, MWDR 12% and FWDR by 8% compare to previous year

Figure 3: Trend of 3 Years DPT-HepB-Hib3 Coverage by Regions



Source: HMIS

5.1.5 ACCESS AND UTILIZATION OF IMMUNIZATION SERVICE:

Table 4: Districts Categorized based on the coverage of DPT-HepB-Hib3 and drop out 2070/71

Category 1 (less Problem) Low Drop-Out (<10%) High Coverage (≥80%)	Category 2 (Problem) High Drop-out (≥10%) High Coverage (≥80%)	Category 3 (Problem) Low Drop-out(<10%) Low Coverage(<80%)	Category 4 (Problem) High Drop-out(≥10%) Low Coverage(<80%)
Bhojpur, Dhankuta, Ilam, Jhapa, Khotang, Morang, Okhaldhunga, Panchthar, Sankhuwasabha, Saptari, Siraha, Solukhumbu, Sunsari, Taplejung, Terhathum, Udayapur, Bara, Chitwan, Dhading, Dhanusha, Dolkha, Kavre, Mahottari, Nuwakot, Parsa, Rasuwa, Rautahat, Sarlahi, Sindhuli, Sindhupalchowk, Arghakhanchi, Baglung, Gorkha, Kapilvastu, Kaski, Lamjung, Myagdi, Nawalparasi, Palpa, Parbat, Rupandehi, Syangja, Tanahu, Banke, Dailekh, Dang, Dolpa, Mugu, Jajarkot, Jumla, Kalikot, Pyuthan, Rolpa, Rukum, Surkhet, Achham, Baitadi, Bajhang, Bajura, Dadeldhura, Darchula, Doti (62 Districts)	Gulmi, Humla (2 districts)	Bhaktapur, Kathmandu, Lalitpur, Makwanpur, Ramechhap, Manang, Mustang, Bardiya, Salyan, Kailali, Kanchanpur (11 districts)	

Table 4 above shows 62 districts falls in Catagory-1, 2 districts in Category -2, 11 districts in Category -3 and there is no districts in Category - 4 in 2070/71.

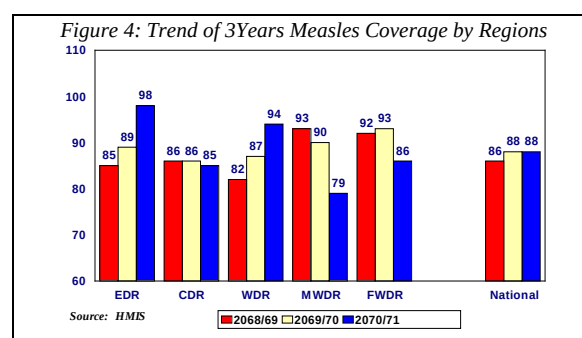
(Categorization has been done on the basis of 80% coverage of DPTHePBHib1 (access) and 10% drop out of DPTHePBHib1 VS DPTHePBHib3.)

5.1.6 NUMBER OF UN-IMMUNIZED CHILDREN IN FISCAL YEAR 2070/71:

The total un-immunized children against DPT-HepB-Hib3 52,060.0 in FY 2070/71 compare to 45,510 in FY 2069/70 which indicates increased number of unimmunized children.

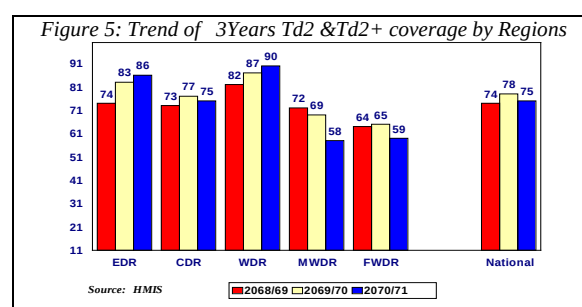
5.1.7 MEASLES-RUBELLA COVERAGE:

The measles- Rubella1 coverage is 88% for last 2 years (2070/71 and 2069/70). The Highest coverage (97.5%) in Eastern Development Region in FY 2070/71 and the lowest (78.7%) is in Mid Western Development Region (Figure 4).



5.1.8. Td2 and Td2+ COVERAGE:

Fig 5 shows the coverage of Tetanus Toxoid and low dose of diphtheria (Td) containing vaccine. The coverage of Td has increased in EDR and WDR by 3% but has decreased in MWDR by 11% and 6% in FWDR and by 2% in CDR compare to previous year. The coverage of Td2 and Td2+ is less than 80% for years, need accelerated activities.



5.1.9 DROP-OUT RATES:

Figure 6 shows the dropout rate of BCG Vs Measles- Rubella and DPT-HepB-Hib and OPV 1 VS 3 for last 3 years-2068/69, 2069/70 and 2070/71. The dropout BCG VS MR is close to 11% while dropout rate of DPT-HepB-Hib and OPV 1 VS 3 is negative compare to 1% dropout rate in last fiscal year.

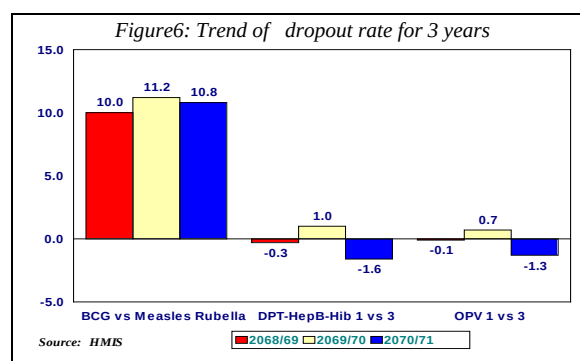
**5.1.10 VACCINE WASTAGE RATE:**

Figure 7 shows that the wastage rate of all antigens are either increased or remained same in 2070/71 compare to previous year except for JE. The wastage rate of DPT-HepB-Hib and OPV are 22.8 and 24.5% respectively compare to 19.5% and 22.8% in previous year which is almost 7% higher than acceptable wastage rate of 15%.

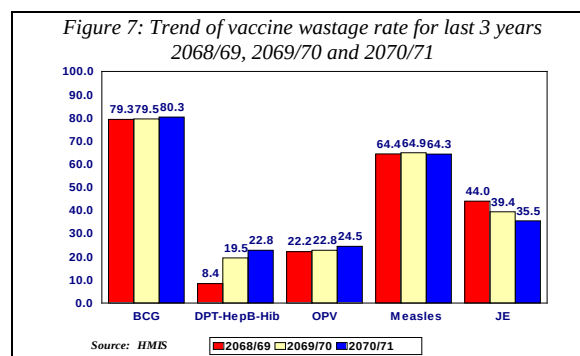
**6. SUPPLEMENTARY IMMUNIZATION ACTIVITIES****6.1 NATIONAL IMMUNIZATION DAYS FOR POLIO ERADICATION:**

Figure 8: Coverage of National Immunization campaign for Polio 1997 to 2014

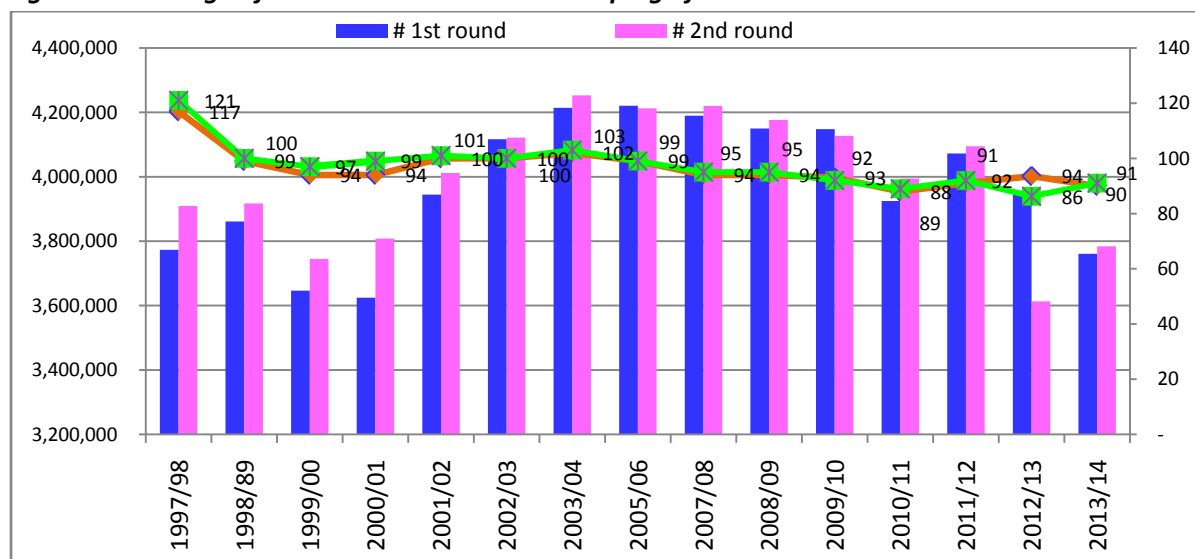


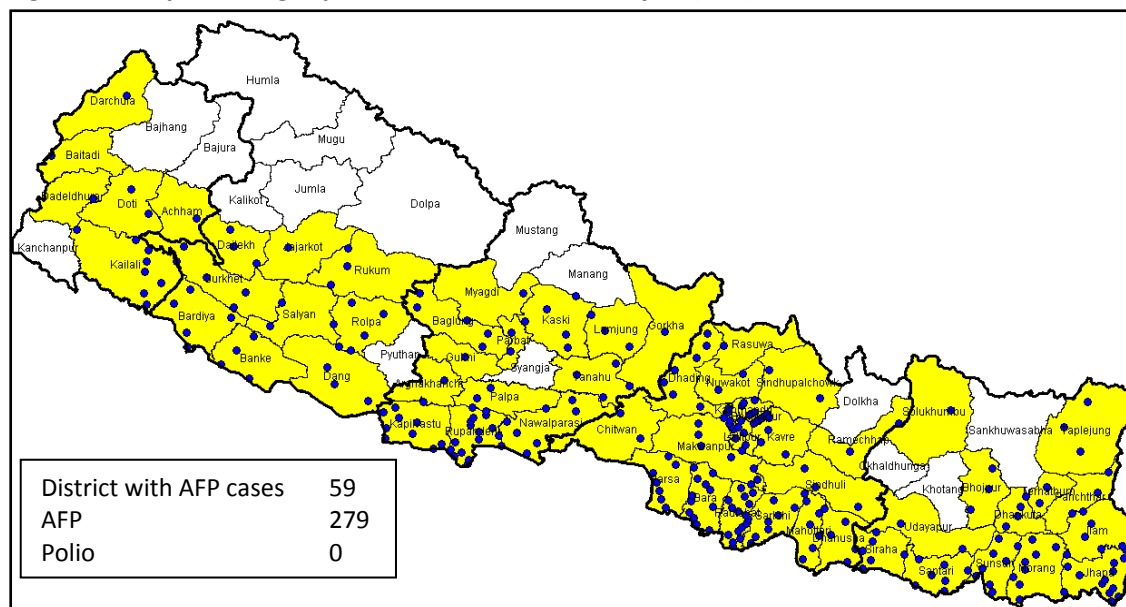
Figure 8 shows, Polio (NID) campaign coverage from 1997/1998 to 2013/2014 in number and percentage of children immunized in each round. The NID coverage in both round remained about 90% while the number of children immunized were less than previous years due to the sharp fall in target population

7. VACCINE PREVENTABLE DISEASE SURVEILLANCE

7.1 ACUTE FLACCID PARALYSIS SURVEILLANCE:

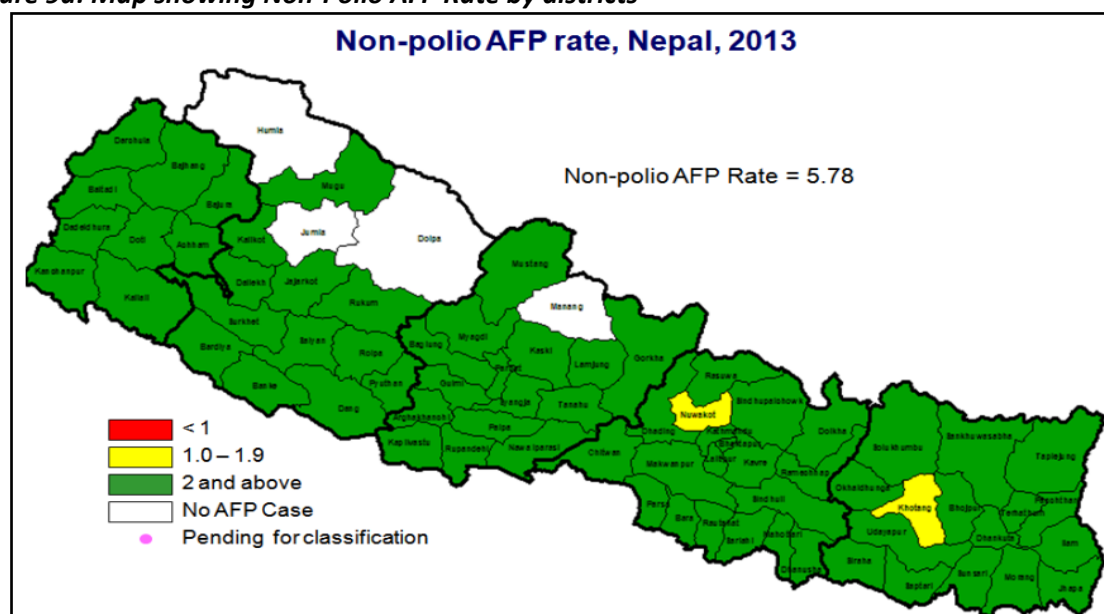
Acute flaccid paralysis surveillance network has been expanded throughout the country and includes all hospital (public, private, medical colleges), selected PHC, HP feasible for VPD surveillance, totalling 624 zero reporting sites and 89 active surveillance sites.

Figure 9: Map showing reported Acute Flaccid Paralysis (AFP) in FY 2070/71



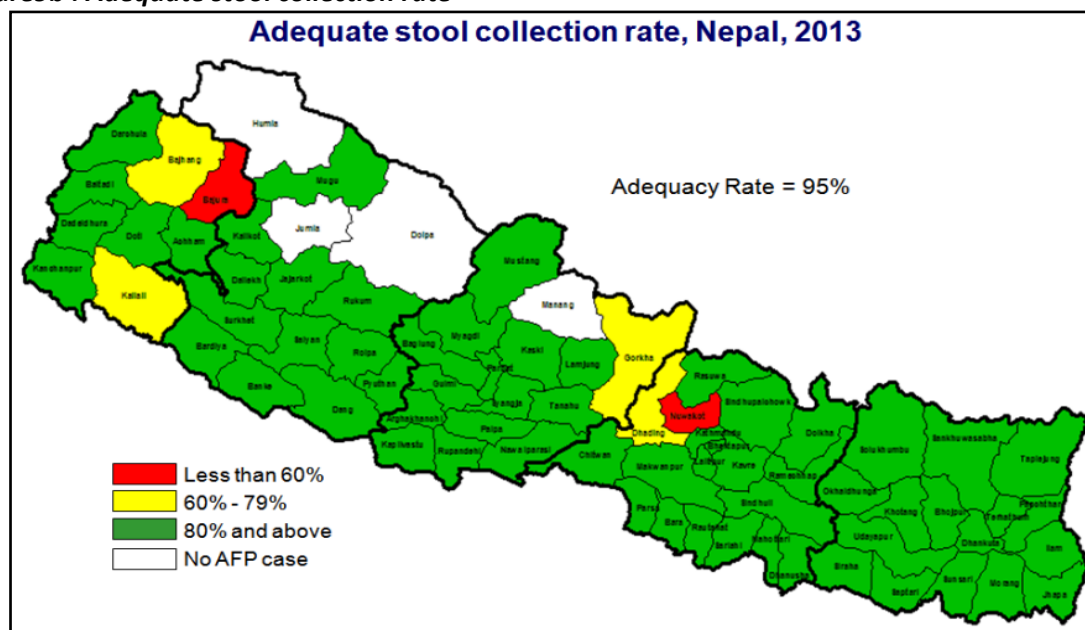
AFP cases have been reported from 59/75 districts in 2070/71. Total 279 AFP cases have been reported during the period. 16 districts with sparsely populated have not reported AFP cases. (There should be 50,000 below 15 yrs population for 1 AFP).

Figure 9a: Map showing Non-Polio AFP Rate by districts



The non AFP rate is the most sensitive indicators of AFP surveillance (polio eradication initiatives) and map shows that most of the districts have achieved certification level non AFP rate.

The non- polio AFP rate at national level is 5.78 (standard 2 per 1, 00,000 below 15 yrs of age population). Most of the district's non AFP rate is more than 2 except 6 districts where the population is sparse.

Figure9b : Adequate stool collection rate

Adequate stool collection rate is very critical criteria of AFP surveillance. The map above shows that only 6 districts among the AFP reported districts have not met this criterion. Over the entire adequate stool collection rate is 95% .i.e. meets the certification level.

7.2 POLIO FREE CERTIFICATION

Nepal is polio free since August 2010 but officially SEAR (South East Asian Region) member countries were declared polio free in 2014 after 3 years sustenance of polio free in all member countries. *(Thus a quarter of the world population lives in the 11 countries of the Region – Bangladesh, Bhutan, Democratic People’s Republic of Korea, India, Indonesia, Maldives, Myanmar, Nepal, Sri Lanka, Thailand and Timor-Leste. With this certification on 27 March 2014, 80% of the world’s population now lives in polio-free certified Regions.)*



7.2 MEASLES LIKE ILLNESS SURVEILLANCE:

Figure 10: line diagram showing Confirmed Measles & Rubella Cases, Nepal 2003-2014

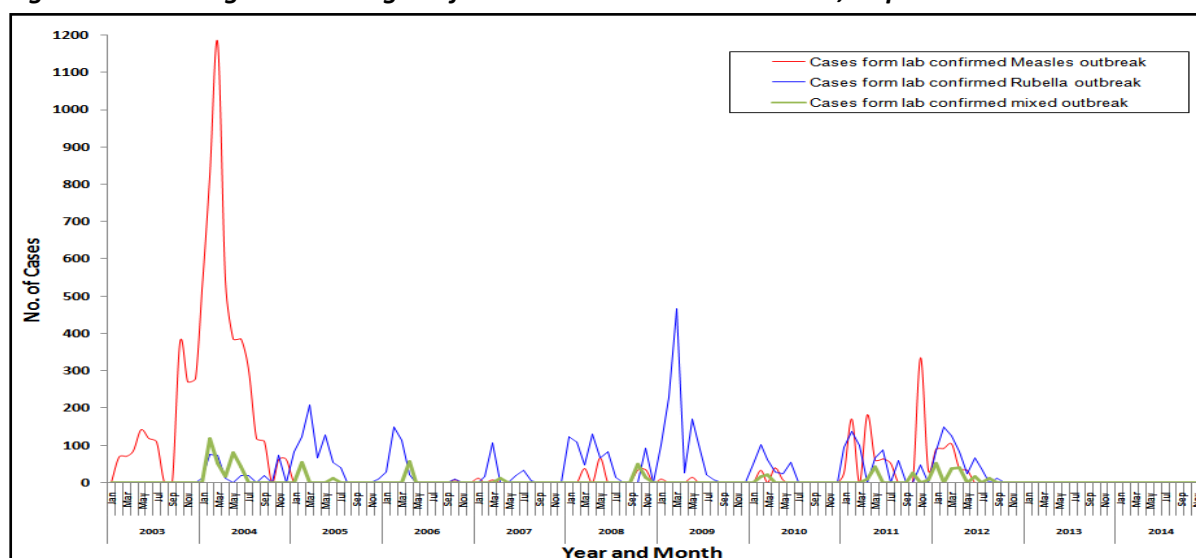


Figure 10 shows laboratory confirmed measles, rubella cases from 2003 to 2014. Successful completion of catch-up (2004/05), Follow up measles campaigns (2008) and catch up campaign of measles rubella (2011/12) have remarkably reduced measles and rubella cases by 2013/14. The incidence rate of measles and rubella remained 0.26/1,000,000 and 0.06/100,000 respectively in FY 2070/2071.

7.3. ACUTE ENCEPHALITIS SYNDROME SURVEILLANCE:

AES surveillance is done through the same AFP surveillance network and the JE cases have reduced dramatically in the JE endemic districts after the mass campaign which was initiated in 2006 and completed in 2011 covering 31 districts.

Figure 12: Trend of reported AES and Lab confirmed JE cases

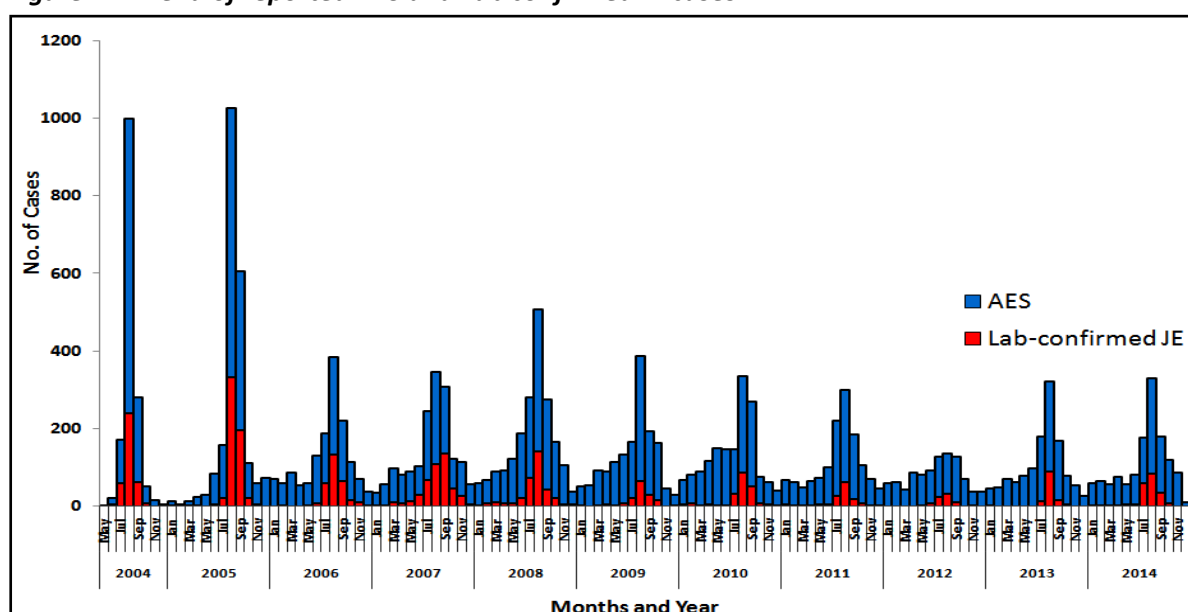


Figure 12 shows the trend of reported AES and laboratory JE cases since 2004 to 2014. Above figure shows that the JE cases have reduced and has been detected mostly in early July and decrease by September.

Figure 13: map showing reported AES and laboratory confirmed JE cases by districts in FY 2070/2071

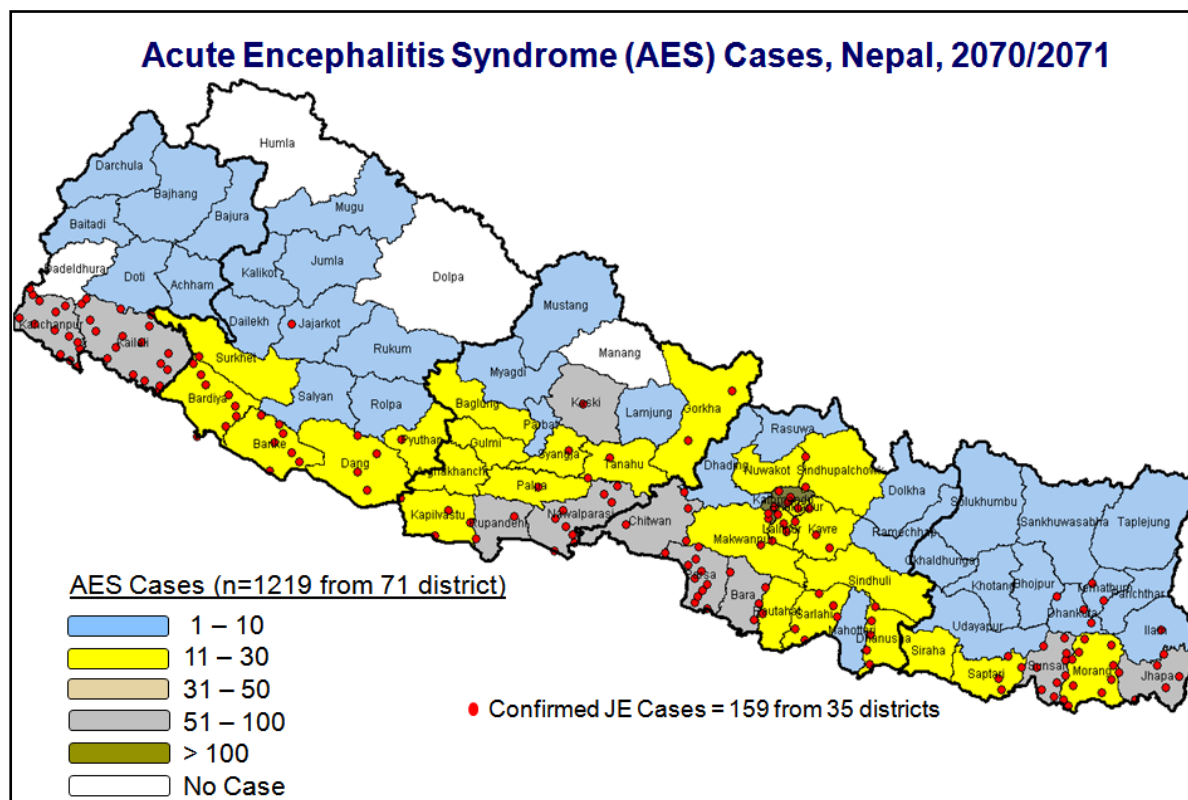


Figure 13 shows that 71 districts have reported AES cases and only 35 districts has 159 laboratory JE cases.

7.4. NEONATAL TETANUS SURVEILLANCE:

Figure 14: Neonatal tetanus cases

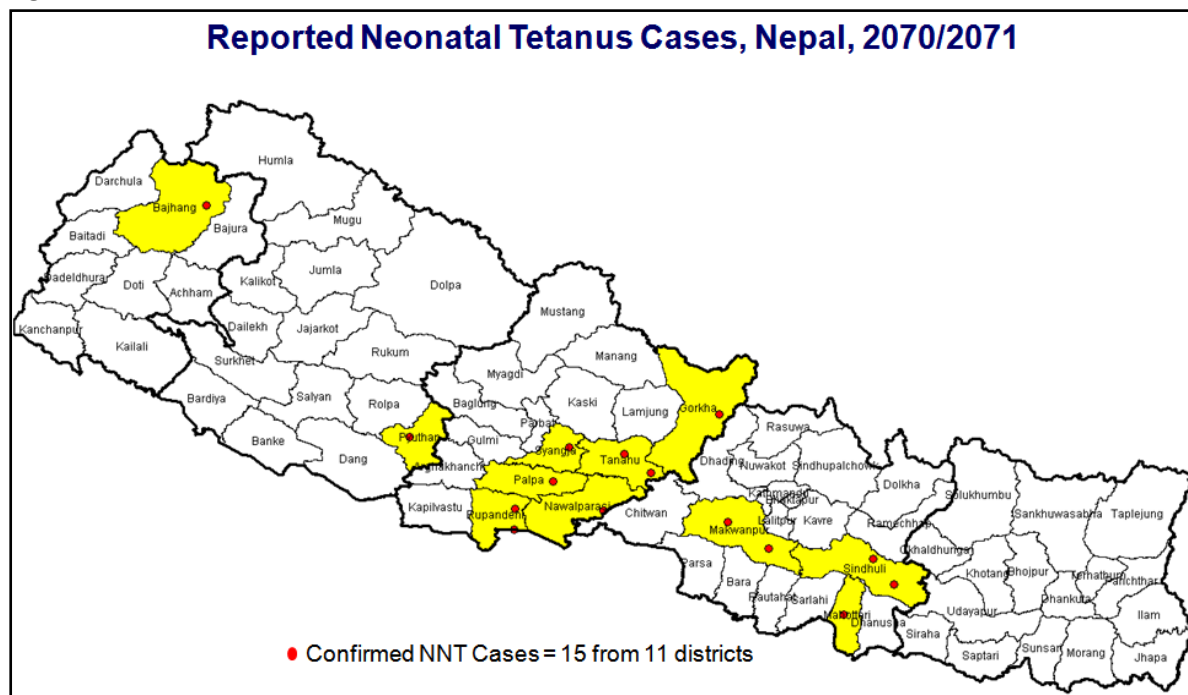
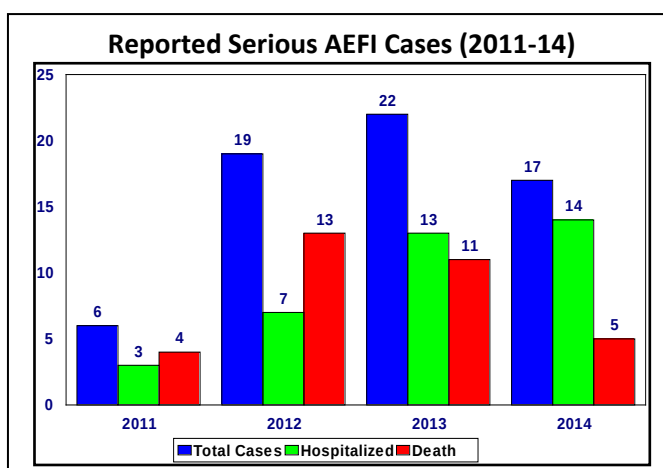


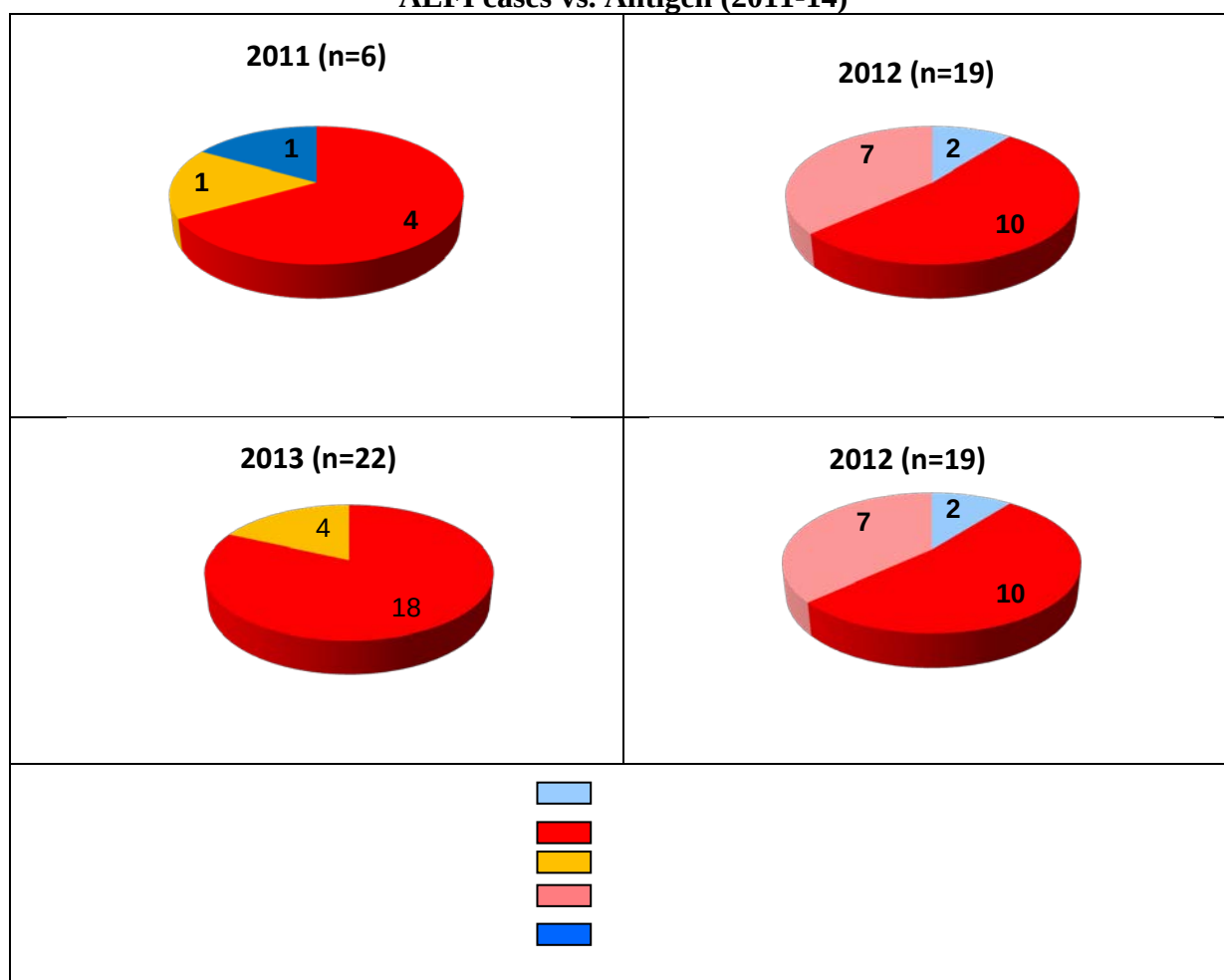
Figure 14 shows neonatal tetanus cases distribution by the districts. Total of 15 NT cases were reported from 11 districts in 2070/71. Nepal has sustained MNT elimination status validated in 2005 (less than 1 case per 1000 live births).

8. ADVERSE EVENTS FOLLOWING IMMUNIZATION

Surveillance of Adverse Events Following Immunization (AEFI) is in place throughout the country since 2004. In 2070/71 22 AEFI cases were reported from 14 districts compare to total 19 AEFI cases from 12 districts. All the cases were fully investigated and causality association was done by the central AEFI committee members. Out of total 22 AEFI cases 18 were related with DPT/HepB/Hib and 4 with OPV. There were 12 deaths and all were associated with DPT/HepB/Hib.



AEFI cases vs. Antigen (2011-14)



9. PROBLEMS/CONSTRAINTS AND ACTIONS TO BE TAKEN

Regional performance review meeting in 2070/71 identified the following problems and constraints and recommended action to be taken at different levels of immunization delivery system.

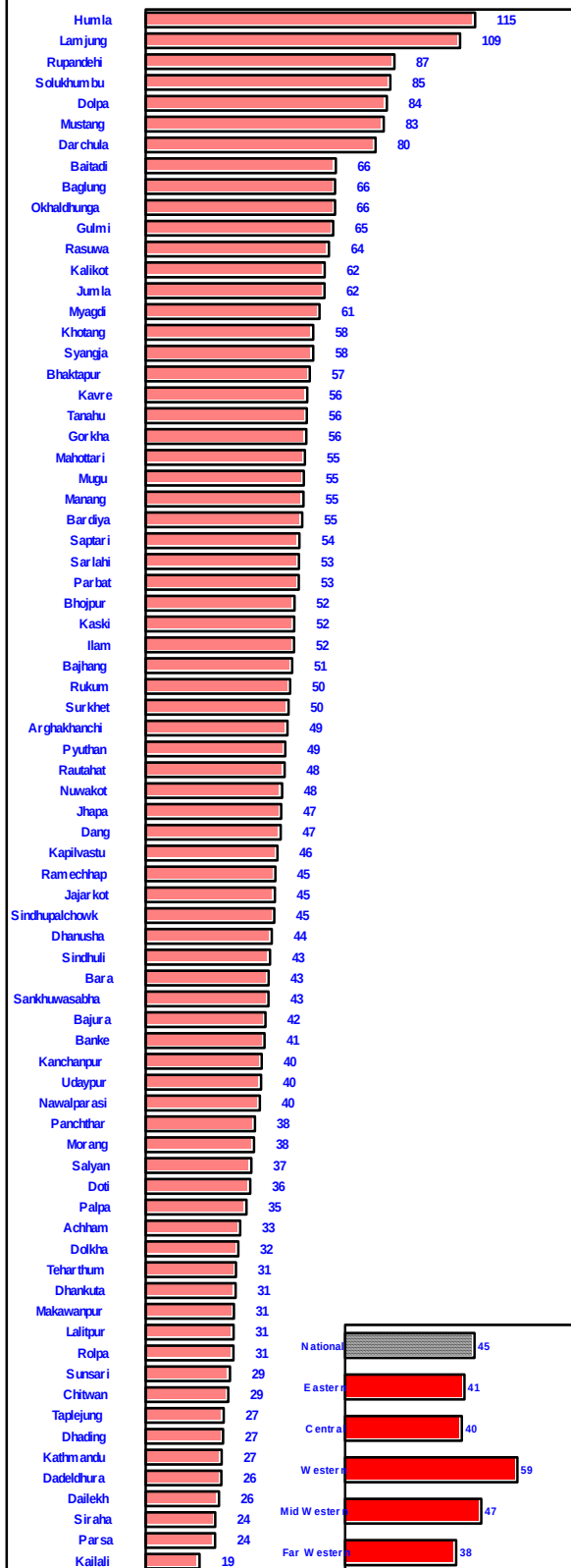
Problems/Constraints	Action to be taken	Responsibility
Quality of immunization data: Under and over reporting	- Strengthen supportive supervision at all levels - District level - Periodically review the reported data with local health facilities- HMIS31, HMIS 5. - Increase supervisory visit to the health facilities where under and over reporting has been a problem - Central level - Provision of DQSA to the RHDS and districts - Supervision and feedback	Health facility / District / Region and CHD/HMIS
Effective implementation of existing micro plan	- Update existing micro plan at health facility level focussing the inclusion of high risk population - District - Ensure the updated micro plan available at health facilities shared with all relevant stakeholders	Health facility/ Districts health office
Inventory update	- Update inventory of cold chain equipments and cold chain capacity - Update monthly inventory on vaccine, syringes, diluents etc (use of stock control register) - Use the vaccine/diluents/syringe requisition form at all level (vaccine/syringes/diluents need= maximum stock – stock at hand)	Districts
Immunization month	- Districts should follow the immunization month guideline and plan accordingly - Give more emphasis to reach the unreached based on prioritization. Increase the access in Cat 3 and 4 VDCs/municipalities and reduce the dropout rate in Cat 2 VDCs - Report the immunization month's achievement separately to see the additionality of immunization performance of immunization month	Districts
Poor improvement in Cold Chain and Vaccine management	- Effective implementation of existing Vaccine Management Improvement Plan/effective cold chain management - Restructuring / Reorganization of Cold Chain management system	LMD/CHD MoHP
Human Resource	- Provision for alternative of vacant post of vaccinators - Use other health staffs to conduct immunization sessions	District/MoHP/ DoHS
Cold Chain replacement and repairs	- Supply of cold chain spare parts - Replacement of ageing equipments - regular repair of cold chain equipments	DoHS, LMD

Note: Please refer to Annex

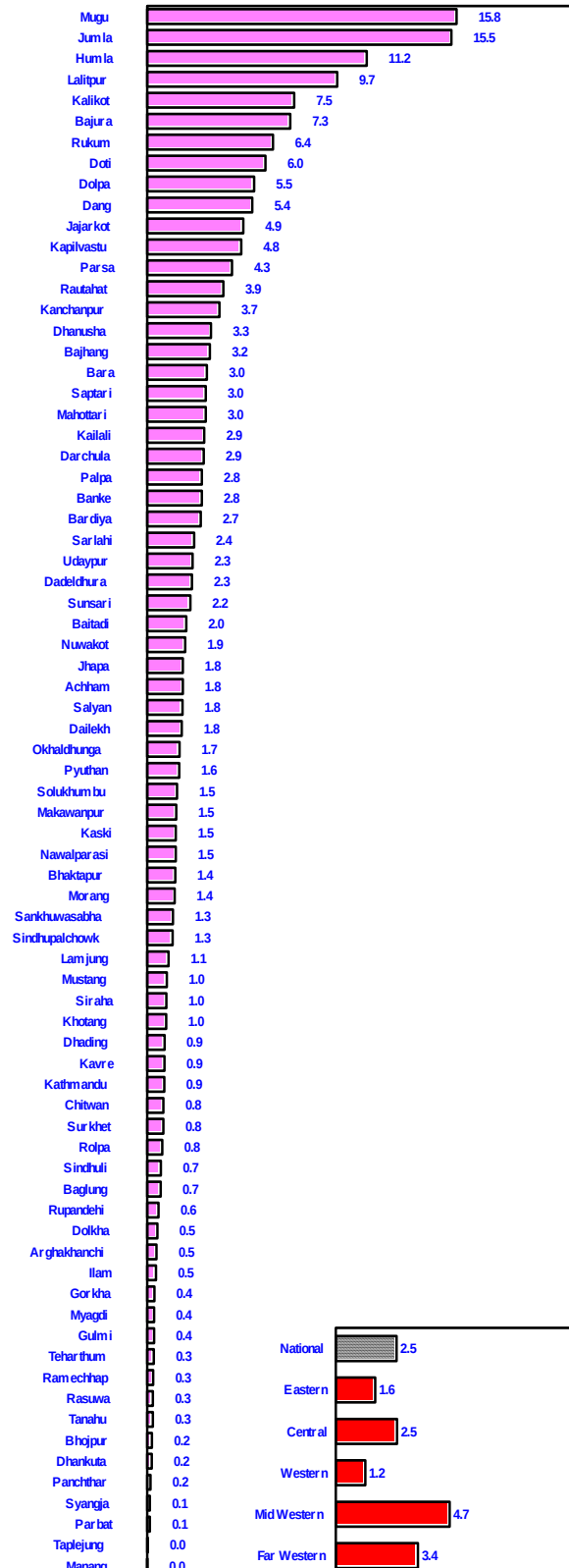
NUTRITION

Fiscal Year 2070/71 (2013/2014)

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 development. 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. Having endorsed several international endorsements and declarations, Government of Nepal is committed to its citizens for adequate food, health and nutrition. The Interim Constitution has also ensured the right to food, health and nutrition to all citizen in Nepal. Failing to ensure protection of the population from the hunger and under-nutrition often results in the vicious cycle of malnutrition, poor health and cognitive and intellectual underdevelopment which, in turn, lead to less productivity leading to compromised socio-economic development. 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 and continues.

2.2.1.1 Current changes and focus in nutrition

Globally, there has been a significant progress made in reducing the hunger and poverty in the last decade. More focus was made in concerted way 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 Sector Nutrition Plan (MSNP). Additionally, external development partners are also channeling 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 political will, involvement of sectoral ministries, and support from the EDPs have placed Nepal in a unique position. In recent years, improving the nutritional status of women and children is one of the top priority for the Government of Nepal.

2.2.1.2 Summary of policy initiatives

National health policy-2014 has nutrition direction towards use and promotion of quality and nutritious foods generated from community level to fight against malnutrition. The relation between food security and nutrition needs to be addressed with increased food production, promote community health program to ensure intake of nutritious foods. 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-Sector Nutrition Plan (MSNP) involving the six key line ministries. The longer-term vision of the multi-sector nutrition plan, over the next ten years, is to embark the country towards significantly reducing chronic malnutrition (stunting) 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. With the approval and endorsement by the government in 2012, the MSNP program has been implemented in six different districts in the country.

Despite the realization of the fact that malnutrition is a multi-sectoral issue, it is health sector who has been leading in terms of addressing the problem of under nutrition in the country. The National Nutrition Policy and Strategy was developed and approved in 2004 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 till now. Later in 2006, MoHP has also put in place School Health and Nutrition Strategy. Aligning with the MSNP and current global initiatives, Department of Health Services, Child Health Division has developed different strategies and plan of actions for maternal infant and young child with technical support of Nutrition Technical Committee (NuTEC).

During the development of MSNP, a health sector review commissioned by the World Bank in 2011 for nutrition has recommended three-pronged approaches for the nutrition interventions. It also laid the emphasis 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 emphasized the need for a multi-sectoral approach. Considering the need of an architecture for nutrition in the country, as recommended by the NAGA report in 2009, MoHP approved a decision to carry out organization and management survey for the establishment of National Nutrition Centre under the MoHP and it is currently being carried out.

2.2.2 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 mortality rate has remained stagnant over the same time period and accounts for more than two-third of infant deaths.

The prevailing high rate of child under-nutrition in the country is one of the major contributing factors of under-five mortality. Despite a steady, but slow, decline in reduction of maternal and child under-nutrition, Nepal still faces high chronic as well as acute under-nutrition in children. The NDHS2011 has shown 41 percent of children less than 5 years of age suffering from chronic under-nutrition (stunting) while more than 10 percent are acutely under-nourished. Additionally, it estimates low birth weight (i.e. “very small” or “smaller than average”) at 12 percent. 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%).

The same DHS study in 2011 showed 18.2 percent of non-pregnant women are undernourished or chronically energy deficient ($BMI < 18.5 \text{ kg/m}^2$) and 14 percent are overweight or obese which is in increasing trend (NDHS 2011). 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 chronically energy deficiency are girls 15-19 years of age, women living in the 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. 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 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/m².

Compared to improvement in macronutrient deficiency status, Nepal is globally recognized in reducing the high rate of micronutrient deficiencies (IDA, IDD and VAD) through its successful community based supplementation programs. Nepal has reduced the prevalence of anaemia among women of reproductive age by almost half from the 1998 level. From 68 percent in 1998 to 35 percent in 2011, Nepal has made a remarkable progress in the reduction of anaemia, however, this reduction has ceased in the last five years. In the same duration, 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. Similarly, 46 percent of children under-five years of age still remain anaemic, with younger children under 2 years of age having the highest burden (69%), which is a very serious concern.

2.2.3 Efforts to Address Under-nutrition in Nepal

Ministry of Health and Population has been implementing nutritional programs for last two decades. Since the treatment of goiter through iodine injection, vitamin A supplementation, IFA supplementation and promotion of IYCF practices, the problem of malnutrition has significantly reduced over the years. In Nepal, micronutrients programs adopting community based approach has contributed considerably in reducing micronutrient deficiencies. The goal of reducing micronutrient deficiencies set out in the World Fit for Children Summit 1990 are on track.

Bi-annual supplementation of vitamin A to the children aged 6-59 months of age is implemented through our strong network of female community health volunteers. The success of the Vitamin A Deficiency Prevention and Control program has become an example as a global success story as how with strong community mobilization, partnership across sectors, regular monitoring and commitment from concerned stakeholders involved could result in the achievement of common goals. With sustained coverage of more than 90 percent over the years, this program has saved valuable lives of thousands of children each year. Likewise, supplementation of iron and folic acid tablets to the pregnant and lactating women has helped to reduce the prevalence of anemia among women from 67 percent in 1998 to 35 percent in 2011. 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). After the elimination of goiter with intensive program on iodine supplementation, government has been promoting to use the adequately iodized salt by the family. Ministry of Health and Population has been advocating for access of iodized salt and promote for its increased use through awareness campaign. Likewise, micronutrient powder is being provided to the children aged 6-23 months to address the high rate of anemia in that age group.

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 like infant and young child feeding, integrated management of acute malnutrition (phase-wise nation-wide expansion) to address the malnutrition / under-nutrition problems with continued progress.

2.2.4 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 protein-energy malnutrition in children under 5 years of age and women of reproductive age
- To reduce the prevalence of anemia among adolescent girls, women and children
- To virtually eliminate iodine deficiency disorders and vitamin A deficiency and sustain the elimination
- To reduce the infestation of intestinal worms among children and pregnant women
- To reduce the prevalence of low birth weight
- To improve household food security to ensure that all people can have adequate access, availability and utilization of food needed for healthy life
- To promote the practice of good dietary habits to improve the nutritional status of all people
- To prevent and control infectious diseases to improve nutritional status and reduce child mortality
- To control the incidence of life-style related diseases (coronary artery disease, hypertension, tobacco and smoke related diseases, cancer, diabetes, dyslipidemia, etc.)
- To improve health and nutritional status of school children
- 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
- To align the health sector programs on nutrition with Multi-sectoral Nutrition Initiative
- To improve the maternal nutrition

2.2.5 Target

Indicators	NDHS 2001	NDHS 2006	NDHS 2011	MDG 2015
Stunting among children	57	49	41	28
Wasting among children	11	13	11	5
Underweight among children	43	39	29	27
Anemia among children under 5		48	46	<40
Anemia among children under 6-23 months		78	69	
BMI (<18.5kg/m ²) among women	26	24	18	
Anemia among pregnant women		42	48	<40

2.2.6 Program 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 (quantity and quality) 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 Sarbottam Pitho
- Strengthen the system of growth monitoring and its supervision/monitoring
- Improve skills and knowledge regarding growth monitoring and nutrition counseling among health workers
- Provide PHC/HP/SHP with necessary equipment and material for growth monitoring
- 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 homes
- Strengthen the ability of health personnel in dietary and clinical management of severely malnourished children
- Distribute fortified foods to pregnant, lactating women and children aged 6 to 36 in food deficient areas
- Improve maternal and adolescent nutrition and low birth weight through improved maternal nutrition practices.
- Create awareness of the importance of additional dietary intake during pregnancy and lactation
- Strengthen the activities of nutrition education and Counseling
- Promote social (community and family) support for maintaining good health care and dietary habit
- Reduce heavy work load of pregnant and lactating women
- Prevent early pregnancy and ensure adequate birth spacing
- Improve iron status of pregnant and lactating women

Control of Iron Deficiency Anaemia (IDA)

- Create awareness of anemia and importance of iron and folic acid supplementation
- Ensure availability of iron/folate supplements at all health facilities and ORC
- Increase accessibility of iron/folate at the family and community level
- Increase coverage and compliance of iron/folic supplementation for pregnant and breastfeeding women
- Strengthen parasitic infestation control programs (intestinal helminthes, malaria and kala-azar)
- Create awareness about improving living conditions including sanitation and Hygiene

- Increase awareness about iron rich foods, both animal and vegetables sources
- Promote dietary practices that improve the content and bioavailability of iron in diet
- 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
- Weekly supplementation of iron and folic acid tablet to the adolescent girls (in and out of school) along with deworming tablet
- Advocate for equity among genders in access and control over household foods
- Home fortification of complementary food with micronutrient powder for children 6-23 months of age for prevention and control of anemia
- Create awareness of the importance of increased food intake and reduced work load during Pregnancy
- Promote advocacy campaigns against teen age pregnancy, early marriage and short birth Spacing
- Develop a scheme for screening and diagnosing high risk women for severe Anemia
- Conduct operational research regarding anemia
- Review the possibility of extending iron/folate supplementation to other groups at risk as well as to find out alternative approaches to supplementation

De-worming

- De-worming of pregnant women with a single dose tablet (Albendazole 400 mg) starting from 2nd trimester (4 months) of the pregnancy
- Distribute bi-annual de-worming tablet to school children (grade 1-10) in 75 districts for all public and private schools
- Create awareness about improving living conditions including sanitation and hygiene
- Bi-annual deworming tablet to children 12-59 months of age during vitamin A supplementation

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
- Encourage better storage practices to prevent iodine loss
- Ensure systematic monitoring of iodized salt
- 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
- Develop IDD monitoring system and implement the monitoring survey at national level

Control of Vitamin A Deficiency (VAD)

- Ensure availability of VA capsules at health facilities
- Increase awareness of importance of VA capsules supplementation
- 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

- Promote the consumption of VA rich foods and balanced diet through nutrition education
- Supplementation of Vitamin A capsule (200,000 IU) to postpartum mothers through healthcare facilities and community volunteers

Low Birth Weight

- Reduce maternal PEM
- Reduce maternal IDD
- Reduce maternal VAD
- Reduce maternal anemia
- Reduce workload of pregnant women
- Increase awareness of risks of smoking and alcohol to LBW
- Increase awareness of risks of teen-age pregnancy to infant and maternal health
- Strengthen activities for nutrition monitoring /counseling at antenatal clinics

Household Food Security

- Promote kitchen gardening
- Improve agricultural skills
- Promote raising of poultry, fish and livestock for household consumption
- Advocate among community people as to how to store and preserve their foods at home
- Improve technical knowledge of food processing
- Advocate among community people as to how to manage their food allocation
- Promote activities of women's groups which are interested in income generation

Improved dietary practices

- Conduct a study to clarify the problems of culturally-related dietary habits
- Promote nutrition education activities and advocate for good diets and dietary habits
- Develop and strengthen programs that focus on behavior change as the means of improving dietary habits
- Strengthen the activities of nutrition education/advocacy which seek to eliminate the food taboos affecting nutritional status
- Promote the program of household food security
- Promote empowerment of women/gender equity

Infectious Disease Prevention and Control

- Promote knowledge, attitudes and practices which will prevent infectious diseases
- Ensure access to appropriate health services
- Improve nutritional status to raise resistance against infectious disease
- Improve safe water supply, sanitation and housing
- Improve food hygiene

School Health and Nutrition Program

- Build capacity of the policy and working level Stakeholders
- Biannual distribution of de-worming tablets to school children from grade 1 to 10
- Celebration of SHN week in the month of June to raise awareness on malnutrition focusing at the community level through the medium of school children and health workers
- Distribution of First Aid kit box to the public schools
- Enhance knowledge, skills, and learning ability
- Introduce child to child and child-to-parent approach

Integrated Management of Acute Malnutrition

- Capacity building of all levels of health workers for the management of acute malnutrition through regular health services and of other community workers for the screening and referral of the cases for their management
- Effective establishment and implementation of 4 key structures of IMAM programme: Community mobilization, Inpatient therapeutic care, Outpatient therapeutic care and management of MAM
- Effective implementation of IMAM programme based on 4 principles: Maximum coverage & access, Timeliness of service, Appropriate care, and Care as long as it is needed
- Integration of the management of acute malnutrition across the sectors to ensure that the treatment is linked to support for continued rehabilitation of cases and to wider malnutrition prevention programme and services
- Support and promote IYCF, WASH, ECD, social protection and child health & care along with the management of acute malnutrition
- Advocate IMAM programme as the bridge between emergency and development programme: Disaster Risk Reduction
- Supportive supervision and monitoring of IMAM programme activities for better result
- Harmonize both community as well facility based management of acute malnutrition
- Strengthen coordination and functional capacity of Nutrition Rehabilitation Homes

Nutrition in Emergencies

- Develop adequate capacity and predictable leadership in the nutrition sector for managing humanitarian response
- Formulate an emergency nutrition in emergency preparedness, nutrition in emergency response, including contingency plans and DRR, for the nutrition sector
- Identify gaps and priorities in the emergency nutrition sector, and generate resources for improving humanitarian nutrition services
- Establish and strengthen stronger partnerships and coordination mechanisms between government, UN and non-UN agencies (I/NGOs, donors and non-state sector)
- Response during emergencies through the activated nutrition cluster

Life Style Related Diseases

- Create awareness among adults about the importance of maintaining good food habits for life
- Develop capacity for counseling at health facilities
- Create awareness about the importance for adolescents and adults to control smoking and body weight
- Create awareness to increase physical activity and improve stress management techniques

2.2.7 Major Achievements

2.2.7.1 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 weight in 75 districts. Based on the WHO new growth standard, MoHP has revised and developed a new growth monitoring card.

Figure 2.2.7.1 shows the growth monitoring coverage of last three fiscal years. The national average for new growth monitoring coverage is increased by 5 percent in fiscal year 2070/71 as compared to fiscal year 2068/69. The new growth monitoring coverage of western development region has the highest among all five regions.

Figure 2.2.7.1: New growth monitoring coverage (new visits as % of <5 children), FY 2068/69 to 2070/71

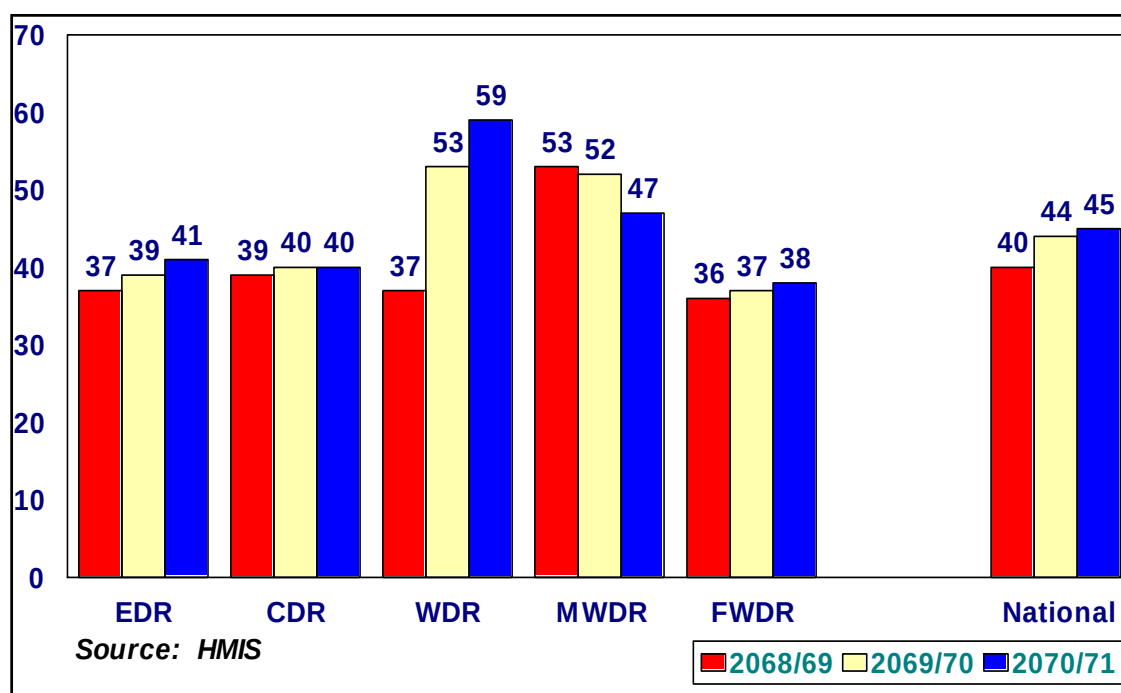


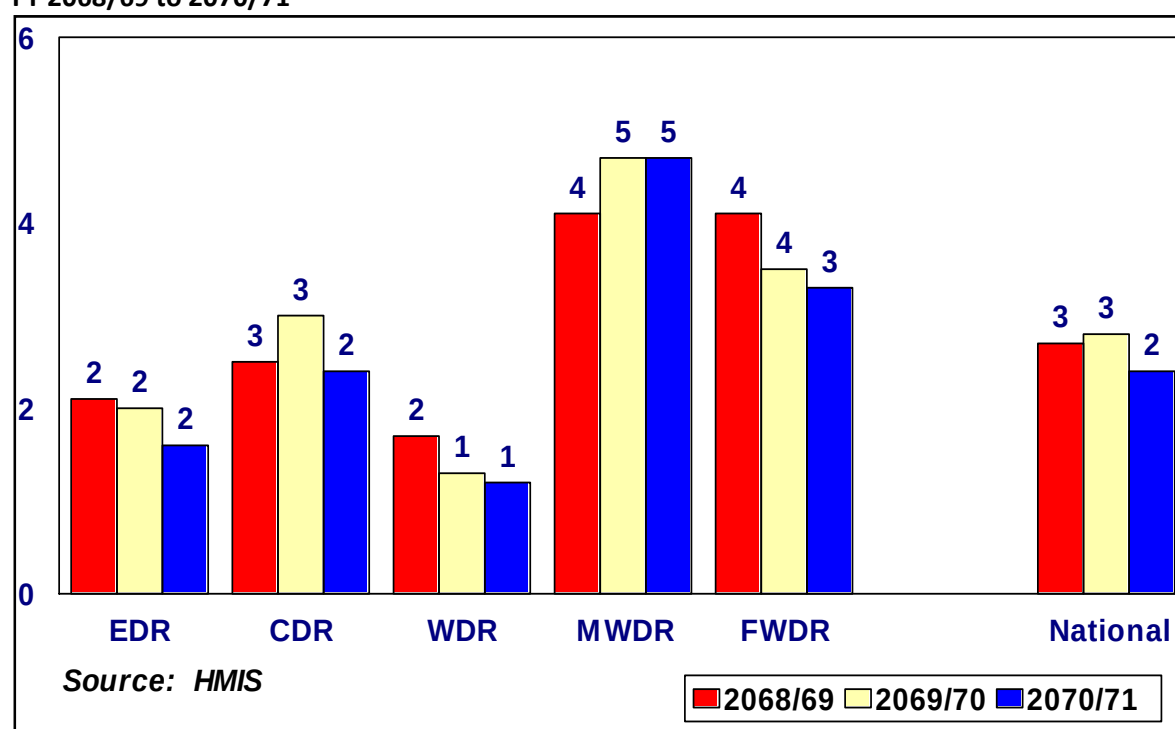
Table 2.2.7.1 shows the average number of growth monitoring visits by <5 per case of last three fiscal years. The average number of growth monitoring visits has marginal increment in last 3 fiscal years at national level as well as by the region except in FWDR.

Table 2.2.7.1: Indicators related to Growth Monitoring by region

Indicators	Year	Region					National Total
		EDR	CDR	WDR	MWDR	FWDR	
Average no. of growth Monitoring visits by <5 per case	2068/69	3.4	2.2	2.5	2.0	4.2	2.6
	2069/70	3.2	2.3	2.5	2.0	3.6	2.6
	2070/71	3.3	2.4	2.6	2.2	3.5	2.7

Figure 2.2.7.2 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 slightly decreased by 1 percent as compared to last fiscal year. By region, there is improvement in the situation of malnutrition in central, and far western regions.

Figure 2.2.7.2: Percentage of malnourished (underweight) children among new growth monitored, FY 2068/69 to 2070/71



2.2.7.2 Infant and Young Child Feeding

Appropriate feeding practices are essential for enhancement of nutrition, survival, growth and development of infants and young children. These feeding practices, collectively known as IYCF practices, include breastfeeding and complementary feeding (with age appropriate frequency and with sufficient nutrient density and diversity).

Improving care and practices related to infant and young child feeding (IYCF) is a key priority of MoHP. With support from the partners, the program is being expanded in different districts, however, lack of an effective monitoring mechanism is a challenge.

2.2.7.3 Integrated Management of Acute Malnutrition

In line with Multi Sector Nutrition Plan (MSNP), Integrated Management of Acute Malnutrition (IMAM) Programme (previously CMAM-Community based Management of Acute Malnutrition) manages acute malnutrition in children age 6-59 months through inpatient and outpatient services at the community level. In Nepal, this programme was piloted from 2008 in 5 districts viz. Achham, Bardiya, Jajarkot, Kanchanpur and Mugu which was later evaluated and expanded to 6 additional districts namely Dhanusa, Jumla, Kapilvastu, Okhaldhunga, Saptari and Sarlahi. Along with the IYCF promotion and support, it aims to integrate the programme across the sectors (Health, ECD, WASH, Social protection) to ensure that the treatment is linked to support for continued rehabilitation of cases and to wider malnutrition prevention programme and services. The programme also acts as a bridge between emergency and development i.e. more DRR (Disaster Risk Reduction). The main goal of this program is to prevent mortality and morbidity due to acute malnutrition among 6-59 months children at the community level.

In this Fiscal year 2070/71, 11 CMAM districts have admitted 7,137 severely acute malnourished children at out patient's therapeutic program and discharged 5,925 children. Among them 80.14%

children have recovered and similarly, defaulter rate is 14.09 % and death rate is 0.19% which if we compare with SPHERE standard (recovery rate >75%, defaulter rate <15% and death rate <10%) program is quite good in terms of its performance. But yes, if we go individual district in some districts we should have to focus and give attention to improve program performance. The details performance of individual district has given below.

District wise IMAM Performance

S.N.	District	Total admission (N)	Total discharge (N)	Recovery rate (%)	Defaulter rate (%)	Death rate (%)
1	Achham	437	425	58.35	10.82	0.24
2	Bardiya	625	615	94.47	1.95	0.16
3	Jajarkot	183	146	88.36	8.22	0.68
4	Kanchanpur	1235	1044	87.45	5.27	0.10
5	Mugu	444	644	93.01	3.73	0
6	Jumla	367	326	94.79	3.99	0
7	Kapilbastu	1169	1004	91.63	6.57	0.70
8	Okhaldhunga	96	99	86.87	6.06	0
9	Saptari	1967	1081	77.15	18.41	0.28
10	Dhanusa	457	406	60.59	38.92	0
11	Sarlahi	157	135	48.89	51.11	0
Total		7,137	5,925	80.14%	14.09%	0.19%
				>75%	<15%	<10%
				SPHERE standard		

In some district, number of discharged children seemed higher than admission. It's normal in CMAM program because children may come as carry over from next fiscal year. In Mugu district, number of discharged children is comparatively very high (644) than total admission (444). It reflects that about 244 SAM cases were carried over from previous fiscal year.

Similarly, in some district number of total discharge seems low in comparison with total admission. Mostly, if district organizes screening camp during last month of fiscal year, the number of admission seems higher than discharge. Saptari district organized screening camp in April & June where, about 600 case in April and 563 in June SAM cases were registered within these months, and who were not recovered within the entire period of this fiscal year 2070/71 are carry over to next fiscal year.

Severely malnourished admission trend analysis of CMAM (IMAM) piloted/matured districts:

District	SAM Admission Trend				
	2009	2010	2011	2012	2013
Bardiya	1,519	865	827	806	617
Mugu	170	617	481	541	528
Achham	0	1430	749	495	532
Jajarkot	0	195*	691	438	151
Kanchanpur	0	489*	2,530	1,011	1,186

*program started late end of year

As shown in the above table, the severely acute malnourished cases and admission being gradually decreasing in all districts. It is because of District Health Offices have implemented other nutrition programs jointly. District health Offices have strong community mobilization for active case finding. Regularly health workers use to screen to children age 6 to 59 on their regular jobs and at community level also FCHVs do have screening during national vitamin A campaign.

Nutrition Rehabilitation Home NRH:

Nutrition Rehabilitation Home has been established to rehabilitate severely malnourished children and educate to parents on food and nutrition. Currently, NRHs are located in 16 districts throughout the country. The total capacity of 16 NRHs is 181 beds. With an average of 30 children staying days and a ninety percent occupancy target, these NRHs have a capacity to serve 1981 malnourished children per year.

Table : Admission Status

NRHs	Achievement	NRHs	Achievement
NRH-Ktm	307	NRH-Nepalgunj	136
NRH-Janakpur	167	NRH-Biratnagar	96
NRH-Rajbiraj	147	NRH-Bhadrapur	103
NRH-Bharatpur	149	NRH-Birgunj	165
NRH-Dailekh	58	NRH-Kanchanpur	115
NRH-Baglung	41	NRH-Dhangadi	134
NRH-Dang	53	NRH-Pokhara	95
NRH-Butwal	17	NRH-Surkhet	122
Total			1,905

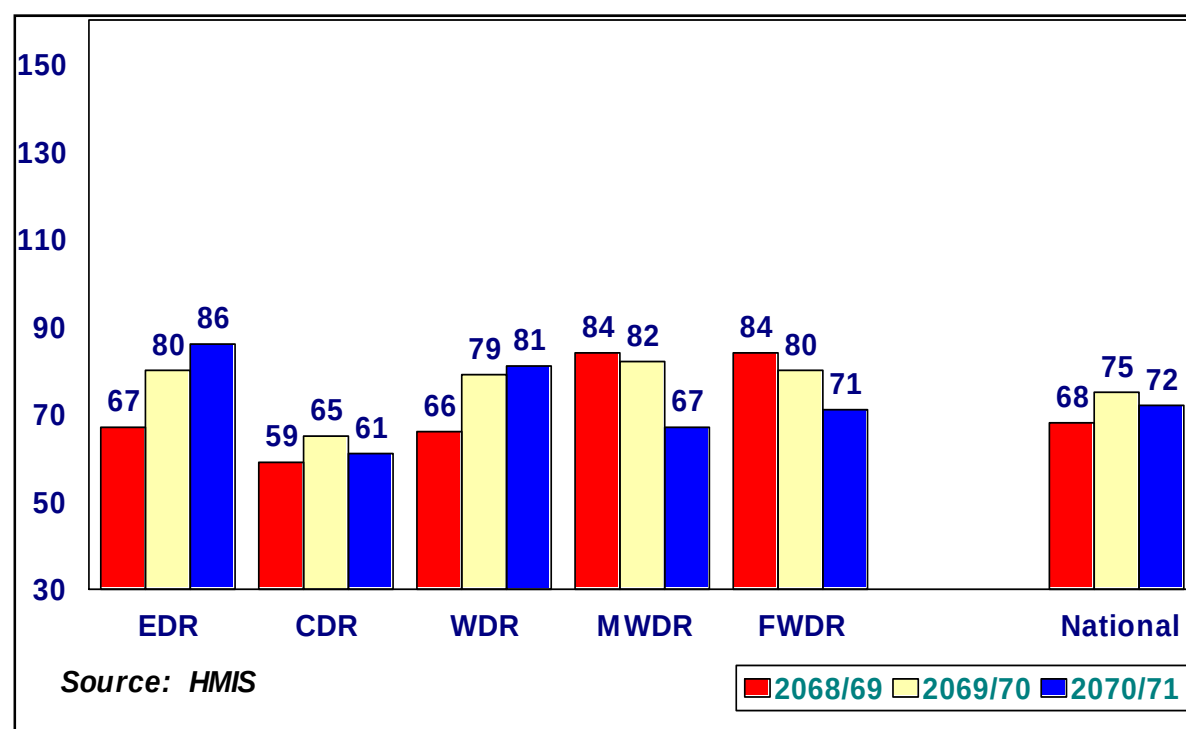
This fiscal year 2070/71, total 1,905 children were provided nutritional care through NRH. Among the total admitted 78% were of under 5 years and rest were above five years. Similarly all the care takers were trained on food, nutrition, health hygiene, and sanitation. The sessions were made live by food demonstrations and practical sessions.

2.2.7.5 Prevention and Control of Iron Deficiency Anemia

Since 1998, the MoHP has been providing iron foliate (IFA) at “no cost” to pregnant women and postpartum 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 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 all 75 districts. The programme evaluation shows improved coverage and compliance as a result of community-based delivery involving FCHVs.

The figure below shows the trend of supplementation of iron and folic acid tablets of last three fiscal years at national as well as region level. The national coverage has decreased by 4 percent in this fiscal year. Similarly, the coverage has increased in two regions namely EDR, WDR while there is slight reduction in remaining three regions.

Figure 2.2.7.3: Coverage of IFA distribution as % of expected pregnancies, FY 2068/69 to 2070/71



2.2.7.6 Integrated Infant and Young Child Feeding- Micro-Nutrient Powder (IYCF-MNP) Community Promotion Program

Considering the critically high levels of anaemia together with other micronutrient deficiencies, situation analysis and strategic review was done in 2003 which highlighted the severity and implication of the high prevalence of anaemia in young children and lack of any effective intervention in place to address the problem and warranted urgency to address the problem. The National Nutrition Policy and Strategy 2004 and Anemia Plan of Action 2005 was endorsed. The DHS 2006 revealed that the anemia situation among 6-23 months children to be 78% with poor IYCF practices. Food based approaches are the best and sustainable approach to improve the situation; however, the feeding of infants and young children was far from optimal. The need for innovative approaches to address anaemia in young children and other vulnerable groups was underscored and the Plan of Action endorsed Sprinkles as key intervention to address anaemia in young children. Later in 2007, National Nutrition priority workshop was held at Kathmandu which endorsed piloting of sprinkles supplementation as preventive measure. The Lancet 2008 further recommended the IYCF-MNP interventions as one of the effective and cost efficient intervention. In 2008, feasibility study was initiated in 2 districts to design large scale pilot programme. Later in June 2009, MoHP piloted the home fortification of complementary food with MNPs among the children aged 6-23 months in 6 districts (Parsa, Makawanpur, Gorkha, Plapa, Rupandehi, Rasuwa) integrating with the Community Infant and Young Child Feeding Program. After the successful completion of the pilot program, MoHP expanded this program in additional 9 districts (Sankhuwasabha, Morang, Sunsari, Kapilbastu, Dang, Rukum, Bardiya, Dadeldhura and Achham) in 2012; this program is currently implemented in 15 districts of Nepal.

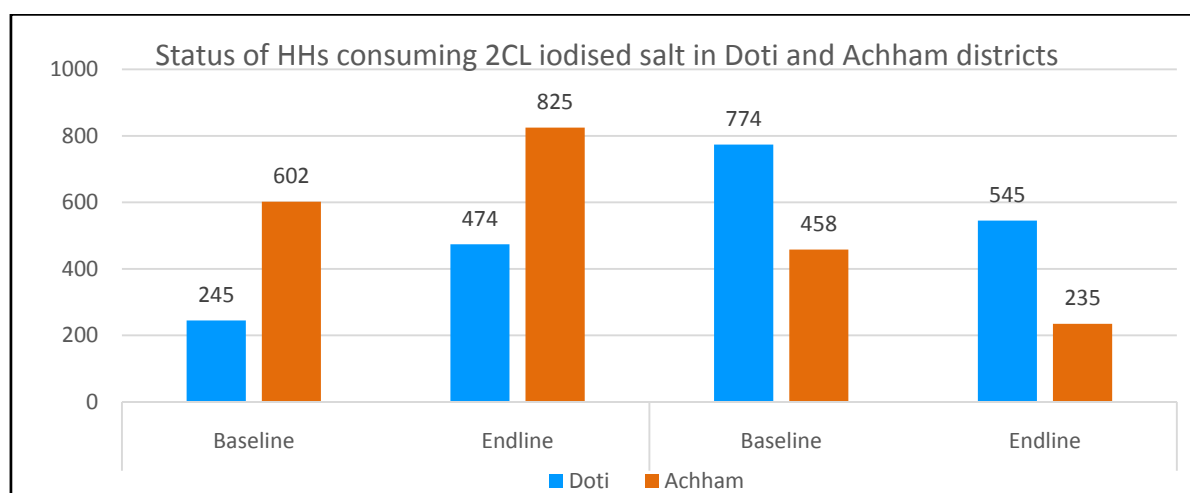
Promotion of MNP is linked with improved complementary feeding; while introducing MNPs mothers and caregivers are also counseled to timely introduce complementary foods at the age of six months, for age appropriate feeding frequency, improving dietary quality of complementary foods by making nutrient and calorie dense (e.g. by adding milk, oil, ghee, peanuts etc.) as well as hand washing with soap before feeding. Furthermore, mothers/caregivers are trained to prepare “PoshiloJaulo” (pulses, rice and green vegetables cooked in oil) and “Lito” (mixture of blended and roasted cereal and legume flours).

The 2 districts feasibility study involved formative and ethnographic research to identify existing feeding practices and potential barriers that might hinder acceptance of MNP, branding of the product, and development of a behavior change communication strategy, etc. As part of the study, FCHVs were trained to counsel mothers on IYCF and care issues as well as to distribute MNP in eight VDCs of two districts. Evaluation was conducted to gather information on coverage, acceptability, compliance in utilization, including any constraints and logistical issues related to delivery of the intervention. The feasibility study has shown a strong community acceptance with a very high coverage and compliance on the use of MNP. With promising impact studies globally, the IYCF-MNP was initiated in Nepal and the piloting in 6 districts was designed to study the operational efficacy and effectiveness in terms of coverage, compliance and mode of distribution. The coverage survey of the pilot study shows coverage ranging from 53% to 83% and compliance ranging from 40% to 56%. The linking of IYCF with MNPs has contributed to significant improvement in IYCF practices as revealed by the process monitoring and coverage surveys.

2.2.7.7 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. The Five Year National Plan of Action to achieve optimal Iodine Nutrition in Nepal: 2015-2019 prioritized Universal Salt Iodization (USI) as the primary intervention to improve iodine status while reducing reliance on iodine supplementation, which had been in place earlier. The plan focused on creating the necessary infrastructure that could provide a foundation for sustaining achievements. The plan outlines the key successes, further strengthening critical program elements and incorporating lessons from other countries where USI programs are maturing.

This year, a social campaign was successfully conducted in Achham and Doti of the Far-Western Hills where DHS data has shown the lowest coverage for the household consumption of iodized salt. The major activities carried out were: Iodine tests in those VDCs, orientation to FCHVs, and conduction of IDD classes, street drama show, and community level orientation.



2.2.7.8 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 6-59 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 2.2.7.2.

Table 2.2.7.2: Coverage of mass Vitamin A distribution (6-59 m), FY 2068/69 to 2070/71

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Vitamin A distribution as percent of children 6-59 months (%)	2068/69	115	102	91	107	93	101
	2069/70	108	97	93	95	86	97
	2070/71	121	183	125	171	113	142

Source: CHD/DoHS

Vitamin 'A' Supplementation (VAS) to Children Age 6-11 months:

Given that VAS coverage among children age 6-11 months observed on 78% in 2011 NDHS, MoHP modelled an innovative Vitamin 'A' distribution mechanism to reach children at the age of 6 months with first dose Vitamin 'A' Supplements in Kavreplanchowk, Jumla and Chitwan districts using Health Facility, FCHVs and routine measles vaccination contact points during the period from December 2012 to December 2013. In this process, a total of 1,097 health workers, 73 Urban Health Clinic In charges, 1,708 FCHVs and 198 municipality volunteers were mobilised. The program was observed effective to increase Vitamin 'A' coverage among the children age 6-8 months from 56% during the baseline to 70% at the end line with difference in difference (DID) between intervention and control district by 7%. The VAS coverage among children aged 6-11 months in three districts remained at more than 90%. The new delivery mechanism and its contribution in improving VAS coverage among 6-8 months children was well appreciated in the Micronutrient Global Conference, 2014. Base on the lesson learned from VAS 6-11 month's program modeling, MoHP is scaling up the program in additional 15 districts in 2014/2015 under the technical and financial support from UNICEF and MI.

2.2.7.9 School Health and Nutrition

With the School Health and Nutrition Strategy came in action in 2006, the program was piloted in 2 districts, Syangja and Sindhupalchowk. Based on the evaluation of the program, some of the cost effective components were expanded in other parts of the country.

The training on school de-worming and First Aid Kit has been conducted in 54 districts. In addition, Save the Children has been supporting for the comprehensive package on SHN in four districts namely Kapilvastu, Pyuthan, Saptari and Siraha. Joint action plan of DoHS and DoE is being drafted with basic package. Joint action plan of DoHS and DoE has been developed and under endorsement process.

2.2.7.10 Nutrition in Emergency (NIE)

With the aim to strengthen and ensure system-wide preparedness and technical capacity in strategic planning, partnership, coordination, situation analysis, response and monitoring of nutritional needs during humanitarian emergencies, a nutrition cluster was established jointly led by Child Health Division and Unicef. The main focus areas of the nutrition cluster are: preparedness, assessment and monitoring; coordination; capacity building; supply of emergency nutrition commodities; emergency response; and disaster risk reduction.

During the fiscal year 2069/70, a SMART (Standardized Monitoring & Assessment of Relief & Transitions) training for survey managers and enumerators, and Nutrition Emergency training was conducted. A total of 348 human resources (HR) were trained in different nutrition trainings by the nutrition cluster in the FY 2069/70. Till date, the cluster has maintained a roster of 862 trained HR trained in different emergency nutrition trainings from 2007.

As part of the nutrition cluster response, 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 in Siraha during fire emergencies in August 2012. The nutrition cluster has prepared NiE guideline in relation to Jun 2013 floods in the districts of Mid and Far Western Regions. The nutrition cluster distributed fortified blended flour, Vitamin A, Ready to Use Therapeutic Food (RUTF) and Iron Folic Acid tablet to pregnant & breastfeeding women and children under 5 years along with Maternal, Infant and Young Child Nutrition counseling services. A total of 37,686 beneficiaries received fortified blended flour in 3 districts viz. 1,516 in Bardiya, 35,000 in Kailali and 1,170 in Kanchanpur.

During the FY 2070/71 training on NiE has been conducted in Hetauda (1 Batch) and Pokhara (2 Batches). Nutrition emergency contingency plan has been updated.

2.2.7.11 Mother and Child Health Care Program

Nepal has been providing food assistance to Pregnant and Lactating Mothers (PLM) and children aged 6 to 36 months through the Mother and Child Health Care (MCHC) activity of the Country Programme (CP) since 2001 in alignment with the Government's long term and interim strategic plan under the nutrition and safer motherhood programmes of the MoHP. Under the MCHC Programme, a monthly take home ration of fortified supplementary food is provided along with health services, growth monitoring and counseling from government and community health staff in nine programme districts; Darchula, Bajhang, Baitadi, Dadeldhura, Doti, Achham, Bajura, Salyan and Solukhumbu.

The programme was later phased out from Darchula, Bajhang, Baitadi, Dadeldhura, Doti, Bajura, Achham and Salyan districts at the end of 2012, except in Solukhumbu district. Further, the programme is expanded with the support from WFP in Karnali Zone.

2.2.7.12 New Projects and Other Activities on Nutrition

With the endorsement of Multi-sectoral Nutrition Plan (MSNP) by the government, unprecedented resources has been channelized to improve the food security and nutritional status of women and children in the country. Several projects on food security and nutrition has been initiated and being implemented in different parts of the country with the support from external development partners.

Suaahara: An Integrated Nutrition Program in Nepal

Suaahara is a five year USAID funded program (August 2011 – August 2016) that seeks to improve the health and nutrition of pregnant and lactating women and children less than two years of age in 41 districts of Nepal: Kailali, Kanchanpur, Bhajhang, Baitadi, Dadeldhura, Achham, Bajura, Doti, Darchula, Bardiya, Banke, Dang, Salyan, Pyuthan, Rolpa, Rukum, Jajarkot, Dailekh, Surkhet, Rupandehi, Nawalparasi, Syangjha, Gorkha, Manang, Lamjung, Parvat, Gulmi, Baglung, Myagdi, Mustang, Palpa, Arghakhanchi, Kapilbastu, Dolakha, Nuwakot, Rasuwa, Sindhupalchok, Sankhuwasabha, Taplejung, Bhojpur and Solukhumbu.

Suaahara supports the Government of Nepal's multi-sectoral nutrition plan (MNSP) by working in nutrition, agriculture, WASH and health services delivery as well as community mobilization, social and behavior change communications and gender equity and social inclusion to improve the lives of 1,000 days mothers and families.

The Suaahara project focuses on four primary results:

- Household health and nutrition behaviors improved
- Use of quality nutrition and health services by women and children increased.
- Consumption of diverse and nutritious food by women and their families increased.
- Coordination on nutrition between government and other actors strengthened.

Key Achievements

Achievements till date:

- **112,965** women and family members reached through ward level interactions.
- **331,983** thousand-day mothers and family members practiced hand washing in demonstration corners.
- **54 VDCs** declared open defecation free zones
- **1,842** individuals trained in partnership defined quality trainings in 72 low performing health facilities.
- **309,116** beneficiaries with access to home or community gardens
- **56,203** number of home or community gardens established.
- **10,462** DAG households reached through home visits and counseling to women and family members.
- 13 districts allocated and committed a total of **\$136,924 budget from VDC block grant** for nutrition related activities.
- Increased consumption of protein rich, high quality foods that encourage child growth: consumption of meat has increased from 24 percent to 30 percent and eggs from 21 percent to 28 percent. **
- Treatment of children with diarrhea in the preceding two weeks with oral hydration salts and Zinc increased from 11 percent to 18 percent. **
- Percentage of women receiving ante-natal check-ups increased from 65 percent to 68 percent.**

*** Data is from lot quality assurance survey conducted by Suaahara in its initial 20 working districts in the year 2013 and 2014.*

Agriculture and Food Security Project

The Agriculture and Food Security Project (AFSP) is a project designed to comprehensively address food and nutrition security issues in the most effective way possible. It is going to be implemented in 19 hill and mountain districts of the far and mid-western region. The objective of AFSP is to:

- To enhance household food security through increased agricultural productivity, household incomes and improved nutritional practices.
- Food security will be realized through increased food availability, made possible by increasing productivity of agriculture, both crop and livestock. Nutrition security will be realized through improved dietary intake, made possible by promotion of diversified diets, and improved feeding and caring practices for pregnant and nursing women and children up to 2 years of age

Major expected output for health sector

- Number of pregnant and/or nursing mothers and children (6-24 months) with improve dietary intake will have been increased by 15% and 30% respectively.
- 45,000 households with Pregnant and Nursing Mothers will have been received project-supported Behavior Change Communication (BCC).
- 54,000 children will have been received appropriate Infant and Young Child Feeding (IYCF) practices.

2.2.7.13 NUTEC and its achievement

In recognition of the need for concerted efforts to address under-nutrition within health sector, a structure has been established to 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. It provides 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". NuTEC has engaged itself with all concerned in reviewing and developing policies, strategies, plan of action and guidelines of different programs on nutrition through nine different working groups

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 has been developed and is in the process for endorsement
- Health sector strategy for addressing maternal under-nutrition is endorsed and a Plan of Action including IYCF is under development process and Training Manual has also been finalized
- Communication framework for Maternal Infant and Young Child Nutrition is endorsed
- 2nd Five Year Plan of Action (2013-2017) for Iodine Deficiency Disorders is finalized and in the process to be endorsed
- National Strategy for Anemia Control is being revised
- Emergency Nutrition Contingency Plan for earthquake 2012 and for flood emergencies as well as therapeutic feeding guidelines in emergency were finalized
- National IMAM Guideline is being developed
- A food based dietary guidelines is under development
- A National Framework to establish nutrition surveillance is being carried out

2.2.7.14 Issues, challenges and Recommendations

Table 2.2.7.3: Issues and Recommendations

Issues/Problems/Constraints	Recommendation	Responsibility
Institutional strengthening for nutrition and capacity building of health workers at all levels	Development of basic nutrition training package and capacity building of health workers at all levels	DoHS,CHD, NHTC
Slow scale up of evidence based and cost effective interventions of IYCF, IMAM, MSNP, IYCF-MNP, SHNP due to resource gap	Increase resources to fulfill gap and gradual expansion	DoHS,CHD
Changing the behavior of the people to promote consumption of local indigenous food, diet diversity and nutrition-rich food	Focus to BCC for local food based approach	DoHS,CHD
Number of staff for nutrition under DoHS is very limited and no designated personnel for nutrition at region and district level	Establishment of National Nutrition Centre	MoHP, DoHS, CHD
Weak linkages between health sector interventions and	Strengthen and scale-up Multi-sectoral Nutrition Plan	MoHP, MoE, MoUD, MoA,

Issues/Problems/Constraints	Recommendation	Responsibility
development programmes beyond the health sector		MoFALD, MoWCSW
Delay/no procurement of nutrition commodities	Timely procurement	LMD
Delay in implementation and scale up of MSNP	Contextual and evidence based planning is needed	DoHS,CHD

2.2.7.15 Future plans and activities

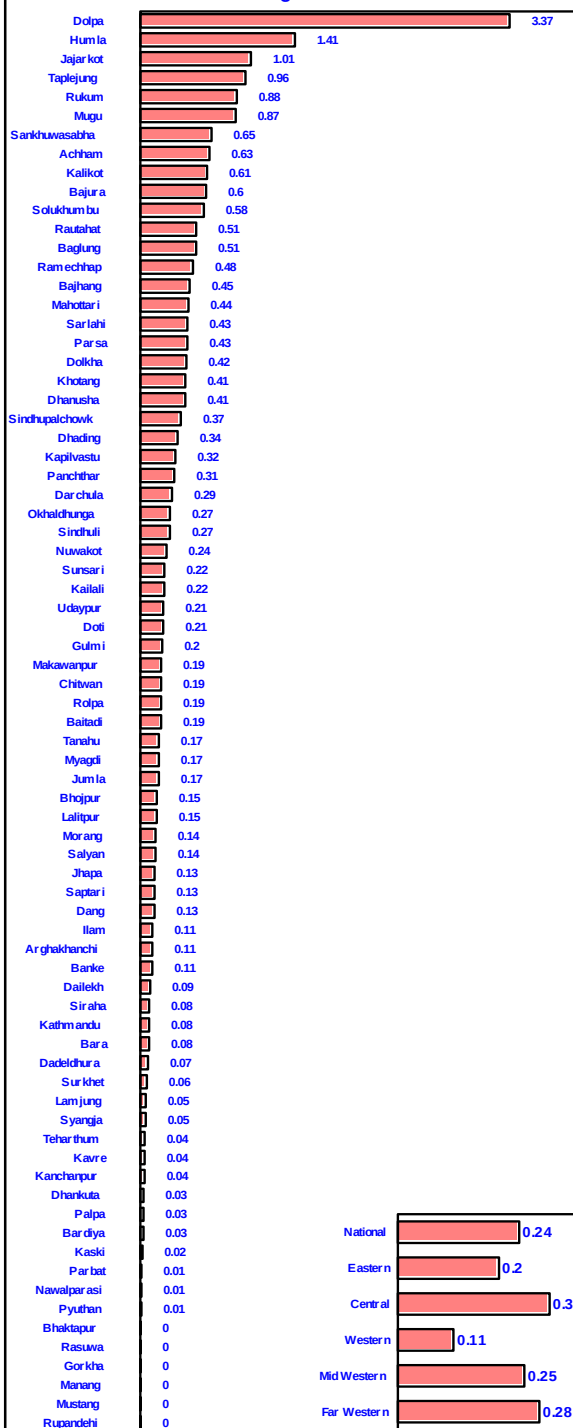
For the achievement of nutrition program specific goals and objectives following plans and activities have been planned for future

- Scaling-up of evidence based cost effective interventions such as Infant and Young Child Feeding and Nutrition Promotion, Integrated Management of Acute Malnutrition, IYCF-MNP, School Health and Nutrition Program
- Implementation of MIYCN action plan
- Implementation of basic package of SHN as designed in new JAP and updated guideline
- Implementation of Adolescent IFA supplementation
- Revision/updating of National Nutrition Policy and Strategy in line with Health Policy 2071, NHSP-III and MSNP
- Implementation of vitamin A supplementation program to address inequity
- Gradual expansion of health sector activities of MSNP program in different districts
- Implement identified cost effective and evidence based interventions to improve maternal under-nutrition
- Establishment and strengthen of food and nutrition surveillance system
- Capacity building of health workers at all levels (with basic nutrition training package)
- Conduct National Micronutrient Status Survey
- Initiation to implement the program for the reduction of adolescent anemia
- Establishment of National Nutrition Centre
- Conduction of National Nutrition Conference.

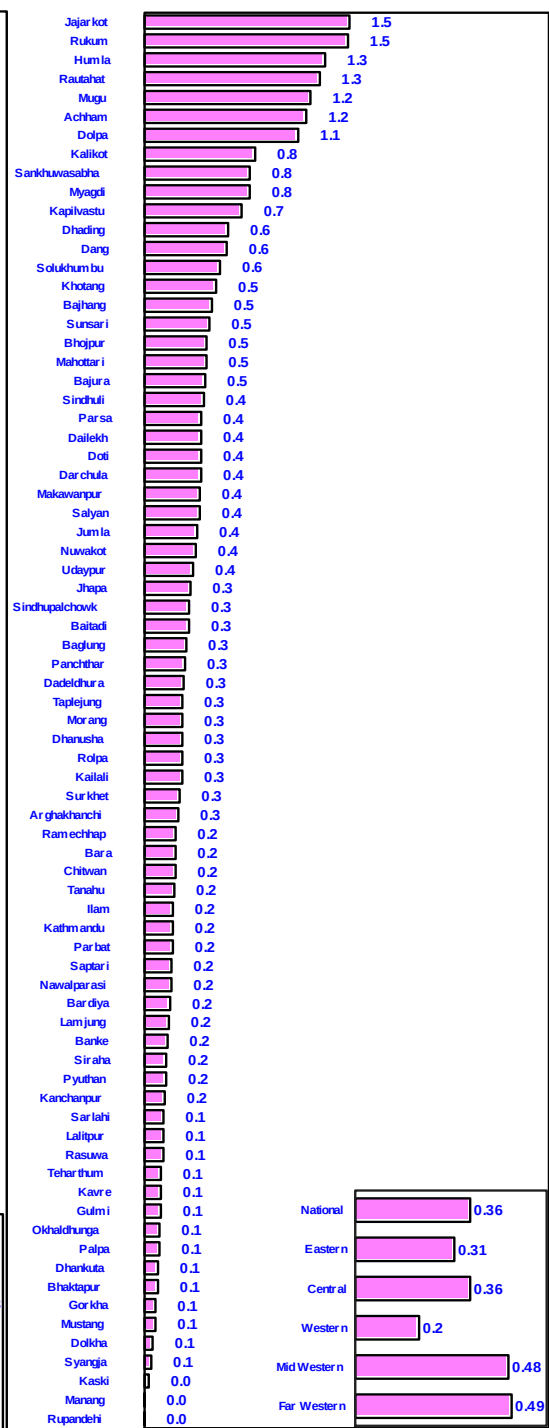
CB-IMCI

Fiscal Year 2070/71 (2013/2014)

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 counseling 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, Health Workers are the main vehicle of service delivery and FCHV play a key supporting role to increase access to services through counseling and community mobilization.

In 1997, the IMCI program was initiated in Mahottari district as a pilot program. Based on the recommendations from the pilot, it was decided to include a community component, enabling mobilization of community health workers (VHWs and MCHWs) and FCHV to provide CDD, ARI, Nutrition and Immunization services to the community. Eventually, the Community based ARI and CDD (CBAC) program was merged into IMCI in 1999 and was named 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. An integrated package of CBIMCI and CBNCP is being planned and will be implemented as IMNCI from 2071/72. The integration process is also being carried out through active support of many external development partners.

Vision

- Contribute to survival, healthy growth and development of under-five years children of Nepal.
- Sustain the achievement of MDG 4 beyond 2015.

Goal

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

Targets

- To reduce under-five mortality from the current rate of 54/1,000 live births to 38/1,000 live births and infant mortality from the current rate of 46/1,000 live births to 32/1,000 live births by 2015¹.
- To reduce neonatal mortality from the current rate of 33/1,000 live births to 16/1,000 live births by 2015.
- To reduce morbidity among infants less than 2 months of age.

¹Nepal has achieved MDG Goal 4 by reducing under 5 mortality to 54/1,000 live births prior to 2015 (MDG). Therefore an NHSP-II target is mentioned here.

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 knowledge and skills of health service providers through

- Training on integrated management of childhood illnesses including follow up and onsite coaching for improved performance;
- Regular integrated review and refresher trainings to health service providers emphasizing on recent updates in CBIMCI protocols;
- Technical support visit from higher levels to respective institutions; central to regional to district to HFs to FCHVs
- Capacity building training to the CB-IMCI focal persons of the districts
- Inclusion of CB-IMCI component in the curriculum of pre-service medical and paramedical schools;

2. Improving overall health systems

- Carry out CB-IMCI program maintenance activities as per the recommendations made by IMCI technical working group
- Improve logistic supply of key commodities.
- Ensure transferred and new health workers are skilled in CBIMCI program
- Regularize community based activities of FCHV and outreach clinics including reactivating health mother's group meeting.
- Strengthen supervision and monitoring of the program within regular integrated supervision.
- Strengthen recording and reporting system of the CBIMCI program at all levels.

3. Improving family and community practices

- Disseminate key behavioral message through FCHVs, outreach clinics and health facilities to individuals, families and communities using localized IEC materials.
- Reach the disadvantaged and hard-to-reach communities through reactivated and socially inclusive health mothers' group and planned outreach clinics.
- Create an enabling environment for practicing key individual and family behaviors through continuous advocacy and social mobilization for child health promotion at national, district and community level

Major components of CB-IMCI

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 Gentamycin (for infection) and refer to the appropriate facility if needed.

2. Management of sick children 2 months to 5 years of age

Management of Acute Respiratory Infection (ARI)

The Ministry of Health and Population (MoHP) recognizes 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 recognizes 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 healthworkers 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.

2.3.2 Major Activities

Major activities carried out in FY 2070/71 include the following:

- Conduction of CB-IMCI Refresher Training 10 districts - Sankhuwasava, Saptari, Morang, Myagdi, Jumla, Humla, Dolpa, Banke, Doti, Bajhang
- Training of CB-IMCI to newly recruited health workers (5 Regions)
- Referral IMNCI Training
- CB-IMCI/NCP Orientation Training to HWs of Private Sectors
- Capacity Building Training to CB-IMCI Focal Persons (EDR and CDR Regions)

- Diploma in Child Health (DCH)
- Celebration of World Pneumonia Day (12 November)
- Conduction of operational Research on increasing access of IMCI/NCP in underserved areas
- Conduction of efficacy study of Cotrimoxazole
- Initiation of Intensive Monitoring and Supervision in low performance districts
- Advocacy and marketing of CHX, Zinc, Contrim and ORS
- Supervision and Monitoring

2.3.3 Analysis of Achievement

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, service provided at community level (VHW/MCHW and FCHVs) is considered as community level data whereas total service provided from Health Facility level in addition with community level constitutes the national aggregated data for this program.

1. Management of below 2 months cases

The status of the under-two months cases registered at health facilities in FY 2070/71 has been presented in Table 2.3.1.

Table 2.3.1: Classification and treatment of <2 months cases, by region from 2068/69 to 2070/71

Classification of <2 Month Cases, by Region from 2068/69 to 2070/71								
Indicators	Year	EDR	CDR	WDR	MWDR	FWDR	National	%
Total Cases <2 Months	2068/69	14,124	10,018	8,336	13,129	8,994	54,601	
	2069/70	13,400	10,899	7,076	12,523	9,363	53,261	
	2070/71	12,167	11,539	7,389	13,352	9,793	54,240	
Possible Severe Bacterial Infection (PSBI)	2068/69	2,491	1,396	819	3,359	1,493	9,558	17.5%
	2069/70	1808	1442	591	3052	1331	8,224	15.4%
	2070/71	1463	1250	383	2853	1579	7,528	13.9%
Local Bacterial Infection (LBI)	2068/69	6,853	4,632	3,199	4,545	3,715	22,944	42.0%
	2069/70	6,407	5,147	2,861	4,531	3,759	22,705	42.6%
	2070/71	6,436	4617	3,078	4,616	4,114	22,861	42.1%
Jaundice	2068/69	473	511	654	495	210	2,343	4.3%
	2069/70	489	577	591	609	243	2,509	4.7%
	2070/71	416	672	561	508	150	2,307	4.3%
Hypothermia	2068/69	65	76	114	158	28	441	0.8%
	2069/70	78	127	98	202	52	557	1.0%
	2070/71	125	78	89	153	231	676	1.2%
Treatment and Referral								
Low Weight or Feeding Problem	2068/69	1,776	753	1,200	1,237	845	5,811	10.6%
	2069/70	1205	946	939	1158	1004	5,252	9.9%
	2070/71	960	1125	942	1120	1164	5,311	9.8%
Treatment by Cotrim	2068/69	6,307	3,664	2,226	5,859	3,902	21,958	40.2%
	2069/70	5843	3976	2163	6294	4389	22,665	42.6%
	2070/71	5681	3583	2244	6324	4099	21,931	40.4%

Treatment by Gentamycin	2068/69	2,596	1,658	728	3,607	1,827	10,416	19.1%
	2069/70	1969	1672	689	3340	2128	9,798	18.4%
	2070/71	1638	1378	651	3330	1608	8,605	15.9%
Refer	2068/69	922	555	435	450	320	2,682	4.9%
	2069/70	613	733	292	317	293	2,248	4.2%
	2070/71	562	426	275	318	277	1,858	3.4%
Dead Cases	2068/69	40	25	133	36	27	261	0.5%
	2069/70	117	357	52	117	222	865	1.6%
	2070/71	27	10	34	25	37	133	0.2%

Source: HMIS

In FY 2070/71, a total of 54,240 infants of under 2 months were treated at health facilities which is slightly high in comparison to FY 2069/70 and lower than of 2068/69 (Table 2.3.1). There has been decrease in the number of cases treated for PSBI whereas cases treated for LBI has slightly increased at national level in FY 2070/71 compared to FY 2069/70. Treatment for jaundice has decreased in FY 2070/71 compared to FY 2069/70 and 2068/69. Treatment of Hypothermia cases has slightly increased in FY 2070/71 than that of previous fiscal years. Treatment and referral of babies with low weight and feeding problems has slightly increased in FY 2070/71 compared to FY 2069/70 and is found lower than in FY 2068/69.

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 2.3.2. In FY 2070/71, a total of 1,766,903 diarrhoeal cases were reported. The reported number of new diarrhoeal cases has increased in FY 2070/71 compared to FY 2069/70 which is slightly lower than of FY 2068/69.

At the national level, cases of 'Severe Dehydration' have significantly increased in FY 2070/71 compared to FY 2069/70 and 2068/69. It was 0.2 in FY 2068/69 compared to 0.4 in FY 2070/71. Dramatic increase in cases of severe dehydration in CDR was observed (from 0.4% in FY 2069/70 to 0.8% in FY 2070/71). Percentage of Severe dehydration remained constant in EDR (0.2), MWDR (0.3) in three consecutive fiscal years but has been decreased from 0.3 in FY 2068/69 to 0.1 in FY 2070/71 in WDR. In FWDR it has been constant for the past two years.

Table 2.3.2: Classification of dehydration, by region, FY 2068/69 to 2070/71

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total Cases (HF + VHW/MCHW+FCHV)	2068/69	389,539	466,977	288,568	354,300	309,821	1,809,205
	2069/70	381,039	467,809	282,303	324,144	298,463	1,753,758
	2070/71	379,550	473,097	259,520	337,542	317,194	1,766,903
No Dehydration	2068/69	325,205	404,467	258,190	308,712	270,100	1,566,674
		83.5%	86.6%	89.5%	87.1%	87.2%	86.6%
	2069/70	351,416	435,760	271,529	307,646	286,067	1,652,418
		92.2%	93.1%	96.2%	94.9%	95.8%	94.2%
	2070/71	352,202	443,657	250,585	321,347	305,207	1,673,068
		92.8%	93.8%	96.6%	95.2%	96.2%	94.7%

Some Dehydration	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%
	2069/70	28,879 7.6%	30,147 6.4%	10,230 3.6%	15,530 4.8%	11,571 3.9%	96,357 5.5%
	2070/71	26,573 7.0%	25,797 5.5%	8,649 3.3%	15,367 4.6%	11,083 3.5%	87,469 5.0%
Severe Dehydration	2068/69	903 0.2%	1,100 0.2%	736 0.3%	976 0.3%	743 0.2%	4,458 0.2%
	2069/70	744 0.2%	1,902 0.4%	544 0.2%	968 0.3%	825 0.3%	4,983 0.3%
	2070/71	775 0.2%	3,643 0.8%	286 0.1%	828 0.2%	904 0.3%	6,366 0.4%
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%
	2069/70	12,045 3.2%	21,463 4.6%	9,698 3.4%	15,615 4.8%	13,947 4.7%	72,768 4.1%
	2070/71	11,320 3.0%	17,559 3.7%	8,254 3.2%	14,551 4.3%	11,290 3.6%	62,974 3.6%

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

Table 2.3.3: Diarrhoea among children under 5 years of age, by region, FY2068/69 to 2070/71

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total Case (HF+ VHW/MCHW+FCHV)	2068/69	389,539	466,977	288,568	354,300	309,821	1,809,205
	2069/70	381,039	467,809	282,303	324,144	298,463	1,753,758
	2070/71	379,550	473,097	259,520	337,542	317,194	1,766,903
Diarrhoeal Deaths	2068/69	4	15	3	15	8	45
	2069/70	4	19	30	50	13	116
	2070/71	3	4	7	16	6	36
Incidence of diarrhoea /1,000 <5 yrs. Population	2068/69	531	398	442	717	837	528
	2069/70	615	427	515	717	921	578
	2070/71	655	482	538	749	1009	629
Case Fatality Rate / 1,000 <5 yrs. Population	2068/69	0.01	0.03	0.01	0.04	0.03	0.02
	2069/70	0.01	0.04	0.11	0.15	0.04	0.07
	2070/71	0.01	0.01	0.03	0.05	0.02	0.02

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 to 629/1000 under 5 years children in FY 2070/71 from 578/1,000 in 2069/70 (Table 2.3.3). The incidence of diarrhoea has increased in all regions compared to previous fiscal years. The highest incidence of diarrhoea occurred at FWDR (1,009/1,000 under five children) amongst all the regions (Table 2.3.3). Significant increment of diarrhoea incidence was observed in FWDR (88) followed by CDR (55) over last FY 2069/070. Diarrhoeal deaths has been decreased in all regions during FY 2070/71. Consequently, Diarrhoea case fatality rate was decreased with the declining of deaths due to diarrhoea. During FY 2070/71, the Case Fatality Rate is seen nearly one-third of FY 2069/70.

Out of the total 1,766,903 diarrhoeal cases, 22.78 percent were treated at HFs, 12.92 percent were treated by VHW/MCHWs and 64.30 percent were treated by FCHVs (Figure 2.3.1). This implies that 77.22 percent of diarrheal cases who seek care in the public sector were treated at community level (Table 2.3.2 and Figure 2.3.1).

The treatments of diarrhoea by ORS and Zinc and IV fluid have been presented in Table 2.3.4. In FY 2070/71, the proportion of diarrhoeal cases treated by ORS and Zinc has been slightly increased compared to FY 2069/70 and FY 2068/69. Further, the proportion of case treated by IV Fluid has significantly decreased to 0.5 percent in FY 2070/71 from 0.7 percent of FY 069/70. Importantly, treatments of diarrhoea with ORS and Zinc continue to be above 95 percent for last two years. This can be attributed to the effect of CBIMCI programme.

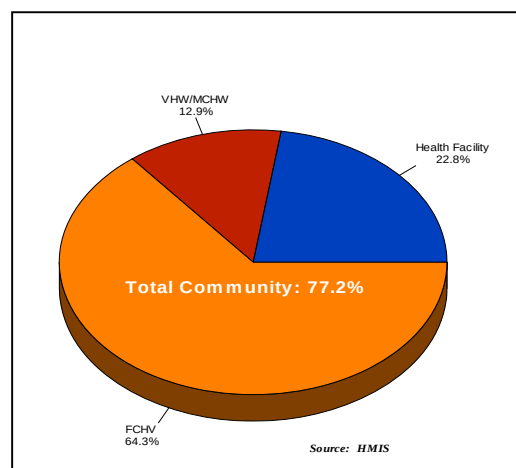


Table 2.3.4: Treatment of diarrhoeal diseases, by region, FY 2068/69 to 2070/71

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Zinc + ORS	2068/69	342,328	422,182	245,860	316,586	267,088	1,594,044
		87.9%	90.4%	85.2%	89.4%	86.2%	88.1%
	2069/70	354,395	463,676	245,352	323,305	284,882	1,671,610
		93.0%	99.1%	86.9%	99.7%	95.4%	95.3%
Treated with IV Fluid	2070/71	368,329	454,822	249,012	332,100	298,211	1,702,474
		97.0%	96.1%	96.0%	98.4%	94.0%	96.4%
	2068/69	1,260	3,467	822	2,215	1,352	9,116
		0.3%	0.7%	0.3%	0.6%	0.4%	0.5%
	2069/70	2,455	3,345	1,687	1,712	3,295	12,494
		0.6%	0.7%	0.7%	0.5%	1.0%	0.7%
	2070/71	1,038	2,655	1,209	2,385	1,695	8,982
		0.3%	0.6%	0.5%	0.7%	0.5%	0.5%

Source: HMIS

3. Acute Respiratory Infection

In FY 2070/71, a total of 2,671,922 ARI cases have been reported (Table 2.3.5). The reported number of New ARI cases slightly decreased in FY 2070/71 compared to FY 2069/70 and FY 2068/69.

Table 2.3.5: Total ARI new cases with classification, by region, FY 2068/69 to 2070/71

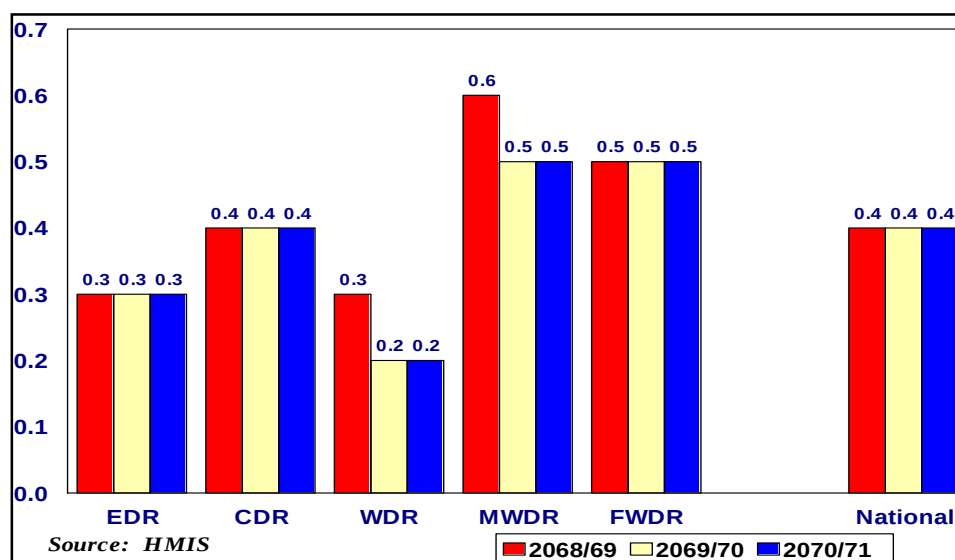
Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total Cases (HF + Community)	2068/69	681,661	743,734	554,500	483,864	381,522	2,845,281
	2069/70	701,690	769,128	490,965	471,322	394,654	2,827,759
	2070/71	671,550	713,746	441,255	453,127	392,244	2,671,922
% of No Pneumonia	2068/69	70.1	73.6	66.1	67.9	75.1	70.5
	2069/70	70.7	74.2	78.8	72.0	76.6	74.1
	2070/71	69.2	71.1	71.0	70.3	76.4	71.2
% of Pneumonia	2068/69	31	27	21	32	26	27.5
	2069/70	31	26	22	30	23	26.9
	2070/71	29.1	24.2	20.6	29.3	21.2	25.3

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
% of Severe Pneumonia	2068/69	0.3	0.4	0.3	0.6	0.5	0.4
	2069/70	0.3	0.4	0.2	0.5	0.5	0.4
	2070/71	0.3	0.4	0.2	0.5	0.5	0.4

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

At the national level, reported ARI cases per 1,000 under-five population has increased to 951 in FY 2070/71 compared to FY 2068/69 and 2069/70 (Table 2.3.6). The highest rate of new ARI cases per thousand U5 children has been observed in FWDR (1,248) followed by EDR (1,159), MWDR (1,006), WDR (914) and CDR (727) in FY 2069/70.

Figure 2.3.2: Percentage of Severe Pneumonia among New ARI Cases (<5 Children) FY 2068/69 to 2070/71



Percentage of severe pneumonia remained constant in FY 2070/71 at National level (0.4%) compared to FY 2069/70 and FY 2068/69 (Figure 2.3.2). At the regional level also it remained constant in EDR (0.3), CDR (0.4) and FWDR (0.5) in three fiscal years. Similarly, it remained constant in WDR (0.2) and MWDR (0.5) in the last two fiscal years i.e. FY 2070/71 and FY 2069/70. The low prevalence of severe pneumonia can be attributable to the early detection and proper management of ARI cases by health workers, VHW/MCHWs and FCHVs in CB-IMCI districts.

In FY 2070/71, out of the total 2,671,922 New ARI cases registered, 685,033 cases were treated for pneumonia (Pneumonia + Severe Pneumonia), which accounted for 25.6 percent at National level. It has declined in FY 2070/71 compared to FY 2068/69 and 2069/70. On the other hand, the incidence of pneumonia (Pneumonia and Severe Pneumonia) has been slightly increasing in the last three fiscal years (Table 2.3.6). The incidence of pneumonia per 1000 under 5 years children is 244 in FY 2070/71 which is slightly higher than that of previous years.

The reported total ARI related deaths significantly decreased to 168 in the FY 2070/71 compared to 1793 in FY 2069/70 which was observed only 201 in FY 2068/69. Consequently, the ARI case fatality rate among under-five children in FY 2070/71 has decreased over previous FY 2069/70. ARI case fatality rate in FY 2070/71 has decreased significantly in all five regions as compared to last FY 2069/70.

Table 2.3.6: Total Pneumonia Cases, Percentage of Pneumonia and Severe Pneumonia, Incidence of ARI, Incidence of pneumonia, Deaths, and Case Fatality Rate by Region FY 2068/69 to 2070/71

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total Pneumonia Cases	2068/69	209,948	199,549	118,316	156,017	98,485	782,315
	2069/70	215,505	203,177	105,594	142,506	92,736	759,518
	2070/71	197,692	175,599	91,662	134,956	85,124	685,033
% of Pneumonia (Pneumonia+Severe)	2068/69	30.8	26.8	21.3	32.2	25.8	27.5
	2069/70	30.7	26.4	21.5	30.2	23.5	26.9
	2070/71	29.4	24.6	20.8	29.8	21.7	25.6
Incidence of ARI cases/1,000 <5 children	2068/69	985	672	890	1042	1098	880
	2069/70	1123	694	883	1023	1190	918
	2070/71	1159	727	914	1006	1248	951
Incidence of Pneumonia cases/1,000 <5 children	2068/69	297	178	188	331	280	239
	2069/70	338	181	187	304	275	243
	2070/71	341	179	190	300	271	244
ARI reported deaths	2068/69	66	24	15	53	43	201
	2069/70	185	872	308	129	299	1,793
	2070/71	27	23	19	51	48	168
Reported ARI case fatality rate/1,000	2068/69	0.10	0.03	0.03	0.11	0.11	0.07
	2069/70	0.26	1.13	0.63	0.27	0.76	0.63
	2070/71	0.04	0.03	0.04	0.11	0.12	0.06

Source: HMIS

Table 2.3.7 shows that a total of 2,671,922 New ARI Cases among ‘under-five children’ were treated in FY 2070/71. Out of the total ARI cases, 794,573 (29.74%) were treated at HF, 324,927 (12.16%) cases were treated by VHW/MCHWs and 1,552,422 (58.10%) were treated by FCHVs (Figure 2.3.3). In total 1,877,349 (70.26%) of ARI cases were treated at community level.

Treatment of ARI at home has increased to 59.24 percent in FY 2070/71 in comparison with FY 2068/69 and 2069/70. Treatment by cotrimoxazole has slightly decreased to 31.68 percent in FY 2070/71 compared to FY 2068/69 and 2069/70. Furthermore, treatment of ARI by other antibiotics has slightly increased to 9.08 percent in FY 2070/71 from 9.0 percent of previous FY 2069/70 and FY 2068/69 (Table 2.3.7).

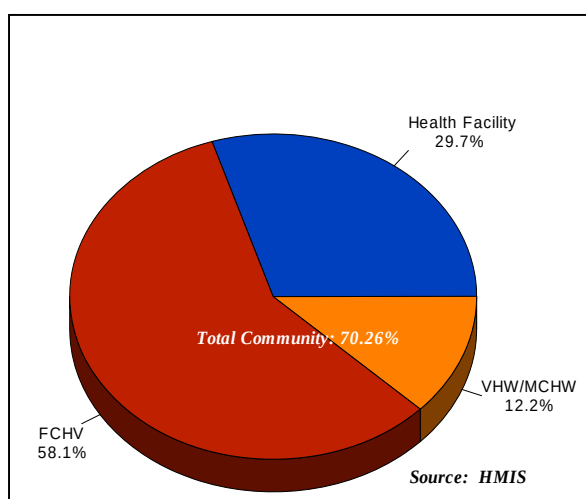


Table 2.3.7: Treatment of ARI cases, 2068/69–2070/71

Indicators	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Total Cases (HF + VHW/MCHW+FCHV)	2068/69	681,661	743,734	554,500	483,864	381,522	2,845,281
	2069/70	701,690	769,128	490,965	471,322	394,654	2,827,759
	2070/71	671,550	713,746	441,255	453,127	392,244	2,671,922
Home Treatment	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%
	2069/70	381,119	440,217	316,715	250,248	237,582	1,625,881
		54.3%	57.2%	64.5%	53.1%	60.2%	57.5%
	2070/71	379,751	427,442	286,523	243,484	245,617	1,582,817
		56.55%	59.89%	64.93%	53.73%	62.62%	59.24%
Antibiotic (Cotrim)	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%
	2069/70	258,160	261,277	133,523	174,728	120,731	948,419
		36.8%	34.0%	27.2%	37.1%	30.6%	33.5%
	2070/71	231,861	220,110	118,867	162,805	112,841	846,484
		34.53%	30.84%	26.94%	35.93%	28.77%	31.68%
Other Antibiotics	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%
	2069/70	62,411	67,634	40,727	46,346	36,341	253,459
		8.9%	8.8%	8.3%	9.8%	9.2%	9.0%
	2070/71	59,938	66,194	35,865	46,838	33,786	242,621
		8.93%	9.27%	8.13%	10.34%	8.61%	9.08%

Source: HMIS

4. Other common childhood illnesses

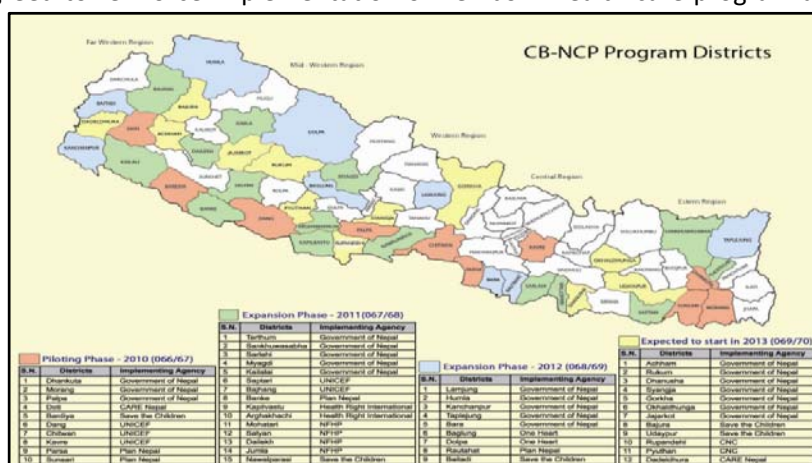
IMCI Program also focuses on identifying malnutrition, measles, malaria and other common illnesses among children. The interventions to address malnutrition among children are being lead by Nutrition Section and interventions to address measles and other vaccine preventable diseases are being lead by EPI section within Child Health Division. IMCI Section would actively collaborate with EPI and Nutrition Sections for the reduction of malnutrition, measles and other common childhood diseases through generating evidences relating to changing pattern of childhood disease epidemiology and strengthening the integrated approach to childhood disease prevention. Further, the issue of childhood TB and HIV is growing and this issue is also being addressed in the new package currently being developed.

2.3.4 Community Based Newborn Care Program (CB-NCP)

2.3.4.1 Background

The 2006 and 2011 Nepal Demographic and Health Survey have shown that neonatal mortality in Nepal has been stagnant at 33 deaths per 1,000 live births, which account for 61 percent of under 5 deaths. The major causes of neonatal deaths 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 65 percent of births take place at home according to NDHS, 2011.

Hence, reduction of high neonatal mortality is an urgent priority for achieving MDG 4. MoHP has made newborn health a priority and agreed to reinforce implementation of newborn health care program at the community level. Accordingly MoHP has initiated integrated newborn health care package called “Community Based Newborn Care Program (CBNCP)” based on the National Neonatal Health Strategy 2004. The program was implemented as a pilot in 10 districts in FY 2065/66 and further expanded covering 39 districts by the end of FY 2069/70. It was further expanded to two districts in FY 2070/71.



2.3.4.2 Goal and Objective of CB-NCP

The goal of CBNCP is to reduce neonatal mortality (NMR) through the sustained high coverage of effective community based interventions.

The specific objectives of CBNCP include:

- To prevent and manage newborn infection
- To prevent and manage hypothermia and LBW babies
- To manage post-delivery asphyxia, and
- To develop an effective system of referral of sick newborns

Coverage of districts with CBNCP, FY 2065/66-2070/71

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, Saptari, Sarlahi, Mahottari, Myagdhi, Nawalparasi, Kapilvastu, Arghakhanchi, Banke, Dailekh, Jumla, Salyan, Kailali and Bajhang,	15 Districts
	2068/69	Taplejung, Rautahat, Bara, Lamjung, Baglung, Humla, Dolpa, Kanchanpur and Baitadi	9 Districts
	2069/70	Udayapur, Rupandehi, Pyuthan, Bajura and Dadeldhura	5 Districts
	2070/71	Sindhuli and Makawanpur	2 Districts

2.3.4.3 Data Recording and Reporting System in CB-NCP Districts

The CBNCP 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 purpose. The recording tools include CBNCP 1, 2 and 3 for FCHVs, CB NCP 4 for VHW/MCHWS and CBNCP 5 for HFs. CBNCP 6 and 7 are data compilation tools that are used by HFs for reporting all services provided by FCHVs, VHW/MCHWs and HFs. In addition, CBNCP also uses CB-IMCI OPD register (HMIS 16A) for reporting of some of the indicators in CBNCP 7.

2.3.4.4 Analysis of Achievement

Region wise coverage of districts by CBNCP and total number of expected pregnancies for each region is shown in Table below.

Analysis of Achievement

The following table 2.3.4.1 provides some of the key information on maternal and newborn health by region. Achievements regarding maternal and newborn care of CB-NCP program districts (41 districts) by region is presented in the table given below.

Table 2.3.4.1: Maternal and newborn health of CB-NCP by region 2070/71

Indicators	EDR	CDR	WDR	MWDR	FWDR	Total
Expected pregnancy	85,682	135,107	88,066	84,576	70,723	464,154
Expected live birth	75,213	122,523	72,606	73,331	59,357	403,030
Number of HF delivery	47464	54,955	34,154	39,847	31,602	208,022
Percentage of institutional deliveries among expected live births	63.1	44.9	47.0	54.3	53.2	51.6
1st checkup of neonatal	44,232	72,539	25,265	40,345	32,747	215,128
Percentage of neonatal 1st checkup	58.8	59.2	34.8	55.0	55.2	53.4
1st PNC visit	51,869	78,661	48,134	41,332	33,441	253,437
Percentage of 1st PNC visit	69.0	64.2	66.3	56.4	56.3	62.9

Source: HMIS

There were a total of 464,154 expected pregnancies and 403,030 live births within the 41 CB-NCP districts in FY 2070/71. Out of the expected live births, 51.6 percent of deliveries took place at a health facility and the rest at home. Therefore, additional effort to increase institutional deliveries, including better counseling to mothers and family members, quality of services and continuum of care is required to increase institutional deliveries in order to further reduce maternal and neonatal deaths.

Timely and quality health check-up of neonates is important in order to reduce the neonatal mortality rate which has been stagnant at 33 per 1,000 live births in Nepal (NDHS, 2011). Data in the above table shows that one among two neonates received first neonatal check-up. The figure for first neonatal checkup is close to the figure with institutional delivery indicating that most of the neonates who received neonatal checkup were those who were delivered in a health institution. As half of the neonates did not receive any health check-up, it is necessary to ensure that all neonates get health check-up by a trained service provider in order to save their lives. About 63% of mothers received first post-natal care which is higher than the neonatal first visits.

Issues and Recommendations

Issues	Recommendation	Responsibility
Sustaining the quality of IMCI.	Implementation of revised package of IMCI	DoHS,CHD,RHD, D(P)HOs
Different level CB-IMCI Review has not been carried since FY 2068/69	Need to arrange fund to continue review meetings for strengthening program	CHD
No separate post of CB-IMCI Focal Person in district, like EPI Supervisor.	Separate post for IMCI focal person should be created	MoHP, DoHS
IMCI Protocol not used properly at all levels.	Close monitoring and supervision at all levels	CHD,RHD, D(P)HOs
New Health workers without CBIMCI training	Provision of training for newly recruited staffs on basic IMCI	CHD
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
Slow scale up (implementation) of CB-NCP due to lengthy bidding process.	Simplify procurement process	LMD, CHD

Note: Please refer to Annex

Family Health Programme

3.1	Family Planning-----	52
3.2	Safe Motherhood and Newborn Health -----	59
3.3	Female Community Health Volunteer (FCHV) -----	72
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3.5	Demography and Reproductive Health Research-----	78
3.6	Adolescent Sexual and Reproductive Health -----	81

FAMILY HEALTH

3.1 FAMILY PLANNING

3.1.1 Background

The main aim of the National Family Planning Program is to ensure that individuals and couples are able to fulfill their reproductive needs by using appropriate family planning methods based on informed choice. Family planning can reduce unmet need for contraceptives and unintended pregnancy which ultimately helps to improve maternal and child health, empowers women by allowing them to invest more in their children and earn wages outside the home. In addition, it also helps communities and country to boost economic growth by expanding healthy and skillful labor force and allowing them to invest more money in school, health care and infrastructure development. In overall National Family Planning Program helps to improve the quality of life of people and develop a nation.

Family planning is one of priority program of Government of Nepal, Ministry of Health and Population. It is also considered as a component of reproductive health package and essential health care services of Nepal Health Sector Program II (2010-2015). To fulfill above aim, family planning information and services are being provided through government, social marketing, non-governmental organizations and private sectors. In government health system, currently, temporary family planning methods (male condoms, pills and injectable) are provided on a regular basis through health posts, sub health posts, PHC Outreach clinics. Female Community Health Volunteers are providing information to community people, and distribute Condom and resupply of pills. Services such as IUCD and Implants are available only at limited number of Primary Health Care Centers and health posts where trained personnel are available. Depending on the district, sterilization services are provided at static sites or through scheduled “seasonal” or mobile outreach services. Almost all district FP MCH clinics are providing all types of temporary FP methods regularly.

Main Objective:

To improve the health status of mothers and children and improve overall quality of life of the whole family by increasing access and utilization of quality family planning services.

Specific Objectives:

1. To increase access to and use of quality FP services which are safe, effective and acceptable to individuals and couples. Special focus will be given to increasing access to services in those places where the rural, poor, Dalit, other marginalized people and those with high unmet need live.
2. To create an enabling environment for increasing access to quality family planning services to men and women.
3. To increase demand of family planning services by implementing various behavior change communication activities.

Policies:

- Emphasize in providing quality family planning services including informed choice to males and females residing in any part of county based on fact and comprehensive information.
- Family planning services will be made available through government, private, non- governmental organization and social marketing approaches. Encourage role of the private sectors in providing family planning services.
- Establish family planning as reproductive rights of females and males.
- Increase access to and availability of family planning services.
- Effective integration of family planning services with other health services.
- Implement various activities to develop capacity of service providers and managers.
- Establish an effective logistics management system to ensure regular availability of family planning services.
- Initiate various innovative approaches to engage males in family planning services.
- Implement various behavioral change communication activities to enhance the decision making power of general people to accept family planning methods based on fact and knowledge.
- Implement focused programs to fulfill family planning needs of special groups and communities living in areas with high unmet need.

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 outreach services. The major activities implemented during in fiscal year 2070/71 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 Panchthar and Sindhupalchowk through health institution or at camp setting. VSC mobile outreach program was conducted in 73 districts in fiscal year 2070/71.

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 modern family planning method. Family planning counseling services were provided to potential clients by front line FP 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 those FP services which were not available in their own institution.

1.3 Achievement

1. Current Users

Overall achievement of FP current users at national level has declined from 93.8 percent in FY 2069/70 to 91.2 percent in FY 2070/71 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 highest whereas there was little shortfall in other regions (Table 1.1). Relatively high achievement in these two regions was contributed by technical support provided by external development partners and better management of mobile outreach services.

Comparative achievement in current users compared to projected number is almost static during last three program years. Family Planning current users achievement percentage is in decreasing trend since last three years. 95 percent in FY 2068/69 has reduced to 93.8 percent in FY 2069/70 to 91.2 percent in FY 2070/71 (Table 1.1).

Table 1.1: Trend in family planning current users (all modern methods)

Region	Years						
	2068/69		2069/70		2070/71		
	Projected	Achievement	Projected	Achievement	Projected	Achievement	Percent
EDR	666,500	618,312	671,500	624,657	699,000	628,053	89.8
CDR	1,043,200	960,196	1,062,000	972,244	1,101,500	959,435	87.1
WDR	397,300	359,294	387,500	359,964	418,000	374,405	89.6
MWDR	290,000	304,854	307,500	306,865	332,000	332,683	100.3
FWDR	183,000	203,596	196,500	197,970	204,500	219,432	107.3
National	2,580,000	2,446,286	2,625,000	2,461,739	2,755,000	2,514,044	91.2
	Percent	95.0		93.8		91.2	

2. New Acceptors in Voluntary Surgical Contraception (VSC)

National achievement for VSC was 67.6 percent in FY 2070/71, which has reduced from 91 percent in FY 2069/70. There was marked difference in the achievement of VSC services throughout the country. Far-western development region has the highest achievement of VSC new acceptors and Central development region has the lowest achievement of VSC new acceptors in this FY. (Table 1.2)

Increasing trend of VSC new acceptors for minilap from 73.1 percent in FY 2068/69 to 67.6 percent in FY 2070/71.

Overall enrollment of new VSC users in absolute number is declining from FY 2068/69 to FY 2070/71 at National level. There was a total of 51,185 new VSC users in FY 2068/69 which declined subsequently to 39,213 users in FY 2070/71 (Table 1.2). Total VSC users was noticed Increased in Mid western and Far western regions but declined in Eastern, Central and Western regions.

New VSC acceptors by procedure i.e. male and female declined in FY 2070/71 compared to the previous years except in mid western and far western regions. There was two increased in Female new VSC acceptor in Far-western and male VSC acceptors in mid western development region.

Overall performance in total VSC users compared to projected number was not up to the expected level. National achievement is in declining trend. The VSC achievement in achievement in FY 2069/70 was 46,415 in number, which declined to 39,213 in FY 2070/71 (Table 1.2).

Table 1.2: Trend of VSC new acceptors by procedure and region FY 2068/69 to 2070/71

Procedure	Year	Region					National total VSC	Procedure as a % of total VSC
		EDR	CDR	WDR	MWDR	FWDR		
Expected Cases	2068/69	16,350	32,400	7,750	8,000	5,500	70,000	
	2069/70	13,900	20,850	6,050	5,650	4,550	51,000	
	2070/71	14,600	25,600	6,900	6,300	4,600	58,000	
Minilap	2068/69	13,179	15,144	3,978	2,697	2,406	37,404	73.1
	2069/70	12,389	15,117	3,858	2,204	2,386	35,954	77.5
	2070/71	9,235	12,004	3,778	2,162	3,637	30,816	78.6
Vasectomy	2068/69	1,075	5,604	2,320	3,161	1,621	13,781	26.9
	2069/70	621	4,270	1,692	2,532	1,346	10,461	22.5
	2070/71	288	2,849	1,234	2,684	1,342	8,397	21.4
Total new VSC acceptors	2068/69	14,254	20,748	6,298	5,858	4,027	51,185	
	2069/70	13,010	19,387	5,550	4,736	3,732	46,415	
	2070/71	9,523	14,853	5,012	4,846	4,979	39,213	
	Procedure as a % of total VSC	65.2	58.0	72.6	76.9	108.2	67.6	

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. A total of 616,926 new users were recruited in FY 2069/70 which marginally increased to 623,857 in FY 2070/71 (Table 1.3). Districts reported that the high spousal separation among the MWRAs 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 slight decline in use of Pills and Depo whereas users of Condom, IUCD and implant has increased by a margin (Table 1.3).

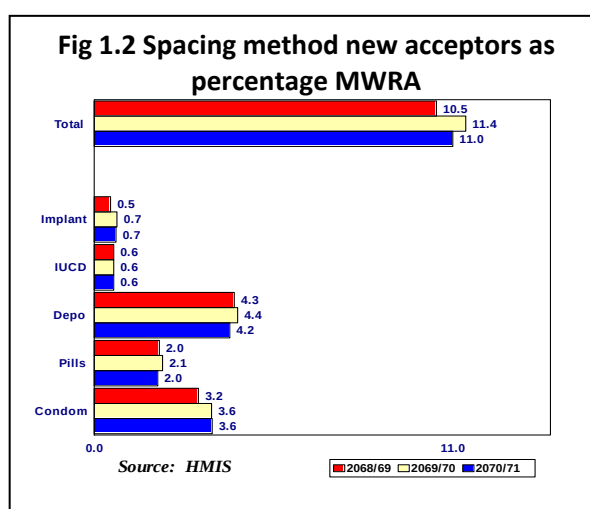
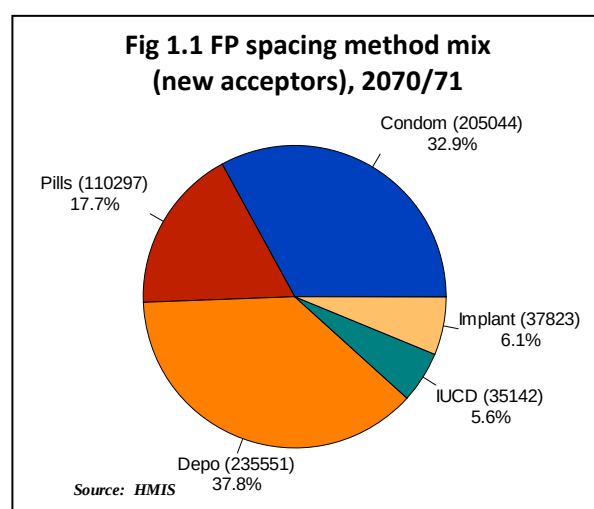
Regional variations have been noticed in recruitment of new IUCD users. The number of new users declined MWDR. While the number of new IUCD users slightly increased in EDR, CDR, WDR and FWDR. Similarly, recruitment of new users in Implant has increased in four development regions except CDR in FY 2070/71. Recruitment of new condom users decreased in CDR and WDR.

Table 1.3: Trend in Number of New Acceptors of Spacing Methods by Region FY 2068/69 to 2070/71

Method	Year	Region					National
		EDR	CDR	WDR	MWDR	FWDR	
Pills	2068/69	24,442	30,982	23,558	19,509	14,145	112,636
	2069/70	25,289	32,959	21,414	19,914	13,060	112,636
	2070/71	25,372	29,083	23,482	18,897	13,462	110,297
Depo	2068/69	53,271	79,234	40,940	43,688	28,289	245,422
	2069/70	53,152	78,267	37,108	44,324	27,434	240,285
	2070/71	54,359	68,082	38,769	46,876	27,465	235,551
IUCD	2068/69	5,815	13,958	5,323	4,962	2,674	32,732
	2069/70	5,506	13,811	4,773	5,041	2,134	31,265
	2070/71	6,147	15,297	6,170	4,285	3,243	35,142
Implant	2068/69	4,359	10,411	3,142	6,526	3,419	27,857
	2069/70	6,354	15,441	4,134	6,041	3,714	35,684
	2070/71	6,479	13,594	4,517	8,341	4,892	37,823
Condoms	2068/69	31,410	45,587	35,309	37,266	30,351	179,923
	2069/70	34,439	55,678	39,595	38,513	28,867	197,092
	2070/71	34,250	50,784	38,973	45,517	35,484	205,044
Total	2068/69	119,297	180,172	108,272	111,951	78,878	598,570
	2069/70	124,740	196,156	107,024	113,833	75,209	616,962
	2070/71	126,607	176,840	111,912	123,916	84,546	623,857

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

Out of the total 623,857 new acceptors in spacing methods, the percentage share of new acceptors among different spacing methods recruited in FY 2070/71 shows a dominance of injectable constituting 38 percent, followed by condom 33 percent, oral pills 18 percent, implant 6 percent and IUCD 5 percent (Fig 1.1). All spacing methods users constitute 11 percent of MWRA.



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

The trend (in number) of current users has increased during FY 2070/71 (Table 1.4). Total number of current users was 2,446,252; 2,461,700 and 2,514,044 in FY 2068/069, 2069/2070 and 2070/71 respectively. The number of current users has declined in EDR and CDR while the number of current users in WDR, MWDR and FWDR has increased. The total number of current FP users has increased in National level.

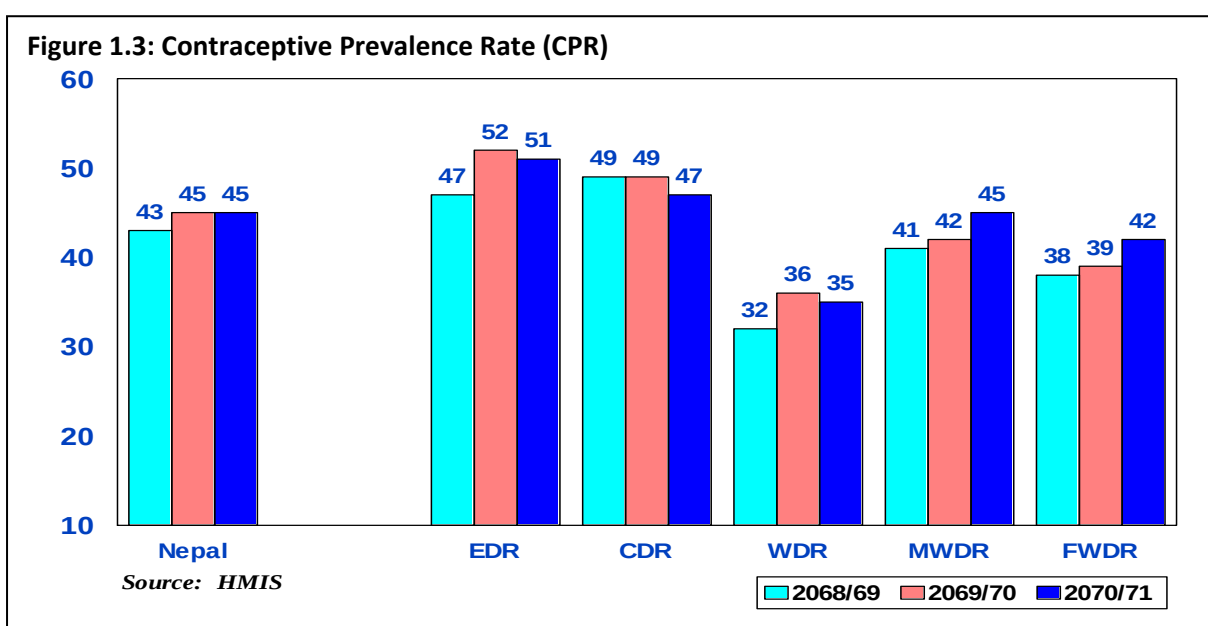
Table 1.4: Trend in current users in spacing and limiting methods by region, FY 2068/69 to 2070/71

Method	Year	Region					National Total	Sharing of methods (%)
		EDR	CDR	WDR	MWDR	FWDR		
Spacing methods	2068/69	263,413	338,877	152,302	165,811	104,727	1,025,130	42
	2069/70	266,501	348,461	153,480	167,782	100,016	1,036,240	42
	2070/71	266,176	33,7009	165,479	197,272	112,029	1,078,001	43
Permanent methods	2068/69	354,899	621,319	206,992	139,043	98,869	1,421,122	58
	2069/70	358,156	623,783	206,484	139,083	97,954	1,425,460	58
	2070/71	361,877	622,426	208,926	135,411	107,403	1,436,043	57
Total users	2068/69	618,312	960,196	359,294	304,854	203,596	2,446,252	
	2069/70	624,657	972,244	359,964	306,865	197,970	2,461,700	
	2070/71	528,053	954,774	374,030	332,683	216,555	2,514,044	

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.

CPR for modern family planning method, as shown in Figure 1.3 is computed based on service data reported to HMIS. HMIS do not capture all private sector service data. The Figure 1.3 also indicates that CPR of modern method over the three fiscal year period is fluctuating. One of the reasons for such decrease in CPR for modern methods could be high spousal separation due to migration for employment reason. Couples who are not living together for long duration are less likely to use family planning methods as they are not in immediate need. These data indicate that more efforts are needed if the program has to increase the share of spacing methods in the contraceptive method mix.

There is wide variation in CPR at the regional level. CPR has reduced in 2 development region CDR and WDR but increased in MWDR and FWDR and almost same in EDR from FY 2069/70 to 2070/71; National level CPR remains almost same FY 2069/70 45 to 44.91 in FY 2070/71. It was highest in EDR and lowest in WDR (Figure 1.3).



CPR by district reveals a distinct pattern. Saptari, Mustang, Manang and Parsa have CPR greater than or equal to 67 percent which has reached the MDG target. Seven districts including Morang, Siraha,

Dhanusha, Mahottari, Sarlahi, Kavrepalchowk, Rasuwa, Dhading, Makwanpur, Rautahat, Bardia and Surkhett have CPR in between 55-67 percent. These districts can meet the MDG target of 67 percent, if programs are intensified. 27 districts have CPR level between 40-54 percent while 10 districts have substantially low CPR-below 30. Thus the FP program needs more attention in low and moderate level of CPR districts.

Issues / constraints

Issues / constraints	Recommendation	Responsibility
• Low CPR • Inadequate FP commodities	Micro- planning in low CPR districts	FHD/DHO
	Strengthening FP services in Urban health	FHD/PHC/RD
	FP integration with EPI clinic	FHD/CHD
	Conduct Satellite clinics for long acting methods	FHD/DPHO
	Strengthening FP services in Private hospital	FHD/MD/RHD
	Knowledge update to FCHVs on LARC	FHD/DPHO
Misuse of abortion services	Focus on awareness raising campaign and activities for the rational use of abortion services	FHD/DPHO

3.2 SAFE MOTHERHOOD AND NEWBORN HEALTH

3.2.1 Background

The goal of the National Safe Motherhood Program is to improve the maternal and neonatal health through preventive and promotive activities as well as by addressing avoidable factors that causes complications of pregnancy and childbirth. Evidences suggested that three delays are of critical importance to the outcomes of an obstetric emergency in Nepal's context: (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 factors associated with mortality and morbidity 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. Service coverage has grown along with the development of policies and protocols. For example, role of service providers such as skilled birth attendants (SBA) has expanded. 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 included Birth Preparedness Package (*Jeevan Suraksha* Flip Chart and *JeevanSuraksha* Card) and *Matri Suraksha Chakki* (Misoprostol) distribution for prevention of PPH at home delivery.

Such community level activities are focusing on the continuum of care from pregnancy, through child birth and the post-partum period, including the newborn care. These activities promote birth preparedness and complication readiness (preparedness of money, SBA/health facilities, transport and blood donors), promotion of key ANC/PNC services (Iron, TT, Albendazole), including self-care (food, rest, no smoking and no drinking alcohol, including pregnancy and post-partum period), identification and prompt care seeking for danger signs during pregnancy, delivery and post-partum period.

In FY 2066/67, GoN approved PPH education and *Matri Suraksha Chakki (MSC)* distribution by FCHVs for prevention of PPH at home delivery. In FY 2070/71, misoprostol is procured by GoN funding and distributed to districts. This fiscal year alone, FHD has expanded MSC to 4 districts Nuwakot, Tanahu, Dhankuta and Tehrathum. Altogether 35 districts have been currently implementing the program viz: Kailali, Doti, Achham, Dadeldhura, Bajura, Bajhang, Darchula, Baitadi, Banke, Surkhet, Dang, Salyan, Rolpa, Rukum, Pyuthan, Mugu, Jajarkot, Humla, Jumla, Kalikot, Dolpa, Dailekh, Arghakanchi, Kapilbastu, Ramechhap, Sindhuli, Okhaldhunga, Khotang, Bhojpur, Udaypur, Panchthar.

These interventions have improved access to information and demand for services at the community level contributing to increase in service utilization during pregnancy, delivery and post-partum care including the care for newborn.

2. Rural Ultra Sound Program

The objective of rural ultra sound program is to timely identify complication during pregnancy and refer to the appropriate health facility for complication management. A trained nurse uses a portable ultrasound machine for scan purpose. The 2 old districts have continued implementing the program viz: Mugu and Dhading. In last FY 2070/71, the program was expanded to 6 new districts implemented viz: Solukhumbu, Bajhang, Achham, Dhankuta Humla and Baitadi.

3. Reproductive Health Morbidity Prevention Program:

FHD is currently implementing various reproductive health (RH) morbidity prevention programs viz: uterine prolapse, cervical cancer screening, and obstetric fistula screening.

a) Uterine Prolapse:

Uterine Prolapse (UP) relates on nearly every aspect of women's life and it serves as potential entry for improving reproductive health, reproductive rights, gender equity, and empowerment of women. Many factors have directly and indirectly cause this morbidity. UP is not an MDG indicator, however, it is indirectly related to goal of NHSP-2.

Uterine prolapse is the priority one program of Government of Nepal. Since, last 5 years separate fund has been allocated for uterine prolapse and a focal person is appointed at the FHD. In FY 2070/71, 39,053 women have been screened for uterine prolapse among them 3,678 have presented with first degree prolapse, 2,940 with second degree prolapse and 3,719 with third degree prolapse. 5,174 women were treated with ring pessary and 4,445 women were treated for uterine prolapse surgery. Till the end of this fiscal year approximately 44,445 surgeries have been performed.

b) Cervical cancer screening and prevention training:

The National Cancer Registry Program estimates cervical cancer as the second most common after lung cancer (both men and women). It accounts for 21.4% of all the cancer in women appearing most frequently in 34-64 years. Till 2010, there was no national screening program for cervical cancer placed in public sector. A national guideline on cervical cancer screening and prevention was developed in the year 2010. FHD aims at achieving the goal of screening at least 50% of the target population in five years' time with a reduction in mortality by cervical cancer by 10%.

National cervical cancer screening and prevention guideline defines the target age group for screening between 30-60 years old and screening interval to be 5 years. The cervical cancer screening and prevention training is designed to familiarize service providers with the knowledge and skills to do cervical cancer screening using VIA and treatment of suspected lesion using cryotherapy as a single visit approach.

In FY 2070/71 cervical cancer screening and prevention program have been initiated by the FHD. 80 health workers from Sunsari, Dhanusha, Parsa, Chitwan, Nawalparasi, Rupandehi, Kathmandu, Kaski, Banke, Kailali districts have been trained in 5 different batches. Some of these trainees would serve as potential trainers in the future expansion sites. Three training sites for CCSP program have been viz: BPKIHS-Dharan, BPKMCH-Chitwan, Kathmandu Model Hospital.

c) Obstetric Fistula screening:

In FY 2070/71, obstetric fistula screening has been initiated in the RH screening camp at the district level. Obstetric fistula screening questions have been updated in the previous screening list. A total of 136 cases of fistula have been screened throughout the country (except from districts of western region). Obstetric fistula operation has been initiated in Patan Hospital, Kathmandu Model Hospital, BPKIHS and Bheri Zonal Hospital.

4. Human Resource

A total of 1,375 ANMs and 75 staff nurses have been recruited on local contract to support 24-hour delivery services in PHCCs and HPs. National Academy of Medical Sciences (NAMS) has trained 7 doctors in Diploma course in Gynecology and Obstetrics. These doctors have been posted in following health facilities Sagarmatha Zonal Hospital, Seti Zonal Hospital, Bheri Zonal Hospital, Dadeldhura sub-regional Hospital, Janakpur Zonal Hospital, Narayni Sub-regional Hospital, and ...

Family Health Division has been coordinating with NHTC to provide SBA training to doctors and staff nurses. A total of 29 doctors have been trained in advance SBA and 1,197 nurses have been trained in SBA. Since, 2007 in-service SBA training was initiated and till date 5,850 SBAs and ASBAs has been trained.

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 BEONC/CEONC services, it is very important to have referral services to the pregnant women. To address this issue FHD has launched emergency referral fund program to facilitate referral services in fourteen districts in last fiscal year namely Bhojpur, Taplejung, Khotang, Rasuwa, Manang, Mustang, Dolpa, Humla, Jajarkot, Mugu, Rolpa, Rukum, Bajura, and Darchula. In FY 2070/71 emergency referral fund has been expanded to 2 more districts viz: Ramechhap, Terathum. 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 crux of this program is to provide emergency referral services to women from poor, dalit, janjati, geographically disadvantage; socially and economically disadvantage communities who need emergency caesarean section (C/S) or complication management during pregnancy.

6. CEONC program:

In FY 2070/71 CEONC program has been expanded in 8 districts. Four districts, Terathum, Tanahun, Rolpa and Bajura have been directly supported by Government. The other 4 districts viz: Myagdi, Pyuthan, Bardia, and Mahottari has been supported by Nick Simon Institute.

In FY 2070/71 some money has been allocated to strengthen and expand CEONC services in 35 districts with emphasis on (local) recruitment of MDGP/Gynecologists. CEONC services are currently running in 56 districts. This has resulted in increased number of CS in these districts (See Annex sheet on Safe Motherhood).

7. Safe Abortion Services

According to global and national evidence there are various socio-economic reasons for a woman to face unwanted pregnancy including the limited access to family planning information and services. Such women if do not get access to safe abortion services in timely manner are at high risk of developing complications due to unsafe abortion or in worst case –suicide. Thus, there is a necessity to make this service available, accessible and affordable to all needy women with confirmed unwanted pregnancies. The National Safe Abortion Implementation Guide/FHD has defined four key components of comprehensive abortion care (CAC) and they are; i) pre & post counselling on abortion methods and as well on contraceptive methods, ii) termination of pregnancy as per National protocol iii) diagnosis and treatment of existing RTIs and iv) provide contraceptive methods as per informed choice and follow up for post abortion complication management.

In 2070-71 all CAC training curriculum were updated as per 2011 WHO Safe Abortion Technical Guidance leading to increased access to quality CAC (MA & MVA) and post MA contraceptive methods. In FY 2070/71, NHTC provided training to 200 physicians and staff nurses as CAC

(MVA/MA) providers, 112 ANMs trained as SBAs were trained as MA only providers, 10 MDGP/Gynecologists were trained as 2nd trimester abortion providers, and 3398 FCHVs were trained to provide information and make timely referrals on RH services.

By 2070/71 CAC (MVA and MA) services had been expanded to all 75 districts hospital and to over 50% of PHCCs. Additionally, 2nd trimester abortion services are available in 18 hospitals with CEONC (Panchthar, Morang, Saptari, Dhanusa, Parsa, Chitwan, Kaski, Baglung, Rupandehi, Surkhet, Dang, Banke, Kailali, four Medical Colleges, Model hospital, and Maternity Hospital in Kathmandu) and MA only service has been expanded in new four districts (Bara, Parsa, Kapilvastu, and Nawalparasi) making the service available in 27 districts; Panchthar, Jhapa, Dhankuta, Morang, Saptari, Dhanusha, Rautahat, Chitwan, Kavre, Lalitpur, Dhading, Baglung, Tanahu, Kaski, Myagdi, Rupandehi, Surkhet, Dang, Banke, Kailali, Kanchanpur, Jumla, and Kalikot.

Beginning from FY2070/71 as per NHSP-IP2 direction safe abortion program has been given priority to ensure the availability of five modern contraceptive methods in all SAS sites and to achieve this purpose ninety ANMs trained as MA providers were made competent on IUCD and Implant. Followed by this all providers received essential equipment, supplies and commodities to offer high quality MA, IUCD and Implant. Additionally "BCS" (Balanced Counseling Skills) approach has been used to improve providers' counselling skills.

As a result in 2070-71 a total of 90,468 CAC and PAC service has been provided out of which 78,101 (EDR 11,590, CDR 31,852, WDR 16,772, MWDR 9,989, FWDR 7,898) women received Comprehensive Abortion Care (CAC) service from 776 listed sites. Out of the total 24% women received long acting contraceptive methods and there was 1.3% post abortion complication.

8. Obstetric First Aid orientation:

The obstetric first aid (OFA) orientation is initiated with the objective to capacitate paramedics working at rural health facilities (where SBAs are not available) with obstetric first aid skills. This orientation mainly focuses on capacitating a team which could support SBAs (SN/ANM) in managing obstetric complications. In FY 2070/71, OFA orientation was provided in two districts viz: Gorkha and Taplejung districts. A total of 20 health workers have been trained in each districts.

9. Nyano Jhola Program:

The Nyano Jhola Program was launched in FY 2070/71. The program is implemented in all 75 districts and below level health facilities of the country. The objective of the program is to prevent hypothermia and infection of the newborn. Moreover, the program intends to promote institutional delivery at district and below level health facilities. The Nyano Jhola consists of warm clothes for mothers and babies. It consist of two sets of bhoto, daura, napkin, cap, socks, gloves, and one set of wrapper, mat for baby and gown for mother.

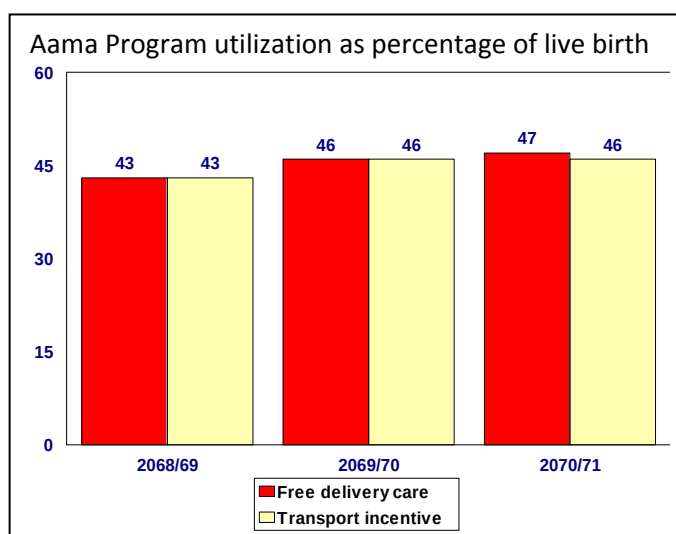
10. Aama Program:

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 4 ANC 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, Aama program was implemented in 64 non-state health facilities. FHD administrative record shows that 87 health facilities functioning at the level of providing CEONC service, 161 health facilities functioning at the level of providing BEONC service, 1478 health facilities functioning at the level of birthing centers are currently providing Aama Surakshya Program. Till the end of FY 2070/71, 61 districts were providing CEONC service, however only 56 districts have been able to provide service in regular basis.

Nationally, Aama program data showed that 47 percent of women received free delivery care as per expected live-births and 46 percent of women received transportation incentive as per expected live-births (Figure 3.2.1). Slightly few women are receiving free delivery care have been receiving the transportation incentive.



Financial management

There has been a substantial increase in the budget allocation for Aama program over the last couple of years. Consequently, the budget absorption capacity of the DoHS has also improved. However, in FY 2070/71 only 80% of the budget is absorbed see (Table 3.2.1).

3.2.3 Achievement**1. Antenatal Care**

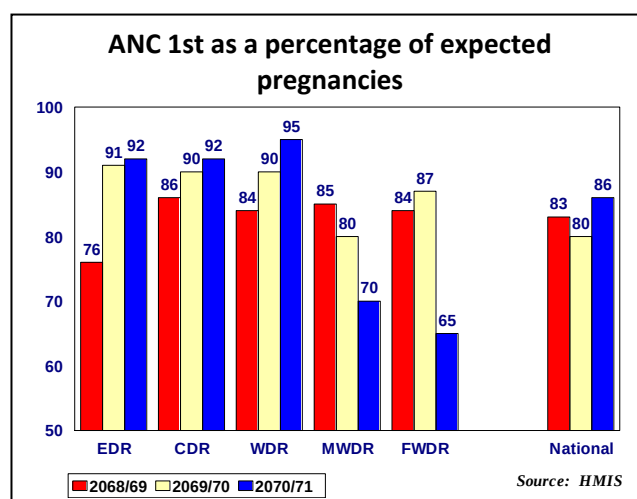
Antenatal care services include:

- At least four antenatal check-ups: first at 4th month, second at 6th month, third at 8th month and fourth at 9th 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 and deworming tablets to all pregnant women and malaria prophylaxis where necessary.

Table 3.2.1: Total Budget Allocation and Expenditure in NPR Million

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 (2010/11)	850.0	648.7
2068/69 (2011/12)	900.0	828.4
2069/70 (2012/13)	956.0	834.2
2070/71 (2013/14)	1050.0	841.84

Source: Aama Program, Financial reporting, FHD (based on the reports received. Figures were extrapolated for cost centers with incomplete reporting) excluding cost for 4 ANC



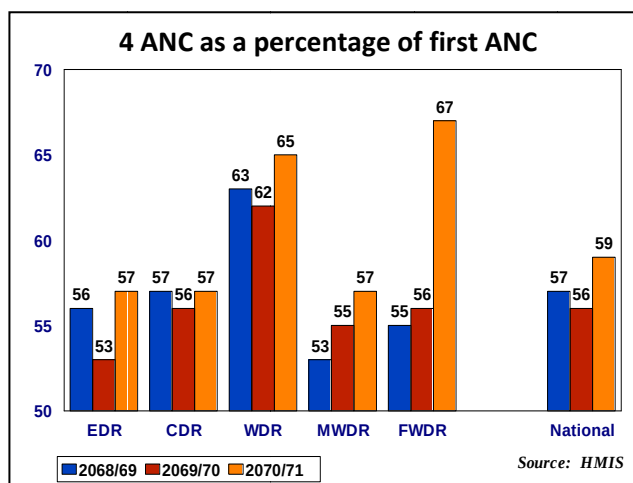
Service statistics of the last three years shows that the national average of first ANC visit as percentage of expected pregnancy has increased from 83 to 89 percent in 2069/70 (Figure 3.2.2). However, in FY 2070/71 it has decreased to 86 percent. Table 3.2.2 shows the percentage of first ANC visit by age distribution. Compared to last fiscal year, more women who are less than 20 years of age have come for 1st ANC.

Table 3.2.2: 1st ANC visit by age distribution in expected pregnancies

	1 st ANC visit by <20 years			1 st ANC visit by ≥20 year		
	2068/69	2069/70	2070/71	2068/69	2069/70	2070/71
National	16.49	18.68	17.24	66.50	69.90	68.6
EDR	15.82	19.79	18.68	60.04	71.65	73.27
CDR	15.44	17.39	16.57	70.91	72.81	74.94
WDR	13.19	15.55	15.94	70.56	74.17	79.43
MWDR	24.76	24.81	20.95	60.45	54.79	48.66
FWDR	16.98	18.03	13.3	67.02	68.84	51.77

Mothers are encouraged to make at least four antenatal check-ups: first at 4th month, second at 6th month, third at 8th month and fourth at 9th month of pregnancy for a complete ANC care (see the section on *Aama Program*).

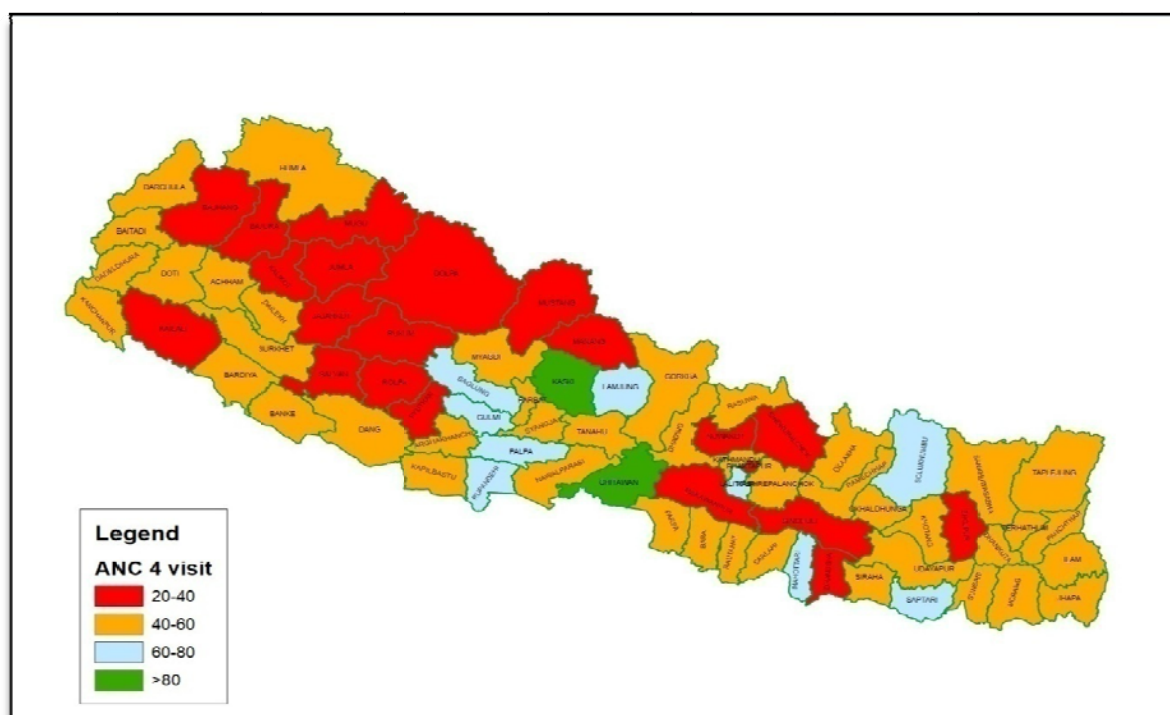
There is a monitoring system in place to track the timing of ANC visits as per the ANC protocol since 2066/67. Figure 3.2.3 shows the pregnant women attending at least 4 ANC visits, irrespective of the timing of visit, as percentage of first ANC visit.



As in the previous years, less than three fifth of the mothers who attended first ANC has completed the four ANC visit in the FY 2070/71. However, there seems to have slight improvement this fiscal year as compared to previous years indicating that still 31% of the mothers do not complete the four ANC visits. Almost 10% increment is observed in far western region has as compared to last year.

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 two districts (Chitwan and Kaski) have already achieved the 2015 target (80%), eleven 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.

3.2.1: ANC 4 visits by district, 2070/71



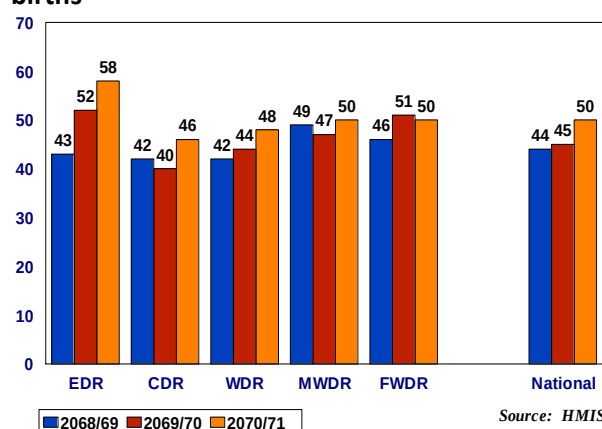
2. Delivery Care

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 (EmOC 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.

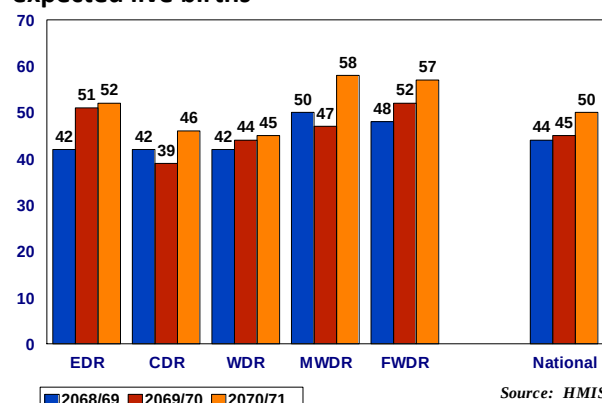
Nepal has committed in achieving 60 percent deliveries by SBA by 2015 (2071/72). Deliveries attended by skilled birth attendant have been in increasing trend from 44 to 50 over the last two years. In FY 2070/71 a 5 percent increment has been noted in national average compared to last fiscal year. EDR, MWDR and FWDR have good coverage of skilled attendant at birth.

Percentage of SBA delivery among expected live births



Institutional delivery as percentage of expected pregnancies has been in increasing trend from 44 to 50 percent over the last three consecutive years. In FY 2070/71 (Figure 3.2.6) institutional delivery as percentage of expected pregnancy at national average has increased by 5 percent as compared to last fiscal year. EDR is close to achieve 60% institutional delivery.

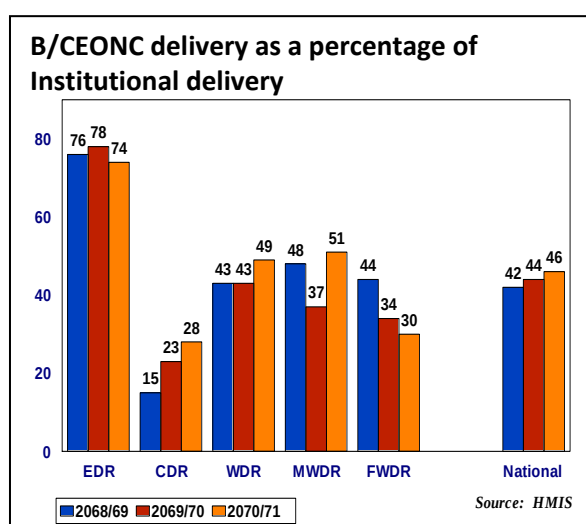
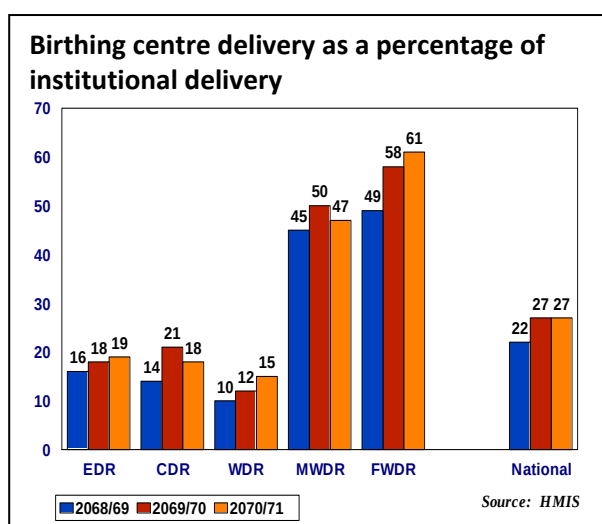
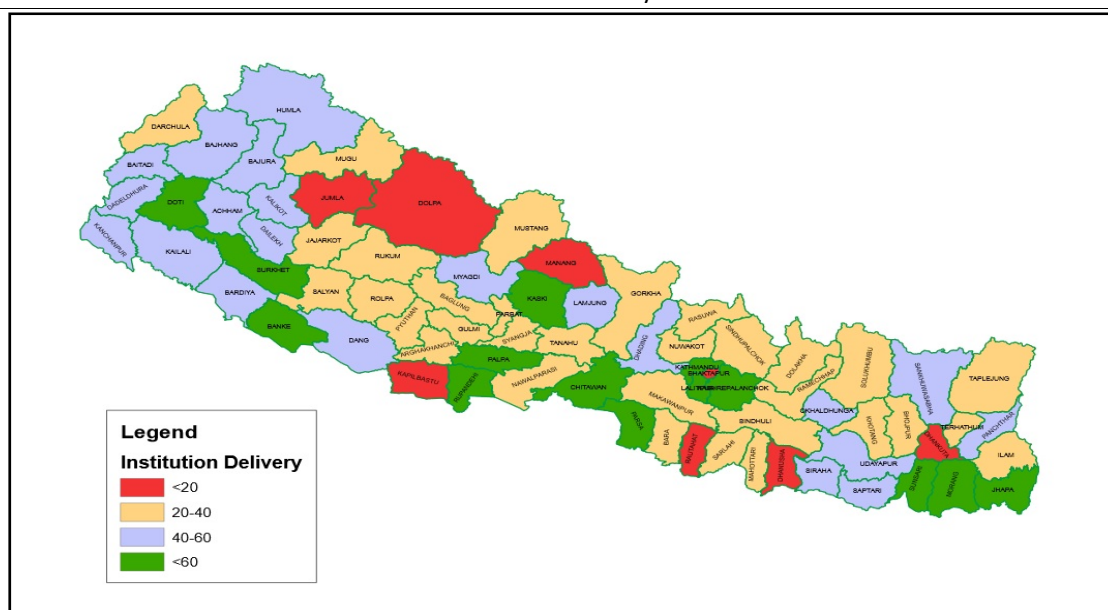
Institutional delivery as a percentage of expected live births



Nepal aims at raising institutional delivery at 60% by 2015 (NHSP2, 2010-2015). Map 3.2.2 shows that fourteen districts have already achieved the 2015 target of 60 percent institutional delivery, 61 districts are on track to achieve the target.

Safe motherhood findings from Nepal Multiple Indicator Cluster Survey 2013

Indicators	Finding
Skilled birth attendant at delivery	55.6%
Institutional deliveries	55.2%



Birthing center delivery has improved from 22 percent to 27 over the last years; however, in FY 2070/71 it has remained stagnant at 27 percent as compared to last year. Almost half of the babies born in health facilities are born in birthing centers in MWDR and FWDR. Almost 1500 birthing centers share less than one third of all health facility deliveries.

An increasing trend has been observed in institutional deliveries occurring at the B/CEONC level from 42 to 46 percent over the last three years. Almost 75% of all institution deliveries occur in B/CEOC centers in EDR. CDR has reported lowest percentage of institutional deliveries at B/CEOC.

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 first postnatal care at the health facility among expected live births has increased from 55 in FY 2069/70 to 59 percent in FY 2070/71. Increment in first postnatal visit among expected live birth has been observed in all development regions except for FWDR.

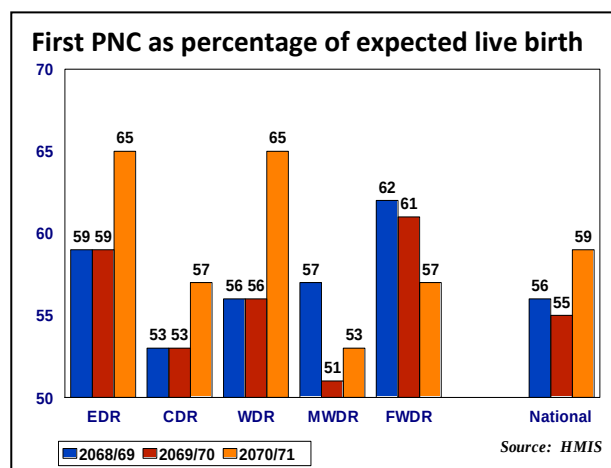
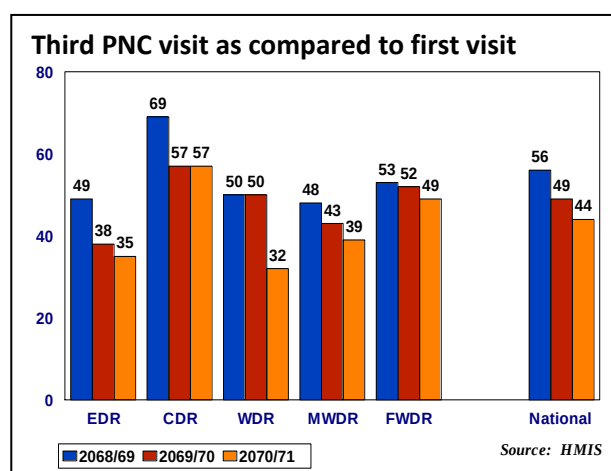


Figure 3.2.7 shows that the pregnant women attending at least 3 PNC visits, irrespective of the timing of visit, as percentage of first PNC visit. The number of women attending 3 PNC visits has been in declining trend. In FY 2070/71, women completing third PNC have declined by 5 percent. This indicates that still 56% of the mothers do not complete the three PNC visits.



4. Newborn Care

Newborn care includes;

- health education and behavior change communication on essential newborn care practices include;
- 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.

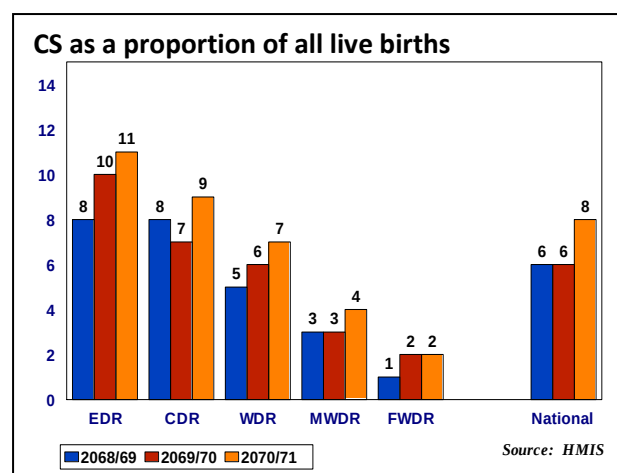
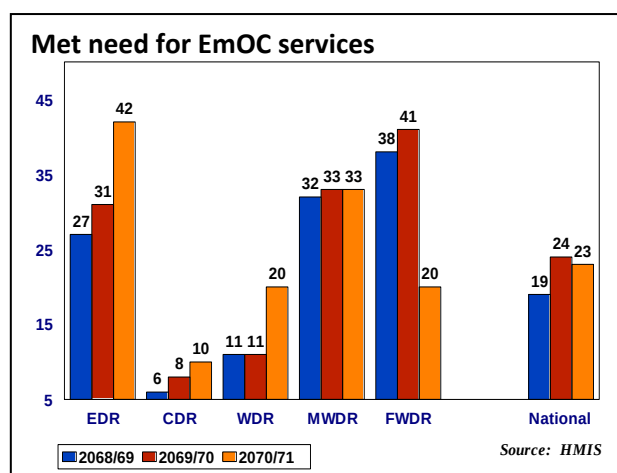
5. Emergency Obstetric Care

Basic emergency obstetric care (BEONC) 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 (CEONC) includes surgery (caesarean section), anesthesia and blood transfusion along with BEONC functions. Safe blood transfusion is an essential part of CEONC, 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, CEONC services will be available in 60 districts, 80 percent of PHCCs will provide BENOC services and 70 percent of HPs will provide delivery services. Table 3.2.2 presents the status of CEONC, BEONC and birthing centers in FY 2070/71.

Table 3.2.2: Status of BEOC/CEOC, 2070/71

Region	Public						Private			
	BC			BEONC		CEONC	BC	BEONC	CEONC	Total
	SHP/HP	PHCC	Hospital	PHCC	Hospital	Hospital				
EDR	251	25	1	22	6	13	3	3	6	330
CDR	317	32	0	31	7	13	16	2	14	432
WDR	246	15	0	26	7	10	3	2	7	316
MWDR	339	3	0	26	6	11	0	0	4	389
FWDR	226	1	0	18	2	8	0	3	1	259
Total	1379	76	1	123	28	55	22	10	32	1726



EmOC met need has been slightly decreased as compared to last fiscal year. EmOC met need has almost halved down in FWDR whereas in other region (EDR, CDR and WDR) it has improved as compared to last year. All women who needed obstetric complication should receive EmOC services; therefore the aim is to attain 100%.

C/S as a proportion of all live births has been found increasing as compared to last two consecutive years. In FY 2070/71, C/S as a proportion of all live births has increased by 2 percent. At population level 5-15% of C/S as a proportion of all live births is accepted as minimum and maximum standard by the WHO. EDR is reported to have the highest proportion of C/S births.

Table 3.2.3: EOC monitoring, 2070/71

Region	Total expected live births	15 % of expected live births requiring EOC	Deliveries conducted at C/BEOC sites	Deliveries conducted at BC (SHP, HP, PHCC)	Total deliveries conducted at B/COC	Number of obstetric complications managed	Number of C/S conducted	Proportion of all births at B/CEMOC and BC	Met need for EOC services	C/S as proportion of all births
EDR	147,376	22106	56824	14350	71174	9218	15448	48.3	41.7	10.5
CDR	234,342	35151	30829	19298	50127	3504	21303	21.4	10	9.1
WDR	123,901	18585	26975	8111	35086	3671	9080	28.3	19.8	7.3
MWDR	93,032	13955	27495	25350	52845	4545	3633	56.8	32.6	3.9
FWDR	63,795	9569	10931	22241	33172	1912	1065	52	20	1.7
National	662,285	99343	153052	89350	242402	22850	50529	36.6	23	7.6

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

Issues/Constraints	Recommendations	Responsibility
Sustainability of Aama program	▪ Funding from GoN source need to be increased every year	MoHP, FHD
Women are not receiving free care as stipulated in the Aama guideline	• Strengthen current monitoring capacity and take necessary managerial actions to health institutions including private sector	DOHS, FHD, RH, D(P)HO
Increasing number of birthing centers	▪ should be Strategic upgrading of health facilities into birthing centers	MoHP, D(P)HO
Yearly contract of MDGP, SN, AA, ANM, SM coordinator	▪ Multi-year contract system should be in place	MoHP
Referral mechanism to be established	▪ Pilot recommendations from referral guideline and implement accordingly	FHD
Inadequate and timely supply of equipment and commodities	▪ Simplify procurement system ▪ Strengthen decentralization of procurement system	MoHP, LMD, FHD, District
Low utilization of Birthing Centers	▪ Recruit trained ANM/Staff Nurse ▪ Strengthen in-service skills assessment, SBA and newborn care training ▪ Innovate programs to encourage delivery at birthing centers	D(P)HO
Over reporting of uterine prolapse surgery by private institution	▪ Institutionalization of uterine prolapse surgery	MoHP, FHD, RHD, D(P)HO
SBA with limited skills in essential newborn care and PPIUCD	▪ Strengthen essential newborn and PPIUCD ▪ Incorporate newborn and PPIUCD components into SBA curriculum	FHD NHTC with support from FHD
Quality service from Birthing Centre • Human resource • Service quality • Access to remote area/population • Fistula • Poor ANC visit	▪ Need based temporary hiring. ▪ Quality monitoring and mentoring of providers. ▪ Indicator for quality service at birthing centre. ▪ Strategy to reach unreached sub-population. ▪ Incorporate screening for fistula ▪ Rapid assessment and expansion of rural USG. ▪ Mobile USG for ANC	MOHP/DoHS FHD (QoC) FHD FHD, DHO/DPHO

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 51,470 FCHVs in the country (47,328 FCHVs at rural/VDC level and 4,142 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 2070/71 include the following:

- Dress allowances to FCHV
- Bi-Annual FCHV Review meeting (27 districts)
- FCHV Day celebration
- Farewell of Long acting FCHV

3.3.3 Achievement

There are altogether 51, 470 FCHVs serving people of Nepal out of which 47,328 are in rural areas and 4,142 in urban health centres. The report from 49,803 FCHVs is received on the basis of which analysis is presented. Urban FCHVs are mobilized through municipalities. Average number of people served by FCHVs in the reporting period (usually a year) is 21 among which people from Mountain, Hill and Terai are 11, 17 and 31 respectively. Share of FCHV service in total Pills and ORS distribution and mother's group meeting conduction progress is shown below.

	% of distribution		% of Mothers group meeting held
	Pills	ORS	
Mountain	57.59	21.98	67.91
Hill	48.14	28.24	80.29
Terai	56.63	70.03	86.70
National	53.08	47.17	78.58

Source: HMIS

Out of total oral contraception pills and ORS distribution, about half of the commodities are distributed by FCHVs. The conduction of mother's group meeting is quite low in the mountains. Similarly further services in number provided by them can be observed below.

	Pills Distribution (Cycle)	Condom Distribution to (Pcs)	Iron Tablet Distribution	ORS Distribution (Pkts)	ANC Services Confirm		Confirm no of Neonates bath within 24 hours
					1st	4 Times	
Mountain	61,751	567,490	1,406,259	164,879	27,954	18,125	20,789
Hill	352,471	3,914,605	7,965,862	813,109	106,493	96,977	96,927
Terai	499,308	10,024,430	13,915,259	724,342	218,725	198,059	171,741
National	913,530	14,506,525	23,287,380	1,702,330	353,172	313,161	289,457

Source: HMIS

Issues / constraints

Issues / constraints	Recommendations	Responsibility
Demand for additional incentives by FCHVS	Address the issue at policy level	MoHP
Unequal distribution of FCHVS in VDCs and municipalities	Act according to the FCHVS survey to assess work effectiveness and motivational factors survey findings. Develop the program strategy	FHD FHD and PHC/RD
Increased work load of FCHVs	Minimize work load	FHD/CHD/DHO
Illiterate FCHVs	Knowledge update to FCHVs	FHD/DHO
Very few FCHVs participated in farewell FCHVs	Rethink on farewell package and process	FHD/DHO
Low utilization of FCHV fund in health related activities	Strictly implement guideline	FHD/DHO
Low functioning of mother groups	Reactivate mother groups	FHD/CHD/DHO

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 2070/71

- PHC/ORC reactivation and micro planning orientation
- PHC-ORC kits with recommended equipment and drugs were purchased to be used during PHC-ORC clinic

3.4.3 Analysis of service coverage

- 1) Outreach clinics conducted and people served in 2070/71 is presented below.

Region	Total No. of clinics	Service Provided to visitors (New+Old)
Mountain	1,590	289,708
Hill	6,455	13,40,416
Terai	4,573	1,265,327
National Total	12,618	2,895,451

Source: HMIS

Altogether 2.9 Million people-times served through 12,618 ORCs conducted 128,787 times.

Note:

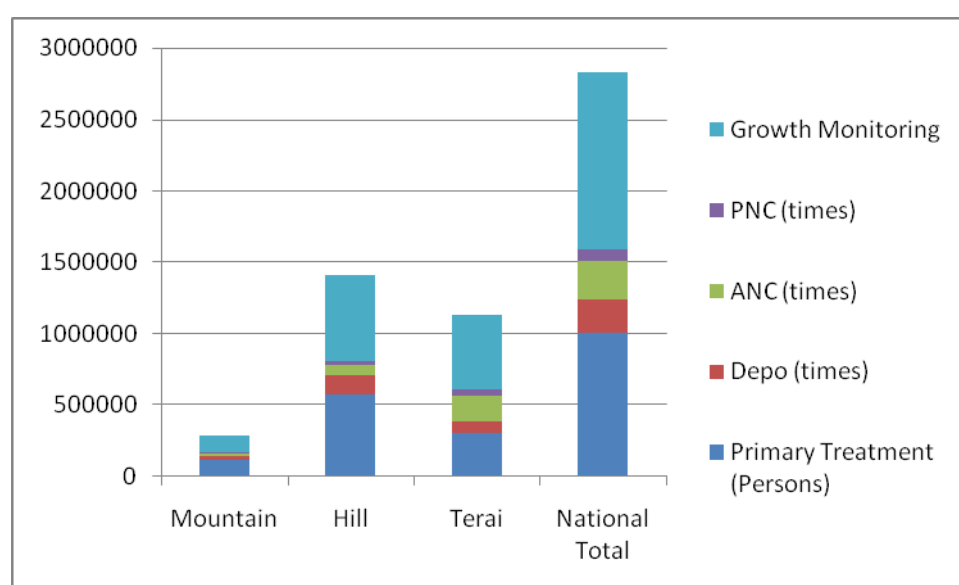
- Target: Total number of clinics expected to run in a year (12,618 PHC/ORC Clinics x 12 times = 151,416);
- Achievement: Total no. of clinics reported to have been conducted is 128,787 (85%)

- 2) The average number of people served by ORCs explains the performance on coverage.

Region	Average no of People Served			
	PHC/Day	HP/Day	SHP/Day	PHC ORC/Clinic
Mountain	35	12	10	20
Hill	50	17	11	20
Terai	53	30	19	27
National Total	50	20	14	22
Eastern Region	39	20	14	22
Central Region	65	18	13	21
Western Region	39	18	13	21
Mid -western Region	41	23	17	24
Far western Region	59	25	14	27

Average number of clients service provided per clinic is 22 that was 21 in the last FY 2069/70. People served per clinic is higher than those served per day through health post and much higher than sub-health post.

3) The type of the service covered by PHC-ORCs can be observed in the graph



It is remarkable that PHC-ORCs were established initially to promote family planning. Current service type shows growth monitoring of the children and primary treatment of diseases has taken major proportion of the services provided. The service composition shows urgent need of orienting PHC-ORC function towards family planning services and maternal and new-born care.

3.4.4 Issues/Gaps

Issues / constraints	Recommendation	Responsibility
- Service coverage of PHC/ORC - Upgraded ANM/AHW are not interested to conduct PHC/ORC clinics due to lack of Field allowance - PHC/ORC committee meeting not functional - Replacement of PHC/ORC kit in very limited clinics of districts - Lack of place (infrastructure) to conduct PHC/ORC	Mobilization of ANM/AHW in PHC/ORC clinics with field allowance	FHD/DHO
	Supporting supervision and monitoring	
	Reform and re-orient mgt committee members	DHO/DPHO
	Access PHC/ORC Kit and allocate budget to fill the requirement of PHC/ORC kits	FHD/RHD
	Allocate program and budget for health hut and assess the program implemented in Gulmi and Doti	FHD
Low reporting of PHC-ORC (National 83 %, CDR : 79%, MWDR: 80%)	Revise strategies for PHC/ORC	
	Improve reporting mechanism and monitoring	MD

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 Program, Budget and 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 this section include:

- Estimate annual national targets for family planning, safe motherhood and adolescent reproductive health services including family planning acceptors and RH commodities.
- Carry out regular monitoring of RH and EOC activities in coordination.
- Provide supportive supervisory support to DHO/DPHO and all levels of health facilities regarding RH services.
- Conduct periodic and ad-hoc researches and studies on reproductive health, family planning, maternal and neonatal health, safe 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 completed in the fiscal year 2070/71 include:

3.5.2.1 Annual program and Budget

Annual program and budget is prepared for Family Health Division on the basis of program continuation, RH review recommendation, sub-committee recommendations, district and regional office demands, research and study findings and HMIS provided information.

3.5.2.2 Target population setting, monitoring and research/study

- Target population revision for RH programs is led by HMIS and supported by the division. The target is set for next 10 years on the basis of population census 2011.
- Estimation of contraceptive requirement
Logistic forecasting for contraception and other RH commodities is done in co-ordination of Logistics Management Division and HMIS.
- Review meetings
Regional and national reviews of Department of Health Services are supported by documenting and presenting progress of RH programs. A national RH Review Meeting is conducted to review the progress, partnership effectiveness and plan for annual program and budget. Nepal Health Sector Program (NHSP III) development process is supported by designing periodic plan of RH activities. EOC monitoring meetings conducted at regional and national levels.
- Internal monitoring is mobilized from the division to various district offices and hospitals. The monitoring is focused on the finance flow of Aama Program, Uterine Prolapse management and family planning services. The CEONC strengthening is done through mentor and FHD officials.
- Maternal and perinatal death review exercise scaled to 44 hospitals by capacitating concerned staffs and providing supportive budget for meeting conduction. However, 13 hospitals couldn't function MPDR very well, need felt for further supports.

- Rapid Assessment of Demand Side Financing (Aama and 4ANC) round VIII is conducted in 10 districts. Additionally, exit client interview in seven private health institution is also incorporated in the rapid assessment.
- Study on long acting FP use and removal in Chitawan district is conducted for a month. This study provides information on background characteristics of long acting FP method users and causal factors for use and removals.
- Development of tables and indicators for retrieving maternal mortality data from population census 2011
- Assessment of data sources for suicide related maternal deaths
- Initiation for RH morbidity prevalence survey 2014 (through camps) is done in collaboration with UNFPA
- Co-ordination in research activities conducted through partner organizations and researchers they come in contact to FHD.

3.5.2.2 Guideline/documents development

- Sub-fertility management guideline is prepared to initiate program under RH morbidity management.
- Maternal and Perinatal Death Surveillance and Response Guideline and Implementation Plan (2015-19) is drafted to initiate this exercise under UN recommendation.
- Birth defect surveillance, prevention and control plan (2015-19) is drafted to initiate or integrate birth defect surveillance, prevention and control activities within WHO regional framework for south-asia. Information recording and reporting on congenital anomalies is incorporated in HMIS that comes into effect from 2071/72.
- Safe Motherhood Policy revised draft is prepared to incorporate maternal death notification and newborn health as well as contemporary issues of safe motherhood.
- Initiation for Uterine Prolapse Guideline revision

Other Major Family Health Related Studies published in 2013 and 2014 (Source : NHRC)

1	Chakraborty et. al. 2014	Chakraborty, N., Murphy, C., Paudel M., & Sharma, S (2014). <i>Knowledge and Perceptions of Intrauterine Devices Among Family Planning Providers in Nepal: A Cross-Sectional Analysis by Cadre and Sector</i> . PSI, Nepal.
2	Mehata et al. 2014a	Mehata, S., Paudel, Y. R., Mehta, R., Dariang, M., Poudel, P., & Barnett, S (2014). Unmet need for family planning in Nepal during the first two years postpartum. <i>Biomed Res Int</i> , 2014, 649567.
3	NMICS 2014	CBS (2014). <i>Nepal Multiple Indicator Cluster Survey 2014, Key Findings</i> . Kathmandu, Nepal: Central Bureau of Statistics and UNICEF Nepal.
4	STS 2013	MoHP (2014). <i>Service Tracking Survey 2013</i> . Kathmandu: Ministry of Health and Population, Government of Nepal.
5	UNFPA 2014	UNFPA (2014). <i>Final Facility Based Assessment for Reproductive Health Commodities and Services</i> . Kathmandu: United Nations Population Fund.
6	USAID 2014	USAID (2014). <i>A Report on Verbal Autopsy to Ascertain Causes of Neonatal Death in Nepal, 2014</i> . Kathmandu, Nepal.

Articles in peer reviewed journals (2014)

7	Karkee et al. 2014	Karkee, R., Lee, A. H., & Khanal, V (2014). Need factors for utilisation of institutional delivery services in Nepal: an analysis from Nepal Demographic and Health Survey, 2011. <i>BMJ Open</i> , 4(3), e004372.
8	Khanal et al. 2014	Khanal, V., Adhikari, M., Karkee, R., & Gavidia, T (2014). Factors associated with the utilisation of postnatal care services among the mothers of Nepal: analysis of Nepal demographic and health survey 2011. <i>BMC Womens Health</i> , 14, 19.

9	Mehata et al. 2014b	Mehata, S., Paudel, Y. R., Dotel, B. R., Singh, D. R., Poudel, P., & Barnett, S (2014). Inequalities in the use of family planning in rural Nepal. <i>Biomed Res Int</i> , 2014, 636439.
10	Onta et al. 2014	Onta, S., Choulagai, B., Shrestha, B., Subedi, N., Bhandari, G. P., & Krettek, A (2014). Perceptions of users and providers on barriers to utilizing skilled birth care in mid- and far-western Nepal: a qualitative study. <i>Glob Health Action</i> , 7, 24580.
Reports (2013)		
11	Aryal et al. 2013	Aryal, S., Dariang, M. & Cullen, R. (2013). Improving the quality of pre-discharge postnatal care in selected facilities in Banke district. Kathmandu: Ministry of Health and Population, Government of Nepal.
12	FHD 2013	FHD/NHSSP (2013). Responding to Increased Demand for Institutional Childbirths at Referral Hospitals in Nepal: Situational Analysis and Emerging Options, 2013
13	Upreti et al. 2013	Upreti, S.R., Baral, S., Lamichhane, P., Khanal, M.N., Tiwari, S., Tandan, M., Elsey, H. & Lievens, T. (2013). Rapid Assessment of the Demand Side Financing Schemes: Aama and 4ANC Programmes (The Seventh Rapid Assessment). Ministry of Health and Population; Nepal Health Sector Support Programme and Health Research and Social Development Forum, Kathmandu, Nepal

Major Issues

Research in RH is crucial for program design, planning, monitoring and evaluation. The issue lies, in few instances, co-ordination is not made from beginning resulting in gap and redundancy. Even though studies are completed, sharing of findings is done late to incorporate in the planning exercise. Capacity building for FHD staffs is to be built and enhanced to monitor and appraise the research and studies proposed and conducted.

3.6 ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH

3.6.1 Background

The national Adolescent Sexual and Reproductive Health (ASRH) program is implemented by the Family Health Division/Department of Health Services within the Ministry of Health and Population.

Nepal developed and published the 'National Adolescent Health and Development (NAHD) Strategy in 2000. An implementation guideline on ASRH has been developed in 2007 to support district health managers in operationalizing this strategy. In 2008, a draft national ASRH program under the leadership of FHD was developed with the support of GIZ. This program was successfully piloted in 2009 in 26 public health facilities. Based on the findings from the pilot intervention, a National ASRH Program was designed in 2011 which consists of 4 different orientation manuals for district health managers, district stakeholders, health service providers and Health Facility Operation and Management Committees (HFOMCs)/local stakeholders.

National ASRH program is being gradually scaled up to meet the NHSP II target of making 1,000 public health facilities adolescent-friendly by 2015. As of July 2014, a total of more than 1000 health facilities in 59 districts are providing adolescent-friendly services (AFS) in support of different stakeholders (GIZ, Save the Children, UNICEF, UNFPA, WHO, IPAS and ADRA).

The ASRH secretariat supported by Save the Children Nepal is in full swing at FHD and an ASRH sub-committee meeting is functioning effectively which creates conducive environment for successful implementation of adolescent health program.

Goal

The overall goal of the National ASRH Program is to promote the sexual and reproductive health status of adolescents.

Objectives

- To increase the availability of and access to quality information on adolescent health and development, and provide opportunities to build the respective knowledge and skills of adolescents, service providers and educators.
- To increase accessibility and utilization of adolescent health and counseling services.
- 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 national, districts and community level through FCHVs and mothers groups.

Targets

The major target of the program is to make 1,000 health facilities adolescent-friendly by 2015 in line with National Health Sector Program II. The criteria of adolescent-friendly services (AFS) include, among others, the availability of trained staff as well as information materials on adolescent sexual and reproductive health, the delivery of services in a confidential way, adolescent-friendly opening hours, the display of the AFS logo as well as the inclusion of two adolescents in the HFOMC. Through improving access to family planning information and devices, the program aims to reduce the Adolescent Fertility Rate (AFR) to 70 per 1,000 adolescent women (15-19 yrs.) by 2015, the target of NHSP II which is in line with MDG 5b.

3.6.2 Major Activities

The National ASRH Program achieved the following in FY 2070/2071 (2013/2014):

- Improved capacity of health workers through orientation program to provide adolescent-friendly SRH services through the use of specific counseling tools and IEC materials as well as an open and appreciative attitude.
- Improved capacity of district health managers and HFOMCs to respond to adolescents' health needs.
- Provision of appropriate SRH services to adolescents (family planning, HIV and STI services, safe abortion, counseling etc.
- Equipping health facilities with minimum necessary logistics and equipment to provide SRH services to adolescents in a private and confidential environment.
- Ensuring participation of adolescents in decision-making processes in health facilities by involving them as invitee members in HFOMC.
- Improved recording and age disaggregated reporting on service utilization by adolescents.
- Supporting in increasing the demand for the services through distribution of ASRH related IEC materials to schools and communities as well as the mobilization of different stakeholders and structures at community level.

The following are the activities that have been implemented as per the NAHD Strategy 2000:

1. Information and Skills

Information dissemination through health facilities

- Printed and distributed IEC/BCC booklets, ASRH poster, ASRH comics
- Distributed ASRH flip chart
- Printed and distributed adolescent job aid in Nepali

2. Orientation to Health Service Providers on ASRH

- Program orientations to District Health Managers of 11 program districts
- Program orientations 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.

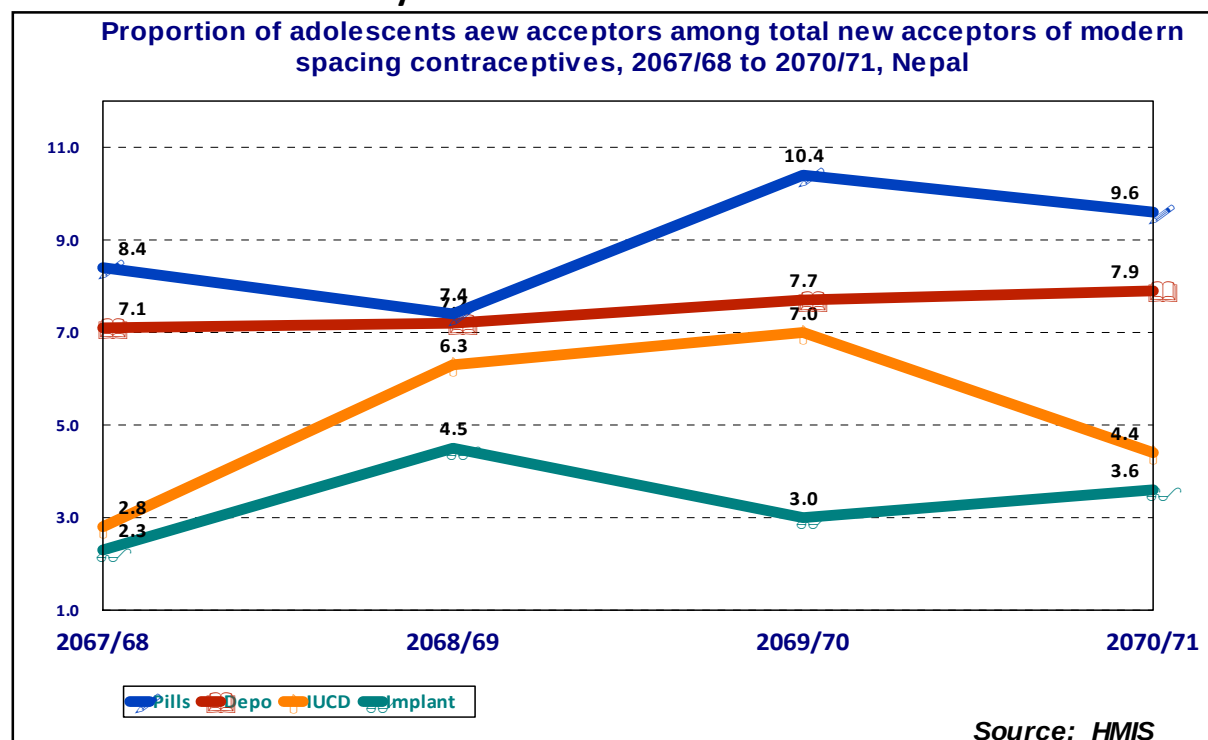
3. Health Services and Counseling

- Making health facilities adolescent-friendly.
- Integrating AFS into the existing health care delivery system.
- 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 ASRH Sub-committee under chair of FHD director
- Display AFS logo and information board at AFS HFs
- Wall painting with key message in AFS HFs
- Community awareness activities through existing structures and NGOs

3.6.3 Achievements Analysis



The above figure shows the trend of proportions of adolescent new acceptors of spacing modern contraceptives from FY 2067/68 to 2070/71 in Nepal. Pills new acceptors rank highest followed by Depo new acceptors whereas IUCD and implant users are less in number. It also indicates that one fourth of new acceptors of modern contraceptives are adolescents among total users of spacing modern contraceptives. The trend of adolescent new acceptors using pills and Depo is slightly increasing in past four years compared to use of IUCD and Implant.

Table 6.3.1: Proportion of Adolescents New Acceptors among total new acceptors of Spacing Modern Contraceptives by Regions

Method	Year	Regions				
		EDR	CDR	WDR	MWDR	FWDR
Pills	2067/68	7.5	9.8	5.1	11.7	6.9
	2068/69	8.1	6.7	4.6	12.3	5.3
	2069/70	14.6	8.1	5.4	16.7	6.3
	2070/71	8.9	9.2	10.7	13.0	5.5
Depo	2067/68	6.4	7.1	6.2	10.3	4.5
	2068/69	6.9	7.4	5.0	11.3	4.2
	2069/70	7.6	7.9	5.2	11.5	4.5
	2070/71	7.5	7.9	5.4	12.1	5.3
IUCD	2067/68	1.6	1.4	1.3	6.0	13.5
	2068/69	3.2	5.1	2.4	15.5	9.6
	2069/70	8.0	4.3	3.9	15.7	8.0
	2070/71	6.3	3.6	4.2	7.8	4.4
Implant	2067/68	1.9	2.3	1.8	3.1	1.6
	2068/69	2.1	2.0	4.6	12.0	1.1
	2069/70	2.7	2.0	2.9	6.8	1.7
	2070/71	2.3	2.9	2.6	6.8	3.0

Source: HMIS,

Table 6.3.1 shows the trend of proportion of adolescent new acceptors among total new acceptors of spacing modern contraceptives by development regions from FY 2067/68 to 2070/71. The proportion of adolescent new acceptors of pills and Depo is increasing in trend and highest in mid western development region and lowest in far western development region. In contrast, the proportion of adolescent new acceptors of IUCD is decreasing in mid west far west development region however its trend is increasing in other development regions. However, less numbers of adolescent new acceptors are using implant, overall it's tend is increasing in all regions.

3.6.4 Implementation Status of ASRH Program

Table 3.6.2: Implementation Status of ASRH Program

2065/66 (piloting)	2066/67	2067/68	2068/69	2069/70	2070/71
Bardia Surkhet Dailekh Jumla Baitadi	Bara Dhading Morang Gulmi Parbat	Jhapa Dolakha Kavrepalanc howk 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	Bhaktapur, Taplejung, Shankhuwasa bha, Rasuwa, Gorkha, Lamjung, Salyan, Mugu, Kalikot, Kanchanpur, Siraha	Panchthar, Ilam, Dhankuta, Terhathum, Bhojpur, Saptari, Dhanusha, Parsa, Sunsari and Sarlahi

The districts and number of health facilities identified for the scale up of ASRH Program in 2071/72 and the support agencies are given in table 3.6.3. and following map also visualize.

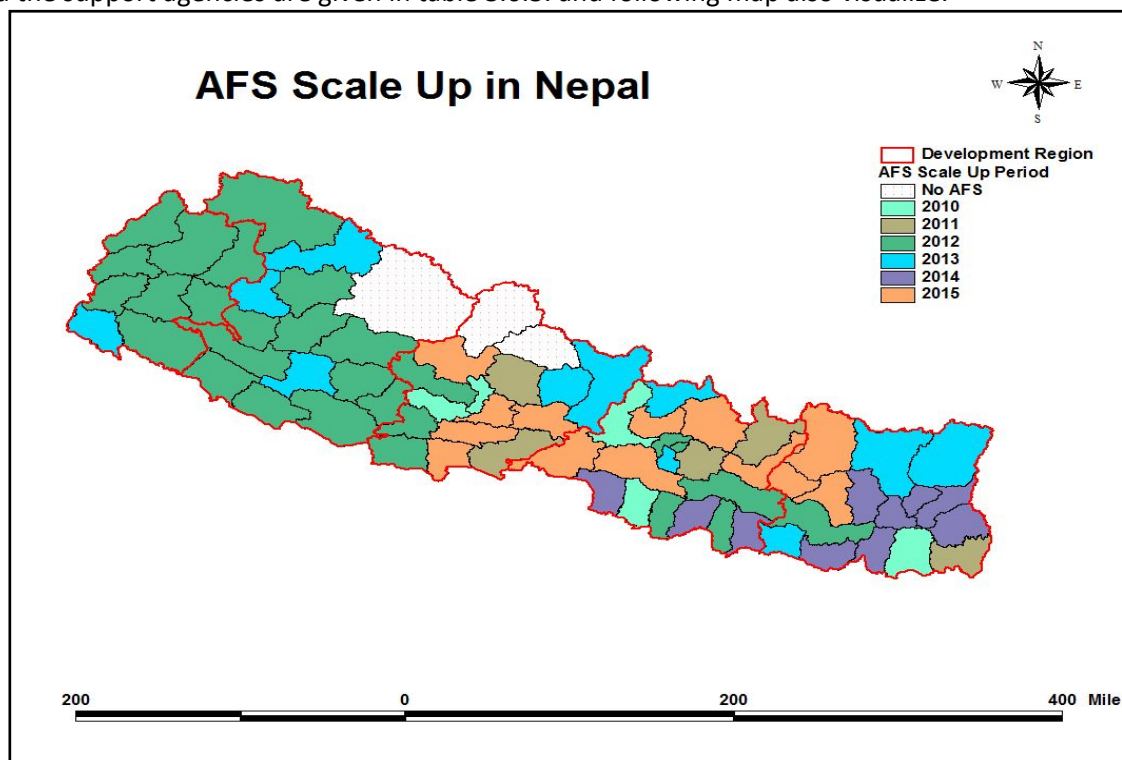


Table 3.6.3: ASRH Program Proposed Plan for FY 2071/72

SN	Source	ASRH Program in New		ASRH Program Extension	
		HF	Districts	HF	Districts
1	GoN	130	Khotang, Okhaldhunga, Solukhumbu, Nuwakot, Ramechhap, Sindhupalchowk, Myagdi, Palpa, Syangja and Tanhu		
2	UNICEF			65	Mahottari, Rautahat, Saptari, Dhanusha and Parsa
3	Save the Children			8	Saptari
4	UNFPA			78	Saptari, Rautahat, Rolpa, Rukum, Baitadi and Bajura
5	FPAN	26	Chitwan and Makawanpur		
	Total	156	12	151	12

3.6.4 Issues

Some of the specific issue/problems identified during implementation of program noted in recent regional review meetings and national review meeting are summarized in Table 3.6.4.

Table 3.6.4: Issues and recommendations

Issues	Recommendations	Responsibility
Quality assurance of ASRH Program	Develop quality indicators/certification criteria and tools Train service providers about it to ensure use of criteria and tools for quality Ensure the availability of essential commodities, equipments and environment according to certification criteria	FHD
Weak capacity of service providers	Develop capacity of at least three service providers from each health facility	NHTC
Poor supervision and monitoring system	Increase number of monitoring visits to AFS sites from different levels	FHD, MD and DHOs
Poor ownership of program at local level	Inform and ensure participation of youths and FCHVs in different meetings and forums	FHD/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	Ensure supply of ASRH related IEC/BCC materials up to HF level	FHD, NHEICC, DHO and Partners

Disease Control

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4.2	Kala-azar	93
4.3	Lymphatic Filariasis (LF)	98
4.4	Dengue	103
4.5	Zoonoses	106
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4.9	Leprosy	123
4.10	HIV/AIDS and STI	146
4.11	Eye Care	158

Curative services

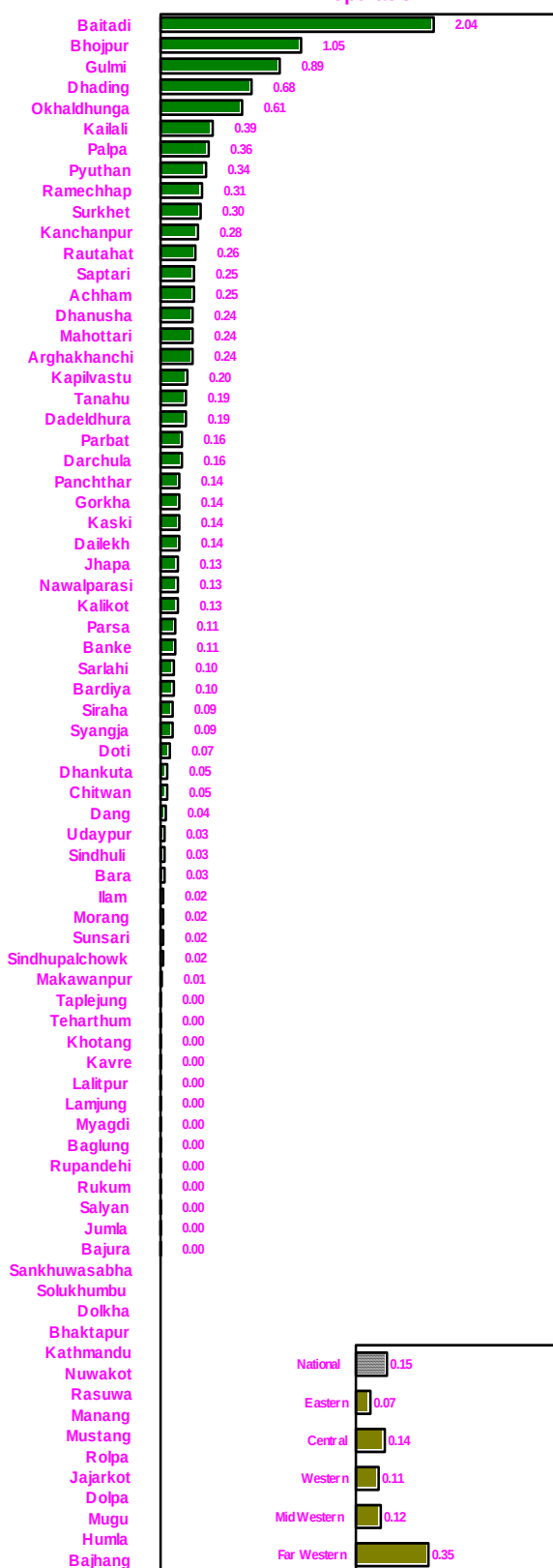
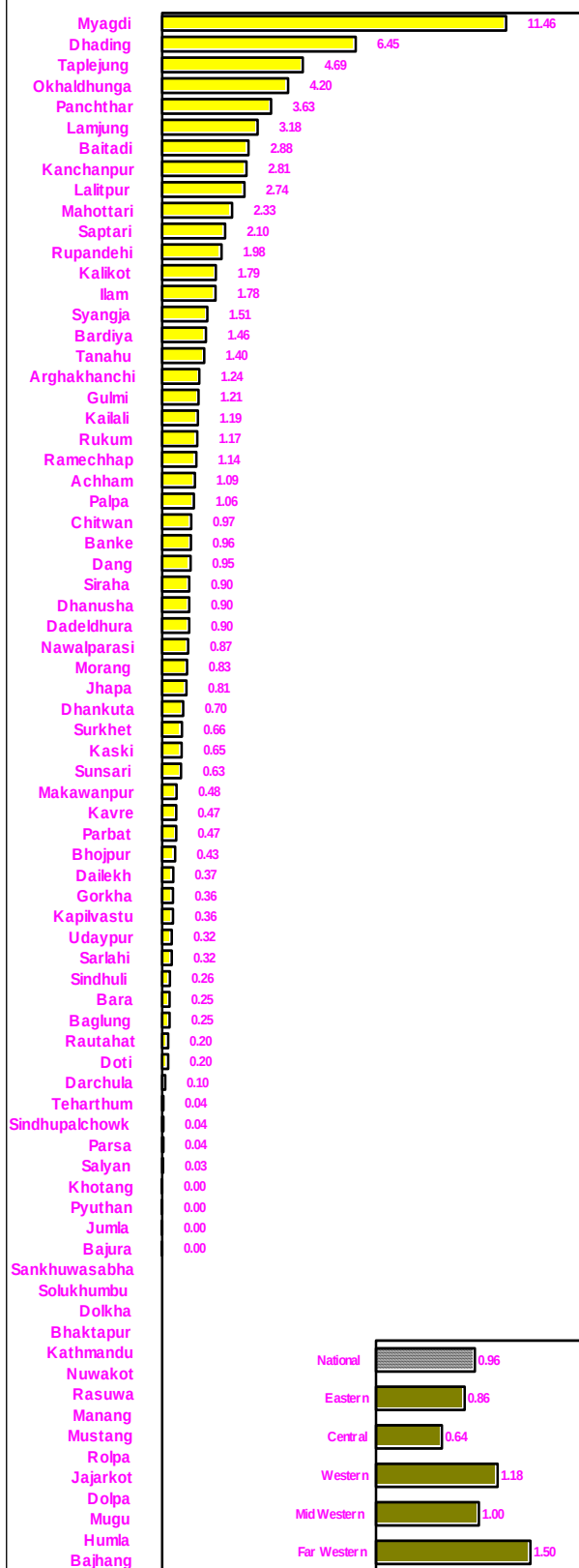
5.	CURATIVE SERVICES (Inpatients/OPD services)	161

Malaria

Fiscal Year 2070/71 (2013/2014)

Blood Slides Examined Rate

Malaria Parasite Incidence Rate/1,000
Population



Source: HMIS

DISEASE CONTROL

4.1 MALARIA

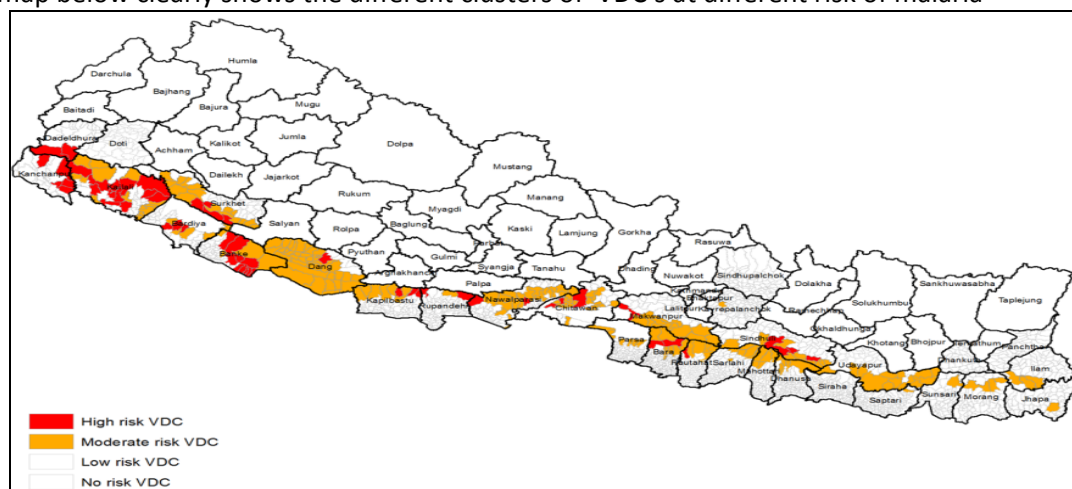
4.1.1 Background

Malaria control project in Nepal was first initiated in 1954 with the support from USAID (the then USOM), with the objective of controlling malaria, mainly in plain region (Terai belt) of central Nepal. In 1958, national malaria eradication program was launched with the objective of eradicating malaria from the country. Due to various reasons the eradication concept 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 control malaria transmission in hard-core forests, foot-hills, inner-Terai and hill river valleys, which accounted for more than 70 % of the total malaria cases in the country. 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. The recent micro-stratification, based on number of malaria cases, geo-ecology, vector breeding and vulnerability due to migration and population movements, further narrowed down the essentials to VDC level risks as compared to earlier district as units of risks. It has clearly shown that only 54 VDC's are at high risk, 201 VDC's at moderate risk and 999 VDC's at low risk.

Based on the micro-stratification report 2013, approximately 13.02 million population (47.9%) live in malaria endemic areas (VDCs); out of which ~1 million (3.62%) live in high risk VDCs, 2.66 million (9.8%) live in moderate risk VDCs, and 9.38 million (34.52%) live in low risk VDCs. A total population of 14.13 (52.1%) is estimated to live in VDCs where there is no malaria transmission. The high risk areas consist of foothills with river belts, forest fringe areas in terai, hill river valleys, inner terai areas. Low risk VDCs lie in plain cultivated outer Terai, mountain, and valleys in the mountains.

Map 4 4.1.1: Malaria micro-stratification

The map below clearly shows the different clusters of VDC's at different risk of malaria



The Global Fund has been continuously supporting malaria control program in the risk areas since 2004.

Nepal's current National Malaria Strategic Plan (NMSP-2014-2025) has identified following vision, mission, goals and objectives:

Vision

Malaria-free Nepal in 2025

Mission

To empower the health staff and the communities at risk of malaria to contribute towards the vision of malaria-free Nepal in 2026.

Goals:

- To sustain zero death due to malaria from 2012 onwards;
- To reduce the incidence of indigenous malaria cases by 90% by 2018 (relative to 2012);
- To reduce no. of VDCs having indigenous malaria cases by 70% by 2018 (relative to 2012);
- To receive WHO certification of malaria free status by 2025.

Objective-1: To enhance strategic information for decision making towards malaria elimination.

Key targets / milestones:

- Ward-wise risk stratified and appropriate/rational interventions executed
 - By the end of 2015, ward-wise malaria risk micro-stratification will be completed, so the intervention units could be wards in place of current VDC's and earlier districts.
- Development and roll over of SMS and web based recording and reporting system for strengthening malaria surveillance, including suspected and confirmed cases reporting.
 - Introduction of Case based surveillance in all districts by the end of 2014.
 - All malaria cases will be recorded and reported through SMS and Web-based MDIS, by the end of 2015.
 - Establishment and expansion of Border check posts: 2 in 2014, 2 in 2015 and 3 in 2016 and continued thereafter.
- Quarterly review of the recorded data and plan interventions accordingly
 - Three quarterly reviews will be conducted and validation of data completed by the end of each year.
- Foci investigation rolled out by the end of 2014
 - At least 54 foci will be investigated in 2014, 160 in 2015 and 100 each year after.
 - Investigated foci will be eliminated gradually and by the end of 2016 a total of 214 foci will be eliminated, sustained thereafter and gradually increased as per above target.
- Number of operational research will be carried out generating evidence for policy making.

Objective-2: To further reduce malaria transmission and eliminate the foci.

Key targets / milestones:

- Guideline for IVM developed and rolled over by the end of 2014 for implementation.
- Prevention using LLIN: Coverage of high risk VDC population through mass campaign and pregnant women in high and moderate risk VDCs through ANC visits.
 - 471,747 LLINs in 2014; 149,969 LLINs in 2015; 252,440 LLINs in 2016; 491,112 LLINs in 2017 and 155,851 LLINs in 2018.

- Prevention using IRS: Regular annual spray covering people living in high risk every year and responsive spraying as indicated by foci investigation.
 - 88,444 households in 2014; 60,000 households in 2015 and 30,000 households in 2016.
- Foci elimination and documentation of lessons learnt for prospective activities.
 - 54 in 2014; 160 in 2015 and 100 every year thereafter.

Objective-3: To improve quality of and access to early diagnosis and effective treatment of malaria.

Key targets / milestones:

- Update the malaria diagnosis and treatment policy, manual and roll over its application by the end of 2014
- Development of training package on malaria case management: development and roll out by 2015
- Training on case management of malaria by 2015
 - FCHVs in remote VDCs to detect malaria using RDTs,
 - Training on malaria case management for public & private sector health care providers
- Expand and improve quality of malaria microscopy service-continued annually
 - Finalize and roll over of the SOP on malaria microscopy
 - Establish slide banks for training and reference in malaria microscopy
 - Conduct internal competency assessment of malaria lab technicians and assistant
 - Conduct external competency assessment lab technicians and assistants
 - Conduct instructional skills development training for trainers in malaria microscopy
 - Basic and refresher training in microscopy
 - training in malaria microscopy
 - Training on preventive maintenance of microscopes
 - Supportive supervision and monitoring of malaria microscopists
 - Cross-checking / validation of blood smears
- Expand the use of RDTs and set up QA QC of combo RDTs- by the end of 2015
- Procurement and supply of antimalarial drugs and diagnostics to avoid stock out
 - Regular monthly recording and reporting through FMIS/MDIS.
 - Annual health facility survey conducted to document no stock out of logistics.

Objective-4: To sustain support from the political leadership and the communities towards malaria elimination.

Key targets / milestones:

- Develop and roll out of comprehensive BCC strategy by the end of 2015
 - Develop communication package to mobilize communities for malaria prevention
- Develop specific materials (print, audio and video) to improve the following behaviors: sleep under nets every night; seek early diagnosis and treatment for malaria, and adhere to treatment on malaria.
- Organize Multi-sector advocacy meetings at national / district levels to support malaria elimination
 - Celebration of World Malaria Day: April 25.
 - Cross-border collaboration meetings annually for sharing the information and harmonizing interventions.

Objective-5: To strengthens programmatic technical and managerial capacities towards malaria elimination

Key targets / milestones:

- Training key program staffs in malariology, case management, entomology, health informatics, GIS mapping , malaria microscopy etc.- annual targets in annex- budget sheet
- Convene Malaria Technical Working Group;
 - at least 3/yr
- Periodically update the national malaria strategic plan-
 - by the end of 2018, review and revise as necessary
- Supervision, monitoring and evaluation-
 - Annually as per M & E Plan.
- Strengthen VBDRTC capacity in malaria training and research
 - Equipment provided and staffs deployed as necessary
- Recruit and fill vacant positions at EDCCD, VBDRTC, Regions and Districts
 - By the end of 2014, vacant positions will be filled and sustained there after
- Strengthen partnership with WHO and other national/international institutions
 - Collaborative meetings, activities implemented

Major activities conducted during FY 2070/71

In addition to the regular annual malaria program activities and interventions, the below mentioned activities have been carried out as major activities:

- Revision of the National Malaria Strategic Plan 2014-2025, based on the MTR-June 2013 and prioritization of the activities for NFM/GFATM funding
- Development of the funding proposal (concept note) for continuation of the GFATM funding and submission of the proposal for attracting funding.
- Introduction of the case based surveillance system, including web-based recording and reporting system for the districts.
- Orientation of the health workers from districts and peripheral level on case based surveillance and response.
- Revitalization of the malaria microscopy quality assurance system as a collaborative activity of EDCCD and VBDRTC, with WHO TA.
- Orientation of health workers and FCHVs at district level on malaria elimination initiative of the Govt. of Nepal and their role in detecting every cases and facilitation for early treatment.
- Quarterly and annual review meeting participated by district and central level staffs who reviewed the data fed by the peripheral level and revised based on suggestions.
- Operational research on malaria vector behaviors and insecticide resistance status.

4.1.2 Analysis of Achievement

Nepal has surpassed the Millennium Development Goal #6 by reducing malaria morbidity and mortality rates by more than 50% in 2010 as compared to 2000. Despite the political instability and current restructuring of administrative set up towards increasing federalism, the Nepal has been successfully implementing the interventions to eliminate the remaining active foci (VDCs) where malaria transmission remains. The Ministry of Health and Population, with the support of its partners especially WHO which is coordinating the technical assistance, has implemented a strong malaria control program, steadily improving the coverage and quality of Indoor Residual Spraying (IRS), introducing long lasting insecticide-treated nets (LLIN), and increasing access to rapid malaria diagnosis (RDTs) and powerful artemisinin-based combination treatments (ACTs).

Data generated by public health care facilities and computerized through the Health Management Information System (HMIS), EWARS and from additional studies such as malaria micro-stratification, the overall malaria trends in Nepal for the last 6 years clearly indicate a substantial decline in both clinical and laboratory confirmed *P. falciparum* and *P. vivax* cases. The recently conducted micro-stratification exercise shows that there are less districts classified as high and moderate risk (25 instead of 31) and that the overall population living in at risk Village Development Committees (estimated at 1,254 VDCs out of 3,972) is declining. This gives hope that an increasing number of foci (VDCs) will become free of malaria in the coming years with continued shrinking of malaria map.

Table 1: Malaria Epidemiological Information, FY 2068/69 – 2070/71

S.N.	Items /indicators	2068/69	2069/70	2070/71
1	Total population in '000	26,970	26,852	13025
2	Total slide collection	113,225	152,538	113382
3	Total positive cases	2,634	2092	1674
4	Total indigenous cases	1,555	1,106	865
5	Total imported cases	1,079	986	585
6	Total <i>P. falciparum</i> cases *	592	428	224
7	% of Pf of the total cases *	22.48	20.45	13.38
8	Total indigenous <i>Pf</i> cases *	240	184	82
9	% indigenous <i>Pf</i> cases *	40.54	43	36.60
10	Total imported <i>Pf</i> cases *	346	244	142
11	% imported <i>Pf</i> cases	59.46	57	63.40
12	Total <i>P. vivax</i> cases	2,018	1,664	1325
13	Total indigenous <i>Pv</i> cases	1,208	872	821
14	% indigenous <i>Pv</i> cases	59.86	52.40	62
15	Total imported <i>Pv</i> cases	732	792	504
16	% imported <i>Pv</i> cases	40.14	47.60	38.03
17	Annual Blood Examination Rate	0.42	0.57	0.94
18	Annual parasite incidence	0.10	0.15	0.12
19	Annual <i>falciparum</i> incidence	0.00	0.01	0.017
20	Slide positivity rate	2.4	1.37	1.36
21	Slide <i>Pf</i> positivity rate *	0.52	0.27	0.18
22	Clinically suspected malaria cases (not tested but treated by CQ)	69,180	49,550	26,526

Source: EDCE, DoHS

Confirmed cases dropped from 2634 in FY 2068/69 to 1674 in 2070/71 . The proportion of *P. falciparum* infections has sharply declined and reached 13.38% in current FY. Recorded malaria deaths are drastically declined from more than 200 during the 2006 (outbreak years) to less than 10 in 2010 and maintained zero deaths due to malaria from 2012 to till date.

During 2004-2007, the Malaria Parasite Incidence (API) has remained stable (0.26-0.27 per 1000 population countrywide), and thereafter has been gradually declining from 2008 onwards to be at the lowest level ever recorded in FY 2070/71 0.12 /1000 population(calculated based on the denominator set after Micro-stratification 2013). Cases of severe malaria are decreasing with the decreasing trend of *PF* case. In FY 2070/71 , 16 cases confirmed severe malaria cases were reported throughout the country.

The trend of clinically suspected malaria case is also decreasing year by year, mainly due to increased coverage of RDT and microscopic laboratory service at peripheral level, A total of 26526 clinical suspected malaria cases were reported in FY 2070/71.; more than 50 % in 5 districts: Dhanusha (N=4380), Mahottari (4245), Morang (2149), Surkhet (2159) and Saptari (1573). No more clinical suspected malaria cases have been recorded in Kanchanpur district, where outbreak was recorded almost a decade back and only 7 cases were recorded in Chitwan district.

The above table clearly showed that there is decreasing trend of confirmed case, case severity with sustaining zero death. There is sharp decrease in no of indigenous *PF* with slowly decreasing trend of indigenous *Plasmodium vivax* cases indicating that *P vivax* malaria may still remain a challenge for elimination of malaria in Nepal demanding new effective strategies for elimination.

Above trend of the national malariometric indicators listed above shows that Nepal has entered in pre-elimination phase. But district level indicator varies from one district to another district including number of case, API and SPR. Highest number of confirmed case reported from Kailali district (340), followed by Rupandehi (138), and kanchanpur (130). Zero indigenous cases reported from Kavre and sindhupalchok district for last 3 years. Regarding the VDC level indicators, there are differences in malariometric indicators including API and SPR from one VDC to another VDC within the district indicating the different intensity of malaria transmission among the VDCs. Some of the VDCs of Kailali district like Malakheti, Godawari, Baliya and other VDCs are still in control phase having higher API and SPR due to favourable geo-ecology, migration and population movement in spite of regular control interventions.

The above findings are rather positive and indicative of substantial progress in Nepal towards pre-elimination targets bearing in mind that data are generated by public health care facilities only and are still requiring continuous attention for improvement.

Many factors might have contributed to the recorded significant decline of clinical and confirmed malaria cases and decline of endemic districts (and most probably number of active foci). Among them we might assume that the following elements have played a major role:

- a) Overall improvement of social determinants of health (for example less than 20% of Nepalese people are below poverty line threshold in 2010 against more than 40% in 2000),
- b) Scaling up access to simple diagnostic tools like (combo) RDTs,
- c) Availability of powerful antimalarial medicine, ACTs in all public health care facilities,
- d) Distribution of more than 4 million LLINs leading to an exceptionally high coverage of LLINs (in addition to high usage of traditional nets) in targeted endemic areas.

To that extent, the significant financial support from the GFATM from 2004 continued till date has to be acknowledged to have played a significant role by allowing the program and partners to scale up essential cost-effective interventions and malaria control tools to the most peripheral level.

Data reported by the districts via HMIS and report received by the programme may vary due to various reasons, which includes but not limited to validation of the HMIS data by the program through DPHO data and line listing verification, addition/verification of programmatic data received through EWARS and MDIS.

Based on the assessment of current epidemiological data, there are still crucial concerns to be addressed by the program in order to improve the reliability and precision of the data. In particular, there is a need to increase the capacity of EDCC and district teams to analyse data generated by public health facilities and progressively include and analyse data generated by all private health institutions including NGOs (e.g. in charge of community activities, refugees and migrants).

4.1.3 Issues and Recommendations

Table 4.1.2: Recommendations Made During Regional and National Reviews in 2069/70 and Actions Taken in 2070/71

Problems/Constraints	Action to be taken	Action taken
Confirmation of suspected /clinical malaria cases	- Microscopy trainings, - RDT availability - Validation of clinical malaria cases	- Increased number of Malaria microscopy trainings at VBDRTC. - Validation of HMIS data by EDCC in coordination with DPHOs
Orientation on malaria program to health workers	Training programs through GFATM support	MTOT, DTOT conducted, Peripheral levels orientations ongoing
Malaria case reporting and case investigation	District and peripheral level staffs should be oriented on case investigation and reporting.	District and peripheral level staffs have been oriented on case investigation, case based surveillance, foci investigation and reporting..

4.2 KALA-AZAR

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.

The national plan was revised in 2010 as National Strategic Guideline on Kala-Azar Elimination in Nepal that recommended rK39 as a rapid diagnostic test kit and Miltefosine as the first line of treatment in Kala-azar except in some situations. Kala-azar is a vector-borne disease caused by parasite *Leishmania donovani*, transmitted by the sand fly, *Phlebotomus argentipes*. The disease is characterized by fever for more than two weeks with splenomegaly, anaemia, and 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 treated timely. 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 widely used in the Indian subcontinent including Nepal. The national programme to eliminate KA in Nepal has made this test kit available up to PHCC level of programme districts. The recently revised national guideline has recommended introducing Liposomal Amphotericin B and combination regimen for KA and PKDL treatment in Nepal and Miltefosine, the only available oral drug and current treatment of choice in the country, will be gradually phased out.

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
- Integrated Vector Management
- Effective Disease and Vector Surveillance
- Social Mobilization and Partnerships and
- Clinical, Implementation and Operational Research

4.2.2 Major Activities

Case Detection and Treatment

Early case detection and complete and timely treatment is the mainstay of Kala-azar elimination. Kala-azar related diagnostic and treatment services are provided at primary health care centre and above level where as awareness, health education, follow up for treatment compliance, identification and referral of suspected cases are also offered at health post/sub health post level.

During this fiscal year, active case detection activity was carried out in 5 most endemic VDCs each of Morang, Saptari and Sarlahi districts. The case detection activities were done through camp approach. The VDCs were selected based on the number of new KA cases reported in the previous/running fiscal year. Meetings were organized at district level involving DPHOs/DHOs, program focal persons; medical officers, lab persons and health workers followed by orientation to FCHVs and health workers at local level. Community based house to house search was carried out by the FCHVs for suspected kala-azar (KA) and Post Kala-azar Dermal Leishmaniasis (PKDL) cases. Suspected cases of KA and PKDL were then screened clinically and by rapid diagnostic kits (rK39) at health facility by medical doctors, laboratory person and other health workers. rK39 positive cases were referred to district/zonal hospital for further confirmation and management. Suspected PKDL cases were also screened for leprosy by trained health workers.

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, Sukra Raj Tropical Hospital and other hospitals according to national guideline in this fiscal year.

Revision of National Guideline and Treatment Protocol

Technical working Group (TWG) and a broader consultative meeting was called to discuss on the need and relevance of revision of the current national KA guideline and treatment protocol. Based on the available information on safety and efficacy; and shorter treatment duration, the TWG and broader consultative meeting recommended Liposomal Amphotericin B as the first choice and combination regimens as second choice of treatment of KA and PKDL during attack phase. These recommendations are in line with recommendations of WHO South East Asia Regional Programme Review Group (RPRG). Miltefosine monotherapy, the current first line treatment will be gradually phased out.

Training

Training for health worker on Kala-azar case detection, surveillance and response was conducted in Siraha and Saptari district. Training was focused on diagnosis, treatment, surveillance and response, case investigation and active case detection. Training was provided at district level prior to run active case detection by the district.

4.2.3 Analysis of Achievement Districts (No. of Cases->	2064/65	2065/66	2066/67	2067/68	2068 /69	2069/70	2070/71
Jhapa	36	76	21	22	21	10	12
Morang	55	60	107	175	111	55	84
Sunsari	46	54	34	30	32	13	14
Saptari	197	135	113	66	57	62	44
Siraha	109	47	61	11	11	3	1
Udayapur	35	13	5	69	25	37	42
Dhanusha	112	58	30	42	102	48	29
Mahottari	162	162	160	145	96	12	26
Sarlahi	449	223	61	107	73	55	38
Rautahat	26	31	38	8	6	4	4
Bara	34	18	7	9	5	6	1
Parsa	1	0	1	1	0	0	0
Total cases	1262	877	638	685	537	305	295
Other districts	10	12	24	22	20	46	44

Fig 4.2.1 Trend of Kala-azar cases (Source: EDCD)

The trend of **Kala-azar** cases has been decreasing significantly for the last several years. Three hundred and eighty two cases of **Kala-azar** were reported in the FY 2069/70, and out of these 305 (80%) cases were native case of 11 program district and the rest were foreign reported from different districts. In FY 2070/71 , a total of 367 cases were reported, of which 339 cases were native and the rest (28) were foreign cases. Among 339 native cases, 295 cases reported from 11 programme districts and remaining 44 were reported from 20 non program districts. The highest number of case was reported from Morang (84), followed by Saptari (44) Siraha(42) sarlahi(38) and dhanusha(29). These five districts together reported about (n=237) 80.33%. Twenty non-programme districts, mostly hilly, from all regions reported 44 cases in this FY. Non programme district reporting **Kala-azar** cases are Surkhet, Doti, Dadeldhura, Bajhang, Bajhura, Bardiya, Dailekha, Arghakhanchi, Dang, Pyuthan, Palpa , Dolpa, Kathmandu, Okhaldhunga and khotang. Five of these

non-programme districts are reporting **Kala-azar** cases consecutively for last three years. This epidemiological shifting urges the programme to conduct vector survey to establish presence of vector and indigenous transmission of the disease. Therefore epidemiological as well as entomological and molecular study was conducted in this fiscal year in okhaldhunga and Bhojpur districts to validate the reported cases and to rule out indigenous transmission .

Table 4.2.1: Kala-azar cases and incidence: FY 2070/71

Districts	Total	Foreign	Native	Incidence/10,000
Jhapa	12	0	12	0.14
Morang	84	0	84	0.84
Sunsari	14	0	14	0.17
Saptari	46	2	44	0.67
Udayapur	1	0	1	0.03
Siraha	45	3	42	0.60
Dhanusha	31	2	29	0.37
Mahottari	36	10	26	0.40
Sarlahi	48	10	38	0.47
Rautahat	5	1	4	0.05
Bara	1	0	1	0.013
Parsa	0	0	0	0
Other districts (18)	46	0	44	0
Total	367	28	339	0.34

Source: EDCC,DoHS

The figure 4.2.2 shows a trend of Kala-azar cases with number of cases reported and district wise incidence in FY 2070/71.

Kala-azar Incidence

Incidence of kala-azar at national as well as district level is less than 1/10000 population. At district level incidence per 10,000 in areas at risk populations ranged from 0.84 in Morang to 0.01 in Bara reflecting the incidence of 0.33 per 10,000 in 12 programme districts (excluding foreign cases).

Out of the 12 endemic districts, only 11 districts have reported Kala-azar cases during this FY and all the reporting districts have an incidence of less than 1 per 10, 000 populations. Table 4.2.2 shows the district wise incidence in programme districts for FY 2070/71. However, EDCC started to line list the all Kala-azar cases from 2012.

Kala-azar cases reported by the district via HMIS and case report received by the programme may vary due to various reasons. Generally the HMIS received raw data from district and programme proactively collect data from hospital and other health facility and DPHO through EWARS and DPHO. EDCC verified data with the help of line listing report of each and every case. EDCC also received case report of active case detection done by centre and district with line listing of case.

4.2.4 Issues and Recommendations**Table 4.2.2: Recommendations Made During the Regional and National Reviews of 2069/70 and Actions Taken During 2070/71**

Issues	Recommendations	Responses
▪ Early case detection and complete treatment of Kala-azar	▪ Orientation/Training of health workers ▪ Regular supply of KA test kits/drugs ▪ Active case detection in Kala-azar endemic districts	▪ Orientation on new guide line ▪ Reactive case detection base on index case implemented in endemic district.
▪ Early detection and case investigation	▪ Case base surveillance ▪ Reporting with line listing of case.	▪ Alocated budget for case base surveillance and case investigations to districts. ▪ Line listing of cases initiated

4.3 LYMPHATIC FILARIASIS

4.3.1 Background

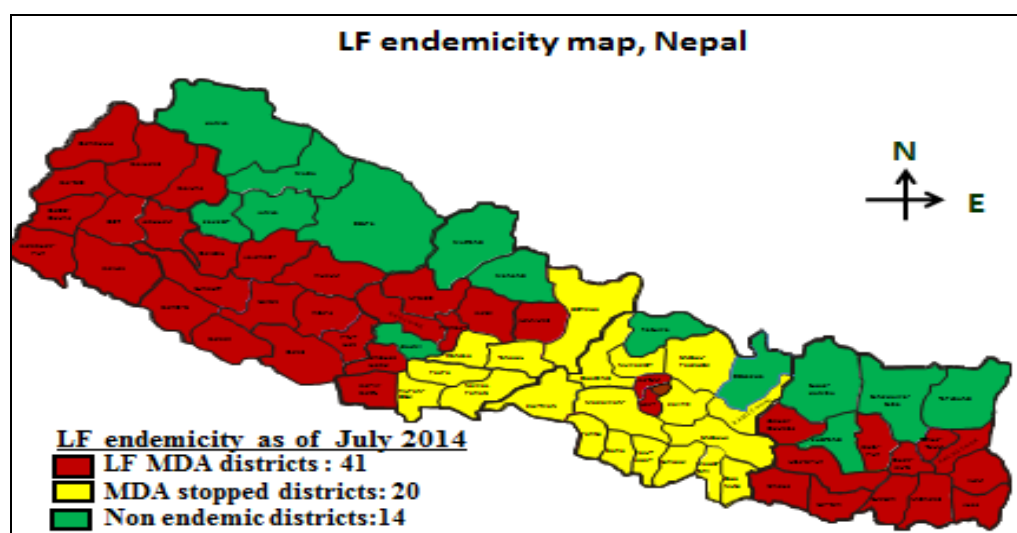
Lymphatic Filariasis (LF) is a public health problem in Nepal. Nepal conducted LF mapping in 2001 and 2005 and remapping in 2012 by using ICT (Immunochromatography Test card) which revealed 13% average prevalence of LF infection in the country, ranging from <1% to 39%. Based on the ICT survey, morbidity reporting and geo-ecological comparability sixty one districts of the country were mapped as endemic for LF. The disease has been detected in different topographical areas ranging in altitude from 300 feet above sea level in the plain terai ecological zone to 5,800 feet above sea level in high hill areas. Comparatively, more LF cases are seen in the terai than in the hills, but valleys and river basin areas of hilly districts have also high disease burden. The disease is more prevalent in the rural areas of the country, predominantly affecting the poorer sector of the community. *Wuchereria bancrofti* is the only recorded parasite in Nepal and the mosquito, *Culex quinquefasciatus*, an efficient vector of the disease has been recorded in all the endemic areas of the country.

Progress towards elimination

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 Chairmanship of Director-General, Department of Health Services.

The division initiated the implementation of Mass Drug Administration (MDA) in Parsa district in 2003 which was gradually scaled up to all endemic districts achieving 100% geographical coverage by FY 2069/70 (2013). By this fiscal year, MDA has been stopped (phased out) in 20 districts, post MDA surveillance has been initiated in at least five districts and morbidity management has been initiated in selected districts and high endemic areas. All endemic districts will complete the recommended six rounds of MDA by 2018. The LF elimination programme has also indirectly contributed to strengthening of health system through trainings and capacity building activities. Between this period of eleven years, various surveys have been carried out including mapping, base line surveys, follow up surveys and transmission assessment surveys (TAS). TAS done in 21 districts has revealed that the prevalence of LF infection has significantly reduced and contributed in preventing disabilities and sufferings due to LF. Over the period of last 11 years, more than 87 million populations at risk have been treated with MDA medicines.

Map 4.3.1: Lymphatic Filariasis Endemicity– Nepal



Programme 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 Management).

Strategies

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

Target

- To scale up MDA to all LF endemic districts by 2014 and achieve <1% prevalence (microfilaraemia rate) in all endemic districts after 6 years of MDA by 2018

Major activities and analysis, FY 2070/71 (2013/2014)

Mass drug administration (MDA) campaign

This fiscal year MDA was continued in 41 districts. Four cohorts of 10 districts each completed 5, 4, 3 and 2 MDA rounds respectively in this fiscal year. Kapilvastu district underwent seventh round of MDA after failing to pass transmission assessment survey (TAS) carried out during the same reporting year. In this fiscal year, 14,762,884 people living in 41 districts were targeted for MDA, of which 10,929,305 (68.9%) were treated. As compared to previous year, this year's MDA achievement is lower. This low coverage has been contributed mostly by low coverage among urban populations. The campaign was conducted in three phases: 31 districts in first phase in Magh 25-27, 2070 (February 2014), second phase in 9 districts in Falgun 10-12, 2070 (February 2014) and third phase in kapilvastu in Chaitra (March, 2014). The campaign mobilized 11,265 health workers and 76,961 trained volunteers to reach the target populations and monitoring of campaign activities.

Adverse events and morbidity reporting: over twenty five thousand cases of adverse events, mostly mild like headache, dizziness, stomach ache etc, were reported after the MDA. Health workers and volunteers mobilized during this year's campaign reported nearly 15 thousand cases of morbidity due to or suspected of LF. More than 30 thousand cases of lymphedema of lower and upper limbs, breast swelling and hydrocele have been reported from all endemic districts during previous MDA campaigns.

Post MDA coverage survey

In this fiscal year, post MDA coverage survey was carried out in 21 districts. A thirty-cluster survey method was applied to assess the coverage of drug administration among the at risk populations of these selected districts. In total, 18,900 people were interviewed which revealed an average of 57.9% drug ingestion against 68.9% reported coverage. The survey coverage in all districts, except one, is lower than reported coverage. The survey showed a difference of more than fifty percentage points between reported and survey coverage in three districts. The compliance was better (62.3%) among rural population compared to urban population (32.6%). By region, the highest coverage was in far western region (69.2%) and lowest in central region (23.4%). The survey also enquired about the reasons of non-compliance which showed fear of side effects as the major reason (33%) followed by severely ill (18%), not at home (17%) and not aware of the campaign (8%). Among the surveyed populations who reported any adverse event (16.7%), the majority complained of dizziness, headache and nouseas/vomiting. The survey also showed that FCHVs were the major source of information on MDA.

Transmission Assessment Survey (TAS)

Transmission Assessment Survey (TAS) is a monitoring method employed to assess the effectiveness of MDAs after completing recommended rounds (in Nepal's context after 6 rounds). The survey uses Immunochromatography test (ICT) cards as a tool to measure the circulating filarial antigen in young populations. In this fiscal year, TAS conducted in 16 districts which completed 6 rounds of MDA. The survey was conducted by dividing these districts (implementation units-IU) into 7 evaluation units (EU). Fifteen districts (6 EUs) passed the transmission assessment survey (revealed LF transmission below 2%) whereas one EU (Kapilvastu district) showed high prevalence. Based on this finding, the National Task Force on LF decided to continue MDA for another 2 years and to stop MDA in 15 districts. As of this FY, MDA has been stopped in 20 districts.

MDA related major activities carried out at different level, FY 2070/71 (2013/2014)

- **Activities at National level:**
 - National Task Force Committee meeting,
 - MDA launching in Bungmati VDC, Lalitpur,
 - Interactions with media, professionals, organizations, civil society, etc,
 - Monitoring and supervision,
 - Logistics procurement and supply, and
 - Advocacy, IEC/BCC activities.
- **Activities at Regional level:**
 - Regional level planning meetings at three places (Biratnagar, Butwal and Thakurdwara, Bardia),
 - Regional coordination meetings, and
 - Monitoring and supervision.
- **Activities at Implementation unit level:**
 - Planning meetings,
 - Training of health workers,
 - Advocacy/social mobilization/IEC/BCC, and
 - Monitoring and supervision.

- **Activities at Community level:**
 - Volunteers orientation,
 - Advocacy/social mobilization/IEC/BCC,
 - Implementation of MDA activities, and
 - Monitoring and supervision.
- **Social mobilization activities:**
 - Production of revised IEC material, checklist, reporting, recording, and guidelines for MDA campaign,
 - Media mobilization and advertisement during MDA,
 - Interaction program with professional organizations like Nepal Medical Association, Federation of Nepalese Journalists,
 - Coordination and collaboration with all stakeholders, and
 - School health programme-interactions in schools on LF and MDA.
- **Monitoring activities:**
 - Post MDA coverage survey in 10 districts,
 - Monitoring and management of Post MDA complications/adverse events.
- **Other activities**
 - Transmission Assessment Survey in 16 districts.
 - Morbidity management- hydrocele surgery camps in various districts (done by RHDs), self care training and material distribution to lymphedema (elephantiasis) cases of Bungmati VDC, Lalitpur.

The table below shows scaling-up and coverage of MDA campaigns.

Table 4.3.1: Scaling-Up and Coverage of MDA Campaigns

MDA Year	MDA districts	At risk pop	Treated Population	Epidemiological Coverage %	Remarks
2003	1	505,000	412,923	81.77	
2004	3	1,541,200	1,258,113	81.63	
2005	5	3,008,131	2,509,306	83.42	
2006	3	2,075,812	1,729,259	83.31	
2007	21	10,906,869	8,778,196	80.48	
2009	21	10,907,690	8,690,789	79.68	
2010	30	14,162,850	11,508,311	81.26	MDA stopped in 1 district
2011	36	15,505,463	12,276,826	79.18	MDA stopped in 4 districts
2012	46	20,017,508	13,546,889	67.68	
2013	56	21,852,201	16,116,207	73.75	TAS done in 16 districts
2014	41	15,874,069	10,929,305	68.90	MDA stopped in 15 districts

Source: EDCD

Challenges and way forward

The programme by now has a decade long experience on MDA operations/implementations and has made significant achievement; however, ensuring quality MDAs including adverse event management, sustaining low prevalence in phased out districts, expansion of morbidity management and surveillance, achieving higher coverage in urban areas, and improving social mobilization and coordination are some of the major challenges and areas which need to be addressed to further consolidate the achievements made so far and to achieve the set targets.

MDAs should be continued at least till next 4 years to complete recommended six rounds in all endemic districts, and surveys like transmission assessment surveys, periodic surveys (for surveillance), follow up surveys are required to be carried out as planned to monitor the progress towards elimination. Capacity building activities should be done to further strengthen the health system and service providers to address the needs of morbidity management and surveillance. The programme has felt the needs of some operational research/studies and programme review. All documents related to the programme should be consolidated as dossier which is required for verification of elimination.

Table 4.3.3: Recommendations made during the regional and national reviews of 2069/70 and actions Taken during 2070/71

Issues	Recommendations	Responses
▪ MDA related severe adverse events management ▪ LF related morbidity management ▪ Poor MDA achievement in urban areas	▪ Budget allocation ▪ Training ▪ Social mobilization ▪ Media management ▪ SAE management	▪ Budget allocated for SAE management & supervision & monitoring ▪ Training of physicians of major hospitals and health workers ▪ Programmes and budget allocated for morbidity management, especially hydrocele surgeries and self care. ▪ Improved media mobilization, multi sectoral involvement, interactions with professional organizations (eg: Nepal Medical Association)

4.4 DENGUE

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 2005. The sporadic cases continued and outbreaks occurred in 2006 and 2010. Initially most of the reported cases had travel history to neighbouring country (India), however lately indigenous cases were also reported.

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).

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 and mortality due to Dengue Fever (DF), Dengue Hemorrhagic Fever (DHF) and Dengue Shock Syndrome (DSS)

Objectives

- To develop an Integrated Vector Management (IVM) 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 reduction

4.4.2 Major Activities

To achieve the goal of controlling dengue, the following activities were carried out during 2070/71 (2013-2014).

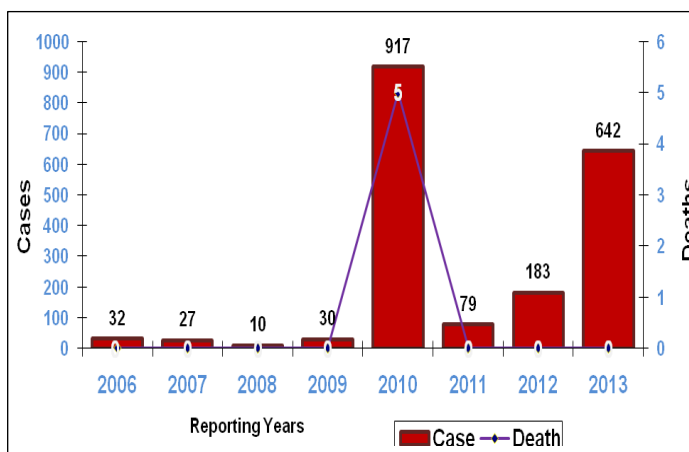
- Training on dengue case detection, diagnosis, management and reporting in Jhapa, Sunsari, Parsa and Makawanpur district for physicians, nurses, paramedics and lab persons.
- Orientation to stakeholders was also done in different municipalities of Jhapa, Sunsari, Parsa and Makawanpur districts where outbreaks occurred in last FY.

- Rapid diagnostic test kit (IgM) supply
- Dengue case monitoring and vector surveillance.
- Outbreak response done in MechiNagar, Damak and Birtamod Municipality of Jhapa district, Birgunj, Parsa and Bharatpur, Chitawan.
- Dengue vector larvae (*Aedes aegypti*) search and destroy was done in Mechinigar Municipality, Jhapa.
- Search and destroy activities were done in Jhapa, Rupandehi, Chitwan, Banke, Kailali, Kanchanpur and Makwanpur districts.
- Health Education Message development and dissemination

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Disease burden in 2013 and FY 2070/71

In 2013, a total of 726 confirmed dengue cases were reported. More than thirty percent (n=228) of these cases were reported from Chitawan district alone and followed by Jhapa by 27.5%(n=200) where an outbreak was reported from Bharatpur and Ratnanagar municipality, Chitawan and Mechinagar municipality and Dhulabari and Damak municipality. Majority of infected people were adults male. severe cases were reported from Bharatpur, Chitawan but no confirmed deaths were reported .



Dengue cases of 2070/71

Fig 4.1.1: District wise dengue morbidity

SN	Districts	Shrawan	Bhadra	Asoj	Kartik	Mansir	Push	Magha	Phalgun	Chaitra	Baishakha	Jestha	Asar	Total cases
1	Jhapa	1	4	51	138	6	0	0	0	0	1	1	0	202
2	Makwanpur	0	0	0	3	2	0	0	0	0	0	3	0	8
3	Chitwan	7	20	52	170	85	7	0	0	0	2	14	14	371
4	kapilbastu	0	0	0	0	0	0	0	0	0	0	0	1	1
5	Rupandehi	2	5	2	2	0	0	0	0	0	0	1	1	11
6	Kathmandu	0	0	0	0	0	0	0	0	0	0	0	1	1
7	Kailali	0	0	0	4	1	0	0	0	0	0	0	0	5
8	Bara	0	1	20	13	1	0	0	0	0	0	0	0	35
9	Rautahot	0	0	1	1	1	0	0	0	0	0	0	0	3
10	Parsa	1	17	69	10	0	0	0	0	0	0	1	1	99
11	Kaski	0	0	1	1	0	0	0	0	0	0	0	0	2
12	Nawalparasi	1	9	3	7	21	1	0	0	0	0	0	1	43
13	Ilam	0	0	0	0	1	0	0	0	0	0	0	0	1
14	Mahottari	1	0	0	0	0	0	0	0	0	0	0	0	1
15	palpa	0	0	0	0	0	0	0	0	0	0	0	0	2
	Grand total	13	56	199	349	118	8	0	0	0	3	20	19	785

Source DHO/DPHO/EDCD ,DOHS

Disease Control: Dengue

During the FY 2070/71 total number of dengue case reported from 15 district were 785. Among them, 371 cases were reported from Chitawan, 202 from Jhapa and 99 cases from Parsa district where outbreak was recorded. Remaining 113 cases were reported from Rupandehi, Nawalparasi, Kailali, Kanchanpur, Dang, Kapilbastu, Banke, Parsa, Bara, Makawanpur, Ilam, Mahottari, Kaski and Kathmandu. Dengue cases are diagnosed in hospital and reported to DHO and EDCC through EWARS.

Table 4.4.1: Recommendations Made During the Regional and National Reviews of 2069/70 and Actions Taken During 2070/71

Issues	Recommendations	Responses
- Inadequate dengue control interventions in districts - Quality of RDT - Vector control	- Increase the budget - Strategy development and planning - Antigen base RDT(NS1) - vector surveillance and Integrated Vector management	- Increment in the district and regional budget were made - Orientation to doctors and health workers conducted - Strategy development and planning workshop done - Advocacy meetings organized - Vector larvae search and destroy activity done

4.5 Zoonoses Control Programme

The Department of Health Services, Epidemiology and Disease Control Division (EDCD) responds timely to reduce human sufferings and deaths due to poisonous snake bites, control and prevent rabies and other zoonoses in coordination and collaboration with public, non-governmental and private partners.

Goal

- No Nepalese will die of rabies and poisonous snake bites due to unavailability of ARV/ASVS as well as timely health care services;
- To prevent, control and manage outbreaks and epidemics of zoonoses.

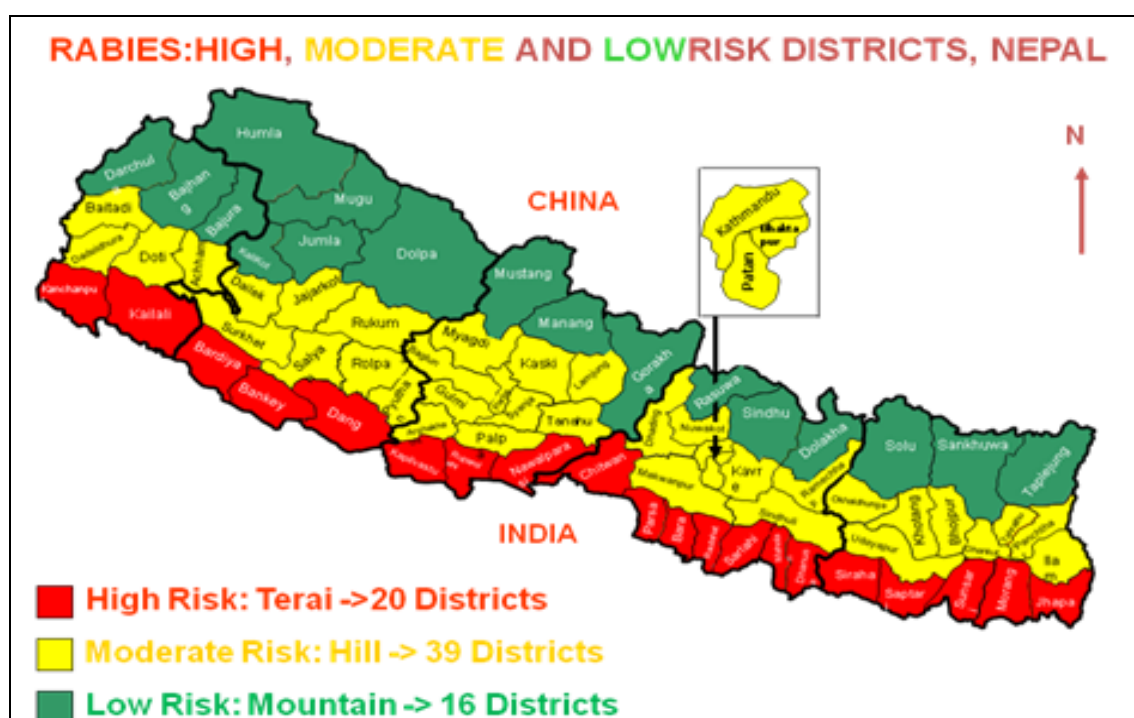
Objectives

1. To strengthen the response and capacity of health care service providers for prevention and control of zoonoses
2. To improve coordination among/between the key stakeholders at different level for prevention and control of zoonoses
3. To enhance judicious use of tissue culture ARV/ASVS in the Hospitals/PHC/HP
4. To reduce burden of zoonotic diseases (especially rabies and other six priorities zoonoses) through public awareness programs
5. To provide tissue culture ARV as a post exposure treatment to all victims, bitten by suspicious or rabid animals
6. To reduce mortality rate in human by providing ASVS/ARV
7. To train medical officers and paramedics on snake bite management
8. To reduce the number of rabid and other suspicious animals' bite
9. To reduce the death rate due to rabies per annum

A. Rabies situation:

- Almost half of the country's population is at high risk and a quarter at moderate risk of Rabies.
- Around 30,000 PET cases occur per annum
- More than 100 Human rabies cases occur per annum
- Latent infection in dogs and cats reported
- Bat rabies also reported
- Arctic Fox Genome type virus isolated
- Surveillance: Passive
- Very few patients take RIG
- Lab. Strengthened for CCO-ARV production

Risk zones of rabies



Activities conducted in the fiscal year 2070/71 (2013/2014)

- ARV supplied for 39,173 people through 5 Regional Medical Stores and hospitals annually for post exposure treatment.
- 137 person including medical/senior medical officers and paramedics were Trained on judicious use of ARV.
- Development and distribution of EIC materials to stakeholders.
- Procured ARV for the management of 1600 dog bites suspected infection with rabies.
- Celebrated world rabies day.
- Development and distribution of animal bite management guideline and treatment protocol for medical professionals of the country.

Status of Rabies in Nepal

Fiscal year	No. of cases Animal bites(Dog+ other animal)	No. of cases Other bites	Total bites	No, of ARV vials consumed	Death
2065/66	26,574	2,571	29,145	145,978	97
2066/67	25,662	2,145	27,807	168,194	89
2067/68	26,466	2,197	28,663	167,663	83
2068/69	31,313	2,211	33,524	229,851	76
2069/70	34,933	2,996	37,929	219,651	68
2070/71	34,516	2,540	37,056	195,868	10
Total	144,948	12,120	157,068	931337	413

Source: EDCC

B. Snake bite situation

- 79 species of snakes are found in Nepal
- Among them 21 species are poisonous (5 sp. Of Kraits, 3 of Cobras, 1 sp. of Coral, 1 sp. Of Russel's viper and 11 sp. of pit vipers)
- Around 15000 snakebite cases occur annually
- Around 10% of these cases are poisonous bites
- Mortality is 10% among poisonous bite
- 26 district of terai including inner terai are highly affected
- Every year 85-120 people die due to poisonous snake bite in Nepal
- ASVS free distribution policy implemented since FY 2056/057 (1998/99)
- Indian Quadri-valent ASVS is used

Activities conducted in FY 2070/71 (2013/2014)

- Development and distribution of snake bite management guideline and treatment protocol for medical professionals of the country.
- Free distribution of ASVS for the victims of poisonous snake bite.
- Annually around 17,355 vials of ASVS is supplied for 1,500-2,000 people who are in high risk zones of the country, through regional medical stores and hospitals.
- A total of 137 person including SMO/MO,SN and Paramedics were trained on judicious use of ASVS Training was conducted in Kathmandu, Pokhara and Nepalgunj.
- Develop and distribution of IEC materials to stakeholders

Snake bite cases and deaths

Fiscal year	Total Case	Non-Poisonous	Poisonous	Cure	No. of Death	% of Death
2065/66	13,017	11,883	1,134	1,006	128	11.3
2066/67	17,163	15,844	1,319	1,188	131	9.9
2067/68	18,204	17,121	1,083	965	118	10.9
2068/69	14,768	13,789	979	890	89	9.1
2069/70	14,329	13,462	867	788	79	9.1
2070/71	5,143	4,145	998	988	10	1.0

Source: EDCCD

Problems/Issues

Issues	Recommendations	Action
Under reporting of cases and deaths of dog and snake bite	Regular reporting mechanism should be developed	Increase supervisory visit to reporting sites
Poor compliances of treatment protocol of snake bite and dog bite	Training and orientation for new health care provider should be provided on dog and snake bite. Workshop on sharing experience of case treating physician on compliance of treatment protocol	Allocate budget for training and workshop.

4.6 Epidemiology and Outbreak Management

Objective

To reduce the burden of communicable diseases, plan and effectively respond to outbreaks through effective primary health care services.

Strategies

Effective surveillance, outbreak preparedness and response

Major activities

- Rumor verification and situation updates
- Pre-positioning of emergency health kits and medicines
- Provision of buffer stock of medicines at center, region, district & community Level.
- Coordination meeting with stakeholders
- Response at local level: awareness programs, case management and community mobilization

Major Outbreaks in FY 2070/71 (2013/2014)

Disease	No. of out breaks	Districts	Total cases	Death
Diarrhoea	15	Salyan, Rolpa, Nuwakot, Ramechhap, Jajarkot, Mugu, Sunsari, Rautahat, Rukum & Makwanpur	3,811	10
Viral fever	9	Bajhang, Rukum, Chitwan, Sunsari, Mugu & Dolakha	1,419	5
Dengue	6	Jhapa, Parsa and Chitawan	683	0
Food Poisoning	10	Dailekh, Rolpa, Gulmi, Salyan, Kalikot, Dhanusha, Nepalgunj, Surkhet & Khanchanpur	798	4
Alcohol adulteration	5	Siraha & Bara	26	18
Mushroom Poisoning	4	Dang & Chitwan	32	1
Viral hepatitis A & E	1	Morang	2,466	12
Total	50		9,235	50

Source: EWARS, EDCCD

Major out breaks reported during FY 2070/71 were diarrhea, viral fever, dengue, food poisoning, alcohol adulteration, mushroom poisoning, and viral hepatitis. Among 50 outbreaks, diarrhea out break reported 15 times with total number of 3,811 cases and 10 deaths. Viral fever outbreaks were reported from 6 district including Bhajhang, Rukum and Mugu with 1419 cases and 5 deaths. Dengue outbreaks were occurred in Mechi Nagar, Birtamod, and Damak Nagar, Jhapa Municipality Jhapa, Birgunj, Parsa, Bharatpur and RatnaNagar municipality, Chitawan with total number of 683 cases were reported from these 3 districts during in the fiscal year 2070/71. Food Poisoning out breaks were reported from Dailekh, Rolpa, Gulmi, Salyan, Kalikot, Dhanusha, Nepalgunj, Surkhet & Khanchanpur district with a total number of 798 cases and 4 deaths. Alcohol Adulteration was occurred in Siraha and Bara district 26 cases and 18 deaths. Four episodes of Mushroom Poisoning occurred in Dang & Chitwan with 32 cases and 1 death was reported. Viral hepatitis A & E outbreak was occurred in Biratnagar Sub-metropolitan with 2,466 case and 12 deaths were reported.

Response activities undertaken

- Rumor verification and situation updates.
- Pre-positioning of emergency health kits and medicines.
- Provision of buffer stock of medicines at center, region, district & community Level.
- Coordination meeting with stakeholders.
- Response at local level: awareness programs, case management and community mobilization.

Problem/Constraints

Issues	Recommendations	Action
Inadequate budget for outbreak response	NON freezing Emergency fund should be established for outbreak response	Allocate adequate budget
Repeated out breaks of food and water borne disease	Improve water supplies, hygiene and sanitation.	Co-ordination with department of water supply and sanitation for interventions.

4.7 Disaster management

Background

Disaster Management Section is another important programme implementation unit of EDCD. This collaborative programme between MOHP/DHS/EDCD and WHO-EHA has been committed to enhancing health sector emergency preparedness and disaster response capabilities in close coordination and collaboration with key players in the country.

The overall objective of this section is to enhance the capacities of health sector in emergency preparedness and response by focusing on disaster prevention, mitigation and response through following activities:

1. Expediting the process of health sector contingency planning.
2. Providing training to the health workers in emergency preparedness and disaster response.
3. Strengthening the mechanism for multi-sectoral coordination and collaboration in relation to health sector disaster management.

Major Preparedness Activities

District Level Health sector contingency planning:

District level health sector contingency plan has prepared by EDCD with financial and technical support of EDCD, WHO & Merlin Nepal in 35 district at the end of FY 2068/69 including Jhapa Morang, Sunsari, Saptari, Siraha, Dhankuta, Ilam, Udayapur, panchthar in Eastern Region, Chitwan, Rautahat, Sarlahi, Mahottari, Dhanusa, Sindhuli in Central Region, Rupandehi, Nawalparasi, Kapilbastu in Western Region, Banke, Bardiya, Dang, Rolpa, Pyuthan, Surkhet, Jumla in Mid-Western Region and Kailali, Kanchanpur, Bajura, Dadeldhura, Bajhang, Achham, Darchula, Bajura, Baitadi and Doti Far Western Region. Hospital Emergency/Disaster Preparedness Plan (HEPP) has been prepared in 5 hospital including Rapti Zonal Hospitals Tulsipur, Bardiya & Dhankuta, Gorkha & Sunsari district hospitals.

District Contingency planning workshop completed up to the FY 2069/70: 46 districts.

Stockpiling

- At central level- stockpiling of necessary drugs and other essential supplies including surgical and Trauma kits, rehabilitation equipments.
- MoHP and WHO manage large scale Inter-Agency Emergency Health Kit, Diarrhoeal Diseases Kits, stockpiled in Kathmandu, Biratnagar and Nepalgunj.
- At Regional level, all Regional Health Directorates stockpile necessary medicine and logistics.
- At district level, DHOs stockpile medicines and logistics in a disaster cupboard.

Guiding Documents published by EDCD are as follows:

SN	Name of documents	Published Year
1	Guidelines & Tools for Conducting Integrated Training of Rapid Response Teams (RRT) on emergency Preparedness and Response	2011
2	Nepal District Level Contingency Planning Manual 2009/2010	2010
3	Standard Operating Procedure for DHWG 2010 (Draft)	2010
4	Non-structural Safety in Health Institution, 2006.	2006
5	Guidelines for seismic vulnerability assessment of hospitals, 2004.	2004
6	Public health Guidelines in Emergency, 2004.	2004
7	Emergency Preparedness and Disaster Response Plan, 2003.	2003
8	Emergency Preparedness & Disaster Management for Hospitals, 2002	2002

Activities conducted in FY 2070/71 (2013/2014)

- Completed District level Health sector Contingency Planning (CP) Workshop in Ramechhap, Dolakha, Nuwakot and Solukhumbu districts with support of UNFPA.
- Training to RRT members in Ramechhap and Dolakha district with support of UNFPA.
- Prepared District level Health sector Contingency Plan in Lalitpur and Bhaktapur districts with support of WHO and Nepal Red Cross Society
- Workshop on hospital emergency preparedness plan conducted in Sindhuli and Gulmi districts.
- Training to RRT member on disaster response in Arghakhanchi and Gorkha district.
- Procured 25 RRT Deployment Kits and supplied to RRT members.
- Interaction Programme with stake holders and generalists on prevention from Cold and Heat wave to disseminate message to affected people.
- Conducted meeting of disaster health working group.
- Prepared Health Sector strategic Plan for Disaster Response-2071 with support of WHO.
- Conducted Regional Workshop to Review Districts' Health Sector Contingency Plan.

Problem/Constraints

Issues	Recommendations	Action
Health sector preparedness plan for outbreaks and emergency	Review and implement health sector emergency preparedness plan	Operationalise health sector emergency preparedness plan
Retrofitting of hospital	Plan for retrofitting in major hospitals	Allocate budget for retrofitting
Isolation ward at hospital	Operationalise isolation ward in selected hospital	Allocate resources for revocation of isolation ward

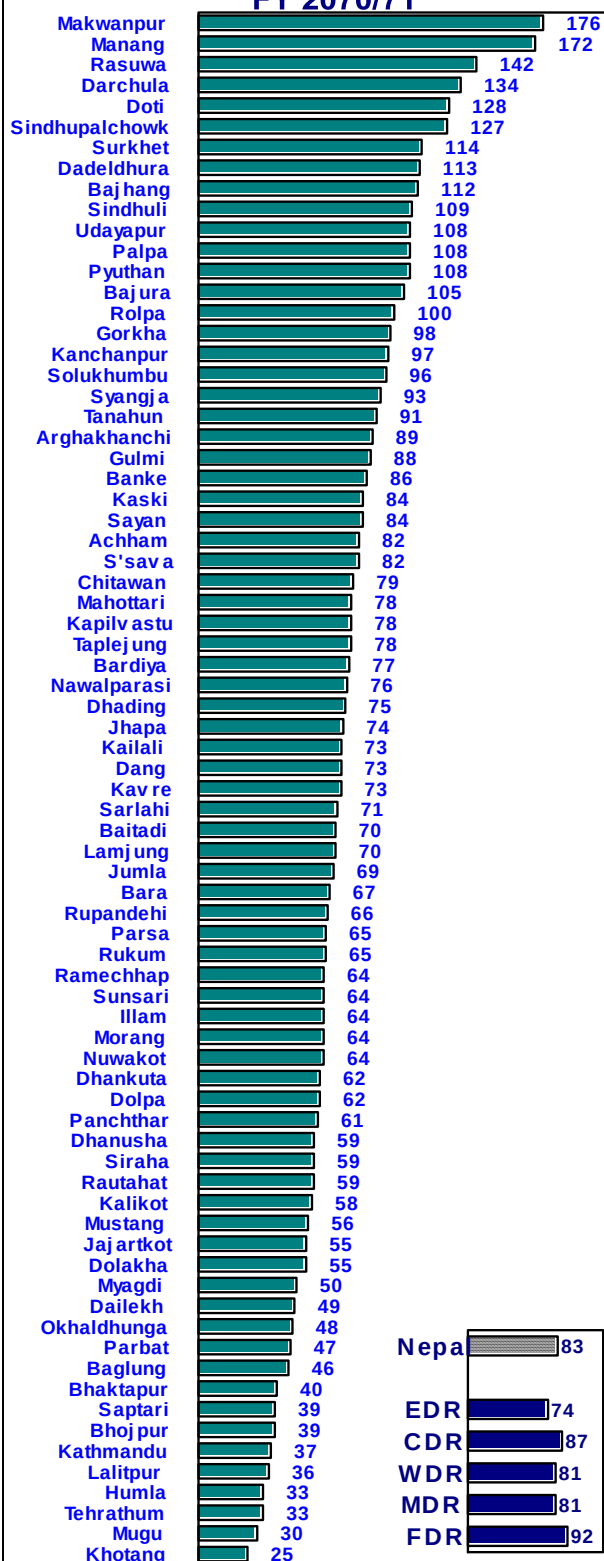
- No provision of regular reporting of disaster management activities in HMIS.
- Budget allocation is inadequate.
- Health sector contingency planning for all districts and yearly regional level review meeting for review & update of contingency planning is not in priority.
- No guidelines for the provision of Community level RRT

Tuberculosis Control Programme

Fiscal Year 2070/71 (2013/2014)

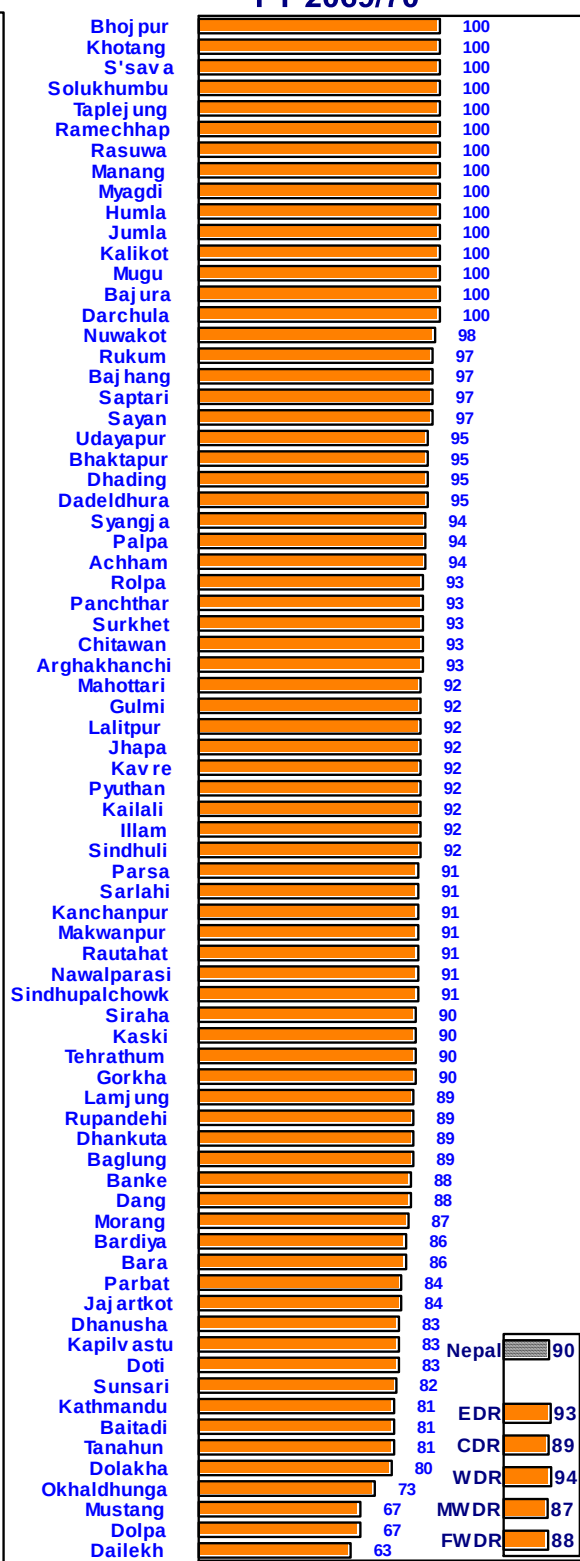
Case Finding Rate

FY 2070/71



Treatment Success Rate

FY 2069/70



Source: HMIS/NTC

4.8 TUBERCULOSIS

4.8.1 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 20,500 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 1,440 DOTS treatment centers and 2,907 sub centers are established till 16th July 2014 for treatment of TB. The treatment success rate stands at 89 percent and case finding rate of 83 percent in the year 2070/2071. At the national level 37,025 TB patients have been registered in 2070/71 and out of them 15,947 infectious (total Number of New and Relapse) cases are being treated under the DOTS strategy in NTP during the FY 2070/71.

4.8.2 NTP Goal, Strategy and Target

Vision: Tuberculosis free Nepal

Goal: To reduce mortality, morbidity and transmission of tuberculosis until it is no longer a public health problem

Objectives:

- To dramatically reduce the National burden of TB by 2015 in line with the Millennium Development Goals and the Stop TB Partnership targets
- Achieve universal access to high-quality diagnosis and patient-centered 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

Targets:

- MDG 6, Target 8: ...halted by 2015 and begun to reverse the incidence.
- Targets linked to the MDGs and endorsed by the Stop TB Partnership:
 - By 2005: detect 100% of new sputum smear-positive TB cases and cure at least 85% of these cases
 - By 2015: reduce prevalence of and death due to TB by 50% relative to 1990
 - By 2050: eliminate TB as a public health problem (<1 case per million population)

Components of the Stop TB strategy

1. Pursue high-quality DOTS expansion & enhancement

- Political commitment with increased and sustained financing
- Case detection through quality-assured bacteriology
- Standardized treatment with supervision and patient support
- An effective drug supply and management system
- Monitoring and evaluation system, and impact measurement

2. Address TB/HIV, DR-TB and other challenges

- Implement collaborative TB/HIV activities
- Prevent and control multi-drug-resistant TB
- Address prisoners, refugees and other high-risk groups and special situations

3. Contribute to health system strengthening

- Actively participate in efforts to improve system-wide policy, human resources, financing, management, service delivery, and information systems
- Share innovations that strengthen systems, including the Practical Approach to Lung Health (PAL)
- Adapt innovations from other fields

4. Engage all care providers

- Public-Public, and Public-Private Mix (PPM) approaches
- International Standards for Tuberculosis Care (ISTC)

5. Empower people with TB, and communities

- Advocacy, communication and social mobilization
- Community participation in TB care
- Patients' Charter for Tuberculosis Care

6. Enable and promote research

Programme-based operational research

4.8.3 Major Activities fiscal year 2070/71 (2013/2014)

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 centers and a system of quality control of sputum smear examination.
- Establish treatment centers for every 100,000 population within the existing primary health care system.
- Provide continuous drugs supply to all treatment centers. 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 analyzing periodic treatment outcome in cohorts of patients.
- Provide continuous training and supervision for all staff involved in the NTP, at each level.
- Pilot and expend 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.

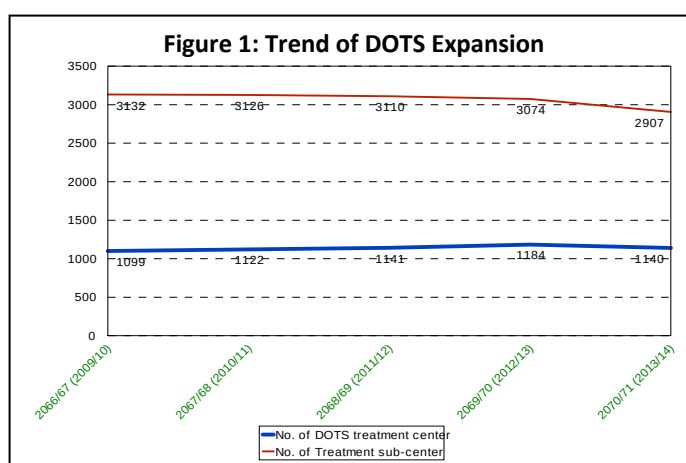
- Strengthen cooperation between non – government organizations (NGOs), bilateral aid agencies and donors involved in the NTP. Coordinate NTP activities with other primary health care activities, especially leprosy and AIDS/STD programs.
- Carry out research programs to improve the NTP performance.

4.8.4 Progress and Epidemiology of Tuberculosis

NTP Institutional Coverage

Nepal NTP adopted DOTS strategy in 1996 and nationwide coverage was achieved in 2001. All DOTS sites are fully integrated within the general health services or run through NTP partner organizations in public and private sectors. By mid July 2014 a total of 4,047 health institutions including 1,140 Treatment Centers and 2,907 Sub Treatment Centers were offering DOTS based TB control services as shown in Figure 1.

Beside government health institutions several NTP partners also provide DOTS including; private nursing homes, polyclinics, factories, I/NGOs health clinics, eye hospitals, prisons, refugee camps, police hospitals, medical colleges, municipalities, Village Development Committees and District Development Committees.



Estimation of TB burden

World Health Organization estimates the prevalence of all types of Tuberculosis cases for Nepal at 66,000 (241/100K) while the number of all forms of incidence cases is estimated around 45,000 (163/100K). With the introduction of Directly Observed Treatment Short course (DOTS) number of deaths has dramatically reduced from 9,712 (51/100K) in 1990 to 20/100K in 2012 (WHO TB Annual Report 2013). However, the reported deaths among the registered TB cases in the FY 2012/13 was 1,056 (4/100k).

Case notification

The Case Notification Rate of new smear positive cases (CNR/SS+) raised steadily from 1996 till 2001, when nationwide DOTS expansion was achieved (see fig. 2). Out of the 45,000–50,000 new cases (all forms) estimated by WHO in the last years, NTP was able to notify 70-83% and successfully treat 85-89% of them. In spite of this sustained good programme performance the CNR (of both SS+ and all forms) has substantially stagnated, as clearly shown in figure 1 below. The percentage of New SS+ notification rate among new pulmonary cases in 2014 was 67%, just slightly higher than the recommended WHO standard of 65%.

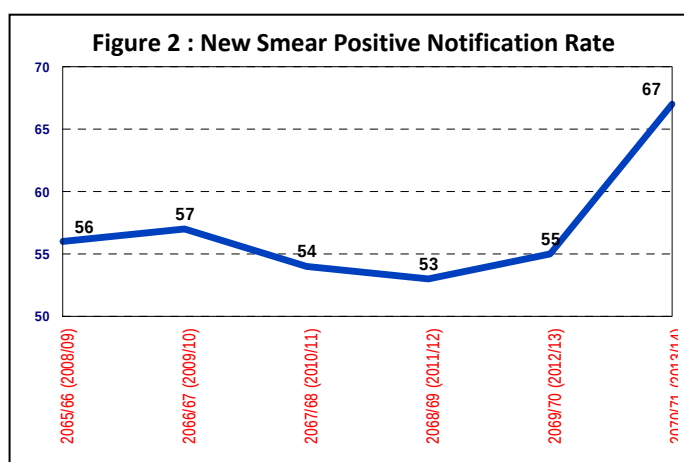


Table 1 shows how CNR changed over time in each region. The analysis of changes in each region requires in-depth investigation in selected districts to identify the causes.

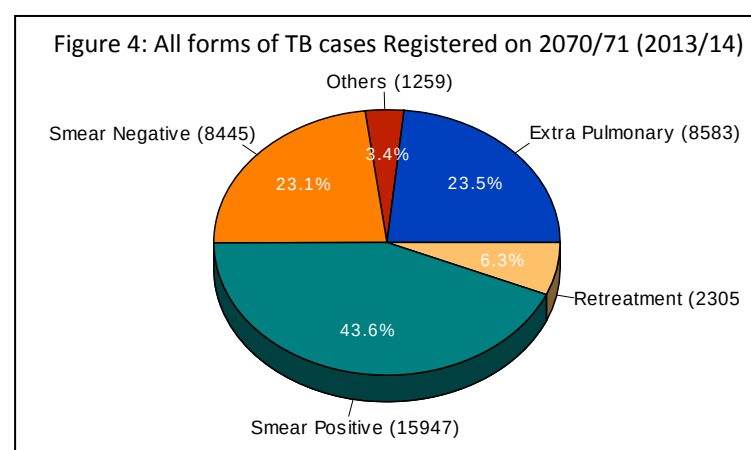
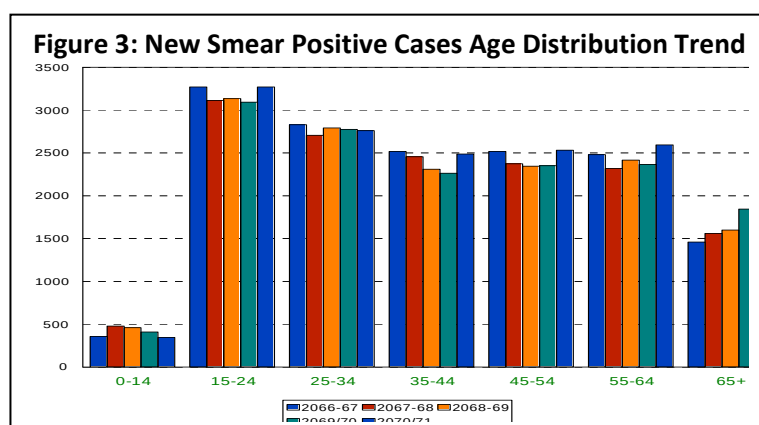
Table 1: Case Notification Rate (new cases and relapses x 10⁵ population) by region, 2007 - 2014

Year	EDR	CDR	WDR	MWDR	FWDR	NEPAL
2010	116	160	114	149	116	135
2011	103	150	109	137	118	127
2012	95	149	105	141	119	124
2013	105	153	120	146	135	134
2014	109	155	123	146	132	136
Highest Lowest						

The ratio Female : Male was 1 : 2.1, however a lower ratio (1.5) in the age-group 15-24, possibly in relation to higher rate of TB in child-bearing age women. Breaking down notified SS+ cases by age-group (figure 3) shows a progressive ageing of patients, in line with the trend expected in mature epidemics. Slightly surprising the apparent parallel increase in childhood TB: increase childhood TB efforts and awareness of childhood TB could partially explain the increase. Another possible explanation is the growing exposure of children to grandparents due to demand posed on mothers, particularly in urban settings.

One of the indicators adopted by NTC is the Case finding Rate (CFR) in which the denominator (number of expected cases) is computed using the “Styblo Formula” based on the Annual Risk of Infection (ARI). During this reporting year NTP registered 37,025 TB cases; among these 18,738(51%) were sputum smear positive (all forms: new smear positive, relapse, failure and return after default). Among the cohort of all the TB cases registered during this latest year 15,947(43%) were new smear positive TB cases. Similarly 2,305(6%) were smear positive retreatment TB cases. 8,445 (22.8%) were sputum smear negative, 8,583 (23.1%) were extra-pulmonary TB cases and 1,259 (3.4%) were other cases.

The graph below (figure 5) shows a CFR trend that like the graph portraying CNR is equally stagnant. Further analysis by region (figure 6) seems to point out to Eastern and Western regions as those with the lowest TB burden but, as we know, the use of CFR particularly at sub-national level, may not yield reliable estimates.



The apparent downward trend of CNR/SS+ seems to be an initial sign of an impact of control measures over TB burden. However, the level of decline in TB burden observed in Nepal is far from the kind of decline expected in control programmes producing the good results seen in Nepal in the last five years. In the absence of a significant level of HIV infection in the general population

(0.15%), the most likely explanation for the mismatch between good TB control performance and a stagnating CNR is probably the existence of large pockets of underserved, vulnerable groups of the population with difficult access to TB prevention, early diagnosis and care. The TB Prevalence Survey planned for 2015-16 will yield valuable information on the distribution of TB by sex, age, geographical setting, health-seeking behavior, possibly allowing linking the occurrence of tuberculosis to specific risk factors and determinants of health.

The program is now moving into the consolidation phase. The global target defined by WHO to diagnose at least 70 percent of the estimated number of sputum smear positive new cases and successfully treat at least 85 percent of the registered TB cases has been fulfilled since FY 2058/59 (2002/03) to till now by building partnership with private sectors, medical colleges and communities. As TB spreads easily in areas of high population density, many TB patients are found in the cities and Terai areas. Case finding rate has increased to 83% in the FY 2070/71 which is higher than previous year (78%) and case notification for new smear positive cases was 67/100,000.

There is great increment in case finding rate in the period of 5 years from 2066/67 to 2070/71. This increment is due to the strengthening of microscopy centers and DOTS centers throughout the country. Case finding rate is reported 83 percent as compared to estimated positive cases in 2070/71. These rates are meeting the national target for case detection.

Treatment Outcome

As mentioned above, NTP has achieved from the very beginning an excellent treatment success rate (figure 7). Remarkably, only a small proportion (2-3%) of the patients successfully treated is classified as "Treatment Completed", the rest being "Cured"; even the percentage of "Failure" remained at very low levels over the last ten years.

Figure 5: Case finding trend

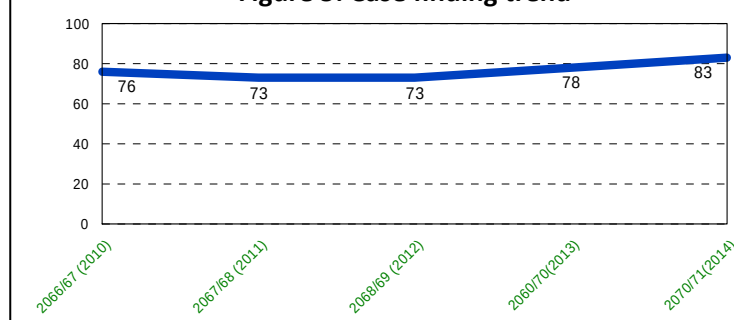


Figure 6: Regional Case finding trend

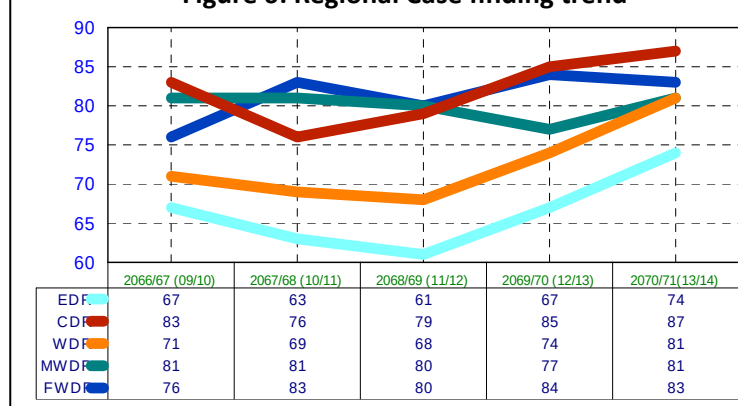
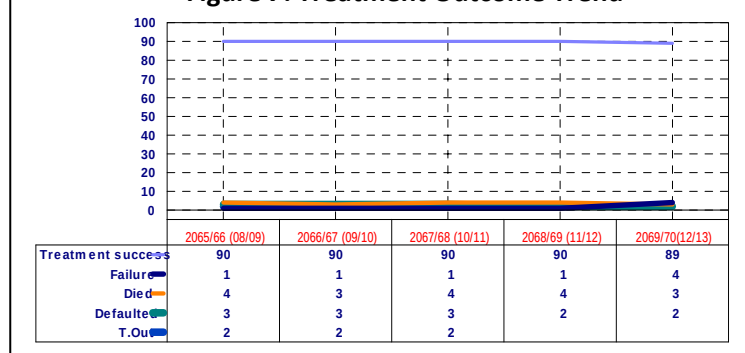


Figure 7: Treatment Outcome Trend



TB patients have been treated with 90 percent treatment success rate after the introduction of DOTs in 1996. This rate has been sustained since DOTS was introduced. Treatment success rate is almost same (around 90%) from FY 2009/10 to 2013/2014. The Treatment success rate of the country has consistently achieved and exceeded the global target of treatment success (85%).

During July 2013 – July 2014 period a total of 37,025 TB patients were registered for treatment in NTP. Treatment success rate among new sputum smear positive TB cases (15,947) was 89%. This year the defaulter rate is constant at 3% and similarly, failure rate among new smear positive is 1%.

Table 2: Treatment Outcome: Smear Positive among pulmonary TB cases mid July 2013 – mid July 2013

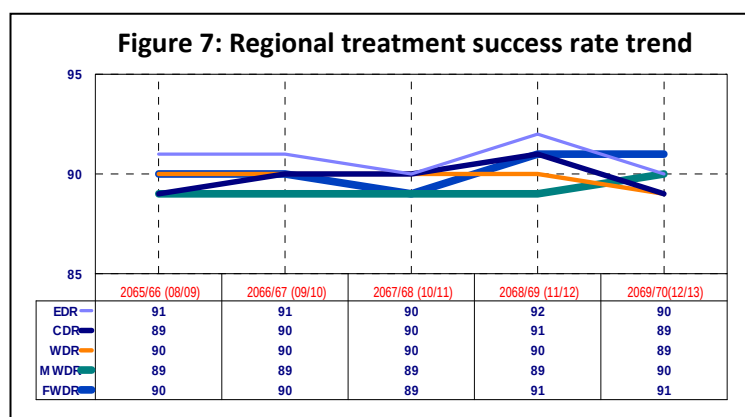
	Registered	Cure	Complete	Died	Default	Failure	Treatment Success Rate
Female	1800	1595	44	50	42	17	91
%	32%	89%	2%	3%	2%	1%	
Male	3809	3281	117	144	125	48	89
%	68%	86%	3%	4%	3%	1%	
Total	5609	4876	161	194	167	65	89
		87%	3%	3%	3%	1%	

Overall, all Regions have achieved more than 85% treatment success rate in FY 2070/71 (2013-14). The analysis of success rate by regions (figure 7) shows a substantial parity between regions.

The treatment success rate for sputum positive cases is almost constant in all five development regions for last five years. Out of total sputum positive cases registered in 2069/70, Eighty nine percent cases successfully completed their treatment course in 2070/71. FWDR has 91 percent treatment success rate in 2069/70 whereas eastern and Mid western regions have 90 percent and the

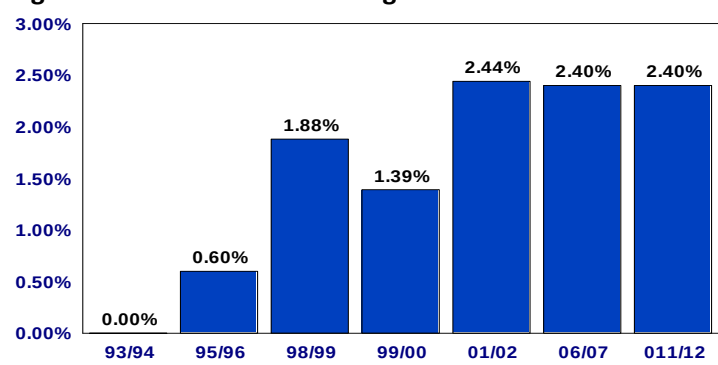
central and western have 89 percent success rate in the same period. Overall treatment success rate remains at national target. Thus, case holding is quite satisfactory and this is due to the effective monitoring and supervision of the patients by DOTs provider as well as due to timely supply of adequate and qualitative drugs to the treatment centers.

The sputum conversion rate at two months in 2014 was 89% for all new sputum positive (NSP) cases, showing a general high compliance with treatment and good quality of anti-TB medicines. Nepal hasn't yet fostered the policy of re-testing all non-converters at three months, thus delaying the discovery of failures or DR-TB to the fifth month.



TB/HIV

NTP has conducted several periodic surveys to establish the prevalence of HIV among TB patients. The latest survey showed HIV prevalence among TB patients at 2.4%. The prevalence of TB HIV co-infection is steadily rising in Nepal since the first surveillance in 1993. The surveillance of 1993 showed no TB HIV co-infection while in the following surveillance showed 0.6% co-infection and the trend has shown the increasing trend in the following surveillance. The co-infection trend was observed stable in two surveillances conducted in 2006 and 2011, in addition it was decreased by few percentage compared to the surveillance of 2001/02. NTP started to intervene to address the problem by developing collaborative activities from 2005 ensuring coordination and collaboration with NCASC.

Figure 9: HIV Prevalence among TB Patients 1993 - 2007**Childhood TB**

This remains a neglected area in Nepal featured by the striking absence of data. Officially, childhood TB accounts for 2.2% of all registered TB cases in 2013-2014. The slightly decrease over the last three years seen in figure 3 above shows that incidence of TB among all the age-group 15-24 to +65 significantly increases in last five years.

Childhood TB regimens (0 – 14 Years)

In addition to change in treatment duration patients in the previous Category I and category III now receive same treatment i.e. all new and complicated TB cases and smear negative and extra pulmonary TB cases get same six months treatment. Category II treatment regimen for retreatment TB cases; including all forms of Retreatment TB cases remains the same.

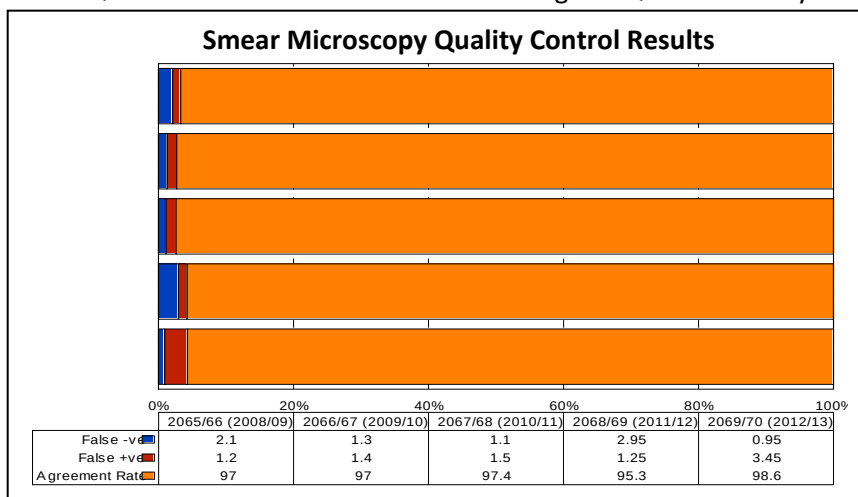
Advantages of switching to a six-month regimen includes; shorter treatment duration, higher efficacy and the fact that six month treatment will further improve collaboration with partners as this regimen is preferred by public and private sector partners including private practitioners.

4.8.5 NTP Laboratory Network

Diagnosis and treatment monitoring of tuberculosis patient is relied on Sputum smear microscopy in NTP because of its low cost and practically easier to perform. Direct sputum smear microscopy is the choice of TB diagnostic tool worldwide. Currently there are 554 microscopy centres delivering sputum microscopy examination throughout the country. Majority of the microscopy centres are established within government health facilities, few are established in non-governmental organizations as well as in private sectors. NTP is responsible for providing laboratory reagents, chemicals and other equipments to each of the microscopy centres and sputum smear microscopy service for TB diagnosis is free of cost at all levels of microscopy centres. In some of the microscopy centres with high work load, sputum smear examinations are performed by Fluorescence Microscopes. Fluorescence microscopes are ten times more efficient than Bright Field Microscope. External Quality Assessment (EQA) of each level's microscopy centres is another important part of NTP. There is well established networking between microscopy centres (MCs) at PHC, DHO/DPHO, 5 RTQCCs and the NTC level. Microscopy centres send the examined sputum slides to their respective regional TB quality control centres via district health office. Five Regional TB quality control centres

(RTQCCs) are functioning smoothly with help of skilled and trained quality control assessors. EQA for sputum microscopy is carried out by BNMT/NATA, Biratnagar for the eastern region, NTC for the national and central region. RTC, Pokhara for western region, regional health directorate Surkhet for Mid-western Region and NLR, Dhangadhi for Far-Western region.

Lot Quality Assurance Sampling/System (LQAS) has been implemented throughout the nation. At each MC, the examined slides for EQA are collected and selected according to LQAS. Previously NTP used to apply the methodology of collecting all positive and 10% negative slides for EQA. In LQAS, slides are collected and selected by using standard procedures, so it gives statistically significant sample size. LQAS is a systematic sampling technique that helps to maintain a good quality of sputum results between microscopy centres and regional or national TB quality control centres. The overall agreement rate or the concordance of sputum slide examinations between MCs and RTQCCs is more than 98% in the FY 2012/13. Moreover the trend of overall agreement rate is improved and maintained more than 95 percent to 98 percent through FY 2006/7 to 2012/13.



NTC lab is a National Reference Laboratory. It is working as a National TB Quality Control Centre (NTQCC). Discordant slides are regularly sent to NTQCC from all 5 RTQCCs where NTQCA rechecks them and report Feedback is sent to RTQCCs. Based on such Feedback reports, RTQAs prepare the final feed back report and is sent to the MCs on quarterly basis. EQA reports of sputum microscopy can be taken as the basic information for planning supervision, training and maintaining quality of microscopes etc.

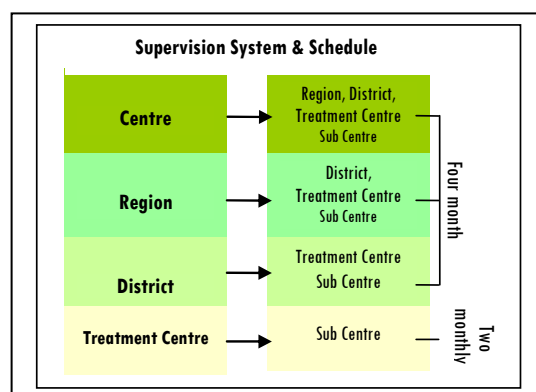
NTP Laboratory Network Coverage

Currently 554 microscopy centers are offering smear microscopy services, among these 466 operates within Government Health system and 108 through partner I/NGOs. Culture and DST facilities are available from NTC and GENETUP laboratories at the central level.

4.8.6 Supervision & Monitoring and Logistics System

Supervision, Monitoring & Evaluation

Supervision and monitoring is carried out through regular visits to all levels of the programme as per NTP policy. In addition to supervision and monitoring, quarterly reporting of activities is carried out at trimesterly Planning, Monitoring and Evaluation (PME) workshop at all levels of the programme.



The NTP maintains a regular monitoring system which includes case finding, smear conversion, treatment outcome and programme management reports from all levels of the programme. Data is initially reported and analyzed by the District Health Office during the district reporting and Planning workshops for treatment centre staff. District TB and Leprosy Officers (DTLOs) report on treatment centre and district during the Regional

Monitoring and Evaluation		
International	International Review	Annual
National	National Reporting & Planning Workshop	Four Monthly
Regional	Regional Reporting & Planning Workshop	Four Monthly
District	District Reporting & Planning Workshop	Four Monthly
Treatment Centre	Treatment Center Reporting & Planning Workshop	Four Monthly

Planning, Monitoring and Evaluation workshops. Finally, Regional TB and Leprosy Officers (RTLOs) report by district at national PME workshops. All of these PME workshops take place every four months, at the beginning of the new trimester.

Logistic Supply Management

The National Tuberculosis Control Programme provides drugs and other supplies regularly at an interval of four month. NTP drug ordering system starts from the trimesterly PME workshop by filling the drug order form by the treatment center level staff based on the calculation of drug requirements, consumption of drug and the consumption and requirements for buffer stocks.

Each level of the programme maintains a four months additional buffer stock to prevent stock out. 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 being slightly different for the Std DR-TB regimen and the Std XDR-TB regimen.

NTP Procurement, demand and supply organizational chart			
Procurement	Drug and other supply demand	Responsible Authority & Level	Supply
▲		Global Drug acility - WHO HQ	
▲	▲	WHO SEARO	▼
▲		WHO Nepal	
	▲	NTP/MOHP (PR)	▼
	▲	Regional Logistic Management Office/Store	▼
	▲	District Logistic Management Office/Store	▼
	▲	Primary Health Center	▼
	▲	Health Post	▼
	▲	Sub Health Pos	▼

4.8.7 Target Vs Achievement

Central Level		District Level	
Physical	75.3 %	Physical	95 %
Financial	59.3 %	Financial	92 %

Beruju Clearance - 61 %

In fiscal year 2070/71, NTC had 75.3 percent physical progress in central level program and 95 percent achievement in district level program. Whereas the financial progresses were 59.3 percent in central level and 92 percent in district level program. NTC was in good position regarding to clearance of financial irregularities. The Beruju clearance was around 61 percent in that period. Those information are shown in the table no. 2

4.8.8 Problems/Constraints

Some of problems/constraints raised in annual performance review meeting of the FY 2070/71 are listed in Table 3.

Table 3: Problems/Constraints

Issues	Solutions	Responsibility
Active case finding	Contact tracing, Mc Camp (implementing), Mother group mobilization in 2 district	NTC
Supervision, Monitoring and Evaluation	Effectively implementation of Supervision and monitoring	D/PHO, RHD, NTC
Vacant Post of DTLA/Lab	Demand form of PSC/ contract of lab personnel in some places	D/PHO, RHD, NTC
Laptop and other office equipment	Procuring the equipments	NTC

4.9 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

Reduce further the burden of leprosy and to break channel of transmission of leprosy from person to persons by providing quality service to all 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. To provide high quality service for all persons affected by leprosy.
5. To integrate leprosy in the integrated health care delivery set-up for provision of quality services.

Strategies

The new national strategy has envisioned delivering quality leprosy services through seventeen strategic areas including greater participation and meaningful involvement of people affected by leprosy and right based approaches in leprosy services broadly they are categorized into 10 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
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 researches/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 New Case Detection Rate (NCDR) by 25 % at national level by the end of 2015 in comparison to 2010
- Reduce Prevalence Rate (PR) by 35 % at national level by the end of 2015 in comparison to 2010
- Reduce by 35% Grade 2 disability (G2D) amongst newly detected cases per 100,000 population by the end of 2015 in comparison to 2010
 - o Additional deformity during treatment <5% by eyes, hands and feet (EHF) score
 - o 80% health workers are able to recognize and manage /refer reaction/complications
 - o Promote prevention of disability in leprosy(POD) and Self care

These targets will be revised after midterm evaluation.

Globally WHO has guided to reduce the burden due to Leprosy and Bangkok declaration has committed to reduce the G2D below 1/1 million and to increase the resources for leprosy, early diagnosis awareness to reduce stigma and rehabilitation in partnership approach.

Evolution and milestones of leprosy control program in Nepal

Though documented history of organized leprosy services are scanty available, establishment of Khokana leprosarium is considered the oldest organized leprosy services in Nepal. Some key milestones of leprosy control activities and programmes are given below.

- 1960 -Leprosy survey by Government of Nepal (GoN) in collaboration with World Health Organization (WHO).
- 1966 -Pilot project to control leprosy launched with Dapsone monotherapy.
- 1982 -Introduction of Multi Drug Therapy (MDT) in leprosy control program.
- 1987 -Integration of vertically shaped leprosy control program into general basic health services.
- 1991 -National leprosy elimination goal was set.
- 1995 -Focal persons (TB and Leprosy Assistants-TLAs) for districts & regions appointed.
- 1996 -All 75 districts were brought on MDT
- 1999/2000- -Two rounds of National Leprosy Elimination Campaign (NLEC) were implemented.
- 2001/02
- 2008 -Intensive efforts made for achieving elimination at national level
- 2009 -Leprosy elimination achieved at national level

- 2010 -Elimination at national level declared
- 2011 -National strategy was introduced
-National guidelines was revised
- 2012-2013 -Elimination sustained at national level
- 2013-2014 -Mid Term Evaluation on Strategy 2011-2015

Major Activities Undertaken During FY 2070/71

MDT service delivery

During the FY 2070/71, 3223 new leprosy cases were detected and were put under MDT and 2271 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 Leprosy Control Division (LCD) organized various capacity building activities during this reporting period. The LCD with technical support from Anandaban Hospital conducted 5days' comprehensive leprosy training (CLT) for 13 health workers and 4 days' skin smears training for 6 laboratory staff. District Health Offices/District Public Health Offices (DHO/DPHO) conducted 2 days' basic leprosy training (BLT) for 120 health workers in various districts. Similarly, central, regional health training center and partners conducted 2days BLT for 17 health workers in Bara district. Partners like The Leprosy Mission Nepal (LMN) and Building Knowledge, Attitude and Skill for Health (BIKASH) Nepal have also conducted basic training for health workers.

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 printed and distributed. Likewise, leprosy messages were disseminated through 200 flex charts which were displayed at district and health facility levels. Similarly, 1000 episodes of leprosy messages were broadcasted in Nepali and local languages through FM and other radio services at national and district levels. The LCD also printed bulletins (*HamroSawal*). Likewise, LCD has developed 160 *Lok Dohari* CDs on leprosy message in order to distribute in different districts and partner organizations.

World leprosy day observation

61st World Leprosy Day was commemorated by conducting various activities at national, regional and district levels. The following activities were jointly organized to commemorate the day by LCD, partners and stakeholders.

Media interaction

On the occasion of the 61st "World Leprosy Day", a media interaction was organized in the premises of Department of Health Services, National Health Education Information and Communication Centre (NHEICC) Teku on 10 Magh 2070 (24 January 2014). Dr LakhanLal Sah Director General, Department of

Health Services graced the programme as the chief guest. Mr Chudamani Bhandari, director of Leprosy Control Division, chaired and welcomed the dignitaries and facilitated the program. The LCD 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, the LCD Director and the chair-person of Nepal Leprosy Network (NLN).

Orientation to health workers

One day orientation was organized to capacitate health workers in Kathmandu (Thankot & Sankhu) and Kailali (Dhangadi) & Sarlahi. The participants included health care providers, regional and district TB/Leprosy Officers/Assistants, HA, SAHW, SN, SANM and other health professionals including teachers from Medical and Nursing Colleges from Kathmandu and Kailali. Training was facilitated by experts from LCD.

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 the patients in hospitals and organizing awareness rallies on leprosy throughout the month. 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. Similarly, miking was organized in urban areas of Kathmandu & Lalitpur municipality focusing on slum areas. Stickers, pamphlets and leaflets on leprosy were produced and distributed to participants and public in the programs organized to observe the day. Flex banners and posters were produced and distributed to all five regions, 75 districts, partners to display at various programmes and places.

Food Festival

On the occasion of the 61st "World Leprosy Day", food festival was organized in Anandaban Hospital. Health professionals and other professionals/authorities had lunch with leprosy affected people.

Satellite Clinic Review Meeting

Satellite clinic review meeting was held in Lalgadh and Pokhara. The participants from Dolakha, Makwanpur and Panchthar attended the meeting in Lalgadh and participants from Myagdi, Lamjung and Gulmi attended the meeting in Pokhara. Different aspects of clinic were discussed.

Program monitoring and on-site coaching

During this reporting year, one on-site coaching was organized in the endemic terai district (Nawalparasi). 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 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 and Health Management Information System (HMIS) section, INGO partners and WHO attended the workshops. Regional TB-Leprosy Officers (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.

Web-Based Leprosy Reporting and Management System (WeBLERS)

WeBLERS was developed with initiation of LCD and is a system complimentary to HMIS in 2013. The system is supposed to be centrally managed by LCD with specific responsibilities to RTLOs and DTLOs. The overall responsibility of feeding field level information in the system is by DTLOs, statistical officers/assistants & one supervisor identified from the districts. This system is based on case-based recording and reporting system of the patients. The system is also expected to expedite leprosy reporting process and transmission of official communication regarding leprosy from central level to regional and district levels and also vice versa. WeBLERS will support to strengthen HMIS system.

Early case detection activities (Active Case Detection)

Active case detection programme was designed and implemented in 20 VDCs of two high burden districts (Jhapa & Nawalparasi). 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 center, region, district and partners provided technical support to the local health facilities in diagnosing and managing the identified cases. A total of 34 new cases were identified.

Table 1: Identified cases during active case detection in Jhapa & Nawalparasi

Districts	No of VDCs	Cases identified		
		MB	PB	Total
Jhapa	10	13	9	22
Nawalparasi	10	8	4	12
Total	20	21	13	34

Active case detection in urban slums

During this reporting year, active case detection was also done in some slums of major urban areas/municipalities (Kalaiya & Nepalgunj). The search methodologies was similar to the search done in the VDCs as mentioned above. The details are given in the table below.

Table 2: Identified cases during active case detection in urban slums

Districts	Municipalities	No of slums searched	Case details		
			MB	PB	Total
Bara	Kalaiya	14 slums	2	2	4
Banke	Nepalgunj	17 slums	1	3	4
Total		31 slums	3	5	8

Source: LCD, DoHS

Contact examination: Patients & their family and neighbors

This is an index case based approach in which health workers and FCHVs visit every household of a newly detected leprosy case and their neighbors using the 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 and treatment management. During this year, **65176** family members were targeted and examination of **65000** family members was achieved.

Orientation on community based rehabilitation

One day orientation program for leprosy affected people and concerned stakeholders were organized in 20 districts to make aware them on United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

Income generation programme for leprosy affected people

Different income generation programmes for leprosy affected people were conducted in Achham, Darchula, Dadeldhura, Kanchanpur, Bajura, Dang, Rukum, Surkhet, Nawalparasi, Rupandehi, Kapilvastu, Palpa, Gulmi, Shyangja, Lamjung, Myagdi, Dhanusha, Mahottari, Sarlahi, Dolakha, Nuwakot, Makwanpur, Bara, Parsa, Rautahat, Chitwan, Panchthar, Jhapa, Terahthum, Saptari. Under this scheme, committees of leprosy affected people and people with other disability received a lump sum amount (seed money).

Interaction with stakeholders on MCBR for leprosy affected people

Interaction programme on MCBR was held in all 75 districts. The representative from major stakeholders (Leprosy affected people, other people with disability, local health professionals, representative of VDCs, community leaders, local partner organizations, disable people's organizations) participated the program and discussed on the issues of MCBR.

Financial support for Transportation to RFT cases

LCD has provided one thousand rupees for each RFT cases to cover the transportation cost after completion of MDT.

Recording Reporting Update & Leprosy Case Validation Activities

Recording reporting update & leprosy case validation activity was done in Sarlahi, Rautahat and Bara. One case was reclassified from MB to PB in Rautaht and one recycle case was found in Bara. Four over reporting cases were found in Sarlahi district. These results urge pogramme managers to continue such update and validation activities in other districts in future too.

National Seminar

National level seminar was held in Pokhara on 13th July 2014. The seminar was on "Over-coming post leprosy elimination challenges" for TB/Leprosy officers, supervisors. The participants were RTLOs/DTLOs/Supervisors from all 5 regions and 75 districts, representatives from all partners, Nepal leprosy affected society and concerned stakeholders. The seminar discussed major issues related to leprosy control activities in the country.

Mid-term Leprosy Programme Review and Assessment

Mid-term leprosy programme review and assessment (MiTLePRA) has analyzed the performance of different level of government health institutions, service providers, partners, community people and leprosy affected people with recommendations and suggested actions for further improvements, policy strategy in service and programme.

The objective of this review was to assess the performance of programme components and other stakeholders, partners and referral centers so that strengths and gaps could be identified in order to succeed in the implementation of current national strategy, to perform comprehensive review of the NLP with reference to national strategy 2011-2015.

Descriptive cross sectional design with mix (both qualitative and quantitative) type of study was carried out. 146 community members, 105 leprosy affected people, 86 SHPs/HPs/PHCCs, 21 District/Zonal/Regional/Central Hospitals, 20 District managers, 5 Regional Health Directors/program focal persons, 21 SHGs/SCGs and 14 Partner Organizations were interviewed. Purposive sampling method was applied to select the districts based on ecological zone and endemicity. Structured questionnaires, observation check lists were applied and key informant interviews, interaction with and observation of self care group /help group were carried out by National and international experts. Data were analyzed in SPSS 18.0 and window Excel.

The MiTLePRA recommendations are as mentioned below:

1. Early case detection:

1.1 Active case detection: Active case finding activities which have been included in the national and regional strategies are skin camps and door to door survey. These activities have contributed quite number of cases to the program and has benefited also in terms of involvement of community members and health volunteers such as FCHV. However, there is need for VDC wise micro stratification of the district and Mapping of endemic VDCs, setting target of coverage by active case finding activity, ensuring the quality of activity by doing continuous monitoring and sustaining capacity. Coverage of endemic pockets case finding activity may be used as one program performance indicator.

1.2 Passive case finding: Most cases presented and interviewed during the evaluation were found voluntarily. This is good since it reveals that people are already aware of signs and symptoms and seek treatment to health facilities. Most cases mentioned that they seek for treatment because they heard information either from television or radio. Team also observed that many PHC/HP/HSP did not display IEC materials on leprosy. More IEC materials are needed to be displayed especially in low burden pockets where active case finding activity has not been a priority anymore.

1.3 Contact examination: After elimination, since active case finding require more resources, activity such as contact examination is very important. Contact examination is an activity which requires small budget but has important impact. During contact examination, health education also takes part since health worker will explain about leprosy to patient's family/neighbours. Therefore, coverage of contact examination is one of a good process indicator to measure quality of service after elimination. In high prevalent district which has urban areas such as Banke, Dhanusha, Jhapa etc., it is also useful since organizing case finding activity is difficult with high urbanization/migration. In most of the district the coverage of contact examination is still low. There are two possibilities; one, the activity was not carried out or two, it is not recorded. During interview with patients, only small number of them mentioned that their family is examined also. Only small proportion of focal person in PHC/SHP encouraged contact examination though it is a compulsory according to the national guidelines.

2. Quality of service:

2.1 Proper diagnosis and classification: During case verification in the field, there have been very few cases which were diagnosed and classified improperly by health workers. Good partnership with referral centers for confirmation of cases has contributed to this achievement. Most cases presented to PHC/SHP/HP are referred to referral centres for confirmation. Though most leprosy workers in PHC/HP/SHP have been trained more than 10 years ago, they still can recognize cases and refer properly. However, in some districts teams observed that health workers are not as confident as in suspecting cases. Though they also can refer to referral centre for further confirmation, some of them mentioned that they are now not very confident in diagnosing. It is a common situation in an after elimination scenario. However, considering that most of the health workers in the field were trained more than a decade ago, sustaining their capacity is crucial to ensure program performance (as mentioned in one of the national strategy). In hospital, there are cases which presented directly to dermatologist and not first went to primary health facilities. Though dermatologist in the hospital managed the cases properly and gave MDT treatment and reaction treatment correctly, those cases are not recorded and reported accordingly to the district. However because of the shortage of social workers /health educators in hospital, proper counselling and guidance was lacking.

2.2 Defaulter ratio: Most cases are provided with treatment properly and almost all visited health facilities have 100% treatment completion rate. Logistics stock was also found sufficient though some health facilities had shortage of MDT.

2.3 Relapse case: Not so many issues found on relapse. Good collaboration with partners/ other referral centres in confirmation of relapse has taken place and treatment was available.

2.4 Further disability during MDT: Though proportion of disability gr.2 among new cases is continuously decreasing in recent years, development of deformity during treatment and after completion of treatment has not been addressed. In the national target it is mentioned about reducing additional deformity during treatment <5% by EHF score. However, at report and analysis this issue has not been raised and regular examination on hand, feet and eyes has not been done. Most patients mentioned that they are not regularly examined and health workers also mentioned that the examination only done if patients have complaint about their condition. Self care also has not been emphasized and control of self care at home is difficult. Most cases with reactions or complication are also referred to Hospital/referral clinics where patients are taught on self care before discharge. However, it was also mentioned that it is

difficult to evaluate whether patients do self care or not. Further development of disability also may still happen in patients with reactions history and high BI. Active surveillance might be suggested for patients with high risk of deformity after RFT especially when no self care group activities and patients are exposed with physical work which may increase risk of wound and ulcers.

3. **Reaction and complication management:** Most of the cases with reaction and unmanageable complication are referred to referral clinics.. From field observations, health workers are able to recognize and manage/refer properly. During case verification it was also found that the management of reaction and management in referral clinics are done according to the national guideline. Most patients also mentioned that they have been informed about possibility of having reaction or complication during treatment and prefer go to health facility if they have such problem. However, follow up should be made for cases which presented directly to hospitals (dermatologists) with no in-patient facility for leprosy. In some hospitals, dermatologists did not have national guidelines and did not report cases to the districts. Though cases are managed properly (counselling, teach self care), follow up should be taken for this issue since dermatologist not practicing EHF examination regularly also. Another important issue raised by dermatologists was no supply of supportive drugs like corticosteroids, loose clofazimine and thalidomide (in tertiary level hospital) for management of reaction cases or who report with complication. MoHP may consider arranging supply of such drugs.
4. **Prevention of disability:** As it has been mentioned earlier, prevention of disability activities has not been considered an important indicator in the target. Counselling and teaching self care have been done but no evaluation has been made. It is suggested that target should be set of how many EHF examination should be done during treatment (for example 6 times for MB and 2 times for PB) and program performance should be measured through examining how many cases develop deformity at RFT compared to before treatment starts.
5. **Reduce stigma and discrimination:** During field observation, community has been very much aware and keen to talk about leprosy. They are not reluctant to talk about the disease and most of them have ever seen leprosy patients. However, most of them still do not know the cause of leprosy. They know that treatment can cure the disease and suggest that patients should be treated inclusively in the community. None of the respondents said that patients should be kept away or isolated. However, awareness about occurrence of reaction in leprosy cases was lacking. It is suggested that more IEC activities which include community members will be beneficial to keep reducing stigma and discrimination.
6. **Monitoring:** Most respondents in the field mentioned that regular monitoring from central level up to health facilities has been done. Regular meeting/workshop is done at least 4 monthly up to sub health post level. Some constraints regarding time, budget, and work load has been managed so that regular visit still can be made though may be less frequent especially in difficult to reach areas. Result of regular monitoring should be further taken into account when developing planning. Different strategies and indicators might be developed for different areas. For example, there are areas which are more urbanized and there are areas near border. So far, identifying different strategies for different pocket/areas has not been too much addressed. This should always be evaluated during regular monitoring. Regarding treatment completion and the provision of transport allowances after treatment, most patients do not know about this and community also do not know. Records on this is maintained completely in some health facilities only. It was noted that target has not been

met on provision of transport allowances. Delayed in budget released was mentioned as one of the problem. Improving the quality of regular monitoring by using emphasized indicators and using those indicators for evaluation and further planning; not only maintaining high treatment completion rate, provision of transport allowances to patients completing treatment should be communicated properly to meet its objective in encouraging patients to finish treatment.

7. **Capacity building:** Most focal persons interviewed during field visit mentioned that they were trained for leprosy more than a decade ago. Though they are still performing very well in case management (from case verification), some of them might need refresher training since there are focal persons who do not even remember again cardinal signs and classification. Expanding knowledge about leprosy to community also has been attempted in some areas by orienting FCHV and other community members about the disease. However it was mentioned during field visits by health workers that number of training is decreasing every year and partners have very small contribution now to capacity building. It is suggested that needs of training should be identified every year (data on training was hard to get during field visit) and make plan with partner organisations.
8. **Rehabilitation:** So far rehabilitation activities have been mostly done in close collaboration with partners. Encouragement from health facilities is still not yet optimal. Patients mentioned they know about rehabilitation but who is providing what is still not clear for them. Information about rehabilitation activities also has not been shared regularly from the partners to district/regional/central authority. One visited self help group showed very good achievement in income generation activities. However, activities for self care have been very rarely addressed in the SHG meeting. Leprosy affected Persons with G2 disability require corrective surgery to make them socially productive, however not much is being done on this aspect. It is suggested that MOH&P may identify some referral/ tertiary level hospitals for carrying out reconstructive surgery in leprosy affected persons with disability. Efforts should be made to main stream socio economic rehabilitation of leprosy affected persons in collaboration with Social Welfare Department.
9. **Involvement of people affected by leprosy:** Involvement of leprosy affected persons can be done by several ways such as implementation of activities such as health education program or IEC (radio interview, short documentary). They also can be involved for brainstorming during meeting for planning purpose. However, choosing the right people affected by leprosy is also a challenge.
10. **Research:** Some clinical or operational researches have been taken place but only in partner's referral centre. Results of studies should be shared and if possible be incorporated during policy making or evaluation meeting. Operational research such as surveillance of disability post RFT might be good to be further followed up.
11. **Coordination:** Dissemination of information about national strategies, monitoring and collaboration between government and partners has been observed very well during field visit. Partners are working accordingly to the national guideline and strategies as suggested by the government. In development of planning though, some districts still found difficulties in making a more bottom up planning (capacity problem or willingness?) for leprosy. Further capacity building on planning and coordination might be needed for human resource up to district level. Coordination with stakeholders such as education institution and partners therefore should be further strengthened.

12. **Annual planning:** Since there are many partners who are working with LCD in implementation of the programme. It has been felt that there are areas where there is overlapping of efforts and resources between NGOs and Govt. It is suggested during the time of preparation of annual action plan consultation may be held with partners requesting them to clearly articulate their contribution in the programme in order to avoid duplication of efforts and resources.

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 dermatologists, trained health workers and leprosy focal persons conducted the camps in the local health facility. FCHVs and other health workers are mobilized and IEC activities were also done to inform community people about the camp. During this fiscal year, 40 such camps were conducted in Taplejung, Panchthar, Jhapa, Sankhuwashabha, Terahthum, Bhojpur, Solukhumbu, Khotang, Okhaldhunga, Saptari, Sindhuli, Dolakha, Dhading, Nuwakot, Rasuwa, Makwanpur, Chitwan, Rupandehi, Gulmi, Nawalparasi, Kapilvastu, Syangja, Lamjung, Tanahun, Kaski, Baglung, Myagdi, Bardiya, Dailekh, Jumla, Rukum, Rolpa, Dang, Kailali, Doti, Bajura, Achham, Darchula, Dadeldhura, Kanchanpur, districts in different endemic pockets.

School health education

This activity targets mainly secondary level school students. The main objective of this activity is to make 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 1400 schools were given health education against targeted 1500 schools.

Publications

During this reporting year, leprosy control division published its annual report 2070/71 (2013/14) containing the salient features of the current leprosy situation, activities undertaken during previous year, achievements and obstacles faced by the program.

National operational guidelines has been developed and 500 copies printed which were distributed to the health workers which provides technical as well as programmatic information on leprosy including disease surveillance, suspecting of leprosy cases etc. In addition, *HamroSawal*, quarterly bulletins of LCD were also published twice in the months of *Magh & Ashad*.

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 participant in leprosy control activities. One day orientation was done on signs & symptoms to suspect the cases and the participants were mobilized in the communities to suspect potential cases. During this fiscal year this activity was conducted in 201 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, Leprosy Mission Nepal (LMN), Nepal Leprosy Trust(NLT), International Nepal Fellowship (INF), BIKASH Nepal, Partnership for New Life(PNL), Nepal Leprosy Fellowship (NLF) Nepal Leprosy Relief Association (NELRA), Sewa Kendra, Shanti SewaGriha, Rehabilitation, Empowerment And Development (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 included in new programme guidelines. The districts are expected to collect detail information about the cases by using the surveillance form which will help generate socio-demographic and epidemiological information. Further strengthening of this system is needed to collect timely and quality information in the coming years.

Reporting of relapse cases

Though relapse of leprosy cases after completing a standard and recommended course of treatment is quite rare, the programme reported 11 laboratory confirmed cases of relapse. Anandban hospital has been serving 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.

Activities supported by different partners

Activities Supported by WHO

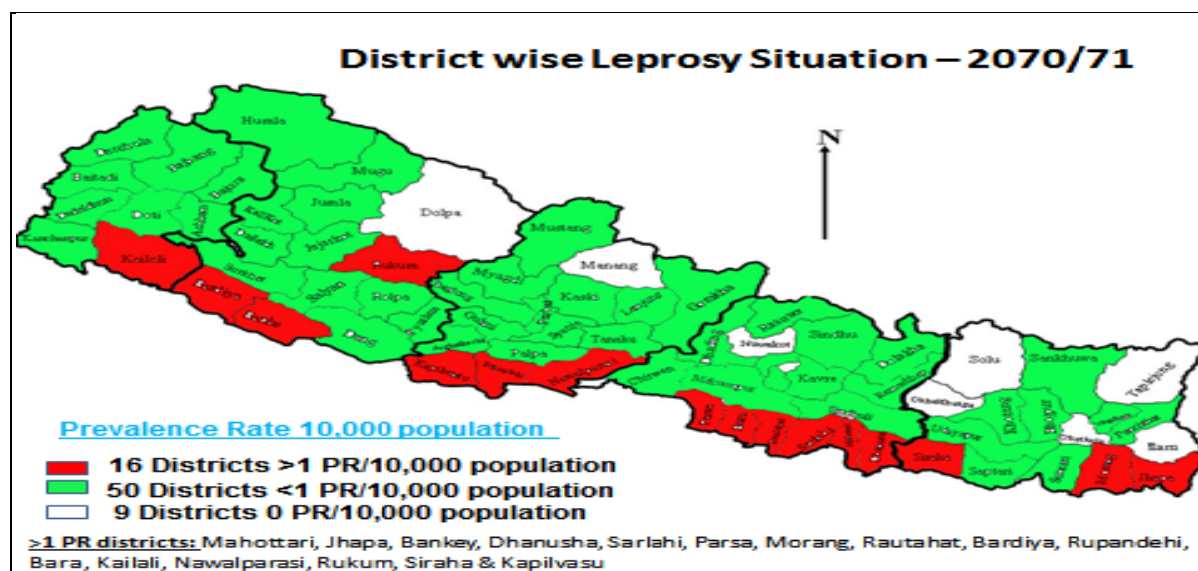
- MDT drug supply
- Technical support for leprosy control programme
- Workshop to prepare plan of action for 2014-15 and orientation to programme managers, focal persons and partners on revised programme operational guidelines
- National seminar on over coming post leprosy elimination challenges" for TB/Leprosy officers, supervisors Mid-term Leprosy Review and Programme Assessment
- Support to endemic districts for IEC activities
- Supervision and monitoring
- Capacity building activities
- Leprosy day observation

Activities supported by partners (NLR, LMN, NLT, INF 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 joint supervision and monitoring.
- POID & Rehabilitation service.
- 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.

Figure 1: District-wise leprosy prevalence in FY 2070/71



Prevalence

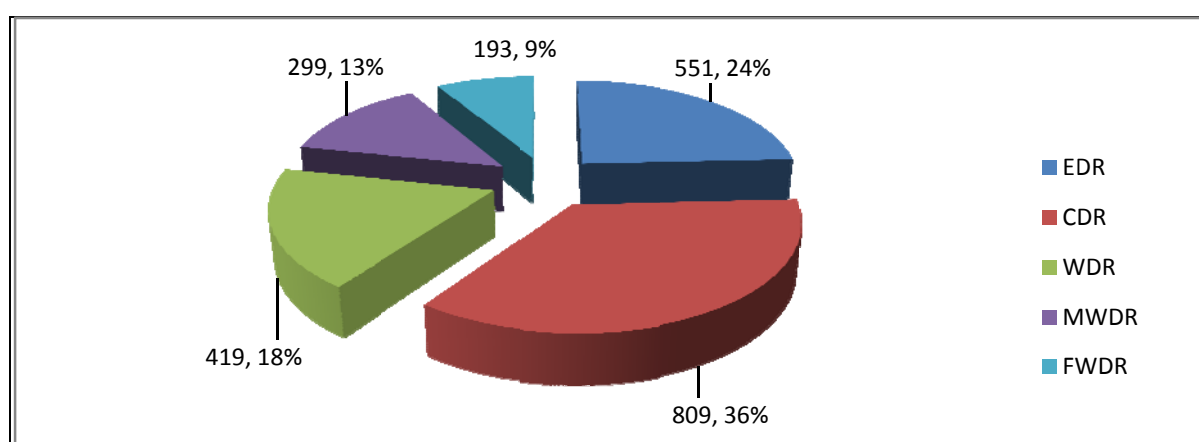
At the end of the FY 2070/71 (2013/14) there were 2271 leprosy cases receiving MDT in the country, which makes the registered prevalence rate of 0.83/10,000 populations at national level. This rate is well below the cut-off point of <1 /10,000 population set by WHO to measure the elimination of leprosy as public health problem. Thus the national programme has sustained the status of elimination of leprosy as public health problem achieved at the end of 2009. This fiscal year PR has minimally increased as compared to previous year (i.e. 0.82 in FY 2069/70). Nine districts had zero prevalence.

Region wise, the highest number of leprosy cases under treatment was reported from the central development region with 809 cases (36% of total) followed by eastern development region with 551(24%) cases under treatment. Though far western developmental region reported the least number (193) and share (9%) of total cases under treatment, the registered prevalence rate (RPR) was the highest in the eastern region (0.93/10,000 population) followed by western region (0.84/10000 population). Region wise registered prevalence rate are shown in the table below.

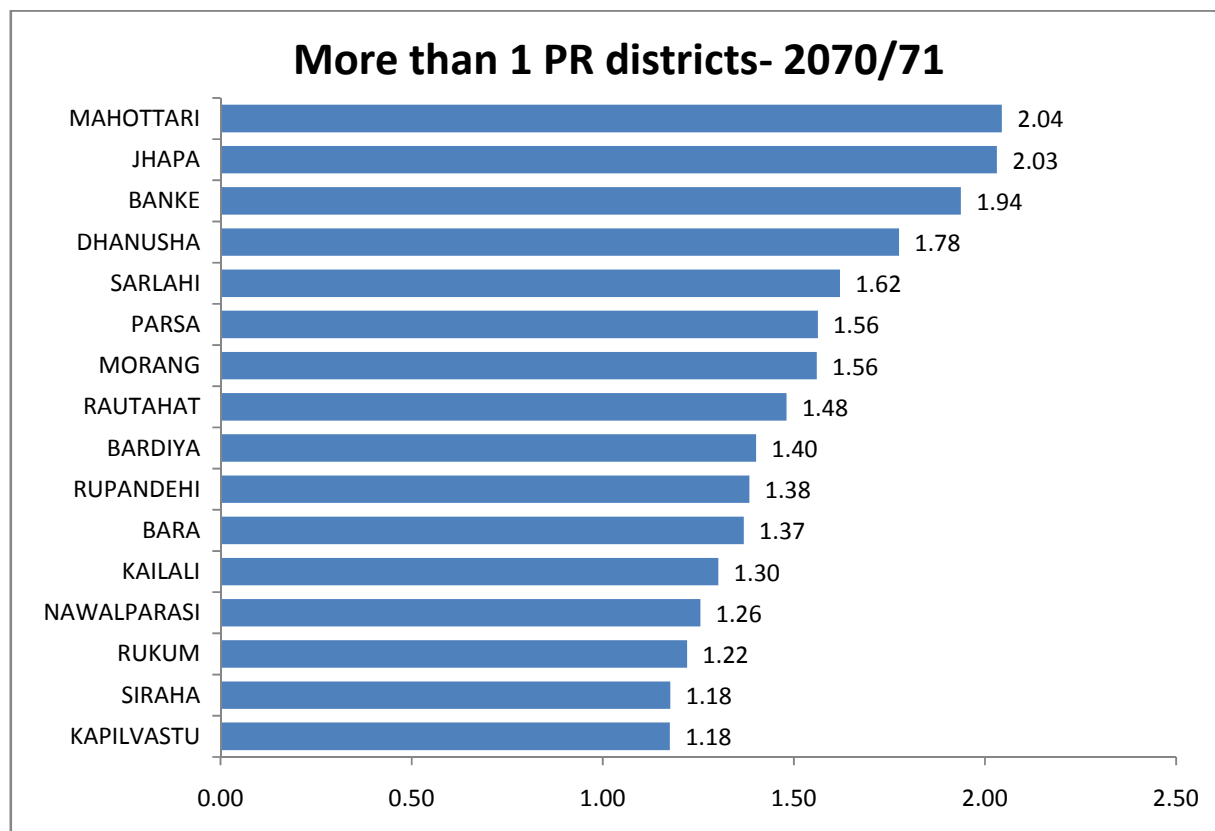
Table 3: Region-wise distribution of registered cases and prevalence rates (RPR) in FY 2070/71

Regions	No. of registered cases at the end of the year				
	MB	PB	Total	%	PR/ 10,000
EDR	361	190	551	24	0.93
CDR	485	324	809	36	0.80
WDR	337	82	419	18	0.84
MWDR	232	67	299	13	0.81
FWDR	126	67	193	9	0.73
National	1541	730	2271	100	0.83

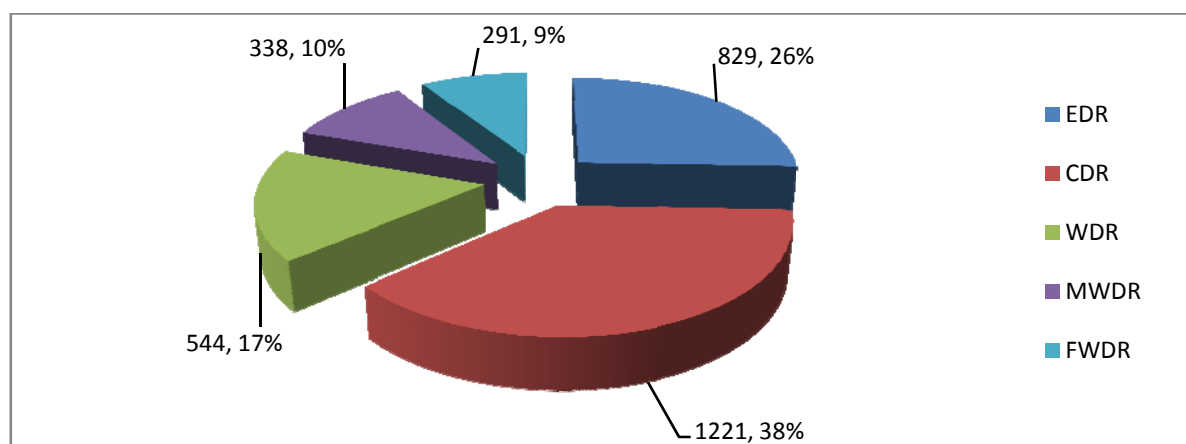
Source: LCD, DoHS

Figure 2: Region-wise under treatment cases FY 2070/71

This reporting year, there was increase in the number of districts with PR more than 1 case per 10,000 population; 16 districts reported PR above 1 case/10,000 population (14 districts in the previous year). This year two new districts (Rukum&Kapilvastu) appeared as having PR more than 1/10,000 population. Among these, 15 districts are Terai districts bordering Bihar and UP states of India except Rukum. District wise, Mahottari reported the highest PR of 2.04/10,000 population followed by Jhapa, Banke and others. The figure below shows the district wise PR in endemic districts.

Figure 3: Districts with PR above 1 per 10,000 populations**New case detection**

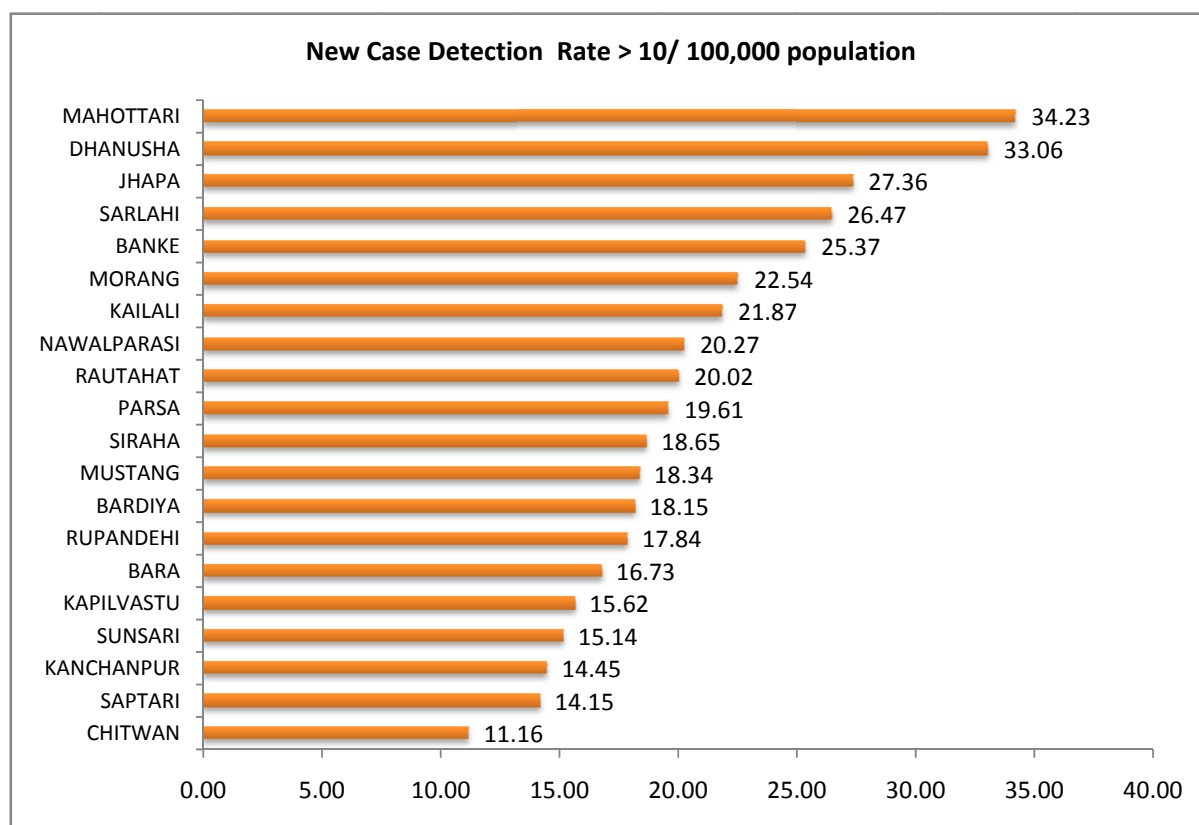
Detection of new cases signifies ongoing transmission of leprosy and the rate measured per hundred thousand populations helps monitoring the progress towards control. Three thousand two hundred and twenty three (3223) new leprosy cases were detected during this reporting year (2070/71), which is slightly decrease in number and rate as compared to previous reporting year. Region wise, the highest number was reported from CDR with 1221 cases followed by EDR, WDR, MDR and FWDR with 829, 544, 338 and 291 new cases respectively.

Figure 4: Region-wise new cases in FY 2070/71

The new case detection rate (NCDR) per 100,000 populations for FY 2070/71 was 11.8 nationally, whereas EDR reported the highest rate among the regions. More than 86 percent of the new cases detected were from Terai districts alone.

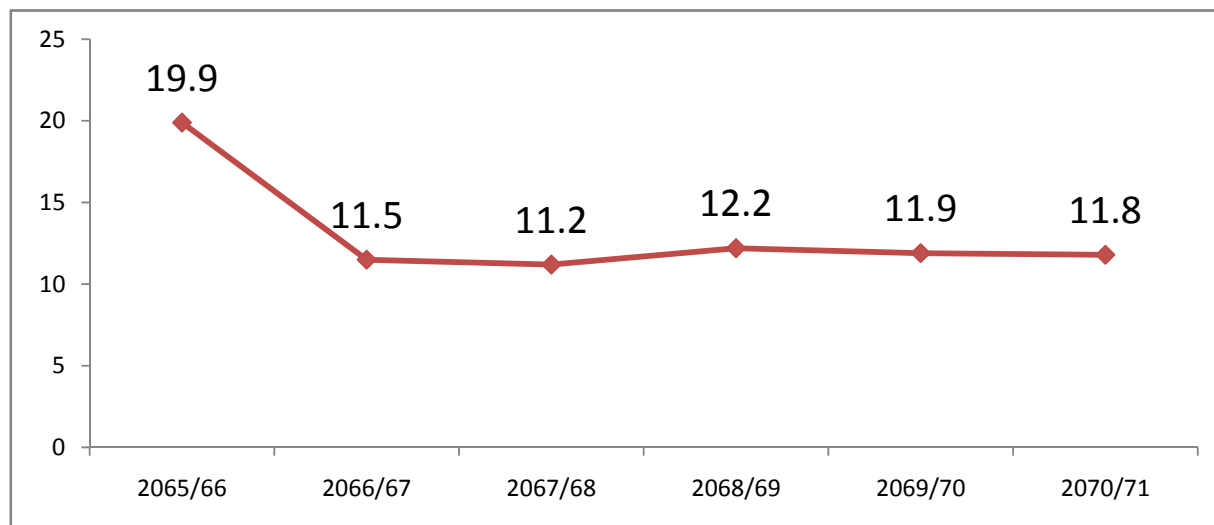
By type, more than 52% of these new cases were Multi Bacillary (MB) and the rest were Pauci Bacillary (PB) leprosy. This proportion has constantly remained around fifty percent since several years. By region, Western region has the highest proportion (66%) followed by Mid-western region (65%) and the lowest proportion was seen in Central region with 42% and the rest fell between these figures. Nearly one third (35%) of the new cases were female. Female proportion was remained consistently around thirty percent for 5 years (from 2065/66-2069/70) but in this fiscal year it has slightly increased. Likewise, children constituted 6% of the total new cases detected in this reporting year which is an increase as compared to previous fiscal year (i.e. 4%). The increase in child cases signifies that there is still ongoing transmission in the community.

Figure 5: Districts which have more than 10 NCDR per 100,000 population FY 2070/71



District wise, nine mountain and hilly districts reported zero new cases during this year. But there are twenty districts which have more than 10 NCDR Out of them; Mahottari has the highest NCDR (i.e. 34/100,000).

The figure below shows five year trend in new case detection and it has remained almost same since last 5 years.

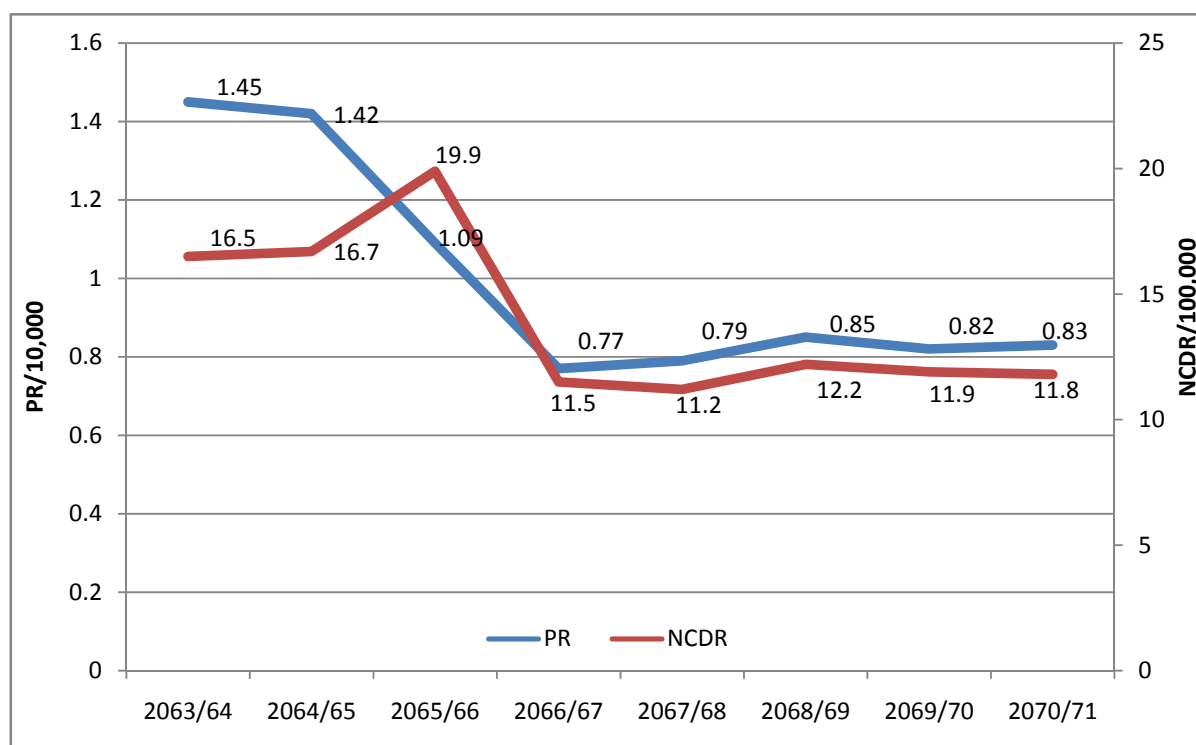
Figure 6: NCDR Trend /100,000 populations 2065/66-2070/71**Table 4: New cases and proportions among new**

Region	New Cases			NCDR/ 100,000	Proportion among new cases		
	MB	PB	Total		Women	Child	G2D
EDR	432	397	829	14	291(35.10%)	42(5.07%)	37(4.46%)
CDR	508	713	1221	12.1	428(35%)	114(9.34%)	55(4.50%)
WDR	360	184	544	10.9	190(34.93%)	22(4.04%)	3(0.55%)
MWDR	220	118	338	9.1	126(37.28%)	12(3.55%)	4(1.18%)
FWDR	146	145	291	11	108(37.11)	14(4.81%)	10(3.44%)
National	1666	1557	3223	11.8	1143(35.46%)	204(6.33%)	109 (3.38%)

Source:LCD, DoHS

Trend in new case detection and prevalence

Both the new case detection and registered cases have not much changed compared to last six years. Looking into the trend of last six years, it was suddenly going down in 2066/67 but has consistently maintained the elimination status since last five years.

Figure 7: Trend in NCDR and PR from 2064/65-2070/71

Region wise, Eastern region reported the highest prevalence rate (0.93/10,000 population) followed by Western, Midwestern, Central and Far Western regions respectively. Three regions (Eastern/western/Midwestern) have observed an increase in the trend as compared to the last reporting year, but 2 regions (Central & Far Western) have decreased PR as compared to previous reporting year. Six-year trend in registered prevalence rate by region is given in the table below.

Table 5: Region wise trend in prevalence rate from 2065/66 – 2070/71

Regions	2065/66	2066/67	2067/68	2068/69	2069/70	2070/71
EDR	1.16	0.92	0.87	0.89	0.90	0.93
CDR	1.23	0.79	0.82	0.86	0.87	0.80
WDR	0.82	0.68	0.64	0.70	0.76	0.84
MWDR	0.93	0.48	0.72	0.92	0.80	0.81
FWDR	1.21	0.88	0.91	0.94	0.81	0.73
National	1.09	0.77	0.79	0.85	0.84	0.83

Source: LCD, DoHS

Relapse cases

The information of relapse of leprosy cases are mentioned in below table. This fiscal year, relapse cases are increased (doubled) as compared to last fiscal year. Andanban hospital is only one designated sentimental site for lab confirmation for relapse case.

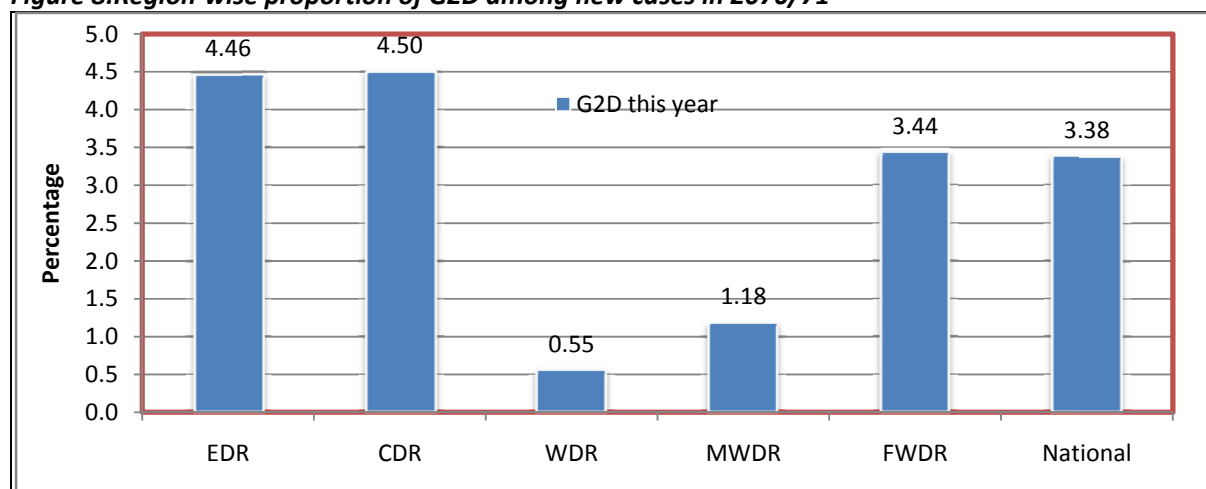
Table 6: Trend in relapse cases for last three fiscal years

2067/68	2068/69	2069/70	2070/71
20	25	14	11

Disability

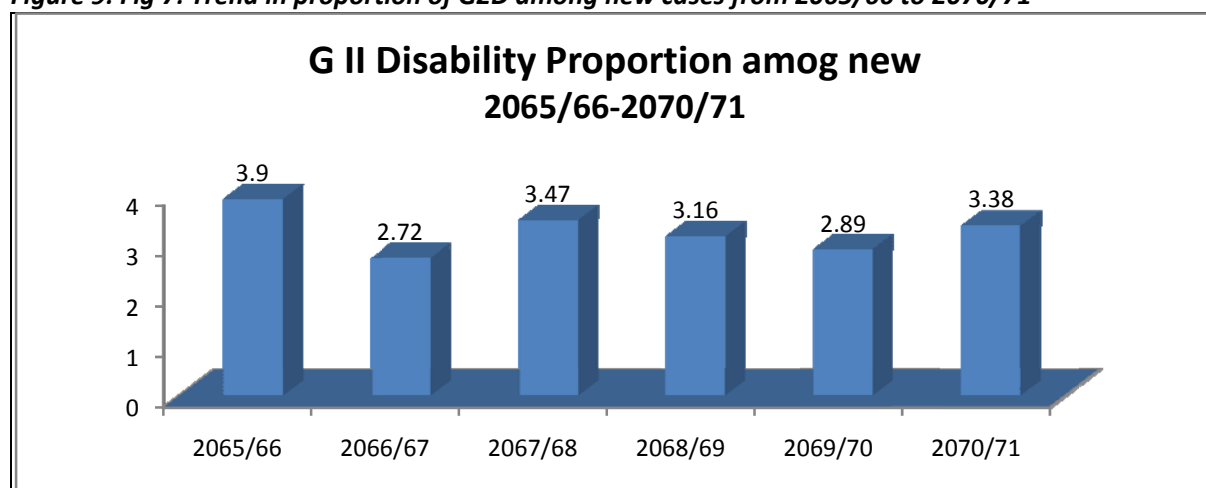
If not detected early and not completely and timely treated, leprosy variably results into disability of varied degree and type. Thus early detection and timely and complete treatment is very crucial for prevention of disability due to leprosy. Proportion of Grade II Disability (G2D) among new cases and rate per hundred thousand populations are major monitoring indicators of early case detection. During this reporting year, 109 cases of visible disability (G2D) were recorded and its proportion among new cases was 3.38 percent nationally and by region it was the highest in Central regions (4.5%) and the lowest in Western region (0.55%).

Figure 8: Region-wise proportion of G2D among new cases in 2070/71



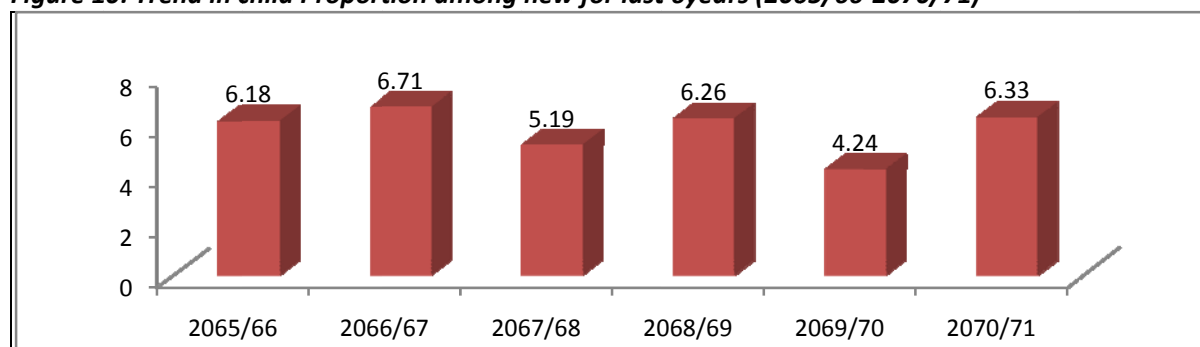
The G2D proportion among new cases has been fluctuating within 2 to 4 percent since last 6 years and it is increased this fiscal year as compared to last fiscal year.

Figure 9: Fig 7: Trend in proportion of G2D among new cases from 2065/66 to 2070/71



Child cases

There were total of 204 new cases diagnosed during the Fiscal Year 2070/71. The proportion of child cases among new cases is 6.33% for this fiscal year. The trend shown the figure below reflects that child proportion is fluctuating and it is increased this fiscal year as compared to last fiscal year.

Figure 10: Trend in child Proportion among new for last 6years (2065/66-2070/71)**Outcome of the registered cases**

During this Fiscal Year 2070/71, a total of 3187 (MB=1678 and PB=1509) cases had completed treatment and were released from treatment. The remaining cases are undergoing treatment. Total transferred out cases were 10, number of defaulter cases was 24 and other deductions were 100 (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 53. (See **annexes** for detail information on district, regional & national level data breakdowns).

Table 7: Number of cases released from treatment (RFT), by region in 2070/71

Region	MB	PB	Total
EDR	429	362	791
CDR	537	736	1273
WDR	322	173	495
MWDR	219	108	327
FWDR	171	130	301
National	1678	1509	3187

Source:LCD, DoHS

Table 8: Comparison of leprosy indicators (year-wise from 2065/66 – 2070/71)

	2009/10	2010/11	2011/12	2012/13	2013/14
New patients	3157	3142	3481	3253	3223
NCDR	11.5	11.2	12.2	11.9	11.18
UT at the end	2104	2210	2430	2228	2271
RPR/10,000	0.77	0.79	0.85	0.82	0.83
No of New child	212	163	218	136	204
Child proportion	6.71	5.19	6.26	4.24	6.33
No of G2D	86	109	110	94	109
G2D Proportion	2.72	3.47	3.16	2.89	3.38
G2D rate/100,000	0.31	0.39	0.39	0.35	0.40
No of female	1030	892	1100	1004	1143
Female proportion	32.6	28.4	31.6	30.8	35.46
RFT	3844	2979	3190	3374	3187
No of defaulters	25	31	24	43	24
No of relapse	18	20	25	14	11

Source:LCD, DoHS

Some reasons of decrease in new cases and prevalence

A field verification and validation of records and cases were performed in the current fiscal year. Theretrospective data verification and case validation activity was conducted in endemic districts of terai.

- Over holding of cases/RFT due
- Recycled cases/double registration
- Local address given to cross border cases

Impression

- Sustained elimination but overall prevalence has slightly increased as compared to last fiscal year
- Sixteen districts have prevalence above 1 case/10,000 populations which was in 14 districts last year
- Increase in Grade 2 Disability
- Good coordination exists with partners

Strength, weakness, challenges and way forward

Strength

- Commitment from political level – Minister’s commitment towards Bangkok Declaration for Leprosy
- 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
- Participation of Leprosy affected in the national programme has been improving
- Steering, coordination and technical committees are formed within this FY
- Web-based Leprosy reporting and management system (WeBLeRS)
- Focus has been given to medical & community based rehabilitation (MCCR)

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 (eg: CLT, BLT, CBR) for health workers, focal persons and managers
- Poor institutional set-up and inadequate human resources at central level

Challenges

- To sustain the achievement of elimination at national level and further reduce disease burden
- To maintain access/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.
- To further reduce stigma and discrimination against affected persons and their families.
- Information sharing and integration of leprosy services in private sector, including medical colleges.
- Possibility of recycled cases registered in medical colleges, central hospitals & referral centers

Future course of action and opportunities

- Mid-Term Leprosy programme assessment will be a milestone for overall Leprosy programme in Nepal
- Policy related issues to be addressed by MoHP.
- Implementation of national strategy within ministry and through partners.
- Use of/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 some VDCs of high 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 programmes.
 - Capacity building of health workers for early case detection, management and community based rehabilitation.
 - Strengthen functional integration of leprosy services in remaining areas
 - Use of available resources and infrastructure for other services, eg: lymphatic filariasis, geriatrics, diabetes and other NTDs & disabilities.
 - Operational research studies in high endemic districts and pockets on specific issues for quality services
 - High time to start chemoprophylaxis and immunoprophylaxis (one, either or both) to protect the contacts and break the transmission
 - 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
 - Strengthen surveillance in low endemic districts and areas
 - Evidence based (laboratory confirmed) reporting of relapse through utilization of available resource
 - Address cross border issues
 - Sustaining the newly initiated program and service e.g. satellite services, interaction with medical college hospitals, joint monitoring, training & observation in partnership approach with the Government.
 - Strengthening of referral hospital (efficiency, quality service in zonal hospitals that were handed over) & proper referral mechanism.
 - Web based Leprosy reporting and management system has been developed to support HMIS in recording and reporting of leprosy cases.
- Forms of case based surveillance of leprosy cases has been designed and has been incorporated in the WeBLERS programme. This programme envisions to support in prevention of duplication of and recycling of Leprosy cases in Nepal,

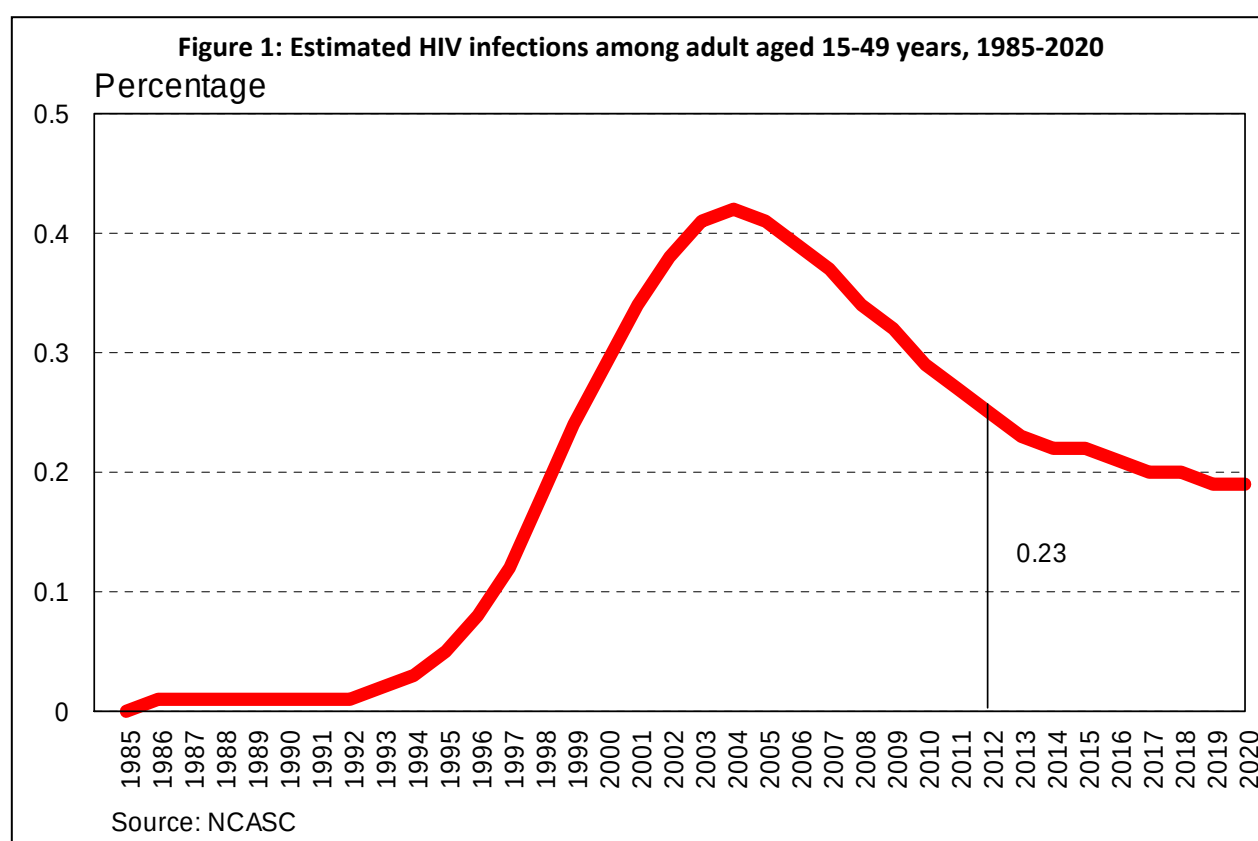
4.10 HIV/AIDS and STI

1.1 Background

With the first case of HIV identification in 1988, Nepal started its policy response to the epidemic of HIV through its first National Policy on Acquired Immunity Deficiency Syndrome (AIDS) and Sexually Transmitted Disease (STD) Control, 1995 (2052 BS). Taking the dynamic nature of the epidemic of HIV into consideration, Nepal revisited its first national policy on 1995 and endorsed a latest version: National Policy on Human Immunodeficiency Virus (HIV) and Sexually Transmitted Infections (STI), 2011. Based on the latest national policy, the country now is implementing its fourth National HIV/AIDS Strategy (2011-2016).

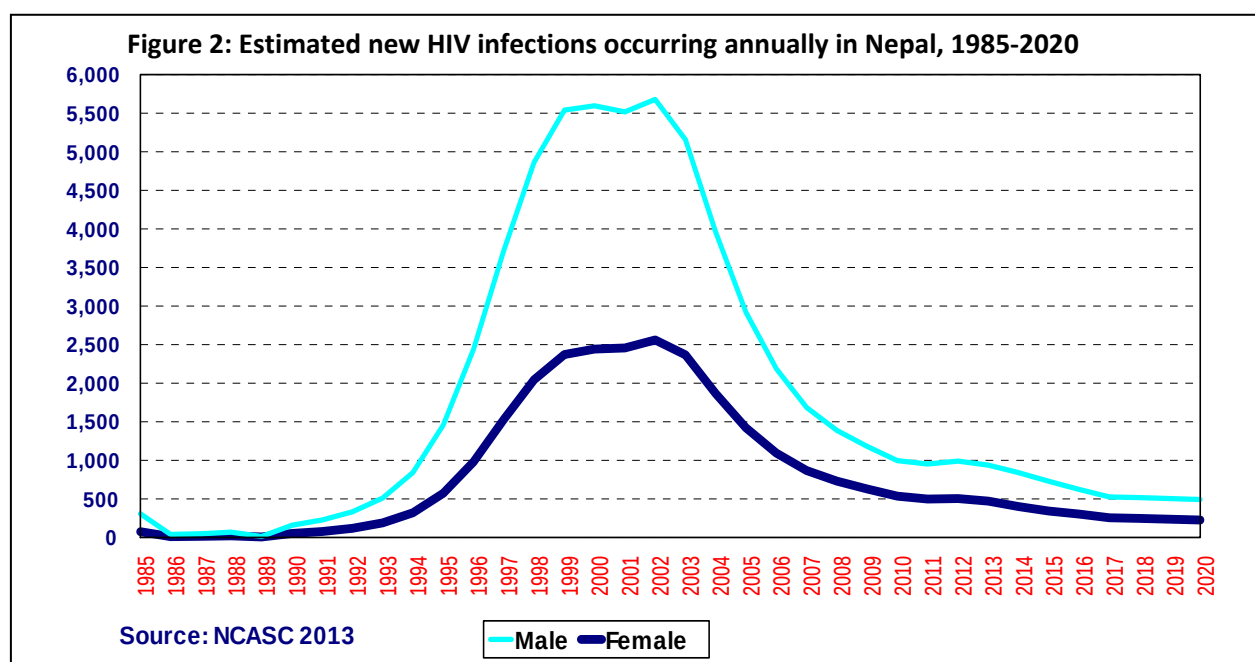
1.1.2 Overview of the Epidemic

Starting from a 'low level epidemic' over the period of time; HIV, in Nepal, evolved itself to become a 'concentrated epidemic' among key affected populations (KAPs), notably with People who Inject Drug (PWID), Men who have Sex with Men (MSM) and Transgender (TG) People. A review of the latest epidemiological data, however, indicates that the epidemic transmission of HIV has halted in Nepal (**Error! Reference source not found.**). The trend of new infections is evidently taking a descending trajectory, reaching its peak during 2001 - 2002. The epidemic that peaked in 2000 with almost 8,000 new cases in a calendar year has declined to about 1,408 new HIV infections in 2013. This decline is further accompanied by the decreasing trend of estimated new HIV infections occurring annually in Nepal as shown in **Error!**



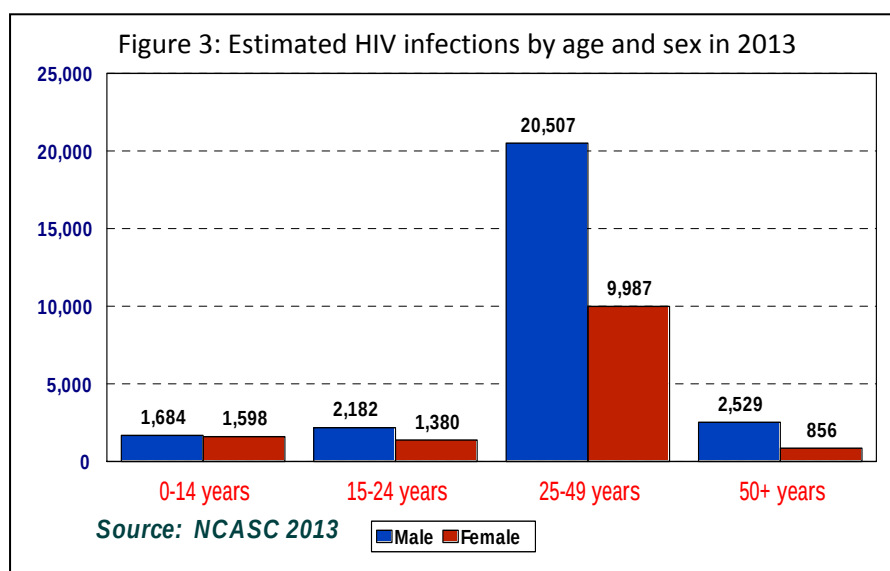
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This prevalence has dropped from 0.42% (highest level projected in 2004), and is expected to maintain a plateau at 0.23% from 2014 through 2020 with current level of efforts. Along with that, the new infections have reduced significantly in the last one decade (7,500 in 2003 to 1,400 in 2013: about a reduction by 80%). Overall, the epidemic is largely driven by sexual transmission that accounts for more than 85% of the total new HIV infections.



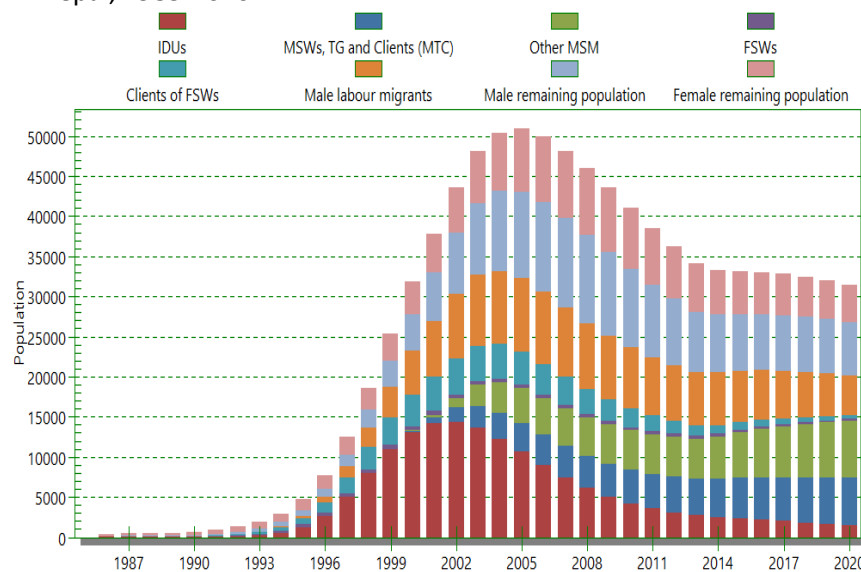
Making up 8% of the total estimated population of 40,723, there are about 3,282 children aged up to 14 years are living with HIV in Nepal in 2013, while the adults aged 15 years and above account for 92%. With an epidemic that has existed for more than two decades, there are 3,385 infections estimated among population aged 50 years and above (8.3%). By sex, males account for two-thirds (66%) of the infections and the remaining more than one-third (34%) of infections are in females, out of which around 92.2% are in the reproductive age group of 15-49 years (**Error! Reference source not found.**). The male to female sex ratio of total infection came down from 2.15 of 2006 to 1.95 for the year 2013 and projected to be 1.86 by 2020.

Among the KAPs of HIV aged 15-49, the HIV infections are distributed as justify heterosexual transmission is the major routine of transmission in the total pool of HIV infection in Nepal. The contribution from all bands of KAPs are similar in the while period of projection 1995- 2020, only the level is varying.



In 2013, about half of total infections are distributed among KAPs as PWID (7.1%), MSWs, TG and their clients (11%), other gay men who do not sell and buy sex (12.2%), FSWs (1.7%), clients of FSWs (3.2%) and male labor migrants (16.3%). Another half of the infections are occurring among low risk remaining male and female populations, as these populations have accounted for 18.5% and 30% respectively (Error! Reference source not found.). The estimated number of annual AIDS deaths of all ages is estimated to be around 3,362 for 2013.

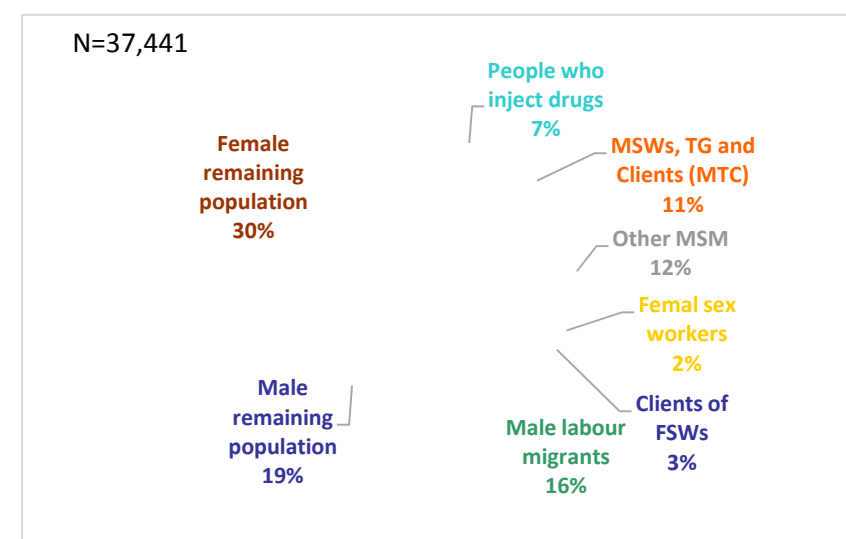
Figure 4: Distribution of HIV infections among key affected populations in Nepal, 1985-2020



Source: NCASC 2013

Apart from ministries, a number of District Development Committees (DDCs) have been allocating resources for the issue of HIV including for maintenance of human resources of DACC and HIV focal person for many years. Many Village Development Committees (VDCs) particularly of Far West and Mid-West have also contributed their resources for the wellness of families affected by HIV. Civil societies have also played pivotal roles in the national response. Civil societies, through

Figure 5: Distribution of HIV infection among key affected populations in 2013



Source: NCASC 2013

empowerment of KAPs, have been playing instrumental roles in prevention, treatment care and support as well as bringing about changes in legal and policy environment through advocacy.

The national response to HIV in Nepal is equally supported by external development partners by providing a substantial amount of resources required for combating HIV. The Global Fund, bilateral agencies, namely United States Agency for International Development (USAID) and Germany's Agency for International Development (GIZ), UN agencies, pooled fund partners of NHSP-II (the World Bank, Department for International Development (DfID), Australian Agency for International Development (AusAID), KfW through

Sector Wide Approach (SWAp) on HIV/AIDS and INGOs are the external sources that are contributing to the national HIV response.

2: Policy Environment and Progress in National HIV Response

2.1 Introduction

More than two decades of the HIV epidemic has transpired Nepal to respond with a number of policy initiatives. These policy responses have come cross cuttingly from the health sector as well as other development sectors aiming at creating an enabling policy environment for the containment of HIV as well as mitigation of the epidemic. Notable policy developments taken for guiding the national response to HIV are spelled out here.

The National Policy on HIV and STI, 2011

The National Policy on HIV and STI, 2010 accords HIV and AIDS a high priority in the national development issues. It emphasizes for a multi-sectoral, decentralized and inclusive response based on “three ones” principle that premises upon: a) “One agreed HIV/AIDS Action Framework” that provides the basis for coordinating the work of all partners, b) “One National AIDS Coordinating Authority”, and; c) “One agreed country level Monitoring and Evaluation System”. Thus it is through this adherence to the “three ones” principle the nation strives to achieve joint effort and partnership between government, non – government, private sector and civil society.

The National Health Sector Plan (NHSP II 2010-2015)

The National Health Sector Plan (NHSP II 2010-2015) embraces a plan to halt or reverse the HIV prevalence and it is also committed to scale up HIV related intervention through the health sector under the essential health care package within the broader framework of communicable diseases. It has also recognized the need to scale up sexual and reproductive health (SRH) services and integrate HIV into SRH services.

National HIV /AIDS Strategy 2011-2016

The current National HIV /AIDS Strategy (2011-2016), the fourth national strategy, with the aim of meeting the national goal of achieving universal access to HIV prevention, and; treatment care and support, has set the three objectives: i) to reduce HIV infections by 50% by 2016, ii) to reduce HIV-related deaths by 25% by 2016, and; iii) to reduce new HIV infections in children by 90% by 2016. The current National Strategy embraces two critical programme strategies: i) HIV prevention and ii) treatment care and support for infected and affected. Apart from these programme strategies, four major cross cutting strategies; namely: i) health system strengthening, ii) legal reform and human rights, iii) community system strengthening; and iv) strategic information have been built into this current National HIV/AIDS to ensure the achievement of programmatic outcomes. This National Strategy subscribes to the guiding principles of universal access, right-based approach, meaningful involvement of people living with HIV, and multi-sectoral response.

Other Sectoral Plan and Policies

A number of sectoral plans and strategies such as Education for All, School Sector Reform Plan (2009-2015) and National Youth Policy have envisaged their complementary roles in an effective national response to HIV. Several other policies; notably National Policy on HIV in the Workplace (2007) and National Drug Control Policy (2006) have reinforced the national HIV response working together with that National Strategy (2011- 2016). These apart, enactments of the 2006 Gender Equality Act, and the 2007 Human Trafficking and Transportation (Control) Act have also yielded reinforcing impacts in the ushering of an inclusive environment to guide the national response to HIV.

Key Guidelines and Documents

With the aim of effective implementation of the national response, a number of national guidelines also have been put into operation. These include The National ART Guidelines 2012, National Guidelines on Monitoring and Evaluation of HIV Response in Nepal, 2012, National Guidelines for Early Infant Diagnosis 2012, National Guidelines for Prevention of Mother to Child Transmission (PMTCT) 2011, National Guidelines for HIV Testing and Counseling (HTC) 2011, and National Guidelines of Case Management of

Sexually Transmitted Infections (STIs) 2009.

2.2 Policy related activities/highlights from FY070/071

Moving along the lines of National Strategy (2011-2016), a couple of milestone activities have been taken in this fiscal year that helped ensure the national HIV response is abreast with the latest scientific advancements as well as fine tuned to the latest dynamics of HIV in the country. These milestones are (a), Nepal HIV Investment Plan (NHIP 2014-2016) and (b) the Midterm Review of Implementation toward achieving objectives of National HIV/AIDS Strategy, (2011-2016). Though the Midterm Review of National Strategy was not a policy initiative by any means but it fed into NHIP. This apart, following the recommendation of the Midterm review, aiming at elimination of mother to child transmission, Nepal takes a major transformative measure this fiscal year and adheres to Option B+ for providing lifelong ART for all identified pregnant women and breastfeeding mothers with HIV, regardless of CD4 along with prophylaxis treatment for their infants as well.

Nepal HIV Investment Plan 2014-2016 (NHIP 2014-2016)

Built on the principles of UNAIDS' Investment Framework and that of National Strategy 2011 -2016, the Nepal HIV Investment Plan, 2014-2016 serves as a compelling case for strategic investments in Nepal's response to HIV. With the inclusion of a three year operational plan and budget, NHIP will guide the implementation of National Strategy, 2011- 2016 for the period of 2014 -2016. This NHIP aims to ensure that the resources are concurrent with Nepal's HIV program objectives and goals, and contribute to the effectiveness and efficiency of the entire national HIV response.

Other Key Guidelines

During the Fiscal Year of 2070/71, National guidelines on a monitoring system for HIV Drug Resistance (HDR) Early Warning Indicators 2013 (EWIs) have been prepared and put into operation. Similarly, the operational guidelines for the DACC have been updated and enforced for implementation with the intent of generating a strong effective and coordinated local response to HIV. This apart, a single and comprehensive document of consolidated guidelines - encompassing treatment care and support, HIV testing and counseling (HTC) and PMTCT, is being prepared under the leadership of NCASC with support of other organizations such as World Health Organization (WHO), UNICEF and Saath-Saath Project.

3: HIV Testing and Counseling and STI Management

3.1 Introduction

Pursuant to its goal of achieving universal access to prevention, treatment care and support, HIV Testing and Counseling (HTC) has been a strategic focus in the national response to HIV ever since Nepal started its response to HIV. The first ever HTC was started in 1995 with the approach of voluntary Client-Initiated Testing and Counseling (CITC). Moving further from its previous approach of voluntary CITC, the national HIV testing and counseling program has been later widened to include Provider-Initiated Testing and Counseling (PITC), as well as CITC as crucial components of the nation's fight against HIV. With the expansion of HTC sites across the country, there has been parallel development. National Guidelines on HTC was formulated in 2003 and updated in 2007, 2009 and 2011. Human resources for HTC have been trained for public health facilities as well as NGOs-run HTC sites.

Along with HTCs, detection and management of Sexually Transmitted Infections (STIs) has been also a strategic focus and integral part of the national response to HIV ever since Nepal started its response to HIV. Over the years, STI clinics have been operating across the country maintaining their linkage to KAPs on the basis of the National STI Case Management guideline which was developed in 1995 and also revised in 2009.

3.2 Key strategies and activities

HIV Testing and Counseling

The National Strategy (2011 -2016) envisions rapid scaling up of testing services and mobile HTC services in a non duplicated manner in targeted locations in a cost effective way to ensure maximum utilization with strong referral linkage to higher level for treatment, care and support. The National Strategy further foresees that the public health system will gradually take up HIV testing and counseling as integral part of the government health care service by 2015.

Pursuant to key actions of the National Strategy, the Government of Nepal is promoting the uptake of counseling and testing among KAPs through targeted communications and linkages between community outreach and HTC. Likewise Provider-Initiated Testing and Counseling (PITC) has been taken to STI clinics, antenatal Clinic (ANC), child birth, post partum, Family Planning, and TB services. Thus in this context, the national response, over the years, has seen an expanding coverage of HTC with HTC severing as an entry point to:

- Early access to effective medical care (including ARV therapy, treatment of opportunistic infections (OIs), preventive therapy for tuberculosis and other OI and STIs;
- Reduction of mother-to-child transmission of HIV;
- Emotional care (individual, couple and family);
- Referral to social support and peer support;
- Improved coping and planning for the future;
- Normalisation of HIV in society (reduction of stigma and discrimination);
- Family planning and contraceptive services; and
- Managing TB/HIV co-infection.

Detection and Management of STI

In the context of detection and management of STI, the standardization of quality STI diagnosis and treatment up to health post and sub health post level as a part of primary health care services has been a key strategy in the national response to HIV. This strategy further foresees standardization of syndromic approach with the referral for etiological treatment when needed.

Strengthening documented linkages (referral of follow up mechanisms) between behavioral change communication (BCC) services and HIV testing and counseling, including strengthening of linkage between HTC and STI services has been one of key actions in the context of the concentrated epidemic of Nepal.

3.3 Progress and Achievement

HIV Testing and Counseling

Currently there are 263 HIV Testing and Counseling sites that include 133 non-government sites and 130 government sites operating in the country also maintaining their forward linkages with KAPs as well as backward linkages with ART sites as well as PMTCT sites. Programmatic data from NCASC shows an increasing trend of people who were tested and counseled over the last three years (Table).

Table1: Service Statistics HIV Testing and Counseling for the period of BS 2068/69 -2070/71

Indicators	2068/69	2069/70	2070/71
Total Pre test counseled	244,258	288,127	298,936
Total tested for HIV	228,561	272,926	297,840
Total Positive reported	2,340	2,411	2,223
Total Post test counseled	218,851	264,209	276,423

3.4 Key challenges/Issues and recommendations

Issues	Recommendations
Low HIV testing coverage among KAPs has been a long standing challenge in the response to HIV. The problem of low coverage is most prominent for the returning labor migrants among all KAPs.	Effective roll out of Community-led HIV Testing and Treatment Competence (CTTC) approach with strong monitoring should be in place. Provide testing facilities at transit points as well as destinations of migrant population.
Not only inadequate but also inappropriately located HTC sites in many districts.	Scale up HTC sites and also try to ensure access to HTC for the population of remote parts of districts.
Inadequate staff members especially of trained HIV counselors in government setting specially in PMTCT site.	Ensure adequate trained HIV counselors in a sustainable manner in all relevant service sites.
Consistently zero counseled and tested in among some service sites over the years.	Conduct a review for viability of such sites.

4: Prevention of Mother to Child Transmission

4.1 Introduction

Nepal started its Prevention of Mother to Child Transmission (PMTCT) program in 2005 with setting up three of sites at: 1) B. P. Koirala Institute of Health Science (BPKIHS), Dharan; 2) Maternity Hospital, Kathmandu and; 3) Bheri Zonal Hospital, Nepalgunj. Moving further in this direction, apart from the free provision of maternal ART and prophylaxis for infants, the National Guidelines on PMTCT have been developed and updated periodically. Human resources especially from maternal and child health care have been trained in alignment with PMTCT services. Along with that the preparation and updating of training manuals have taken place. This apart, HTC has been incorporated into maternal and child health care in the form of PITC. Tailoring to the needs of HIV infected infants as well as HIV exposed babies; counseling and information on infant feeding have been adjusted accordingly.

4.2 Key strategies and activities

Taking Mother-to-Child Transmission (MTCT) is a potentially large source of HIV infections in children in Nepal into consideration, National Strategy, aims at reducing 90% of new infections among children by 2016 compared to the baseline value of 2010. In the cognizance of a very low coverage of PMTCT, the current National Strategy envisages the PMTCT programme to be integrated and delivered through Reproductive Health (RH) and Child Health Services. The National Strategy also foresees the integration of PMTCT into RH Programme placing it under the aegis of Family Health Division (FHD). The National Strategy has structured the PMTCT programme around the following comprehensive and integrated four prong approach:

- Primary prevention of HIV transmission
- Prevention of unintended pregnancies among women living with HIV
- Prevention of HIV transmission from women living with HIV to their Children, and
- Provision of Treatment, Care and Support for women living with HIV and their children and families.

Pursuant to the last two elements of the four prong approach, a package with the entailment of the following services are being provided to pregnant women:

- HIV testing and counseling during ANC, labour and delivery and postpartum
- Provision of ARV drugs to mothers and infected with HIV infection
- Safer delivery practices
- Infant feeding information, counseling and support, and
- Referrals to comprehensive treatment, care and social support for mothers and families with HIV infection.

With the collaboration of community based organization, the government of Nepal launched Community-based Prevention of Mother to Children Transmission (CB-PMTCT) program in 2009 taking PMTCT services beyond hospitals and making the services accessible to pregnant women living in remote areas. The CB-PMTCT program, drawing the leverage of community support, has found to have increased ANC coverage as well as HTC uptake among pregnant women (UNICEF 2012). CB-PMTCT programme have been implemented in Achham, Kailali, Sunsari, Baitadi and Bajhang districts.

Apart from CB-PMTCT program, adhering to the key actions envisaged by the National Strategy, the country is scaling up PMTCT service synchronizing with planned ART, HTC /STI, OI services for ensuring access to continuum of care and ART to pregnant women with HIV. Furthermore, linkages have been established between PMTCT sites and KAP targeted intervention, Family Planning, SRH and counseling services.

4.3 Progress and Achievement

Pursuant to its commitment of reducing 90% of new infections among children by 2016 compared to the baseline value of 2010, Nepal has scaled up its PMTCT services in recent years. These services are now

offered at 95 sites in 45 districts across the country. As a result of this scale up of PMTCT sites, the number of women attending ANC and labour who were tested and received results has increased over the years. Despite this relative increase in uptake, the coverage for PMTCT is low, and stands at around 20.9% for the year 2013. During the entire reporting period of 2070/71, a total of 198 pregnant women received ARV prophylaxis (Table 6).

Table 2: Service Statistics on PMTCT in Nepal for the period of BS 2068/69 -2070/71

Indicators	2068/69	2069/70	2070/71
Pre-test Counseled (ANC & Labour)	139,421	146,309	166,618
Tested for HIV (ANC & Labour)	129,069	137,561	163,220
HIV Positive Pregnant women	179	153	116
Total Deliveries by HIV +ve mothers	123	125	131
Mothers received prophylaxis and ART	96	125	142
Babies received prophylaxis	233	199	198

(Source: NCASC, 2014)

Aiming at the elimination of mother to child transmission, Nepal taking a major transformative measure this fiscal year, adheres to Option B+ and embarks for providing lifelong ART for all identified pregnant women and breastfeeding mothers with HIV, regardless of CD4 along with prophylaxis treatment for their infants as well. The roll out of the lifelong treatment adds the benefits of triple reinforcing effectiveness to the HIV response: (a) help improve maternal health (b) prevent vertical transmission; and (c) reduce sexual transmission of HIV to sexual partners.

Early Infant Diagnosis (EID)

Initiatives for Early Infant Diagnosis (EID) of HIV in infants and children below 18 months of age have been taken with the goals a) of identifying infants early in order to provide them lifesaving ART; and b) of facilitating early access to care and treatment in order to reduce morbidity. In this context, a Deoxyribonucleic Acid (DNA) Polymerase Chain Reaction (PCR) testing facility has been set up at National Public Health Laboratory in Kathmandu. With this, as of end FY 2013/14 there were 6 sites including 5 sites supported by USAID-funded SSP providing EID service in Nepal. This was complemented by the development of a training package on preparation of Dried Blood Sample (DBS).

4.4 Key challenges/Issues and recommendations

Issues	Recommendations
Inadequate laboratory personnel in PMTCT sites.	Ensure trained and adequate workforce in a sustainable manner
Inadequate PMTCT sites as a result all ANC, delivery and Postnatal Clinic (PNC) attendees are not getting tested for HIV.	PMTCT sites should be expanded to adequate number of birthing centres in districts to capture more ANC attendees.
Reluctancy to deliver cases because of tendency to refer the cases to other centres due to inadequate knowledge regarding PMTCT.	Training and awareness program to staff nurse and medical doctors should be enhanced.

5: HIV Treatment, Care and Support Services

5.1 Introduction

With a primary aim to reduce mortality among HIV-infected patients, the government, in 2004, started giving free ARV drugs in a public hospital and that was followed by the development of first ever national guidelines on ARV treatment. Since then a wide array of activities have been carried out with the aim of providing Treatment Care and Support services to People Living with HIV (PLHIV). Along with the periodic updating of guidelines including on 2012, ART sites have been set up increasingly across the country. This apart, necessary diagnostic and treatment related infrastructures such as CD4 machines and viral load machines have been set up in different parts of the country for supplementing ART management program. Human resources have been trained for Treatment, Care and Support in parallel with the preparation and updating of training guidelines. People Living with HIV have been empowered aiming at enhancing their supplementary roles in Treatment, Care and Support. And a monitoring system for tracking treatment adherence has been put in place.

5.2 Key strategies and activities

The present National Strategy has envisaged a comprehensive set of activities for Treatment Care and Support. Apart from optimizing HIV treatment and care for children, adolescents and adult with the provision of ART, the National Strategy also includes the following major activities: a) preventing HIV related illness, b) managing HIV related co-infections, d) providing Community and Home Based Care (CHBC) for PLHIV, e) provision of community care center and social care unit; and f) social protection for CABA.

With the intention of drawing more people into the bracket of treatment and thereby leveraging the benefits of treatment as prevention, NHIP (2014- 2016) in alignment with UNAIDS' 'Treatment 2015' and the WHO HIV Treatment Guidelines, June 2013 (with Update in March 2014), envisages Antiretroviral Treatment for all population groups that have been identified in Nepal as being key affected, regardless of CD4 count, and for these persons to remain on treatment. In this context, NHIP has further widened eligibility for ART enrollment based on WHO Treatment Guidelines 2013 and also has foreseen a scaled up HIV Testing initiative through a Community-led HIV Testing and Treatment Competence (CTTC) approach. With the overarching goal of reducing the AIDS-related deaths by 25% by 2016 compared to the baseline of 2010, the National Strategy foresees key actions that include but not limited to: a) scaling up ART services to targeted districts and selected Primary Healthcare Centers (PHCs) and teaching Hospitals, b) strengthening national capacity for Adult and Paediatric Treatment, and; c) establish linkages and integration among the HIV services and other health services for quality HIV prevention, treatment and monitoring of treatment adherence, d) provision of adherence support program through community based organizations in order to increase uptake of the ART and activities like treatment literacy education etc., e) provide Cotrimoxazole prophylaxis, f) establish and strengthening linkages among TB center and HTC, PMTCT and ART sites., g) expand and roll out TB/HIV program. In the context of these key actions, in addition to the free-of-cost highly affective antiretroviral therapy, HIV-infected patients are offered care package including clinical follow-up monitoring; nutrition support; and TB screening along with Isoniazid Preventive Therapy (IPT). Moreover, there is a community and home-based care (CHBC) component which includes primary care of PLHIV by trained CHBC workers at homes and community settings aiming for positive living, reducing stigma and discrimination, and supporting for continuity and adherence to ARV.

5.3 Progress and Achievement

By the end of 2013, out of 8,860 of those who were on ART, there were only 1,086 PLHIV with their viral load suppressed (Figure). The total cumulative number of PLHIV receiving ART by the end of fiscal year 2070/2071 has reached the figure of 9818. Over the years, there have been gradual increases in the number of people enrolling themselves on ART as well as receiving ARVs (Table7). The number of people who were on ART has increased from 8,546 of 69/70 to 9,818 in 070/71.

Out of those who are currently on ART, 92% are adults and remaining 8% are children, while male population makes 53%, female population 47.6%, and remaining 0.3% are of third gender.

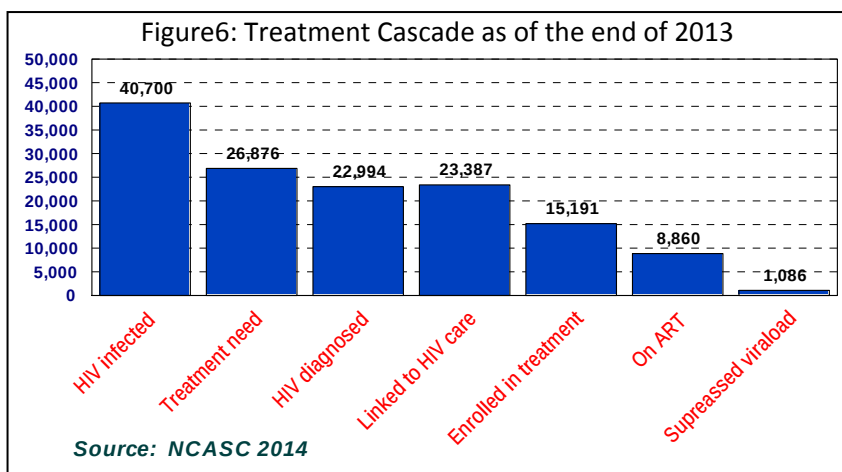


Table 3: ART Profile of the period of FY068/69-FY 70/71

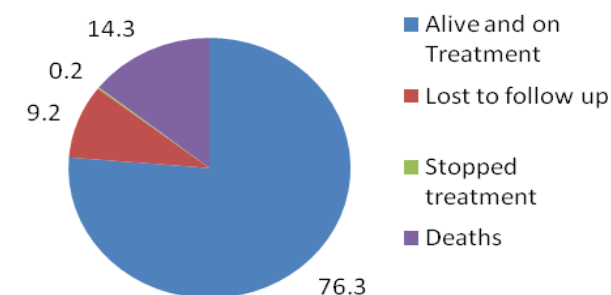
Indicators	2068/69	2069/70	2070/71
People living with HIV ever enrolled on ART (cumulative)	9,246	11,091	12,898
People with advanced HIV infection receiving ARVs (cumulative)	7,142	8,546	9,818
People lost to follow up (cumulative)	908	1,055	1,216
People stopped treatment	11	27	30
Total deaths (cumulative)	1,185	1,463	1,834

Report from a total of 52 ART sites across 45 districts for the fiscal year 2070/71, shows that 14.3% of those ever registered on ART died and 9.2% have been lost to follow-up, while 76.3% are alive on treatment. Furthermore, 0.2% people have stopped treatment.

The Program data showed that of all the patients ever registered on ART, 83.7% were still actively on ART after 12 months while 83.4% were still actively on ART after 24 months of treatment. With the aim of supplementing the ART management program, 18 CD count machines across 18 different ART sites are operating along with each viral load testing machines. These apart, portable CD4 counting machines have been placed in hilly district of western, mid-western and far western districts of Nepal to provide timely CD4 count service to monitor ARV effectiveness that lead to support PLHIV to sustain quality and comfortable life. With the purpose of aiding diagnosis of HIV among children below 18 months of age, Deoxyribonucleic Acid (DNA) Polymerase Chain Reaction (PCR) testing Machine placed at the National Public Health Laboratory in Kathmandu.

Figure7: Outcomes of ART Programme in Nepal

Outcomes of ART Programme in Nepal as of July 2014



Strong bidirectional referral linkages between Community Care Centers (CCCs), Community Home-Based Care (CHBC) System and ART sites to facilitate the quality of ART services, especially in ensuring adherence and follow up of PLHIV on ART and HIV-positive mothers and infected and exposed babies, have played important roles in enhancing ART coverage as well as maintaining this level of retention to ART. As of 2070/71, a total of 9,783 have received CHBC services (Table 8). In the same context 58 CCC across the country have been delivering their services to PLHIV (Table 9).

Table 4: Service Statistics on CHBC Services in Nepal, as of the end of FY 2070/71

Indicators	Numbers
Number of PLHIV received CHBC services	9,783
Number of PLHIV referred for ART management	3,149
Number of PLHIV referred for management of opportunity infections	1020

Table 5: Service Statistics on CCC Services in Nepal as of the end of FY 2070/71

Indicators	Numbers
Number of CCC sites in Nepal,	58
Number of PLHIV received psycho-social counseling support	4,376
Number of PLHIV received nutritional support	3,979
Number of PLHIV receiving ART admitted to CCC	3,340
Number of PLHIV referred for management of opportunity infections	2,051

5 Key challenges/Issues and recommendations

Issues	Recommendation
Low access to CD4 Count and Viral Load machines	There need to be reliable and consistent access to viral load testing and CD4 count. Even in Kathmandu only one viral load facility available and have to think about expanding.
Lost or deteriorating medical records(Recording and Reporting)	Start an electronic record keeping system with backup capability. In addition, creating a client coding system would facilitate improved record keeping and continuity when clients are transferred-in or transferred-out.
Poor supply of OIs medicines as per demand	provide consistent supply of OIs medicines that are supposed to be provided according to the program.
Inadequate financial support for the clients	The PLHIVs face financial problems but there is not sufficient government support to pay for medical care and treatment. So government thinks to do some mechanism for the support.
Inadequate training and staffs working in the clinic	Frequent and updated HIV ART related training and regular monitoring of the staffs to follow according to the national recommended guidelines. And also there should be enough staffs for smooth running of the program.
Poor Monitoring and Supervision of the ART Programs	regular and frequent monitoring and supervision to all ART Centers for the effectiveness and efficient running of the program(Site by site visit)

4.11 Eye Care

4.11.1 Background

The eye care programme in Nepal was very rudimentary 3 decades ago. There were only 7 ophthalmologists in the whole country at that time, mostly based in Kathmandu, the capital city for approximately 16 million populations.

In 1974, with public support, country's first eye hospital: "Nepal Eye Hospital" in Kathmandu was established. After 1978, many international organizations start taking interest to support eye care programmes in Nepal and resulted in the establishment of the Nepal Prevention and Control of Blindness Project, in joint collaboration of His Majesty's Government of Nepal and the World Health Organization (WHO). The project conducted a nationwide blindness survey as an initial bench mark for National eye care programme of the country in 1981.

The Nepal Blindness Survey of 1981 showed a prevalence of blindness of 0.84 %, a significant public health problem in the country. In those aged 45 years and older the percentage was 3.77. The major cause of blindness was cataract: 83% among those > 45 years (65.4% among all ages). 80% of this blindness was avoidable and 90% blind were residing in the rural areas of the country.

Government eye care infrastructure and human resource was not capable enough to cope with this huge magnitude of blindness. A drastic measure was the urgent need to combat the huge backlog of blindness - thus support from various national and international organizations was solicited to develop appropriate eye care systems in the country.

Nepal Netra Jyoti Sangh (National Society for comprehensive eye care), a non-governmental organization, was the pioneer organization to take this lead. Nepal Netra Jyoti Sangh (NNJS) established in 1978 with the aim to create extensive eye care network in the country.

A geographical sector wide approach was adopted and all supporting International NGOs were delegated the responsibility to develop specific programme objectives, based on the 1981 survey results. NNJS established primary, secondary and tertiary eye care in those areas of the country with the greatest need. The programme simultaneously implemented a strategy of training eye care professionals at all levels to staff the hospitals and clinics as they become operative.

Later in 1993 Tilganga Institute of Ophthalmology joined in this campaign against the blindness in Nepal. Other NGOs presently involved in eye care services of Nepal are the Lions Clubs and Nepal Red Cross Society.

Nepal entered in to the WHO initiative global campaign of Vision 2020 in 1999. An Apex body for eye health was formed and government role was more focused in facilitating and monitoring the eye care service carried out by the NGOs.

Now the eye care services in the country have been expanded to all 75 districts in the country up to district level. There are 22 Eye Hospitals, Eye Departments of Medical Colleges, BP Koirala Institute of Health Sciences and BP Koirala Lions Center for Ophthalmic Studies and several private eye hospitals has been established and providing eye care services in the country.

The Rapid Assessment of Avoidable Blindness (RAAB) survey completed in 2012 showed that the prevalence of blindness has reduced to 0.35% compare to 0.84% in 1981. This is a momentous achievement of eye care services in Nepal. But present eye care service in the country is successful to pick up low hanging fruits, the people residing in accessible area, resistance cases and difficult cases that

required more sophisticated care are the remaining. Furthermore, the population has doubled in last three decades and the range of visual requirement has also increased in recent years. Therefore, we cannot wait any persons to become complete blind to restore his sight. The technology has also permitted to perform cataract surgery as soon as the patient has the visual complain, this was not possible two decades ago. All this factors will lead to increasing work load to the present eye care services in the country.

The cause of blindness has also been changed in recent years. In the past Cataract, Trachoma and nutritional causes used to be leading cause of blindness in the country. Now the nutritional cause and Trachoma are in decreasing trend, Cataract is still the leading cause of blindness and new causes such as Refractive Error, Glaucoma, Diabetic Retinopathy and blindness due to anomalies in posterior segment is emerging. These new emerging causes are more challenging in identification and the technology for its treatment.

Goal and Objectives:

To reduce the overall blindness below 0.2% among the visual acuity <3/60 and <0.4% among the visual acuity 6/60 by the year 2020.

4.11.2 Outputs for FY 2070/71 (2013/2014)

With all this opportunities and challenges the service output of the of the eye care services for the fiscal year 2070/71 are as given below table:

S.N.	Hospital Name	OPD	Surgery	OUTREACH	PECC	School Screening	Grand OPD
1	NNJS/Geta Eye Hospital, Dhangadhi	104,512	43,158	107,627		58,231	270,370
2	NNJS/Fatehbal Eye Hospital, Nepalgunj	95,075	11,254	7,870	2,893	925	106,763
3	NNJS/Chanda Kale Babu Eye Hospital, Kapilbastu	60,491	10,284	37,820			98,311
4	NNJS/Rapti Eye Hospital, Dang	41,104	2,993	4,357	5,412	11,693	62,566
5	NNJS/Lumbini Eye Institute, Bhairahawa	192,530	28,996				192,530
6	NNJS/Butwal Eye Hospital, Butwal	39,589	2,009				39,589
7	NNJS/Gulmi Eye Care Centre, Gulmi	9,932	991	1,410	12,682	20,547	44,571
8	NNJS/Palpa Lions Lacoul Eye Hospital, Palpa	15,062	157				15,062
9	NNJS/Himalaya Eye Hospital, Pokhara	87,657	3,138	24,092	46,828	14,367	172,944
10	NNJS/Kedia Eye Hospital, Birgung	101,340	17,198	1,033	9,091	366	111,830
11	NNJS/Gaur Eye Hospital, Gaur	81,353	12,515	1,828	4,937	1,900	90,018
12	NNJS/Bharatpur Eye Hospital, Bharatpur	78,324	5,797	1,848			80,172
13	Janaki Eye Hospital, Janakpur	83,748	11,050	8,599	19,045	1,931	113,323
14	NNJS/Sagarmatha Choudhary Eye Hospital, Lahan	162,867	53,979			2,143	165,010

Disease Control: EYE CARE

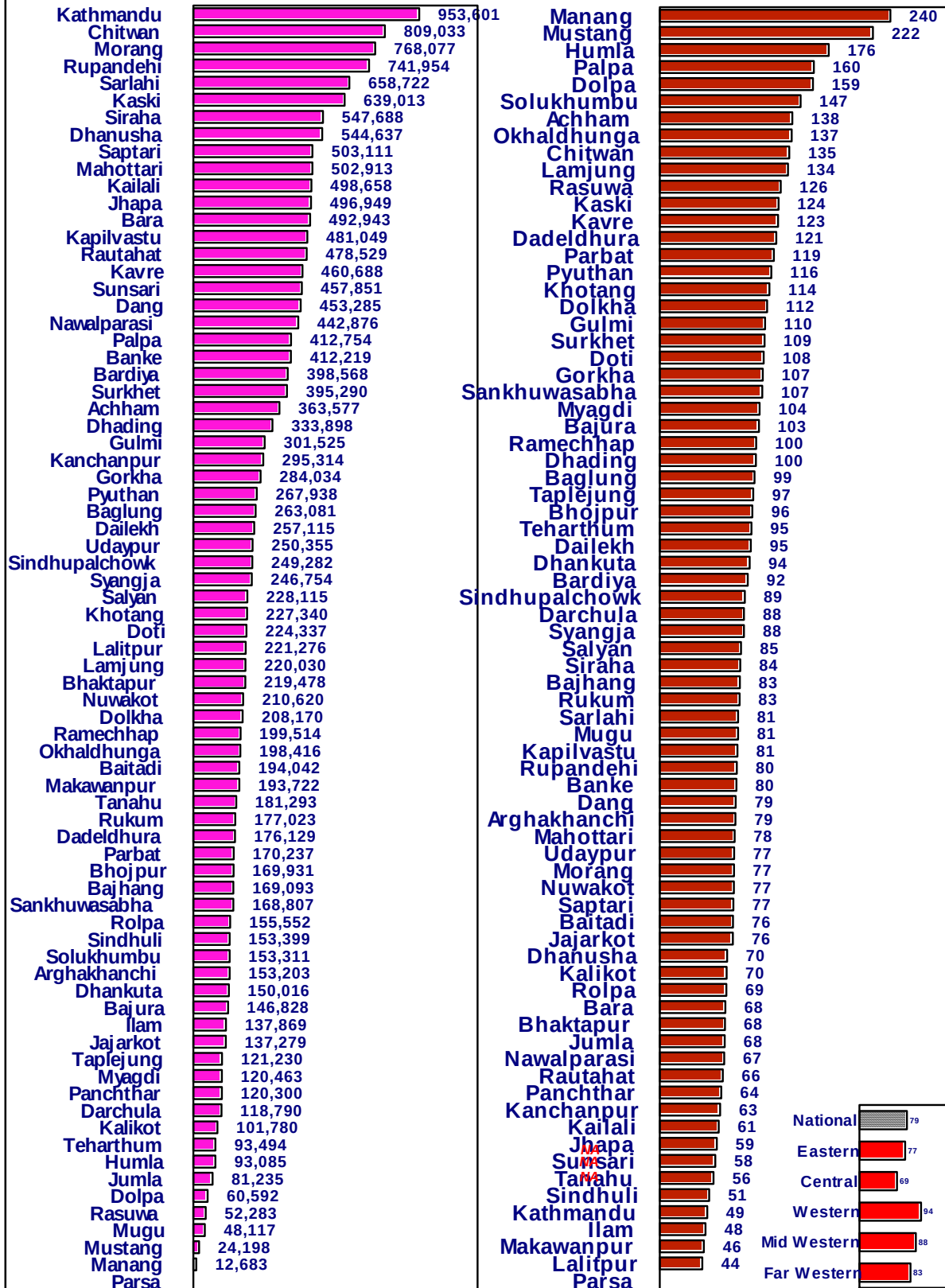
S.N.	Hospital Name	OPD	Surgery	OUTREACH	PECC	School Screening	Grand OPD
15	NNJS/Biratnagar Eye Hospital, Morang	222,457	49,664	9,580	4,948	18,847	255,832
16	Mechi Eye Hospital, Jhapa	148,363	23,189	3,367	8,450	11,916	172,096
17	Tilganga Institute of ophthalmology, Kathmandu	386793	30074				
18	Lions Eye Care Center, Birgung	32018	703	1787			
19	BPKIHS, Dharan	24822	620				
21	Birat Eye Hospital, Biratnagar	65797	15313				
22	Dristi Eye Hospital, Jhapa	11148	2103				
23	Birgunj Community Eye Centre, Birgunj	35729	3576				
24	Nepalgunj Eye Hospital, Nepalgunj	21616	730				
25	Nepal Eye Hospital, Kathmandu	89709	3614				
26	B.P.Koirala Lions Centre for Ophthalmic Studies, Kathmandu	114736	3134				
27	Department of Ophthalmology Army Hospital, Kathmandu	35324	270				
28	Mechi Netralaya, Jhapa	19863	3738				
29	Kakadvitta Eye Hospital, Jhapa	7700	588				
	Total	2,369,659	340,835				1,990,987

Morbidity

Fiscal Year 2070/71 (2013/2014)

Total OPD New Cases

OPD Total New Cases as % of Total Population



Source: HMIS

5. 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. The policy is aimed at providing prompt diagnosis and treatment, and referral of cases through the health network from community health facilities (PHCC/HP/SHP) to the specialised and central public hospitals. Likewise, diagnostic services and referral mechanisms at different levels has been established to support early and correct diagnosis of the problem.

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 destitute, poor, disabled, senior citizens, FCHVs, gender valiance and others up to 25 bedded district hospitals and PHCCs (December 15, 2006) and all citizens at Sub Health Post (SHP)/Health Post (HP) level (8 October, 2007).

Objectives

The overall objective of curative services is to reduce morbidity, mortality by ensuring early diagnosis of the diseases and providing appropriate and prompt treatment.

Strategies

- Curative health services will be made available in an integrated way in the rural areas through sub-health posts, health posts and primary health care centers.
- Hospitals will be established on the basis of population density and patient load ensuring at least one hospital in each district.
- Zonal and regional hospitals will be established to provide specialized services relating to pediatrics, gynecology, general surgery, general medicine, eye care, dermatology, orthopedics and psychiatry.
- The central hospital will be equipped with sophisticated diagnostic and other facilities to provide specialty and super-specialty services.
- Specialist curative care services will be extended to remote areas, as and when required, through mobile teams
- Referral system will be developed through which the rural population will be provided with the opportunities to obtain services from modern well equipped hospitals.
- Diagnostic services e.g. laboratory, x-ray, etc. will be strengthened in the hospitals.
- More frequent outreach clinics, options for relocating existing facilities
- Basic curative service as a component of EHCS will be provided free up to 25 bedded hospitals.
- Promote private medical colleges, hospitals, nursing homes and hospitals run by INGOs / NGOs and private practitioners as complementary to public facilities.

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 including Free Health Services as well.
- In-patient services were provided different level of hospitals including INGOs/NGOs, Private medical college hospitals, nursing homes, and private hospitals as per the report available.
- Medical camps were organised in different places especially in the remote districts.

5.3 Analysis of Achievement

Reporting Status:

A total number of 743 public and private hospitals were listed in Health Management Information System (HMIS) under Department of Health Services (DoHS) in fiscal year 2070/71. Out of 743 hospitals 102 (78.9%) public hospitals and 641 (10.3%) were private hospitals were reported to HMIS system in fiscal year 2070/71. (Table 5.3.1)

Table 5.3.1: Hospital reporting status, FY 2070/71

Region	No. of hospitals			Reporting status					
	Public	Private	Total	Public		Private		Total	
				N	%	N	%	N	%
Eastern	20	40	60	20	95.0	40	67.08	60	76.39
Central	30	557	587	30	65.83	557	3.95	587	7.11
Western	22	26	48	22	77.27	26	34.94	48	54.34
Mid western	17	9	26	17	93.63	9	22.22	26	68.91
Far western	13	9	22	13	67.95	9	64.81	22	66.67
National	102	641	743	102	78.92	641	10.26	743	19.68

Source: HMIS, DoHS

Tables 5.3.2 present the public and private hospital submitted their twelve month progress reports to HMIS system in fiscal year 2070/71. Public hospitals were submitted 85.7% and 26.0% from private hospitals submitted complete fiscal year monthly progress report during this reporting period. Nationally, private and public hospitals submitted only 14 percent monthly progress report from the month of Shrawan to Ashar to HMIS this year.

Table 5.3.2: Hospital reporting 12 months a year, FY 2070/71

Region	No. of hospitals			Hospitals reporting 12 months a year					
	Public	Private	Total	Public		Private		Total (Public + Private)	
				N	%	N	%	N	%
Eastern	20	40	60	19	95.0	13	32.5	32	53.33
Central	30	557	587	17	56.67	7	1.26	24	4.09
Western	22	26	48	17	77.27	2	7.69	19	39.58
Mid western	17	9	26	15	88.24	1	11.11	16	61.54
Far western	13	9	22	8	61.54	3	33.33	11	50.0
National	102	641	743	78	85.7	26	26.0	102	13.73

Source: HMIS, DoHS

CURATIVE SERVICES

Completeness of reports:

Table 5.3.3 present completeness of reporting from all level of public hospitals is assessed in terms of receipt of 12 months report in fiscal year 2070/71. The status of completed reporting was 79.6% of all levels of public hospitals.

5.3.3 Complete reporting from public hospitals, FY 2070/71

Type of public hospitals	Number of hospitals	12 months reporting		Number of reports		
		N	%	Total	Received	Complete (%)
Central	8	6	80.56	96	58	60.42
Regional	3	3	97.22	36	35	97.22
Sub regional	3	1	100	36	12	33.33
Zonal	10	9	98.15	120	106	88.33
District Hospital	62	58	98.85	744	688	92.47
District Level Hospital	16	8	78.13	192	75	39.06
National	102	85	95.49	1224	974	79.58

Source: HMIS, DoHS

Table 5.3.4 present the reporting status of different types of hospital in the fiscal year 2070/71. During the reporting period 9 hospitals submitted monthly progress report in regular basis among 36 hospitals. The completion reporting rate was 25.3% in the fiscal year 2070/71.

Table: 5.3.4 Status of complete report by types, FY 2070/71

Type of hospitals	Number of hospitals	12 months reporting		Status of complete report		
		N	%	Total	Received	Complete (in %)
Government (other ministry Central level) Hospital	4	0	0	48	0	0
Government (other ministry Regional level) Hospital	1	1	8.33	12	1	8.33
Government Teaching Hospital(other ministry)	2	0	0	24	0	0
Teaching Hospital (Autonomous) under MoHP	4	1	83.33	48	10	20.83
Private Teaching Hospital	14	3	91.67	168	33	19.64
Specialized hospital	6	0	0	72	0	0
Community hospital	5	4	97.92	60	47	78.33
Total	36	9	84.26	432	91	25.28

Source: HMIS, DoHS

Inpatient services

Inpatient services include services delivered through inpatient departments of the public and private hospitals. The findings presented in this section should be interpreted with caution because of limited reporting coverage of private and public hospitals.

Bed Occupancy

Bed occupancy rate in higher level government hospitals that submitted complete reports (12 months a year) have been assessed here. The highest 96.6% bed occupancy rate is in Mid-Western Regional Hospital Surkhet and lowest 1.8% in Bhaktapur Hospital in fiscal year 2070/71 (Figure 5.1).

Figure 5.1: Bed occupancy rate in higher level public hospital, FY 2070/71

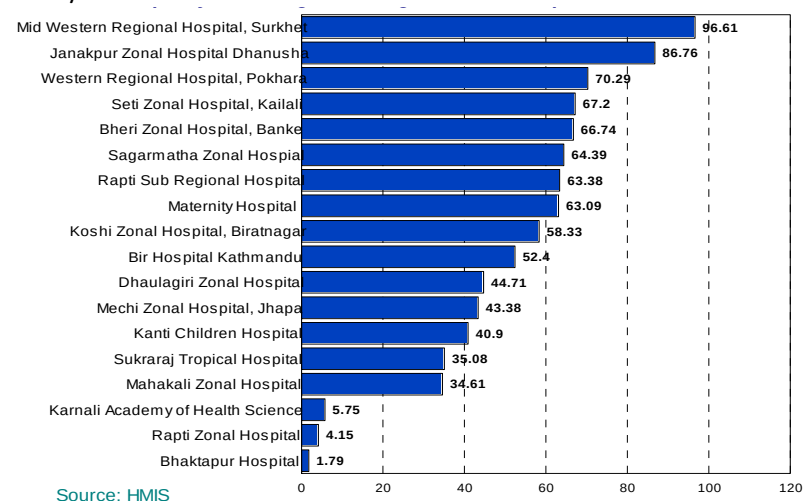
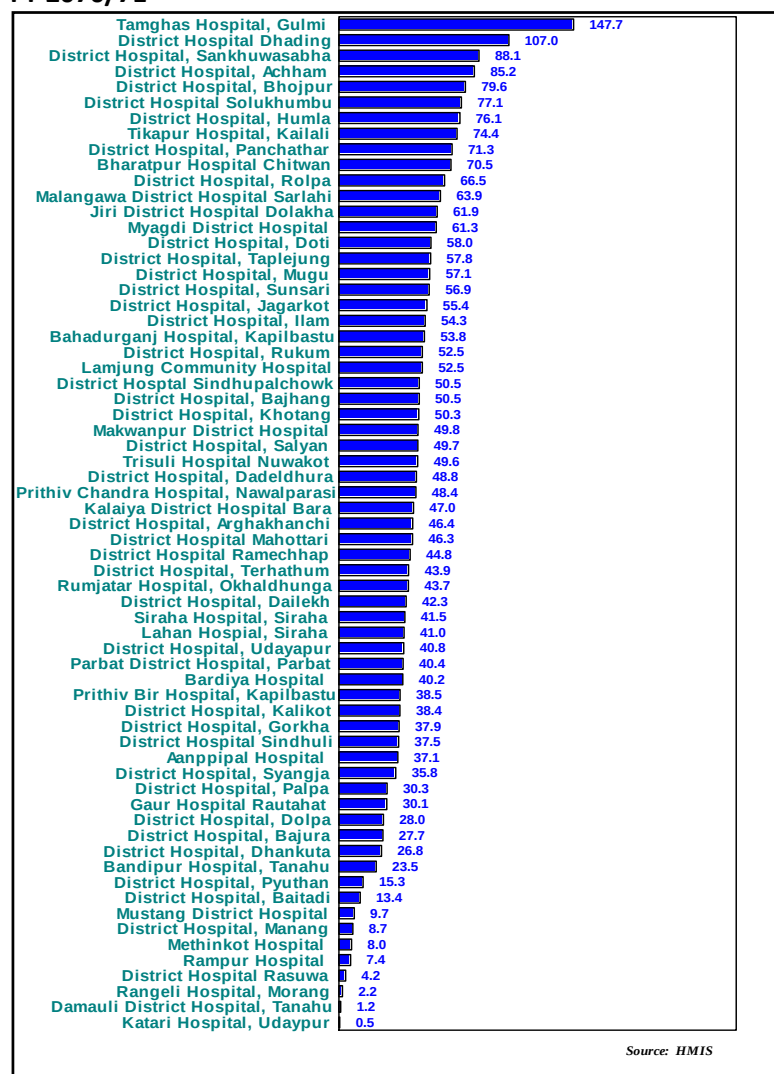


Figure 5.2: Bed occupancy for district and district level hospitals, FY 2070/71



Among the district and district level hospitals (upgraded), more than hundred percent Bed Occupancy Rate found in Tamghas Hospital, Gulmi (147.7%) and Dhading hospital (107.0%). The lowest occupancy rate 2.2% observed in Rangeli Hospital, Morang, followed by District Hospital, Damauli (1.2 %) and Katari Hospital, Udayapur (0.5%) (Figure 5.2).

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Average Length of Stay (LoS)

Average length of stay among the higher level government hospitals reported 8.48 days in Bir Hospital (Highest) and 0.37 day (lowest) in Rapti Zonal Hospital (Figure 5.3)

Figure 5.3: Average Length of stay in higher level hospitals, FY 2070/71

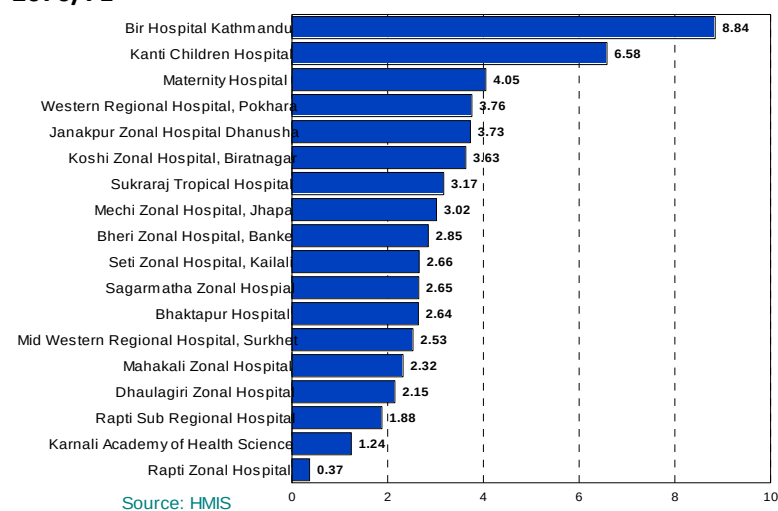
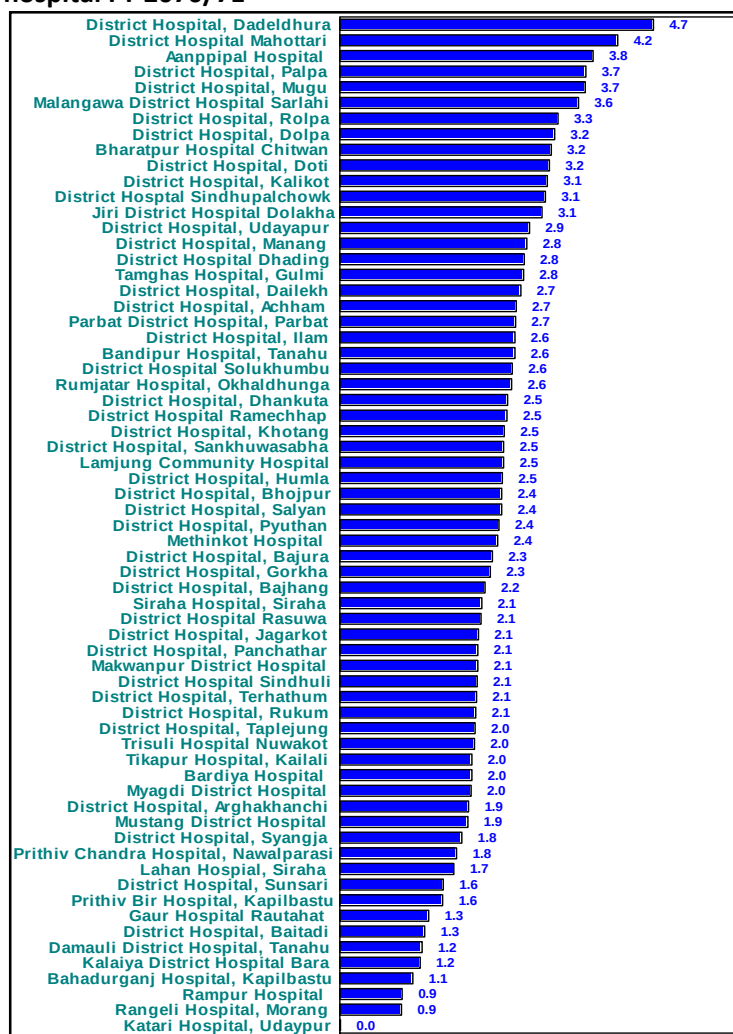


Figure 5.4: Average Length of stay in district and district level hospital FY 2070/71



Among the district and district level hospitals, Average Length of Stay was found highest in Dadeldhura District Hospital reported 4.7 days and lowest Rangeli Hospital, Morang reported 0.9 day. (Figure 5.4)

Hospital Utilization

Three basic measures of utilization (Emergency room attendances, total Out-patients and Inpatient admissions) were shown in below figure.

Emergency Ward Attendances among the higher level government hospitals, with 44,831 were attended in Bir Hospital, which were the highest patients of attendances among the other hospitals. The Central Jail Hospital has the lowest patients of attendances with 850 attendances only. (Figure 5.5)

Figure 5.5: Emergency Ward attendances (higher level hospitals), FY 2070/71

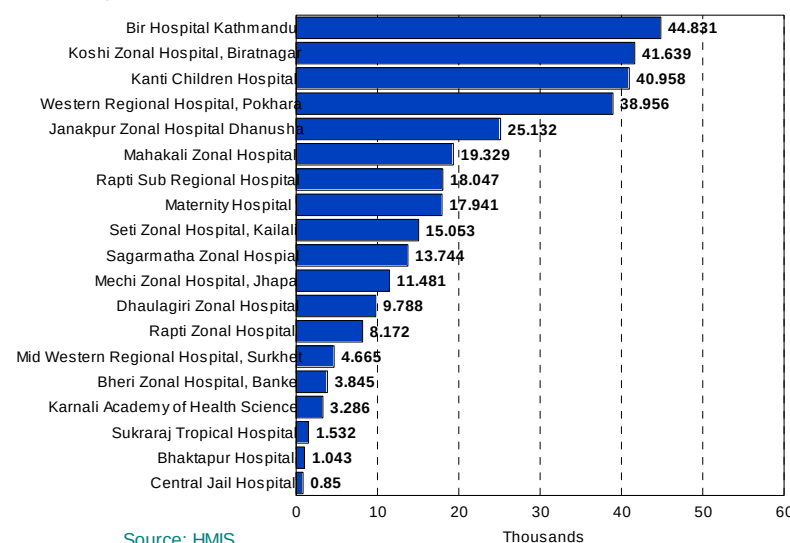
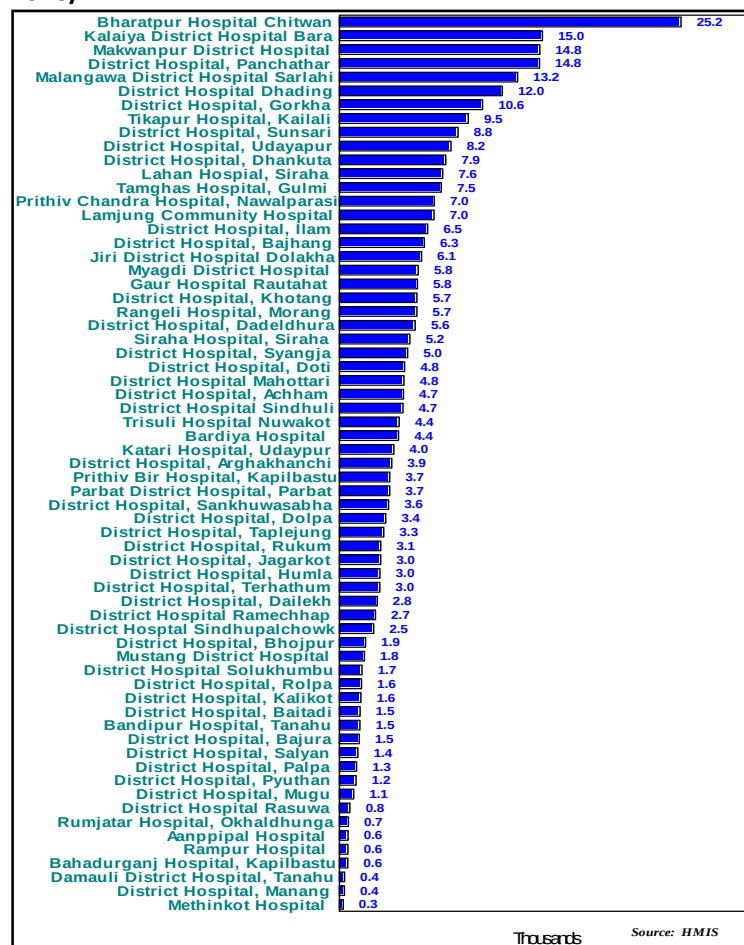


Figure 5.6: Emergency ward Attendances (district hospitals), FY 2070/71



Among the district and district level hospitals, with 25,200 patients were attended in Bharatpur Hospital, Chitwan has reported highest patients of attendances. Methinkot Hospital has the lowest cases of attendances with 300. (Figure 5.6)

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Figure 5.7 present Outpatient Attendances among higher level of public hospitals; Bir Hospital has the highest number of outpatient attendances with 289,520. Bhaktapur Hospital has the lowest cases of outpatient attendances with 5,612.

Figure 5.7: Outpatient attendances (higher level hospitals), FY 2070/71

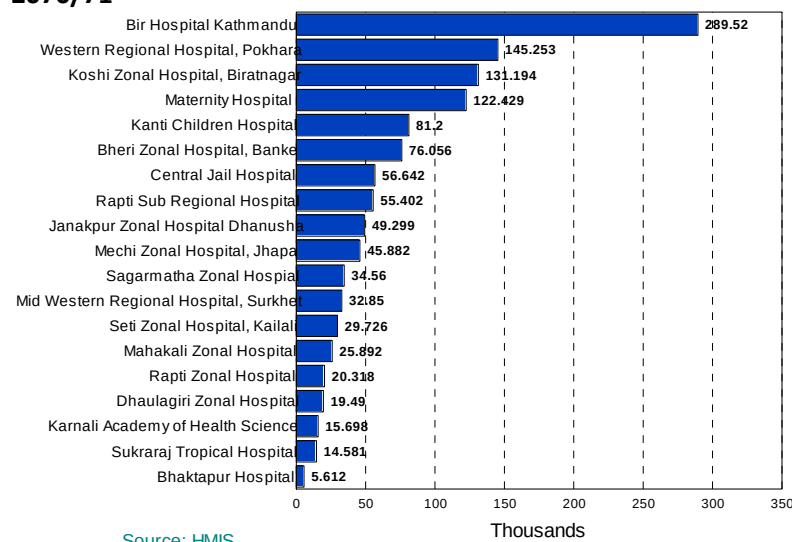
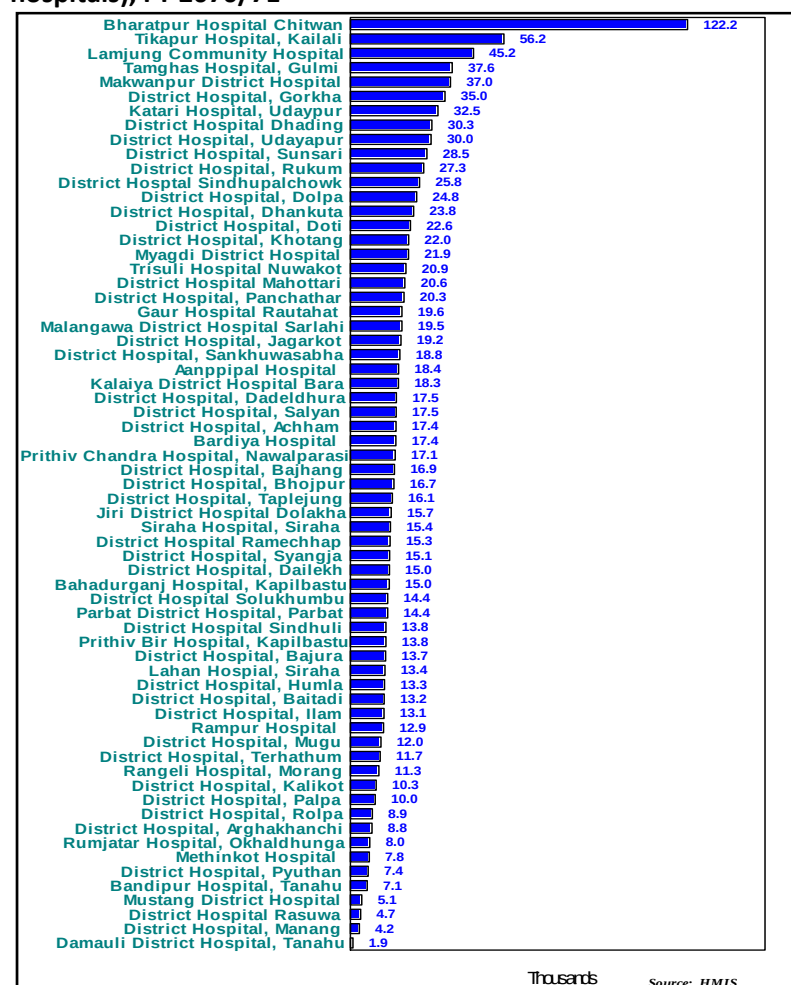


Figure 5.8: Outpatient attendances (district and district level hospitals), FY 2070/71



Among district and district level hospitals, Bharatpur Hospital, Chitwan has the highest patients of outpatient attendances with 122,200 and Damauli District Hospital, Tanahu has the lowest number of outpatient attendances with 1,900 (Figure 5.8).

Figure 5.9 present Inpatient admissions among higher level of public hospitals in fiscal year 2070/71. Maternity Hospital has recorded the highest patients of Inpatient Admissions with 237,759 patients.

Figure 5.9: Inpatient Admissions (higher level hospitals), FY 2070/71

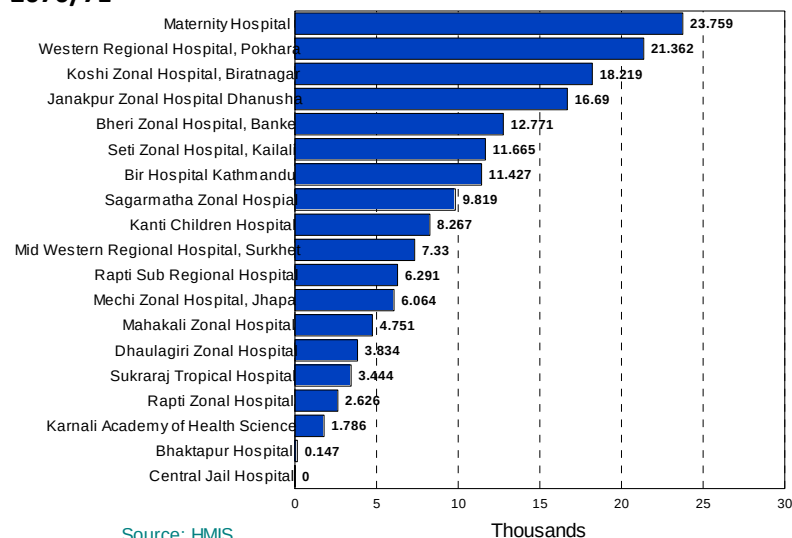
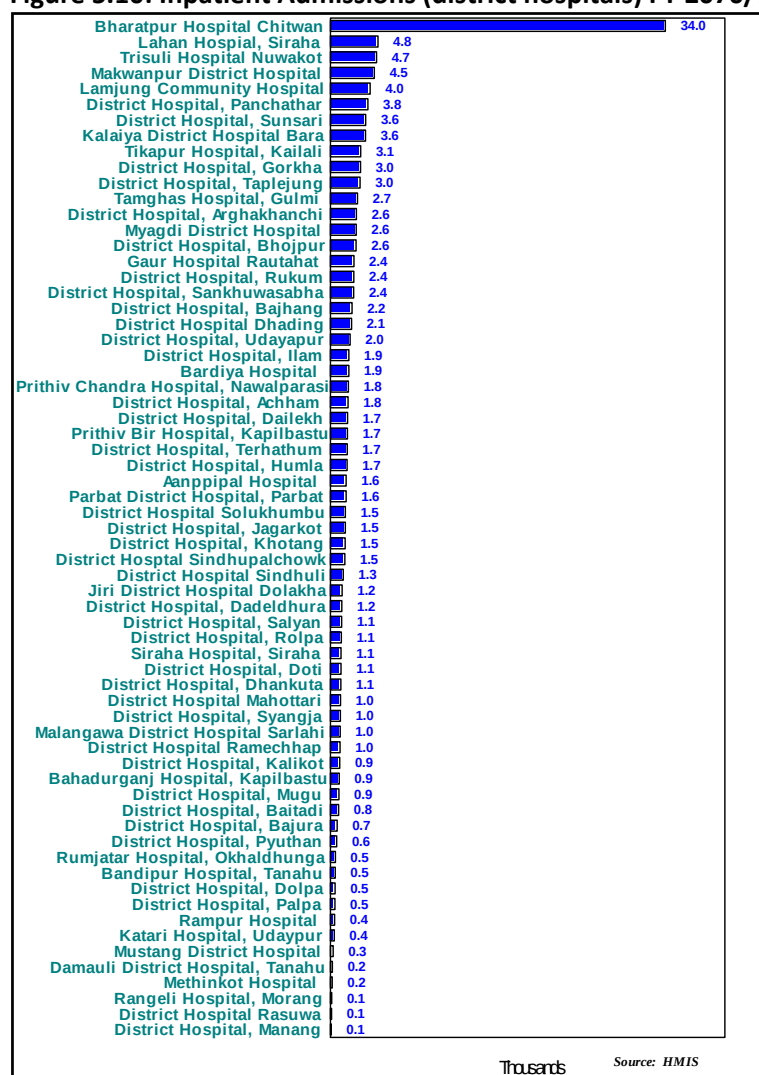


Figure 5.10: Inpatient Admissions (district hospitals) FY 2070/71



Among district and district level hospitals, Bharatpur Hospital, Chitwan has recorded the highest number of Inpatient admissions with admissions of 34,000 and District Hospital, Manang has reported the lowest number of Inpatient admissions with 100 cases (Figure 5.10)

Disease analysis

Top Ten Morbidity, FY 2070/71 (In-patient)

Inpatient Morbidity, a total number of 2,87,616 patients were admitted in hospitals and out of them Typhoid and Paratyphoid Fevers (A01) was the most common reason for hospitalization (3.4%) followed by Pneumonia, Organism unspecified (J18) 3.3% and Diarrhoea and Gastroenteritis of presumed infectious origin (A09) 3.3% were the leading causes for hospitalization (Figure 5.11).

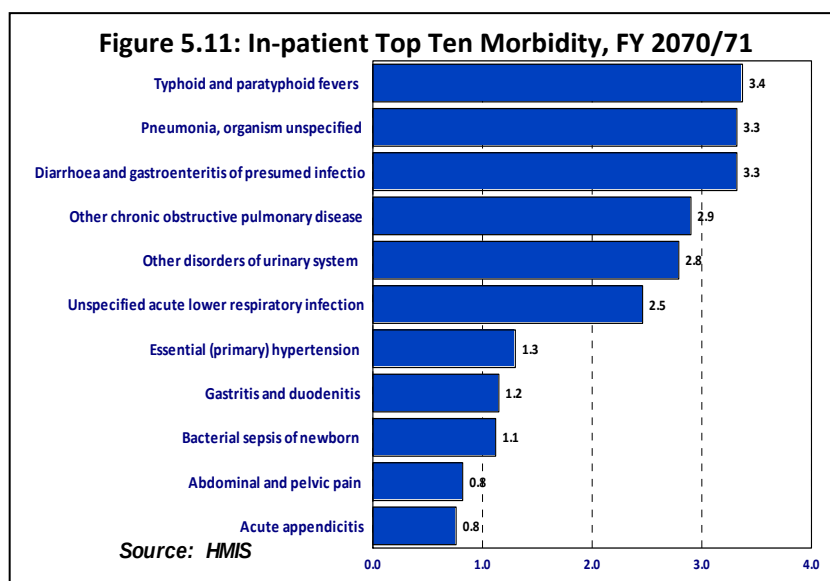


Table 5.3.5 presents the age and sex distribution of discharged inpatients from the hospitals in fiscal year 2070/71. More than one third (35.5%) of the inpatients were in the age group of 20-29 years. More than half of the inpatients were from the age group 15-39 years (57.6%). The proportion of the female (70.3%) was observed dominant mainly due to delivery was the main reason for hospitalization.

Table 5.3.5: Inpatients Morbidity by Age and Sex, FY 2070/71

Age Group	Female	%	Male	%	Total	%
<28 days	5,538	1.9	6,836	2.4	12,374	4.3
29 days - 1 Yrs	5,174	1.8	8,902	3.1	14,076	4.9
1 - 4 Yrs	5,979	2.1	8,640	3.0	14,619	5.1
5 - 14 Yrs	6,903	2.4	9,917	3.4	16,820	5.8
15 - 19 Yrs	27,886	9.7	5,396	1.9	33,282	11.6
20 - 29 Yrs	93,852	32.6	8,291	2.9	102,143	35.5
30 - 39 Yrs	22,963	8.0	7,286	2.5	30,249	10.5
40 - 49 Yrs	10,182	3.5	7,395	2.6	17,577	6.1
50 - 59 Yrs	8,213	2.9	7,152	2.5	15,365	5.3
60 + Yrs	15,564	5.4	15,547	5.4	31,111	10.8
Total	202,254	70.3	85,362	29.7	287,616	100.0

Source: HMIS, DoHS

Top ten reasons (%) for outpatient consultations in FY 2070/71

Figure 5.12 present among the various reasons for Outpatients consultations in FY 2070/71, Gastritis (APD) is the leading one with 4.4% visitors and is followed by Headache (Migraine) with 4.1% and Upper Respiratory Tract Infection with 4%. ARI/Lower Respiratory Tract Infection, Impetigo/ Boils/ Furunculosis, Intestinal Worms, Pyrexia of unknown origin and Falls/ Injuries/Fractures are also among the top ten reasons for Outpatient Consultations. Amoebic Dysentery is the 10th reason for outpatient consultations.

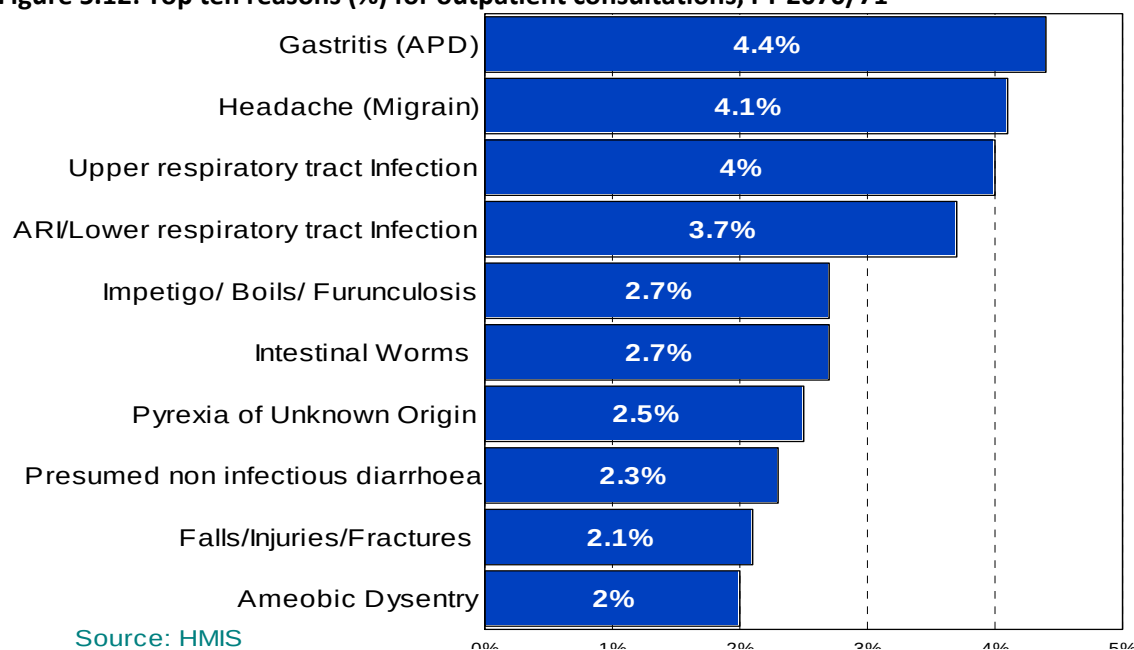
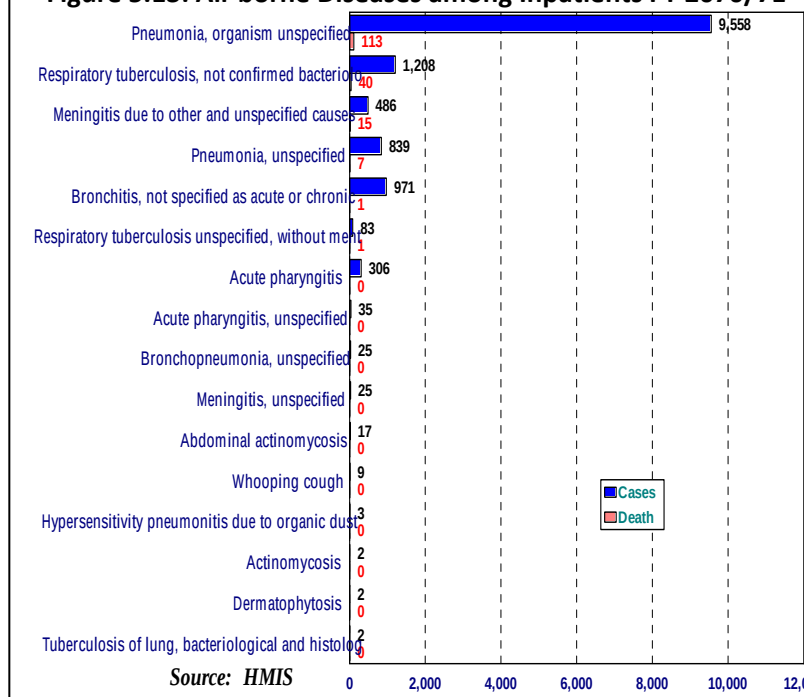
Figure 5.12: Top ten reasons (%) for outpatient consultations, FY 2070/71**Air Borne Disease**

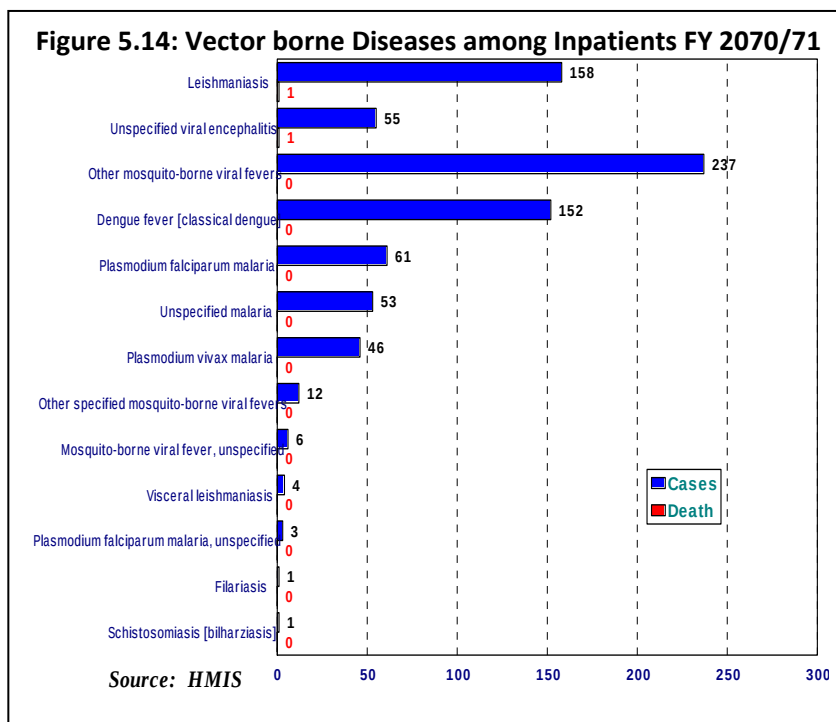
Figure 5.13 show the Air Borne Diseases among Inpatients FY 2070/71. Among patients the Pneumonia, Organism unspecified patients were reported highest among the Air Borne disease with a total patients of 9,558 were affected and 113 patients were reported dead.

Figure 5.13: Air borne Diseases among Inpatients FY 2070/71

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Vector borne Disease

Borne Mosquito Viral Fevers patients were reported highest patients with the number of cases of 237 in the fiscal year 2070/71. The vector borne diseases that caused number of death in Leishmaniasis (1 patient) and Unspecified viral encephalitis (1 patient) reported in the fiscal year 2070/71. (Figure 5.14).



Water Borne Diseases

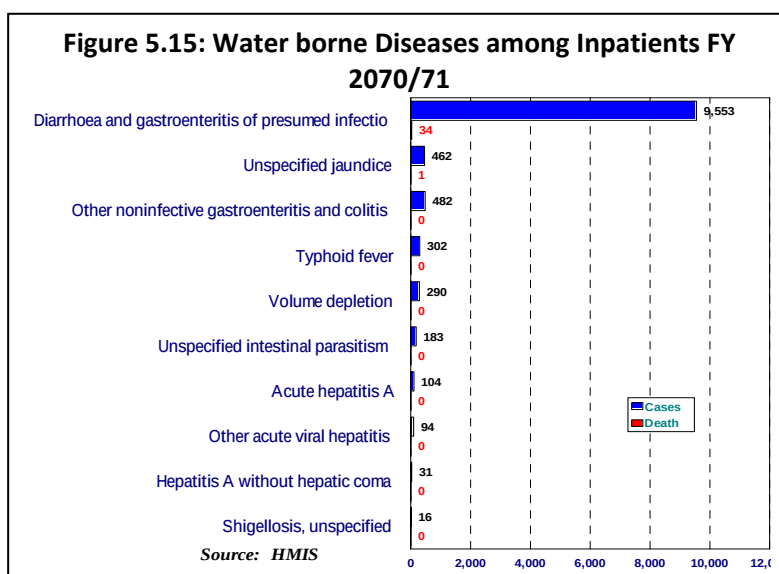


Figure 5.15 shows that Water Borne Diseases among Inpatients FY 2070/71, Due to Diarrhoea and Gastroenteritis of presumed Infections was found to be more than any other water borne diseases with number of cases of 9,553 and 34 were death. Shigellosis had the least number of cases of 16 and no reported deaths. Number of patients and deaths of various other water borne diseases can be observed in the below figure.

Table 5.3.6 shows the distribution of Communicable and Non-communicable Diseases (OPD) by national, ecological, and development region in the fiscal year 2070/71.

	Communicable	%	Non Communicable	%	Total
Mountain	644,560	35.6	1,164,926	64.4	1,809,486
Hill	3,033,714	30.8	6,818,937	69.2	9,852,651
Terai	3,176,393	31.8	6,811,450	68.2	9,987,843
National Total	6,854,667	31.7	14,795,313	68.3	21,649,980
Eastern	1,567,819	34.3	2,996,926	65.7	4,564,745
Central	2,154,945	31.0	4,793,051	69.0	6,947,996
Western	1,187,701	25.4	3,495,575	74.6	4,683,276
Mid Western	1,150,059	35.2	2,117,136	64.8	3,267,195
Far Western	794,143	36.3	1,392,625	63.7	2,186,768

Communicable and non-communicable disease (Inpatient)

Table 5.3.7 present of the total 287,616 inpatient new visit were reported and among 2,340 patients were reported death caused by Communicable and Non-communicable diseases in fiscal year FY 2070/71. The total number of cases of Communicable diseases were 40,908 (14%) and number of deaths 394 (16.8%) reported in this fiscal year. The total number of 246,708 (86%) patients reported on Non-communicable diseases and among 1,946 (83.2%) deaths occurred in this reporting period..

5.3.7 Communicable and non-communicable disease (Inpatient) FY 070/71

Diseases	Cases	%	Death	Death %
Communicable	40,908	14	394	16.8
Non communicable	246,708	86	1,946	83.2
Total	287,616	100	2,340	100.0

Figure 5.16 present Suicide attempt cases among Inpatients in FY 2070/71, during this fiscal year a total number 992 cases reported on External cause of Morbidity and Mortality with no deaths. The numbers of cases of Event of Undetermined Intent were 351 with no death. Likewise, Poisoning case reported 165 with no death and Internal self harm reported 64 cases but no death reported in this fiscal year. (Figure 5.15)

Figure 5.16: Suicide attempt cases among Inpatients FY 2070/71

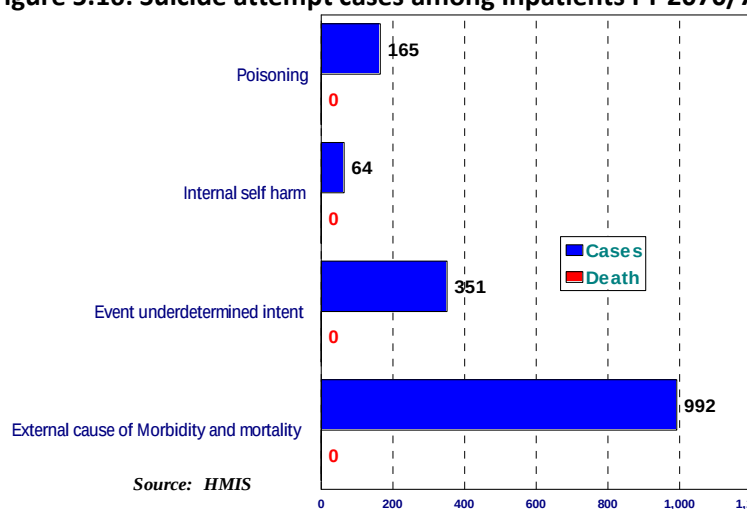
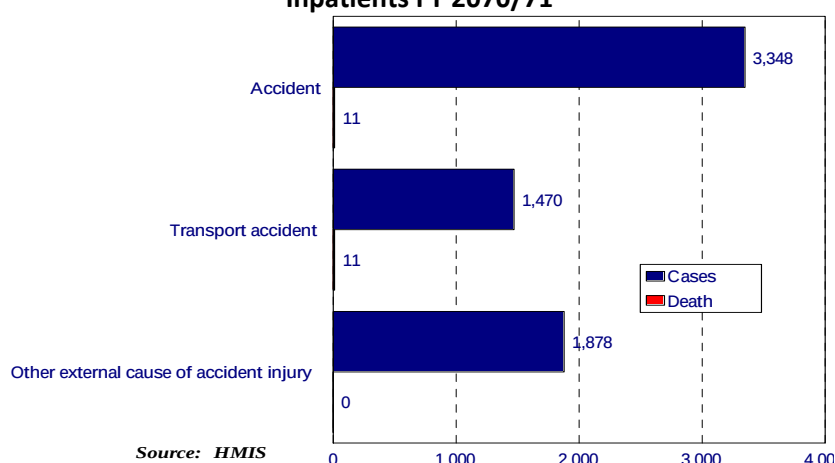


Figure 5.17: Road Traffic and Transport Accident Cases among Inpatients FY 2070/71

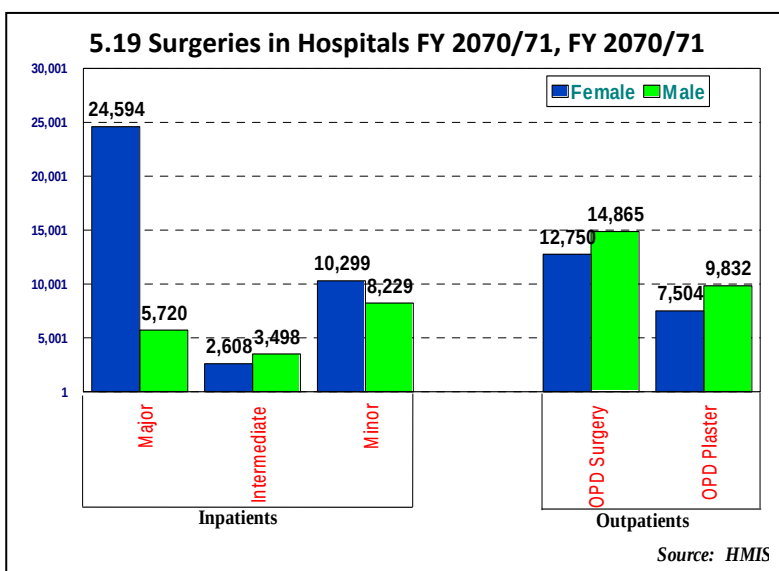
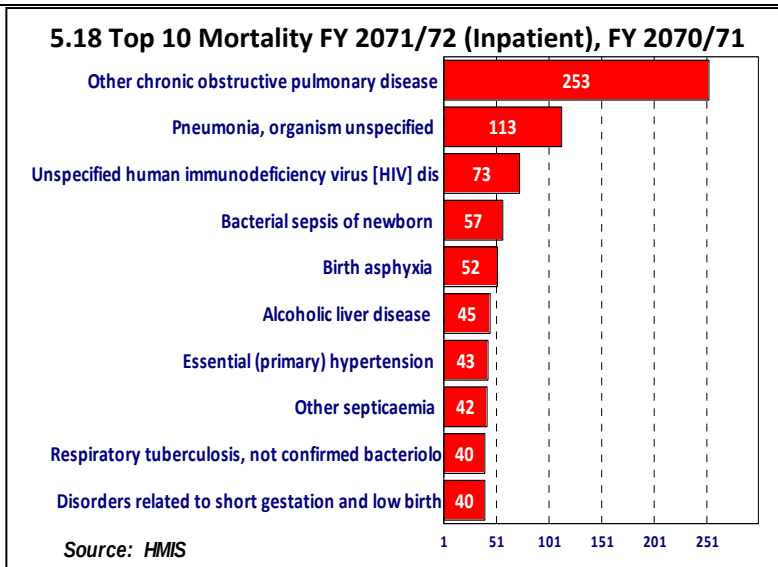


Source: HMIS/MD, DoHS

Road Traffic and Transport Accident cases among Inpatients FY 2070/71, number of cases of accident were 3,348 followed by other external cause of accident injury 1,878 and Transport accident 1,470. Number of deaths caused by accident reported 11 patients and transport accident were reported 11 patients (Figure 5.17)

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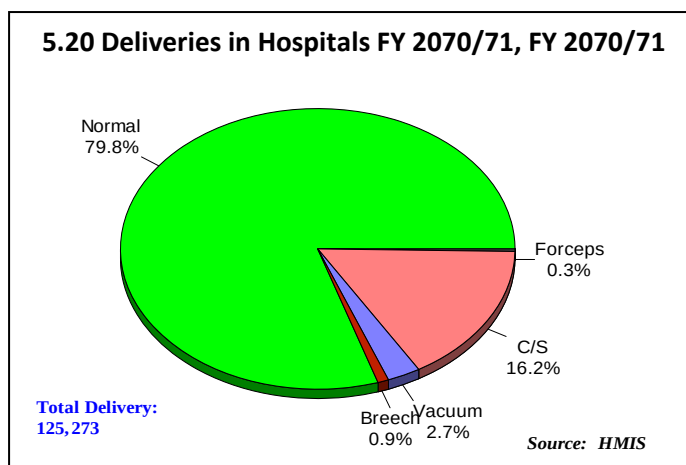
Figure 5.18 shows the Top Ten Mortality among Inpatients in FY 2070/71. A total number of 253 numbers of mortality due to Other Chronic obstructive pulmonary disease was recorded to be the highest. It is followed by Pneumonia 113, HIV 73, Bacterial sepsis of newborn 57, Birth asphyxia 52, Alcoholic liver disease 45, Essential (primary) hypertension 43, Other septicaemia 42, Respiratory tuberculosis, not confirmed bacteriologically or histologically and Disorders related to short gestation and low birth weight 40. (Figure 5.17)



The following figure shows both the Inpatient and Outpatient Surgeries in FY 2070/71. In figure 5.19 present among Inpatient Surgeries including major surgeries reported number of 24,594 females and 5,720 males were performed. Similarly 2,608 female and 3,498 male were reported Intermediate surgeries were also performed. A total number 10, 299 female and 8,229 male Minor surgeries were also performed in FY 2070/71.

Among Outpatient Surgeries, 12,750 female and 14,865 male OPD surgeries were performed. Similarly, 7,504 female and 9,832 male OPD Plasters were also performed in FY 2070/71.

Figure 5.20 shows deliveries in hospitals in FY 2070/71, a total number of 125,273 deliveries took place. Figures also shows classification of delivery by types were 79.8 normal, 16.2% C/S, 2.7% Vacuum, 0.9% Breech and 0.3% Forceps reported.



Note: Please see Annexes

Hospital Issues, FY 2070/71

- Increase Government support for different hospital program,
- Need more technology: New ICU expansion, Inadequate number of advanced equipments,
- Lack of existing infrastructure to run super specialty services,
- Doctor quarter and staff quarter is Inadequate,
- Inadequate financial resources,
- Expansion hospital beds,
- Manpower retention and lack of adequate Specialist, Trained & Technical Manpower,
- Free Services for Poor Patient is increasing,
- Hospital waste Management,
- Health insurance/Compensation,
- Lack of hospital IT Familiar Man Power.

Supporting Programmes

6.1	Health Training -----	175
6.2	Health Education, Information and Communication -----	185
6.3	Logistic Management -----	192
6.4	Public Health Laboratory Services-----	207
6.5	Personnel Administration Management-----	213
6.6	Financial Management -----	217
6.7	Management -----	224
6.8	Primary Health Care Revitalization -----	231

SUPPORTING PROGRAMS

6.1 HEALTH TRAINING

1 Introduction

1.1 Institutional Profile:

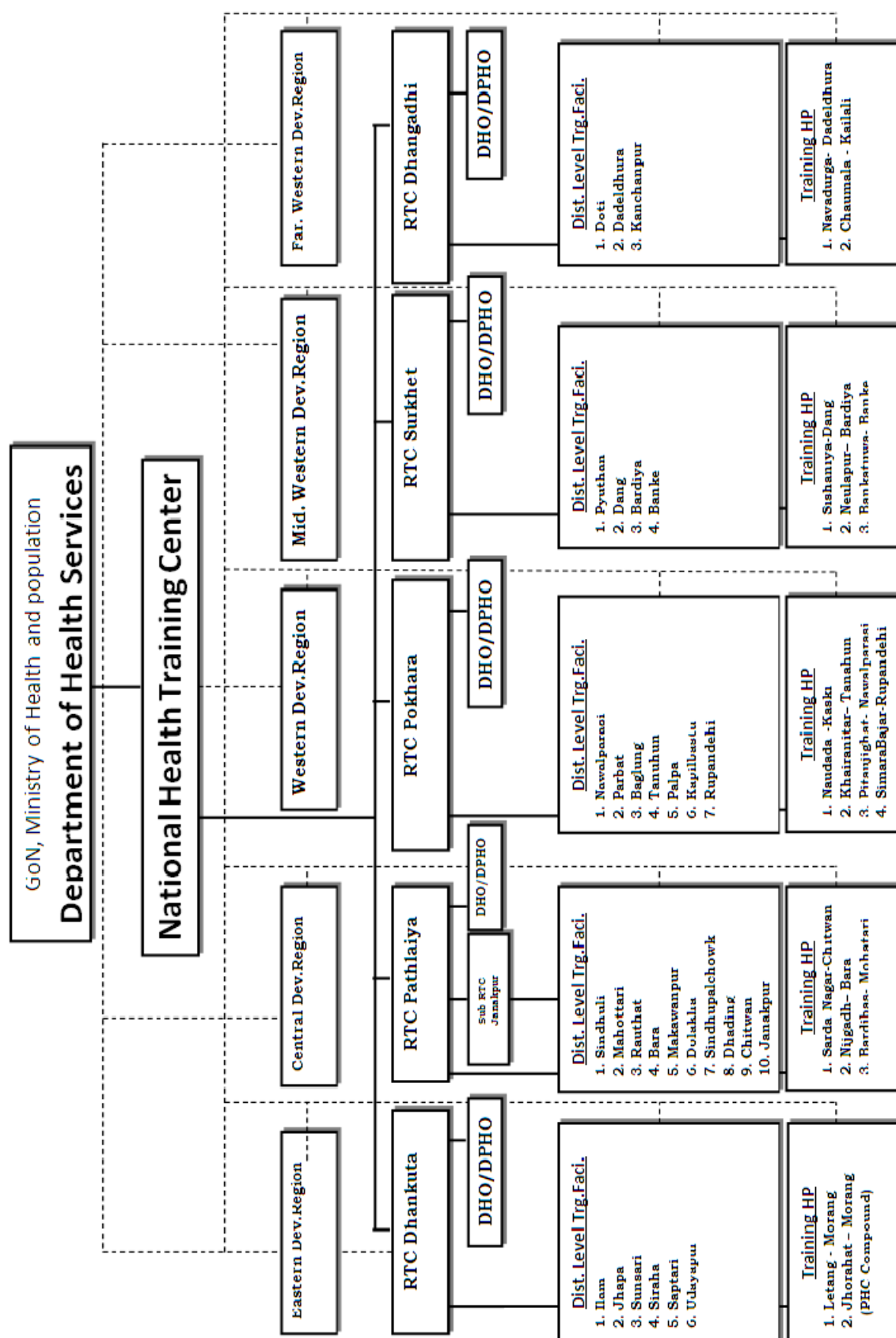
The National Health Training Centre (NHTC), under the MOHP is part of a network of government health training facilities. The NHTC operationalize its training activities in line with the 2004 National Health Training Strategy.

In-service training is delivered through a network of National Health Training Programmes, which provide technical as well as managerial training at national, regional, district and community levels. There are five regional training centers, one sub regional, 75 district and 14 training health posts. In addition, there are ten Family Planning, ten safe abortion, twenty one skill birth attendants, eleven Mid level practicum, four USG, six anesthesia assistant training sites under NHTC. A training working group (TWG) comprising various supporting partners was formed under the leadership of NHTC with the purpose of ensuring the efficient running of national health training programs, maintaining the quality of the training and improving the coordination of all training provided under NHTC.

The National Health Training Centre (NHTC) is the apex body for the development of human resources for the health sector. It caters for the training needs of all departments, divisions and centers of the Ministry of Health and Population. NHTC aims to train health service providers to deliver quality health care services. To achieve this objective the centre delivers the different training programs, basically clinical and managerial.

Training Network

The National Health Training network includes a 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. There has a team of 5-7 district-trainers in each district with one training focal person.



Note: Training HP : 15 Bedded residential Facilities

SRTC/District Level Training Facility : 20 Bedded residential Facilities

RHTC: 40-50 Bedded residential Facilities with Lecture rooms and Big Halls.

NHTC : Con. Hall 1-60 Classroom 2-40 Cap. Bed-30

Training DHO/DPHO : Class room-1-20 Cap., Hostel bed-20, Office room -1

Training HP: Class room -1-15 Cap., Dining room -1-15 cap. Office-1, bed-15.

1.2 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.

1.3 Objectives

- To assess training requirements of Health Workers and prepare training plans based on the program's requirement.
- To plan, implement and train health workers as demanded by programs.
- To design, develop and refine teaching, learning materials to support implementation of training programs.
- To develop/improve capacity of trainers to deliver quality training at central, regional and district level.
- To support RHDs and DHOs in organizing, implementing and evaluating the training programs.
- To coordinate with all National and International, Governmental and Non-Governmental Organizations to avoid duplication of training and improve quality of training.
- To orient newly recruited health workers on different health programs.
- To supervise, monitor, follow-up and evaluate training programs.
- To conduct operational studies to improve training efficiency and effectiveness.
- To organize International Training as per need.
- To establish TIMS for the quality recording and reporting systems of all training programs at central, regional, district, and community levels.

1.4 Strategies

The following strategies have been pursued to address the National Health Training Programs;

- Need assessment of different trainings
- Assessment, standardization and accreditation of training as well as training sites.
- Development and standardization of training package as periodically.
- Institutional capacity development for all levels of training units.
- Conduction of various natures of trainings like Pre-service, In-service, Orientation, Refresher, long-term, short-term as per national required.
- Integration and institutionalization of trainings.
- Capacity development links with professional carrier development regarding to quality services.
- Strengthening of TIMS as well as roistering the training profile.

2. Major Activities

2.1 Health Trainings: NHTC provides following arrays of training programs:

2.1.1 Pre-service Training (Initial and Basic Training):

- FCHV (basic and refresher),
- AHW / ANM (CTEVT Affiliation),
- Biomedical Equipment Technician Training (BMET) and
- Anesthesia Assistant Course (AAC).

2.1.2 In-service Training:

A wide range of in-service/refresher trainings are designed and conducted as per the need of different program divisions and centers. Such training packages are aimed to enhance the skill need for implementing new programs as well as improving job performance of health workers. NHTC delivers the following In-service trainings;

- (I) Upgrading Training:
 - MCHW to ANM and ANM-P,
 - Sr. ANM,
 - VHW to AHW and AHW-P,
 - Sr. AHWs and
 - Supervisor upgrading training
- (II) Special Training:
 - Skilled Birth Attendant (SBA),
 - Advanced Skilled Birth Attendant (ASBA),
 - Ultra-Sonography (USG),
 - Medico-Legal,
 - Non-Scalpel Vasectomy (NSV),
 - Mini-lap,
 - Intrauterine Contraceptive Device (IUCD),
 - Implant,
 - Safe Abortion Services (SAS),
 - Mid-Level Practicum (MLP) etc.
- (III) Other Clinical Training:
 - Clinical Training Skills (CTS),
 - Operation Theatre Technique and Management (OTTM),
 - Infection prevention (IP),
 - ICU/CCU,
 - Mental Health and
 - Comprehensive Family Planning (CoFP) Counseling etc.
- (IV) Health Management Training:
 - Adolescent and Sexual Reproductive Health (ASRH),
 - General Training of Trainers (GToT),
 - Health Facility Operation and Management Committee (HFOMC),
 - Health Governance, Gender Equity and Social Inclusion (GESI) Training,
 - Information Communication Technology (ICT) Training etc.

2.1.3 Orientation Programs: NHTC supports the divisions and centers in developing orientation packages, preparing a pool of trainers for conducting various orientation of short duration for health workers and non-health worker category.

2.1.4 Refresher Training: A wide range of refresher trainings are designed and conducted as per the need of different program divisions and centers. Such training packages are aimed to enhance the skill need for implementing new programs as well as improving job performance of health workers.

2.1.5 Induction Training: NHTC has systematically started the Induction training for the all service groups of health services officers from this fiscal year. The training is designed for one month (twenty four working days) and has covered the wide range of disciplines of health services.

2.2. Certification

NHTC is responsible to different non-clinical and clinical competency based training courses. NHTC provides certificates to the participants after completing the as per training course.

2.3 Training Need Assessment (TNA)

NHTC is responsible to assess training need during planning phase. NHTC identifies the gap between expected and existing performance of the health workers through various methods

2.4 Planning, Budgeting, Review and Reporting of the training

NHTC develops the annual training program plan with budget including the six S/RHTCs and different sites. NHTC organizes the Annual Review regarding to analyze the target versus achievement of all training programs and finally prepares the annual report. The approved annual training program delivered to six S/RHTCs and clinical training sites for the implementation. All the centers and sites implement the training program as per program.

2. 5. Delivering training and quality assurance

The approved annual training program delivered to six S/RHTCs and sites for the implementation. All the centers and sites implemented the training program as per training models and guidelines. Quality Improvement (QI) tool is introduced mainly clinical skill based training regarding to upgrade it, built capacity of training sites, trainees and trainers for the quality assurance of training.

2.6 Assessment and Accreditation

NHTC is responsible to accredit different non-clinical and clinical competency based training courses like SBA, USG, Sr. AHW, Sr. ANM, Medico-legal, MLP etc and training sites like Paropakar Women Maternity Hospital (PWMH) Thapathali for SBA, Lamjung Community District Hospital for MLP, Tansen Mission Hospital for USG, TUTH for Medico-legal etc. The institutions should be accredited before providing such training courses.

2.7 Curriculum Development, Review and Revision

NHTC develops the different types of training curriculum based on the actual needs of the programs with close collaboration of divisions and centers. NHTC has technical working groups (including wide range of government and supporting partners) to review and revise the existing curriculum and also forms the technical groups based on the needs to formulate the new curriculum.

2.8 Co-ordination and Collaboration with concerned Stakeholders

NHTC coordinate and collaborate with the partnership of various institutions of MoHP including the EDPs, NGOs, Private sector and, Medical colleges. Various concerned stakeholders are providing collaborative supports to NHTC in planning and execution of training programs.

2.9 Supervision, Monitoring, Follow-up and Evaluation

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 assess quality of training programs. NHTC has increased monitoring and supervision of training activities to assure maintenance of quality of training delivered.

2.10 Training Policy Formulation, Review and Revision

To date NHTC do not have adequate policies to address the wide range of training activities of the health sector and their accreditation. Although NHTC provides wide range of clinical and managerial training ranging from different duration but these trainings are not linked with the carrier development and health service act and regulation.

2.11 Institutional Capacity Development for all Centers and Sites

For the institutional development of training function NHTC focuses on;

(a) 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 centers, hospitals, district level training facilities.
- 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.

(b) Health Training Program Development and Coordination

NHTC develops the different training programs as per the need of MOHP, DOHS and other stakeholders. It also facilitates for functional coordination required amongst divisions, centers, districts and training sites. NHTC has been planning, implementing and 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, NGOs, Private sector and Medical colleges.

(c) Capacity Building

NHTC makes efforts develop the capacity of different level health workers in different specialized areas. As part of faculty development and strengthening the capacity of staffs, NHTC has been providing opportunities to participate in different programs organized by national and international institutions.

(d) Supporting Development Partners and their contribution:

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: Family Planning, Logistic Training, HFOMC, FCHV, quality monitoring tools in clinical training, HR Support for FP training and service strengthening.
- NHSSP: Support in different training activities.
- NSI: SBA, USG, MLP, Anesthesia Assistance Course, BMET, BMEAT, CTS, Hospital Management training.
- FPAN: NSV, Minilap, Implant, IUCD, FP Training, advocacy, ASRH training.
- UNFPA: IUCD, ASRH, Gender and health, Gender Based Violence, Behavior, Change Communication, strengthening training capacity building, COPE/PLA, HR support for RH training and service strengthening.
- Save the Children: SBA training.
- SUAHARA: HFOMC training.
- WHO: technical support.
- UNICEF: SBA Training, Rural Ultrasound, Pediatric Nursing training, Technical Assistance.
- IPAS: SAS Training, Long-term FP method
- PSI Nepal: FP training, Medical Abortion (MA) training, Clinical Training skills etc.

(e) Training Working Group (TWG)

Training Working Group (TWG) has been formed with the involvement of all the governmental and EDP supporting partners. This is the high level working group for the quality improvement, curriculum development and accreditation of different training activities.

(f) 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.

2.12 Develop the Training Data Bank and strengthening the TIMS

NHTC is trying to update the training information into electronically prepared data bank (Training management information system). All the training information taken from different training site under national health training are being updated and made available to each participant. NHTC has now plan to update the training management system at central level and link with regional health training centers and other clinical training site into this TIMS soft ware. NHTC is also preparing the trainers roster on different discipline and training types.

2.13 Research on Training programs

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. The NHTC has planned to develop the capacity of the training site for reaseach.

3. Major achievement in FY 2070/71**3.1 Status of Budget Allocation and Financial Progress**

Total allocated Budget:	191,609,000.00
Total released and expensed Budget:	76,434,580.28
Financial achievement:	39.9%
Physical Progress	81%

There were altogether 39 red book reflected different trainings with 3,548 targets ranges from few days to years and different level of health workers. Among them 2,874 (81%) health workers have completed the targeted trainings form different training sites. Besides the trainings the capacity development of the training sites and trainers, development of the training curriculum and training manuals were also prepared in this fiscal year.

3.3 Issues and recommendation:

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 issues/problems and opportunities identified during implementation of training activities noted in recent regional review meetings and National Review meeting are summarized below:

Issues:

- Too many un-integrated trainings by the division and centers.
- Poor recording of the training activities and no follow-up after training;
- Trainings as incentives.
- Low HR capacity of training center

Recommendations

- Need based (Based on performance need analysis), Integrated, one door managed, institutionalized training with up to date training information and records;
- Restructure and develop the institutional capacity of the training center to meet the existing health training challenges.
- Trainings linked with Career developments of the health workers.
- Fulfillment of acute shortage HR through initiation and continuation of the training like Diploma of Biomed engineering and anesthesia assistant.
- Accreditation and certification

4. New Initiation:

4.1 Integration and institutionalization of health trainings

Health service is a labor intensive services, so many new principles and practices are develops from the scientific evidences and mean time so many new diseases, new health problems are also coming up; all these needs the periodic training and updating of the health professionals. To fulfill these gaps all the division, centers and departments are engaged in the training activities separately with limited coordination. Fragmented, piecemeal and short duration training has created many more problems in the health service delivery. Besides the expensive investments in the training duplication, long absenteeism in the facilities, poor recording and follow up are some observed lacuna of the training activities in ministry of health and population.

To minimize all the described problems NHTC has now initiated the integration and institutionalization of the different training activities, with close collaboration of division and centers.

4.2 Initiation of induction trainings

NHTC has developed and introduced the induction training package for all Officers level that have newly entered the services after passing from public service commission exam by this year.

4.3 Integration of cross cutting and priority health issues in different health trainings

Six different long term training package are now mainstreamed with GESI and GESI is also introduced in different training curriculum. The emerging issues like Governance, Information communication technology (ICT), Water sanitation and health (WASH), Climate change and health, and consumer perspectives in the health is now incorporated in different training activities. The issues of non communicable diseases, road traffic accident (RTA), and some new and emerging diseases are also incorporated in induction and upgrading training curriculum.

4.4 Initiation and scale-up of different up-grading trainings

The Health service act 2053 and regulation 2055 has provision of time bound upgrading of the level of the health workers, and now the health workers has upgraded 2-3 level depending upon their seniority. The VHW became the Sr. AHW and MCHW became the Sr. ANM without any education qualification or further training. The 5th level health workers (basically health assistants, staff nurses, Lab technicians, Radiographers and district supervisors) have got the upgrading of level from 5th to 6th and seventh depending upon their seniority level. The current health regulation has provision of 15% adjustment of upgraded level position.

There is provision of senior AHW, Senior ANM and ANM, training for upgraded health workers and this year AHW training is re-started and AHW-P, ANM-P, and supervisor upgraded training is initiated. Time bound upgrade of position level of the health workers needs the upgraded knowledge and skills.

4.5 Service strengthening for improved training quality

The clinical trainings need adequate number of clients/ cases to develop the competency like NSV, Minilap, IUCD, Implant, Delivery etc. To strengthen the services in the institutional clinics NHTC has hired family planning consultants and counselors for five different sites. Four family planning consultant physicians and three nursing counselors were hired for these purposes. Koshi Zonal hospital, Chetrapati family welfare center, Proshutigriha Maternity hospital clinic, Western regional Hospital, ICTC Nepalgunj and Dhangadhi were fulfilled by these staffs.

4.7 Initiation of POP, Obstetrics fistula repairmen training

After the popular people's movement 2062/063, the new elected government have given high priority for the uterus prolapsed repairmen program. The ministry of health and population started Uterus prolapsed repairmen vigorously, but at the mean time due to lack of competency based training and standard protocols so many undesired effects also observed. To minimize these undesired effects, the National Health Training Center with close collaboration of Family Health Division has initiated the pelvic organ prolapsed repairmen training. Obstetric fistula repairmen, which needs highly specialized competency is also piloted in on the job training at BPKIHS Dharan and also plan to scale up in other part of the country. For these training the technical support is provided from JPIEGO Nepal and financial support was given by UNFPA.

4.8. Introduction of clinical trainings

To address the increasing trend of non communicable disease and road traffic accident, few clinical training was initiated in this fiscal year with the partnership of different institutions. The primary trauma care training was initiated with the partnership of Nepal Orthopedic Hospital Jorpati, Burn management training were given in all the major government staff of outside of Kathmandu valley with the partnership of Nepal Burn Society, Spinal Injury management training with the partnership of Nepal Spinal Injury society. In the same way month long palliative care training was also launched for twenty participants of different government hospital doctors and nurses with the collaboration of Nepal Palliative Care Society. Different training manual were also developed in this period with the support of different donors and experts.

More than three hundred doctors, nurses and physiotherapist from bigger hospital of Kathmandu valley were trained on early deployment and roistering system, Burn management and head injury management as preparatory work to address the mega disaster in Kathmandu valley (especially earthquake scenario). All the related training manuals were also developed for this training. This training activity was financial supported by European Union through Handicap international and implementing partners was Nepal Red Cross Society.

4.9 Development of different training Manuals and Revision:

Different types of training manuals have been developed this year some entirely new and some adopted with revision to address the training activities. Induction training manual, AHW-P, ANM-P, Palliative care manual, Pediatric Nursing Care, Management of head injury and burn injury during mega disaster, Roistering and Early deployment during mega disaster are some new manuals. Some manuals are revised and adopted by different partners like trauma management (by Nepal orthopedic hospital), Spinal injury management (by Nepal Spinal Injury society), Burn management (by Nepal Burn Society) etc. NHTC has got adequate support from EDPs support partners to prepare all these manuals and needful revision.

5 Internal Capacity Development:

5.1 Staff Development

To make the training activities more effective and efficient proper composition of the training faculties is an important step. NHTC has assessed its capacity with the external evaluation and suggested for the institutional reform and proper composition. Very limited trainings and workshop were organized to enhance the capacity of the trainers working under NHTC, RHTC and clinical training sites.

5.2 Upgrading and Maintenance of Physical Facilities

In the process of upgrading and maintenance of physical facilities, few buildings were renovated for the residential and training purposes. Few teaching learning materials like laptop, LCD, Desktop computer, printer, photo copy machine, and models were supplied to strengthen the training sites.

5.3 Establishment of ICT training Lab

A well equipped information communication technology (ICT) training lab is established with the support of Ministry of General Administration (ADB funded ICT Project). After the establishment of ICT training lab the capacity of the NHTC has increase to mainstream the ICT into different training activities. NHTC is also planning to strengthen the ICT lab in Pokhara and proposal is submitted to Ministry of General Administration (MoGA).

5.4 Improvement of Library

As continuous effort to increase library resources, NHTC has added a large number of books, periodicals and necessary equipments. Similarly, library facilities are being upgraded along with the development of e-resource centre which is in the process of operation with a view to converting it into a knowledge resource center.

6.2 HEALTH EDUCATION, INFORMATION AND COMMUNICATION

6.2.1 Background

The National Health Education, information and Communication Centre (NHEICC) was established under the Ministry of Health and population in 1993 with following New Health Policy 1991. Ministry of Health and Population has given structural mandate to this center in 2002 to support for health promotion, education and communication activities of Department of Drug Administration and Department of Ayurveda.

Recently, the cabinet endorsed "National Health Communication Policy, 2012" which is the milestone for health promotion, education and communication program under MoHP/GoN.

NHEICC is responsible agency for planning, implementation, monitoring and evaluation of health promotion, education and communication program of all health services and programs undertaking by the ministry of health and population through out Nepal. This center regulates the health messages and information produced and disseminated by other different organizations such as private sectors and non governmental sectors. In an integrated manner developing, producing and disseminating messages and materials to promote and support health programs and services is a part of the responsibility.

Since FY 2051/52, all of the districts health offices have organizational structure for Health education, information and communication programs. There is health education and communication section in the regional health directorates, regional training centres and health information section in the district Health/Public Health Offices. The health education and communication section implement health promotion, education and communication activities utilizing various media and methods according to the needs of the local people in the district as well as the health program and services objectives. Local media and languages are preferred to use in the district for dissemination of different health messages and informations in their local context to make clear understanding of local people.

6.2.2 National Health Communication Policy, 2012

Considering the health communication challenges and needs, the Government of Nepal endorsed "National Health Communication Policy, 2012" which is a milestone for health promotion, education and communication program under MoHP/GoN. It gives high priority of government to health promotion, education and communication program in the health sector. The Goal, objectives, policy and strategy of National Health Communication Policy, 2012 is as below.

Goal

The main goal of National Health Communication Policy is to sustain healthy lifestyle of mass citizens by promoting health services, programs and healthy behavior; by preventing and controlling disease and by increasing accessibility and utilization of health services.

Objectives

The objectives of the National Health Communication policy are to:

- Mobilize and use modern and traditional communication multimedia and methods in an extensive and proportionate manner to raise health awareness, knowledge and promote healthy behavior of mass citizens,

Supporting Programs: National Health Education, Information and Communication

- Strengthen, expand and implement health communication programs at central, region, district and community level through clear and strengthened cooperation, coordination and collaboration among individual, community, relevant organizations and communication media.
- Generate, collect and mobilize sufficient resources for the effective implementation of health communication programs at central, region, district and community level
- Prevent unauthorized dissemination and duplication of health related messages or information and materials of different issues by maintaining quality, correctness, authorized, uniformity and appropriateness,
- Enhance capacity on health communication in order to develop, produce and disseminate quality, correct, authorized, uniform and appropriate messages or information, materials and programs.
- Provide quality health messages or information through appropriate media and method to the citizens, who have no access to health message or information.
- To increase knowledge, improve skills and promote desired behaviour change on EHCS and beyond
- To create 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
- 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.

Major Policies

- Implement health communication programs in decentralized manner.
- Provide continuity to working in planning and implementation of communication programs of all health services and programs in an integrated approach and through onedoor system.
- Allocate at least 2 percent budget annually of the total annual budget of Ministry of Health and Population annually for managing adequate financial resource to implement health communication related programs.
- Promote participation, coordination and cooperation of relevant organizations and stakeholders for effective implementation of health communication programs.
- Use extensively modern and traditional multimedia especially mass, interpersonal and social communication media and methods based on the appropriateness to disseminate health messages or information.
- Make arrangement for the dissemination of health message or information based on need, approved standard and classification through all communication media and methods to intended audiences by direct negotiated agreement in transparent and proportionate manner.
- Disseminate health messages or information in an educative, artistic and entertaining manner in local language and in culturally accepted manner.
- Regulate and provide pre-consent from Government of Nepal for dissemination of health messages or information for maintaining quality, consistency, correctness, authorized, uniformity, appropriateness and avoiding duplication as per the "Health Communication Policy 2012".

- Make arrangement to encourage communication media, institutions, health workers, journalist or health issue centered communication media, which have made significant contribution in disseminating health messages or information.
- Encourage and facilitate dissemination of health messages or information or materials through different communication media and methods in public private partnerships under the corporate social responsibility.
- Regulate, control and ban dissemination of any types of messages or information that can be adversely affected human health, exaggerated, misled nature and unauthorized.
- Make transparent and informed by disseminating health services, programs, proper use of medicines and medicine and service charges provided to people by governmental, non-governmental and private organizations.
- Make arrangement to obtain health message or information or materials easily by physically and mentally disabled person and senior citizens.
- Give priority to issues related to control lifestyle related diseases and encourage improving daily lifestyle of human from simple behavior of individual.
- Ensure good governance and management of health services and institutions of all level for effective planning and implementation of health communication programs by building capacity of health promotion and communication.
- Provide quality health messages or information to mass citizens particularly people living in remote village with no access and geographically, ethnicity and gender wise disadvantaged, poor and marginalized population in an appropriate time and from appropriate media and methods.
- Link health messages or information and programs with services and these health messages or information will be socially inclusive, gender friendly and right, fact and audience based.
- Promote and use advanced modern communication technology for dissemination of health messages or information.
- Emphasize quality health promotion and communication by developing and producing manpower related to health promotion and communication.
- Develop and use monitoring and evaluation mechanism for the overall use of message and materials and the effectiveness of the programs related with health communication.

6.2.3 National Health education, Information and Communication Program

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 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:

- Increase awareness and knowledge of the people on health issues and promote desired behavior change on EHCS and beyond.
- Create demand for quality EHCS among all castes and ethnic groups, and disadvantaged and hard to reach populations.

Supporting Programs: National Health Education, Information and Communication

- Advocate for required resources (human and financial) and capacity development for effective communication programmes and interventions to achieve the NHSP – 2 goals.
- Increase access to new information and technology on health programmes.
- Increase positive attitudes towards health care.
- Increase healthy behavior.
- Increase participation of the people in the health intervention programs at all levels of health services.
- Intensify and strengthen action against tobacco use, both smoked and smokeless, excessive use of alcohol, unhealthy diets and physical inactivity.
- Promote environment health, hygiene and sanitation.
- Control the tobacco and Non Communicable Diseases (NCDs)

Major Strategies:

- Health communication programs will be implemented through health structures at centre, region, district and community levels in decentralized manner.
- Coordination and collaboration will be made with local bodies and other stakeholders for implementing health communication programs in decentralized manner.
- The policy of planning and implementing health related communication programs of all health service and programs in onedoor system and integrated approach will be implemented through Ministry of Health and Population, National Health Education, Information and Communication Centre.
- Advocacy, community mobilization and behavior change communication programs will be implemented at different levels by formulating subject wise health communication strategies of health services and programs in an integrated manner.
- Health communication programs of different health service and programs will be integrated while formulating annual programs and budget of Ministry of Health and Population and will be implemented through National Health Education, Information and Communication Centre.
- Budget will be allocated annually according to the policy for the implementation of health communication related programs while formulating annual program and budget.
- The bodies under UN and external development partners will be encouraged and facilitated to invest in health communication programs.
- Certain tax will be levied on any services or commodities used by general public and on behavior or commodities that adversely affect health. Some percent of the tax will be deposited in health messages or information dissemination management fund for utilizing to implement health promotion and communication programs.
- The practice of free distribution and use will be discouraged and managed by developing standards of health related communication messages or information, materials, equipments and services.
- Health Communication Coordination Committee will be formed comprising stakeholders to assist in the implementation of policy and decisions taken by high level health communication direction committee.
- Adolescents, youths, journalists, professionals, institution and various organizations will be mobilized for the promotion of healthy behavior, basic health services and programs in coordination and collaboration with different relevant ministries and institutions.
- Modern electronic communication media such as radio, television, FM radio, website, telephone, mobile etc will also be used timely to disseminate health messages. Arrangements will be made to include health message and its link in all governmental websites.

- Booklet, pamphlet, poster, calendar, dairy, signage, sticker, flipchart, wall chart, flyer, flash card, flex, bulletin hoarding board will be produced, published and displayed for effective dissemination of health message or information. Also health messages or information will be published and displayed through various means and materials like outer cover page of text and practical books, package and bags of various materials and food items, tickets, postal letters, Tshirts.
- Traditional and local folk art, culture and rituals like Maruni, Rodi, Dhan Nach, Shakewa Nach, Nautanki, Dohori Geet, Deuda, Ghatu, Dhami Jhankri, Gaine, Fine Art, Street Drama, Puppet Dance, Miking etc of powerful folk communication media and its related arts will be used timely to disseminate health related mess
- Various carnivals, festivals, days, events, exhibitions will be organized to spread health message and information effectively up to the public community.
- Innovative ideas of art especially articles, Radio and Television program, Interaction, Drama, Film, songs with message, dance, fine art, sculpture etc will be encouraged for raising health awareness. Other sectors will also be encouraged for conducting similar types of activities.
- Interpersonal communication is a major and effective medium in disseminating health messages or information widely. Therefore, emphasis will be given to mobilize community people and groups like local organizations, intellectuals, teachers, students, peer groups, religious preacher, media, female community health volunteers, consumers' group, mothers' group, youth and other social and professional organizations in religious preacher, media, female community health volunteers, consumers' group, mothers' group, youth and other social and professional organizations in such programmes.

6.2.4 Major Activities

National Health Education, Information and Communication Centre conducted major health communication activities at all levels as follow:

Central Level

- Policy, strategy and program development and implementation
- Development of Program guideline and directives and supply to RHD, RHTC and DHO/PHO
- Development, production and airing of short messages through Radio, Television and FM
- Development and publication of health messages through Newspapers
- Development, production and distribution of IEC materials to stakeholders and RMS, DHO/PHO
- 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
- Supervision, Monitoring and evaluation of health communication program
- Tobacco control act including tobacco product pictorial health warning Implementation
- Tobacco control strategic plan preparation and implementation
- Regional Orientation to Assistant CDO to implement tobacco control activities
- Conduction of environmental health, hygiene and sanitation activities
- School Based Hand Washing with Soap and Water program
- Public Private Partnership in Hand washing with soap programme
- Broadcasting health messages through Radio and Television in package

Regional Level

- supervision and Monitoring of IEC activities
- Sensitization program for prevention and control of epidemics
- Distribution of IEC materials through Regional medical stores

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
- Publication of health messages in print media
- Community interaction program for health service promotion
- Establishment and management of IEC corner in each health facilities
- IEC program on anti-tobacco and non communicable diseases control
- Supervision and Monitoring of IEC activities
- Celebration of Health days

6.2.5 Analysis of Achievement

The physical and financial achievement of the regular IEC/BCC activities carried out by NHEICC was 100 and 95.3 percent respectively during FY 2068/69; where as the physical and financial achievement was 95.5 percent and 83.9 percent respectively in FY 2069/70. The physical and financial achievement was 68.9 percent and 57.7 percent respectively during the FY 2070/71.

Similarly the physical achievement on Health Tax Fund-Tobacco control activities carried out by NHEICC was 100.0 and 94.0 percent respectively during FY 2068/69, where as the physical and financial achievement was 96.3 percent and 83.9 percent respectively in FY 2069/70. The physical and financial achievement was 81.4 percent and 71.6 percent respectively during the FY 2070/71.

Table 6.2.5: Trend of Physical and Financial Achievement

Program	FY 2068/69		FY 2069/70		FY 2070/71	
	Physical	Financial	Physical	Financial	Physical	Financial
Regular IEC program (%)	100	95.3	95.5	83.9	68.9	57.7
IEC program of Tobacco control program (%)	100	94.0	96.3	83.9	81.4	71.6

Source: NHEICC

According to NHSP-2, Health education and communication is cross-cutting 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.

6.2.6 Issues and Recommendations

Table 6.2.6 presents the issues discussed during the regional and national reviews and the recommendations to overcome these issues.

Table 6.2.6: Issues, recommendation and responsibility

Issues	Recommendation	Responsibility
Limited BCC and demand generation activities focusing to hard to reach sub- population	Develop and implement district specific BCC and Demand generation activities focusing to in hard to reach sub- population	NHEICC
IEC / BCC activity not fully integrated with behavior change	Need integration with programs	MoHP/NHEICC
Health education focal persons not identified	Revive and review of Health education Technician post	MoHP/DoHS/NHEICC

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

- 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.

6.3.3 Analysis of Achievement

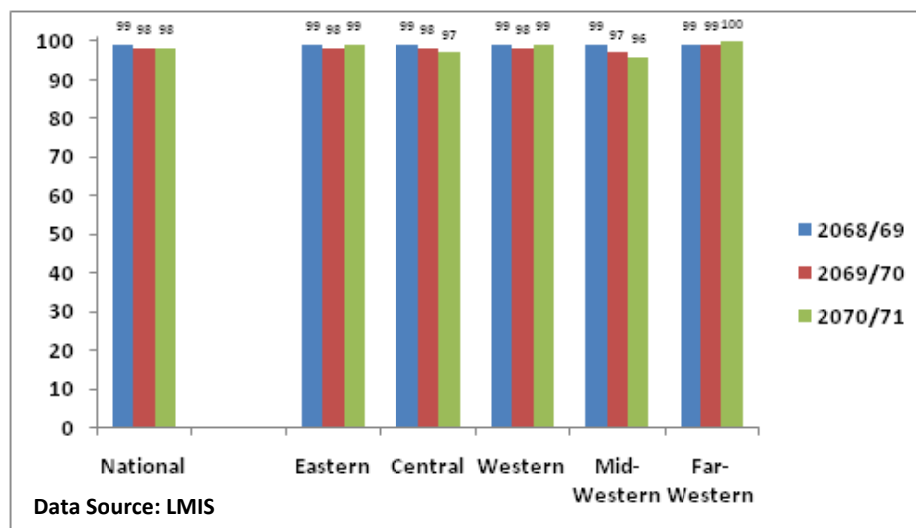
1. LMIS Reporting Status

Figure: LMIS Reporting Status

The trend of total LMIS reporting from health facilities is consistently above 95 percent over three years

The LMIS has helped to generate accurate and reliable feedback reports, thereby contributing to improve logistics functions like budgeting, quantifying,

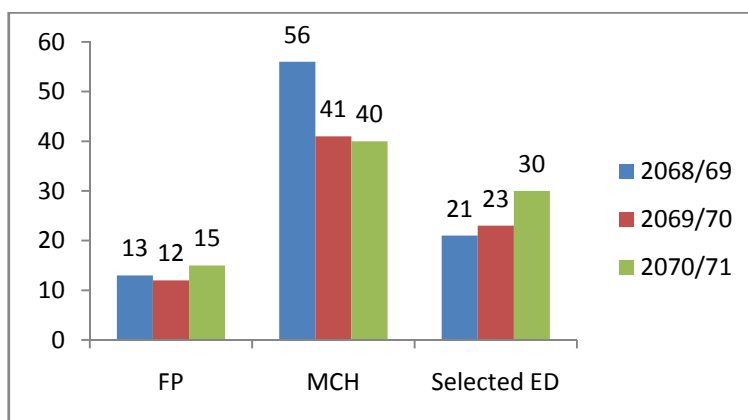
forecasting,, procurement, storage, transportation and distribution of FP, MCH commodities and essential drugs to be procured by the centre. LMIS has played a key role in reducing stock-out rates and increasing year-round availability of key health commodities through close monitoring. Similarly, LMD has implemented web-based LMIS and Inventory reporting system.



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. The stock out HF's for contraceptives and selected EDs has increased in this FY 2070/71. However stock out of selected MCH commodities has decreased. Though the demand and consumption 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.

Figure: 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

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 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

b. Consensus Forecast Meeting, 2014

Every year, the working group forecasts for coming three to five year period with periodic review. The group consists of representation from various divisions under DoHS/MoHP, districts, social marketing organizations and EDPs. This year the workshop convened on 22-24 January, 2014 with participation from public sector, social marketing sector and EDPs. The main purpose of the workshop is outlined below:

- To estimate the commodity needs and assess stock status of in-country supply pipeline so as to identify and correct supply imbalance.
- To provide data on specific commodity requirements and plan for government budget allocations.
- To support the estimation of commodity procurement cost.
- To inform donors about funding requirements and advocate for commodity procurement.
- To ensure government's commitment for Citizens Right in providing health care service.



Picture1: National Consensus Forecast Workshop 2014 – Opening Ceremony

The workshop developed a consensus on forecasting of Essential drugs, FP commodities, MNCH commodities, vaccines, syringes and HIV& AIDS commodities. The forecast was based on scientific data, which included demographic data, consumption pattern, morbidity issues and some special programmatic considerations.

The MoHP is responsible to procure health commodities, including Essential Drugs, FP commodities, MNCH commodities, vaccines, syringes, and HIV and AIDS related commodities. The MoHP share in funding of commodities has significantly increased and it is very encouraging to have this increase in financial commitment for procurement.

The workshop was highly successful in addressing issues of forecast and quantification of health commodities with some important recommendations from the participants. The workshop also incorporated other factors effecting forecasting and quantification i.e. non-prescribed drugs, replacing drugs, fast moving drugs and duplication. Recently, MOHP has updated free essential drugs list and forecasting of these items were carried out by PHCRD. The success of consensus forecast is a milestone in logistics management, but there is always room for continuous improvement.

c. Quarterly National Pipeline Review Meetings

Logistics Management Division (LMD) started pipeline monitoring of FP commodities since 1997/98. It now covers FP, MNCH, EPI Vaccines, Syringes, selected Essential Drugs and HIV/AIDS commodities as well. National pipeline reports are now used to monitor the availability of the stock at service delivery points (SDPs) and to monitor the procurement status of key health commodities, including antiretroviral (ARVs).

Supporting Programs: Logistic Management

In each quarter, a national pipeline meeting takes place at the LMD to review, monitor, and evaluate the procurement, shipment, distribution, and transportation status of family planning and other health commodities.

LMD with the support from Health for Life (H4L) Logistics 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.

d. Strengthen Storage Capacity

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.

- 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

e. Capacity Building in Logistics Management

Rapid Assessment of Current Logistics Management

LMD with support from USAID/H4L Logistics conducted assessment on current logistics to identify the gaps and challenges in the health logistics systems of Nepal in selected districts (Jumla, Bardiya, Salyan, Arghakhanchi and Kapilvastu. The dissemination of rapid assessment was organized on August 4, 2014 where Director General of DoHS, Chief of Policy, Planning and International Cooperation Division (PPICD) and all the division of Department of Health Services, donors - World Bank, DFID, UNFPA, KfW, and our implementing partners were present. H4L Logistics will seek other donor's support to mitigate the major gaps in their budget, as their current funding from USAID is not sufficient to mitigate those gaps. The recommendations of the rapid assessment that were shared in the dissemination meetings were:

- Arrange Basic Logistics and Pull System Training
- Expand Pull System across all Distribution Tiers
- Decentralized LMIS at districts level
- Reinforce Feedback Mechanism
- Provide Storage Equipment
- Improve Data Quality
- Improve the Data Access
- Pilot Innovative/Tested Model
- Improve the availability of health commodities
- Reinforce Standard Treatment Guidelines.

Curriculum Revision to include New Logistics Interventions

The Web-based LMIS Training manual, which was developed and printed in 2008, was revised to incorporate the feedbacks received from districts to make it more users friendly.

In 2008, seeing the possibilities of transforming logistics information from quarterly to monthly with the advancement of Internet technology in Nepal, Logistics Management Division took a decisive steps to implement Web based LMIS and Inventory Management System. This will help to establish a better logistics network system

between Central stores, RMSs and District stores with real time information on months of stock on hand of key FP, MCH, Essential Drugs, EPI and allied health commodities. This empowers the center, regions and districts to evidence based logistics decision making; ultimately ensuring year round availability of key health commodities and essentials drugs to the end users. This initiation not only has inspired district storekeepers but also encouraged many fellow co-workers to contribute from their side to make program successful.

Information technology is bit new and needs to be updated regularly. Similarly, storekeepers are frequently transferred and can come from any faculty. Therefore, there always a need of training on web-based LMIS to make new storekeepers familiar with the technology as well as refresh the knowledge and skills of already trained one. LMD also conducts refresher training on web-based LMIS and inventory management system for storekeepers of all 75 districts, staff of Regional Medical Stores and Regional Directorate. The objectives of the web-based LMIS Training are to:

- Train the storekeepers on Inventory Management Software and web-based LMIS
- Refresh knowledge and skills

This year a total of 175 persons were trained in web-based LMIS refresher training.



Picture2: Web Based LMIS Manual Revision Workshop 2014 – Opening Ceremony

Logistics Regional Review Meeting

Logistics Management Division (LMD) carries out Regional Logistics Review Meeting in all regions of the country to address the problems and issues faced by the districts in supply chain management of health commodities to serve the end users. The current logistics challenges and issues are discussed with district health officers in the meetings. Likewise, this is an opportunity to share district's experience last mile in supply chain and issues/challenges in supply chain management and how they dealt. Similarly, in this forum LMD can share the progress status, logistics indicators and coming year's activities as well.



Picture 3: Regional Review Meeting 2014 – Eastern Region, Biratnagar

The objectives of the Logistics regional Review Workshop is to:

- Share district's experience in supply chain management of health commodities to the peripheral level HFs
- Experience sharing in issues and challenges in logistics management
- Progress, achievements/accomplishments and upcoming year's program from the center

During the regional logistics workshop districts present on the prescribed format provided by Logistics Management Division (LMD) which covers the following areas:

- Progress status (Anusuchi 2)
- Health Facility wise estimated transportation
- Total commodities distributed in FY year 2070/71
- Estimated required quantity of commodities for FY 2071/72
- LMIS reporting status
- Situation of bio-medical instruments and equipments
- Status of repair and maintenance of biomedical equipments
- Estimated transportation cost from district to peripheral level HFs
- Transportation facility and their conditions
- Issues and challenges

The workshop has recommended the following actions to alleviate the above mentioned problems and constraints.

- LMD will forward the problem to concern ministries and planning commission for the additional required transportation budget in district.
- Strengthen supply system with coordination to center, RMSs and districts.
- LMD will coordinate with Management Division on making storage spaces and suggested to districts to send estimate to MD.
- Budget has been allocated to districts for hiring temporary staff from next year. (UNFPA support)
- Coordinate with NHTC to organize basic logistic training for newly transferred staff.
- LMD along with supporting partners will provide necessary support for auctioning and disposal.

Situation Analysis of Reproductive Health Medicines in Nepal

The situation analysis of reproductive health medicines in Nepal was undertaken to assess and understand the current dynamics of the reproductive health medicines market in Nepal and the regulatory and policy environment in which it functions. The policy and regulatory analysis was undertaken by conducting a desk review and key informant interviews. Primary data about the reproductive health medicine market was collected from private, public and social marketing stakeholders for the financial year 2011-2012.

A two-day workshop in January 2014 was held to share the findings of the analysis. The findings shared during the workshop were:

1. There are seven domestic manufacturers and 18 distributors/agents importing reproductive health medicines in the private sector and three main social marketing agencies.
2. In 2011-2012, almost 20 million units of RH medicines with a value of US\$ 12.64 million were procured. The public sector share of the market was 35% by volume and 51.5% by value; the private sector share was 54% by volume and 33% by value and the social marketing sector, 11% by volume and 15% by value. Oral hormonal contraceptives had the highest market share by volume, 9.19 million units and by value, US\$6.16 million, followed by Injectable contraceptives, by volume, 6.74 million units and by value, US\$4.37 million. Contraceptive implants had a market share of 0.6% by volume and 18.1% by value, while prostaglandins and oxytocin had a market share of 14.7% by volume and 8.9% by value.
3. There are only four products out of a total of 58 RH medicines registered in Nepal which meet the quality criteria used by GFATM and which now being included in procurement policies of several key donors and international procurement agencies for RH medicines.

The workshop generated useful information for this report but importantly generated interest in continuing information sharing through a workshop mechanism; addressing improving quality assurance mechanisms; and working with the private sector.

Orientation on SCM/PPP Model

Distribution and transportation of essential medicines, contraceptives, and other commodities has always been a challenge to Ministry of Health and Population. Due to geographical rugged terrains, many districts are still inaccessible and hence many people are deprived from life saving drugs. For this, public private partnership (PPP) can be an effective ways to solve the problem. In this process, MOHP will collaborate with a private company, who will take the responsibility of overall supply chain management in the district including store management recording reporting/reporting and transportation of health commodities up to the peripheral level health facilities in regular basis.

The MoHP/LMD is responsible to procure and distribute FP commodities, MNCH commodities, vaccines, syringes, Essential Drugs, and HIV and AIDS related commodities. LMD has initiated this intervention by empowering private partners through PPP model to handle overall supply chain management below districts. Currently, four districts have been identified for the piloting, two districts Solukhumbu and Udayapur are supported by MOHP and Morang and Kapilvastu through direct funding from UNFPA. In this process, Health for Life (H4L) Logistics staff were intensively involved in preparing draft technical and financial proposal, TOR and guidelines.

A one-day meeting on Orientation on Strengthening below district Supply Chain Management through Public Private Partnership was organized by Logistics Management Division, Department of Health Services with technical and financial support from ADRA/Nepal. The technical support from

Supporting Programs: Logistic Management

UNFPA, Health for Life (H4L) Logistics and PSI/HERA was also provided in the workshop. The participants represented the DoHS, Districts, and EDPs.

The objectives set for the workshop were as follows:

- To introduce new program, in involvement of private sector with solidarity in supply chain management in collaborative with government
- To introduce piloting districts to strengthen below district supply chain management through Public Private Partnership (Solukhumbu, Morang, Udaypur and Kapilvastu).
- Recommend possible strategies to implement program and finalization of technical proposal, financial proposal, guideline and TOR

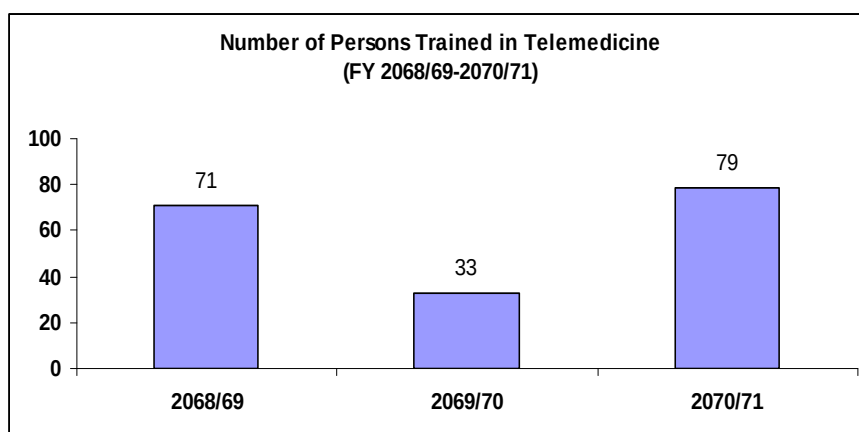
HIV/AIDS Logistics

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.

Telemedicine Program

Nepal Government Ministry of Health & Population is committed to provide quality health to the rural population with special attention to the vulnerable community. Telemedicine has been chosen as one of the most important means to achieve it.

LMD initiated and implemented Rural Telemedicine program in 30 hill and mountain districts¹. The training on Telemedicine for these districts has also been completed. A total of 183 persons were trained in telemedicine program since 2068/69.



¹ 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 Action Taken

Issues rose during the regional and national reviews during 2069/70 and action taken:

Issues	Action Taken	Responsibility
Insufficient budget for transportation	LMD has sent additional Budget in Ashad	MoHP/DoHS/ LMD
Insufficient Budget for transportation as per district rate	LMD will send Budget in total as per last fiscal year (Intial plus sent in asad)	DoHS/LMD
Budget allocation in repair and maintenance for vehicle and equipments	LMD has able to allocate budget for repair and maintenance	LMD/MD
insufficient store space in district and regional level	LMD Plan for electricity back-up for telemedicine and web-based LMIS	LMD
Budget for Web based LMIS contracts staffs Poor Reporting Status of Web Based Lmis	UNFPA will continue the contract Web Based LMIS Staffs for 75 districts and 5 RMS	DoHS/LMD./ UNFPA/ DHO/DPHO
No vehicles for transportation of medicines, equipments and materials	20 Vehicles will be procure for transportation in fy 2071/72	DoHS/LMD
No supply of essential equipments and instruments as per demands and for upgrading HF's	LMD has unable to procure essential equipments and instruments as per demands due to insufficient budget	MoHP/DoHS/LMD
Inadequate information for upgraded and newly constructed institutions and required equipments	Update about status of Constructed HF's and required equipments	MD/DHO/DPHO

Concept Note for the Restructuring of Logistics Management Division (LMD)

December 2014

1. Background

Logistics Management Division (LMD) was established under the Department of Health Services (DoHS) 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 drugs, Vaccines and other health commodities and equipments for the health facilities of government of Nepal. It also involves repair and maintenance of bio-medical equipment, instruments and the transportation vehicles. Reform of procurement of goods and services in Nepal's health sector has long been an area of concern.

The Joint Annual Review between Government of Nepal (GoN) and External Development Partners (EDPs) and a unilateral assessment of Government procurement systems by the World Bank has noted that the overall logistics system, including Procurement of health goods, Supply and storage, needed strengthening and that current procurement arrangements may need to be revised. It also noted that drug distribution - in particular from the District Health Offices (DHOs) to peripheral health facilities remained weak, resulting in frequent stock-outs.

A 'Workshop on Procurement Reform in the Health Sector' was organised by the procurement reform committee formed in DoHS/LMD on Sep 19, 2014 in Kathmandu has recommended three principles for health sector procurement improvement as below:

- i. elevate LMD within Ministry of Health and Population's (MoHP) structure and give it full authority to oversee procurement in the health sector,
- ii. Restructuring LMD and create position for professional procurement experts with clear ToR for the restructured
- iii. clearly define the long term scope of work of LMD

A brief Concept Paper to this effect was prepared and discussed among the key stakeholders. As per the suggestions of the stakeholders, this is a summary concept prepared by the Procurement Reform Committee formed by the MoHP for approval by the Ministry of Health and Population to conduct Organisation and Management (O & M) Study for the restructuring of the LMD. Detail Organisational Development Paper for the restructuring will be prepared by the O&M team as per the policy of Government of Nepal.

The government of Nepal has expressed strong commitment to address the complex set of determining factors for improving health status through reform of the existing structure. Improving efficiency, economy and transparency of procurement and the supply chain of drugs and medical equipment in Nepal's health sector is a shared goal of the Government of Nepal and external development partners (EDPs) assisting implementation of the second Nepal Health Sector Programme (NHSP-2) and upcoming NHSP III.

As standard practice, a Joint Annual Review between GoN and EDPs to assess procurement activities under NHSP-2 was conducted in January 2014. The JAR acknowledged the progress, albeit incremental, made in procurement, but its aide-memoire noted that the overall logistics system, including goods supply and storage, needed strengthening and that current procurement

arrangements may need to be revised. It also noted that drug distribution - in particular from the District Health Offices (DHOs) to peripheral health facilities - remained weak, resulting in frequent stock-outs. It further noted that the 2013 JAR had recommended the piloting of private sector contracting to improve drug distribution in 10 districts but that progress had been slow.

The 2014 JAR agreed several action points to improve procurement and some major agreements were reached in the area of procurement reform as follows:

- Carry out an assessment of the health sector procurement system based on which, explore appropriate/alternative procurement arrangements for NHSP-3.
- Jointly review MoHP's supply chain management and agree actions linking the review with the assessment of the procurement system.
- Initiate e-bidding by the end of September 2014. EDPs to support assessment of the e-bidding system prepared by Public Procurement and monitoring Office.
- Develop a policy on asset management including maintenance, replacement and disposal.

The working draft of the Nepal Health Sector Programme-3 (2015-2019) document, currently being developed by the Programme Development Team formed by the MoHP, also indicates this agenda in priority.

The consultative participatory workshop of the DoHS and Development Partners, organised on Sep 19, 2014 has also outlined next steps for the health sector reform as below:

- Preparation of a Procurement Reforms Outline Paper
- Circulate the Outline Paper to EDPs for feedback
- MoHP to approve the Outline Paper
- Prepare a draft Action Plan and organise a meeting with EDPs to finalise it
- Initiate short term and long term reforms plan as described in the Action Plan
- For longer term reforms include the Procurement Action Plan in the NHSP-3 Implementation Plan.

The government had already put in place Nepal Drug Policy, 1995 to maintain, safeguard and promote the health of people by making the country self- reliant in drug production; ensuring the availability of safe, effective, standard, and quality drugs at affordable price in quantities sufficient to cover the need of every corner of the country; and to manage effectively all the drugs-related activities including production, import, export, storage, sale, supply and distribution.

Drug Act, 2035; Drug Investigation and Inspection Rules, 2040; Drug Administration Rules, 2038 are the main policy documents which have guided the drugs management and quality assurance in the health sector. These legal requirements have to be confirmed by the health sector procurement which demands close coordination and co-work between the LMD and DDA.

The Public Procurement Act, 2063 (2007) and public procurement Regulation 2064 (2008) specifies the procedures, processes and decisions relating to public procurement. The Act aspires public procurement be much more open, transparent, objective and reliable, obtain the maximum returns of public expenditures in an economical and rational manner by promoting competition, fairness, honesty, accountability and reliability. The aim of the Act and regulation is to ensure good governance by enhancing the managerial capacity of procurement of public entities in procuring, or

causing to be procured, construction work and procuring goods, consultancy services and other services by such entities and by ensuring the equal opportunity for producers, sellers, suppliers, construction entrepreneurs or service providers to participate in public procurement processes without any discrimination. The health sector procurement has to comply with the provisions of the Public Procurement Act.

1.1 Rationale for LMD Restructuring

Nepal's initiatives on health sector procurement since last 20 years action plan have developed against the backdrop of such planning exercises, which have so far not yielded satisfactory results. It will thus be critical to learn from past experience in order to achieve meaningful results in the future. Consequently, there was always problem on downstream implementation. To ensure that mainstreaming efforts are effective it is necessary that institutional coordination mechanisms be formed to identify strategic entry points and prioritization in all relevant sectors that are likely to yield high impact with less efforts and investment.

A key prerequisite for achieving significant improvements in health sector procurement is to have sustained high level integrity leadership to create the accountability that will motivate various agencies to achieve the results for which they are responsible. The Ministry of Health and Population (MoHP), working closely with the Ministry of Finance, is well placed to create that inter/intra-ministerial accountability to coordinate the health sector procurement plan and programmes. An effective agency for the implementation of such plan and programmes are direly needed i.e. restructuring of the LMD to make it more responsive and accountable in health sector procurement and logistics management. The following are rationales:

Organizational constraints: Inconsistent staffing pattern at variance with the organisational structure of LMD and Department of Drugs Administration (DDA). Existence of inadequate skilled and trained technical human resources for procurement and quality assurance, poor and inadequate store capacity has caused delays in the preparation and execution of procurement and in the poor management and storage of procured goods once they arrive.

Procurement planning, monitoring and reporting: Consolidated Annual Procurement Plan (CAPP) has yet to be comprehensive. The CAPP does not include all drugs and equipment procurement done by district, regions, centres and autonomous and semi-autonomous health institutions/hospitals. One of the reasons for this is the lack of authority in LMD but there is also inadequate knowledge among Department of Health Services (DoHS) divisions on procurement provisions in particular specifications and the **pull system is not properly working because of the communication gap in procurement among divisions and at district level which means that good data is not available to forecast procurements**. In addition, adequate monitoring of procurement performance are not in place for any type of procurement i.e. direct purchasing, shopping, National Competitive Bidding (NCB), International Competitive Bidding (ICB), etc.

Information for strategic procurement: Information is not sufficiently available for planning and decision making. The data from LMIS is good but is paper based at the peripheral facilities and quarterly reporting system and lack of attention paid to entering data, poor reporting on inventory management at district and lower levels and there is a 3-4 month time lag in the collection of data. There is inadequate/lack of linkage between LMIS and other information systems. There is no

information system that links the planned procurements with what is already in the store and with the LMIS. It has impacted forecasting, storage and supply chain management.

Distribution of drugs and commodities: Contract management and distribution networks are not very strong. There is little communication between LMD, central/regional and district stores. Location specific transportation mechanisms have not been developed and the resource allocation for distribution of goods is also insufficient.

Financial Management: Weak internal control mechanisms has impacted delays in the decision making process and have resulted in the long time for approval of files, at tendering, supply schedule management and payment – and this has increased multi-year financial liabilities. Management of fiduciary risks has been a challenge in the health sector.

The concept note proposes innovative arrangements and approaches that bring contributions of multiple stakeholders together to advance health sector procurement, which can provide greater accountability with enhanced linkages to national-local level processes.

In summary, the rationales for the restructuring of LMD are as follows:

- To ensure timely procurement delivery of health commodities and supply & regular annual and comprehensive maintenance of equipment across the country.
- To increase internal control system to reduce fiduciary risks in procurement (malpractice, fraud and corruption).
- To put in place an effective partnership mechanism to strengthen supply-chain management.

2. Objectives

2.1 Impact

The goal of the LMD restructuring is 'to improve efficiency and effectiveness in the health sector procurement, distribution and management of drugs, equipment and services to ensure value for money'

2.2 Outcomes

The outcomes of the LMD restructuring are to:

1. Strengthen health sector procurement institutionally.
2. Improve supply-chain management to put in place an effective partnership mechanism.
3. Institutionalize the internal control system to reduce fiduciary risks in procurement.

2.3 Outputs and Activities

The following are outputs and activities to attain the goal and outcomes:

Outputs	Key Activities (areas)
1. Health sector procurement Processes/Procedures strengthened (drugs, equipment and health commodities).	1. Develop and approve standard specification and a timely update. (Adopt the standards already available-e.g. Indian). 2. Procurement plan and its strict implementation. 3. Central bidding and payment – local ordering and delivery (in pilot). 4. Agree on specifications for 70+ drugs under EDL plus vaccines and family planning commodities. 5. E-submission and use e-procurement for all procurement in health sector (including human resource). 6. Define list and volume drugs & equipment to be procured at different levels. 7. Procurement Progress and its tender tracking mechanism. 8. Overall monitoring system.
2. Capacity (Org/HR/IT/ Finance) enhanced.	9. Make arrangement of revolving funds for health sector procurement. 10. Website- publication of procurement decision. 11. Procurement of professional dedicated staff outsourced. 12. Capacity enhancement and training. 13. Establishment of Central Procurement Institution for all health sector procurement
3. Supply Chain (Infra/ Systems) made effectively functional.	14. Expansion of current regional stores. 15. Arrangement for post shipment Quality Assurance.(separate entity) 16. Real time/Live operation of LMIS at district level- monthly LMIS (IT).

6.4 Public Health Laboratory Services

6.4.1 INTRODUCTION AND 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 ongoing. 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 been 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 1300 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 has been endorsed by the cabinet, which aims to develop guidelines and standards for infrastructure, human resource, equipment reagents and kits for quality laboratory service. The policy also aims to registration and licensing of laboratories for better regulation. 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, Hongkong, Australia, UK and CDC, Atlanta on different disciplines of laboratory science.

In 2010, April 19th, NPHL has been designated as National Influenza Center (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 live stock and AICP). To collect representative samples of influenza samples from all the regions of the 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-3 lab 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 3 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 equipments. 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 MoH&P 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. As a reference lab, its responsibilities are to evaluate the testing kits for TTI to perform confirmatory test and to send proficiency panels to all BTSCs under National Quality Assurance Scheme (NEQAS) in BTS. 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.

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.

6.4.2 MAJOR ACTIVITIES

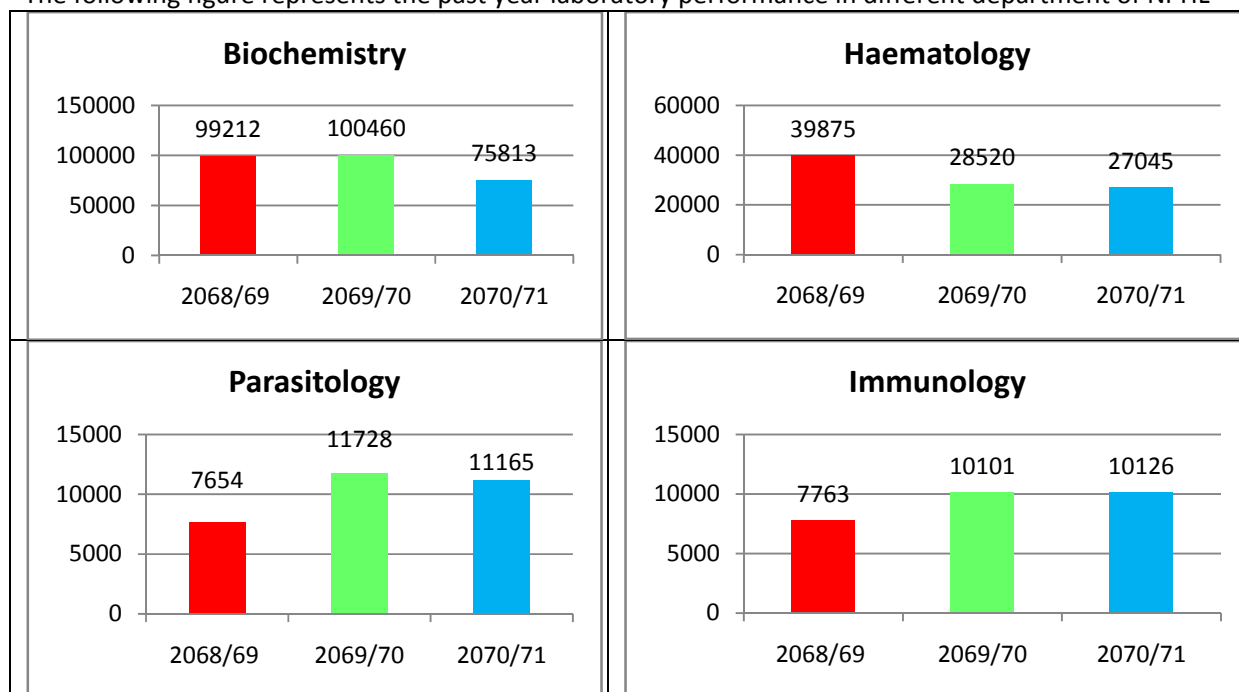
- Routine and specialized diagnostic service
- Laboratory based surveillance activities
- Training and workshops
- Logistics procurement and supply
- Laboratory refurbishment
- Supervision and Monitoring
- National External Quality Assurance Scheme

Major achievement

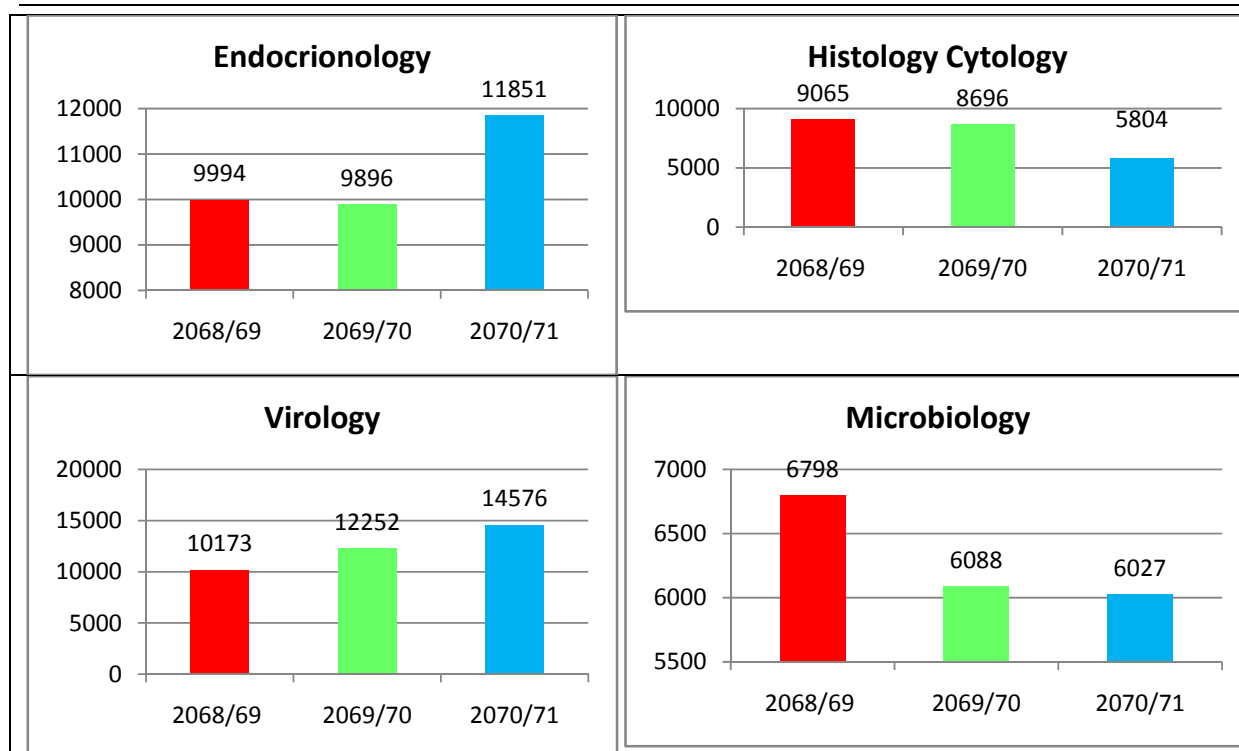
A. Routine and specialized diagnostic facilities

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.

The following figure represents the past year laboratory performance in different department of NPHL



Supporting Programs: Public Health Laboratory Services



The following figure represents the laboratory performance in different Region on FY 2070/71

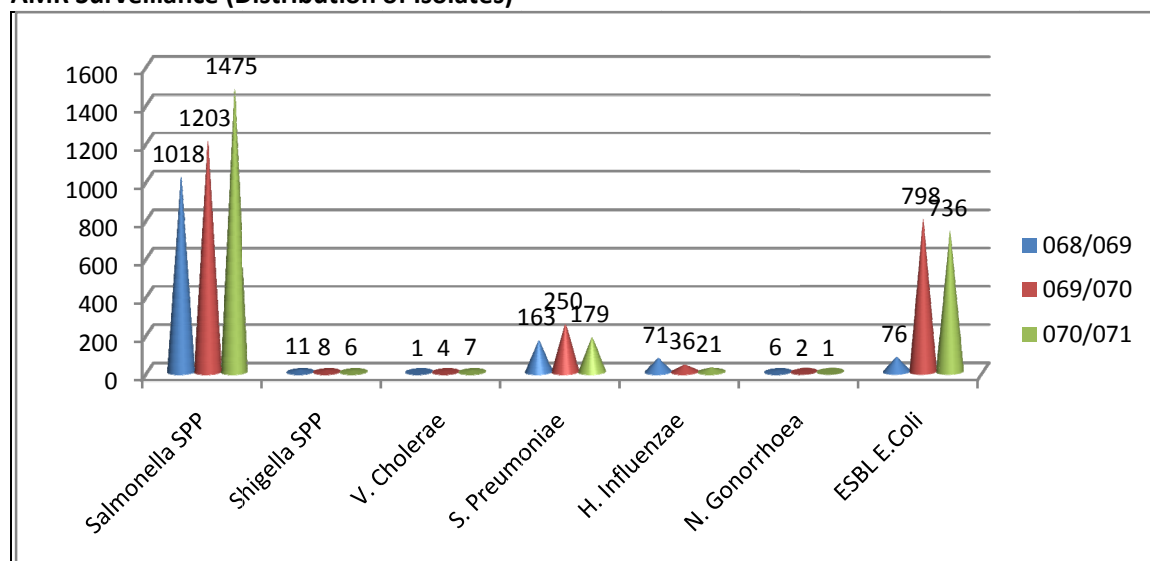
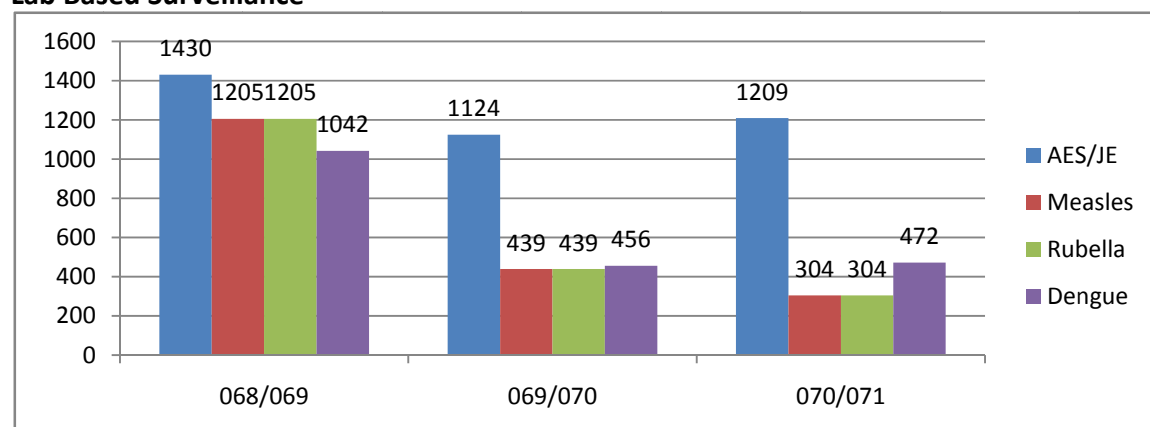
Section	Region				
	EDR	CDR	WDR	MWDR	FWDR
Bacteriology	60632	206045	59261	31300	34989
Biochemistry	609712	3458314	469031	60886	66556
Hematology	1177249	3612214	625217	88314	33393
Virology	106537	822258	72643	26099	33459
Endocrinology	27926	252599	31954	112	128
Histo/Cytology	4487	61874	3746	1341	2106
Parasitology	277291	654922	171840	87631	56092
Immunology	148222	897312	90848	47131	54252
Total	2412056	9965538	1524540	342814	280975

Source: HMIS

B. 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 count

Below are the samples analysed on the related activities.

AMR Surveillance (Distribution of Isolates)**Lab Based Surveillance****Training and workshops**

Training	Total No. of Participants
Training on Bacteriology Lab Technicians	20
Training on Quality control for laboratory staff	30
On the job training for newly appointed lab technician and lab assistant	20
Training on waste management and laboratory safety for office assistant	90
Quality control training to operational NEQAS	50
Total	210

C. Logistics procurement and supply

NPHL has been procuring the test kits/reagents and biomedical equipments. Likewise some equipment are provided by NGO/INGOs/Internal agencies. Among them, most of reagent/kits and huge bulk of equipments 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.

D. 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.

BSL III laboratory has been refurbished this year and following units were refurbished in past four years

- National Influenza center
- National JE/Measles/Rubella lab
- Collection unit
- Washing unit

E. Supervision and Monitoring

A team from NPHL goes for the supervisory and monitory 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 = 165

- Eastern Development Region: 48
- Central Development Region: 67
- Western Development Region: 24
- Mid-western Development Region: 12
- Far-western Development Region: 14

F. 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

6.5 PERSONNEL ADMINISTRATION MANAGEMENT

6.5.1 Background

Human resource being the living and key resource is pivotal of the health service delivery system. Human resource management includes the human resource planning, motivation, utilization, training and development activities of the employees. Promotion, transfers of staffs and special training provisions are also key activities of human resource management in health system. Organization is basically all about human proper placement and utilization of employees is crucial for effective implementation of the program and quality health service delivery to people.

Under the Department of Health Services the Personnel Administration Section (PAS) is responsible to operate 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 7th level, capacity building as well as internal management of human resources of personnel.

Objectives

The main objective of the section is to mobilize human resource to deliver quality health services. The specific objectives include:

- Transfer and manage all the post according to the government policy and act.
- Placement of health staffs at the sanctioned post 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;
- Perform 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.
- Recommend to MoHP for approval of special leave & education leave as per request of health workers.

6.5.2 Major activities

Distribution of Health Work Force

Ministry of Health and Population (MoHP) has a total 30,703 employees of them 24,403 are technical personnel and 6,300 are administrative staff. Department of Health Services (DoHS) has a total 23,886 work force including all five development region's health facilities and of them 196 post (technical and administrative) for all divisions and sections under the DoHS. Sanctioned and fulfilled post by types has given in tables (Table: 6.5.2 and 6.5.3).

Transfer

According to transfer schedule maintained in health service regulation, 2055 and MoHP policy, DoHS is responsible for transfer of the health workforce up to the 7th level. As requirement of health organization and demanded by health workers.

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 7th level two times a year as mentioned in regulation. DoHS also provide its employees with appropriate *Padnam* as decision of court and training.

Leave

DoHS approves different types of leaves such as house leave, sick leave, delivery leave and other leaves as per request made by health workers under and within the department. DoHS recommends to MoHP for approval of special leave and education leave which are forwarded through concerned health facilities and regional health directorate as request made by employees up to 7th level under the department, according to Nepal Health Act & Law.

New initiation

During the reporting year following new initiations has been implemented.

- File tracking system.
- Digital attendance within DoHS.
- Calender of operation (online action plan) of divisions and department.

Table 6.5.1 Type of workforce distributions at Department of Health Services, FY 2070/71

S N	Post	Grade/Level	Sanctioned	Fulfilled
1	Director General	12 th	1	1
2	Deputy Director General	11 th	1	1
3	Director	11 th (PHA)	5	5
4	Director	11 th (PHA/HI)	1	1
5	Sr./Health Administrator	9/10 th	6	6
6	Sr. Computer Officer	Gazetted II	1	1
7	Sr./Community Nursing Administrator	9/10 th	2	0
8	Sr./Public Health Administrator	9/10 th	8	8
9	Chief / Deputy Chief Medical Officer	9/10 th	1	1
10	Sr./Consultant Dermatologist	9/10 th	1	0
11	Sr./Consultant Gynae Obst.	9/10 th	1	1
12	Director / Deputy Director Sr. Demographer	Gazetted II	4	3
13	Under Secretary	Gazetted II	3	3
14	Under Secretary (Finance)	Gazetted II	1	1
15	Section Officer	Gazetted III	12	12
16	Account Officer	Gazetted III	6	6
17	Legal Officer	Gazetted III	1	1
18	Pharmacist	7/8 th	2	2
19	Sr. Public Health Officer	7/8 th	9	4
20	Medical Officer	8 th	3	3
21	Electrical Engineer	Gazetted III	2	1
22	Sr./Community Nursing Officer	7/8 th	1	0
23	Sr. Nursing Officer	7/8 th	1	0
24	Entomologist	7/8 th	1	0

Supporting Programs: Personnel Administration Management

S N	Post	Grade/Level	Sanctioned	Fulfilled
25	Computer Programmer	Gazetted III	1	1
26	Statistics Officer Demographer	Gazetted III	5	5
27	Veterinary Doctor	Gazetted III	2	2
28	Computer Officer	Gazetted III	6	6
29	Mechanical Engineer	Gazetted III	1	1
30	Computer Operator	Non Gazetted I	6	6
31	Nayab Subba	Non Gazetted I	12	12
32	Accountant	Non Gazetted I	6	6
33	Health Assistant /Public Health Inspector	5/6 th	18	18
34	Vector Control Assistant	5/6 th	2	2
35	Entomologist Assistant	5/6 th	1	1
36	Lab Technician	5/6 th	1	1
37	Immunization Supervisor	5/6 th	2	2
38	Medical Recorder Assistant	5/7 th	1	1
39	TB/Leprosy Assistant	5/8 th	1	1
40	Store Keeper (Tech)	Non Gazetted I	1	1
41	Public Health Nurse/	5/6 th	1	1
42	Kharidar	Non Gazetted II	3	3
43	Accountant Assistant	Non Gazetted II	1	1
44	Cold Chain Assistant	4/5 th	4	4
45	Lab Assistant	4/5 th	2	2
46	Malaria Assistant	4/5 th	3	1
47	Typist	As of typing speed	4	4
48	Heavy Vehicle Driver	Not Classified	2	2
49	Light Vehicle Driver	Not Classified	6	6
50	Office Assistant (Peon)	Not Classified	28	27
51	Sweeper	Not Classified	2	2
Total			196	175

Source: Personnel Administration Section, DoHS

Table 6.5.2: Work force of under Regional Health Directorate, fiscal year 2070/71

Work force of Eastern Regional Health Directorate, Dhankuta				
Designation	Sanctioned	Fulfilled	Vacant	% of vacant
Doctors	100	65	35	35
PHO	16	10	6	38
District supervisors	125	112	13	10
HA/SAHW/PHI	410	227	183	45
Staff Nurse/PHN	136	87	49	36
AHW/SAHW	2053	1562	491	24
ANM/SANM	1315	988	327	25
Lab Personnel	108	89	19	17
Admin/Finance	175	133	42	24
Other Technician (RG, DRA)	25	14	11	44
Other(Driver, OA)	555	553	2	0.3
Total	5018	3799	1219	24

Work force of Central Regional Health Directorate, Hetauda				
Organization	Sanctioned	Fulfilled	Vacant	Extra
Region & District	6283	5012	1567	296
Hospital	679	529	171	12
Grand Total	6962	5541	1738	308
Work force of Western Regional Health Directorate, Pokhara				
Designation	Sanctioned	Fulfilled	Vacant	% of Vacant
Doctors	250	132	118	47%
Paramedics	2098	1410	688	33%
Nursing staff	1352	1041	311	23%
Total	3700	2583	1117	30%
Work force of Mid-western Regional Health Directorate, Surkhet				
Designation	Sanctioned	Fulfilled	Vacant	% of Vacant
Doctors	148	56	92	62
Nursing staff	929	763	166	18
SAHW/HA/AHW	1564	1139	425	27
Lab Staff	80	56	24	30
Others Health Staff	191	60	131	69
Admin & Others Staff	771	620	151	20
Total	3683	2694	989	27
Work force of Far western Regional Health Directorate, Dipayal				
Designation	Sanctioned	Fulfilled	Vacant	% of Vacant
Doctors	77	36	41	53%
Paramedics	1131	852	279	25%
Nursing staff	607	489	118	19%
Total	1815	1377	438	24%

Source: Administrative records of all RHDs

6.5.3 Issues and Recommendations

Problems/Constraints	Action to be Taken	Responsibilities	Deadline
Inadequate training of administrative staff	Provide appropriate training	DoHS/MoHP	Within 3 months
Unclear Job Description	Develop job description and implement	RHD/DoHS/MoHP	After approved from MoHP
Performance appraisal system was not functioning properly	Performance appraisal system should be tie up with upgrading and promotion	DoHS/RHD/MoHP	As per schedule
No Registration of health institution	Institutionalized/registered	DoHS/RHD	Within 6 months
No approve salary report	Facilitate process	D/PHO, District Treasury Control Office	Within 6 months

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. 5,17,24,00,00,000 a sum of Rs. 30,43,21,96,000 (5.89%) was allocated for the health sector during the fiscal year 2071/72. Of the total health sector budget, Rs. 21,00,22,30,000 (69.02 %) 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 2070/71 (Amount in NRs. '000)

	Total	Recurrent	%	Capital	%
National Budget	517,240,000	353,417,476	68.33	163,822,524	31.67
Health Budget	30,432,196	25,255,212	82.99	5,176,984	17.01
Health Budget under DoHS	21,002,230	19,403,073	92.39	1,599,157	7.61

Source: Finance Section, DoHS

Table 6.6.2: Allocation of Budget by Source, FY 2070/71 (Amount in NRs. '000)

	Total	GoN	%	Donor	%
Health Budget under DoHS	21,002,230	11,559,333	55.04	9,442,897	44.96

Source: Finance Section, DoHS

Table 6.6.3: Regular Program Recurrent Budget, Releases and Expenditure by Programme Activities, FY 2070/71

Budget Code No	Programme Budget	Total Budget (in Rs.)		Release Budget (in Rs.)		Expenditure (in Rs.)		
		Amount	%	Amount	%	Amount	% (a)	% (b)
3700123	Department of Health	70,758,000	0.99	68,225,450	1.09	68,225,450	100	1.09
3700133	Regional Health Directorates	79,474,000	1.12	65,034,233	1.04	65,034,233	100	1.04
3700143	District Health Offices	6,224,192,000	87.44	5,463,773,917	87.00	5,463,773,917	100	87.00
3700213	Health Training Centres	35,446,000	0.50	34,361,235	0.55	34,361,235	100	0.55
3700233	Districts Hospitals	708,601,000	9.95	649,160,389	10.34	649,160,389	100	10.34
Total		7,118,471,000	100	6,280,555,224	100	6,280,555,224	100	100

Source: Finance Section, DoHS

Table 6.6.4: Regular Programme Capital Budget, Releases and Expenditure by Programme Activities, FY 2070/71

Budget Code No	Programme Budget	Total Budget (in Rs.)	%	Release Budget (in Rs.)	%	Expenditure (in Rs.)	% (a)	% (b)
3700144	District Health Offices	1,900,000	24	1,900,000	25	1,900,000	100	25
3700234	Districts Hospitals	5,950,000	76	5,581,628	75	5,581,628	100	75
Total		7,850,000	100	7,481,628	100	7,481,628	100	100

Source: Finance Section, DoHS

Table 6.6.5: Central Level Recurrent Budget Allocation by Source and Program activities, FY 2070/71

Budget Code No	Programme Budget Heading	Total Budget Allocation by Source					
		Gon	%	Donor	%	Total	%
3701133	Tuberculosis Control Programmes	94,452,000	4.92	984682000	19.26	1,079,134,000	19.26
3701143	National Aids Control	43,004,000	2.24	761,207,000	14.89	804,211,000	14.9
3701153	FP/MCH Programmes	18,400,000	0.96	640,322,000	12.52	658,722,000	12.5
3701163	Integreted CHD Programme	560,678,000	29.23	1,082,579,000	21.17	1,643,257,000	21.2
3701193	Epidemiology Programme	209,550,000	10.92	238,298,000	4.66	447,848,000	4.7
3701203	Leprosy Control Programme	25,760,000	1.34	0	0.00	25,760,000	0.0
3701213	Indent Procurement	50,845,000	2.65	481,800,000	9.42	532,645,000	9.4
3701223	Hospital Construction /Management Information System	56,760,000	2.96	166,767,000	3.26	223,527,000	3.3
3701233	NHEICC	195,157,000	10.17	186,250,000	3.64	381,407,000	3.6
3701263	Health Laboratory Services	33,311,000	1.74	36,800,000	0.72	70,111,000	0.7
3701273	Health Tax Fund	28,725,000	1.50	0	0.00	28,725,000	0.0
3701343	Monitoring and Evaluation Programme	357,348,000	18.63	0	0.00	357,348,000	0.0
3701363	PHCRD	41,900,000	2.18	480,000,000	9.39	521,900,000	9.4
3701383	Preimry Health RD Avain	19,840,000	1.03	23,410,000	0.46	43,250,000	0.5
3701243	National Health Training Centre	182,596,000	9.52	31,290,000	0.61	213,886,000	0.6
Total		1,918,326,000	100.00	5,113,405,000	100.00	7,031,731,000	100

Source: Finance Section, DoHS

Table 6.6.6: Central Level Recurrent Budget Released by Source by Program, FY 2070/71

Budget Code No	Programmes Budget Heading	Released Budget By Source					
		GoN	%	Donor	%	Total	%
3701133	Tuberculosis Control Programmes	67,303,374	5.20	388279221.00	17.99	455,582,595	13.20
3701143	National Aids Control	32,470,459	2.51	366,636,833.00	16.99	399,107,292	11.56
3701153	FP/MCH Programmes	10,961,140	0.85	235,203,024.00	10.90	246,164,164	7.13
3701163	Intregreted CHD Programme	424,726,788.00	32.83	239,391,399.00	11.09	664,118,187	19.24
3701193	Epidemiology Programme	134,577,211	10.40	39,139,918.00	1.81	173,717,129	5.03
3701203	Leprosy Control Programme	18,736,828.00	1.45	0	0.00	18,736,828	0.54
3701213	Indent Procurement	45,555,915.00	3.52	390,665,211.00	18.10	436,221,126	12.64
3701223	Hospital Construction /Management Information System	27,790,827	2.15	38,177,480	1.77	65,968,307	1.91
3701233	NHEICC	94,350,389	7.29	39,552,794.00	1.83	133,903,183	3.88
3701263	Health Laboratory Services	29,810,817.00	2.30	34,401,551.00	1.59	64,212,368	1.86
3701273	Health Tax Fund	25,509,426	1.97	0.00	0.00	25,509,426	0.74
3701343	Monitoring and Evaluation Programme	237,936,061	18.39	0.00	0.00	237,936,061	6.89
3701363	PHCRD	18,830,926.00	1.46	374,129,089.0	17.33	392,960,015	11.38
3701383	Preimry Health Avain	15,926,938.00	1.23	846,109	0.04	16,773,047	0.49
3701243	National Health Training Centre	109,283,926.00	8.45	12,113,800	0.56	121,397,726	3.52
Total		1,293,771,025	100.0	2,158,536,429	100	3,452,307,454	100

Source: Finance Section, DoHS

Table 6.6.7: Central Level Recurrent Budget Expenditure by Source and Program, FY 2070/71

Budget Code No	Programmes Budget Heading	Released Budget By Source					
		Gon	%	Donor	%	Total	%
3701133	Tuberculosis Control Programmes	67,303,374	5.20	388279221.00	17.99	455,582,595	13.20
3701143	National Aids Control	32,470,459	2.51	366,636,833.00	16.99	399,107,292	11.56
3701153	FP/MCH Programmes	10,961,140	0.85	235,203,024.00	10.90	246,164,164	7.13
3701163	Intregreted CHD Programme	424,726,788.00	32.83	239,391,399.00	11.09	664,118,187	19.24
3701193	Epidemiology Programme	134,577,211	10.40	39,139,918.00	1.81	173,717,129	5.03
3701203	Leprosy Control Programme	18,736,828.00	1.45	0	0.00	18,736,828	0.54
3701213	Indent Procurement	45,555,915.00	3.52	390,665,211.00	18.10	436,221,126	12.64
3701223	Hospital Construction /Management Information System	27,790,827	2.15	38,177,480	1.77	65,968,307	1.91
3701233	NHEICC	94,350,389	7.29	39,552,794.00	1.83	133,903,183	3.88
3701263	Health Laboratory Services	29,810,817.00	2.30	34,401,551.00	1.59	64,212,368	1.86
3701273	Health Tax Fund	25,509,426	1.97	0.00	0.00	25,509,426	0.74
3701343	Monitoring and Evaluation Programme	237,936,061	18.39	0.00	0.00	237,936,061	6.89
3701363	PHCRD	18,830,926.00	1.46	374,129,089.0	17.33	392,960,015	11.38
3701383	Preimry Health Avain	15,926,938.00	1.23	846,109	0.04	16,773,047	0.49
3701243	National Health Training Centre	109,283,926.00	8.45	12,113,800	0.56	121,397,726	3.52
Total		1,293,771,025	100.00	2,158,536,429	100	3,452,307,454	100

Source: Finance Section, DoHS

Table 6.6.8: Central Level Capital Budget Allocation by Source by Program, FY 2070/71

Budget Code No	Programme Budget Heading	Total Budget Allocation by Source					
		Gon	%	Donor	%	Total	%
3701134	Tuberculosis Control Programmes	21,300,000	7.99	180,782,000	18.46	202,082,000	16.22
3701144	National Aids Control	5,000,000	1.87	4,660,000	0.48	9660000	0.78
3701154	FP/MCH Programmes	68,000,000	25.49	74,180,000	7.57	142180000	11.41
3701164	Intregeted Child Health Programme	143,809,000	53.91	44,040,000	4.50	187849000	15.07
3701194	Epidemiology Programme	4,000,000	1.50	10,100,000	1.03	14100000	1.13
3701204	Leprosy Control	80,000	0.03	0	0.00	80000	0.01
3701214	Indent Procurement	5,200,000	1.95	535,000,000	54.62	540200000	43.35
3701224	Hospital Construction /Management Information System	1,000,000	0.37	25,100,000	2.56	26100000	2.09
3701234	NHEICC Center	360,000	0.13	0	0.00	360000	0.03
3701244	National Health Training Centre	6,000,000	2.25	1,600,000	0.16	7600000	0.61
3701264	Health Laboratory Services	11,000,000	4.12	104,000,000	10.62	115000000	9.23
3701364	Preimry Health RD	1,000,000	0.37	0	0.00	1000000	0.08
Total		266,749,000	100	979,462,000	100	1,246,211,000	100

Source: Finance Section, DoHS

Table 6.6.9: Central Level Capital Budget Released by Source by Program, FY 2070/71

Budget Code No	Programmes Budget Heading	Released Budget by Source					
		Gon	%	Donor	%	Total	%
3701134	Tuberculosis Control Programmes	9,337,993	8.10	38,955,926	8.43	48293919	8.36
3701144	National Aids Control	4,972,000	4.31	1,535,969	0.33	6507969	1.13
3701154	FP/MCH Programmes	9,613,946	8.34	55,119,099	11.93	64733045	11.21
3701164	Intregeted Child Health Programme	80,510,165	69.83	634,171	0.14	81144336	14.05
3701194	Epidemiology Programme	35,595	0.03	81,190	0.02	116785	0.02
3701204	Leprosy Control	79,891	0.07	0	0.00	79891	0.01
3701214	Indent Procurement	200,000	0.17	293,141,251	63.44	293341251	50.81
3701224	Hospital Construction /MIS	122,605	0.11	3,467,260	0.75	3589865	0.62
3701234	NHEICC Center	352,334	0.31	0	0.00	352334	0.06
3701244	National Health Training Centre	2,753,127	2.39	0	0.00	2753127	0.48
3701264	Health Laboratory Services	6,546,417	5.68	69,128,492	14.96	75674909	13.11
3701364	Preimry Health RD	762,946	0.66	0	0.00	762946	0.13
Total		115,287,019	100	462,063,358	100	577,350,377	100

Source: Finance Section, DoHS

Table 6.6.10: Central Level Capital Budget Expenditure by Source by Program, FY 2070/71

Budget Code No	Programmes Budget Heading	Released Budget by Source					
		Gon	%	Donor	%	Total	%
3701134	Tuberculosis Control Program	9,337,993	8.10	38,955,926	8.43	48293919	8.36
3701144	National Aids Control	4,972,000	4.31	1,535,969	0.33	6507969	1.13
3701154	FP/MCH Programmes	9,613,946	8.34	55,119,099	11.93	64733045	11.21
3701164	Intregeted Child Health Prog.	80,510,165	69.83	634,171	0.14	81144336	14.05
3701194	Epidemiology Programme	35,595	0.03	81,190	0.02	116785	0.02
3701204	Leprosy Control	79,891	0.07	0	0.00	79891	0.01
3701214	Indent Procurement	200,000	0.17	293,141,251	63.44	293341251	50.81
3701224	Hospital Construction /MIS	122,605	0.11	3,467,260	0.75	3589865	0.62
3701234	NHEICC Center	352,334	0.31	0	0.00	352334	0.06
3701244	National Health Training Centre	2,753,127	2.39	0	0.00	2753127	0.48
3701264	Health Laboratory Services	6,546,417	5.68	69,128,492	14.96	75674909	13.11
3701364	Preimry Health RD	762,946	0.66	0	0.00	762946	0.13
Total		115,287,019	100	462,063,358	100	577,350,377	100

Source: Finance Section, DoHS

Table 6.6.11: District Level Recurrent Budget Allocation by Source and Program, FY 2070/71

Budget Code No	Programmes Budget Heading	Total Budget Allocation by Source					
		Gon	%	Donor	%	Total	%
3708063	TB Control Program	56,200,000	2.44	107163000	3.28	163,363,000	2.93
3708013	MCH Programmes (Dolakha/Ramechhap)		0.00		0.00	0	0.00
3708023	NHEICC	103,750,000	4.50	137,377,000	4.21	241,127,000	4.33
3708033	National Health Training Centre	30,500,000	1.32	30,000,000	0.92	60,500,000	1.09
3708043	Integrated Health Services	2,112,715,000	91.73	2,989,258,000	91.59	5,101,973,000	91.65
Total		2,303,165,000	100	3,263,798,000	100	5,566,963,000	100

Source: Finance Section, DoHS

Table 6.6.12: District Level Recurrent Budget Released by Source and Program, FY 2070/71

Budget Code No	Programme Budget Heading	Released Budget by Source					
		Gon	%	Donor	%	Total	%
3708063	TB Control Programmes	48,618,012	2.53	59576375	2.47	108,194,387	2.49
3708013	MCH Programmes (Dolakha/Ramechhap)	0	0.00	0	0.00	0	0.00
3708023	NHEICC	81,317,505	4.23	9,647,152	0.40	90,964,657	2.10
3708023	National Health Training Centre	24,476,614	1.27	23,463,097	0.97	47,939,711	1.11
3708043	Integrated Health Services	1,767,552,356	91.97	2,322,890,933	96.16	4,090,443,289	94.30
Total		1,921,964,487	100	2,415,577,557	100	4,337,542,044	100

Source: Finance Section, DoHS

Table 6.6.13: District Level Recurrent Budget Expenditure by Source and Program, FY 2070/71

Budget Code No	Programme Budget Heading	Released Budget by Source					
		Gon	%	Donor	%	Total	%
3708063	TB Control Program	48,618,012	2.53	59576375	2.47	108,194,387	2.49
3708013	MCH Programmes (Dolakha/Ramechhap)	0	0.00	0	0.00	0	0.00
3708023	NHEICC	81,317,505	4.23	9,647,152	0.40	90,964,657	2.10
3708023	National Health Training Centre	24,476,614	1.27	23,463,097	0.97	47,939,711	1.11
3708043	Integrated Health Services	1,767,552,356	91.97	2,322,890,933	96.16	4,090,443,289	94.30
Total		1,921,964,487	100	2,415,577,557	100	4,337,542,044	100

Source: Finance Section, DoHS

Table 6.6.14: District Level Capital Budget Allocation by Source and Program, FY 2070/71

Budget Code No	Programme Budget Heading	Total Budget Allocation by Source					
		Gon	%	Donor	%	Total	%
3708024	NHEICC	3,000,000	1.41	0	0.00	3,000,000	0.54
3708034	NHTC District	1,000,000	0.47	0	0.00	1,000,000	0.18
3708044	Integrated Health Services	208,376,000	97.89	340,251,000	99.90	548,627,000	99.12
3708064	TB Control Programmes	500,000	0.23	345,000	0.10	845,000	0.15
Total		212,876,000	100	340,596,000	100	553,472,000	100

Source: Finance Section, DoHS

Table 6.6.15: District Level Capital Budget Released by Source and Program, FY 2070/71

Budget Code No	Programme Budget Heading	Released Budget by Source					
		Gon	%	Donor	%	Total	%
3708024	NHEICC	2,986,873	1.61	0	0.00	2,986,873	0.96
3708034	NHTC District	813,750	0.44	0	0.00	813,750	0.26
3708044	Integrated Health Services	181,183,219	97.76	126,814,613	99.76	307,997,832	98.58
3708064	TB Control Programmes	349,377	0.19	299,999	0.24	649,376	0.21
Total		185,333,219	100	127,114,612	100	312,447,831	100

Source: Finance Section, DoHS

Table 6.6.16: District Level Capital Budget Expenditure by Source and Program, FY 2070/71

Budget Code No	Programme Budget Heading	Released Budget by Source					
		Gon	%	Donor	%	Total	%
3708024	NHEICC	2,986,873	1.61	0	0.00	2,986,873	0.96
3708034	NHTC District	813,750	0.44	0	0.00	813,750	0.26
3708044	Integrated Health Services	181,183,219	97.76	126,814,613	99.76	307,997,832	98.58
3708064	TB Control Program	349,377	0.19	299,999	0.24	649,376	0.21
Total		185,333,219	100	127,114,612	100	312,447,831	100

Source: Finance Section, DoHS

Table 6.6.17: Cumulative Financial Irregularities up to 2070/71

Irregularity to be regularized	Irregularity clearance	Percent
3,05,34,59	1,19,53,63	39.15

Table 6.6.18: Irregularity Clearance Status of Last Three Years

(Rs. In Lakh)

F/Y	Total Irregularity Amount	Irregularity Clearance	Clearance %
2070/71	3,05,34,59	1,19,53,63	39.15
2069/70	2458763	901961	36.68
2068/69	2,303,545	790,223	34.30

Source: Finance Section, DoHS

6.6.3 Issues and Recommendations

Problems/constraints	Action to be taken	Responsibility
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	• Account staffs should be thoroughly oriented on book keeping and reporting formats used by of different donors • Provide computers to district level finance section and provide computer training for them	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
- support in Info Tech area related to health information, dissemination and management
- provide treatment facilities for impoverished Nepalese citizens for listed disease.

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
- 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 51 to 200 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 six sections, three units and one Upachar Kosh 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. Budget & Planning Section
3. Program Monitoring and Evaluation Section
4. Health Facilities & Quality Assurance Section
5. Information Technology (IT) Section
6. Nursing Service Development Section
7. Oral Health Unit
8. PAM Unit
9. Mental Health Unit
10. Impoverished Citizens Service Unit
11. ENT Unit (proposed)

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 20 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 using modern information technology.
- To update the HMIS tools as per need of programme divisions /centres.
- To update Geo-Information of health facilities

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

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
- Monitoring health care service delivery with special focus on essential health care services in state and non-state sector
- Supporting DPHOs and DHOs to strengthen Local Health Facility Management Committee
- Strengthen health care waste management activities in hospitals, PHCCs, HPs and SHPs

4. Health Facilities & 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
- 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 51 to 200 beds and their renewal.
- Provide suggestions during Registration Process for NGOs

5. Nursing Service Development Section

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 in collaboration with NHEICC
- co-ordinate with stakeholders and national focal point for expanding and improving the services

7. Information Technology (IT) Section

This unit support in info Tech area related to health information, dissemination and management mainly includes following:

- Dissemination of information related to health support in IT infrastructure, planning and development.
- Support in e-health and m-health programmes and activities.

8. Impoverished Citizens Service Unit

The overall objective of Impoverished Citizens Service Program is to manage treatment facilities for impoverished Nepalese citizens for listed diseases. The specific objectives of the program are;

- To provide budget up to one lakh per patient through notified Hospital for free Medication & Treatment to very severe disease as Cancer, Heart Head/Spinal injuries & Alzaimers/ Parkinsons disease.
- To provide medication cost up to one lakh for post renal transplant cases.
- To provide free dialysis services up to 104 session (for one year) per patient.
- To provide renal transplantation cost up to Two Lakh per kidney patient.

9. PAM Unit

Role and responsibility of PAM unit

- Identify status of HF buildings and medical equipments
- Recommend for construction and maintenance of health facility building.
- Maintenance of medical equipments is in operation since 3 years in Far west and Mid west region with cooperation of KFW.
- Proposed extension in remaining three regions.
- Contracted Civil Engineer, Computer Engineer and Biomedical Engineer for PAM unit.

Management Division conducts the activities related to mental health programme and proposed for ENT activities.

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, Health GIS 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. Fifteen 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 training for managing waste in the health Care facilities. This program includes orientation on overall management of health care waste including distribution of IEC/BCC materials, colored bins and related materials. Health care waste management guidelines is in place.

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. Revised HMIS incorporated the major strength of HSIS.

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).

Table 6.7.1: Summary of building construction by DUDBC (FY 2061/062 – 2070/71)

Total number of Health Facilities (HFs)	1,370
Under construction	342
Near completion	142
Completed/handed over	886
Budget allocated to DUDBC (in '000) in FY 2070/71	2,400,000
Expenditure (in '000) in FY 2070/71	1,724,230 (72%)

Table 6.7.2: Building Construction Scenario in the three consecutive years

Types of the health facility	2068/69	2069/70	2070/71
Health post with Birthing Center	80	0	115
Doctor's Quarter	15	0	20
Staff quarter	10	0	25
PHCC	10	0	5
Birthing center	25	0	12
District health store	10	0	2
BEOC building	10	0	1
CEOC building	0	0	1
Public health office building	10	0	10
District hospital building	0	0	4

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	Approved, Implementing
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 Completed
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
2069/70	SHP to HP	500	O & M going on
2069/70	SHP to PHC to Hospital	20	O & M going on
2069/70	SHP/HP/PHC to Hospital	6	O & M going on
2070/71	SHP/HP to PHCC	5	O & M going on
2071/72	SHP/HP / PHCC to Hospital	10	O & M going on

- Central regional health directorate building 1
- FWDR Health Training Centre Conference Hall 1
- SBA Training Centre 1
- Postmortum House 12

h) Approval to Private Health Facilities

Management Division processes documents for approval to private health facilities.

6.7.3 Major activities carried out in FY 2070/71

Following are the major activities conducted by management division mentioned in the annual work plan and budget of fiscal year.

- Conduction of 20th National Annual Performance Review Meeting, 2070/71
- Revision of HMIS tools and conduction of training on revised tools throughout the country.
- 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 2069/70 (2012/13) of DoHS
- 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
- Orientation and training on health care waste management to DHOs/DPHOs staffs

Supporting Programs: Management

Fund provided for 8250 Impoverished Citizens:

SN	Hospitals	Types of Free Treatment Services				
		Cancer	Heart	Kidney	Parkinsons /Alzheimer	Head /spinal injuries
1	Bir Hospital, Kathmandu	645	-	221	5	3
2	TU,Teaching Hospoital, Kathmandu	53	-	229	2	-
3	BPKISH, Dharan	35	53	191	-	51
4	Patan Hospital, Lalitpur	31	-	74	-	2
5	Civil Hospital, Kathmandu	70	-	-	-	-
6	Bhaktapure Hospital, Bhaktapur	1056	-	-	-	-
7	Bharatpur Hospital, Chitwan	2089	-	-	-	-
8	Cancer Care Hospital, Chitwan	70	-	-	-	-
9	Gangalal Heart Hospital. Kathmandu	-	872	-	-	-
10	Monmohan Hospital, Kathmandu	-	553	-	-	-
11	Humanorgan Transplant, Bhaaktapur	-	-	230	-	-
12	National Kidney Centre, Kathmandu	-	-	450	-	-
13	National Dialysis Centre, Kathmandu	-	-	89	-	-
14	Nepal medical collage, Kathmandu	-	-	84	-	-
15	B & B Hospital, Lalitpur	-	-	16	-	-
16	Arogya Hospital, Lalitpur	-	-	49	-	-
17	Chitwan Medical College, Chitwan	-	-	59	-	-
18	Medical Science College, Chitwan	-	-	111	-	-
19	Koshi Zonal Hospital, Biratnagar	-	-	35	-	-
20	Gandaki Medical College, Pokhara	-	-	16	-	-
21	Manipal Medical College, Pokhara	-	-	87	-	-
22	Western Regional Hospsital, Pokhara	-	-	53	-	-
23	Nepalgunj Medical College, Nepalgunj	-	-	46	-	-
24	Impoverished Citizens Service Unit. DoHS	-	-	620	-	-
Total		4,049	1,478	2,660	7	56
Percentage		49.08%	17.92 %	32.24%	0.08%	0.68%
Grand total		8,250 (100%)				

Management Division had 105 activities in the fiscal year 2070/71, out of which major are listed in Annex 1. Overall physical and financial progress scenario is as given below table.

Physical achievement		Financial achievement (in 000)	
Total Activities	: 105	Total Budget allocated	: 249,627
Activities conducted	: 63	Total budget received	: 201,927
Activities not done and cause		Budget nor received from Partners	: 47,700
- Budget not received from Partners	: 17	Total Expenditure (through MD)	: 91,585
- Activities not conducted	: 25	Financial progress	: 45%
Physical Progress	: 49 %	(of the received budget)	

6.8 PRIMARY HEALTH CARE REVITALIZATION

6.8.1 Background

PHC is a strategic movement for the achievement of “Optimum health for all”. PHC needs to be expanded throughout the country for achieving the universal health coverage (UHC).

In Nepal, PHC has a long history that was reinforced by the Declaration at Alma Ata. It was mainstreamed in 1991 National Health Policy endorsing PHC as a major service 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.

The Second Long Term Health Plan (1997-2017) of Nepal has also 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 availability of basic health services to all Nepalese citizens as addressed by the Interim Constitution of Nepal.
- Assure 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 with special consideration for the poor/ultra-poor, destitute, disabled, senior citizens and Female Community Health Volunteers (FCHV). Subsequently, in 2009 (Jestha 2065), Ministry of Health and Population (MoHP) established a new division (Primary Health Care Revitalization Division) under the Department of Health Services. The PHCRD is envisaged to revitalize PHC services in Nepal by addressing the unaddressed and unmet issues of PHC. The Division carries out the following programs:

- National Free Health Services
- 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 Nepali population, especially of the poor and excluded. It will support the nation to poverty reduction through provision of equitable and accessible 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 increase access to and utilization of available health services
- To implement community health insurance, urban and environmental health programs.
- To Plan, Monitor and evaluate PHC related programs

Strategy

- Support establishing of urban health centers.
- Continue Community Health insurance program.
- Provide free health care services packages.
- Organize Health camps in rural and hard to reach area.
- Equity and access.
- Carry out Social audit of Health facilities.
- Establish model healthy villages and Community Health Unit.
- Promote rational use of drug using Standard Treatment Protocol.

Specific Objectives and Strategies as per thematic focuses of the Division are as below:

Component 1 National Free Health Care Program	Component 2 Social Health Protection	Component 3 Urban and Environmental Health	
▲	▲	▲	▲
Objective 1 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	Objective 2 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	Objective 3 To provide quality essential health care services to the municipal population at accessible delivery points through urban health clinic in partnership with MoFLD/ Municipality	Objective 4 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
Strategy 1. Develop and ensure implementation of comprehensive essential health care services package considering the below • Program communication • Rapid expansion of the package • Community participation • Strengthening accountability, integration & reduce verticality 2. Appoint a focal person for PHCRD 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 Social Insurance Health Insurance Strategy 2. 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 stakeholders 2. IEC for integrated messages (link with behavior change) 3. Institutional arrangement as best practice for WASH 4. Support community people to increase awareness on importance of ODF

6.8.2 Major activities accomplished

The following activities were carried out in the fiscal year 2070/71

- Impact study on national free health program.
- Appreciative inquiry based orientation on GESI for district level staffs.
- Social audit conducted in 40 districts.
- Budget allocated for listed drugs in district.
- Community health units established (42 community health units in different districts).
- Training on Ear problem for district health workers.
- Standard Treatment Protocol printing.
- Social audit program orientation.
- Environment health promotion program Implementation
- Supervision monitoring
- Training for urban health center health workers
- FCHV day celebration
- Equity and Access program
- Marginalized disadvantage group (DAG) VDC program
- Rational use of drug
- Senior citizen programs Specialized health camp in five districts of five development regions

6.8.3 Analysis of Achievement

It is estimated that about 70% people in Nepal utilized public health services in 2070/71. Among the total reported morbidity cases (21489531), 76.85 percentage of population were found utilizing free health care services (Table 1). This information shows that remarkable chunk of people utilize the free health care services. As expected 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%. Among health facilities, the free health service provided by HP/SHP is 90.58%, free health care service provided by PHCC and Hospital are 5.17% and 3.25% respectively.

Table 6.8.1: Utilization status of free health care services, FY 2070/71

SN	Indicators	Achievement	
		(Number)	(Percentage)
1	Number of Persons utilizing free health services among total number of OPD morbidity (21,489,531)	16515544	76.85
2	Number of Persons utilizing free health OPD services	16180367	98
3	Number of Persons utilizing free health emergency services	111269	0.67
4	Number of Persons utilizing free health indoor services	48151	0.2
5	Referral cases among total number of utilizing free health services	175757	1.0
6.	Population of age 60 yrs and above utilizing free health services by SHP/HP/PHCC	2281745	13.8

Source: HMIS

The free health care services provided to the target groups are as below:

The total OPD patients served by the hospitals were 450767; emergency patients were 50,058; indoor patients were 32431; and referral cases were 4146. Thus the total number of patients utilizing free health services was 537492.

Table 6.8.2: Hospital free health care service utilization status by targeted groups, FY 2070/71

ServiceTarget group	OPD	Emergency	Indoor	Refer	Total
Ultra-poor destitute	257062	28492	20297	2274	196217
Poor	88288	9138	5125	489	127126
Disable	10745	1968	682	143	11790
Senior citizen	86938	8951	5516	1029	68722
FCHV	7734	1509	811	211	10704
Total	450767	50058	32431	4146	537402

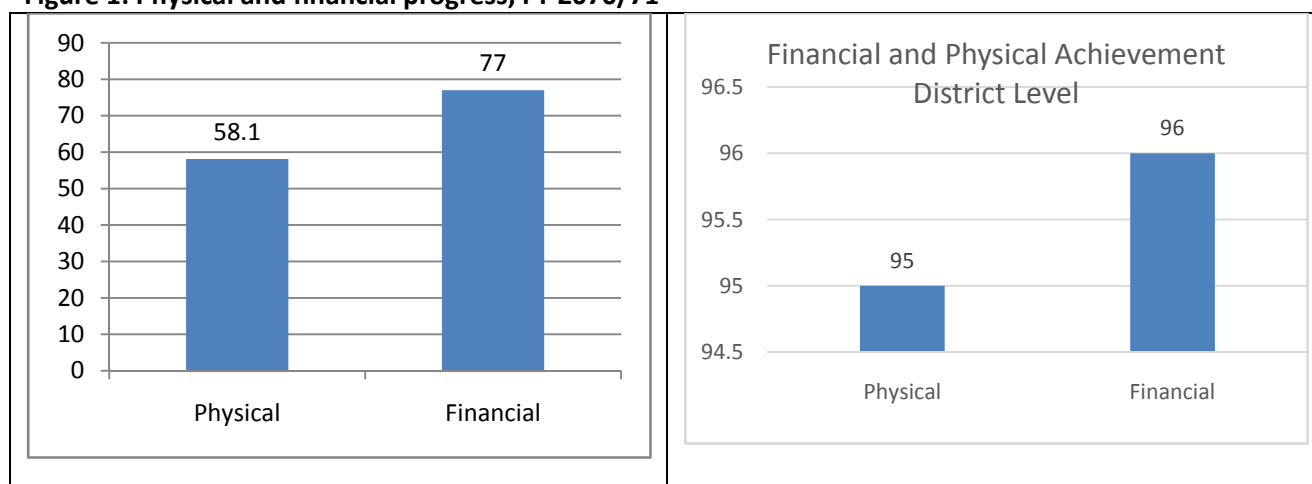
Source: HMIS

Community Drug Program (CDP) was initiated in FY 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.

6.8.4 Physical and Financial Progress

Physical and financial progress made by PHCRD central level in FY 2070/71 is 58.1 percent and 77 percent respectively. Physical achievement is very low as compared to financial expenditure because of Managerial problems.

Figure 1: Physical and financial progress, FY 2070/71



In District level, financial and physical achievement seems approximately equal. The different is due to the report not from Municipalities. Millions of money are in municipalities without use.

6.8.5 Issues and Recommendations

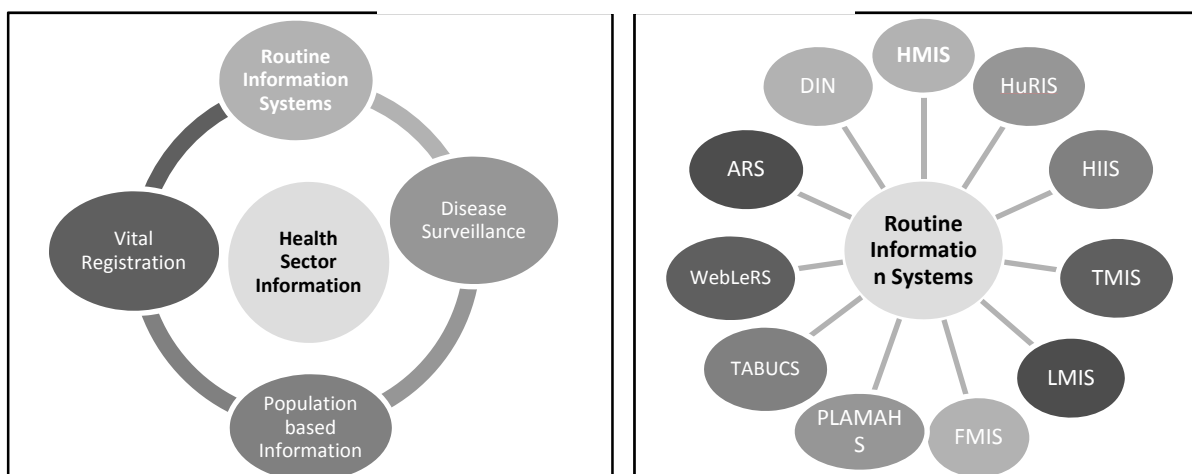
Issues	Recommendation	Responsibility
Urban health center building construction not completed in many Municipalities.	Appropriate budget and adequate budget to be allocated by PHCRD and Municipalities.	PHCRD/ DoHS/MoHP/MoFALD/Municipalities
Temporary urban health centers staffs	Developed policie to make urban health center staffs parmanent.	PHCRD/ DoHS/MoHP/MoFALD/Municipalities
Poor coordination between D/PHO and Municipality and No Health Indicators in MCPM of MOFLD	Urban Health policy submitted for approval.	PHCRD/ DoHS/MoHP/MoFALD/Municipalities
High demand of UHC	Joint effort of Municipalities and D/PHO	PHCRD/ DoHS/MoHP/MoFALD/Municipalities
More demand of Integrated Community Health Units	Increase Number of Districts and budget to be increased in yearly basis.	PHCRD/MoHP/ DoHSLocal Governance
Yearly contract for NGO implementing EAP is procedurally	File memo for multi-year contract submitted for approval.	PHCRD/MoHP/ DoHS
Social audit program only in limited districts	Increase Number of districts and budget.	PHCRD/MoHP/ DoHS

MONITORING AND EVALUATION

7.1 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 7.1). There are eleven MISs located within the health sector: 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); Web-Based Leprosy Reporting and Management System (WeBLERS); Ayurveda Reporting System (ARS); and Drug Information Network (DIN). Ministry of Health and Population (MoHP) is working towards developing unified codes for the health facilities and creating an environment that allows interoperability between these information systems.

Figure 7.1: Health information systems



7.2 Strengthening Health Management Information System

The current Health Management Information System (HMIS) is in the process of revision and the revised system has been rolled out to all 75 districts from the beginning of fiscal year 2071/72.

The revised HMIS has been designed to:

- bring HMIS in line with the HSIS National Strategy, in regards to:
 - enabling selected indicators to be disaggregated by caste/ethnicity
 - revising the reporting process to enable facility level data reporting
 - ensuring they are suited to both public and non-public facilities
- ensure the data needs of all programmes (family health, child health, epidemiology and disease control, HIV/AIDS, leprosy, tuberculosis, health laboratory and curative services) are met.
- integrate vertical reporting systems (Aama Programme, Emergency Obstetric Care (EOC) monitoring, community based neonatal care programme (CB-NCP), nutrition, HIV/AIDS and tuberculosis programmes) into HMIS

- minimise the burden on staff and any duplication of work
- ensure the same recording and reporting tools and reporting processes are used in all 75 districts
- enable electronic data entry at district and hospital level and web-based reporting to central level
- disaggregate 11 selected indicators by caste / ethnicity
- disaggregate hospital mortality and morbidity data by age, sex and cause
- make the tools more user-friendly
- improve data quality
- improve use of HMIS data at different levels for monitoring and planning purposes
- provide evidence to inform strategic and policy level decisions, such as the design of the forthcoming sectoral plan (NHSP-3)

Management Division is moving towards porting the revised HMIS into DHIS2 (District Health Information System) platform, a free and open source software developed by University of Oslo. Management Division is working towards building local capacity in setting up the system; customization; and its administration and use at different level with support from development partners and University of Oslo.

7.3 Mapping of Health Facilities and Health Services

A Geographical Information System (GIS) based mapping of health facilities and health service availability was initiated in 2009. 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. This helps in preparation of a sound base for spatial-enabled analysis. This year the mapping has been completed for all 75 districts.

7.4 Country Accountability Roadmap Nepal (CARN)

Ministry of Health and Population is implementing Country Accountability Roadmap Nepal (CARN) to strengthen health information, monitoring, review and planning systems to make health systems more accountable towards people's need. The seven thematic areas of the roadmap are – 1) civil registration and vital statistics, 2) monitoring of results, 3) maternal death surveillance and response, 4) e-Health and innovation, 5) monitoring for resources, 6) review and planning, 7) advocacy and outreach.

Major achievements during the FY 2070/71:

- Comprehensive assessment of CRVS was completed, and is serving as the basis for the development of a strategic plan
- MoFALD and MoHP identified 10 collaborative districts to strengthen CRVS mobilizing health facilities, workers and community health volunteers. MoHP is allocating regular budget to strengthen the system to mobilize local health workers, volunteers and health facilities to increase registration coverage of birth and death, and to generate cause-of-death data.
- Standard certificates of birth and death (inline with WHO recommendations) developed and implemented in all districts with a focus on 10 collaborative districts.
- Maternal and Perinatal Death Surveillance and Response Guidelines and Operational plan developed.
- Safe motherhood policy revised incorporating 24 hour maternal death notification and surveillance provisions.
- Facility maternal and perinatal death review system expanded in 42 hospitals.

- MPDSR Steering Committee reformed.
- Quality improvement tool and assessment checklist developed with the help of development partners.
- Verbal autopsy questionnaire to collect cause of death data of community death adapted and translated into Nepali.
- DHIS-2 has been customized to fit the revised HMIS reporting and analysis.
- Institutionalization of the eHealth unit is in process and the development of a strategy has been initiated.
- MoHP has conducted a fourth round of National Health Accounts this fiscal year, with technical support from WHO and GIZ. Private sector and NGOs participated in data collection, analysis and preparing estimates and reports.

The ongoing major strategic activities are:

- CRVS strengthening activities in 10 collaborative districts – Solukhumbu, Sunsari, Sindhupalchowk, Chitwan, Lamjung, Rupandehi, Banke, Jumla, Kailali and Baitadi.
- Establishment of cause of death data system implementing medical certificate of death and verbal autopsy for community deaths.
- Pilot test of the complete package of the maternal and perinatal death surveillance and response system.
- Improving quality of care
- Development of M&E framework of NHSP-III
- National eHealth strategy 2015 – 2020
- Advocacy with parliamentarians, civil society and journalists.

7.5 Surveys

There is increasing demand for nationally-representative, comprehensive and disaggregated data to gauge performance, identify inequalities between social groups and geographic areas, plan future interventions, enable the Nepal Health Sector Programme (NHSP) to be monitored and provide evidence to inform strategic and policy level decisions and plans. There have been a number of population and health facility based surveys to produce information that are not generated by routine information systems. Nationally representative population level surveys such as Nepal Demographic and Health Surveys (NDHS) has been institutionalized in Nepal and is conducted every five years. The next series of NDHS is planned in early 2016. Central Bureau of Statistics (CBS) conducts Multiple Indicator Cluster Survey (MICS) in every five years, generally between the two series of NDHS. MICS 2014 is underway and the final report is expected by end of December 2014.

Nationally representative health facility-based survey is yet to be institutionalized in Nepal. In 2010, the Ministry of Health and Population (MoHP) conducted an annual health service tracking survey (STS) to track the results of the NHSP2 results framework, 2010-2015. This survey was continued in 2011, 2012 and 2013. STS has been very important source to monitor and plan sectoral programmes, however, MoHP and External Development Partners (EDPs) have felt need to standardize and making the survey more comprehensive and providing disaggregated analyses.

Harmonization of national health sector surveys for rationale allocation of scarce resources has been a priority agenda for MoHP and EDPs for some time. Following this spirit, now there has been a consolidated effort from MoHP and EDPs to harmonize health sector surveys that are currently being conducted and that are in plan by various organizations.

Monitoring and Evaluation

MoHP, with support from USAID, DFID, WHO, UNFPA and other partners, has started planning for a Nepal Health Facility Survey (NHFS) combining the good essence of the Service Tracking Surveys; the Service Provision Assessment (SPA) being done globally with support from USAID/ICF International; the Service Availability and Readiness Assessment (SARA) being done globally with support from WHO; and various surveys supported by other development partners (e.g. Facility Assessment for Reproductive Health Commodities and Services being done by UNFPA).

The NHFS 2015 will include assessment of the following:

- Availability of essential health care services by facility types and by geographic-development regions
- Situation of infrastructure, supplies and essential medicines
- Quality of services delivered by the health facilities [for key services]
- Client perception, feedback and accountability systems
- Capacity on financial management, inventory management and personnel management

MoHP has already initiated implementation of NHFS 2015. Final report is due in early 2016.

7.6 Monitoring NHSP2 Results Framework Indicators

The Nepal Health Sector Programme-II (NHSP-II) (2010-2015) started in 2010 to implement the national health strategies with the following three main objectives: to increase access to and utilization of quality essential health care services; to reduce cultural and economic barriers to accessing health care services and harmful cultural practices in partnership with non-state actors; and to improve the health system to achieve universal coverage of essential health care services (EHCS). This section assesses the performance of the NHSP-2 in terms of progress from baseline 2010 towards achieving the targets set for 2015 in the results framework.

The main sources of information for monitoring the progress are Health Management Information System (HMIS), Census 2011, Nepal Demographic and Health Survey (NDHS) 2011, Multiple Indicator Cluster Survey, 2014 (MICS, 2014), Service Tracking Surveys (STSs) and administrative records from the Ministry of Health and Population. For some indicators there are no data sources for 2014. Hence, some achievements could not be compared with the targets.

To illustrate progress, indicators where the targets for 2015 have already been met are shaded in green, while indicators achieving at least 90 percent of the 2015 target are shaded in orange, and those where less than 90 percent of the target has been met are shaded in red color.

Level of progress	Colour
Achieved 100% or more progress against 2015 target	Green
Achieved between 90% and 99.9% progress against 2015 target	Orange
Achieved less than 90% progress against 2015 target	Red
No data for 2014/2015	Blue

Goal: Improved health and nutritional status of people, especially the poor and excluded

Scan improved health and nutritional status of people, especially the poor and excluded							
Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 target	Progress in 2014		
		Data	Source		Data	Source	
G1	Total Fertility Rate (per woman)	3	NHSP-2, 2010	2.5	2.3	NMICS 2014	
G2	Adolescent Fertility Rate (women aged 15-19 years, per 1,000 women in that age group)	98	NDHS-2, 2006	70	71	NMICS 2014	
G3	Under-five Mortality Rate (per 1,000 live births)	55	NHSP-2, 2010	38	38	NMICS 2014	
G4	Infant Mortality Rate (per 1,000 live births)	44	NHSP-2, 2010	32	33	NMICS 2014	
G5	Neonatal Mortality Rate (per 1,000 live births)	33	NDHS 2006	16	23	NMICS 2014	
G6	Maternal Mortality Ratio (per 100,000 live births)	250	NHSP-2, 2010	134	190	WHO estimate 2014	The MMR for 2010 is an estimated linear decline from 539 in 1990-96 and 281 in 2000-06; it is not generated from survey data. The 2011 census shows 481. The methodology for census and NDHS (sisterhood direct method) differ and hence are not strictly comparable. In absence of survey data, WHO estimates are used for 2014.
G7	HIV prevalence among men and women aged 15-24 years (per 100,000 population)	0.12 M=0.2 F=0.05	EPP/Spectrum modeling, 2010	0.06	NA		Prevalence of HIV, total (population ages 15-49): 0.2 (UNAIDS estimate; World Development Indicators, 2014): http://data.worldbank.org/indicator/SH.DYN.AIDS.ZS
G8	Malaria annual parasite incidence rate (per 1,000 population in one year)	0.16	HMIS 2010/11	Halt & reverse	0.15	HMIS 2013/14	
G9	% of children under five years of age who are stunted	49.3	NDHS 2006	28	37.4	NMICS 2014	Minus two standard deviations of the median height for age of the WHO standard. NDHS 2011: 40.5
G10	% of children under five years of age who are underweight	34	NHSP-2, 2010	29	30.1	NMICS 2014	Minus two standard deviations of the median weight for age of the WHO standard. NDHS 2011: 28.8
G11	% of children under five years of age who are wasted	13	NDHS 2006	5	11.3	NDHS 2011	Minus two standard deviations of the median weight for height of the WHO standard. NDHS 2011: 10.9
G12	% of low birth weight babies	14.3	NDHS 2006	12	24.2	NMICS 2014	NDHS 2011: 12.4 – The percentage of live births in the five years preceding the survey that have a reported birth weight of less than 2.5 kg. NMICS: Percentage of live births in the two years preceding the survey that have a reported birth weight of less than 2.5 kg.
Note: NA = Not available							

Purpose: Increased utilization of health services, and improved health and nutritional behaviour of the people, especially by the poor and excluded

purpose: increased utilization of health services, and improved health and nutritional behaviour of the people, especially by the poor and excluded							
Code	Indicator	NHSP-2 (2010 – 2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
P1	% of infants breastfed within one hour of birth	35.4	NDHS 2006	60	48.7	NMICS 2014	NDHS 2011: 44.5
P2	% of infants exclusively breastfed for 0-5 months	53	NDHS 2006	60	56.9	NMICS 2014	NDHS 2011: 69.6
P3	% of one-year-old children immunized against measles	86	HMIS 2009/10	90	92.6	NMICS 2014	
P4	% of children aged 6-59 months who have received vitamin A supplements	90	HMIS 2009/10	≥90	90.4	HHS 2012	NDHS 2011: 90.4
P5	% of children aged 6-59 months suffering from anaemia	48	NDHS 2006	43	NA		NDHS 2011: 46.2; No survey with anaemia test in 2014
P6	% of households using adequately iodised salt	77	NHSP-2, 2010	88	81.5	NMICS 2014	NDHS 2011: 80
P7	Contraceptive prevalence rate (CPR) – modern methods (%)	48	NHSP-2, 2010	67	49.6	NMICS 2014	NDHS 2011: 43.2; NMICS 2014; key findings includes modern or traditional contraceptive methods; HMIS 2013/14: 45
P8	% of pregnant women attending at least four antenatal care (ANC) visits	35.2	NHSP-2, 2010	80	59.5	NMICS 2014	NDHS 2011: 50.1
P9	% of pregnant women receiving Iron/Folic Acid (IFA) tablets or syrup during last pregnancy	59.3	NDHS 2006	90	72	HMIS 2013/14	NDHS 2011: 79.5
P10	% of deliveries conducted by a skilled birth attendant (SBA)	18.7	NDHS 2006	60	55.6	NMICS 2014	NDHS 2011: 36
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)	NA		50	6	HHS 2012	NMICS gives % of women who received postnatal check-up within 2 days after delivery of their most recent live birth in the last 2 years (57.9) Revised HMIS has been collecting this data from fiscal year 2014/15 onwards.
P12	% of women of reproductive age (WRA) (15-49) with complications from safe abortions (surgical and medical)	58.4	NDHS 2006	7	NA		NDHS 2011: 49 (includes all abortion); Revised HMIS has been collecting this data from fiscal year 2014/15 onwards.
P13	Prevalence rate of leprosy (%)	0.77	HMIS 2009/10	Halt and reverse	0.83	HMIS 2013/14	
P14	Obstetric direct case fatality rate	NA		<1	0.09	HMIS 2013/14	Total institutional maternal deaths reported/total institutional deliveries x 100

Outcome 1: Increased and equitable access to quality essential health care services

Outcome 1: Increased and equitable access to quality essential health care services							
Code	Indicator	NHSP-2 (2010 – 2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OC1.1	% population living within 30 minutes travel time to a health post (HP) or sub-health post (SHP)	50	NHSP-2, 2010	80	34.9	HHS 2012	NLSS 2010/11: 61.8
OC1.2	% of population utilizing outpatient services at SHPs, HPs, primary health care centres (PHCCs) and district hospitals	76	HMIS 2009/10	Proportion to population size	79	HMIS 2013/14	No specific target is set for these indicators so the achievements are not colour coded.
OC1.3	% of population utilizing inpatient services at district hospitals (all levels of hospitals)	9.15	HMIS 2009/10		9	HMIS 2013/14	
OC1.4	% of population utilizing emergency services at district hospitals (all levels of hospitals)	16.14	HMIS 2009/10		17	HMIS 2013/14	
OC1.5	Met need for emergency obstetric care (%)	31.0	HMIS 2008/09	49	23	HMIS 2013/14	
OC1.6	% of deliveries by caesarean section (CS)	3.6	HMIS 2008/09	4.5	8.6	NMICS 2014	NMICS: % of women with most recent live birth in last 2 years delivered by caesarean section.
OC1.7	Tuberculosis treatment success rates (%)	89.7	HMIS 2009/10	90	90	HMIS 2013/14	
OC1.8	% of eligible adults and children currently receiving antiretroviral therapy (ART)	NA		80	NA		EPP/Spectrum modelling & Routine ART monitoring report 2013/14, NCASC

Outcome 2: Improved health systems to achieve universal coverage of essential health care services

Outcome 2: Improved health systems to achieve universal coverage of essential health care services							
Code	Indicator	NHSP-2 (2010 – 2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OC2.1	% of children under five with diarrhoea treated with zinc and oral rehydration salts (ORS)	6.6	NHSP-2, 2010	40	18.2	NMICS 2014	NDHS 2011: 5.2
OC2.2	% of children under five with pneumonia who received antibiotics	25.1	NDHS 2006	50	40.8	HMIS 2013/14	NMICS: % of children under age 5 with ARI symptoms in the last 2 weeks who received antibiotics: 74.9
OC2.3	Unmet need for family planning (%)	24.6	NDHS 2006	18	25.2	NMICS 2014	NDHS 2011: 27
OC2.4	% of institutional deliveries	17.7	NDHS 2006	40	55.2	NMICS 2014	NDHS 2011: 35.3
OC2.5	% of women who received contraceptives after abortion care	50.8	HMIS 2009/10	60	24.3	HMIS 2013/14	
OC2.6	% of clients satisfied with their health care provider at public facilities	68.4	NHSP-2, 2010	80	99	FARHCS 2014	STS 2011: 96
OC2.7	Tuberculosis case detection rate	75	HMIS 2009/10	85	83	HMIS 2013/14	

Outcome 3: Increased adoption of healthy practices

Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OC3.1	% of children under five in high-risk areas who slept under a long-lasting insecticide-treated bed net (LLIN) the previous night	67.8	PSI TRac Study	80	83	PSI 2013	HHS 2012: 10.4
OC3.2	% of key populations at high risk of HIV reporting the use of condoms at last sex:				NA		
	Female sex workers (FSWs)	NA		85	NA		
	Male sex workers (MSWs)	37.8	IBBS 2009	80	NA		
	Men who have sex with men (MSMs)	75.3	IBBS 2009	80	NA		
	People who inject drugs (PWID)	NA		80	NA		
	Male labour migrants (MLMs)	53	IBBS 2010	80	NA		
OC3.3	% of PWID reporting the use of sterile injecting equipment the last time they injected	NA		≥95	NA		
OC3.4	% of households with hand washing facilities with soap and water nearbythe latrine	NA		85	72.5	NMICS 2014	NMICS: % of households with a specific place for hand washing where water and soap or other cleansing agent are present

Output 1: Reduced cultural and economic barriers to accessing health care services

Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OP1.1	% of women utilizing the Female Community Health Volunteer (FCHV) fund (among WRA)	5	HMIS	10	6	HMIS 2013/14	
OP1.2	Number of health facilities providing adolescent-friendly health services	0	FHD 2010	1000	1154	FHD 2013/14 (Admin. record)	
OP1.3	% Health Facility Operation and Management Committees (HFMOCs/Hospital Development Management Committees (HDMCs) with at least 3 female members and at least 2 Janajati and Dalit members	NA		100	7.6	FARHCS 2014	

Output 2: Improved sector management

Output 2: Improved sector management							
Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OP2.1	% EDPs providing Official Development Assistance (ODA) on rolling 3-year period basis	NA		90	NA	PPICD 2013/14	
OP2.2	% of health sector aid reported by the EDPs on national health sector budgets	NA		85	NA	MoF Red Book, AWPB	
OP2.3	% of actions documented in the action plan of the aide-memoire completed by the next year	NA		100	NA	PPICD 2013/14	
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	NA		100	NA	PPICD 2013/14	

Output 3: Strengthened human resources for health

Output 3: Strengthened human resources for health							
Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OP3.1	% of sanctioned posts that are filled:						
	Doctors at PHCCs	NA		90	66.7	FARHCS 2014	STS 2011: 50
	Doctors at district hospitals	NA		90	66.7	FARHCS 2014	STS 2011: 69
	Nurses at PHCCs	NA		90	88.9	FARHCS 2014	STS 2011: 74
	Nurses at district hospitals	NA		90	93.3	FARHCS 2014	STS 2011: 83
OP3.2	% of district hospitals that have at least one Doctor of Medicine General Practitioner (MDGP) or Obstetrician/Gynaecologist (Obs/Gyn), five nurses (SBA trained), and one Anaesthetist or Assistant Anaesthetist (AA)	NA		80	0	HFS 2014	STS 2011: 13
OP3.3	Number of production and deployment of:				NA	HuRIS	
	SBA	2,562		7,000	NA		
	MDGPs	NA		56	NA		
	Anaesthetists	NA		44	NA		
	Psychiatrists	NA		56	NA		
	Radiologists	NA		55	NA		
	Physiotherapists	NA		20	NA		
	Physiotherapy Assistants	NA		70	NA		
	Radiographers	NA		100	NA		

Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
	Assistant Anaesthetists	NA		62	NA		
	Procurement specialists	NA		7	NA		
	Health legislation experts	NA		3	NA		
	Epidemiologists	NA		7	NA		
	Health economists	NA		7	NA		
	Health governance experts	NA		3	NA		
OP3.4	Number of FCHVs	48,514	HMIS 2007/08	53,514	51,470	HMIS, 2013/14	

Output 4: Improved service delivery

Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OP4.1	Number of One-stop Crisis Management Centres (OCMCs) to support victims of gender-based violence (GBV)	NA		20	16	Pop. Division, PHCRD 2013/14	Pop. Div., 2011: 6
OP4.2	Number of HPs per 5,000 population	NA		1	0.27	HMIS 2013/14	HMIS 2010/11: 0.12
OP4.3	Number of PHCCs per 50,000 population	NA		1	0.37	HMIS 2013/14	HMIS 2010/11: 0.37
OP4.4	Number of district hospital beds per 5,000 population	NA		1	1.40	HMIS 2013/14	HMIS 2010/11: 1.06
OP4.5	% of districts with at least one public facility providing all Comprehensive Emergency Obstetric and Neonatal Care (CEONC) signal functions	NA		76	47	FARHCS 2014	STS 2011: 39
OP4.6	% of PHCCs providing all Basic Emergency Obstetric and Neonatal Care (BEONC) signal functions	NA		70	31.4	FARHCS 2014	STS 2011: 14
OP4.7	% of HPs with birthing centre	NA		≥80	84.3	FARHCS 2014	STS 2011: 79
OP4.8	% of safe abortion (surgical and medical) sites with post-abortion long-acting family planning services	NA		≥90	65.1	FARHCS 2014	STS 2011: 91
OP4.9	% of HPs with at least five family planning methods	NA		60	20.6	FARHCS 2014	STS 2011: 13
OP4.10	% of households in all high-risk areas with at least one long lasting insecticide treated bed net per two residents	95	NHSP-2, 2010	≥90	NA		HHS 2012: 10.5 PSI 2013: 78% people had used an LLIN at home the previous night
OP4.11	% of key populations at high risk group (sex workers, MSMs, PWID, MLMs) reached with HIV prevention programmes				NA	IBBS	
	Female sex workers (FSWs)	NA	IBBS	80			

Monitoring and Evaluation

Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
	Male sex workers (MSWs)	93.3	IBBS 2009	95			
	Men who have sex with men (MSMs)	77.3	IBBS 2009	80			
	People who inject drugs (PWID)	NA	IBBS	80			
	Male labour migrants (MLMs)	22.9	IBBS 2010	80			
OP4.12	% of PHCCs with functional laboratory facilities	87.2	HFMS 2010	100	41.7	FARHCS 2014	FARHCS 2014
OP4.13	% of public hospitals, PHCCs, and HPs that have infrastructure as per GoN standard					HIIS 2014	
	Hospitals	NA		80	32	HIIS 2014	
	PHCCs	NA		80	91	HIIS 2014	
	HPs	NA		80	16	HIIS 2014	

Output 5: Increased health knowledge and awareness

Output 5: Increased health knowledge and awareness			NHSP-2 (2010–2015)				Remarks	
Code	Indicator		Baseline		2015	Progress in 2014		
			Data	Source	Target	Data		Source
OP5.1	% of WRA (15-49) aware of safe abortion sites		50	NDHS 2006	50	NA		NHDS 2011: 58.8: HHS 2012: 28.2 No population based survey to report this indicator for 2014
OP5.2	% of WRA (15-49) who know at least three pregnancy-related danger signs		NA		50	NA		HHS 2012: 55.2% No population based survey to report this indicator for 2014
OP5.3	% of WRA (15-49) giving birth in the last two years aware of at least three danger signs of newborns		NA		50	NA		HHS 2012: 44.9% No population based survey to report this indicator for 2014
OP5.4	% of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS by sex	Female	NA		40	36.4	NMICS 2014	NDHS 2011: Female: 25.8; Male: 33.9 NMICS: % of young women age 15-24 years who correctly identify ways of preventing sexual transmission of HIV, and who reject major misconceptions about HIV transmission
		Male	NA		50			

Output 6: Improved M&E and health information systems

Code	Indicator		NHSP-2 (2010–2015)					Remarks
			Baseline		2015 Target	Progress in 2014		
			Data	Source		Data	Source	
OP6.1	% of timely and complete data on annually reportable M&E framework indicators reported by the end of December of the following year		NA		100		PHAMED 2013/14	
OP6.2	% of health information systems implementing (using) uniform standard codes		0	HMIS 2009/10	100	0	PHAMED 2013/14	Uniform standard codes will be implemented from FY 2014/15
OP6.3	% of tertiary and secondary hospitals (public and private) implementing the tenth version of the International Classification of Diseases (ICD-10) and reporting coded information to the health information system	Public	NA		100	100	HMIS 2013/14	HMIS 2010/11: Public: 65
		Private	NA		100	NA		
OP6.4	% of health facilities (public and private) reporting to the national health information system (by type or level)	Public	82.5	HMIS 2009/10	100	98.8	HMIS 2013/14	Out of the total 691 reporting Private institution a total of 6563 reports were received in the FY
		Private	64.7	HMIS 2009/10		79.43		

Output 7: Improved physical assets and logistics management

Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OP7.1	% of public health facilities with no stock outs of the listed free essential drugs in all four quarters	76.7	LMIS 2009/10	90	15.9	FARHCS 2014	
OP7.2	% of the budget allocated for operation and maintenance of the physical facilities and medical equipment	NA	AWPB	At least 2 %	NA	AWPB 2013/14	

Output 8: Improved health governance and financial management

Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OP8.1	% of health facilities that have undertaken social audits as per MoHP guidelines in the last fiscal year	0	PHCRD, 2010	25	51.5	FARHCS 2014	STS 2011: 31
OP8.2	% of MoHP budget spent annually	81.37	e-AWPB, 2007	86	75.1	FMR 2013/14	94.1 in 2012/13
OP8.3	% of budget allocated to district and below facilities (including flexible health grants)	57.6	E-AWPB, 2009	70	53.57	AWPB 2013/14	Includes PHCCs, district hospitals, Ayurved Hospitals/Aushadhalayas, and district programmes
OP8.4	% of irregularities (<i>Beruju</i>) among total public expenditure	NA		4	NA	(Audit report) OAG 2013/14	Office of auditor general, 2011: 6.2
OP8.5	% of District Health Offices (DHOs) receiving budgeted amount within one month of budget disbursement from MoHP/Department of Health Services (DoHS) with clear-cut guidance for expenditure	NA		100	NA	MoHP 2013/14	Finance Section DoHS/MoHP, 2011: 100

Output 9: Improved sustainable health financing

Code	Indicator	NHSP-2 (2010–2015)					Remarks
		Baseline		2015 Target	Progress in 2014		
		Data	Source		Data	Source	
OP9.1	% of MoHP budget allocated to EHCS	75.4	e-AWPB 2009	75	69.8	FMR	
OP9.2	% of health sector budget as % of total national budget	7.1	MoF (Red Book)	10	5.4	MoF Red Book 2013/14	
OP9.3	% of government allocation (share) in total MoHP budget	52.2	e-AWPB 2009	70	65.6	MoF Red Book 2013/14	

Other Departments

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8.1 DEPARTMENT OF DRUG ADMINISTRATION

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.

2. 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.

3. STRATEGIES

- Selection of essential medicine to promote rational use of medicines.
- Establishment of regional offices at all five regions for effective decentralization.
- Strengthening of National Medicines Laboratory (NML) as an Independent Medicine Control Laboratory.
- Medicine registration based on scientific facts.
- Promotion of rational use of medicines.

DEPARTMENT OF DRUG ADMINISTRATION

- 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)

4. SECTIONS AND BRANCH OFFICES OF DEPARTMENT OF DRUG ADMINISTRATION AND THEIR FUNCTIONS

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

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.

ANALYSIS OF ACHIEVEMENTS BY MAJOR ACTIVITIES**Activities carried out in FY 2070/71 (2013-2014)**

- 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 Nepalses National Formulary.
- Development of Good Manufacturing Practice Regulation (Draft).
- Revision of National Medicine Policy (Draft).
- Revision of SOP (Draft).
- Revision of National List of Essential Medicines.

Target Vs Achievement, FY 2070/71

S.N.	Activities	Unit	Target	Achievement	Achievement in %
1	Drug information to the public by different media	Number	58	55	94.8 %
2	Publication of Drug Bulletin of Nepal	Number/ issue	15000 (3 issues)	15,000 (3 issues)	100 %
3	Inspection of Pharmaceutical Industries	Number	100	117	117 %
4	Inspection to drug retailers & wholesalers	Number	2000	2451	122.5 %
5	Drug Analysis	Number	700	687	98.14 %
6	Audit of Pharmaceutical Analytical Laboratories	Number	24	21	87.5 %
7	Inspection of Foreign Companies	Times	4	4	100 %

6. FINANCIAL ALLOCATION AND EXPENDITURE

- Allocated Budget (in Rs. '000'): 28515.00
- Expenditure (in Rs. '000'): 26366.00
Percentage of expenditure: 92.46 %
- Revenue Collection (in Rs. '000'): 21431.9

7. CONSTRAINT

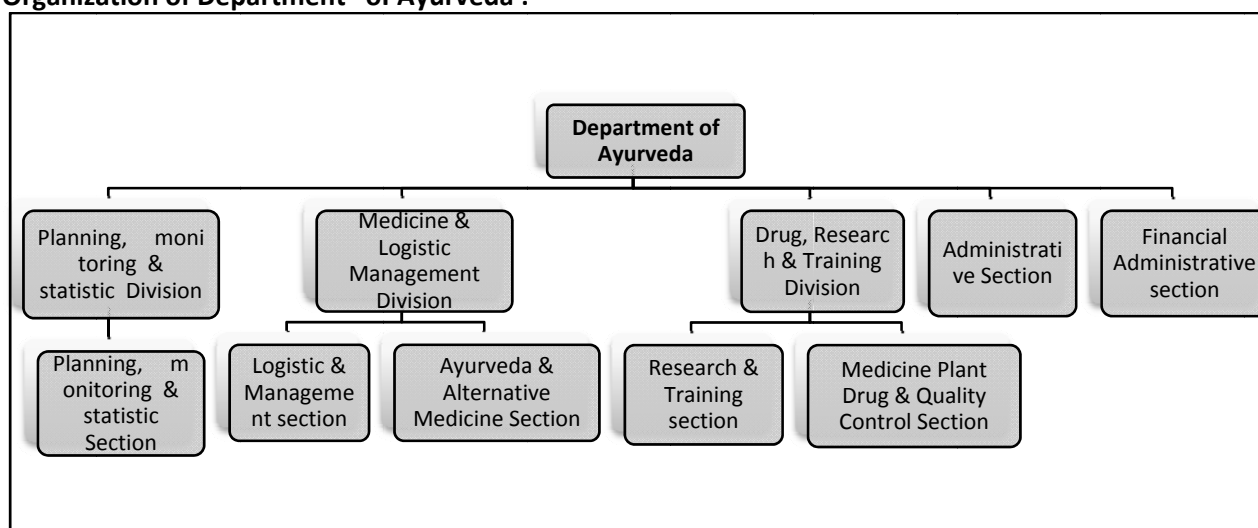
- Human resources for effective inspection

8.2 AYURVEDA

8.2.1 Background

Ayurveda is the most ancient medical science based on the herbal, minerals and animal products. At present Ayurveda health services are being delivered through two Ayurveda Hospitals with capacity of one 100+18 at Naradevi, Kathmandu & other 30 beds at 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 Ayurveda and other alternative system of medical. Department of Ayurveda (DoA), one of the three departments within the Ministry of Health and Population, was established in 2038 B.S.

Organization of Department of Ayurveda :



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

- To Provide preventive, promotive & curative health services in the rural areas;
- To Establish & develop of Ayurveda institutions;
- To Strengthen & expand the Ayurveda health services;
- To Develop skilled manpower required for various health facilities;
- To Strengthening of monitoring & supervision activities;
- To Development of information, education & communication center in the Department;
- To Develop Inter sectoral co-ordination with Education Ministry, Forestry, and local development sector & other NGO's & INGO's;
- To establish regional Ayurveda Hospitals & Ayurveda Dispensaries;
- To Strengthening & expansion of research & training center at international level;
- To Provide national & International level training for the capacity development of its human resources

Major Activities

Central level

- Procurement & payment of essential Ayurveda drugs & its transportation to districts.
- Free health camps conducted on Shivaratri festival as well as on five districts outside Kathmandu valley- Sarlahi, Bara, Nawalparsai, Sindhupalchok & Tanahu.
- Annual performance review meeting.
- Panchakarma & Yoga ToT Programme for Ayurveda physician
- Refresher Training to the district office chief
- Orientation and Training of Janapadoddyawms management to Ayurveda physician & Kaviraj
- Panchakarma, yog & statistics training to Kaviraj & Vaidhyas.

District level

- Partial completion of construction of twenty office buildings .
- Ayurveda medicine, First-aid and surgical equipments supplied to all health facilities.
- Repaired existing buildings and compound walls in district and local levels.
- Ayurveda medicine preparation were continued at rural Ayurveda Pharmacy and district.
- Utilization of the locally available medicinal herbs and its supply to Ayurveda institution in its regions by Ayurveda Health center.
- Promotion of Panchakarma/Rasayan/Yoga programme among older population
- Awareness program about medicinal plants
- Program for lactating mother (Distribution of galactagogue 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
- Inservice computer training
- Conduction of rural outreach clinic

Analysis of Achievement

Based on the treatment report of different Ayurveda institutions following diseases were classified as top ten diseases:

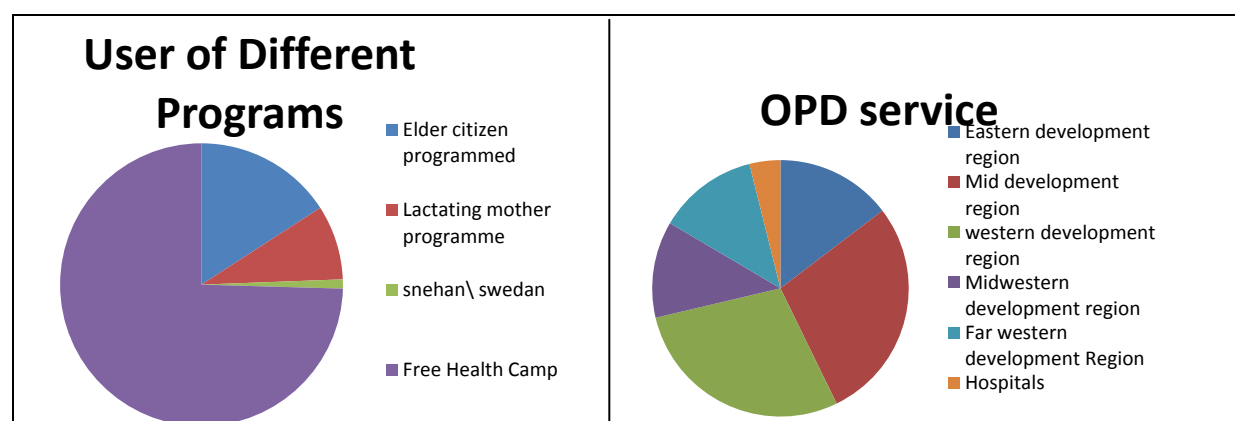
- Amlapitta (Gastritis)
- Udar rog (Abdominal diseases)
- Swasan Bikar (Respiratory diseases)
- Vata vyadhi (Arthritis, Rheumatic Arthritis etc. diseases)
- Jwar (Pyrexia)
- Bal rog (Pediatric diseases)
- Karna, Nasa, Mukha, Danta & Kantha rog (ENT, Oral, Dental diseases)
- Stri rog (Gynecological diseases)
- Brana (Wound, Abscess)
- Atisar/Grahani (Diarrhea diseases)

Service Statistics

Table shows the number of people served at various regions and zones by sex in 2070/71. 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 2070/71.

S.N	Particular	Patients data							total
		EDR	CDR	WDR	MWDR	FWDR	Hospitals	free health camp by DoA	
1	OPD service	132121	253739	257373	109664	113924	35120	0	901941
2	Elder citizen program	2502	2691	2673	2191	2129	0	0	12186
3	Lactating mother program	1439	1364	1524	1492	769	0	0	6588
4	snehan\ swedan	381	33	200	188	0	0	0	802
5	Free Health Camp	12500	13388	10573	9915	7337	0	3636	57349
	Total	148943	271215	272343	123450	124159	35120	3636	978866



Financial Allocation and Expenditure in 2070/71

Topic	Allocation (NRs)	Expenditure (NRs)	% Expenditure
Ayurved bibhag (3700253)	15,427,815	11,715,618	75.94
Ayurved Chikitsalayharu/ Aushadhalayharu (3700263)	468,104,000	353,591,849	75.54
Ayurveda Sewa karyakarm (370809-3\4)	238,959,000	217,841,542	91.16
Bibidh karyakarm-Ayurved vibhag (370129-3\4)	71,925,000	17,328,058	24.09

7.2.4 Problems/Constraints

Problems/Constraints	Actions to be taken	Responsibility
No provision for higher study for BAMS Ayurveda doctors	☐ Establish PG institution in Nepal ☐ Recognition of BAMS course of Nepal by foreign country (India)	MOHP/MOE/MOFA
Lack of experts and inadequate qualified manpower.	Production of Qualified Ayurvedic manpower(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.	☐ Provide good furniture & dispensing materials ☐ Training on storage & dispensing.	DOA/MOHP/MOE
Lack of inter sector co-ordination.	☐ Co-ordination with related ministries, NGO's & INGO's ☐ Increase qualified manpower.	DOA/MOHP/MOE
Lack of community based program for publicity of Ayurveda.	☐ Increase manpower production. ☐ Allocate budget.	DOA/MOHP/MOE
Lack of workshop, training & seminar on planning for Ayurveda.	☐ Allocate necessary budget, develop long term policy & plan on Ayurveda	DOA/MOHP/MOE
Lack of appropriate recording & reporting system.	☐ Establish statistics section under department of Ayurveda with sufficient budget. ☐ Train employee on recording & reporting.	DOA/MOHP/MOE
Inadequate staffing under Department of Ayurveda.	☐ Recruitment & placement as per need.	MOGA/PSC
Formal Justification about the successful treatment of certain incurable disease with Ayurveda therapy claimed by practitioners.	☐ Goal formation. ☐ Allocate budget.	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 & IPD services to the patients and six beds are available for Indoor patients along with meal free of cost. The hospital is processing for upgrade from six to twenty five beds.

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 67,082 patients were visits for treatment in the fiscal year 2070/71.

Description of Patients Visited in Hospital, FY 2070/71

Particular	Number of patients
General Medicine	38,245
Skin	17,198
E.N.T.	3,344
Eye	1,411
Dental	1,396
Gyn/Obs.	1,166
Other	4,322
Total patients	67,082

Summary of Financial Allocation and Expenditure

Fiscal Year	Regular Budget in Rs	Development Budget in Rs	Total Budget in Rs
2068/69 (2011/2012)	7,077,000	1,800,000	8,877,000
2069/70 (2012/2013)	8,858,000	2,000,000	10,858,000
2070/71 (2013/2014)	8,963,000	2,000,000	10,963,000

8.3.2 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.

Development Partners

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DEVELOPMENT PARTNERS

The outcomes discussed in the previous chapters are the results of combined efforts of Ministry of Health and Population and development partners (multilateral, bilateral and international organizations 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), Government of Australian, 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 NHSP 2, the disbursements from the pooled funding partners till FY 2013/14 were as follows:

- World Bank: USD 98.9million disbursed for the NHSP 2 till date (out of total committed USD 129.15 million)
- DFID: GBP 43.8 million (USD 70 million) disbursed to NHSP 2 till FY 2013/14 (out of a total commitment of GBP 72.5 million (USD 116 million). DFID disbursed £18 million (USD 28.9 million) under pooled fund arrangement and £4.18 million (USD 6.71 million) as a Technical Assistance to NHSP II in FY 2013/14.
- KfW: KfW under German Financial Cooperation contributed Euro 1.76 million in the Pool Fund in fiscal year 2013/14. Under NHSP II Pool Fund arrangement, the cumulative till date amounts to Euro 4.3 million out of a total commitment of Euro 10 million. Additional Euro 800,000 was disbursed through the on-going Sector Program Health and Family Planning which also includes the co-financing of maintenance of medical equipment in the Mid West and Far stern Regions of the country.
- GAVI: During fiscal year2013/14 GAVI disbursed \$ 4,996,135. With this the GAVI grant is fully disbursed. Further commitment from GAVI depends on Nepal's new application, yet to be made, and its formal approval by GVAI.

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	Health sector budget for 2013/14	Contact details
UNFPA	• Adolescent Sexual and Reproductive Health (ASRH). • Family Planning. • Safe-Motherhood (including midwifery and RH Morbidities) • HIV/AIDs & STI • Emergency preparedness and response in health sector • Family Planning commodities and essential RH medicines to MoHP, IPPF/FPAN and MSI	National Programme with focus on 18 priority districts: Saptari, Sarlahi, Rautahat, Mahottari, Sunsari, Dang, Rukum, Rolpa, Pyuthan, Arghakhanchi, Kapilvastu, Dadeldhura, Baitadi, Bajura, Bajhang, Sindhuli, Udahapur and Achham	Allocated Budget: FY 2013/14: USD 2,417,500 (National level allocation) Expenditure: July 2013-July 2014: USD4,647,237.00 National expenditure – 2249,200.00 GPRHCS (HQ fund for commodities)=2,398,037.00	Office address: UNFPA Nepal Jhamsikhel, Lalitpur. Tel: +977 1 5523880 Fax: +977 1 5523985 Email :registry-np@unfpa.org Web: http://countryoffice.unfpa.org/nepal
UNICEF	• Child Health • Maternal and Newborn health • HIV/AIDS (PMTCT and Pediatric HIV) • Adolescent Health • Nutrition • Health System Strengthening	Health intervention districts: National with focus on 15 priority districts: Five special districts Nutrition intervention districts: 19	Committed Budget: USD 5.4 million Expenditure: USD 6.5 million	UNICEF Nepal, UN House, Pulchowk, Lalitpur Tel: 5523200 Fax: 5527280 Email: kathmandu@unicef.org Web: http://www.unicef.org/nepal
World Bank	Health system	National	USD 98.9million disbursed for the NHSP 2 till date (out of total committed USD 129.15 million)	The World Bank Nepal Country Office The Yak and Yeti Complex Durbar Marg PO Box 798 Kathmandu
WHO Nepal	HIV/AIDS, TB, Malaria, NTD, Vaccine Preventable diseases, Non Communicable diseases, Mental Health, Nutrition, Maternal Child health, Gender, Adolescent health, Geriatric health, Environmental health, Health policies and strategic plans, Health services, Drugs and Diagnostic, Epidemic pandemic and response, outbreak and management, Emergency health, Food safety	National	On budget – USD 2,78,671 Off budget - USD 8,66,556	WHO Country Office Nepal UN House, Pulchowk, Lalitpur

9.2 BILATERAL ORGANIZATIONS

Organization	Major program focus	Geographical coverage	Health sector budget for 2013/14	Contact details
Department for International Development (DFID)	Health system	National	£18 million (USD 28.9 million) disbursed under pooled fund arrangement and £4.18 million (USD 6.71 million) as a TA to NHSP II in FY 2013/14.	Ekantakuna, Lalitpur, Nepal GPO: 106 www.gov.uk/government/world/organisations/dfid-nepal
Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)	- Quality Management of Health Service and Decentralization - Health Financing and Social Health Protection - Adolescents Sexual and Reproductive Health (ASRH)	Achham, Doti, Kailali, Dadeldhura, Baitadi in Far-Western Region Jumla, Dailekh, Surkhet, Bardiya, Dang, Banke in Mid-Western Region Dhading in Central Region	Allocated Budget: Euro 980,000	MoHP-GIZ Health Sector Support Programme (HSSP), Teku, Kathmandu Tel: 4261404 Fax: 4261079 Email: hssp@giz.org.np Web: GIZ.de/nepal
	HIV Prevention for the High Risk Group of Injecting Drug Users (Harm Reduction Programme) June, 2011-June, 2014	Zonal, Regional or District Hospitals in Rupendehi, Kaski, Morang, Banke, Kathmandu, Lalitpur	Euro 750,000	
USAID <i>Project and Partners:</i> <i>Suaahara/Save the Children, GharGhar Ma Swasthya /Contraceptive Retail Sales, GharGhar Ma Swasthya /FHI360, Saath-Saath project/FHI360, Health for Life/RTI International, Maternal and Child Health Umbrella Grant /UNICEF, Chlorhexidine Navi Care Project /JSI Research & Training Institute, Inc., ENVISION /RTI International, H4L logistic/Life line Nepal, STRIDE/Handicap International, DHS/ ICF International & New ERA</i>	Maternal Newborn and Child Health	Nationwide,+ focused program in 41 districts	US \$ 11,173.52	USAID, U.S. Embassy Maharajgunj, Kathmandu G.P.O Box 295 Tel: 01-4007200 Fax: 01-4007285 http://nepal.usaid.gov
	Family Planning & Reproductive Health	Nationwide,+ focused program in 69 districts	US\$ 9,815.59	
	Nutrition	41 Districts	US\$ 2,315.61	
	HIV/AIDS and STI	Nationwide,+ focused program in 33 districts	US\$ 12,000	
	Neglected tropical and vaccine-preventable Diseases	Nationwide	US\$ 1,717.2	
	Logistics and supply chain management	Nationwide	US\$ 441.25	
	WASH	27 Districts	US\$ 1033.06	
	Disabilities	26 Districts	US\$ 601.8	
	National population-based surveys and capacity building	26 Districts	US\$ 601.8	
	Others: National population-based surveys and capacity building		US\$ 800	

9.3 INTERNATIONAL NON-GOVERNMENT ORGANIZATIONS

Organization	Major program focus	Geographical coverage	Health sector budget for 2013/14	Contact details
Helen Keller International	Nutrition, Homestead Food Production (HFP), livestock, social mobilization, governance, capacity building, research	25 districts	Total Allocated Budget : NRs. 434,701,340. Total Expense: NRs. 420,679,929.	P.O Box : 3752 Green Block, Ward #10 Chakupat, Patan ,Lalitpur , Nepal . Tel: 5260247, 5260837, Fax: 5260459 Email : ddavis@hki.org Web:www.hki.org
International Network for Rational Use of Drugs (INRUD, Nepal)	- 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.	12 districts	Allocated Budget: 4.0 million Expenditure: Expenditure: Not available	Office address: 304 Surya BikramGyawaliMarg,Baneswor,Kathmandu Tel: 4115636 Fax: 4115515 E-mail: kumudkafle@gmail.com Web:www.inrud-nepal.org.np
IPAS	Safe abortion care, capacity building, youth program, research	314 sites providing MA services in 28 district and 19 sites providing 2nd trimester services in 14 districts	Allocated Budget:NRs. 185 million Expenditure: Not available	P.O. Box: 11621 Tewa Tower, Teku, Kathmandu Tel: 01-4100180; Fax: 01-4262384 Email : Web:www.ipas.org
John Snow Research and Training Inc.	Scaling up use of Chlorhexidine	National	Allocated Budget:- 61,367,343.00 Expenditure:- 48,372,103.00	Oasis Complex, PatanDhoka, Lalitpur Tel: 01-5524313 Fax: 01-5526608 Email : lkhanal@cncp.org.np
	CBNCP Conduction of National Female Community Health Volunteers Survey	Rupendehi and Pyuthan 4313 FCHVs covering all 75 districts		
The Micronutrient Initiative (MI)	Micronutrient supplementation and food fortification	20 districts	- Allocated Budget:- NPR 41,376,901 - Expenditure:- NPR 36,216,629	UttardhokaMarg, 424/2, 2nd Floor, Lazimpat Telephone: 01-4001083; Fax:01-4001084 Email: minepal@micronutrient.org Web:www.micronutrient.org
Plan International Nepal	Maternal Health(Clinical update training to nurses, SBA training, Construction & Renovation of birthing centers & equipment support; pregnant women group approach orientation to health workers & FCHVs, BCC on safe motherhood) Newborn and child health(CB-IMCI/NCP training, training material and CHX supply & monitoring support, NIP support, emergency medical support, ECED parenting education Childhood disability services (Screening, treatment, assistive device support, corrective surgery & SCE) CB-PMTCT (training to FCHVs)	Morang , Sunsari, Sindhuli, Rautahat, Makawanpur, Banke, Baglung, Myagdi and Parbat	Allocated Budget: Rs. 58,476,330 Expenditure: Rs. 51,974,910	Tel: 5535580, 5535560 Fax: 5536431 Email: Sherbahadur.rana@plan-international.org Web:www.plan-international.org/Nepal

Organization	Major program focus	Geographical coverage	Health sector budget for 2013/14	Contact details
Population Services International/Nepal (PSI/Nepal)	Women's Health Project : - Increase access to Intra Uterine Device; - Development of private sector to deliver quality family planning services; - Increase awareness on medication abortion and access points. - Social marketing of IUDs and Medabon	50 districts	Allocated Budget: NPR 307,574,605.00 Expenditure: NPR 232,531,874.00	Dhobighat, Lalitpur Tel: 01-5553190 Fax: 01-5550619 Email : shazinamasud@psi.org.np Web: www.psi.org
	Expansion of Malaria Prevention to At-Risk Populations in Nepal - To improve the coverage and quality of preventive measures; - To increase the utilization of malaria preventive and curative services through BCC interventions; - To provide overall effective management of the national malaria control effort.	31 Malaria risk districts	Allocated Budget: No Cost Extension Expenditure: NPR. 82,957,006	
United Mission to Nepal (UMN)	HIV and AIDS Community Health Mental Health Maternal and Newborn Health Adolescent Sexual and Reproductive Health Water Sanitation and Hygiene Food Security and Nutrition Child to Child Health	Mugu, Bajhang, Doti, Rukum Rupandehi, Dhading, Sunsari	Allocated Budget: 45796468 Expenditure: 46888700	PO Box 126, Thapathali, Kathmandu, Nepal Tel: 977-1-4228118 Fax: 977-1-4225559 Email:sushma.rajbanshi@umn.org.np Web: www.umn.org.np
Water Aid in Nepal (WAN)	In domain of WASH and Public Health	20 districts	Allocated Budget: NRs 25202052/- Expenditure: NRs 25202052/-	Kupandole, Lalitpur, Nepal Tel: 5552764/65 Fax: 5547420 Email :wateraidnepal@wateraid.org Web:www.wateraid.org/nepal
World Vision International Nepal (WVIN)	▪ Maternal and child health and nutrition ▪ Birth Preparedness, ANC, institutional delivery and skilled birth attendance, PNC ▪ Prevention and management of childhood illness particularly diarrhea and pneumonia ▪ Strengthening PHC-ORC, HFOMC and LHI ▪ Infant and Young Child Feeding ▪ Local level advocacy for promoting good governance at local health facility ▪ Behavior change communication	Morang, Sunsari, Udayapur, Sindhuli, Lalitpur, Lamjung, Rupendehi, Jumla, Doti, Kailali, Achham,	Allocated Budget:- \$442,334 (Oct 2013- Sep 2014) Expenditure:- \$ 406,298 (Oct 2013- Sep 2014)	Jhamsikhel, Lalitpur-3, Nepal Tel: 5548877,5547177 Fax: 5013570 Email : info_nepal@wvi.org Web: www.wvi.org/nepal

9.4 NON-GOVERNMENTAL ORGANIZATIONS

Organization	Major program focus	Geographical coverage	Budget for health sector for 2011/12	Contact details
Kidasha	- Maternal, newborn and child health - Nutrition, hygiene and sanitation - Early childhood development - Parenting capacity - Primary healthcare	Kaski and Rupandehi	Allocated Budget: Rs. 25,043,665 Expenditure: Rs. 25,990,369	Nagdhunga-8, Pokhara Tel: 061-522085/530002 Fax: 061-537947 Email: kidasha@kidasha.org Web: kidasha.org
Nepali Technical Assistance Group (NTAG)	- Maternal and child nutrition - Multi-sectoral training to health workers, FCHVs and others - Promotion and advocacy of National Vitamin A Program - Research and surveys	25 districts (Suaahara) 75 districts (National Vitamin A Program) 3 districts (Policy and Science of Health, Agriculture and Nutrition {PoSHAN} Community Studies) 3 districts (Market Access & Water Technology for Women)	Suaahara Budget: NRS. 172,792,940 Expenditure: NRS. 31,707,182 National Vitamin A Program Budget: NRS. 4,292,000 Expenditure: NRS. 3,939,937 PoSHAN Community Studies Budget: NRS. 24,577,680 Expenditure: NRS. 13,700,705 Market Access & Water Technology for Women Budget: NRS. 2,984,172 Expenditure: NRS. 1,363,999	Maitighar, Kathmandu, Nepal GPO Box 7518 Tel: 977-1-4224884/4220736 Fax: 977-1-4221133 Email: nvatag@mail.com.np /deepakntag@mos.com.np Web: http://www.ntag-nepal.org
Nick Simons Institute (NSI)	Training: Anesthesia Assistant, Skilled Birth Attendant, Biomed Equip Tech, Mid-level Practicum, Follow-up Program	72 districts	NRs. 64,025,968	P.O Box 8975,EPC 1813 Sanepa , Lalitpur , Nepal Phone 977-1 5551978 Fax: 977-1-5544179 Email: nsi@nsi.edu.np Web: www.nsi.edu.np
	Rural Institution Support: - Rural Staff Support Program - Hospital Management Strengthening	Kapilvastu, Gulmi, Doti, Bajhang, Pyuthan, Dolakha, Myagdi, Kalikot, Bardia, Mahottari, Salyan	NRs. 61,856,805	
	Advocacy: Research	National	NRs. 6,689,289	
Sunaulo Parivar Nepal, an implementing partner of Marie Stopes International	a. Sexual and Reproductive Health - Family planning- static and outreach services (full range of FP methods) - Safe Abortion Services (SAS) - Adolescent Sexual and Reproductive Health (ASRH) - Breast and cervical cancer screening b. Training on RH c. Social marketing of Feminy, Jodi, Mariprist	Static centers cover 40 districts Mobile camps cover other remote districts. These districts are determined annually in discussion with DHOs, depending upon need and services provided by other NGOs and the government.	Allocated Budget:- NRs 24 crores (Approx) Expenditure:- NRs 23 Crores (Approx)	Baluwatar, kathmandu Tel: 01-4419376 Fax: 01-4420416 Email : Web: http://www.msinepal.org.np
Source: Information requested to fifty seven agencies but received from above respective agencies only to MIS Section, Management Division				

Annexes

ANNEX 1	ACTIVITIES CARRIED OUT IN FY 2070/71
ANNEX 2	TARGET FOR FY 2071/72
ANNEX 3	HEALTH SERVICES (Target Population, Raw/Analysed Data)
ANNEX 4	HUMAN RESOURCES BY DISTRICTS FY 2070/71

ANNEX 1 Major activities carried out in FY 2070/71**Child Health: Immunization**

SN	Activities	Unit	Targets	Achieve.	%
1	Guideline production and orientation workshop to mobilization o FCHV for complete immunization	Time	1	1	100
2	Co-financing to purchase of Pentavalent vaccine, safety box and AD syringe and supply	Time	1	1	100
3	Materials production for immunization services(Monitoring chart, Registers, Vaccination card set)	Time	1	1	100
4	Preparation of guideline for implementation of routine immunization to private and NGO's sectors (Urban setting)	Time	1	1	100
6	Immunization training materials development for healthworkers training	Time	1	1	100
7	Preparation of guidelines, manuals and booklets for Pneumococcal vaccine	Time	1	1	100
9	Orientation of complete immunization to LDO, DHO, EPI supervisors	District	23	23	100
10	MLM training	Batch	3	3	100
11	Purchase of Pentavalent vaccine, AD syringe, safety box etc through GAVI	Time	1	1	100
12	BCG vaccine Purchase (20 doses)	Time	1	1	100
13	Polio vaccine purchase (10 doses)	Time	1	1	100
14	Measles-Rubella vaccine purchase (5 doses)	Time	1	1	100
15	JE vaccine purchase(5 doses)	Time	1	1	100
16	Td Vaccine purchase (10 doses)	Time	1	1	100
17	Strengthening/review of routine immunization program for municipality level	District	30	30	100
18	Review of MS eorting system for piloting districts	District	5	5	100
19	Joint Monitoring of Immunization program	Time	3	3	100
20	Complete immunization through the mobilization of FCHVs to districts	District	30	30	100
21	National Polio Immunization Campaign	Time	2 rounds	2rounds	100
22	Immunization fund establishment	Time	1	1	100

Source: CHD, DoHS

CHILD HEALTH: NUTRITION

SN	Activities	Unit	Target	Achieve.	%
1	Regional Advocacy and review meeting	Region	3	3	100
2	Scaling of infant and young child feeding in 15 districts	times	1	1	100
3	Continuation of IYCF training in 18 districts	times	1	1	100
4	Program to improve adolescent nutrition and anemia	District	6	6	100
5	Training on multi sector nutrition plan	District	6	6	100

Annex 1: Major Activities Carried out in FY 2070/71

SN	Activities	Unit	Target	Achieve.	%
6	Refresher orientation on IMNMP	District	10	10	100
7	Orientation to Dhami/Jhakri, mothers' group and DAG on IYCF	times	1	1	100

Source: CHD, DoHS

CHILD HEALTH: CB-IMCI/NCP

SN	Program/Activities	Unit	Targets	Achieve.	%
1.	Procurement of ARI Sound Timer	Number	31667	31667	100
2.	Procurement of Equipment for CB-NCP	Time	1	1	100
3.	Repair and Maintenance of Computer Printer	Year	1	1	100
4.	Revision of CB-NCP Protocol	Time	1	1	100
5.	Carryout CB-NCP Programme (Rolpa District)	District	1	1	100
6.	CB-IMCI Refresher Training (Myagdi, Sankuwasava, Bajhang, Dolpa, Banke, Morang, Doti Districts)	Districts	7	7	100
7.	CB-IMCI Training to Newly Recruited HWs	Batches	8	8	100
8.	Referral IMCI Training - 2	Time	2	2	100
9.	Capacity Building training to CB-IMCI Focal Persons	Region	2	2	100
10.	Carryout CHX Programme 3 districts	District	3	3	100
11.	Carryout CB-IMCI/NCP Program Programme	District	3	3	100
12.	Carryout National Level CBI-MNCI MTOT Programme	Time	1	1	100
13.	CB-NCP Counseling service 10 districts	District	10	10	100
14.	Procurement of Second line drugs	Time	1	1	100
15.	Procurement of ORS Packets	Number	8162339	8162339	100
16.	Procurement of Cotrim. Tablets	Number	34000000	34000000	100
17.	Procurement of Zinc Tablets	Number	27000000	27000000	100
18.	Procurement of CBNCP Drugs including CHX	Time	1	1	100
19.	Carryout World Pneumonia Day	Time	1	1	100
20.	Inter-country observation tour for Focal Person, HWs and FCHVs	Time	1	1	100
21.	Supervision and monitoring	Time	3	3	100
22.	Integrated Supervision and Monitoring	Time	3	3	100

Source: CB-IMCI/CHD, DoHS

Annex 1: Major Activities Carried out in FY 2070/71

Family Health: Family Planning

SN	Activities	Unit	Targets	Achieve.	%
1.	Family Planning Current Users	Couples	2,755,000	2,506,131	91
2.	Expected Number of VSC Cases	Numbers	58,000	37,211	64
3.	IUD service (New)	Numbers	40000	33,714	84
4.	Implant service (New)	Numbers	45000	37,253	83
5.	VSC preparatory meetings	District	75	75	100
6.	Micro-planning in low CPR districts	District	6	6	100
7.	Strengthening FP services in Urban health	District	4	4	100
8.	Family Planning Supervisors conference	time	1	1	100
9.	Pre VSC meeting with FCHVs in low performing districts	District	55	55	100
10.	Conduct Satellite clinics for long acting methods	District	75	75	100

Family Health: Safe motherhood

SN	Activities	Unit	Targets	Achieve.	%
1.	UP screening	Number	53280	39053	73.30
2.	UP operation	Number	10000	4445	44.45
3.	Free delivery services	Number	370000	310747	83.99
4.	Transport incentive	Number	370000	307460	83.10
5.	4 ANC incentive	Number	247500	76476	30.90
6.	NyanoJhola	Number	229375	42278	18.43
7.	CEONC Team	Number	33	29	87.88
8.	Recruitment of ANM	Number	1425	1375	96.49
9.	Recruitment of staff nurse	Number	77	75	97.40

Family Health : : FCHV /ASRH/PHC-ORC

Activities	Unit	Targets	Achieve.	%
ToT for FCHV fund mobilization	Times	2	2	100
FCHV day celebration	Times	1	1	100
FCHV postal stamp publication	Times	1	1	100
ASRH Tot	Times	7	7	100
ASRH review	Times	2	2	100
PHC ORC toolkits distribution	Times	1	1	100

Source: FHD/DoHS

EDCD : Malaria elimination

SN	Activities	Unit	Targets	Achieve.	%
1	Printing of malaria elimination training guide line for health workers.	Time	2	2	100
2	Basic malaria microscopic training 32 days for lab personnel.	Batch	2	2	100
3	Malaria microscopic cross check training for lab Personnel.	Batch	2	2	100
4	Short term training to increase performance of staffs working in malaria programme.	person	8	8	100
5	ACT/RDT training for service providers	Batch	1	1	100

Annex 1: Major Activities Carried out in FY 2070/71

SN	Activities	Unit	Targets	Achieve.	%
6	Hiring of consultant for Malaria elimination	Person	2	2	100
7	Procurement of drugs and diagnostics for malaria programme.	Time	1	1	100
8	Procurement of insecticides for Indoor Residual Spray	Time	1	1	100
9	Study and research in malaria through WHO technical assistance (Drug efficacy/TES, G6PD)	Number	3	2	66.66
10	Malaria vector survey	Time	1	1	100
11	Entomological study through WHO technical assistance		2	1	50%
12	Bio-access susceptibility test for malaria and kala-azar vectors	Number	3	2	66.66
13	Focal Indoor Residual Spray (IRS)	Times	2	2	100
14	LLIN distribution through ANC Clinic in malaria endemic VDCs	Number	40000	40000	100
15	Orientation on Case Base Surveillance(CBS) for sentinel site's staffs.	Number	30	30	100
16	Conduct annual review meeting on malaria	Time	1	1	100

EDCD : Kala-azar elimination

SN	Activities	Unit	Target	Achieve.	%
1	Health workers orientation on kala-zar case management	batch	2	2	100
2	Procurement of insecticides, drugs and diagnostics for kala-zar.	Time	1	1	100
3	Conduct Kala-azar case base surveillance on endemic districts.	district	6	6	100
4	Provide transportation cost for kala-zar Patient	district	12	12	100
5	Epidemiological and entomological surveys for KA Case validation in Okhaldhunga and Bhojpur district with support of BPKIHS	district	2	2	100
6	Revised national strategic guideline on KA elimination	Number	1	1	100
7	Prepared and implemented operational plan for PV with co-ordination with BPKIHS and PATH, India	Time	1	1	100

EDCD : Dengue control

SN	Activities	Unit	Targets	Achieve	%
1	Health worker's orientation on prevention and control of dengue fever.	batch	6	6	100
2	Dengue vector survey	time	1	1	100
3	Procurement of drugs and diagnostics .	time	1	1	100
4	Outbreak management of dengue including RRT mobilization.	time	3	3	100
5	Stakeholder's orientation on dengue prevention and control .	batch	4	4	100
6	Health care provider's training on dengue case management.	batch	2	2	100
7	National symposium on vector borne diseases	Time	1	1	100

Annex 1: Major Activities Carried out in FY 2070/71

EDCD: Lymphatic Filariasis elimination

SN	Activities	Unit	Targets	Achieve	%
1	Monitoring and evaluation of MDA for LF elimination	Number	1	1	100
2	Micro-filaria follow up survey and post MDA surveys in 10 MDA conducted districts	Number	2	2	100
3	Procurement of drugs for MDA campaigning.	number	2	2	100
4	Advocacy and advertisement for MDA Campaigning.	number	1	1	100
5	Development of forms, formats and guidelines for MDA campaigning.	number	1	1	100
6	MDA planning, interactions and prepare annual report.	number	2	2	100
7	Conduct surgical camps for hydrocel patients at regional level	Number	5	3	60%

Epidemiology

SN	Activities	Unit	Targets	Achieve	%
1	Procure drugs and equipment for control of epid	Time	61	1	100
2	RRT orientation on outbreak /emergency preparedness, prevention, control and management	Time	3	3	100
3	Review of EWARS sentinel sites focal person	Time	3	3	100
4	Mulrti-sectoral stakeholders's meeting / interaction	Time	5	4	80
5	Orientation Programme on Influenza Case Management Infection Control for doctors and Nurses of	time	1	1	100
6	Orientation on Health workers for Newly established EWARS Sentinel Site & Low Reporting Status Sen	time	3	3	100
7	Stake holder's orientation on RRT mobilization and control of outbreak	batch	2	2	100
8	Outbreak preparedness meeting with stakeholders	batch	2	2	100
9	Review meeting to the DHO/ DPHO and RRT Focal Avian Influenza	Time	1	1	100

Zoonoses control programme

SN	Activities	Unit	Targets	Achieve	%
1	Health care provider's training on use of ARV and management of snake bite.	Number	250	250	100
2	Procurement and supply of anti-rabies vaccine.	Number	300000	300000	100
3	Procurement and supply of anti-snake venom serum.	Number	40000	40000	100
4	Celebration of world rabies day	Number	1	1	100
5	Develop and distribute IEC materials on common zoonotic diseases.	number	1200	1200	100

Annex 1: Major Activities Carried out in FY 2070/71**Disaster management Programme**

SN	Activities	Unit	Targets	Achieve	%
1	Workshop on emergency preparedness plan	Number	2	2	100
2	Orientation for RRT on RH promotion during disasters and prepare contingency plan.	Number	3	3	100
3	Conduct regional workshop and deployment kit supply for RRT members.	Number	1	1	100
4	Conduct workshop and strengthen disaster working group	Number	3	3	100
5	Procure and supply of essential drugs and diagnostics.	Times	3	3	100

Tuberculosis:

SN	Activities	Unit	Targets	Achieve.	%
1.	Pre -XDR treatment for 147 patients	Persons	147	147	100
2.	Anti-TB medicines for 6- 8 month regimen	Times	1	1	100
3.	Procurement of second line anti-TB medicines (MDR + XDR patients)	Times	450	450	100
4.	Quality assurance under NRL (3 regional labs- GoN)	Times	3	3	100
5.	Conditional contribution to sub- recipient	Times	3	3	100
6.	Establishment MDR Hostels in five places	Place	5	3	60
7.	Establish hostel accommodation at regional level	Place	5	3	60
8.	National TB conference including MDR - TB national seminar and DTLO seminar at national level	Times	1	1	100
9.	Running costs of Culture and DST	Times	2	2	100
10.	Respirators (N95 or FFP2) for all HCWs in high risk settings (lab technicians performing large volumes of smear microscopy, culture, DST and line probes)	Times	1	1	100
11.	DOTS training for medical Officer	Package	10	10	100
12.	DHO/PHO workshop at regional review	Times	5	5	100
13.	Scholarship for Lab technician study	Persons	20	20	100
14.	PPM/ISTC orientation in medical colleges (medical colleges including private and public sectors)	Times	21	21	100
15.	Provide training to medical practitioners (PMPs) including private and public sector on PPM and ISTC (2 days)	Times	5	5	100
16.	Procurement of TB drugs in emergency	Times	1	1	100
17.	TB Modular training	Package	20	20	100
18.	National workshops to align NTP monitoring system with HMIS reporting system	Times	5	5	100
19.	Regional level lab management workshop	Times	5	5	100
20.	DOTS workshop at District level	Times	200	200	100
21.	Regional Monitoring & Evaluation Workshop (DOTS) for each region	Times	6	6	100
22.	Supervision from region to district/Treatment Centers- DOTS, Lab-(QC, Culture, MC), MDR, TB HIV, PPM, PAL, ACSM	Times	90	90	100
23.	Supervision from center to region and district	Times	30	30	100
24.	Supervision from National to region/district/ Treatment Centers- DOTS, Lab-(QC, Culture, MC) MDR, TB HIV, PPM, PAL, ACSM	Times	100	100	100
25.	Conditional contribution to DR Home Bandipur for	Times	1	1	100

Annex 1: Major Activities Carried out in FY 2070/71

SN	Activities	Unit	Targets	Achieve.	%
	MDR/XDR				
26.	PSM costs for Health products and equipments	Times	1	1	100

Source: NTC

Leprosy

SN	Activities	Unit	Targets	Achieve	%
1	Dissemination and orientation on new leprosy control strategy, programme guideline and Mid-Term Evaluation findings for central, regional, zonal, district chiefs and focal persons	times	5	5	100
2	Leprosy control strategy, program evaluation including study a) Primary preparatory work (first) b) Study and evaluation (second)	times	2	2	100
3	Orientation on WeBLERS to TLOs/Statistics Officer/Assistants/Focal persons	place	5	5	100
4	Training and educational tour on leprosy for doctors, health care workers, health managers	times	3	1	33
5	MCBR study, resource centre, WeBLERS and activity implementation counselling service	times	3	2	67
6	Upgrading and yearly maintenance of WeBLERS	times	2	1	50
7	MDT transportation and management	times	3	3	100
8	Procurement of drugs for complication management in Khokana Aarogya Ashram & others	times	2	2	100
9	Active case detection in urban slums	place	1	1	100
10	Procurement and distribution of supportive appliances for leprosy related disability and complications	place	5	5	100
11	In collaboration with National Federation for Disables Nepal and other supporting partners, disability study	times	1	1	100
12	Updating district recording & reporting system by validation & verification	times	1	1	100
13	In collaboration with supporting partners, providing financial support to leprosy hospital for free health services for poor leprosy affected people	times	4	1	25
14	MCBR programme for health care workers & other stakeholders	times	2	1	50
15	In collaboration with supporting partners, providing income generation programme, vocational training & scholarship to leprosy affected people and family members a) Primary preparatory work b) Implementation	times	3	1	33
16	In collaboration with supporting partners , implementation of daycare services for elderly and leprosy affected people at Khokana Aarogya Ashram a) Primary preparatory work b) Implementation	times	3	1	33

Annex 1: Major Activities Carried out in FY 2070/71

SN	Activities	Unit	Targets	Achieve	%
17	Travel allowances for leprosy patients/affected for the treatment of complications & disability at referral centres (Rs. 1000/patient)	person	1900	1800	95
18	Support and review of implementation of 17 leprosy service centres	place	18	10	56
19	Upgrading and hand over of referral centres (Zonal hospital and others)	times	2	1	50
20	Production and distribution of audio-visual aid (leprosy message)	times	1	1	100
21	Preparation for community rehabilitation of patients of Khokana Aarogya Ashram	times	2	2	100
22	Operational study based on gender and social inclusion in leprosy endemic districts	times	3	1	75
23	Quarterly review meeting at central level (Annual, first & second)	times	3	2	75
24	Quarterly review meeting at regional level (Annual, first & second)	times	3	3	100
25	Quarterly coordination meeting with stakeholders and supporting partners	times	5	2	40
26	Meeting, workshop & orientation with Direction Committee, Coordination Committee and Technical Committee	times	1	1	100
27	Monitoring, supervision and quality check at district level stores from regional medical stores	times	15	15	100
28	Programme supervision, monitoring & follow up for central & regional level	times	40	34	93
29	Grant to Nepal Leprosy Elimination Association and other partner organizations in order to provide living allowances for elderly and leprosy affected people in Khokana Aarogya Ashram	times	3	3	100
30	Income generation and vocational skills by leprosy affected people's network	times	1	1	100

HIV/AIDS and STI

SN	Activities
1	Establishment of HTC sites in 13 sites, PMTCT in 29 sites, ART in 8 sites and TB-HIV in 03 sites
2	Regional review and Regional Data Validation workshop in all 5 region
3	District level data validation workshop in 75 district
4	Training on HTC, STI, PMTCT, ART, surveillance & research and M& E
5	Targeted HIV prevention interventions

Source: NCASC

Annex 1: Major Activities Carried out in FY 2070/71

Health Training

S.N.	Program/Activities	Unit	Targets	Achieve	%
1	Upgrading and Basic Training				
1.1	AHW	person	30	28	93
1.2	ANM	person	30	29	97
1.3	AHW-P	person	60	57	95
1.4	ANM-P	person	60	58	97
1.5	Sr. AHW	person	180	178	99
1.6	Sr. ANM	person	60	60	100
1.7	Supervisor Upgrading Training	person	100	96	96
2	Induction and Health Management				
2.1	Induction training for Health Officer	person	200	134	67
2.2	Annual Review and Planning of National Training Activities	person	1	1	100
3	Clinical Training				
3.1	Medico-legal Training	person	100	154	>100
3.2	Rural Ultrasound Training	person	20	20	100
3.3	Basic Trauma Care Training	person	100	70	70
3.4	Spinal Injury Rehabilitation Training	person	50	20	40
3.5	Anaesthesia Assistant Training	person	7	7	100
3.6	Paediatric Nursing Training	person	30	30	100
3.7	Palliative Care Training	person	20	20	100
3.8	Burn Care Training	person	60	87	100
4	Reproductive Health Related Training				
4.1	Safe Abortion Service Training	person	180	186	>103
4.2	Hiring of SBA monitoring co-ordinator	person	2	2	100
4.3	Follow Up Enhancement Program	sites	21	15	71
4.4	Annual Review on SBA	person	1	1	100
4.5	Printing of SBA Books	person	2000	2000	100
4.6	ASRH Training	person	20	20	100
4.7	SBA Training (Nursing Staff)	person	1200	1197	100
4.8	Advance SBA	person	30	29	97
4.9	NSV	person	100	50	50
4.10	Minilap (MO)	person	60	40	67
4.11	Implant	person	400	425	>100
4.12	IUCD	person	155	113	72
4.13	Postpartum IUCD	person	60	67	>100
4.14	Minilap (Nurse)	person	60	40	67
4.15	Hiring of FP consultant	person	4	4	100
4.16	Hiring of FP counselor	person	3	3	100
5	Training of Trainers (TOT)				
5.1	CTS	person	24	16	67
5.2	ToT on Appreciative Inquiry	person	20	20	100
5.3	ToT on MISP	person	60	60	100
5.4	ToT on Counselling	person	20	0	0
5.5	ToT on Infection Prevention	person	20	0	0
5.6	General Training of Trainers	person	20	0	0
6	Management Support Training				
6.1	Biomedical Equipment Technical Assistant Training (BMEAT)	person	15	15	100

Annex 1: Major Activities Carried out in FY 2070/71

S.N.	Program/Activities	Unit	Targets	Achieve	%
6.2	Biomedical Equipment Technical Training (BMET)	person	20	20	100
6.3	Operation Theater Management Training	person	20	19	95
6.4	ICU/CCU Training	person	30	25	83
6.5	Mental Health Training for Health Workers	person	100	0	0
7	Supervision and Monitoring	times	370	200	54

Source: NHTC

HEALTH EDUCATION INFORMATION AND COMMUNICATION

S.N.	Activities	Unit	Target	Achieve	%
1	Audio/ video message production	Nos	823	821	99.75
2	IEC materials printing of flip wall chart, health diary, Flip chart printing on GBV	Nos	352750	338750	96.03
3	IEC/BCC programs on prevention and control of TB, HIV/AIDs, Leprosy, IMCI, Epidemics, Thyroid diseases, ENT, health hazards from arsenic and mercury, NTD, NCD and tobacco and its products, harmful consumption of alcohol, tobacco, GBV, and Free health services, FP, EPI, Nutrition, ASHR, Ayurveda, hand-washing, disabled friendly, rational usage of drugs.	Nos	1326949	1274318	96.03
4	Health message airing through TV	Nos	3312	3312	100
5	Health message airing through Radio	Nos	1763	1763	100
6	Community level interaction programs on HPE programs	Nos	100080	100057	99.97
7	Video show in the Shaja bus	Nos	17920	17920	100
8	Stakeholder orientation on FTCT	Nos	3	2	66.7
9	IEC Technical committee meeting	Nos	35	10	28.57
10	IEC program related to journalists / health Message publication on national daily news paper	Nos	169	46	27.2
11	HP and BCC orientation Programs	Nos	5	5	100
12	Health Days celebration	Nos	5	5	100

Source: NHEICC

Logistics Management: Center

SN	Activities	Unit	Targets	Achieve	%
1	Procurement of Data Logger and Temperature Monitoring Multi Log and Cold Chain Spare Parts	Time	1	1	100
2	Procurement and Payment of Hospital Instrument, Equipment and Furniture for the Health Institutions	Times	3	3	100
3	Maintenance of Bio-Medical Equipment, Vehicle, Cold Chain and Other	Times	100	100	100
4	Web-Based LMIS, Inventory and Internal Mailing System Basic/Refresher Training	Times	170	170	100
5	Repacking of Drug and Equipment for Center (Teku and Pathalaiya)	Times	150	150	100

Annex 1: Major Activities Carried out in FY 2070/71

SN	Activities	Unit	Targets	Achieve	%
6	Repacking of Drug, Vaccine and Equipment for RMSs	Times	75	75	100
7	Preparation and Publication of Tender Document and Logistics Related Works	Times	3	3	100
8	Transportation Work of Equipment, Medicines, Vaccines and other Health Commodities for Center	Times	450	450	100
9	Transportation Work of Equipment, Medicines, Vaccines and other Health Commodities for RMSs	Times	300	300	100
10	Procurement and Payment of Essential Drugs	Times	3	3	100
11	Printing of LMIS, Stock Book and Standard List of Hospital Equipment	Time	1	1	100
12	Regional Logistics Review Workshop	Times	5	5	100
13	Planning Workshop for Vaccine Management	Time	1	1	100
14	Training for Cold Chain Maintenance and Vaccine Management	Time	1	1	100
15	Inspection, Test and Quality Control of Medicines at Center, Regions and Districts	Times	3	3	100
16	Logistics Three Years Report	Time	1	1	100
17	Received (Commodities) Zithromax for Trachoma Program	Times	1	1	100

Source: LMD/DoHS

National Public Health Laboratory

SN	Activities	Unit	Targets	Achieve	%
1	Auction of old furniture and procurement of new furniture	time	1	1	100
2	Procurement of Analyzer for Biochemistry service in districts	time	20	20	100
3	Procurement of Electrolyte analyzer for Zonal hospital	time	15	15	100
4	Procurement of equipments for establishment of One Regional Laboratory	time	1	1	100
5	Establishment of Laboratory at Health post level with the support of VDCs for infrastructure and Human resource	time	50	50	100
6	Establishment of Bactology service at hospitals with the support of separate room and Human resource form related hospitals	time	15	15	100
7	Preparation of laboratory software for uniformity in billing and reporting at zonal and regional level hospital laboratories	time	18	18	100
8	Continuation on construction of new building	place	1	1	100
9	Expansion of Blood transfusion services at remote five district	districts	5	5	100
10	Procurement of equipment and chemicals for food microbiology, Bacteriology and coagulation profile	time	1	1	100
11	Procurement of fully automated equipments for different services at NPHL	time	1	1	100
12	Refurbishment of old laboratory building	time	1	1	100
13	Refurbishment of BSL III lab and operational	time	1	1	100

Annex 1: Major Activities Carried out in FY 2070/71

SN	Activities	Unit	Targets	Achieve	%
14	Construction of shed for waste management	place	1	1	100
15	Printing of National health policy, guideline and training materials	time	1500	1250	83
16	Consultancy service for laboratory software, Cold room, equipment and computer maintenance	person s	1	1	100
17	On the job training for newly appointed lab technician and lab assistant	person s	20	20	100
18	Scholarship scheme to study bachelor programme for Lab technician working for government service	person s	2	2	100
19	Scholarship scheme to study CMLT programme for Lab assistant working for government service	person s	4	4	100
20	Training on waste management for office assistants working on different laboratories (2 days in 5 different development region)	person s	90	90	100
21	Bactrology training for lab technicians	person s	20	20	100
22	Quality control training for laboratory staff	person s	75	30	40
23	Quality control training to operational NEQAS	time	50	50	100
24	Procurement of kits, chemicals and reagents for regular laboratory test	time	15000	15000	100
25	Procurement of reagents, kits and chemical for emergency diseases diagnosis	time	1	1	100
26	Procurement of kits, camical and reagents for National Influenza Center	time	1	1	100
27	Procurement of kits and chemical for endocrinology test and antiipileptic drug in blood testing	time	1	1	100
28	Procurement of kits and chemicals for HIV/ AIDS testing	time	1000	1000	100
29	Procurement of Reagents and kits for district hospital and PHCs Laboratories	district	68	68	100
30	Monitoring and evaluation of government hospital laboratories, private hospital laboratories and blood banks	time	150	150	100
31	Continuation of secretariat of Blood safety programme.	time	5	5	100
32	Continuation of quality control programme in different laboratories throughout the country	numb er	1000	1000	100
33	Service contact of human resource for operation of laboratory service	person	20	20	100
34	Service contact of specialist and other human resource for BSL 2+ Lab	person	5	5	100

Source: NPHL

Annex 1: Major Activities Carried out in FY 2070/71
Management

SN	Activities	Unit	Targets	Achieve	%
1	Furniture procurement & Supply for newly constructed District Medical Store	District	6	6	100
2	Procurement of Dental Chair for Zonal and District level Hospital	Set	30	30	100
3	Expansion of Hospital E-Health Data base	Place	135	135	100
4	Overhead water tank construction in DoHS complex	Times	1	1	100
5	Revision and update of Job description	District	1	1	100
6	Revision/update and printing of program guidelines	Times	6	6	100
7	Upgrading of HMIS Software	Times	2	2	100
8	Formulation of Oral Health Policy	Times	1	1	100
9	Health care waste management activities	Times	3	3	100
10	Community based mental health program	District	11	7	64
11	Oral health basic training for health workers	Person	200	200	100
12	Management activities for new emerging diseases	Times	1	1	100
13	Strengthening of health care waste management program	Times	2	2	100
14	MTOT for dental surgeons	Times	3	3	100
15	Repair and maintenance of medical & cold chain equipment for different level hospital and PHCCs	Times	3	3	100
16	Health care waste management survey	Times	1	1	100
17	Upgrading of HF to PHC based on population	Inst	5	5	100
18	Upgrading of HF to Hospital based on population	Inst	10	10	100
19	Upgrading of SHP to HP based on population	Inst	500	705	141
20	O & M Survey of 25 bed hospitals	Inst	40	40	100
21	MTOT on revised HMIS	Times	2	2	100
22	MTOT on revised HMIS software	Times	3	3	100
23	Public health analytics activities	Times	2	2	100
24	Preparation of DoHS Annual Report	Times	1	1	100
25	Printing of DoHS Annual Report	Pcs	2500	2500	100
26	Updating and listing of physical assets and human resource of all HF	District	8	8	100
27	Review & Follow-up of PBMS program	Times	2	2	100
28	National annual review workshop	Times	1	1	100
29	Interaction program on health care waste management for Health care service providers and managers of Hospital	Times	5	5	100
30	Integrated supervision	Times	190	190	100
31	Preparation of revised HMIS training manual and training materials	Times	1	1	100
32	Printing of Revised HMIS training user manual	Pcs	5000	5000	100
33	Printing of HMIS R/R & monitoring tools	Times	1	1	100

Source: MD/DoHS

Annex 1: Major Activities Carried out in FY 2070/71**Primary Health Care Revitalization**

SN	Activities	Unit	Targets	Achieve	%
1	Social audit conduction	District	40	40	100
2	Environment health promotion program for Department of Health Services	Times	1	1	100
3	Standard Treatment Protocol printing.	Pieces	5000	5000	100
4	Training on Ear problem for district health workers.	District			
5	Senior citizen prograSpecialized health camp held in five districts of five development regions	Regions	5	5	100
6	FCHV day celebration	No	58	58	100
7	Training for urban health center health workers	no	128	115	90
8	Regional review on Free Health Services	Region	5	5	100
9	Continuation of Community Health Insurance Activities	Health Facilities	6	6	100
10	Training on Ear problems for District Health workers	Districts	7	6	86

Source: PHCRD/DoHS

Annex 2: Program Targets for FY 2071/72**Child Health: Immunization**

SN	Activities	Unit	Target
1	Introductory Appreciative Inquiry Approach (AIA) Workshop to Ensure Fully Immunized VDC (20 Districts)	Times	2
2	Introductory Workshop on Fully Immunized Program (2 Batch from 20 Districts: LDO, PHA, Kho. Su.)	Times	2
3	Information Dissemination from TV and FM to Introduce New Vaccine	Times	3
4	Availability and Utility of Immunization Card at Home	Time	1
5	Regional Level Review and Planning Workshop for New Vaccine (PCV, IPV, MR 2nd Doze, HPV) (5 Regions, 75 Districts and Central Medical Store)	Batch	5
6	Strengthening and Establishment of Immunization Training Centre for Immunization Training	Time	1
7	Immunization Training for Health Workers (200 Personnel)	Times	10
8	Training Orientation Programme on Newly Introduced Vaccines (District and Region)	Time	1
9	Introduction of Hygiene Promotion in Routine Immunization Programme (4 Districts: Jajarkot, Myagdi, Bardiya, and Nawalparasi)	Time	2
10	National Polio immunization Campaign (27 Districts)	Time	1
11	Piloting Programme on Electronic Registration of Immunization Services (3 Districts)	Times	3
12	Study on Identification of Low Immunization Coverage	Times	3
13	Analysis of Central and District Level Financial Source and Expenditure of Immunization Programme (8 Districts)	Times	3
14	Development of Immunization Programme Related Educational and Information Materials (Print and Electronic Media)	Time	1
15	Study on Identification of Risky Areas for Typhoid, Cholera and Hepatitis-B)	Time	1
16	Internal Observation Tour of Immunization-related Health Workers (4 Group: 25 Persons/ Group)	Time	1
17	Operation Cost for Demonstration Project of HPV Immunization for 15 Thousand Girls (10 Years) (2 Districts)	Time	1
18	Printing of Immunization Service Related Materials (Immunization Monitoring Chart, Temperature Monitoring Chart, Jinsi Control Lazer, Vaccine Batch Card, Full Immunization Card, etc.)	Time	1

Source: Immunization Section/CHD, DoHS

Child Health: Nutrition Program

SN	Activities	Unit	Target
1	Implementation of Pilot Program on Adolescent Anaemia and Under Nutrition Control - 3 Districts (Siraha, Kapilvastu and Pyuthan)	Time	1
2	School Health & Nutrition Programme (Continuation in 3 Districts: Siraha, Kapilbastu, Pyuthan and Expansion on 3 Districts: Rolpa, Dhanusha, and Saptari)	Times	3
3	Regional Level Review (2 Days) of School Health and Nutrition (Soil	Times	2

Annex 2: Program Targets for FY 2071/72

SN	Activities	Unit	Target
	Transmitted Helminthic Programme) (Eastern and Western)		
4	Orientation Training Programme on Maternal & Child Health Nutrition Programme (6 Districts: Karnali Zone and Solukhumbu)	Time	1
5	Workshop on Inter-personal Communication and Community Involvement for Implementation of Integrated Nutrition Programme (SUAAHARA Programme)	Times	3
6	Programme Implementation of Multi-Sectoral Nutrition Plan (SUAAHARA: 22 Districts) and Formation and Strengthening of Nutrition and Food Security Steering Committee at VDC Level	Times	3
7	Iodized Salt Social Marketing Campaign, 2014 (Dadeldhura and Baitadi)	Times	2
8	Endline Survey on Effectiveness of IYCF-MNP	Time	1
9	Establish Nutrition Surveillance System in 4 New Districts and Continue Technical and Financial Support in 2 Last Year Districts	Time	1
10	Training Program on Maternal, Infant and Young Child Nutrition (MIYCN) Training Package and Basic Nutrition Package at Central Level MToT and DTOT in 5 Districts	Time	1
11	National Micro-Nutrient Survey (2071-73)	Times	3
12	Implementation of Multi-Sectoral Nutrition Plan (Districts: 6)	Times	2

Source: Nutrition Section/CHD, DoHS

Child health: CB-IMCI and NCP

SN	Activity	Unit	Targets
1	Procurement of ARI Sound Timer	Pcs	16000
2	Procurement of Equipment for CB-NCP Program	Time	1
3	Construction and Renovation of Health Institutions for Newborn Care	sites	34
4	Carryout CB-IMNCI Program (40 Districts) (GoN Districts Okhaldhunga, Dhanusha, Sindhupalchowk, Tanahu, Kaski, Syngja, Rukum, Dailekh, Surkhet, Jajarkot, Achham&Doti)	districts	40
5	Capacity Building Training to CB-IMCI Focal Persons (Central Region)	Region	1
6	Capacity Building Training to Health Workers	Batches	10
7	Carry out CHX Program	Districts	12
8	Integrated Child Health and Newborn Care Training to Newly Recruited and untrained FCHVs (H4L District)	Times	3
9	Workshop on Development of CB-IMNCI Package	Times	3
10	MToT on CB-IMNCI Package	Batch	1
11	Printing and Development of CB-IMNCI Training Materials	Time	1
12	Study on compliance of CB-IMCI and Newborn Care	Time	2
13	Progress Analysis and Improvement Program to be implemented at the prioritized districts for Child Health and Newborn care (140 VDCs of H4L)	District	3
14	MToT on CB-IMNCI Package SUAHHARA and H4L (4 batches: 80 Persons)	VDCs	140
15	Operational Research on Involvement of CB-IMNCI Programme	District	1
16	Feet Measurement and Management Program of the Child who get birth at home low weight – 2 districts	Times	3
17	Procurement of ORS	Pkts.	6160000

Annex 2: Program Targets for FY 2071/72

SN	Activity	Unit	Targets
18	Procurement of Cotrim. Paed. Tablets	Tablets	35050000
19	Procurement of Zinc Tablets	Tablets	25000000
20	Procurement of CHX	Tube	580000
21	Procurement of second line Drugs	Capsules/ Tablets	Cipro – 950,000, Amoxicillin 350,000, Chloroquin e 280,000

Source: CB-IMCI/CHD, DoHS

Family Health: Safe motherhood program

SN	Activities	Unit	Targets
1	24 hours CEOC Services	Place	41
2	Recruitment of Staff nurse	Number	81
3	Recruitment of ANM	Number	1629
4	Rural Ultrasound program	District	10
5	Free Blood Transfusion services for Aama program	Pint	5000
6	4th ANC	Number	225000
7	Transportation incentive and Free Delivery services	Number	375000
8	Nano Jhola for Birthing Centre	Set	210000
9	Fistula/UP Screening	Person	45600
10	UP Surgery	Person	4500

Family Health: Family Planning

SN	Activities	Unit	Targets
1	Family Planning (FP) current users	Couple	2,775,000
2	VSC expected new acceptors	Couple	50,000
3	IUCD expected new acceptors	Couple	45,000
4	Implant expected new acceptors	Couple	55,000
5	Micro-planning in low CPR districts	District	16
6	Strengthening FP services in Urban health	District	25
7	Family Planning Supervisors conference	Time	1
8	FP integration with EPI clinic	District	4
9	Pre VSC meeting with FCHVs in low performing districts	District	53
10	Conduct Satellite clinics for long acting methods	District	75
11	Strengthening FP services in private hospital	District	3

Family Health: FCHV /ASRH/PHC-ORC

SN	Activities	Unit	Targets
1	Knowledge update to FCHVs on LARC	-	-
2	Committee formation to respond FCHV demands	-	-
3	Initiated to distribute RIM and SIM for 20 thousand FCHVs in coordination with NTC	persons	20,000
4	Activities for Revitalize the FCHVs fund	-	-
5	ASRH program orientations to District Health Managers program districts	districts	12
6	Orientation to schools teachers and adolescents in the schools	-	-

Annex 2: Program Targets for FY 2071/72

SN	Activities	Unit	Targets
	nearby AFS HFs.		
7	Program orientation to local stakeholders including HFOMC members in program HFs.	-	-
8	Program orientation to service providers in the program districts	-	-
9	Program orientations to district stakeholders including Reproductive Health Coordination Committee (RHCC) members in the program districts	-	-

Source: FHD/DoHS

Malaria elimination

SN	Activities	Unit	Targets
1	Basic and refresher training on malaria microscopy	person	75
2	Purchasing medicines and diagnostic materials for malaria control	Time	1
3	Printing and dissemination of SoPs, treatment and prevention algorithm, Publication of malaria annual report	Time	2
4	Survey on malaria microscopy services	Time	1
5	Strengthening National capacity for parasite and slide banking	Time	1
6	Quality control of malaria slide in centre & districts	Time	3
7	Orientation to multi-sectoral/stake holders on IVM	Time	3
8	Procurement of medicines, RDT and Laboratory supplies, for malaria microscopy	Time	1
9	Procurement and distribution of LLIN in high and moderate risk VDCs	Number	472747
10	Distribution of LLINs in targeted area of districts every year and conduct BCC on usage of LLINs.	Number	472747
11	Celebration of World Malaria Day	Time	1
12	Annual Health Facilities Survey	Time	1
13	Update micro-stratification ,Orientation to key staff on foci investigation and rapid response team at national and district level	District	2
14	In country program related capacity building trainings (Malariology/Epidemiology/ entomology)	Number	1
15	Cross-border meeting to exchange information and develop joint operational plan	Time	1
16	Procurement and supply of insecticides	Time	1
17	Conduct annual review meeting on malaria	Time	1
18	Supervision and monitoring of Malaria programme	Time	3
19	Hiring of consultant for malaria programme	Time	3
20	Purchase furniture and fixtures for malaria control programme	Time	1
21	Monitoring efficacy of first line anti-malarial medicines and vect susceptibility to insecticides in malaria risk districts	Time	1
22	Procurement of server, scanner, Teleconferance set & install air condition/Mobile set for SMS reporting and other (Thru WHO	Time	1

Kala-azar elimination

SN	Activities	Units	Targets
1	Multi-sectoral interaction on integrated vector management	Batch	2
2	Procurement of drugs and diagnostics for kala-azar.	Time	1

Annex 2: Program Targets for FY 2071/72

3	Procurement of insecticides for IRS	Time	1
4	Conduct Kala-azar case base surveillance on endemic districts.	District	6
5	Kala-azar case validation at district level	District	3
6	Provide transportation cost for kala-azar Patient	District	12
7	Epidemiological and entomological surveys for KA Case validation at district level	District	2

Dengue control

SN	Activities	Units	Targets
1	Health worker's orientation on prevention and control of dengue fever.	Batch	3
2	Multi-sectoral interaction on dengue and chickungunea control	Batch	3
3	Outbreak management of dengue including RRT mobilization.	Time	2
4	Preparation of search and destroy guideline for prevention and control of dengue and chickengunya fever	Time	1
5	Conduct search and destroy campaign in dengue endemic district	Time	2
6	Conduct public awareness activities for dengue control	Time	3
7	Procurement of drugs and diagnostics .	Time	1
8	Stakeholder's orientation on on dengue and chickengunya control	Batch	2

Lymphatic filariasis

SN	Activities	Units	Targets
1	LF follow up survey in 10 LF MDA conducted districts	Time	1
2	Interaction with professional organizations	Time	1
3	MDA Planning Workshop and publication of annual reports	Time	2
4	Surveillance activities in 20 MDA stopped districts	Time	3
5	Monitoring and supervision of MDA campaign	Time	3
6	Collaboration with Nepal Medical Association and Nepal Journalist for MDA campaign publicity	Time	2
7	Management of LF morbidity, MDA orientation, SAE management and conduction of hydrocele operation camps	Time	2

Epidemiology

SN	Activities	Unit	Targets
1	Procurement of ambulance for TIA health desk	Time	1
2	Procurement of ambulance for RRT mobilization for Road Traffic Accidents	Time	1
3	Procurement of mobile set for SMS reporting	Time	1
4	Development of Treatment Protocol Out Break Management		
5	Procurement and settlement of temperature and humidity measuring instruments in 150 health institution	Time	1
6	Procure drugs and equipment for control of epidemic diseases	Time	1
7	Establishment of health desk(TIA,Tatopani,Kakarbhitta,Biratnagar,Birgunj, Bhairahawa, Nepalgunj and Mahendranagar entry point in ground cross Airport	Time	1
8	RRT orientation on outbreak /emergency preparedness, prevention, control and managem	Time	9

Annex 2: Program Targets for FY 2071/72

SN	Activities	Unit	Targets
9	Preparation of guideline for outbreak management	Time	1
10	Review of EWARS sentinel sites focal persons	Time	3
11	Orientation Programme on Influenza Case Management and Infection Control for doctors and Nurses of	Time	3
12	water quality surveillance during waterborne disease outbreak	Time	3

Zoonoses control

SN	Activities	Units	Targets
1	Health care provider's training on use of ARV and management of snake bite.	Number	375
2	Procurement and supply of anti-rabies vaccine.	Number	300000
3	Procurement and supply of anti-snake venom serum.	Number	30000
4	Celebration of world rabies day	Time	1
5	Procurement and supply of chemicals and equipment for the development of anti-rabies vaccine	Time	1
6	Develop and distribute IEC materials on common zoonotic diseases.	Time	1

Disaster management

SN	Activities	Units	Targets
1	Workshop on emergency preparedness plan	Time	3
2	Orientation for RRT on RH promotion during disasters and prepare contingency plan.	Time	3
3	Conduct workshop and strengthen disaster working group at district level	Time	3
4	Procure and supply of essential drugs and diagnostics	Times	1
5	WHO TA on disaster management	Time	1

Source: EDCC, DoHS

Tuberculosis

SN	Activities	Unit	Targets
1	Construct chest Hospital in NTC	Times	1
2	Prevalence survey to determine TB disease burden	Times	1
3	furniture	Times	300
4	procurement of microscope	Times	40
5	ILED Microscope for establishing auramine fluorescence microscopy centers	Times	2
6	Printing and distribution of ACSM/advocacy materials	Times	3
7	provision for Custom revenue and VAT for procured Machine, equipment funded by GFATM F.Y. 2070-71 year	Times	1
8	Procurement of various material and equipments for prevalence survey	Times	1
9	Procurement of nebulizer to Health Post level	Times	70
10	Procure X-ray Digital film	Times	222
11	International training programme for NTP Staffs	Person	8
12	Human resource from GFATM	Person	24
13	Basic Microscopic training/Refresher training on smear microscopy	Times	27
14	DR TB Basic Modular Training	Times	75
15	Quality assurance under NRL (3 regional labs-GoN)	Times	3

Annex 2: Program Targets for FY 2071/72

SN	Activities	Unit	Targets
16	various supporting activities to prepare monthly TB reports utilizing the HMIS reporting system.	Times	1
17	Regional Monitoring & Evaluation Workshop (DOTS) for each region	Times	15
18	Preparation of National planning, M&E/budgeting/ annual report preparation Workshop	Times	5
19	report preparation Workshop	Times	
20	Development & Printing of TB Modules, TB Lab Modules, infection control manual and TB Clinical Manuals	Times	4,800
21	infection control manual and TB Clinical Manuals	Times	20
22	Respirators (N95 or FFP2) for all HCWs in high risk settings (lab technicians performing large volumes of smear microscopy, culture, DST and line probes)	Times	12,400
23	Nutrition Support for TB patients	Person	540
24	NUTRITION SUPPORT FOR NEEDY TB PATIENTS	Person	400
25	Care and support to MDR patients (nutritious food, transport and accommodation cost assistance)	Person	7,200
26	Conditional contribution to Kalimati chest Hospital	Times	3
27	Supervision from National to region/district/Treatment Centers- DOTS, Lab-(QC, Culture, MC), MDR, TB HIV, PPM, PAL, ACSM	Times	220
28	Establishment MDR Hostels in five places	Times	5
29	Procurement of ancillary medicines for MDR patients	Times	3
30	Procure consumables/chemicals for solid and liquid media and Procurement of ancillary medicines for MDR patients	Times	2
31	Running costs of Culture and DST	Times	5
32	Conduct national level trainer of training (TOT) on TB/HIV	Times	1
33	PSM costs for Health products and equipmemnts	Times	12
34	SLD-DST	Times	3
35	Celebrate World TB Day (24th March)	Times	1
36	Health communication training to district health staff	Times	20
37	Steering Committee and/or regular meeting of Community DOTS, TAG and other management, PPM and Logistics Working Committee at National level	Times	9
38	Provision of masks for smear positive TB patients (intensive phase) & MDR TB patients (first year of treatment)	Piece	144,454
39	TB Program review from LHL annually	Times	1
40	Purchase/Maintenance costs for PMU office equipment (photocopier, scanner, fax machine, computers)	Times	1

Source: NTC, DoHS

Annex 2: Program Targets for FY 2071/72**Leprosy**

SN	Activities	Unit	Target
1.	Establishment of museum at “ <i>Khokana Aarogya Ashram</i> ” and construction of a residential building for 10-15 family	Times	3
2.	Publication of quarterly bulletin and other supportive materials for health care workers (production, printing & distribution) (times)	Times	3
3.	Supportive review meeting at 17 leprosy service centres	Times	20
4.	Update review meeting on WeBLERS reporting system among DHO/DPHOs, RTLOs, DTLOs (5 regions)	Times	5
5.	Review meeting on planning & procurement of chemoprophylaxis	Times	2
6.	Review meeting on “planning of chemoprophylaxis” among doctors, managers and health care workers	Times	2
7.	MCBR study, Resource Center for WeBLERS and implementation	Times	1
8.	MCBR study, WeBLERS, Book, Resource & counseling service	Times	3
9.	POID follow up, research and surveillance	Times	3
10.	Planning and preparation for establishment of museum and construction of residential building for people with disability due to leprosy and elderly people	Times	2
11.	Onsite coaching, education and management at local level in leprosy endemic districts	Times	2
12.	In collaboration with supporting partners, providing financial support to hospital for free health services for poor leprosy affected people	Times	2
13.	In collaboration with supporting partners, income generation programme, occupational training & scholarship to leprosy affected people and their family members	Times	2
14.	Operational study in leprosy endemic districts	Times	3
15.	Chemoprophylaxis training/workshop for doctors, health care workers & health managers	Times	3
16.	Travel allowances for the treatment of complications & disability of leprosy patients (Rs. 1000/patient)	Persons	2100
17.	Quarterly review meeting at central level (Annual, first & second)	Times	3
18.	Quarterly review meeting at regional level (Annual, first & second)	Times	15
19.	Quarterly review meeting with stakeholders, direction committee, coordination committee and technical committee	Times	3
20.	Capacity building of referral centres and handing over to zonal hospital and others	Times	8
21.	Annual report & program activity guidelines	Times	2
22.	Disability Study with Partners , NFDN & Other stakeholders	Times	2
23.	WeBLERS Strengthening, Upgrading & Annual Maintenance	Times	3
24.	Active case detection in urban slums (Place)	Times	1
25.	Active case detection in urban slums (Place)	Times	2
26.	Updating district recording & reporting system by case validation & verification	Times	3
27.	World Leprosy Day celebration at central/regional level	Times	3
28.	Active Case Detection & special programme at district level	Place	2
29.	Leprosy Handbook for health care workers	Pieces	17000
30.	Implementation of daycare service centre for elderly and leprosy affected people at Khokana Aarogya Ashram	Times	3
31.	Procurement of drugs for complication management in Khokana	Times	2

Annex 2: Program Targets for FY 2071/72

SN	Activities	Unit	Target
	Aarogya Ashram & others		
32.	In collaboration with Leprosy Affected Society /Network and other partner organizations, Income generation and vocational training	Times	2
33.	Grant to Nepal Leprosy Elimination Association and other partner organizations in order to provide living allowances for elderly and leprosy affected people in Khokana Aarogya Ashram	Times	3

Source: LCS, DoHS

HIV/AIDS

SN	Major Activities
1	Prevention, Treatment , Care and support on • TWG • Trainings decentralized • Pool of experts • M/E-EWI/Resistance (viral suppressant) research • Central of excellence (Teku hospital) • Ped. Feasibility survey • Viral load services • Cd4 / Lab analysis • Blood safety throughout the country with RC • Supportive activities on– test kits, reagents, ARVs, drugs, R&R templates, technical guidelines
2	6 IBBS survey among Migrants, IDUs, FSWs and MSM
3	Regional review of national response to HIV and STI all 5 regions
4	Scale up service delivery sites
5	Capacity building on • AEM in central level • Regional FP • District 50 FP • ACMT,CMT,PMTCT tot,EWI all ART SITE

Source: NCASC, DoHS

Health Training

SN	Activities	Unit	Targets
1	Training site development for New born Care Training	times	1
2	Strengthen Clinical training sites(HR, Furniture, Equipment, Office)	times	8
3	Solar Panel backup at S/RHTCs	sites	6
4	RHTC Color TV in hostels	sites	6
5	Water Tank and piping in WRHTC, Pokhara	times	1
6	Data analysis and management trainings	Persons	18
7	Mental Health Training for health worker (10 district)	Persons	250
8	ToT on Essential Non-communicable Disease	Persons	40
9	District level training (Infection prevention,HFOMC,Basic FCHV)	Times/P ersons	Accordi ng to district
10	Training on curriculum development for central and regional facilitators.	Persons	20
11	High altitude sickness management training (district level training)	District	15
12	ToT on reproductive health service delivery on emergency situation	Persons	20
14	ToT on basic health research methodology	Persons	20

Annex 2: Program Targets for FY 2071/72

SN	Activities	Unit	Targets
15	ToT on high altitude Sickness Management	Persons	40
16	Lab users maintenance training	Persons	12
17	X-ray users maintenance training	Persons	12
18	Training on Recanalization	Persons	4
19	Obstetric fistula repairment training	Persons	4
20	Pelvic organ repairment training	Persons	12
21	Skill development training about obstetric fistula	Persons	8

Source: NHTC, DoHS

Health Education Information and Communication

SN	Activities	Unit	Targets
1	Audio/ video message production	Nos	823
2	IEC materials printing of flip wall chart, health diary, Flip chart printing on GBV	Nos	352750
3	IEC/BCC programs on prevention and control of TB, HIV/AIDs, Leprosy, IMCI, Epidemics, Thyroid diseases, ENT, health hazards from arsenic and mercury, NTD, NCD and tobacco and its products, harmful consumption of alcohol, tobacco, GBV, and Free health services, FP, EPI, Nutrition, ASHR, Ayurveda, hand-washing, disabled friendly, rational usage of drugs	Nos	132694 9
4	Health message airing through TV	Nos	3312
5	Health message airing through Radio	Nos	1763
6	Community level interaction programs on HPE programs	Nos	100000
7	Video show in the Shaja bus	Nos	40000
8	Stakeholder orientation on FTCT	Nos	23
9	IEC Technical committee meeting	Nos	35
10	IEC program related to journalists / health Message publication on national daily news paper	Nos	169
11	School health program for health promotion	Nos	50000
12	Communication program for Golden 1000 days promotion	Nos	1
13	Health Days celebration	Nos	5
14	HP and BCC orientation program at regional level	Nos	5
15	Harmful alcohol drinking control policy formulation and implementation	Nos	100000

Source: NHEICC, DoHS

Logistics Management

SN	Activities	Unit	Target
1.	Continuation on construction of new building	place	1
2.	Procurement of Furniture and fixture for newly constructing building	Time	1
3.	Establishment of Bactology service at hospitals with the support of separate room and Human resource form related hospitals	Time	20
4.	Procurement of equipments for establishment of One Regional Laboratory	Time	1
5.	Establishment of Laboratory at Health post level with the support of VDCs for infrastructure and Human resource	place	50
6.	Procurement of Analyzer for Biochemistry service in districts	Time	24
7.	Procurement of equipment for operational of BSL III lab	Time	1

Annex 2: Program Targets for FY 2071/72

SN	Activities	Unit	Target
8.	Procurement of Gama Radiation Chamber and other equipments for blood transfusion service and zonal hospitals	Time	1
9.	Expansion of Blood transfusion services at remote five district	district	5
10.	Preparation of laboratory software for uniformity in billing and reporting at 34 district hospitals	district	34
11.	Construction emergency exit in newly constructing building	place	1
12.	Construction of compound wall in laboratory building	place	1
13.	Construction of shed for waste management	place	1
14.	Consultancy service for laboratory software, Cold room, equipment and computer maintenance	Time	1
15.	Hiring of Microbiologist and Biomedical Engineer on service contact basis	person	6
16.	Organization and Management survey of regional, zonal, district and PHC level laboratory	time	4
17.	Hiring of watchman, sweeper and gardener on service contact basis	person	6
18.	Hiring of plumber, electrician and driver on service contact basis	person	3
19.	Application training on operation of hematology analyzer machine to regional and zonal hospital laboratory staff	person	14
20.	On the job training for newly appointed lab technician and lab assistant	person	25
21.	Operational of National Bureau of Blood Transfusion service	time	1
22.	Continuation of secretariat of Blood safety programme.	place	
23.	Scholarship scheme to study bachelor programme for Lab technician working for government service	person	6
24.	Continuation of quality control programme in different laboratories and BTSCs throughout the country	place	2
25.	Consultancy service for preparation of National guideline on health laboratory	person	1
26.	Office operational of National Bureau of Blood Transfusion	time	1
27.	Procurement of kits, camical and reagents for National Influenza Center	time	1
28.	Procurement of reagents, kits and chemical for emergency diseases diagnosis	time	1
29.	Procurement of kits and chemical for endocrinology test	time	1
30.	Procurement of kits, chemicals and reagents for regular and specialized laboratory test	time	2000
31.	Procurement of kits and chemicals for HIV/ AIDS testing	time	1000
32.	Procurement of yellow fever vaccine	time	1600
33.	Monitoring and evaluation of government hospital laboratories, private hospital laboratories and blood banks	time	40

Source: NPHL, DoHS

Annex 2: Program Targets for FY 2071/72**Management**

SN	Activities	Unit	Targets
1	Construction of 15 bed Hospital based on need identification-3 (Jogbuda, Mehalkuna, Pipra)	Hospital	3
2	Construction of Health Post Building in integrated design – 200	Health Post	200
3	Additional floor at Regional Hospital –Surkhet	Hospital	1
4	Construction of Public Health Office – 3 (Khotang, Susnasri, Tanahu)	DPHO	3
5	Construction of District Hospital Building – 5 (Nuwakot, Makwanpur, Khotang, Parbat, Rampur/Palpa)	Hospital	5
6	Construction of PHCs – 5 (Mangalbare/Morang, Surunga/Jhapa, Mirchaiya/Siraha, Melamchi/Sindu, Tokha/Ktm)	PHCC	5
7	Construction of Birthing Center – 20	Birthing Center	20
8	Remodeling – Bheri Zonal Hospital	Hospital	1
9	Re-construction of Seti Zonal Hospital	Hospital	1
10	Solar heating system installation at delivery room of 6 remote and mountainous district Hospital (Manang, Mustang, Dolpa, Mugu, Humla & Jumla)	Hospital	6
11	Electrification and/or meter fitting in newly constructed HFs	Pcs	7
12	Hiring of Biomedical and Civil Engineer (1+1) at RHDs	Person	10
13	Service contract for maintenance of Electronic Devices (Computer, Fax, Printer, Photocopy etc.) at RHDs and Districts	Times	80
14	Hospital Strengthening activities in up to 50 bed hospitals (75)	Hospital	75
15	Health Care Waste Management strengthening activities at Zonal, Sub-Regional and Regional Hospitals (16)	Hospital	16
16	Allocation of grant according to collaborative framework guideline – 6 districts (Jhapa, Chitwan, Kaski, Dang, Jumla & Kailali)	District	6
17	Hospital Equipment maintenance program expansion in 5 regions	Region	5
18	Renal disease screening test kit procurement	Times	1
19	PHCC establishment in 35 constituencies	PHCC	35
20	Health Service logo designing and minting	Times	1
21	Overhead tank construction in DoHS complex	Times	1
22	Expansion of Hospital E-Health Data base	Place	135
23	Revision/update and printing of program guidelines	Times	1
24	Health care waste management activities	Times	3
25	Oral health basic training for health workers	Person	75
26	Strengthening of health care waste management program	Times	1
27	O & M Survey of 25 bed hospitals	Inst	40
28	Preparation of DoHS Annual Report	Times	1
29	Printing of DoHS Annual Report	Pcs	2500
30	National annual review workshop	Times	1
31	Interaction program on health care waste management for Health care service providers and managers of Hospital	Times	5
32	Integrated supervision	Times	190

Source: MD/DoHS

Annex 2: Program Targets for FY 2071/72**Primary Health Care Revitalization**

SN	Activities	Unit	Targets
1	Establishment of community Health Unit	District	33
2	Model Village Health Activities	VDC	31
3	TOT on Standard Treatment Protocol	Region	5
4	Training of STP	District	21
5	Social Audits	40 District	40 (752 H. Unit)
6	Health Campain(with specialised services)	Region	5
7	Public Health Campigion	district	40

Source: PHCRD/DoHS

Estimated Target Population Fiscal Year 2070/71

DC	District	Total Population	Under 1 year	Under 2 years	Under 3 years	6-35 months	6-59 months	25-59 months	Under 5 years	Female Pop 15-44 years	Female Pop 15-49 years	Married Female Pop 15-49 years	Expected Pregnancies	Adolescent Population 10-19 years	Expected Live birth
NEPAL		27,311,978	628,824	1,129,062	1,659,994	1,350,005	2,498,190	1,679,117	2,808,179	6,768,428	7,387,284	5,597,584	761,661	6,593,464	662,285
1	Taplejung	124,630	2,710	5,025	7,554	6,186	11,740	8,083	13,108	29,745	32,731	24,784	3,129	32,581	2,815
2	Ilamchthar	187,917	4,082	7,186	10,567	8,919	16,426	10,888	18,074	46,901	51,746	39,201	4,804	49,635	4,261
3	Ilam	289,531	6,288	9,883	14,009	11,459	21,078	13,745	23,628	75,980	83,525	63,288	7,417	69,769	6,574
4	Jhapa	836,899	18,183	31,831	45,917	36,498	66,277	43,865	75,696	225,238	246,569	186,874	21,830	187,720	19,056
5	Morang	993,610	21,596	38,491	55,972	44,788	81,813	54,506	92,997	256,392	281,551	213,380	25,913	228,365	22,623
6	Sunsari	792,728	17,231	30,612	44,881	35,959	67,024	45,334	75,946	206,818	225,226	170,696	20,676	186,625	18,049
7	Dhankuta	160,439	3,486	6,190	9,043	7,634	13,744	8,963	15,153	41,480	45,890	34,765	4,102	38,459	3,640
8	Terhathum	98,015	2,129	3,728	5,502	4,645	8,592	5,721	9,449	24,596	27,186	20,590	2,495	24,364	2,220
9	Sankhuwasabha	158,191	3,432	6,155	9,236	7,489	14,481	10,073	16,228	37,232	41,097	31,134	4,004	39,074	3,588
10	Bhojpur	176,227	3,829	7,080	10,508	8,973	16,306	10,761	17,841	41,807	46,562	35,263	4,481	44,710	3,985
11	Solukhumbu	104,570	2,269	4,097	6,076	4,926	9,259	6,312	10,409	24,370	27,029	20,472	2,637	26,396	2,367
12	Okhaldhunga	144,555	3,140	5,753	8,428	7,170	12,832	8,337	14,090	34,153	37,857	28,668	3,670	38,342	3,269
13	Khotang	199,242	4,332	7,978	11,953	10,222	19,036	12,789	20,767	45,717	50,713	38,403	5,062	53,623	4,505
14	Udayapur	323,476	7,031	13,038	19,427	16,572	30,547	20,364	33,402	80,883	88,195	66,826	8,304	85,706	7,355
15	Saptari	657,055	14,281	25,769	39,027	31,671	62,150	43,737	69,506	152,578	167,897	127,205	17,059	149,212	14,923
16	Siraha	654,291	14,220	27,242	41,494	34,158	65,742	45,836	73,078	151,040	165,949	125,735	16,995	151,600	14,861
Eastern Region		5,901,376	128,239	230,058	339,594	277,269	517,047	349,314	579,372	1,474,930	1,619,723	1,227,284	152,578	1,406,181	134,091
17	Dhanusha	777,416	17,321	31,577	47,052	37,557	71,969	49,887	81,464	177,722	195,420	148,083	19,806	184,209	18,218
18	Mahottari	645,690	14,387	27,912	42,764	34,871	67,810	47,791	75,703	139,469	153,775	116,525	16,460	148,222	15,138
19	Sarlahi	808,320	18,000	34,779	53,211	43,336	84,105	59,201	93,980	174,005	190,669	144,474	20,589	188,320	18,938
20	Sindhuli	298,213	6,644	12,467	18,704	16,827	30,536	19,946	32,413	69,590	76,077	57,634	8,098	80,002	6,981
21	Ramechhap	198,961	4,437	7,733	10,419	9,176	15,879	9,749	17,122	47,215	52,428	39,716	5,388	54,763	4,649
22	Dolakha	186,415	4,155	7,133	10,205	8,650	15,274	9,696	16,829	43,871	48,881	37,027	4,893	48,293	4,359
23	Sindhupalchok	281,585	6,272	10,565	15,083	12,735	22,641	14,424	24,989	65,992	73,022	55,314	7,383	69,437	6,576
24	Kavre	374,104	8,333	13,522	18,944	16,602	28,446	17,266	30,788	96,052	105,783	80,141	10,135	94,472	8,746
25	Lalitpur	499,879	11,135	17,200	23,597	20,429	34,100	20,068	37,268	140,806	153,007	115,958	13,630	101,001	11,726
26	Bhaktapur	323,860	7,219	11,413	15,641	13,585	22,354	12,997	24,410	92,336	100,011	75,800	8,839	68,543	7,603
27	Kathmandu	1,931,225	43,026	67,205	92,691	80,407	134,754	79,833	147,038	556,619	597,589	452,943	52,762	399,019	45,354
28	Nuwakot	273,123	6,083	10,116	14,319	12,604	21,742	13,341	23,457	66,558	73,373	55,584	7,397	69,748	6,384
29	Rasuwa	41,521	927	1,621	2,329	1,986	3,501	2,223	3,844	9,293	10,301	7,798	1,081	10,135	967
30	Dhading	333,937	7,448	13,162	19,046	16,938	29,540	18,486	31,648	81,498	89,569	67,868	9,082	85,894	7,826
31	Makawanpur	422,626	9,413	16,689	24,360	21,689	38,401	24,383	41,072	104,322	114,029	86,415	11,510	106,135	9,906
32	Rautahat	729,176	16,249	31,825	49,463	40,555	80,371	57,454	89,279	151,793	165,413	125,333	18,580	165,987	17,089
33	Bara	723,097	16,110	30,999	47,899	39,064	77,203	55,039	86,038	156,542	170,749	129,387	18,418	166,247	16,943
34	Parsa	627,073	13,970	26,771	41,376	33,718	66,652	47,539	74,310	135,599	148,036	112,170	15,977	139,170	14,693
35	Chitwan	600,324	13,373	21,924	30,718	23,364	42,247	27,677	49,601	165,445	180,539	136,831	15,340	145,989	14,089
Central Region		10,076,545	224,502	394,253	577,821	484,093	887,525	587,000	981,253	2,474,727	2,698,671	2,045,001	265,368	2,325,586	236,185
36	Gorkha	264,854	5,745	10,214	14,609	11,574	20,614	13,435	23,649	65,933	73,512	55,690	7,018	66,843	6,033
37	Lamjung	164,784	3,572	6,254	8,962	7,087	12,747	8,368	14,622	41,367	46,099	34,911	4,341	39,656	3,738
38	Tanaha	324,254	7,034	12,265	17,755	14,024	25,986	17,452	29,717	86,553	94,952	71,950	8,633	82,201	7,403
39	Syangja	281,726	6,111	10,587	15,166	11,936	21,716	14,359	24,946	73,842	81,764	61,949	7,472	71,643	6,419
40	Kaski	517,181	11,215	18,778	26,631	20,669	37,434	24,618	43,396	143,350	155,773	118,056	13,791	120,271	11,819
41	Manang	5,284	111	165	228	196	330	197	362	1,218	1,355	1,022	123	949	113
42	Mustang	10,908	237	384	540	467	773	462	846	2,653	2,971	2,241	269	1,431	240
43	Myagdi	115,997	2,520	4,916	7,321	5,997	10,870	7,278	12,194	28,778	31,837	24,116	3,059	27,690	2,636
44	Parbat	143,457	3,114	5,686	8,274	6,634	11,970	7,924	13,610	37,137	41,113	31,137	3,781	36,159	3,258
45	Baglung	266,900	5,794	11,095	16,521	13,457	24,760	16,729	27,824	70,322	76,979	58,317	7,080	67,310	6,083
46	Gulmi	275,084	5,960	11,207	16,642	13,497	25,057	16,995	28,202	70,730	78,028	59,107	7,269	71,485	6,255
47	Palpa	257,537	5,588	10,107	14,768	11,817	21,729	14,573	24,680	68,713	75,431	57,145	6,820	66,648	5,864
48	Nawalparasi	661,107	14,337	25,061	36,410	28,208	52,992	36,133	61,194	175,334	191,021	144,753	18,655	165,595	15,100
49	Rupandehi	925,084	20,061	35,720	52,472	40,981	77,736	53,507	89,227	235,957	255,912	193,945	26,149	229,248	21,150
50	Kapilvastu	595,488	12,920	25,269	38,594	31,206	60,237	42,356	67,625	136,438	148,199	112,298	16,799	145,944	13,599
51	Arghakhanchi	194,651	4,223	8,180	12,206	9,972	18,428	12,482	20,662	50,304	55,515	42,063	5,163	49,490	4,436
Western Region		5,004,296	108,542	195,888	287,099	227,722	423,379	286,868	482,756	1,288,629	1,410,461	1,068,700	136,422	1,242,563	114,146
52	Pyuthan	230,853	6,373	12,193	18,174	14,439	26,936	18,478	30,671	56,854	62,015	46,981	7,716	59,863	6,738
53	Rolpa	224,318	6,193	11,802	17,520	13,897	25,737	17,558	29,360	53,874	58,695	44,462	7,494	57,689	6,548
54	Rukum	212,982	5,879	10,536	15,521	12,076	22,937	15,846	26,382	50,293	54,750	41,479	7,116	56,198	6,218
55	Salyan	269,711	7,445	13,273	19,374	15,005	28,057	19,153	32,426	64,702	70,015	53,046	9,024	72,546	7,881
56	Dang	574,065	15,848	26,369	37,446	30,863	54,902	35,116	61,485	152,042	164,333	124,543	19,448	148,976	16,800
57	Banke	516,289	14,251	23,841	34,270	28,357	51,373	33,445	57,286	129,012	139,225	105,511	17,480	129,064	15,104
58	Bardiya	435,353	12,018	19,724	27,583	22,593	39,228	24,494	44,218	114,877	124,386	94,268	14,752	114,898	12,741
59	Surkhet	362,262	9,998	17,812	26,023	20,153	37,679	25,737	43,549	91,245	98,433	74,582	12,131	92,704	10,586
60	Dailekh	271,195	7,488	14,590	21,928	17,544	32,787	22,581	37,171	60,217	65,448	49,581	9,058	69,899	7,917
61	Jajarkot	180,621	4,982	10,144	15,544	12,622	23,914	16,692	26,836	38,197	41,425	31,385	6,042	44,480	5,276
62	Dolpa	38,002	1,052	2,035	3,059	2,712	4,851	3,163	5,198	8,355	9,146	6,920	1,270	8,371	1,104
63	Jumla	120,208	3,319	6,566	9,925	8,813	15,722	10,268	16,834	26,369	28,638	21,692	4,054	28,741	3,507
64	Kalikot	146,335	4,038	8,648	13,270	11,917	21,141	13,846	22,494	29,225	31,877	24,149	4,946	35,102	4,273
65	Mugu	59,057	1,630	3,509	5,3										

Estimated Target Population Fiscal Year 2071/72 (2014/2015)

DC	District	Total Population	Population of 0-11 months	Population of 12-23 months	Population of 24-35 months	Population of 36-47 months	Population of 48-59 months	Population of 0-4 years	Female population of 15-44 years	Women of Reproductive of 15-49 years	Married Women of Reproductive age 15-49 years	Expected Pregnancies of 15-49 years	Adolescent Population of 10-19 years	Expected Live birth
NEPAL		27,723,373	608,802	576,324	555,246	542,989	536,699	2,820,060	7,143,666	7,812,882	5,922,174	724,839	6,366,442	614,666
1	Taplejung	128,499	2,857	2,701	2,620	2,571	2,531	13,280	33,202	36,404	27,595	3,451	30,195	2,927
2	Panchthar	193,593	4,135	3,924	3,801	3,742	3,716	19,318	51,137	56,108	42,525	4,957	45,542	4,202
3	Ilam	298,346	5,825	5,599	5,484	5,442	5,426	27,776	78,117	85,615	64,896	6,958	68,395	5,900
4	Jhapa	855,600	18,215	17,175	16,464	16,033	15,829	83,716	230,281	252,066	191,066	21,563	192,033	18,287
5	Morang	1,014,212	21,860	20,627	19,781	19,262	19,012	100,542	265,297	290,638	220,300	25,903	229,343	21,967
6	Sunsari	819,591	17,530	16,650	16,056	15,727	15,580	81,543	213,848	233,706	177,153	20,757	186,765	17,602
7	Dhankuta	166,393	3,572	3,371	3,251	3,173	3,132	16,499	44,568	48,924	37,085	4,279	37,991	3,629
8	Terhathum	101,209	2,147	2,049	1,991	1,956	1,937	10,080	27,034	29,668	22,489	2,585	23,395	2,192
9	Sankhuwasabha	157,480	3,381	3,251	3,168	3,127	3,105	16,032	40,639	44,589	33,795	4,051	36,378	3,435
10	Bhojpur	172,098	3,825	3,611	3,467	3,383	3,328	17,614	44,399	48,834	37,015	4,613	40,080	3,913
11	Solukhumbu	104,496	2,280	2,159	2,086	2,047	2,012	10,584	26,379	28,979	21,966	2,739	24,333	2,325
12	Okhaldhunga	148,812	3,332	3,101	2,956	2,876	2,830	15,095	38,946	42,786	32,434	4,030	35,100	3,416
13	Khotang	193,385	4,282	4,063	3,933	3,864	3,805	19,947	49,805	54,731	41,483	5,209	45,873	4,416
14	Udayapur	331,436	7,332	6,940	6,694	6,555	6,497	34,018	88,098	96,328	73,014	8,720	77,981	7,397
15	Saptari	664,906	14,314	13,809	13,515	13,380	13,333	68,351	167,704	183,845	139,355	17,091	149,844	14,490
16	Siraha	660,594	14,887	14,182	13,744	13,507	13,381	69,701	168,287	184,410	139,789	17,728	149,491	15,035
Eastern Region		6,010,650	129,774	123,212	119,011	116,645	115,454	604,096	1,567,741	1,717,631	1,301,960	154,634	1,372,739	131,133
17	Dhanusha	786,266	17,363	16,497	15,960	15,684	15,580	81,084	194,205	212,859	161,350	20,651	179,224	17,510
18	Mahottari	656,037	14,985	14,307	13,871	13,629	13,515	70,307	161,685	177,350	134,434	17,806	148,030	15,099
19	Sarlahi	813,977	18,545	17,738	17,211	16,894	16,735	87,123	195,508	214,064	162,261	22,028	185,105	18,682
20	Sindhuli	300,853	6,774	6,407	6,183	6,060	6,008	31,432	76,963	84,217	63,836	8,088	71,101	6,858
21	Ramechhap	203,966	4,285	4,017	3,852	3,776	3,742	19,672	53,615	58,941	44,678	5,150	48,659	4,368
22	Dolakha	186,160	3,997	3,741	3,587	3,494	3,451	18,270	48,806	53,684	40,690	4,798	43,644	4,070
23	Sindhupalchok	289,780	6,126	5,747	5,529	5,421	5,357	28,180	73,978	81,225	61,570	7,357	66,978	6,235
24	Kavre	389,550	8,006	7,493	7,183	7,026	6,953	36,661	101,659	111,450	84,480	9,607	90,904	8,146
25	Lalitpur	505,490	9,898	9,366	9,008	8,803	8,701	45,776	129,317	141,233	107,056	11,748	111,658	9,960
26	Bhaktapur	327,907	6,596	6,167	5,879	5,703	5,620	29,965	83,988	91,649	69,470	7,814	73,070	6,625
27	Kathmandu	1,916,667	37,749	35,811	34,467	33,640	33,247	174,914	485,963	528,739	400,781	44,611	426,592	37,830
28	Nuwakot	280,878	5,869	5,510	5,295	5,184	5,120	26,978	72,773	79,817	60,501	7,032	65,573	5,963
29	Rasuwa	43,885	957	893	851	828	816	4,345	10,862	11,933	9,045	1,152	10,094	977
30	Dhading	342,210	7,459	6,993	6,693	6,528	6,449	34,122	90,032	98,675	74,796	8,888	79,881	7,537
31	Makawanpur	436,089	9,428	8,918	8,592	8,413	8,325	43,676	110,948	121,389	92,011	11,202	100,989	9,501
32	Rautahat	741,598	16,963	16,342	15,958	15,751	15,633	80,647	174,673	190,946	144,740	20,185	167,572	17,119
33	Bara	737,985	16,656	16,058	15,688	15,492	15,402	79,296	175,734	192,151	145,653	19,802	167,224	16,792
34	Parsa	641,848	14,372	13,910	13,628	13,462	13,367	68,739	150,351	164,437	124,642	17,112	144,062	14,511
35	Chitwan	623,832	12,798	12,030	11,533	11,249	11,146	58,756	166,401	181,951	137,918	15,157	143,223	12,856
Central Region		10,224,978	218,826	207,945	200,968	197,037	195,167	1,019,943	2,557,461	2,796,710	2,119,912	260,188	2,323,583	220,639
36	Gorkha	260,509	5,733	5,296	5,022	4,856	4,763	25,670	71,258	78,395	59,423	6,890	60,725	5,840
37	Lamjung	168,652	3,661	3,401	3,238	3,141	3,077	16,518	45,712	50,290	38,116	4,413	38,687	3,743
38	Tanahu	331,292	7,051	6,646	6,384	6,246	6,191	32,518	92,589	101,429	76,882	8,396	76,967	7,119
39	Syangja	273,925	5,850	5,472	5,239	5,104	5,041	26,706	76,996	84,552	64,089	7,006	63,801	5,943
40	Kaski	527,439	10,874	10,245	9,828	9,579	9,475	50,001	139,769	152,666	115,724	12,893	120,636	10,937
41	Manang	6,399	126	116	113	110	103	568	1,369	1,503	1,140	164	1,351	139
42	Mustang	12,625	256	244	227	221	211	1,159	3,025	3,326	2,520	334	2,634	283
43	Myagdi	112,439	2,595	2,413	2,294	2,221	2,174	11,697	30,196	33,156	25,133	3,135	25,691	2,658
44	Parbat	146,962	3,278	3,036	2,892	2,801	2,745	14,752	40,522	44,502	33,733	3,958	34,163	3,356
45	Baglung	273,614	6,202	5,809	5,559	5,397	5,301	28,268	76,632	83,885	63,585	7,413	63,528	6,287
46	Gulmi	269,573	6,072	5,689	5,448	5,311	5,228	27,748	75,877	83,238	63,094	7,302	63,238	6,192
47	Palpa	255,969	5,602	5,253	5,029	4,903	4,835	25,622	71,629	78,474	59,484	6,711	59,813	5,690
48	Nawalparasi	675,379	14,353	13,572	13,080	12,806	12,696	66,507	181,491	198,368	150,363	17,054	156,177	14,460
49	Rupandehi	950,288	20,395	19,378	18,720	18,354	18,202	95,049	245,153	267,588	202,831	24,180	219,691	20,506
50	Kapilvastu	607,225	13,835	13,169	12,740	12,481	12,329	64,554	150,115	163,933	124,266	16,457	140,015	13,956
51	Arghakhanchi	198,559	4,549	4,253	4,061	3,942	3,883	20,688	55,858	61,291	46,461	5,441	46,149	4,612
Western Region		5,070,849	110,432	103,992	99,874	97,473	96,254	508,025	1,358,191	1,486,596	1,126,844	131,747	1,173,266	111,721
52	Pyuthan	231,756	5,659	5,305	5,064	4,911	4,834	25,773	64,233	70,235	53,240	6,766	54,227	5,739
53	Rolpa	228,507	5,550	5,194	4,958	4,811	4,721	25,234	61,028	66,702	50,559	6,629	53,216	5,619
54	Rukum	215,151	5,001	4,737	4,568	4,477	4,431	23,214	56,272	61,497	46,614	5,985	50,651	5,075
55	Salyan	252,691	5,889	5,546	5,327	5,194	5,125	27,081	65,617	71,592	54,266	7,016	59,824	5,950
56	Dang	587,924	12,927	12,239	11,789	11,523	11,423	59,901	157,937	172,215	130,540	15,305	137,540	12,980
57	Banke	533,874	11,712	11,182	10,838	10,641	10,564	54,937	135,709	147,884	112,095	13,888	123,788	11,777
58	Bardiya	446,466	9,789	9,184	8,779	8,544	8,447	44,743	118,417	129,190	97,929	11,599	104,968	9,835
59	Surkhet	375,170	8,663	8,187	7,870	7,680	7,566	39,966	96,952	105,640	80,077	10,292	87,218	8,728
60	Dailekh	273,636	6,740	6,358	6,091	5,914	5,783	30,886	68,069	74,358	56,363	8,051	64,204	6,829
61	Jajarkot	179,786	4,529	4,298	4,130	4,018	3,941	20,916	43,517	47,498	36,004	5,390	41,707	4,570
62	Dolpa	38,607	951	891	857	837	808	4,344	9,377	10,261	7,776	1,168	8,615	991
63	Jumla	114,289	2,834	2,676	2,565	2,486	2,428	12,989	27,666	30,214	22,900	3,397	26,240	2,881
64	Kalikot	143,984	3,776	3,546	3,367	3,252	3,155	17,096	33,951	37,126	28,142	4,510	33,208	3,825
65	Mugu	58,123	1,542	1,426	1,350	1,290	1,250	6,858	13,617	14,841	11,249	1,865	13,170	1,581
66	Humla	53,580	1,389	1,283	1,220	1,165	1,123	6,180	12,611	13,830	10,485	1,680	11,939	1,425
Mid-western Region		3,733,544	86,951	82,052	78,773	76,743	75,599	400,118	964,973	1,053,083	798,239	103,541	870,515	87,805
67	Bajura	141,652	3,536	3,332	3,191	3,097	3,031	16,187	34,511	37,766	28,629	4,220	32,776	3,577
68	Bajhang	203,713	5,035	4,765	4,575	4,461	4,382	23,218	50,928	55,722	42,240	6,006	47,349	5,094
69	Achham	266,763	6,703	6,295										

Raw Data
Health Institution Sheet 1 of 3

District Code	District Name	Received Reports	Hospital				PHCC/HC					Health Post						
			Total No. of Hospital	Current Month Received Reports	Total No. of Reports Received	Service Provided to Total Patients (New+Old)	Total No. of PHCC	Current Month Received Reports	Total No. of Reports Received	Service Provided to Total Patients (New+Old)	Integrated Supervision		Total No. of Health Post	Current Month Received Reports	Total No. of Reports Received	Service Provided to Total Patients (New+Old)	Integrated Supervision	
											Total Institution Supervised	Number of Visits					Total Institution Supervised	Number of Visits
	Mountain	192	16	14	167	263303	20	20	239	200563	0	0	263	262	3115	920968	0	0
	Hill	468	54	47	541	1980893	101	98	1212	1449352	0	0	827	804	9910	4002424	0	0
	Terai	240	32	25	301	1988843	87	86	1038	1327973	0	0	469	468	5597	3986499	0	0
	National Total	900	102	86	1009	4233039	208	204	2489	2977888	0	0	1559	1534	18622	8909891	0	0
1	Taplejung	12	1	1	12	26666	2	2	24	8355	0	0	12	12	144	40988	0	0
2	Panchthar	12	1	1	12	47074	2	2	24	12672	0	0	20	20	240	79340	0	0
3	Ilam	12	1	1	12	23736	4	4	48	23282	0	0	18	18	216	63044	0	0
4	Jhapa	12	1	1	12	76296	6	6	72	115871	0	0	16	16	192	163672	0	0
5	Morang	12	2	2	24	254870	7	7	84	101146	0	0	34	34	408	315667	0	0
6	Sunsari	12	2	1	12	47616	5	5	60	75349	0	0	17	17	204	212441	0	0
7	Dhankuta	12	1	1	12	55230	2	2	24	14303	0	0	24	24	288	90053	0	0
8	Tehrathum	12	1	1	12	17458	2	2	24	7715	0	0	15	15	180	63128	0	0
9	Sankhuwasabha	12	1	1	12	24578	2	2	24	12554	0	0	23	23	276	102363	0	0
10	Bhojpur	12	1	1	12	51691	3	3	36	15479	0	0	21	21	250	79810	0	0
11	Solukhumbu	12	1	1	12	16547	2	2	24	23645	0	0	18	18	216	75263	0	0
12	Okhaldhunga	12	1	1	12	11990	1	1	12	2988	0	0	15	15	180	76832	0	0
13	Khotang	12	1	1	12	35934	2	2	24	14803	0	0	24	24	288	87487	0	0
14	Udaypur	12	2	2	24	85503	1	1	12	17954	0	0	20	20	240	110972	0	0
15	Saptari	12	1	1	12	57179	4	4	48	48121	0	0	30	30	360	207167	0	0
16	Siraha	12	2	2	24	47135	4	4	48	58953	0	0	20	20	240	155011	0	0
	Eastern	192	20	19	228	879503	49	49	588	553190	0	0	327	327	3922	1923238	0	0
17	Dhanusha	12	1	1	12	236463	5	5	60	66284	0	0	29	28	335	174651	0	0
18	Mahottari	12	2	1	22	50265	5	5	60	70318	0	0	18	18	215	124408	0	0
19	Sarlahi	12	1	1	12	33669	5	4	56	72652	0	0	26	26	299	217294	0	0
20	Sindhuli	12	3	1	12	19765	4	4	48	22914	0	0	25	25	300	76346	0	0
21	Ramechhap	12	1	1	12	20900	3	3	36	22123	0	0	23	23	276	103789	0	0
22	Dolkha	12	1	1	12	27862	2	2	24	28972	0	0	25	25	297	84611	0	0
23	Sindhupalchowk	12	1	1	12	29865	3	3	36	38305	0	0	26	26	312	85164	0	0
24	Kavre	12	1	1	12	11623	4	4	48	31025	0	0	25	25	300	136957	0	0
25	Lalitpur	12	2	0	0	0	4	1	48	527040	0	0	22	1	264	57816	0	0
26	Bhaktapur	12	1	1	12	72907	2	2	24	21454	0	0	14	14	168	163211	0	0
27	Kathmandu	12	9	4	38	426044	8	8	96	67661	0	0	26	26	312	163315	0	0
28	Nuwakot	12	1	1	12	32647	3	3	36	20361	0	0	30	30	360	92758	0	0
29	Rasuwa	12	1	1	12	5891	1	1	12	7997	0	0	14	14	168	42887	0	0
30	Dhading	12	1	1	12	46171	2	2	24	52804	0	0	33	33	396	215497	0	0
31	Makawanpur	12	1	1	11	56141	4	4	48	72631	0	0	23	22	266	111086	0	0
32	Rautahat	12	2	2	24	99646	4	4	48	50198	0	0	23	23	274	123510	0	0
33	Bara	12	1	1	12	36794	5	5	60	55321	0	0	42	42	504	231943	0	0
34	Parsa	12	2	0	0	0	3	3	36	16500	0	0	38	38	456	7680	0	0
35	Chitwan	12	2	2	21	227073	4	4	48	75047	0	0	24	24	288	240264	0	0
	Central	228	34	22	260	1433726	71	67	848	1319607	0	0	486	463	5790	2453187	0	0
36	Gorkha	12	2	2	24	73136	3	3	36	23333	0	0	19	19	228	65991	0	0
37	Lamjung	12	1	1	12	61388	2	2	24	9538	0	0	20	20	240	76222	0	0
38	Tanahu	12	2	2	24	28324	2	2	24	19693	0	0	26	26	312	94461	0	0
39	Syangja	12	1	1	12	34216	3	3	36	60922	0	0	26	26	312	100283	0	0
40	Kaski	12	1	1	12	217187	3	3	36	21226	0	0	25	25	300	141465	0	0
41	Manang	12	1	1	11	4545	0	0	0	0	0	0	10	9	117	7935	0	0
42	Mustang	12	1	1	12	7531	1	1	12	3830	0	0	12	12	144	15343	0	0
43	Myagdi	12	1	1	12	37146	1	1	12	9525	0	0	16	16	192	47074	0	0
44	Parbat	12	1	1	12	30816	2	2	24	12642	0	0	19	19	228	71725	0	0
45	Baglung	12	1	1	12	37288	3	3	36	31716	0	0	21	21	252	95631	0	0
46	Gulmi	12	1	1	12	51312	4	4	48	31535	0	0	23	23	276	125815	0	0
47	Palpa	12	2	2	24	32854	2	2	24	18169	0	0	29	29	348	142178	0	0
48	Nawalparasi	12	1	1	12	32855	5	5	60	74064	0	0	18	18	216	136851	0	0
49	Rupandehi	12	2	0	0	0	5	5	60	70200	0	0	26	26	312	299520	0	0
50	Kapilvastu	12	3	2	19	37747	3	3	34	46829	0	0	16	16	190	151546	0	0
51	Arghakhanchi	12	1	1	12	17985	2	2	24	22789	0	0	20	20	240	81756	0	0
	Western	192	22	19	222	704330	41	41	490	456011	0	0	326	325	3907	1653796	0	0
52	Pyuthan	12	1	1	11	25698	2	2	24	25554	0	0	23	23	276	149103	0	0
53	Rolpa	12	1	1	12	17227	2	2	24	16931	0	0	20	20	239	88786	0	0
54	Rukum	12	1	1	12	33644	2	2	24	11701	0	0	14	14	168	73735	0	0
55	Salyan	12	1	1	12	44731	2	2	24	20963	0	0	15	15	180	91231	0	0
56	Dang	12	2	2	24	167585	3	3	36	61808	0	0	20	20	240	247490	0	0
57	Banke	12	1	1	12	316858	3	3	36	40956	0	0	20	20	240	196194	0	0
58	Bardiya	12	1	1	12	27756	3	3	36	50349	0	0	18	18	216	259658	0	0
59	Surkhet	12	2	2	24	61281	3	3	36	47664	0	0	29	29	348	238016	0	0
60	Dailekh	12	1	1	12	22410	3	3	36	26859	0	0	16	16	192	86050	0	0
61	Jajarkot	12	1	1	12	27515	2	2	24	9208	0	0	11	11	132	65950	0	0
62	Dolpa	12</																

Raw Data
Health Institution Sheet 2 of 3

District Code	District Name	Received Reports	Sub Health Post						PHC/Outreach Clinic						EPI Clinic					
			Total No. of Sub Health Post	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 Institution Supervised	Number of visits					Total Institution Supervised	Number of visits					Total Institution Supervised	Number of visits
	Mountain	192	269	264	3154	720920	155	171	1590	1228	14612	289708	487	397	1898	1693	19181	250120	549	438
	Hill	468	1142	1126	13683	3699314	1590	1358	6455	5532	67799	1340416	6692	5512	8006	7767	91657	1356093	8925	7034
	Terai	240	836	833	10001	4636702	1917	1760	4573	3817	46376	1265327	5743	4980	6936	6256	73290	2169925	8182	7340
	National Total	900	2247	2223	26838	9056936	3662	3289	12618	10577	128787	2895451	12922	10889	16840	15716	184128	3776138	17656	14812
1	Taplejung	12	39	38	455	71595	16	15	200	174	2040	35494	33	34	188	180	2023	19030	29	24
2	Panchthar	12	20	20	240	50679	2	2	152	147	1715	43435	6	6	213	211	2429	32592	7	7
3	Ilam	12	26	26	312	64276	12	12	195	185	2214	56183	187	173	190	186	2219	36984	170	163
4	Jhapa	12	28	28	336	261063	0	0	173	155	1761	67291	7	7	268	247	2884	142934	13	13
5	Morang	12	26	26	312	140750	64	64	258	256	3008	114869	438	425	333	332	3974	163995	587	566
6	Sunsari	12	30	30	360	278686	5	5	170	170	2017	58599	6	9	296	295	3531	121622	7	10
7	Dhankuta	12	11	11	132	32948	27	39	108	91	1147	19931	95	67	149	144	1737	34514	147	114
8	Teharhum	12	14	14	168	33298	0	0	65	50	656	9443	15	15	120	119	1310	14217	13	13
9	Sankhuwasabha	12	13	13	156	46938	15	31	113	72	1068	17144	18	15	200	186	2139	20750	36	25
10	Bhojpur	12	39	39	467	83168	27	25	196	193	2213	30759	65	65	195	192	2306	23523	105	102
11	Solukhumbu	12	14	14	168	55616	4	5	83	57	838	14433	18	22	112	94	1091	12218	16	20
12	Okhaldhunga	12	39	39	468	129947	63	56	171	163	1901	25590	72	54	168	158	1941	15472	61	52
13	Khotang	12	49	49	588	142067	23	18	228	190	2340	29386	21	23	230	226	2681	27700	21	23
14	Udaypur	12	24	24	288	85511	2	2	156	128	1579	29851	50	50	210	192	2252	47523	50	50
15	Saptari	12	82	82	984	348251	264	244	407	393	4708	102578	714	610	459	459	5364	117091	819	701
16	Siraha	12	84	84	1008	387449	381	377	276	240	3012	55542	1404	1403	492	471	5503	108735	1837	1845
	Eastern	192	538	537	6442	2212242	905	895	2951	2664	32217	710528	3149	2978	3823	3692	43384	938900	3918	3728
17	Dhanusha	12	69	68	818	280156	114	139	332	243	3198	76502	157	163	515	500	5687	134928	239	257
18	Mahottari	12	52	52	624	293022	411	291	304	281	3223	113417	1180	760	378	368	4242	113855	1584	1011
19	Sarlahi	12	68	66	814	396477	34	54	308	198	2325	57788	95	138	425	393	4620	137234	231	323
20	Sindhuli	12	26	26	312	60259	0	0	195	123	1467	21367	0	0	205	178	2178	39348	0	0
21	Ramechhap	12	29	28	336	72577	7	7	138	135	1553	22460	0	0	187	179	2144	23904	0	0
22	Dolkha	12	27	27	321	71692	17	16	148	138	1625	22298	7	16	165	192	1943	21815	9	13
23	Sindhupalchowk	12	49	49	588	108499	16	15	231	171	2041	35749	43	47	250	238	2666	31797	88	78
24	Kavre	12	64	64	768	233234	48	27	302	283	3482	72226	450	348	330	322	3838	41037	533	369
25	Lalitpur	12	16	1	192	74788	0	0	71	1	735	17664	0	0	120	120	1440	16848	0	0
26	Bhaktapur	12	5	5	60	27906	5	7	45	41	528	9032	29	43	144	133	1627	20351	33	36
27	Kathmandu	12	32	32	384	147174	538	341	134	121	1461	33535	824	785	174	171	2046	64273	1011	965
28	Nuwakot	12	34	34	408	64299	29	57	180	148	1896	35125	108	113	225	218	2623	37272	103	117
29	Rasuwa	12	3	3	36	3793	19	19	45	43	499	8434	114	73	57	56	671	5626	125	76
30	Dhading	12	16	16	192	71458	21	21	191	165	2010	46929	393	180	225	222	2620	55411	555	303
31	Makawanpur	12	17	17	200	61874	56	55	163	112	1620	37237	79	28	242	225	2520	46207	129	69
32	Rautahat	12	69	69	824	312406	139	96	366	313	3604	68003	263	291	482	428	5024	123707	454	447
33	Bara	12	54	54	648	242514	138	161	283	187	2497	45384	251	295	498	495	5635	103019	500	616
34	Parsa	12	41	41	492	5700	0	0	163	0	0	0	0	0	410	0	0	0	0	0
35	Chitwan	12	12	12	144	88666	12	4	107	86	1249	27401	83	46	240	227	2654	90989	168	110
	Central	228	683	664	8161	2616494	1604	1310	3706	2789	35013	750551	4076	3326	5272	4665	54178	1107621	5762	4790
36	Gorkha	12	46	46	551	155375	57	67	240	206	2351	40756	308	293	258	243	2738	28559	413	391
37	Lamjung	12	38	38	456	74204	22	22	176	173	2061	37291	125	125	198	196	2366	24154	136	136
38	Tanahu	12	19	19	228	45460	34	39	167	157	1849	31191	163	162	218	216	2501	42114	228	230
39	Syangja	12	39	39	468	97490	43	35	208	173	2109	29801	344	353	236	235	2752	36022	517	516
40	Kaski	12	20	20	240	63150	135	140	174	169	1986	61314	859	753	213	207	2377	78684	796	763
41	Manang	12	3	3	36	1165	0	0	13	11	123	824	3	3	20	19	204	344	2	2
42	Mustang	12	3	3	36	1874	6	6	18	15	182	1264	9	9	39	31	325	863	18	18
43	Myagdi	12	23	23	276	53027	0	0	103	71	869	12685	0	0	115	107	1285	16401	0	0
44	Parbat	12	33	33	395	95580	3	3	104	89	1015	13438	50	50	163	155	1864	17054	97	97
45	Baglung	12	37	37	444	134967	30	18	130	129	1501	30918	392	204	182	167	1975	32547	588	277
46	Gulmi	12	53	53	636	170141	50	18	236	223	2550	43146	496	249	319	316	3804	39527	853	306
47	Palpa	12	33	33	396	94671	69	71	185	184	2173	32322	268	204	266	266	3188	39314	416	367
48	Nawalparasi	12	53	53	633	291263	268	248	211	188	2209	45456	548	442	338	325	3956	94912	1083	895
49	Rupandehi	12	38	38	456	238040	0	0	229	229	2721	101676	0	0	317	274	3288	167688	0	0
50	Kapilvastu	12	57	57	672	347230	68	60												

Raw Data
Health InstitutionSheet 3 of 3

District Code	District Name	Received Reports	Female Community Health Volunteers					NGO/INGO					Private Health Institution							
			Total No. of FCHV	Current Month Received Reports	Total No. of Reports Received	Service Provided to Total Patients (New+Old)	Integrated Supervision		Total No. of NGO/INGO	Current Month Received Reports	Total No. of Reports Received	Service Provided to Total Patients (New+Old)	Integrated Supervision		Total No. of Institution	Current Month Received Reports	Total No. of Reports Received	Service Provided to Total Patients (New+Old)	Integrated Supervision	
							Total Institution Supervised	Number of visits					Total Institution Supervised	Number of visits					Total Institution Supervised	Number of visits
	Mountain	192	6534	5491	64177	716531	1570	980	29	23	225	59011	10	0	28	14	195	73769	110	2
	Hill	468	25369	23309	275656	4667096	34328	24038	267	173	2140	1539019	1265	75	510	332	3751	2912157	25	16
	Terai	240	18121	16537	193268	6039405	14964	12599	169	138	1523	697742	1290	42	181	89	1275	1923348	754	368
	National Total	900	50024	45337	533101	11423032	50862	37617	465	334	3888	2295772	2565	117	719	435	5221	4909274	889	386
1	Taplejung	12	855	783	9121	40579	147	121	2	0	0	60	0	0	3	0	0	250	0	0
2	Panchthar	12	394	367	4318	86999	10	4	2	0	0	0	0	0	1	0	0	0	0	0
3	Ilam	12	1074	932	10603	91526	771	725	3	3	36	35335	0	0	2	2	24	8965	0	0
4	Jhapa	12	605	544	6338	432565	24	24	6	1	33	127265	0	0	12	9	126	156264	0	0
5	Morang	12	730	712	8296	462744	1272	1307	13	11	127	71709	3	3	24	21	261	698777	711	315
6	Sunsari	12	1003	1006	11751	445471	25	25	17	13	172	39913	0	0	9	5	68	32623	0	0
7	Dhankuta	12	315	312	3631	84330	473	234	4	4	47	20150	0	0	4	4	48	12652	0	0
8	Teharthur	12	409	371	4470	43055	55	55	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	324	257	2824	61840	53	29	1	0	9	1686	0	0	6	2	19	3924	0	0
10	Bhojpur	12	567	543	6648	97302	545	535	1	1	12	2375	0	0	1	1	12	4567	0	0
11	Solukhumbu	12	306	261	3079	33815	15	15	1	1	12	1952	10	0	3	3	36	16435	0	0
12	Okhaldhunga	12	713	679	7905	120504	288	137	1	1	12	29269	0	0	2	2	17	2701	0	0
13	Khotang	12	898	816	10109	60788	137	117	0	0	0	0	0	0	1	1	12	607	0	0
14	Udayapur	12	450	398	4717	104422	4	4	1	0	8	834	0	0	4	3	39	9074	0	0
15	Saptari	12	1074	1074	12737	424687	1405	1026	1	1	12	1905	0	0	0	0	0	0	0	0
16	Siraha	12	954	941	11216	232116	3310	3326	2	0	22	1457	0	0	5	2	25	19266	0	0
	Eastern	192	10671	9996	117763	2822743	8534	7684	55	36	502	333910	13	3	77	55	687	966105	711	315
17	Dhanusha	12	909	895	10685	266689	308	259	7	2	60	63309	0	0	2	0	12	3515	0	0
18	Mahottari	12	684	672	8024	317818	2058	1091	8	7	94	10223	1	4	5	3	52	24680	0	0
19	Sarlahi	12	1352	1231	14808	218345	411	486	6	4	53	19745	0	0	3	2	24	10767	0	0
20	Sindhuli	12	495	421	5260	74773	0	0	2	1	20	2450	0	0	0	0	0	0	0	0
21	Ramechhap	12	752	630	8012	126770	0	1	4	3	47	34816	0	0	0	1	1	981	0	0
22	Dolkha	12	1262	986	12023	72971	30	16	3	0	21	16356	0	0	7	5	74	27680	110	0
23	Sindhupalchowk	12	711	621	7387	97714	199	153	9	6	107	36143	0	0	7	3	54	18540	0	2
24	Kavre	12	978	894	10647	206853	1272	722	16	9	133	59947	3	1	17	3	36	13123	5	3
25	Lalitpur	12	502	502	5783	87902	0	0	48	48	372	602484	0	0	45	0	0	0	0	0
26	Bhaktapur	12	279	270	2924	51164	18	24	16	11	133	78408	0	0	25	15	198	158071	0	0
27	Kathmandu	12	1155	1065	12435	206718	5784	4377	64	28	376	253216	2	8	323	232	2522	1644676	16	4
28	Nuwakot	12	1080	919	10101	51891	580	311	4	3	47	5610	0	0	6	4	59	31390	0	0
29	Rasuwa	12	245	224	2694	29332	302	150	1	1	10	326	0	0	1	0	0	0	0	0
30	Dhading	12	463	445	5200	119121	1382	494	6	1	40	15299	0	0	7	5	75	22400	0	0
31	Makawanpur	12	464	413	4930	229658	206	179	10	4	86	20578	13	13	8	3	59	22091	2	1
32	Rautahat	12	929	918	10665	235387	900	727	5	3	44	3757	0	1	0	0	18	0	0	0
33	Bara	12	941	914	10630	241668	550	555	3	0	17	10849	1251	1	5	2	17	4797	0	0
34	Parsa	12	797	0	0	0	0	0	1	0	0	0	0	0	15	0	0	0	0	0
35	Chitwan	12	456	422	5216	268325	266	139	27	17	207	66818	7	7	46	19	358	474771	0	4
	Central	228	14454	12442	147424	2903099	14266	9684	240	148	1867	1300334	1277	35	522	297	3559	2457482	133	14
36	Gorkha	12	621	580	6589	81653	828	751	3	1	25	6117	9	13	3	1	21	7145	0	0
37	Lamjung	12	669	662	7916	111649	487	487	4	2	38	38807	0	0	10	8	111	27780	0	0
38	Tanahu	12	466	418	5033	79695	238	240	7	7	80	14860	0	0	13	11	131	47897	0	0
39	Syangja	12	612	601	7145	131424	2353	2554	4	4	41	19549	1195	0	0	0	0	0	0	0
40	Kaski	12	1069	925	10795	233766	6760	6440	6	6	72	69567	13	13	15	15	180	743670	0	0
41	Manang	12	118	109	1205	2049	18	18	1	1	9	284	0	0	0	0	0	0	0	0
42	Mustang	12	144	78	1036	2665	90	90	0	0	3	8	0	0	0	0	0	0	0	0
43	Myagdi	12	369	346	4107	71478	0	0	0	0	0	62	0	0	1	1	12	3211	0	0
44	Parbat	12	496	465	5478	86753	77	77	4	1	32	12915	0	0	0	0	0	0	0	0
45	Baglung	12	950	916	10975	156700	2817	503	3	2	30	2276	1	1	2	2	24	7468	2	3
46	Gulmi	12	997	967	11496	152002	2835	408	2	0	8	606	0	0	5	8	55	7528	0	0
47	Palpa	12	615	614	7301	142062	1319	1203	9	9	108	119780	9	9	7	7	82	120409	0	0
48	Nawalparasi	12	713	708	8398	315333	3071	2625	18	11	140	27825	26	26	15	9	111	14594	43	43
49	Rupandehi	12	1511	1511	15230	0	0	0	1	0	0	0	0	0	9	0	0	0	0	0
50	Kapilvastu	12	1058	993	11715	148694	410	438	3	3	9	1270	0	0	3	0	7	157	0	6
51	Arghakhanchi	12	842	644	8218	114920	1030	733	1	0	11	2723	1	1	1	1	7	193	0	0
	Western	192	11250	10537	122637	1830843	22333	16567	66	47	606	316649	1254	63	84	63	741	980052	45	52
52	Pyuthan	12	441	420	4993	103957	35	34	2	1	8	800	0	0	1	1	7	11679	0	0
53	Rolpa	12	459	419	4712	86809	0	0	0	0	0	0	0	0	1	0	0	0	0	0
54	Rukum	12	387	342	3819	38561	298	251	1	0	0	0	0	0	0	0	0	0	0	0
55	Salyan	12	423	407	4773	125848	90	90	0	0	0	0	0	0	0	0	0	0	0	0
56	Dang	12	926	759	8655	214013	0	0	20	20	215	49725	0	0	7	5	48			

**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
	Mountain	192	100	86.98	99.58	98.7	97.71	76.58	84.22	81.85	64.66	58.04
	Hill	468	100	80.51	100	99.86	99.85	87.53	95.4	90.55	66.79	61.29
	Teraí	240	100	78.39	99.43	99.45	99.69	84.51	88.06	89.88	75.14	58.73
	National Total	900	100	80.85	99.72	99.54	99.53	85.06	91.12	89.17	69.69	60.52
1	Taplejung	12	100	100.00	100	100	97.22	85	89.67	88.9	0	0
2	Panchthar	12	100	100.00	100	100	100	94.02	95.03	91.33	0	0
3	Ilam	12	100	100.00	100	100	100	94.62	97.32	82.27	100	100
4	Jhapa	12	100	100.00	100	100	100	84.83	89.68	87.3	45.83	87.5
5	Morang	12	100	100.00	100	100	100	97.16	99.47	94.7	81.94	90.94
6	Sunsari	12	100	50.00	100	100	100	98.87	99.41	97.63	84.31	62.96
7	Dhankuta	12	100	100.00	100	100	100	88.5	97.15	96.06	97.92	100
8	Teharthur	12	100	100.00	100	100	100	84.1	90.97	91.08		
9	Sankhuwasabha	12	100	100.00	100	100	100	78.76	89.13	72.63	75	26.39
10	Bhojpur	12	100	100.00	100	99.21	99.79	94.09	98.55	97.71	100	100
11	Solukhumbu	12	100	100.00	100	100	100	84.14	81.18	83.85	100	100
12	Okhaldhunga	12	100	100.00	100	100	100	92.64	96.28	92.39	100	70.83
13	Khotang	12	100	100.00	100	100	100	85.53	97.14	93.81		100
14	Udaypur	12	100	100.00	100	100	100	84.35	89.37	87.35	66.67	81.25
15	Saptari	12	100	100.00	100	100	100	96.4	97.39	98.83	100	
16	Siraha	12	100	100.00	100	100	100	90.94	93.21	97.97	91.67	41.67
	Eastern	192	100	95.00	100	99.95	99.78	90.98	94.57	91.96	76.18	74.43
17	Dhanusha	12	100	100.00	100	96.26	98.79	80.27	92.02	97.96	71.43	50
18	Mahottari	12	100	91.67	100	99.54	100	88.35	93.52	97.76	97.92	86.67
19	Sarlahi	12	100	100.00	93.33	95.83	99.75	62.91	90.59	91.27	73.61	66.67
20	Sindhuli	12	100	33.33	100	100	100	62.69	88.54	88.55	83.33	
21	Ramechhap	12	100	100.00	100	100	96.55	93.78	95.54	88.79	97.92	
22	Dolkha	12	100	100.00	100	99	99.07	91.5	98.13	79.39	58.33	88.1
23	Sindhupalchowk	12	100	100.00	100	100	100	73.63	88.87	86.58	99.07	64.29
24	Kavre	12	100	100.00	100	100	100	96.08	96.92	90.72	69.27	17.65
25	Lalitpur	12	100	0.00	100	100	100	86.27	100	96	64.58	0
26	Bhaktapur	12	100	100.00	100	100	100	97.78	94.16	87.34	69.27	66
27	Kathmandu	12	100	35.19	100	100	100	90.86	97.99	89.72	48.96	65.07
28	Nuwakot	12	100	100.00	100	100	100	87.78	97.15	77.94	97.92	81.94
29	Rasuwa	12	100	100.00	100	100	100	92.41	98.1	91.63	83.33	0
30	Dhading	12	100	100.00	100	100	100	87.7	97.04	93.59	55.56	89.29
31	Makawanpur	12	100	91.67	100	96.38	98.04	82.82	86.78	88.54	71.67	61.46
32	Rautahat	12	100	100.00	100	99.28	99.52	82.06	86.86	95.67	73.33	
33	Bara	12	100	100.00	100	100	100	73.53	94.29	94.14	47.22	28.33
34	Parsa	12	100	0.00	100	100	100	0	0	0	0	0
35	Chitwan	12	100	87.50	100	100	100	97.27	92.15	95.32	63.89	64.86
	Central	228	100	63.73	99.53	99.28	99.57	78.73	85.64	85	64.83	56.82
36	Gorkha	12	100	100.00	100	100	99.82	81.63	88.44	88.42	69.44	58.33
37	Lamjung	12	100	100.00	100	100	100	97.59	99.58	98.6	79.17	92.5
38	Tanahu	12	100	100.00	100	100	100	92.27	95.6	90	95.24	83.97
39	Syangja	12	100	100.00	100	100	100	84.5	97.18	97.29	85.42	
40	Kaski	12	100	100.00	100	100	100	95.11	93	84.15	100	100
41	Manang	12	100	91.67		97.5	100	78.85	85	85.1	75	
42	Mustang	12	100	100.00	100	100	100	84.26	69.44	59.95		
43	Myagdi	12	100	100.00	100	100	100	70.31	93.12	92.75		100
44	Parbat	12	100	100.00	100	100	99.75	81.33	95.3	92.04	66.67	
45	Baglung	12	100	100.00	100	100	100	96.22	90.43	96.27	83.33	100
46	Gulmi	12	100	100.00	100	100	100	90.04	99.37	96.09	33.33	91.67
47	Palpa	12	100	100.00	100	100	100	97.88	99.87	98.93	100	97.62
48	Nawalparasi	12	100	100.00	100	100	99.53	87.24	97.53	98.15	64.81	61.67
49	Rupandehi	12	100	0.00	100	100	100	99.02	86.44	97	0	0
50	Kapilvastu	12	100	52.78	94.44	98.96	98.25	94.84	93.96	92.27	25	19.44
51	Arghakhanchi	12	100	100.00	100	100	100	86.93	95.58	81.33	91.67	58.33
	Western	192	100	84.09	99.59	99.87	99.72	90.44	94.35	92.51	76.52	73.51
52	Pyuthan	12	100	91.67	100	100	100	77.74	98.94	94.35	33.33	58.33
53	Rolpa	12	100	100.00	100	99.58	99.71	87.59	93.18	85.55		0
54	Rukum	12	100	100.00	100	100	100	85.4	94.19	82.24	0	
55	Salyan	12	100	100.00	100	100	100	71.06	90.42	94.03		
56	Dang	12	100	100.00	100	100	100	90.79	96.31	77.89	89.58	57.14
57	Banke	12	100	100.00	100	100	100	88.1	94.92	93.95	90.48	100
58	Bardiya	12	100	100.00	100	100	100	90.71	96.62	94.53	91.67	25
59	Surkhet	12	100	100.00	100	100	100	94.73	98.51	89.9	100	
60	Dailekh	12	100	100.00	100	100	100	81.3	92.84	95.76	100	100
61	Jajarkot	12	100	100.00	100	100	100	75.74	92.64	90.74		
62	Dolpa	12	100	100.00		85	89.1	38	55.19	40.26		
63	Jumla	12	100	0.00	100	100	100	82.19	75.78	77.17	16.67	
64	Kalikot	12	100	100.00	100	100	100	72.67	92.67	84.18		
65	Mugu	12	100	100.00	91.67	92.78	75	54.91	47.05	72.88		
66	Humla	12	100	100.00		98.81	99.31	61.54	56.12	75.72	0	
	Mid Western	180	100	93.63	99.7	98.9	98.72	79.86	89.94	86.45	84.77	74.24
67	Bajura	12	100	100.00	100	99.51	99.07	75.52	88.18	95.47	66.67	
68	Bajhang	12	100	100.00	100	100	100	69.53	92.78	86.29	50	0
69	Achham	12	100	100.00	100	100	100	96.33	99.08	91.71	57.78	
70	Doti	12	100	54.17	100	100	100	71.79	95.88	83.02	100	2.78
71	Kailali	12	100	95.83	100	100	100	91.84	94.03	93.46	93.06	13.89
72	Kanchanpur	12	100	100.00	100	100	100	89.83	95.57	90.73	53.33	58.33
73	Dadeldhura	12	100	100.00	100	99.58	97.92	75.19	96.14	89.2	1.39	0
74	Baitadi	12	100	100.00	100	100	100	98.11	99.92	98.3	93.75	
75	Darchula	12	100	0.00	100	99.4	96.15	86.72	90.13	95.21		
	Far Western	108	100	81.82	100	99.85	99.45	86.47	95.54	91.65	58.51	22.62

**Analysed Data
Reporting Status Sheet 2 of 2**

District Code	District Name	Received Report	Average no of People Served									Average no of Supervisory Visits in different Health Institution					
			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)	SHp	ORC	EPIC	FCHV	NGO	PHI
	Mountain	192	66	35	12	10	20	13	11	11	16	0.64	0.25	0.23	0.15	0	0.07
	Hill	468	153	50	17	11	20	15	17	30	32	1.19	0.85	0.88	0.95	0.28	0.03
	Terai	240	275	53	30	19	27	30	31	19	63	2.11	1.09	1.06	0.7	0.25	2.03
	National Total	900	175	50	20	14	22	21	21	25	39	1.46	0.86	0.88	0.75	0.25	0.54
1	Taplejung	12	93	15	12	7	17	9	4			0.38	0.17	0.13	0.14	0	0
2	Panchthar	12	163	22	14	9	25	13	20			0.1	0.04	0.03	0.01	0	0
3	Ilam	12	82	20	12	9	25	17	9	41	16	0.46	0.89	0.86	0.68	0	0
4	Jhapa	12	265	67	36	32	38	50	68	161	52	0	0.04	0.05	0.04	0	0
5	Morang	12	442	50	32	19	38	41	56	24	112	2.46	1.65	1.7	1.79	0.23	13.13
6	Sunsari	12	165	52	43	32	29	34	38	10	20	0.17	0.05	0.03	0.02	0	0
7	Dhankuta	12	192	25	13	10	17	20	23	18	11	3.55	0.62	0.77	0.74	0	0
8	Teharhum	12	61	13	15	8	14	11	10			0	0.23	0.11	0.13		
9	Sankhuwasabha	12	85	22	15	13	16	10	22	8	9	2.38	0.13	0.13	0.09	0	0
10	Bhojpur	12	179	18	13	7	14	10	15	8	16	0.64	0.33	0.52	0.94	0	0
11	Solukhumbu	12	57	41	15	14	17	11	11	7	19	0.36	0.27	0.18	0.05	0	0
12	Okhaldhunga	12	42	10	18	12	13	8	15	102	7	1.44	0.32	0.31	0.19	0	0
13	Khotang	12	125	26	13	10	13	10	6		2	0.37	0.1	0.1	0.13		0
14	Udaypur	12	148	62	19	12	19	21	22	4	10	0.08	0.32	0.24	0.01	0	0
15	Saptari	12	199	42	24	15	22	22	33	7		2.98	1.5	1.53	0.96	0	
16	Siraha	12	82	51	27	16	18	20	21	3	32	4.49	5.08	3.75	3.49	0	0
	Eastern	192	161	39	20	14	22	22	24	28	59	1.66	1.01	0.98	0.72	0.05	4.09
17	Dhanusha	12	821	46	22	14	24	24	25	44	12	2.01	0.49	0.5	0.28	0	0
18	Mahottari	12	95	49	24	20	35	27	40	5	20	5.6	2.5	2.67	1.6	0.5	0
19	Sarlahi	12	117	54	30	20	25	30	15	16	19	0.79	0.45	0.76	0.36	0	0
20	Sindhuli	12	69	20	11	8	15	18	14	5		0	0	0	0	0	
21	Ramechhap	12	73	26	16	9	14	11	16	31	41	0.24	0	0	0	0	
22	Dolkha	12	97	50	12	9	14	11	6	32	16	0.59	0.11	0.08	0.01	0	0
23	Sindhupalchowk	12	104	44	11	8	18	12	13	14	14	0.31	0.2	0.31	0.22	0	0.29
24	Kavre	12	40	27	19	13	21	11	19	19	15	0.42	1.15	1.12	0.74	0.06	0.18
25	Lalitpur	12		458	9	16	24	12	15	67		0	0	0	0	0	0
26	Bhaktapur	12	253	37	40	19	17	13	17	25	33	1.4	0.96	0.25	0.09	0	0
27	Kathmandu	12	467	29	22	16	23	31	17	28	27	10.66	5.86	5.55	3.79	0.13	0.01
28	Nuwakot	12	113	24	11	7	19	14	5	5	22	1.68	0.63	0.52	0.29	0	0
29	Rasuwa	12	20	28	11	4	17	8	11	1		6.33	1.62	1.33	0.61	0	0
30	Dhading	12	160	92	23	16	23	21	23	16	12	1.31	0.94	1.35	1.07	0	0
31	Makawanpur	12	213	63	17	13	23	18	47	10	16	3.24	0.17	0.29	0.39	1.3	0.13
32	Rautahat	12	173	44	19	16	19	25	22	4	0	1.39	0.8	0.93	0.78	0.2	
33	Bara	12	128	38	19	16	18	18	23	27	12	2.98	1.04	1.24	0.59	0.33	0
34	Parsa	12		19	1	0						0	0	0	0	0	0
35	Chitwan	12	451	65	35	26	22	34	51	13	55	0.33	0.43	0.46	0.3	0.26	0.09
	Central	228	230	65	18	13	21	20	20	29	29	1.92	0.9	0.91	0.67	0.15	0.03
36	Gorkha	12	127	27	12	12	17	10	12	10	14	1.46	1.22	1.52	1.21	4.33	0
37	Lamjung	12	213	17	13	7	18	10	14	43	10	0.58	0.71	0.69	0.73	0	0
38	Tanahu	12	49	34	13	8	17	17	16	8	15	2.05	0.97	1.06	0.52	0	0
39	Syangja	12	119	71	13	9	14	13	18	20		0.9	1.7	2.19	4.17	0	
40	Kaski	12	754	25	20	11	31	33	22	40	172	7	4.33	3.58	6.02	2.17	0
41	Manang	12	17		3	1	7	2	2	1		0	0.23	0.1	0.15	0	
42	Mustang	12	26	13	4	2	7	3	3	0		2	0.5	0.46	0.63		
43	Myagdi	12	129	33	10	8	15	13	17		11	0	0	0	0		0
44	Parbat	12	107	22	13	10	13	9	16	17		0.09	0.48	0.6	0.16	0	
45	Baglung	12	129	37	16	13	21	16	14	3	13	0.49	1.57	1.52	0.53	0.33	1.5
46	Gulmi	12	178	27	19	11	17	10	13	3	6	0.34	1.06	0.96	0.41	0	0
47	Palpa	12	57	32	17	10	15	12	19	46	61	2.15	1.1	1.38	1.96	1	0
48	Navalparasi	12	114	51	26	19	21	24	38	8	5	4.68	2.09	2.65	3.68	1.44	2.87
49	Rupandehi	12		49	40	22	37	51	0			0	0	0	0	0	0
50	Kapilvastu	12	83	57	33	22	22	28	13	6	1	1.05	0.56	0.61	0.41	0	2
51	Arghakhanchi	12	62	40	14	10	21	12	14	10	1	1.26	3.02	2.19	0.87	1	0
	Western	192	132	39	18	13	21	20	15	22	55	1.46	1.27	1.34	1.47	0.95	0.62
52	Pyuthan	12	97	44	23	16	21	13	21	4	70	0.43	0.05	0.04	0.08	0	0
53	Rolpa	12	60	29	15	12	17	13	18			0	0	0.02	0		0
54	Rukum	12	117	20	18	11	19	17	10			0.3	0.62	0.68	0.65	0	
55	Salyan	12	155	36	21	16	23	13	26			0.23	0.12	0.21	0.21		
56	Dang	12	291	72	43	33	34	40	25	10	17	0	0	0	0	0	0
57	Banke	12	1100	47	34	32	29	24	38	75	170	0	0	0	0	0	0
58	Bardiya	12	96	58	50	45	37	29	41	14	0	0.17	0.4	0.36	0.46	0	0
59	Surkhet	12	106	55	28	19	24	26	16	22		4.67	1.24	1.06	0.44	0	
60	Dailekh	12	78	31	19	14	19	15	24	12	12	0	0	0	0	0	0
61	Jajarkot	12	96	16	21	11	24	20	13			1.24	0.07	0.16	0.14		
62	Dolpa	12	103		6	6	11	11	3			0.38	0.09	0.16	0.05		
63	Jumla	12		26	11	10	33	21	13	5		0.5	0.17	0.1	0.04	0	
64	Kalikot	12	50	14	15	10	19	20	16			0.64	0.06	0.08	0.06		
65	Mugu	12	51	9	8	9	13	15	5			0.67	0.21	0.11	0.06		
66	Humla	12	78		12	13	21	15	8		24	1.25	0.96	0.94	0.73	0	
	Mid Western	180	180	41	23	17	24	20	23	22	102	0.59	0.26	0.22	0.19	0	0
67	Bajura	12	59	75	23	13	38	16	28	1		0.67	0.06	0.1	0.05	0	
68	Bajhang	12	76	44	14	11	25	19	23	2		0.75	0.36	0.38	0.31	0	0
69	Achham	12	98	30	21	13	31	16	21	3	0	1.87	2.12	2.56	1.63	0.4	
70	Doti	12	107	14	15	14	26	12	15	15	16	0.03	0.01	0.01	0.01	0	1.67
71	Kailali	12	280	90	55	29	36	34	58	10	58	0	0	0.01	0.01	0	0
72	Kanchanpur	12	294	57	51	46	34	52	44	2	19	3.75	2	1.69	0.22	0	0
73	Dadeldhura	12	114	130	22	20	26	17	22	1		0.5	0.61	0.86	0.16	0	0
74	Baitadi	12	61	33	14	10	20	11	25	3		0.24	0.24	0.28	0.32	2.5	
75	Darchula	12		56	14	14	26	14	12			0	0.06	0	0		
	Far Western	108	150	59	25	14	27	20	31	5	26	0.73	0.57	0.63	0.37	0.35	0.36

Raw Data
EPI: Sheet 1 of 2

District Code	District Name	Received Reports	BCG	DPT-Hep B-Hib 1	DPT-Hep B-Hib 2	DPT-Hep B-Hib 3	Polio 1	Polio 2	Polio 3	Measles 9-11 months	Measles 12-23 months	Japanese Encephalitis	TT Pregnant Women			TT Total
													TT 1	TT 2	TT 2+	
	Mountain	192	39913	40682	39926	39183	40553	39802	39212	38276	1721	0	19593	18538	13938	52069
	Hill	468	254958	229122	226257	235717	228899	226163	235218	231910	4120	70091	106716	119715	93540	319971
	Terai	240	327025	298176	290783	301897	298682	291351	301015	284517	8861	197645	164300	166074	161727	492101
	National Total	900	621896	567980	556966	576797	568134	557316	575445	554703	14702	267736	290609	304327	269205	864141
1	Taplejung	12	2979	2976	2991	2918	2977	2991	2919	2795	28	0	1773	1755	1048	4576
2	Panchthar	12	4258	4376	4262	4400	4376	4262	4400	4307	25	0	2210	1947	2413	6570
3	Ilam	12	5559	5523	5575	5660	5523	5575	5660	5677	66	0	2292	2726	3657	8675
4	Jhapa	12	19961	19328	18754	19009	19346	18751	19020	18110	613	13265	13987	14597	6659	35243
5	Morang	12	26503	22770	22552	22601	22770	22552	22601	20898	204	15597	4531	6986	13767	25284
6	Sunsari	12	17308	17403	16860	16755	17403	16860	16755	16265	142	11097	7365	6826	7625	21816
7	Dhankuta	12	3520	3522	3483	3512	3522	3483	3512	3439	10	0	1283	1394	1829	4506
8	Tehrathum	12	2147	2167	2140	2177	2167	2140	2177	2066	29	0	916	1354	891	3161
9	Sankhuwasabha	12	3441	3581	3403	3425	3579	3403	3425	3360	115	0	556	879	2590	4025
10	Bhojpur	12	3556	3598	3576	3606	3598	3572	3598	3549	44	0	1087	1265	1783	4135
11	Solukhumbu	12	1936	2001	1963	1937	2001	1963	1937	1905	29	0	1046	1292	1011	3349
12	Okhaldhunga	12	2848	2778	2736	2793	2687	2713	2721	2700	38	0	1050	1276	1098	3424
13	Khotang	12	4479	4556	4456	4439	4552	4458	4350	4468	92	0	2247	2279	2146	6672
14	Udaypur	12	7346	7258	7249	7153	7233	7224	7127	6525	178	5373	3010	2854	3142	9006
15	Saptari	12	15154	15371	15042	14957	15376	15047	14975	14826	411	10025	8964	8538	8600	26102
16	Siraha	12	16318	16154	15331	14978	16146	15298	14972	14429	106	8941	7297	5760	10974	24031
	Eastern	192	137313	133362	130373	130320	133256	130292	130149	125319	2130	64298	59614	61728	69233	190575
17	Dhanusha	12	20373	20442	20144	19405	20727	20139	19388	16560	503	7714	10529	9731	11313	31573
18	Mahottari	12	16753	15877	15509	15685	16202	15795	15002	14610	207	8983	13923	13573	3855	31351
19	Sarlahi	12	18777	19216	17906	17365	19174	18414	17367	16560	4371	10284	14198	14760	9630	38588
20	Sindhuli	12	6097	6131	5931	5753	6064	5875	5708	5460	224	1504	3035	2390	1647	7072
21	Ramechhap	12	3373	3478	3571	3551	3478	3571	3551	3575	37	0	2227	2329	536	5092
22	Dolkha	12	3303	3480	3472	3387	3395	3442	3431	3392	57	0	1998	2257	997	5252
23	Sindhupalchowk	12	4916	5527	5530	5547	5543	5547	5558	5285	85	0	1580	1973	1980	5533
24	Kavre	12	7734	7552	7613	7663	7536	7609	7670	7253	71	5382	4713	4448	1220	10381
25	Lalitpur	12	12417	0	0	7964	0	0	7964	7626	0	5459	0	8943	3597	12540
26	Bhaktapur	12	3564	5521	5586	5686	5527	5586	5543	5543	224	4492	3279	2922	437	6638
27	Kathmandu	12	42821	30129	29839	31748	30130	29877	31528	33010	894	19619	23728	17746	4144	45618
28	Nuwakot	12	5169	5576	5530	5458	5576	5530	5458	5045	125	0	1950	1625	2359	5934
29	Rasuwa	12	935	986	957	922	986	957	922	926	5	0	345	519	255	1119
30	Dhading	12	6549	7138	7283	7253	7120	7277	7250	6936	39	4315	1436	3753	4140	9329
31	Makawanpur	12	7662	7868	7667	7684	7874	7662	7671	7451	136	5238	4106	3593	2066	9765
32	Rautahat	12	16638	17241	16482	15600	17103	16379	15589	13555	782	6361	15696	9175	7970	32841
33	Bara	12	16469	16667	16304	15687	16723	16256	15663	14171	269	9126	7121	6140	9137	22398
34	Parsa	12	15262	0	0	14653	0	0	14473	12907	0	8408	0	10338	8308	18646
35	Chitwan	12	13583	11164	10972	10985	11174	10972	10983	10984	117	8651	7886	7066	2251	17203
	Central	228	222395	183993	180296	201996	184332	180888	200864	190849	8146	105536	117750	123281	75842	316873
36	Gorkha	12	5019	5275	5156	5016	5275	5156	5016	4846	47	0	2907	3350	1530	7787
37	Lamjung	12	3546	3573	3653	3734	3573	3653	3734	3553	7	0	2748	2870	475	6093
38	Tanahu	12	5906	6483	6359	6323	6483	6359	6323	6317	55	0	3359	3888	1512	8759
39	Syangja	12	4950	6100	6101	6130	6100	6101	6130	6047	28	0	444	3437	3574	7455
40	Kaski	12	12873	9504	9552	9874	9504	9552	9874	9657	138	7615	4481	5547	5438	15466
41	Manang	12	46	56	66	62	54	66	62	72	0	0	42	36	9	87
42	Mustang	12	152	178	188	180	178	189	180	180	24	0	57	140	97	294
43	Myagdi	12	2298	2369	2356	2328	2369	2356	2328	2347	51	0	1235	1281	1262	3778
44	Parbat	12	2691	3002	2949	2948	3007	2949	2947	2830	24	0	512	1413	1888	3813
45	Baglung	12	5889	5786	5635	5565	5786	5635	5565	5429	70	0	4097	3593	1224	8914
46	Gulmi	12	6298	6635	5875	5901	6635	5875	5901	5757	36	0	1798	3073	4292	9163
47	Palpa	12	6763	5484	5424	5322	5484	5424	5322	5180	34	4712	687	879	4448	6014
48	Nawalparasi	12	12375	13315	13276	12989	13315	13276	12989	13056	99	10317	5668	6873	6411	18952
49	Rupandehi	12	26103	20904	20835	21074	20904	20835	21074	20041	0	15768	11966	10872	16210	39048
50	Kapilvastu	12	14376	14145	13403	13034	14121	13378	13040	12028	307	8164	4584	8667	13580	26831
51	Arghakhanchi	12	4216	4598	4290	4290	4605	4287	4290	4199	65	0	1471	2524	1798	5793
	Western	192	113501	107407	105118	104770	107393	105091	104775	101539	985	46576	46056	58443	63748	168247
52	Pyuthan	12	6189	6201	6144	6103	6201	6144	6103	6091	55	0	2150	2379	2680	7209
53	Rolpa	12	5600	5499	5394	5391	5499	5394	5383	5421	81	0	1770	2304	2145	6219
54	Rukum	12	5281	5139	5007	5005	5139	5007	5005	4752	190	0	2841	2483	1906	7230
55	Salyan	12	5593	5482	5297	5236	5482	5297	5236	5259	58	0	2279	2701	2220	7200
56	Dang	12	13680	13291	13165	13126	13291	13165	13126	12743	14	10666	7125	6331	5571	19027
57	Banke	12	13341	11775	11402	11219	11775	11402	11219	10424	237	8491	6591	5223	6126	17940
58	Bardiya	12	8213	8256												

Raw Data
EPI Sheet 2 of 2

District Code	District Name	Received Reports	Vaccine Received in Doses						Vaccine Expenditure in Doses					
			BCG	DPT - Hep B-Hib	Polio	Measles	JE	TT	BCG	DPT - Hep B-Hib	Polio	Measles	JE	TT
	Mountain	192	273727	182185	184693	147625	0	114688	258582	175481	179080	141188	0	110226
	Hill	468	1644989	997310	1020367	837719	127750	594105	1522037	953557	980848	781047	113858	548150
	Terai	240	1161604	998298	1020333	633360	280188	611354	1373212	1075188	1091671	670728	300891	660262
	National Total	900	3080320	2177793	2225393	1618704	407938	1320147	3153831	2204226	2251599	1592963	414749	1318638
1	Taplejung	12	21993	13687	13856	13934	0	7621	21741	13513	13717	13780	0	7531
2	Panchthar	12	37900	18000	18070	21725	0	10500	35640	17087	17167	20355	0	10001
3	Ilam	12	39860	22570	22670	19975	0	13796	39780	22550	22650	19955	0	13756
4	Jhapa	12	55115	66677	67970	33390	18862	43283	152513	65858	65791	32547	20596	42389
5	Morang	12	74040	78350	78230	38350	21690	34610	69500	75070	74840	36080	19875	31670
6	Sunsari	12	62900	64115	64505	38215	19167	35768	60932	62403	63259	36759	17761	34212
7	Dhankuta	12	26500	15374	15254	14233	0	9207	26340	15244	15094	13954	0	9027
8	Tehrathum	12	21280	11180	11800	11200	0	7644	20820	11090	11750	10980	0	7564
9	Sankhuwasabha	12	33446	15460	15596	18557	0	8259	32423	14987	15145	18277	0	7957
10	Bhojpur	12	33031	17259	17395	16412	0	9545	32571	17034	17824	16532	0	9167
11	Solukhumbu	12	14700	9805	9580	8155	0	6350	14388	9406	9727	8018	0	6228
12	Okhaldhunga	12	27061	19225	20216	17870	0	8842	28813	19370	20377	17986	0	9222
13	Khotang	12	43516	26987	27426	25198	0	18839	44022	26960	27399	25198	0	18839
14	Udaypur	12	41660	30568	32370	22218	10504	17740	41660	30568	32370	22218	10504	17712
15	Saptari	12	81700	64640	68050	51605	19148	47360	81720	64640	68050	51575	19148	47360
16	Siraha	12	88750	57704	58644	45154	15397	35223	80312	56480	56676	42964	14712	33932
	Eastern	192	703452	531601	541632	396191	104768	314587	783175	522260	531836	387178	102596	306567
17	Dhanusha	12	83608	72273	73782	46477	13197	44815	80689	70372	71384	45055	12821	43689
18	Mahottari	12	77789	55443	56927	40990	14963	40960	77671	54699	53848	39939	14326	39364
19	Sarlahi	12	65021	66356	66947	38026	15571	49411	76497	65206	66213	37736	15431	49094
20	Sindhuli	12	35987	28232	28101	20902	4740	18245	33161	26878	27032	19024	4296	16879
21	Ramechhap	12	33960	17687	18160	16800	0	10804	33150	17463	17968	16570	0	10855
22	Dolkha	12	32003	18227	18852	15997	0	12702	30459	17955	18478	15214	0	12509
23	Sindhupalchowk	12	43166	25597	26227	19304	0	13142	34994	22082	23122	15790	0	10990
24	Kavre	12	68782	32900	33011	29174	14096	17296	50404	28060	29729	24142	11358	14417
25	Lalitpur	12							17854	12924	13626	10482	2551	2365
26	Bhaktapur	12	19946	19477	19994	14375	7542	9387	19938	18353	18979	12692	7885	7926
27	Kathmandu	12	107700	114500	116555	64965	30295	62550	91590	102745	104921	54510	26785	51695
28	Nuwakot	12	48850	24646	24635	19945	0	12834	46896	24055	24273	19459	0	12304
29	Rasuwa	12	9860	5560	5510	4315	0	3470	8980	4920	4990	3930	0	3220
30	Dhading	12	49610	30505	30470	23840	9368	17210	47430	29277	29225	22515	8793	16190
31	Makawanpur	12	44878	31167	32473	23279	10236	16735	42498	31439	32123	22620	9632	15870
32	Rautahat	12	53185	61472	62137	34550	11259	43433	51445	60295	61308	33915	10847	42847
33	Bara	12	76261	61882	63208	45070	16729	33279	72325	58829	59849	45149	15661	30786
34	Parsa	12							64367	49600	50064	28580	13121	27303
35	Chitwan	12	61831	44747	48092	29258	15234	26872	53995	39298	42067	25819	12721	23021
	Central	228	912437	710671	725081	487267	163230	433145	934343	734450	749199	493141	166228	431324
36	Gorkha	12	49460	24377	25520	24715	0	15290	46160	23299	24355	22906	0	14619
37	Lamjung	12	40840	18440	19200	19725	0	12340	33790	16755	17365	16615	0	11168
38	Tanahu	12	46380	29310	31010	23920	0	19040	46380	29310	31010	23920	0	19040
39	Syangja	12	56220	28095	29030	24665	0	17480	47930	25414	26514	21730	0	14575
40	Kaski	12	55710	40250	41870	25645	14320	21835	46180	34800	36800	21735	12070	19770
41	Manang	12	650	832	870	480	0	450	650	793	850	460	0	440
42	Mustang	12	1750	1410	1480	1085	0	1110	1453	1365	1445	1045	0	1081
43	Myagdi	12	18760	10210	10210	8885	0	6600	17450	9790	9760	8390	0	6550
44	Parbat	12	30598	15227	15675	16696	0	8571	25959	13107	13772	13372	0	7269
45	Baglung	12	35634	23599	23727	17840	0	14006	33444	22255	22613	16790	0	12773
46	Gulmi	12	62010	27811	28280	30480	0	23700	48500	24690	25489	24280	0	17160
47	Palpa	12	71120	32480	35120	30135	16205	18020	46600	24630	26560	21385	9970	12410
48	Nawalparasi	12	67940	50250	51900	34730	17825	29010	61470	45810	46968	30805	15715	25586
49	Rupandehi	12							92100	70240	70240	40510	24920	52560
50	Kapilvastu	12	67573	48369	49598	36620	14585	37436	64984	46572	47389	35130	13461	35246
51	Argghakhanchi	12	37550	19815	20575	18768	0	11920	36190	19406	20109	18245	20	11668
	Western	192	642195	370475	384065	314389	62935	236808	649240	408236	421239	317318	76156	261915
52	Pyuthan	12	53400	28820	29045	26560	0	18350	50970	28155	28400	25635	0	17560
53	Rolpa	12	39730	24126	24633	23561	0	13160	39161	23674	24322	23140	0	12952
54	Rukum	12	31480	21655	22170	16770	0	14820	31380	21597	22100	16640	0	14740
55	Salyan	12	37940	24670	25190	17975	0	14410	36680	23680	23970	17220	0	13920
56	Dang	12	49580	46000	46070	24510	13890	24010	49280	44030	44140	23380	13245	22780
57	Banke	12	54700	41930	42340	27380	13225	24550	51290	38625	39155	24980	12005	22175
58	Bardiya	12	44901	30792	33030	20300	11454	18623	41352	27707	29740	18167	10171	16368
59	Surkhet	12	46750	31890	31880	21573	10444	17830	44920	30650	30676	20383	9994	16850
60	Dailekh	12	48970	29905	29905	29370	0	23130	48690	29715	29775	26735	0	22960
61	Jajarkot	12	25877	17066	17123	14203	0	11402	25547	17017	17221	14130	0	11454
62	Dolpa	12	4736	4913	5075	3690	0	3465	4415	4877	5039	3659	0	3414
63	Jumla	12	14747	11432	11606	8017	0	7532	13103	10936	11019	7332	0	6859
64	Kalikot	12	21680	16075	16125	12160	0	11529	21391	15808	15933	11975	0	11393
65	Mugu	12	6221	5720	5732	4131	0	3341	6140	5679	5741	4120	0	3349
66	Humla	12	5610	5330	5350	3350	0	2978	5610	5340	5350	3323	0	2887
	Mid Western	180	486322	340324	345274	253550	49013	209130	469929	327490	332581	240819	45415	199661
67	Bajura	12	18935	14395	14680	10320	0	8750	18935	14445	14670	10290	0	8750
68	Bajhang	12	25320	20885	20984	13370	0	14639	24990	20546	20704	13215	0	14267
69	Achham	12	50050	27121	27391	22274	0	15174	49360	27186	27224	22043	0	14994
70	Doti	12	39541	23715	24079	20820	0	14645	37342	22470	23844	20065	0	13395
71	Kailali	12	60010	55535	57015	30395	17097	27185	56290	50009	51129	26592	14717	26283
72	Kanchanpur	12	36700	31763	31888	18340	10895	15526	34480	29445	29561	15046	9637	13597
73	Dadeldhura	12	20100	12561	12714	10630	0	5920	17630	10758	10947	9245	0	4905
74	Baitadi	12	66348	25890	27420	30398	0	15288	59207	24102	25515	27251	0	13629
75	Darchula	12	18910	12857	13170	10760	0	9350	18910	12829	13150	10760	0	9351
	Far Western	108	335914	224722	229341	167307	27992	126477	317144	211790	216744	154507	24354	119171

Analysed Data EPI

District Code	District Name	Received Report	Coverage (%)							Drop Out Rate (%)			Wastage Rate (%)						
			BCG	DPT-HepB-Hib 3	Polio3	Measles	JE	TT1	TT2	TT2+	BCG Vs Measles	DPT-HepB-Hib 1 vs 3	Polio1 Vs Polio3	BCG	DPT-HepB-Hib	Polio3	Measles	JE	TT
	Mountain	192	91.59	89.91	89.98	87.83		37.49	35.47	26.67	4.1	3.68	3.31	84.56	31.74	33.23	71.67		52.76
	Hill	468	94.8	87.65	87.46	86.23	26.06	32.62	36.59	28.59	9.04	-2.88	-2.76	83.25	27.52	29.62	69.78	38.44	41.63
	Terai	240	103.39	95.45	95.17	89.95	62.49	42.98	43.45	42.31	13	-1.25	-0.78	76.19	17.14	18.38	56.26	34.31	25.47
	National Total	900	98.9	91.73	91.51	88.21	42.58	38.15	39.96	35.34	10.8	-1.55	-1.29	80.28	22.8	24.46	64.25	35.45	34.47
1	Taplejung	12	109.93	107.68	107.71	103.14		56.66	56.09	33.49	6.18	1.95	1.95	86.3	34.25	35.21	79.51		39.24
2	Panchthar	12	104.31	107.79	107.79	105.51		46	40.53	50.23	-1.15	-0.55	-0.55	88.05	23.7	24.05	78.72		34.31
3	Ilam	12	88.41	90.01	90.01	90.28		30.9	36.75	49.31	-2.12	-2.48	-2.48	86.03	25.69	26.01	71.22		36.94
4	Jhapa	12	109.78	104.54	104.6	99.6	72.95	64.07	66.87	30.5	9.27	1.65	1.69	86.91	13.31	13.18	42.47	35.59	16.86
5	Morang	12	122.72	104.65	104.65	96.77	72.22	17.49	26.96	53.13	21.15	0.74	0.74	61.87	9.52	9.24	41.51	21.52	20.16
6	Sunsari	12	100.45	97.24	97.24	94.39	64.4	35.62	33.01	36.88	6.03	3.72	3.72	71.59	18.24	19.35	55.37	37.52	36.23
7	Dhankuta	12	100.98	100.75	100.75	98.65		31.28	33.98	44.59	2.3	0.28	0.28	86.64	31.01	30.32	75.28		50.08
8	Teharhum	12	100.85	102.25	102.25	97.04		36.71	54.27	35.71	3.77	-0.46	-0.46	89.69	41.53	44.82	80.92		58.21
9	Sankhuwasabha	12	100.26	99.8	99.8	97.9		13.89	21.95	64.69	2.35	4.36	4.3	89.39	30.55	31.28	80.99		49.42
10	Bhojpur	12	92.87	94.18	93.97	92.69		24.26	28.23	39.79	0.2	-0.22	0	89.08	36.71	39.59	78.27		54.89
11	Solukhumbu	12	85.32	85.37	85.37	83.96		39.67	49	38.34	1.6	3.2	3.2	86.54	37.26	39.33	75.88		46.23
12	Okhaldhunga	12	90.7	88.95	86.66	85.99		28.61	34.77	29.92	5.2	-0.54	-1.27	90.12	57.11	60.15	84.78		62.87
13	Khotang	12	103.39	102.47	100.42	103.14		44.39	45.02	42.39	0.25	2.57	4.44	89.83	50.11	51.24	81.9		64.58
14	Udaypur	12	104.48	101.74	101.37	92.8	76.42	36.25	34.37	37.84	11.18	1.45	1.47	82.37	29.14	33.32	69.83	48.85	49.15
15	Saptari	12	106.11	104.73	104.86	103.82	70.2	52.55	50.05	50.41	2.16	2.69	2.61	81.46	29.81	33.29	70.46	47.64	44.89
16	Siraha	12	114.75	105.33	105.29	101.47	62.88	42.94	33.89	64.57	11.58	7.28	7.27	79.68	17.74	18.1	66.17	39.23	29.18
	Eastern	192	107.08	101.62	101.49	97.72	50.14	39.07	40.46	45.38	8.73	2.28	2.33	82.47	24.55	25.97	67.08	37.33	37.84
17	Dhanusha	12	117.62	112.03	111.93	95.61	44.54	53.16	49.13	57.12	18.72	5.07	6.46	74.75	14.75	15.59	62.13	39.83	27.73
18	Mahottari	12	116.45	109.02	104.27	101.55	62.44	84.59	82.46	23.42	12.79	1.21	7.41	78.43	13.95	12.72	62.9	37.3	20.36
19	Sarlahi	12	104.32	96.47	96.48	92	57.13	68.96	71.69	46.77	11.81	9.63	9.42	75.45	16.44	17	44.53	33.35	21.4
20	Sindhuli	12	91.77	86.59	85.91	82.18	22.64	37.48	29.51	20.34	10.45	6.17	5.87	81.61	33.72	34.72	70.12	64.99	58.1
21	Ramechhap	12	76.02	80.03	80.03	80.57		41.33	43.23	9.95	-5.99	-2.1	-2.1	89.83	39.3	41.01	78.2		53.09
22	Dolkha	12	79.49	81.52	82.58	81.64		40.83	46.13	20.38	-2.69	2.67	-1.06	89.16	42.42	44.43	77.33		58.01
23	Sindhupalchowk	12	78.38	88.44	88.62	84.26		21.4	26.72	26.82	-7.51	-0.36	-0.27	85.95	24.81	28	65.99		49.65
24	Kavre	12	92.81	91.96	92.04	87.04	64.59	46.5	43.89	12.04	6.22	-1.47	-1.78	84.66	18.65	23.26	69.66	52.61	27.99
25	Lalitpur	12	111.51	71.52	71.52	68.49	49.03	0	65.61	26.39	38.58			30.45	38.38	41.55	27.25	-113.99	-430.23
26	Bhaktapur	12	49.37	78.76	78.79	76.78	62.22	37.1	33.06	4.94	-55.53	-2.99	-2.91	82.12	8.5	11.48	54.56	43.03	16.25
27	Kathmandu	12	99.52	73.79	73.28	76.72	45.6	44.97	33.63	7.85	22.91	-5.37	-4.64	53.25	10.73	12.76	37.8	26.75	11.76
28	Nuwakot	12	84.97	89.73	89.73	82.94		26.36	21.97	31.89	2.4	2.12	2.12	88.98	31.14	31.76	73.43		51.77
29	Rasuwa	12	100.86	99.46	99.46	99.89		31.91	48.01	23.59	0.96	6.49	6.49	89.59	41.77	42.59	76.31		65.25
30	Dhading	12	87.93	97.38	97.34	93.13	57.94	15.81	41.32	45.58	-5.91	-1.61	-1.83	86.19	25.97	25.93	69.02	50.93	42.38
31	Makawanpur	12	81.4	81.63	81.49	79.16	55.65	35.67	31.22	17.95	2.75	2.34	2.58	81.97	26.15	27.76	66.46	45.62	38.47
32	Rautahat	12	102.39	96.01	95.94	83.42	39.15	84.48	49.38	42.9	18.53	9.52	8.85	67.66	18.2	19.96	57.73	41.36	23.35
33	Bara	12	102.23	97.37	97.23	87.96	56.65	38.66	33.34	49.61	13.95	5.88	6.34	77.23	17.29	18.73	68.02	41.73	27.25
34	Parsa	12	109.25	104.89	103.6	92.39	60.19	0	64.71	52	15.43			76.29	70.46	71.09	54.84	35.92	31.71
35	Chitwan	12	101.57	82.14	82.13	82.14	64.69	51.41	46.06	14.67	19.13	1.6	1.71	74.84	15.72	21.25	57	31.99	25.27
	Central	228	99.06	89.98	89.47	85.01	47.01	44.37	46.46	28.58	14.18	-9.78	-8.97	76.2	22.9	24.44	59.65	36.51	26.53
36	Gorkha	12	87.36	87.31	87.31	84.35		41.42	47.73	21.8	3.45	4.91	4.91	89.13	33.7	36.58	78.64		46.73
37	Lamjung	12	99.27	104.54	104.54	99.47		63.3	66.11	10.94	-0.2	-4.51	-4.51	89.51	34.59	36.88	78.57		45.44
38	Tanahu	12	83.96	89.89	89.89	89.81		38.91	45.04	17.51	-6.96	2.47	2.47	87.27	34.61	38.2	73.36		54
39	Syangja	12	81	100.31	100.31	98.95		5.94	46	47.83	-22.16	-0.49	-0.49	89.67	27.87	30.86	72.04		48.85
40	Kaski	12	114.78	88.04	88.04	86.11	67.9	32.49	40.22	39.43	24.98	-3.89	-3.89	72.12	16.87	21.39	54.93	36.91	21.77
41	Manang	12	41.44	55.86	55.86	64.86		34.15	29.27	7.32	-56.52	-10.71	-14.81	92.92	76.8	78.59	84.35		80.23
42	Mustang	12	64.14	75.95	75.95	75.95		21.19	52.04	36.06	-18.42	-1.12	-1.12	89.54	60	62.15	80.48		72.8
43	Myagdi	12	91.19	92.38	92.38	93.13		40.37	41.88	41.26	-2.13	1.73	1.73	86.83	27.96	27.74	71.42		42.32
44	Parbat	12	86.42	94.67	94.64	90.88		13.54	37.37	49.93	-5.17	1.8	2	89.63	32.1	35.35	78.66		47.54
45	Baglung	12	101.64	96.05	96.05	93.7		57.87	50.75	17.29	7.81	3.82	3.82	82.39	23.68	24.88	67.25		30.21
46	Gulmi	12	105.67	99.01	99.01	96.59		24.74	42.28	59.05	8.59	11.06	11.06	87.01	25.43	27.77	76.14		46.6
47	Palpa	12	121.03	95.24	95.24	92.7	84.32	10.07	12.89	65.22	23.41	2.95	2.95	85.49	34.1	38.89	75.62	52.74	51.54
48	Nawalparasi	12	86.32	90.6	90.6	91.07	71.96	30.38	36.84	34.37	-5.5	2.45	2.45	79.87	13.6	15.73	57.3	34.35	25.93
49	Rupandehi	12	130.12	105.05	105.05	99.9	78.6	45.76	41.58	61.99	23.22	-0.81	-0.81	71.66	10.57	10.57	50.53	36.73	25.71
50	Kapilvastu	12	111.27	100.88	100.93	93.1	63.19	27.29	51.59	80.84	16.33	7.85	7.66	77.88	12.86	14.45	64.89	39.35	23.88
51	Arghakhanchi	12	99.83	101.59	101.59	99.43		28.49	48.89	34.82	0.4	6.7	6.84	88.35	32.09	34.45	76.63	100	50.35
	Western	192	104.57	96.52	96.53	93.55	42.91	33.76	42.84	46.73	10.54	2.46	2.44	82.52	22.28	24.68	67.69	38.84	35.76
52	Pyuthan	12	97.11	95.76	95.76	95.58		27.86	30.83	34.73	1.58	1.58	1.58	87.86	34.48	35.04	76.02		58.95
53	Rolpa	12	90.42	87.05	86.92	87.53		23.62	30.74	28.62	3.2	1.96	2.11	85.7	31.22	33.08	76.22		51.98
54	Rukum	12	89.83	85.13	85.13	80.83		39.92	34.89	26.78	10.02	2.61	2.61	83.17	29.85	31.44	70.3		50.95
55	Salyan	12	75.12	70.33	70.33	70.64		25.25	29.93	24.6	5.97	4.49	4.49	84.75	32.37	33.19	69.12		48.28
56	Dang	12	86.32	82.82	82.82	80.41	67.3	36.64	32.55	28.65	6.85	1.24	1.24	72.24	10.1	10.33	45.44	19.47	16.47
57	Banke	12	93.61	78.72	78.72	73.15	59.58	37.71	29.88	35.0									

Raw Data
Nutrition Sheet 1 of 2

District Code	District Name	Received Reports	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					
	Mountain	192	2046	49279	1884	24746	1479	18450	1102	18698	6511	111173	117684	1874	96328	2139	38934	1732	27681	1675	26891	7420	189834	197254		
	Hill	468	4036	255966	1521	94544	1022	65266	1365	77328	7944	493104	501048	3255	567685	3469	181228	1698	129864	2146	152301	10568	1031078	1041646		
	Terai	240	7317	346030	3940	103743	2823	81712	2493	85487	16573	616972	633545	5988	471956	3381	176661	1950	114724	1915	120965	13234	884306	897540		
	National Total	900	13399	651275	7345	223033	5324	165428	4960	181513	31028	1221249	1252277	11117	1139969	8989	396823	5380	272269	5736	300157	31222	2105218	2136440		
1	Taplejung	12	1	3285	0	94	0	79	0	105	1	3563	3564	13	11290	5	4054	5	3412	2	3087	25	21843	21868		
2	Panchthar	12	6	4499	4	946	2	643	0	780	12	6868	6880	19	6202	5	3000	10	2293	0	2543	34	14038	14072		
3	Ilam	12	26	6944	17	2107	5	1379	7	1722	55	12152	12207	12	14145	16	3254	4	1887	7	2115	39	21401	21440		
4	Jhapa	12	51	20275	240	6286	213	4383	148	4131	652	35075	35727	114	43117	106	15131	57	8824	52	8786	329	75858	76187		
5	Morang	12	423	24816	38	3947	19	2894	10	2960	490	34617	35107	665	51178	207	19187	130	11156	71	12753	1073	94274	95347		
6	Sunsari	12	234	13678	76	3160	88	2370	93	2613	491	21821	22312	61	21449	103	9229	80	5370	40	6096	284	42144	42428		
7	Dhankuta	12	9	3783	2	374	0	273	0	307	11	4737	4748	4	11635	29	2908	12	1917	8	2093	53	18553	18606		
8	Tehrathum	12	8	2302	1	274	0	216	1	172	10	2964	2974	0	4830	2	2095	0	1535	0	1629	2	10089	10091		
9	Sankhuwasabha	12	53	3834	8	1286	9	724	21	1009	91	6853	6944	8	11032	10	2709	4	1658	5	1970	27	17369	17396		
10	Bhojpur	12	5	3959	11	1978	3	1516	3	1772	22	9225	9247	22	13391	24	4510	6	3347	5	4072	57	25320	25377		
11	Solukhumbu	12	37	3450	48	2417	30	1310	20	1554	135	8731	8866	98	7018	144	8916	104	4728	59	4255	405	24917	25322		
12	Okhaldhunga	12	41	2803	56	2876	39	1632	17	1820	153	9131	9284	31	10976	52	4124	35	2767	29	3753	147	21620	21767		
13	Khotang	12	46	5031	22	2611	18	2135	31	2224	117	12001	12118	132	9121	104	4287	69	3187	50	3380	355	19975	20330		
14	Udaypur	12	151	7723	67	2363	46	1456	48	1575	312	13117	13429	150	13917	146	5649	85	3045	43	2988	424	25599	26023		
15	Saptari	12	279	15082	363	7736	251	6452	216	6842	1109	36112	37221	181	20648	200	13322	121	10210	123	10923	625	55103	55728		
16	Siraha	12	123	14503	19	1522	15	826	16	693	173	17544	17717	140	21236	126	11745	98	8943	103	9410	467	51334	51801		
	Eastern	192	1493	135967	972	39977	738	28288	631	30279	3834	234511	238345	1650	271185	1279	114120	820	74279	597	79853	4346	539437	543783		
17	Dhanusha	12	271	11289	325	7940	293	7432	275	7938	1164	34599	35763	490	12311	212	8260	205	7513	227	7115	1134	35199	36333		
18	Mahottari	12	529	15219	338	9592	180	7873	204	8049	1251	40733	41984	254	21482	251	15502	196	12208	258	12074	959	61266	62225		
19	Sarlahi	12	296	14267	388	12538	259	11253	256	10926	1199	48984	50183	82	9638	123	7640	71	6802	108	6991	384	31071	31455		
20	Sindhuli	12	51	5914	18	2834	21	2427	8	2766	98	13941	14039	99	8497	16	2651	19	2104	1	2159	135	15411	15546		
21	Ramechhap	12	6	4095	5	1371	9	1011	4	1228	24	7705	7729	20	8652	2	1809	2	1149	3	1512	27	13122	13149		
22	Dolkha	12	10	3791	8	577	6	454	4	581	28	5403	5431	5	12156	20	2418	12	1574	4	2012	41	18160	18201		
23	Sindhupalchowk	12	89	6375	14	1742	23	1248	19	1684	145	11049	11194	175	16781	33	1821	11	1375	6	1471	225	21448	21673		
24	Kavre	12	58	5917	46	4925	25	2645	23	3681	152	17168	17320	77	23569	52	7899	28	5329	30	6126	187	42923	43110		
25	Lalitpur	12	1106	10316	0	0	0	0	0	0	1106	10316	11422	206	24480	0	0	0	0	0	0	206	24480	24686		
26	Bhaktapur	12	198	12289	1	1018	0	212	0	228	199	13747	13946	73	10125	58	1825	5	604	15	784	151	13338	13489		
27	Kathmandu	12	182	20192	55	10372	29	3871	73	4203	339	38638	38977	131	49531	20	6344	21	3175	28	3699	200	62749	62949		
28	Nuwakot	12	144	5935	34	1959	30	1435	8	1604	216	10933	11149	161	10744	22	1756	16	1326	16	1585	215	15411	15626		
29	Rasuwa	12	2	1040	2	620	2	375	1	411	7	2446	2453	2	2814	5	900	3	561	4	667	14	4942	4956		
30	Dhading	12	46	7144	14	622	9	339	7	367	76	8472	8548	85	22963	88	8854	60	6990	51	8188	284	46995	47279		
31	Makawanpur	12	57	8800	55	1804	30	920	45	923	187	12447	12634	83	21766	164	5307	64	2251	44	2329	355	31653	32008		
32	Rautahat	12	453	10738	441	10022	433	9953	351	10848	1678	41561	43239	118	6588	111	4338	82	3666	104	3755	415	18347	18762		
33	Bara	12	316	12364	328	8542	244	7317	232	7528	1120	35751	36871	145	14954	375	7876	146	7353	126	7591	792	37774	38566		
34	Parsa	12	778	17221	0	0	0	0	0	0	778	17221	17999	669	13714	0	0	0	0	0	0	669	13714	14383		
35	Chitwan	12	70	11975	29	786	9	436	11	974	119	14171	14290	280	27679	176	10109	81	4779	79	6514	616	49081	49697		
	Central	228	4662	184881	2101	77264	1602	59201	1521	63939	9886	385285	395171	3155	318444	1728	95309	1022	68759	1104	74572	7009	557084	564093		
36	Gorkha	12	21	6289	12	2462	8	2067	8	2365	49	13183	13232	36	16085	12	3551	5	2772	22	3674	75	26082	26157		
37	Lamjung	12	23	6313	33	3124	55	2599	63	3789	174	15825	15999	8	13145	5	4624	4	3506	6	5096	23	26371	26394		
38	Tanahu	12	8	8720	18	3014	6	2242	16	2644	48	16620	16668	13	17111	56	3160	3	2197	7	2052	79	25120	25199		
39	Syangja	12	7	5307	5	3259	4	2661	4	3308	20	14535	14555	9	23261	7	4520	7	3807	4	4777	27	36365	36392		
40	Kaski	12	83	12245	24	4004	15	2245	206	3636	328	22130	22458	9	25462	52	7179	20	5384	540	9791	621	47816	48437		
41	Manang	12	0	99	0	47	0	28	0	25	0	199	199	0	181	1	80	0	41	0	36	1	338			

Raw Data
Nutrition Sheet 2 of 2

District Code	District Name	Received Reports	Treated (<5 Yrs)						Mass Distribution Program (<5 Yrs)		Students received Anthelmen this Tabs.	No. of Pregnant Women				No of Postpartum mother within 6 week.	
			Vitamin A				Total	Anthelmenthis	Vitamin A	Anthelmenthis		Anthelmenthis	Iron (New)	Iron (Repeated)	Iron (180 Tabs)	Iron (45 Tabs)	Vitamin 'A'
			Eye	Measles	Diarrhoea	Severe Malhourish											
	Mountain	192	1203	583	1013	1409	4208	12280	270860	246709	384997	39654	40416	52476	22175	25733	25650
	Hill	468	2184	626	1944	2223	6977	34769	1532643	1353129	1089054	187326	196098	350355	121798	138894	150373
	Terai	240	3305	660	3120	4993	12078	48027	1727113	1495738	548941	280810	310961	453410	202942	219994	228313
	National Total	900	6692	1869	6077	8625	23263	95076	3530616	3095576	2022992	507790	547475	856241	346915	384621	404336
1	Taplejung	12	15	2	5	4	26	873	19600	17933	17113	3891	3121	2391	1615	1767	1769
2	Panchthar	12	17	2	6	9	34	473	14752	13252	5	4185	4190	7106	2240	2807	2810
3	Ilam	12	10	13	8	45	76	535	39733	35092	27804	4434	4514	8013	2990	2714	3289
4	Jhapa	12	295	58	133	80	566	4440	60064	55441	6520	16340	17059	27597	9528	11508	12468
5	Morang	12	31	48	31	71	181	2290	207820	183594	2206	17449	19420	33091	11287	9335	16749
6	Sunsari	12	24	0	4	42	70	874	77985	69155	118	13869	16598	25763	8332	9176	12099
7	Dhankuta	12	51	2	0	8	61	251	23109	20590	0	2990	3094	6086	2037	2301	2481
8	Teharhum	12	7	3	2	3	15	284	20935	18427	0	2063	2067	2420	1081	1060	1166
9	Sankhuwasabha	12	13	6	25	5	49	437	16660	14887	51210	3089	3232	4009	1694	1657	1674
10	Bhojpur	12	7	54	14	17	92	221	30281	24659	4535	3141	3236	6265	1147	2613	2607
11	Solukhumbu	12	96	7	28	7	138	1010	13901	12111	195	2405	2948	3041	1683	1564	1487
12	Okhaldhunga	12	21	12	5	44	82	379	28586	25735	7100	2406	2437	5278	1757	2364	2399
13	Khotang	12	114	23	154	94	385	1438	43991	42492	100056	3949	4647	4630	2853	2893	3017
14	Udaypur	12	10	1	10	54	75	1263	23218	21217	68	8117	7236	11747	4128	3347	3331
15	Saptari	12	189	1	92	737	1019	3391	75720	67947	902	17497	17491	37483	12413	11740	11968
16	Siraha	12	36	2	34	74	146	1945	85844	76632	36951	17470	20006	29208	8810	10699	10804
	Eastern	192	936	234	551	1294	3015	20104	782199	699164	254783	123295	131296	214128	73595	77545	90114
17	Dhanusha	12	212	141	109	291	753	2927	69388	62605	37047	16134	18700	23114	7157	10915	10272
18	Mahottari	12	155	3	211	117	486	3581	97450	78561	3811	18434	17496	28647	15939	13268	13139
19	Sarlahi	12	493	27	219	276	1015	3192	146329	139144	7491	21375	26642	26434	11803	15002	15239
20	Sindhuli	12	35	19	79	28	161	1020	57043	49964	22451	4648	4784	6903	2871	3547	3541
21	Ramechhap	12	5	4	1	2	12	1144	27030	24718	82559	2830	2943	6672	2113	2248	2244
22	Dolkha	12	18	1	17	9	45	288	23149	21017	49356	3335	3887	5293	2223	2476	2527
23	Sindhupalchowk	12	82	14	76	27	199	961	33763	30737	54021	3674	4463	8179	2305	2946	2743
24	Kavre	12	38	31	22	31	122	280	59700	54104	120194	5783	5426	14493	2335	2928	4236
25	Lalitpur	12	9	41	57	51	158	0	0	0	0	0	2634	0	7426	5001	7121
26	Bhaktapur	12	1	4	0	2	7	135	21206	18306	105	1660	2235	4532	664	1341	1341
27	Kathmandu	12	60	18	14	17	109	1103	96767	84979	142	5565	6477	10948	4513	3486	5304
28	Nuwakot	12	36	4	94	44	178	1591	47461	42108	9202	3938	4743	4960	1634	2599	2775
29	Rasuwa	12	0	7	16	2	25	70	7581	6753	8480	871	871	1391	491	574	574
30	Dhading	12	89	23	46	57	215	1108	44631	40003	51643	6084	6190	10683	4812	4168	4175
31	Makawanpur	12	67	94	15	63	239	1126	81581	71801	40699	6086	6619	12531	3969	3475	4046
32	Rautahat	12	575	94	533	520	1722	5721	97992	88552	24247	17002	21337	19043	11868	13048	13046
33	Bara	12	202	38	151	203	594	3190	119816	101845	30405	13464	15264	25920	8852	10673	10942
34	Parsa	12	27	14	363	116	520	0	0	0	0	0	0	0	10119	9654	9935
35	Chitwan	12	4	8	21	33	66	1743	51741	46595	28591	9327	12030	15306	4389	4814	4399
	Central	228	2108	585	2044	1889	6626	29180	1082628	961792	570444	140210	162741	225049	105483	112163	117599
36	Gorkha	12	27	27	7	22	83	648	33566	29951	116186	4705	5269	6882	2981	3376	3300
37	Lamjung	12	0	0	6	2	8	212	21932	19363	767	3741	3741	7783	3145	2754	2723
38	Tanahu	12	8	1	1	9	19	278	45256	41014	41128	5008	5641	11595	3849	3628	3946
39	Syangja	12	20	2	1	3	26	430	42757	37409	28664	5056	4992	12674	4080	3457	3442
40	Kaski	12	0	18	1	2	21	1391	34373	30389	827	14194	14135	27401	5910	10240	11479
41	Manang	12	0	1	1	0	2	2	684	639	336	69	76	90	23	31	29
42	Mustang	12	3	47	1	0	51	16	1668	1633	2122	179	228	257	69	106	106
43	Myagdi	12	4	2	2	5	13	68	15557	13749	1228	2067	2727	3880	1742	1836	1863
44	Parbat	12	9	1	1	0	11	44	16398	10008	705	2447	2462	4993	1965	1693	1665
45	Baglung	12	208	36	244	38	526	1206	32851	28671	46055	5707	6258	8047	4103	4268	4491
46	Gulmi	12	0	86	0	0	86	17	20389	17900	12795	6853	4769	13266	3553	3724	3710
47	Palpa	12	2	4	3	0	9	81	45489	40765	138952	8476	8657	13542	4842	7278	6527
48	Nawalparasi	12	16	25	4	9	54	1121	104039	90927	238628	15247	14012	28472	10281	9124	8845
49	Rupandehi	12	3	32	31	30	96	0	54541	0	0	18830	18639	0	25469	27672	25751
50	Kapilvastu	12	642	38	630	893	2203	5823	51017	43783	12420	13230	15562	16670	9732	9724	9590
51	Arghakhanchi	12	2	1	2	2	7	267	15396	13690	1712	3435	3569	6810	2402	2724	2728
	Western	192	944	321	935	1015	3215	11604	535913	419891	642525	109244	110737	162362	84146	91635	90195
52	Pyuthan	12	34	10	48	34	126	813	55240	47376	35038	4742	4732	11137	1912	3956	4074
53	Rolpa	12	34	5	80	47	166	868	34474	32821	448	3718	3861	2569	2673	2695	5806
54	Rukum	12	142	5	100	192	439	1694	40118	35972	56908	4310	5148	4347	1990	2864	2924
55	Salyan	12	51	1	28	43	123	1706	60921	49361	19041	5266	5789	10859	2958	4038	4027
56	Dang	12	255	15	172	181	623	2485	95692	94340	0	12634	14688	18749	7399	9594	10687
57	Banke	12	56	4	88	108	256	1449	111714	98750	34647	10728	11025	17955	7560	7866	

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 Anthelmthis (%)
			Under 1 Yrs	Under 5 Yrs	Normal	Malnourished	Normal	Malnourished	0-11 Months	12-23 Months	24-35 Months	36-59 Months	Eye	Measles	Chronic Diarrhoea	Severe Malnutrition	
	Mountain	192	117.77	55.49	94.47	5.53	96.24	3.76	2.91	2.54	2.48	2.44	0.57	0.27	0.48	0.66	5.79
	Hill	468	96.68	43.81	98.41	1.59	98.99	1.01	3.2	2.92	2.98	2.96	0.19	0.05	0.17	0.19	3.04
	Terai	240	111.71	43.62	97.38	2.62	98.53	1.47	2.35	2.67	2.38	2.4	0.23	0.05	0.21	0.34	3.31
	National Total	900	105.7	44.59	97.52	2.48	98.54	1.46	2.73	2.76	2.63	2.64	0.24	0.07	0.22	0.31	3.39
1	Taplejung	12	121.25	27.19	99.97	0.03	99.89	0.11	4.44	44.18	44.25	30.42	0.11	0.02	0.04	0.03	6.66
2	Panchthar	12	110.36	38.07	99.83	0.17	99.76	0.24	2.38	4.16	4.57	4.26	0.09	0.01	0.03	0.05	2.62
3	Ilam	12	110.85	51.66	99.55	0.45	99.82	0.18	3.03	2.54	2.37	2.23	0.04	0.06	0.03	0.19	2.26
4	Jhapa	12	111.79	47.2	98.18	1.82	99.57	0.43	3.13	3.33	2.93	3.07	0.39	0.08	0.18	0.11	5.87
5	Morang	12	116.87	37.75	98.6	1.4	98.87	1.13	3.05	5.87	4.87	5.32	0.03	0.05	0.03	0.08	2.46
6	Sunsari	12	80.74	29.38	97.8	2.2	99.33	0.67	2.55	3.88	3.22	3.27	0.03	0	0.01	0.06	1.15
7	Dhankuta	12	108.78	31.33	99.77	0.23	99.72	0.28	4.07	8.81	8.07	7.84	0.34	0.01	0	0.05	1.66
8	Teharhum	12	108.5	31.47	99.66	0.34	99.98	0.02	3.09	8.63	8.11	10.42	0.07	0.03	0.02	0.03	3.01
9	Sankhuwasabha	12	113.26	42.79	98.69	1.31	99.84	0.16	3.84	3.1	3.27	2.92	0.08	0.04	0.15	0.03	2.69
10	Bhojpur	12	103.53	51.83	99.76	0.24	99.78	0.22	4.38	3.28	3.21	3.3	0.04	0.3	0.08	0.1	1.24
11	Solukhumbu	12	153.68	85.18	98.48	1.52	98.4	1.6	3.04	4.68	4.61	3.74	0.92	0.07	0.27	0.07	9.7
12	Okhaldhunga	12	90.57	65.89	98.35	1.65	99.32	0.68	4.87	2.42	2.68	3.06	0.15	0.09	0.04	0.31	2.69
13	Khotang	12	117.2	58.35	99.03	0.97	98.25	1.75	2.82	2.67	2.51	2.52	0.55	0.11	0.74	0.45	6.92
14	Udaypur	12	111.99	40.2	97.68	2.32	98.37	1.63	2.79	3.38	3.08	2.87	0.03	0	0.03	0.16	3.78
15	Saptari	12	107.56	53.55	97.02	2.98	98.88	1.12	2.36	2.67	2.54	2.57	0.27	0	0.13	1.06	4.88
16	Siraha	12	102.86	24.24	99.02	0.98	99.1	0.9	2.46	8.7	11.75	14.42	0.05	0	0.05	0.1	2.66
	Eastern	192	107.19	41.14	98.39	1.61	99.2	0.8	2.98	3.82	3.59	3.6	0.16	0.04	0.1	0.22	3.47
17	Dhanusha	12	66.74	43.9	96.75	3.25	96.88	3.12	2.11	2.03	2	1.89	0.26	0.17	0.13	0.36	3.59
18	Mahottari	12	109.46	55.46	97.02	2.98	98.46	1.54	2.38	2.59	2.54	2.49	0.2	0	0.28	0.15	4.73
19	Sarlahi	12	80.91	53.4	97.61	2.39	98.78	1.22	1.67	1.6	1.6	1.63	0.52	0.03	0.23	0.29	3.4
20	Sindhuli	12	89.78	43.31	99.3	0.7	99.13	0.87	2.44	1.94	1.87	1.78	0.11	0.06	0.24	0.09	3.15
21	Ramechhap	12	92.43	45.14	99.69	0.31	99.79	0.21	3.11	2.32	2.13	2.23	0.03	0.02	0.01	0.01	6.68
22	Dolkha	12	91.48	32.27	99.48	0.52	99.77	0.23	4.2	5.17	4.45	4.45	0.11	0.01	0.1	0.05	1.71
23	Sindhupalchowk	12	103.06	44.8	98.7	1.3	98.96	1.04	3.62	2.06	2.09	1.87	0.33	0.06	0.3	0.11	3.85
24	Kavre	12	71.7	56.26	99.12	0.88	99.57	0.43	4.96	2.6	3.01	2.66	0.12	0.1	0.07	0.1	0.91
25	Lalitpur	12	102.58	30.65	90.32	9.68	99.17	0.83	3.16				0.02	0.11	0.15	0.14	0
26	Bhaktapur	12	172.97	57.13	98.57	1.43	98.88	1.12	1.82	2.85	3.87	4.5	0	0.02	0	0.01	0.55
27	Kathmandu	12	47.35	26.51	99.13	0.87	99.68	0.32	3.44	1.61	1.82	1.87	0.04	0.01	0.01	0.01	0.75
28	Nuwakot	12	99.93	47.53	98.06	1.94	98.62	1.38	2.79	1.89	1.92	1.99	0.15	0.02	0.4	0.19	6.78
29	Rasuwa	12	112.41	63.81	99.71	0.29	99.72	0.28	3.7	2.45	2.5	2.63	0	0.18	0.42	0.05	1.82
30	Dhading	12	96.54	27.01	99.11	0.89	99.4	0.6	4.21	15.06	21.26	23.03	0.28	0.07	0.15	0.18	3.5
31	Makawanpur	12	94.09	30.76	98.52	1.48	98.89	1.11	3.47	3.94	3.44	3.45	0.16	0.23	0.04	0.15	2.74
32	Rautahat	12	68.87	48.43	96.12	3.88	97.79	2.21	1.6	1.43	1.36	1.34	0.64	0.11	0.6	0.58	6.41
33	Bara	12	78.71	42.85	96.96	3.04	97.95	2.05	2.19	1.93	1.99	1.99	0.23	0.04	0.18	0.24	3.71
34	Parsa	12	128.84	24.22	95.68	4.32	95.35	4.65	1.8				0.04	0.02	0.49	0.16	0
35	Chitwan	12	90.07	28.81	99.17	0.83	98.76	1.24	3.32	13.62	11.92	7.69	0.01	0.02	0.04	0.07	3.51
	Central	228	84.43	40.27	97.5	2.5	98.76	1.24	2.7	2.22	2.15	2.16	0.21	0.06	0.21	0.19	2.97
36	Gorkha	12	109.83	55.95	99.63	0.37	99.71	0.29	3.55	2.44	2.34	2.56	0.11	0.11	0.03	0.09	2.74
37	Lamjung	12	177.38	109.42	98.91	1.09	99.91	0.09	3.08	2.47	2.32	2.32	0	0	0.04	0.01	1.45
38	Tanahu	12	124.08	56.09	99.71	0.29	99.69	0.31	3.03	2.06	1.98	1.77	0.03	0	0	0.03	0.94
39	Syangja	12	86.96	58.35	99.86	0.14	99.93	0.07	5.38	2.39	2.43	2.44	0.08	0.01	0	0.01	1.72
40	Kaski	12	109.92	51.75	98.54	1.46	98.72	1.28	3.07	2.8	3.39	3.69	0	0.04	0	0	3.21
41	Manang	12	89.19	54.97	100	0	99.71	0.29	2.83	2.72	2.46	2.44	0	0.28	0.28	0	0.55
42	Mustang	12	132.91	82.86	99	1	99.92	0.08	2.84	2.61	3.19	2.83	0.35	5.56	0.12	0	1.89
43	Myagdi	12	112.82	60.5	99.65	0.35	99.68	0.32	3.91	2.41	2.28	2.46	0.03	0.02	0.02	0.04	0.56
44	Parbat	12	104.27	53.36	99.86	0.14	99.94	0.06	4.64	2.91	2.46	2.64	0.07	0.01	0.01	0	0.32
45	Baglung	12	123.99	65.95	99.31	0.69	99.85	0.15	3.6	2.34	2.33	2.48	0.75	0.13	0.88	0.14	4.33
46	Gulmi	12	119.38	65.27	99.65	0.35	99.87	0.13	3.63	2.41	2.4	2.21	0	0.3	0	0	0.06
47	Palpa	12	121.6	35.11	97.21	2.79	99.15	0.85	4.05	7.9	7.07	7.65	0.01	0.02	0.01	0	0.33
48	Nawalparasi	12	106.31	39.73	98.54	1.46	98.63	1.37	3.14	2.94	2.71	2.22	0.03	0.04	0.01	0.01	1.83
49	Rupandehi	12	385.08	86.58	99.42	0.58	99.62	0.38	1.88				0	0.04	0.03	0.03	0
50	Kapilvastu	12	104.47	45.89	95.21	4.79	96.59	3.41	1.92	1.96	1.87	2.24	0.95	0.06	0.93	1.32	8.61
51	Arghakhanchi	12	130.78	49.4	99.52	0.48	99.5	0.5	3.42	1.95	1.81	1.9	0.01	0	0.01	0.01	1.29
	Western	192	164.11	59.38	98.8	1.2	99.29	0.71	2.69	2.52	2.38	2.52	0.2	0.07	0.19	0.21	2.4
52	Pyuthan	12	103.67	48.61	98.37	1.63	98.94	1.06	3.37	2.23	2.03	2.22	0.11	0.03	0.16	0.11	2.65
53	Rolpa	12	84.34	30.63	99.23	0.77	99.29	0.71	2.6	3.48	3.84	4.15	0.12	0.02	0.27	0.16	2.96
54	Rukum	12	119.83	50.3	93.59	6.41	95.78	4.22	1.92	2.07	2.12	1.96	0.54	0.02	0.38	0.73	6.42
55	Salyan	12	65.28	36.83	98.2	1.8	97.97	2.03	2.09	2.2	2.2	2.14	0.16	0	0.09	0.13	5.26
56	Dang	12	97.49	47.05	94.65	5.35	96.31	3.69	2.25	2.69	2.2	2.17	0.41	0.02	0.28	0.29	4.04
57	Banka	12	93.41	41.43	97.22	2.78	97.51	2.49	2.17	2.41	2.09	1.99	0.1	0.01	0.15	0.19	2.53
58	Bardiya	12	78.47	54.51	97.27	2.73	98.1	1.9	2.62	2.56	2.45	2.38	0.03	0.09	0.51	1.1	2.83
59	Surkhet	12	88.01	49.77	99.17	0.83	99.32	0.68	2.19	2.17	2.12	2.03	0.35	0.03	0.09	0.16	6.74
60	Dalekh	12	75.65	25.56	98.24	1.76	98.72	1.28	2.58	3.33	3.42	3.46	0.04	0	0.04	0.27	1.69
61	Jajarkot	12	90.97	45.03	95.1	4.9	95.41	4.59	2.01	2.02	2.13	2.07	0.97	0.13	0.99	1.09	9.49
62	Dolpa	12	194.96	83.96	94.55	5.45	75.59	24.41	1.07	1.07	1.07	1.06	2.37	7.66	1.12	0.31	23.82
63	Jumla	12	152.58	62.25	84.51	15.49	81.11	18.89	2.53	3.72	3.67	4.36	0.66	0.02	0.97	3.34	5.28
64	Kalikot	12	95.74	62.33	92.51	7.49	92.91	7.09	1.33	1.28	1.31	1.4	1.25	0.36	0.66	0.92	8.36
65	Mugu	12	83.56	55.08	84.24	15.76	87.94	12.06	1.44	1.41	1.38	1.42	0.91	0.11	1.14	2.65	11.94
66	Humla	12	105.73	114.67	88.82	11.18	91.49	8.51	1.21</								

Analysed Data
Nutrition Sheet 2 of 2

District Code	District Name	Received Report	% of pregnant woman receiving AntiHelmenthis	% of pregnant woman receiving Iron Tabs		% of postpartum mothers receiving		Iron Compliance
				New	Repeated	Iron Tabs	Vitamin A	
	Mountain	192	75.87	77.33	100.4	49.23	49.08	42.43
	Hill	468	57.26	59.94	107.1	42.46	45.97	37.23
	Terai	240	73.46	81.35	118.61	57.55	59.73	53.09
	National Total	900	66.67	71.88	112.42	50.5	53.09	45.55
1	Taplejung	12	124.35	99.74	76.41	56.47	56.54	51.61
2	Panchthar	12	87.11	87.22	147.92	58.43	58.49	46.63
3	Ilam	12	59.78	60.86	108.04	36.59	44.29	40.31
4	Jhapa	12	74.85	78.14	126.42	52.72	57.11	43.65
5	Morang	12	67.34	74.94	127.7	36.02	64.64	43.56
6	Sunsari	12	67.08	80.28	124.6	44.38	58.52	40.3
7	Dhankuta	12	72.89	75.43	148.37	56.09	60.48	49.66
8	Teharthur	12	82.69	82.85	96.99	42.48	46.73	43.33
9	Sankhuwasabha	12	77.15	80.72	100.12	41.38	41.81	42.31
10	Bhojpur	12	70.1	72.22	139.81	58.31	58.18	25.6
11	Solukhumbu	12	91.2	111.79	115.32	59.31	56.39	63.82
12	Okhaldhunga	12	65.56	66.4	143.81	64.41	65.37	47.87
13	Khotang	12	78.01	91.8	91.47	57.15	59.6	56.36
14	Udaypur	12	97.75	87.14	141.46	40.31	40.11	49.71
15	Saptari	12	102.57	102.53	219.73	68.82	70.16	72.77
16	Siraha	12	102.79	117.72	171.86	62.95	63.57	51.84
	Eastern	192	80.81	86.05	140.34	50.82	59.06	48.23
17	Dhanusha	12	81.46	94.42	116.7	55.11	51.86	36.14
18	Mahottari	12	111.99	106.29	174.04	80.61	79.82	96.83
19	Sarlahi	12	103.82	129.4	128.39	72.86	74.02	57.33
20	Sindhuli	12	57.4	59.08	85.24	43.8	43.73	35.45
21	Ramechhap	12	52.52	54.62	123.83	41.72	41.65	39.22
22	Dolkha	12	68.16	79.44	108.17	50.6	51.65	45.43
23	Sindhupalchowk	12	49.76	60.45	110.78	39.9	37.15	31.22
24	Kavre	12	57.06	53.54	143	28.89	41.8	23.04
25	Lalitpur	12	0	19.33	0	36.69	52.25	54.48
26	Bhaktapur	12	18.78	25.29	51.27	15.17	15.17	7.51
27	Kathmandu	12	10.55	12.28	20.75	6.61	10.05	8.55
28	Nuwakot	12	53.24	64.12	67.05	35.14	37.52	22.09
29	Rasuwa	12	80.57	80.57	128.68	53.1	53.1	45.42
30	Dhading	12	66.99	68.16	117.63	45.89	45.97	52.98
31	Makawanpur	12	52.88	57.51	108.87	30.19	35.15	34.48
32	Rautahat	12	91.51	114.84	102.49	70.23	70.22	63.88
33	Bara	12	73.1	82.88	140.73	57.95	59.41	48.06
34	Parsa	12	0	0	0	60.42	62.18	63.33
35	Chitwan	12	60.8	78.42	99.78	31.38	28.68	28.61
	Central	228	52.84	61.33	84.81	42.27	44.32	39.75
36	Gorkha	12	67.04	75.08	98.06	48.1	47.02	42.48
37	Lamjung	12	86.18	86.18	179.29	63.44	62.73	72.45
38	Tanahu	12	58.01	65.34	134.31	42.02	45.71	44.58
39	Syangja	12	67.67	66.81	169.62	46.27	46.07	54.6
40	Kaski	12	102.92	102.49	198.69	74.25	83.24	42.85
41	Manang	12	56.1	61.79	73.17	25.2	23.58	18.7
42	Mustang	12	66.54	84.76	95.54	39.41	39.41	25.65
43	Myagdi	12	67.57	89.15	126.84	60.02	60.9	56.95
44	Parbat	12	64.72	65.12	132.06	44.78	44.04	51.97
45	Baglung	12	80.61	88.39	113.66	60.28	63.43	57.95
46	Gulmi	12	94.28	65.61	182.5	51.23	51.04	48.88
47	Palpa	12	124.28	126.94	198.56	106.72	95.7	71
48	Nawalparasi	12	81.73	75.11	152.62	48.91	47.41	55.11
49	Rupandehi	12	72.01	71.28	0	105.82	98.48	97.4
50	Kapilvastu	12	78.75	92.64	99.23	57.88	57.09	57.93
51	Arghakhanchi	12	66.53	69.13	131.9	52.76	52.84	46.52
	Western	192	80.08	81.17	119.01	67.17	66.11	61.68
52	Pyuthan	12	61.46	61.33	144.34	51.27	52.8	24.78
53	Roipa	12	49.61	51.52	34.28	35.96	77.48	35.67
54	Rukum	12	60.57	72.34	61.09	40.25	41.09	27.97
55	Salyan	12	58.36	64.15	120.33	44.75	44.63	32.78
56	Dang	12	64.96	75.52	96.41	49.33	54.95	38.05
57	Banke	12	61.37	63.07	102.72	45	45.05	43.25
58	Bardiya	12	56.22	56.05	183.37	54.45	45.27	43.3
59	Surkhet	12	67.63	80.16	131.38	66.3	66.82	46.73
60	Dailekh	12	67.31	64	190.77	58.8	61.29	38.51
61	Jajarkot	12	58.46	60.72	54.57	31.5	30.97	30.72
62	Dolpa	12	78.98	87.87	3.7	28.58	32.76	30.24
63	Jumla	12	68.3	78.66	75.14	47.73	47.02	54.81
64	Kalikot	12	63.59	60.49	32.73	37.38	43.31	24.73
65	Mugu	12	51.44	94.45	95.11	45.79	43.37	32.68
66	Humla	12	96.9	96.9	51.92	54.62	54.4	62.68
	Mid Western	180	62.1	67.26	109.99	48.55	51.4	38.2
67	Bajura	12	110.64	66.13	121.97	54.51	54.39	32.75
68	Bajhang	12	76.61	79.21	114.38	56.8	54.79	46.8
69	Achham	12	89.14	93.59	150.19	72.01	73.23	56.6
70	Doti	12	71.29	73.35	146.26	56	56.89	50.48
71	Kailali	12	55.49	67.6	125.91	40.26	38.99	36.11
72	Kanchanpur	12	59.12	59.55	131.61	50.23	50.29	40.67
73	Dadeldhura	12	91.67	72.72	147.02	35.63	33.9	35.45
74	Baitadi	12	75.13	77.13	209.9	65.17	64.94	59.17
75	Darchula	12	69.86	69.86	190.15	64.69	64.55	51.82
	Far Western	108	69.71	71.21	142.16	51.73	51.25	43.62

Raw Data
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	Jundice	Hyperthermia	Feeding Problem/Low Weight	Treatment by Corim	Treatment by Zentamycine	Refer	Death Cases	Total	Very Severe Disease/Severe	Pneumonia	No Pneumonia	Sever Dehydration	Some Dehydration	No Dehydration	Dysentery/Blood	Severe Fever	Malaria	Other Fever	Ear Problem	Total followup	Total Refer	Death		Medicine	IV Fluid Treatment for Diabiora	ORS & Jinc Treatment	Other Classification		
																											Phnumonia	Diabiora	Total				Corim	Other antibiotic
	Mountain	192	7194	786	3136	213	321	962	3322	993	207	31	171728	1316	32909	47826	932	14805	31568	8556	970	451	15950	10727	36001	122	14	14	29	49083	21875	1764	45422	25378
	Hill	468	22512	2947	8867	1254	136	2286	7847	3208	759	92	711514	4331	123093	212746	3859	32096	121106	25368	3389	4279	79468	41131	103998	746	35	21	48	182134	112675	3965	152599	161815
	Terai	240	24534	3795	10858	840	219	2063	10762	4404	892	10	773413	3923	118417	250012	1645	40568	155888	29050	2344	27481	56148	59348	120256	898	6	1	4	214223	108071	3253	193914	199717
	National Total	900	54240	7528	22861	2307	676	5311	21931	8605	1858	133	1656655	9570	274419	510584	6436	87469	308562	62974	6703	32211	151566	111206	260255	1766	55	36	81	445440	246221	8982	391935	386910
1	Taplejung	12	762	51	364	25	14	111	392	71	21	3	13709	67	2838	3536	101	1120	1627	369	131	113	887	895	4316	12	2	0	2	4089	1418	62	2824	1394
2	Panchthar	12	213	36	126	0	0	24	73	34	9	0	15227	78	3411	4909	41	977	1453	180	24	2	659	659	2661	5	0	0	0	3353	1890	19	2326	2938
3	Ilam	12	216	9	76	9	1	13	51	19	12	2	11260	60	3475	3163	17	494	977	155	78	161	821	501	2469	1	1	0	0	3231	2146	22	2381	2167
4	Jhapa	12	1853	89	1289	158	19	205	1098	183	215	0	36217	304	8402	12488	68	2232	6431	1026	249	4172	1952	3167	7921	144	0	0	0	11506	4377	95	7859	5885
5	Morang	12	1991	515	641	27	3	44	953	467	54	0	44440	224	6735	14903	58	1096	5409	866	168	4335	1086	2856	5833	45	0	0	0	10202	4961	79	6877	12314
6	Sunsari	12	1199	174	598	35	6	87	627	223	59	0	45676	346	9839	12431	104	2751	5890	1306	94	91	3960	3134	8421	138	0	0	0	15194	6630	58	8195	11126
7	Dhankuta	12	543	54	189	24	0	56	202	57	11	4	15118	24	2609	5836	3	94	1942	361	5	56	752	753	2369	4	0	0	3	3724	2432	15	2301	4361
8	Tehrathum	12	310	24	184	4	0	23	153	15	9	1	10660	19	1968	3901	3	726	1273	229	2	1	667	558	1324	5	1	0	0	3028	1446	16	1953	2388
9	Sankhuwasabha	12	576	60	192	12	2	42	136	43	16	2	15893	156	3913	3800	49	486	2379	306	64	51	1669	842	2142	5	3	1	3	4264	3390	38	2492	4181
10	Bhojpur	12	422	91	223	21	1	45	121	85	13	4	20787	127	2869	5480	21	815	2626	616	68	26	2186	1206	2161	27	0	0	0	64504	3070	37	3511	5674
11	Solukhumbu	12	671	51	231	15	14	80	286	21	19	7	14340	103	2318	5568	61	1230	2289	324	107	18	641	974	2652	7	0	1	4	3985	1820	156	3679	1979
12	Okhaldhunga	12	291	23	168	11	3	27	90	16	11	3	24273	49	4796	7177	49	2046	2310	468	108	0	1388	1121	4345	1	1	0	1	5014	4411	61	3883	3855
13	Khotang	12	888	71	593	36	25	102	393	68	34	0	20101	166	4669	5672	63	2151	2523	1163	237	12	1821	1767	5696	3	0	0	0	8459	5706	23	4416	1782
14	Udaypur	12	589	100	360	33	8	45	268	112	23	1	19118	96	3155	4816	38	1147	2744	614	51	137	1514	1297	2402	0	1	0	1	4903	2062	102	3824	5854
15	Saptari	12	917	52	674	2	27	46	557	81	20	0	53184	126	5042	14810	65	5109	10131	1907	267	136	4268	4525	7909	0	0	1	0	12024	6288	177	14811	10555
16	Siraha	12	726	63	528	4	2	10	281	143	36	0	58434	128	8319	18055	34	4099	8762	1430	32	95	5623	4517	10555	16	1	0	1	13080	7891	78	13106	14629
	Eastern	192	12167	1463	6436	416	125	960	5681	1638	562	27	418437	2073	74358	126545	775	26573	58766	11320	1685	9406	29894	28772	73176	413	10	3	21	110660	59938	1038	84438	91082
17	Dhanusha	12	419	34	185	25	2	42	71	85	17	0	41143	199	5926	12530	169	1760	8616	1773	154	1961	1139	4375	6504	4	1	0	0	10587	4685	241	10570	10188
18	Mahottari	12	725	225	435	29	2	68	568	244	15	0	39515	268	6228	10574	154	3040	6043	1662	120	4998	1135	4491	7797	0	0	0	0	13390	4223	137	9071	12204
19	Sarlahi	12	826	87	405	4	0	137	251	162	31	0	45510	115	7597	12016	183	2752	9171	2032	99	229	3351	4226	8545	0	1	0	0	13134	5073	399	12133	10598
20	Sindhuli	12	304	26	153	22	1	29	141	66	7	1	10402	118	2595	2298	44	689	1813	455	43	195	1471	834	2466	63	2	0	3	6034	2719	68	2839	2236
21	Ramechhap	12	321	30	123	10	1	17	79	14	8	0	14957	73	3154	4723	90	250	2298	302	13	97	1597	657	1702	2	0	0	0	3504	2011	16	2388	3697
22	Dolkha	12	363	10	139	8	0	21	162	12	11	2	14879	17	3113	5135	77	1049	3030	845	56	27	922	677	2159	1	0	1	0	4999	1466	84	3829	2208
23	Sindhupalchowk	12	386	32	205	20	0	24	117	28	33	0	16276	78	3557	4869	55	1029	1995	547	76	35	1859	859	2570	8	0	1	0	5068	2402	49	3193	1902
24	Kavre	12	650	81	230	29	1	27	225	57	29	1	24852	50	4496	7816	10	893	3582	470	9	43	1969	1104	3481	17	0	0	0	5523	3473	56	4492	5871
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	30	2355	8449	2234	473	1327	0	0	0	0	0	1233	23	0	0	0	3316	1352	2	3892	0
26	Bhaktapur	12	83	3	30	11	0	9	6	0	6	0	8908	9	994	2843	0	173	1330	324	70	6	1176	371	621	2	0	0	0	1634	1753	11	1516	2139
27	Kathmandu	12	1412	123	386	87	4	74	137	110	25	0	22362	78	3841	6337	21	649	4423	661	89	11	2005	1170	4356	18	0	0	4	4492	2898	103	5085	5014
28	Nuwakot	12	238	23	122	31	5	15	50	24	10	0	12923	82	2506	3478	32	777	2278	829	191	3	1211	1020	2058	54	0	0	0	3677	2174	40	3168	1905
29	Rasuwa	12	53	4	15	3	0	5	16	2	0	0	4118	8	756	1276	0	254	118	148	26	0	441	118	606	1	0	1	0	818	507	1	994	559
30	Dhading	12	1015	109	501	123	9	142	284	56	45	4	27265	215	5699	6166	83	1311	4467	1611	114	4	2797	1526	5590	12	0	0	0	7538	4921	88	5998	6051
31	Makawanpur	12	456	55	230	78	0	39	118	63	39	0	18122	134	3576	4304	52	1226	2841	647	103	32	1509	1082	2051	37	0	1	0	4519	3542	116	4397	3728
32	Rautahat	12	1097	100	576	48	13	111	495	195	94	0	45290	676	6507	8843	220	4244	10219	2085														

Raw Data
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 Expenditur e	Zinc Expenditur e
				Treatment by Cotrim	Followup	< 2 months	>2 M. & <5 Yrs.								
	Mountain	192	39230	14455	11138	341	1427	3151	25355	17	25335	24255	532	45554	235072
	Hill	468	147674	48066	37578	462	2582	9415	101174	13	100035	97502	1591	175636	977730
	Terai	240	138023	35647	33078	354	909	6114	103624	17	102901	99803	1278	164384	992409
	National Total	900	324927	98168	81794	1157	4918	18680	230153	47	228271	221560	3401	385574	2205211
1	Taplejung	12	6126	2965	2326	94	338	768	3214	3	3092	2975	37	6119	30096
2	Panchthar	12	3142	1208	1116	0	13	127	1990	0	1951	1952	0	3421	19620
3	Ilam	12	5463	2684	2034	24	107	251	2805	0	3452	3431	21	6440	35283
4	Jhapa	12	10766	2855	2394	21	60	363	7920	0	7748	7832	272	14752	78897
5	Morang	12	8574	2249	2052	12	6	69	6413	0	5218	5106	34	8093	51531
6	Sunsari	12	7820	3252	3110	28	46	569	4583	2	5545	5087	33	10793	55270
7	Dhankuta	12	2476	807	799	2	25	103	1642	0	1275	1265	10	1989	12625
8	Teharthur	12	1885	558	408	10	23	68	1368	0	1112	1084	4	2085	11020
9	Sankhuwasabha	12	1708	561	260	3	3	48	1158	0	633	564	12	1153	5725
10	Bhojpur	12	3609	1162	842	9	31	234	2489	0	2208	2194	29	3839	22615
11	Solukhumbu	12	2293	926	699	12	220	424	1623	1	1559	1315	13	3000	11614
12	Okhaldhunga	12	5405	2403	1851	4	74	485	3089	1	2490	2424	3	3897	24815
13	Khotang	12	5924	3195	2263	43	205	721	2732	0	3234	3201	39	6993	28497
14	Udaypur	12	2808	1194	1036	7	93	384	1747	0	1954	1941	5	3395	19710
15	Saptari	12	10558	2116	1941	22	87	818	8508	0	9488	9511	96	16088	90823
16	Siraha	12	10967	3237	3205	5	21	43	7736	0	7453	7456	16	11135	74225
	Eastern	192	89524	31372	26336	296	1352	5475	59017	7	58412	57338	624	103192	572366
17	Dhanusha	12	11999	2197	2129	27	31	560	9816	0	9006	8492	99	15211	86189
18	Mahottari	12	10156	2557	2380	12	65	365	7682	0	7333	7501	32	11533	71213
19	Sarlahi	12	13396	2627	2451	26	49	543	10726	1	9090	8607	112	12300	84614
20	Sindhuli	12	4025	1278	1167	4	60	320	2732	2	2791	2677	22	4856	27784
21	Ramechhap	12	3187	1000	775	1	2	94	2223	0	1715	1681	8	2877	16879
22	Dolkha	12	3925	1589	1246	8	244	780	2534	0	2698	2654	47	5385	26177
23	Sindhupalchowk	12	3653	1608	941	33	164	250	2185	1	2686	2715	79	4595	21392
24	Kavre	12	4889	1138	1046	3	37	283	3893	0	3526	3493	48	6692	35545
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	1091	219	133	2	116	106	926	0	937	933	32	1817	9450
27	Kathmandu	12	3777	710	613	18	61	359	3237	0	3723	3646	32	8019	36400
28	Nuwakot	12	4362	1806	1320	40	105	464	2742	0	3183	2929	42	5969	28874
29	Rasuwa	12	822	150	143	0	0	16	674	0	723	723	10	1327	7490
30	Dhading	12	4550	1702	1203	53	162	275	2736	0	3226	3210	79	5709	30525
31	Makawanpur	12	2648	630	502	0	17	79	1997	0	1822	1790	20	2868	17753
32	Rautahat	12	8523	2644	2773	5	31	538	5865	0	7612	7383	96	10841	77092
33	Bara	12	8496	1573	1514	8	8	153	6994	0	6851	6731	46	9579	65560
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	3869	1204	1069	8	14	185	2694	0	3798	3759	30	6422	36975
	Central	228	93368	24632	21405	248	1166	5370	69656	4	70720	68924	834	116000	679912
36	Gorkha	12	4108	1522	1282	1	59	340	2709	0	2549	2486	30	4758	24538
37	Lamjung	12	2908	513	445	10	4	50	2402	0	1794	1778	8	2665	17820
38	Tanahu	12	3362	896	676	3	40	281	2448	0	2652	2391	31	5021	20166
39	Syangja	12	4506	688	633	0	7	88	3844	0	2607	2614	6	4173	26211
40	Kaski	12	2256	441	361	1	22	65	1817	0	1488	1465	49	2736	14737
41	Manang	12	69	38	29	0	8	25	40	0	37	37	4	86	350
42	Mustang	12	57	16	3	0	0	0	55	0	27	27	0	51	330
43	Myagdi	12	2351	669	797	32	68	552	1636	0	1591	1514	47	2781	18609
44	Parbat	12	3548	1102	871	3	11	133	2476	0	1590	1565	28	2769	16246
45	Baglung	12	4900	1750	1591	27	112	699	2894	0	2436	2509	20	5311	23207
46	Gulmi	12	4067	1577	1101	0	17	251	2404	0	2392	2266	58	5037	25280
47	Palpa	12	2550	549	486	8	11	31	1998	2	1539	1524	14	2551	15431
48	Nawalparasi	12	4916	1308	1162	3	14	52	3691	0	3803	3802	50	5550	37464
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	7816	2718	2199	105	379	1477	5625	0	7189	6476	152	12415	63945
51	Arghakhanchi	12	1917	1080	488	5	74	269	1068	1	993	922	16	1644	8958
	Western	192	49331	14867	12124	198	826	4313	35107	3	32687	31376	513	57548	313292
52	Pyuthan	12	3505	1247	1184	0	8	15	2172	0	2063	2043	6	2731	20494
53	Rolpa	12	4943	2053	1296	2	210	315	3354	0	3564	3280	61	6596	32923
54	Rukum	12	3337	1525	731	13	184	341	1936	0	2143	2079	49	3701	20708
55	Salyan	12	3442	1185	984	10	38	137	2373	0	2849	2779	62	3778	29389
56	Dang	12	3192	1135	1058	3	21	144	2074	7	2470	2395	28	4581	23943
57	Banka	12	5025	1262	1232	1	9	73	3800	0	3117	3144	61	5173	30436
58	Bardiya	12	4508	1164	1041	10	7	12	3432	0	2761	2529	39	3381	25560
59	Surkhet	12	5036	1589	1383	7	67	136	3474	0	4414	4150	179	6088	42658
60	Dailekh	12	5088	878	772	1	9	24	4194	0	4047	3980	24	6241	39540
61	Jajarkot	12	3770	1573	859	53	284	546	2454	1	2813	2739	266	5272	26808
62	Dolpa	12	433	205	99	26	52	57	342	1	222	213	10	628	2242
63	Jumla	12	2039	999	934	17	25	125	1042	0	1577	1509	49	2531	13875
64	Kalikot	12	2557	1028	639	26	95	140	1506	4	1764	1737	43	3025	18035
65	Mugu	12	1057	545	312	46	42	54	517	2	599	585	15	1126	5765
66	Humla	12	2209	678	481	52	132	104	1344	1	1380	1356	76	2512	11890
	Mid Western	180	50141	17066	13005	267	1183	2223	34014	16	35783	34518	968	57364	344266
67	Bajura	12	3797	1152	1119	18	39	102	2615	1	2370	2100	28	3205	23056
68	Bajhang	12	4556	1151	1063	6	65	253	3426	2	3408	3185	109	5756	30673
69	Achham	12	8375	1698	1451	19	89	505	6750	2	7257	7210	80	12958	71388

Raw Data

IMCI Sheet 3 of 3

District Code	District Name	Received Reports	FCHV												
			Total ARI Treated	Cotrim Treatment		Refer:		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	141771	41100	34366	911	4620	7855	99642	27	94254	89805	4729	139224	806858
	Hill	468	695564	131901	109293	2680	14049	30048	543896	19	501471	484092	20999	691768	4728733
	Terai	240	715087	129875	125376	5192	13308	21851	519233	20	540440	515082	30362	616255	4593180
	National Total	900	1552422	302876	269035	8783	31977	59754	1162771	66	1136165	1088979	56090	1447247	10128771
1	Taplejung	12	11199	4218	3461	108	473	1156	6073	1	4621	4333	45	7997	44516
2	Panchthar	12	14042	2312	2197	6	106	219	11646	0	8755	8750	109	11094	87455
3	Ilam	12	17078	3347	2847	30	429	513	13405	0	10531	10010	626	16260	94753
4	Jhapa	12	57779	15452	15899	578	2101	3715	37700	0	37714	36552	2982	52012	406036
5	Morang	12	49729	12668	12528	144	306	876	36896	2	30399	30572	1686	35967	292572
6	Sunsari	12	40911	11019	9896	855	1941	2711	27274	0	33708	31022	3542	34343	335568
7	Dhankuta	12	14010	3150	3015	14	100	399	10746	0	7817	7764	53	9402	75593
8	Teharthurm	12	8333	1322	1024	32	83	186	7050	0	4941	4854	113	7669	48340
9	Sankhuwasabha	12	10500	2708	1836	49	282	309	7525	2	3956	3822	207	5796	38137
10	Bhojpur	12	15378	3424	2769	20	265	820	12066	0	8477	8215	400	11899	79076
11	Solukhumbu	12	8130	2936	2223	137	694	1386	5069	4	5362	4579	531	7900	27551
12	Okhaldhunga	12	25732	7005	4945	52	574	1655	18552	0	11445	10866	808	13650	109577
13	Khotang	12	15046	6644	5204	155	955	1771	7904	0	7455	6844	363	12659	57972
14	Udaypur	12	15618	4397	3418	95	530	950	11241	1	12271	11998	249	16132	123497
15	Saptari	12	33705	2428	2210	47	265	1332	31358	0	23804	22283	557	33236	207468
16	Siraha	12	41860	6859	6911	100	318	425	34678	0	23768	24089	213	27742	240503
	Eastern	192	379050	89889	80383	2422	9422	18423	279183	10	235024	226553	12484	303758	2268614
17	Dhanusha	12	41212	5554	5391	103	240	1151	35161	0	21268	20462	572	28161	206160
18	Mahottari	12	30502	4712	4404	71	195	580	25889	0	18389	18088	370	24759	168487
19	Sarlahi	12	46648	6702	6014	112	446	1497	39642	1	21776	19809	928	26164	194929
20	Sindhuli	12	17863	4824	4418	11	159	914	12854	0	11226	11133	170	15907	115897
21	Ramechhap	12	21000	2566	1824	42	197	352	18499	0	14591	14397	612	19316	136739
22	Dolkha	12	14328	2981	2025	86	761	1296	11508	4	11457	10886	517	17779	106647
23	Sindhupalchowk	12	11725	1816	908	90	655	303	9965	1	9260	8564	1122	12700	58707
24	Kavre	12	24073	2175	2116	72	389	878	21500	0	18173	17823	627	28521	179470
25	Lalitpur	12	10432	426	315	0	344	327	0	0	8378	6497	178	0	0
26	Bhaktapur	12	4399	166	114	39	614	258	4020	0	4041	3864	308	6673	38158
27	Kathmandu	12	23652	475	358	182	1062	1322	22063	0	18480	17322	2007	29148	179707
28	Nuwakot	12	11128	2750	2053	97	353	1020	8214	0	7103	6524	331	11274	63989
29	Rasuwa	12	2824	372	323	3	19	55	2504	1	2958	2982	29	4751	30017
30	Dhading	12	18326	4294	3368	141	612	1341	14433	0	15496	15068	799	21830	148530
31	Makawanpur	12	22421	4901	4501	188	792	710	16135	1	21403	20663	1589	26206	207962
32	Rautahat	12	27427	6859	6574	13	66	1362	20747	0	20934	20703	297	26546	207704
33	Bara	12	33233	4413	4407	49	81	537	28537	3	22008	21932	251	28459	210080
34	Parsa	12	28257	6702	7134	0	308	0	3560	0	20305	17132	60	0	0
35	Chitwan	12	24143	5403	4872	258	625	782	18725	4	20140	18789	1399	29441	181393
	Central	228	413593	68091	61119	1557	7918	14685	313956	15	287386	272638	12166	357635	2434576
36	Gorkha	12	14346	3102	2574	36	353	899	11073	0	6736	6391	243	11074	63042
37	Lamjung	12	14022	1258	1197	5	15	264	12764	0	10271	10074	78	12494	102210
38	Tanahu	12	11045	2414	2012	14	58	594	8645	0	8215	8025	317	13647	76799
39	Syangja	12	21409	2120	1952	11	64	429	19303	0	10657	10621	226	16045	106955
40	Kaski	12	24878	1713	962	173	621	344	22217	1	14193	14076	1421	20527	141055
41	Manang	12	277	67	44	3	32	51	212	0	241	238	13	489	2350
42	Mustang	12	257	100	14	12	13	3	182	0	208	218	13	373	2240
43	Myagdi	12	7861	1222	1017	37	177	954	6430	0	5887	5131	268	9262	54998
44	Parbat	12	14873	2142	1795	28	103	253	12846	1	6482	6114	225	8828	60064
45	Baglung	12	19583	5119	4760	89	704	2685	13826	0	9091	8675	439	17352	83589
46	Gulmi	12	17382	2759	2309	14	47	519	10152	0	8175	6753	348	14012	79915
47	Palpa	12	14714	3770	3194	32	40	249	10858	0	10334	10460	46	15412	105144
48	Nawalparasi	12	26853	4283	4054	132	220	262	22202	2	23750	24254	1107	29735	236315
49	Rupandehi	12	33333	2017	1989	0	726	0	0	0	28869	28869	0	0	0
50	Kapilvastu	12	12082	2591	2268	158	822	1799	9427	3	11726	9743	644	18736	90333
51	Arghakhanchi	12	12181	2357	812	41	401	1026	10825	1	8204	6478	594	11383	45147
	Western	192	245096	37034	30953	785	4396	10331	170962	8	163039	156120	5982	199369	1250156
52	Pyuthan	12	20214	6236	5767	37	85	59	13848	0	12897	12746	198	14747	126969
53	Rolpa	12	19333	5651	4546	25	442	1876	14196	2	16710	16517	651	25401	161189
54	Rukum	12	7531	2884	1324	83	380	520	4777	1	5538	5260	318	7181	51463
55	Salyan	12	20210	4451	4202	116	280	1078	15426	0	16996	17477	1046	21599	170374
56	Dang	12	27581	7466	6727	317	569	1027	20124	0	26809	26458	2287	34773	264204
57	Banke	12	30512	6995	6848	157	256	512	23305	1	26732	25188	2419	37492	247952
58	Bardiya	12	41374	6180	5991	515	678	687	34905	3	27187	26716	1834	31269	265106
59	Surkhet	12	28818	6923	6409	116	503	951	21967	0	29309	27496	1292	37018	268029
60	Dailikh	12	34719	4986	4680	75	166	251	29685	1	36517	35920	731	45683	364733
61	Jajarkot	12	8082	2852	1549	221	751	941	5609	2	6054	6304	650	9648	59523
62	Dolpa	12	855	424	244	21	96	145	589	0	422	418	16	895	4376
63	Jumla	12	14285	5657	5463	45	224	584							

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	1240.42	423.36	6.21	34.13	0.5	48.09	0.02	31.19	14.91	53.89
	Hill	468	1034.79	268.79	3.79	25.98	0.37	40.12	0.01	28.74	12.48	58.78
	Teraí	240	843.7	198.19	2.7	23.49	0.32	39.81	0	30.38	11.26	58.35
	National Total	900	951.48	243.94	3.41	25.64	0.36	40.76	0.01	29.74	12.16	58.1
1	Taplejung	12	1813.09	769.61	5.11	42.45	0.28	53.4	0.03	27.1	25.78	47.12
2	Panchthar	12	1415.4	387.79	4.32	27.4	0.3	34.25	0	32.83	12.28	54.89
3	Ilam	12	1237.47	404.86	2.54	32.72	0.21	39.02	0.01	22.91	18.68	58.41
4	Jhapa	12	1185.52	356.86	4.02	30.1	0.34	38.1	0	23.62	12	64.39
5	Morang	12	862.02	235.23	2.41	27.29	0.28	37.57	0	27.27	10.7	62.03
6	Sunsari	12	939.44	322.02	4.56	34.28	0.48	50.59	0	31.7	10.96	57.34
7	Dhankuta	12	1646.87	434.9	1.58	26.41	0.1	40.52	0	33.94	9.92	56.14
8	Teharthur	12	1704.52	409.25	2.01	24.01	0.12	39.45	0.02	36.56	11.7	51.74
9	Sankhuwasabha	12	1237.18	452.18	9.61	36.55	0.78	54.41	0.04	39.19	8.51	52.3
10	Bhojpur	12	1539.32	424.98	7.12	27.61	0.46	44.28	0	30.86	13.14	56
11	Solukhumbu	12	1768.85	603.61	9.9	34.12	0.56	52.5	0	43.39	12.45	44.16
12	Okhaldhunga	12	3063.09	1011.57	3.48	33.02	0.11	43.64	0.01	27.86	12.52	59.62
13	Khotang	12	1515.72	706.6	7.99	46.62	0.53	76.26	0	33.38	18.82	47.8
14	Udaypur	12	793.16	264.71	2.87	33.37	0.36	47.39	0.01	30.45	10.6	58.95
15	Saptari	12	924.25	139.73	1.81	15.12	0.2	35.58	0	31.1	16.43	52.47
16	Siraha	12	1085.54	253.74	1.75	23.37	0.16	39.16	0	33.41	13.82	52.77
	Eastern	192	1159.1	341.22	3.58	29.44	0.31	43.45	0	30.23	13.33	56.44
17	Dhanusha	12	882.18	170.33	2.44	19.31	0.28	32.04	0.01	25.96	16.7	57.35
18	Mahottari	12	762.56	181.83	3.54	23.84	0.46	43.1	0	29.57	17.59	52.84
19	Sarlahi	12	848.82	181.33	1.22	21.36	0.14	34.52	0.01	24.73	16.79	58.48
20	Sindhuli	12	829.88	271.96	3.64	32.77	0.44	55.23	0.04	18.63	14.96	66.41
21	Ramechhap	12	1876.94	396.74	4.26	21.14	0.23	28.26	0	24.74	9.92	65.35
22	Dolkha	12	1575.73	457.54	1.01	29.04	0.06	41.61	0	31.17	14.8	54.03
23	Sindhupalchowk	12	955.7	282.48	3.12	29.56	0.33	45.62	0	35.61	15.3	49.1
24	Kavre	12	1342.21	255.26	1.62	19.02	0.12	29.79	0	29.91	11.83	58.25
25	Lalitpur	12	570.62	75.43	0.8	13.22	0.14	23.95	0	50.95	0	49.05
26	Bhaktapur	12	382.47	56.86	0.37	14.87	0.1	40.4	0	41.2	11.69	47.12
27	Kathmandu	12	256.29	34.71	0.53	13.54	0.21	22.75	0	27.22	10.02	62.76
28	Nuwakot	12	918.96	304.56	3.5	33.14	0.38	48.28	0	28.14	20.24	51.62
29	Rasuwa	12	1479.19	334.55	2.08	22.62	0.14	32.48	0	35.88	14.46	49.67
30	Dhading	12	1104.52	376.33	6.79	34.07	0.62	52.79	0	34.56	13.02	52.43
31	Makawanpur	12	805.49	225	3.26	27.93	0.41	41.08	0	24.22	8	67.77
32	Rautahat	12	582.17	186.9	7.57	32.1	1.3	51.42	0	30.83	16.4	52.77
33	Bara	12	649.02	125.71	1.49	19.37	0.23	50.04	0	25.27	15.21	59.51
34	Parsa	12	537.72	161.38	2.25	30.01	0.42	29.53	0	29.28	0	70.72
35	Chitwan	12	852.36	288.56	1.96	33.85	0.23	57.91	0	33.74	9.15	57.11
	Central	228	727.38	178.95	2.59	24.6	0.36	40.11	0	28.97	13.08	57.95
36	Gorkha	12	1177.98	364.96	0.93	30.98	0.08	51.07	0	33.76	14.75	51.5
37	Lamjung	12	1634.04	297.7	2.87	18.22	0.18	26.39	0.04	29.14	12.17	58.69
38	Tanahu	12	648.08	169.84	1.41	26.21	0.22	33.43	0	25.19	17.46	57.35
39	Syangja	12	1277.2	184.2	0.64	14.42	0.05	23.68	0	18.66	14.14	67.2
40	Kaski	12	799.94	91.07	0.23	11.38	0.03	17.85	0	21.84	6.5	71.67
41	Manang	12	1461.33	500	0	34.22	0	45.94	0	34.59	13.04	52.36
42	Mustang	12	1539.01	360.52	1.18	23.43	0.08	108.53	0	75.88	4.38	19.74
43	Myagdi	12	1266.36	286.12	9.92	22.59	0.78	34	0	33.87	15.22	50.91
44	Parbat	12	1805.95	445.19	3.75	24.65	0.21	33.36	0	25.05	14.44	60.51
45	Baglung	12	1279.11	410.22	3.99	32.07	0.31	48.06	0	31.21	13.77	55.02
46	Gulmi	12	1075.77	236.26	1.31	21.96	0.12	33.92	0	29.3	13.41	57.29
47	Palpa	12	1010.01	294.85	1.09	29.19	0.11	41.62	0.07	30.74	10.23	59.03
48	Nawalparasi	12	797.46	178.81	1.6	22.42	0.2	40.24	0	34.9	10.07	55.03
49	Rupandehi	12	759.3	44.99	0	5.92	0	10.79	0	50.8	0	49.2
50	Kapilvastu	12	520.27	136.92	3.73	26.32	0.72	73.06	0	43.44	22.22	34.34
51	Arghakhanchi	12	930.65	265.27	2.32	28.5	0.25	44.17	0	26.68	9.97	63.35
	Western	192	914.03	189.87	1.82	20.77	0.2	35.07	0.01	33.28	11.18	55.55
52	Pyuthan	12	1103.55	381.66	1.79	34.59	0.16	51.16	0.01	29.92	10.36	59.72
53	Rolpa	12	1112.53	403.68	3.07	36.28	0.28	50.17	0.01	25.68	15.13	59.19
54	Rukum	12	714.54	307.75	10.8	43.07	1.51	64.92	0.01	42.35	17.7	39.95
55	Salyan	12	980.48	287.33	4.04	29.31	0.41	39.2	0.01	25.61	10.83	63.57
56	Dang	12	784	251.28	4.75	32.05	0.61	58.86	0	36.16	6.62	57.22
57	Banke	12	855.1	230.67	1.43	26.98	0.17	39.68	0.01	27.45	10.26	62.29
58	Bardiya	12	1439.46	302.12	2.76	20.99	0.19	34.28	0.01	27.92	7.08	65
59	Surkhet	12	1116.44	303.82	2.87	27.21	0.26	48.43	0	30.37	10.36	59.27
60	Dalekh	12	1290.98	249.93	5.43	19.36	0.42	28.81	0.02	17.05	10.6	72.35
61	Jajarkot	12	692.61	246.05	10.55	35.52	1.52	67.59	0	36.24	20.28	43.48
62	Dolpa	12	539.63	240.67	6.16	44.6	1.14	67.66	0.13	54.08	15.44	30.48
63	Jumla	12	1212.72	514.49	4.75	42.42	0.39	48.21	0.02	20.04	9.99	69.97
64	Kalikot	12	819.64	294.35	6.76	35.91	0.82	57.6	0	29.67	13.87	56.46
65	Mugu	12	620.72	289.68	7.66	46.67	1.23	64.03	0.04	42.4	19.19	38.41
66	Humla	12	1677.39	487.39	22.45	29.06	1.34	45.32	0.04	35.35	17.29	47.36
	Mid Western	180	1006.06	299.64	4.82	29.78	0.48	46.27	0.01	28.89	11.07	60.05
67	Bajura	12	1614.33	630.89	7.34	39.08	0.45	53.57	0.01	26.5	11.91	61.58
68	Bajhang	12	1085.77	340.21	5.41	31.33	0.5	40.26	0.01	28.28	14.93	56.79
69	Achham	12	1924.17	341.21	23.06	17.73	1.2	38.28	0.03	38.25	11.89	49.86
70	Doti	12	1127.2	277.7	4.69	24.64	0.42	41.1	0.06	25.65	17.1	57.24
71	Kailali	12	948.68	156.27	2.67	16.47	0.28	31.62	0.01	23.88	6.51	69.61
72	Kanchanpur	12	982.64	168.85	1.49	17.18	0.15	40.2	0	29.15	4.57	66.28
73	Dadeldhura	12	1287.13	239.93	3.71	18.64	0.29	36.79	0.01	32.03	8.23	59.75
74	Baitadi	12	1677.43	369.66	5.48	22.04	0.33	30.78	0	16.99	12.75	70.26
75	Darchula	12	1238.79	283.74	5.18	22.9	0.42	32.92	0.02	23.2	19.11	57.69
	Far Western	108	1247.6	270.75	6.07	21.7	0.49	37.38	0.02	27.3	10.85	61.85

**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	786.99	77.77	0.56	96.26	3.74	0.01	28.34	15.18	56.48
	Hill	468	663.3	81.12	0.22	97.47	2.53	0	20.7	13.19	66.11
	Terai	240	579.31	78.09	0.2	98.35	1.65	0	23.54	12.23	64.23
	National Total	900	629.2	79.36	0.24	97.76	2.24	0	22.78	12.92	64.3
1	Taplejung	12	805.69	80.76	0.96	97.85	2.15	0	26.97	29.28	43.76
2	Panchthar	12	729.06	88.94	0.31	99.19	0.81	0	18.75	14.81	66.44
3	Ilam	12	654.77	90.18	0.11	99.08	0.92	0	9.62	22.31	68.07
4	Jhapa	12	715.93	86.14	0.13	98.81	1.19	0	16.11	14.3	69.59
5	Morang	12	453.56	87.32	0.14	98.86	1.14	0	15.56	12.37	72.07
6	Sunsari	12	632	81.18	0.22	99.3	0.7	0	18.22	11.55	70.23
7	Dhankuta	12	734.57	81.99	0.03	99.35	0.65	0	18.32	11.45	70.23
8	Teharthur	12	852.47	82.77	0.04	99.19	0.81	0	24.85	13.81	61.34
9	Sankhuwasabha	12	462.35	65.59	0.65	98.5	1.5	0.01	38.84	8.44	52.73
10	Bhojpur	12	792.95	79.49	0.15	98.96	1.04	0	24.47	15.61	59.92
11	Solukhumbu	12	1008.84	68.42	0.58	95.93	4.07	0.01	34.09	14.85	51.06
12	Okhaldhunga	12	1301.63	83.89	0.27	98.45	1.55	0	24.02	13.58	62.4
13	Khotang	12	742.81	79.47	0.41	99.48	0.52	0	30.71	20.96	48.33
14	Udaypur	12	543.5	83.31	0.21	97.4	2.6	0	21.64	10.76	67.59
15	Saptari	12	699.18	76.07	0.13	98.82	1.18	0	31.49	19.52	48.98
16	Siraha	12	603.68	80.87	0.08	99.41	0.59	0	29.23	16.89	53.88
	Eastern	192	655.11	82	0.2	98.79	1.21	0	22.69	15.39	61.92
17	Dhanusha	12	501.07	75.66	0.41	97.77	2.23	0	25.83	22.06	52.1
18	Mahottari	12	461.79	82.33	0.44	98.51	1.49	0	26.42	20.98	52.6
19	Sarlahi	12	457.25	72.96	0.43	96.82	3.18	0	28.17	21.15	50.67
20	Sindhuli	12	511	87.8	0.27	97.66	2.34	0	15.37	16.85	67.78
21	Ramechhap	12	1106.41	86.67	0.48	99.33	0.67	0	13.93	9.05	77.02
22	Dolkha	12	1088.06	80.09	0.42	97.85	2.15	0.01	22.7	14.73	62.57
23	Sindhupalchowk	12	601.26	82.28	0.37	98.49	1.51	0.01	20.49	17.88	61.63
24	Kavre	12	850.46	84.86	0.04	98.77	1.23	0	17.13	13.47	69.4
25	Lalitpur	12	333.05	56.3	0.15	99.95	0.05	0	32.5	0	67.5
26	Bhaktapur	12	265.51	76.69	0	99.28	0.72	0	23.19	14.46	62.35
27	Kathmandu	12	185.64	79.27	0.08	98.01	1.99	0	18.66	13.64	67.7
28	Nuwakot	12	570.11	76.74	0.24	98.75	1.25	0	23.08	23.8	53.11
29	Rasuwa	12	1210.72	85.07	0	99.9	0.1	0.02	20.91	15.54	63.56
30	Dhading	12	776.76	80.02	0.34	98.55	1.45	0	23.84	13.12	63.04
31	Makawanpur	12	665.76	86.79	0.19	97.43	2.57	0	15.06	6.66	78.27
32	Rautahat	12	484.2	75.3	0.51	94.67	5.33	0	33.97	17.61	48.43
33	Bara	12	461.68	77.14	0.08	99.52	0.48	0	27.35	17.25	55.41
34	Parsa	12	416.4	64.78	0.43	96.04	3.96	0	34.38	0	65.62
35	Chitwan	12	590.37	78.9	0.19	99.87	0.13	0	18.25	12.97	68.78
	Central	228	482.14	77.95	0.3	97.71	2.29	0	24.31	14.95	60.75
36	Gorkha	12	548.69	74.94	0	99.02	0.98	0	28.44	19.64	51.91
37	Lamjung	12	975.11	84.7	0.05	98.69	1.31	0.02	15.38	12.58	72.04
38	Tanahu	12	427.63	84.84	0.17	98.88	1.12	0.02	14.49	20.87	64.64
39	Syangja	12	622.91	86.25	0.05	99.34	0.66	0	14.64	16.78	68.58
40	Kaski	12	406.79	89.3	0.02	98.61	1.39	0	11.17	8.43	80.4
41	Manang	12	1016.57	79.08	0	100	0	0	24.46	10.05	65.49
42	Mustang	12	652.48	61.41	0	99.44	0.56	0	57.43	4.89	37.68
43	Myagdi	12	819.01	69.49	0.17	94.24	5.76	0	25.12	15.93	58.95
44	Parbat	12	685.01	83.3	0.01	99.21	0.79	0	13.42	17.05	69.53
45	Baglung	12	552.69	81.69	0.51	97.53	2.47	0	25.04	15.84	59.12
46	Gulmi	12	489.01	67.78	0.2	94.51	5.49	0	23.38	17.34	59.28
47	Palpa	12	622.89	82.2	0.03	92.95	7.05	0.01	22.77	10.01	67.22
48	Nawalparasi	12	577.9	79.89	0.01	99.29	0.71	0	22.09	10.75	67.16
49	Rupandehi	12	483.54	69.15	0	100	0	0	33.09	0	66.91
50	Kapilvastu	12	473.72	58.86	0.32	97.96	2.04	0	40.96	22.44	36.6
51	Arghakhanchi	12	535.77	70.97	0.11	96.81	3.19	0	16.92	8.97	74.11
	Western	192	537.58	75.69	0.11	98.07	1.93	0	24.58	12.6	62.82
52	Pyuthan	12	661.93	75.8	0.01	99.63	0.37	0	26.31	10.16	63.53
53	Rolpa	12	854.46	82.92	0.19	98.46	1.54	0	19.19	14.21	66.61
54	Rukum	12	470.51	69.44	0.88	93.43	6.57	0.04	38.12	17.26	44.61
55	Salyan	12	745.73	86.34	0.14	96.62	3.38	0	17.93	11.78	70.29
56	Dang	12	614.74	79.36	0.13	99.41	0.59	0	22.54	6.53	70.93
57	Banke	12	666.79	77.18	0.11	99.07	0.93	0	21.86	8.16	69.98
58	Bardiya	12	815.69	83.66	0.03	99.08	0.92	0	16.97	7.65	75.38
59	Surkhet	12	938.57	80.15	0.06	98.37	1.63	0	17.5	10.8	71.71
60	Dailekh	12	1230.26	90.48	0.09	96.6	3.4	0	11.3	8.85	79.85
61	Jajarkot	12	532.01	74.13	1.01	84.33	15.67	0.01	37.89	19.7	42.4
62	Dolpa	12	308.39	65.38	3.37	94.47	5.53	0	59.83	13.85	26.33
63	Jumla	12	815.43	85.56	0.17	98.24	1.76	0	19.04	11.49	69.48
64	Kalikot	12	675.2	79.44	0.61	95.84	4.16	0.01	30.93	11.61	57.46
65	Mugu	12	351.56	72.01	0.87	97.38	2.62	0	46.14	19.2	34.66
66	Humla	12	1178.83	72.28	1.41	96.61	3.39	0.08	43.77	15.37	40.86
	Mid Western	180	749.43	81.07	0.25	96.9	3.1	0	21.8	10.6	67.6
67	Bajura	12	1089.04	74.25	0.6	95.27	4.73	0	34.67	11.02	54.31
68	Bajhang	12	791.54	73.79	0.45	90.36	9.64	0	27.54	15.32	57.13
69	Achham	12	1424.66	64.89	0.63	97.89	2.11	0	38.57	13.92	47.51
70	Doti	12	933.21	84.81	0.21	98.27	1.73	0.02	19.6	16.4	64
71	Kailali	12	743.9	77.2	0.22	99.36	0.64	0	12.16	4.91	82.93
72	Kanchanpur	12	1156.43	86.92	0.04	97.4	2.6	0	11.6	2.33	86.07
73	Dadeldhura	12	1128.95	80.72	0.07	99.77	0.23	0	17.67	7.58	74.76
74	Baitadi	12	1266.01	90.04	0.19	97.31	2.69	0	12.21	11.32	76.47
75	Darchula	12	787	88.61	0.29	99.83	0.17	0	16.3	19.6	64.1
	Far Western	108	1008.89	79.48	0.28	97.16	2.84	0	20.17	9.67	70.16

**Raw Data
Safe Motherhood**

District Code	District Name	Received Reports	Antenatal Services			Delivery Services													Postnatal Services		Safe Abortion Care				Maternal & Neonatal death						
			First Visits		Total	Conducted by SBA			Conducted by Health worker			Total Delivery	Berthing Center (HP/SH)	Treatment of Obstetric complications at Berthing centers	At BEOC/CEOC centers	Treatment of Obstetric complications at BEOC/CEOC centers	Delivery Types			First PNC Visits	Total PNC (New +Old)	Total no. CAC service received	Treatment of Abortion complication	Total no. PAC service received	No. of FP Long lasting method users after Abortion care	1st checkup of Neonatal	Maternal death	Neonatal death	Still Birth		
			< 20 Year	>= 20 Years		Health Institution	Home	Total	Health Institution	Home	Total						Spontaneous Delivery	Vacuum Delivery	Forcep Delivery											C/S Delivery	
	Mountain	192	9506	29170	38676	20951	14142	1859	16001	1526	2430	3956	19957	9936	248	3898	394	16215	223	32	332	21019	11723	2035	31	387	500	20688	36	252	314
	Hill	468	55115	207340	262455	165834	132346	4246	136592	4509	7112	11621	148213	42311	1557	58257	5148	111500	2567	538	23423	146481	61237	40722	657	6185	10659	133982	106	1069	1861
	Terai	240	66678	285963	352641	201454	167594	10763	178357	11686	25898	37584	215941	37103	2037	90932	13466	136402	4336	620	26774	224792	100851	35344	356	5795	10846	186969	133	985	2135
	National Total	900	131299	522473	653772	388239	314082	16868	330950	17721	35440	53161	384111	89350	3842	153087	19008	264117	7126	1190	50529	392292	173811	78101	1044	12367	22005	341639	275	2306	4310
1	Taplejung	12	749	2310	3059	1688	704	95	799	57	429	486	1285	272	36	351	41	773	9	14	16	1550	1217	204	0	62	3	1540	1	8	15
2	Panchthar	12	969	3262	4231	2465	1725	43	1768	67	163	230	1998	808	27	976	396	1856	42	0	102	2342	855	421	1	81	44	2244	2	23	40
3	Ilam	12	886	3813	4699	3421	1466	112	1578	84	166	250	1828	528	3	996	122	1553	98	10	167	1840	453	984	1	65	297	1845	4	12	26
4	Jhapa	12	5229	19329	24558	11068	13601	580	14181	21	127	148	14329	273	22	13454	2472	8143	374	267	5410	14428	5683	4435	13	1042	1925	14390	0	14	99
5	Morang	12	5163	19674	24837	12479	17710	120	17830	4	98	102	17932	201	20	14842	3189	12441	378	24	5052	17942	4208	2138	34	631	471	17797	10	75	283
6	Sunsari	12	3291	11572	14863	8796	14192	151	14343	60	49	109	14452	2786	203	11348	212	10791	7	0	3393	14754	1999	1356	0	253	194	7462	3	19	41
7	Dhankuta	12	536	2462	2998	2235	595	77	672	28	332	360	1032	221	11	64	6	1020	9	0	3	1179	773	268	0	31	34	1199	3	13	13
8	Teaharhum	12	556	1543	2099	1065	623	47	670	59	162	221	891	341	22	328	47	880	3	0	8	899	48	49	0	38	0	892	0	6	6
9	Sankhuwasabha	12	850	2356	3206	1803	1855	45	1900	37	28	65	1965	933	34	891	27	1726	50	5	163	1857	714	492	3	3	15	1913	3	16	37
10	Bhojpur	12	708	2327	3035	1408	692	52	744	263	123	386	1130	457	23	120	44	918	12	0	59	1206	536	45	0	43	15	1211	0	13	29
11	Solukhumbu	12	677	2093	2770	1885	543	233	776	41	155	196	972	167	9	333	64	787	20	2	39	1138	1053	134	0	7	9	1014	6	16	25
12	Okhaldhunga	12	609	1832	2441	1760	1572	120	1692	123	158	281	1973	860	106	776	244	1548	38	4	73	1962	1093	43	0	73	9	1995	1	31	40
13	Khotang	12	1231	3514	4745	2941	856	1	857	337	1188	1525	2382	1193	6	295	17	2330	2	0	50	2540	1950	130	3	75	0	2575	2	7	16
14	Udaypur	12	1645	5567	7212	4040	3088	108	3196	91	387	478	3674	1020	18	2103	336	3161	82	14	195	3481	1142	152	0	74	6	3388	4	23	34
15	Saptari	12	2390	16042	18432	13470	8256	430	8686	105	1203	1308	9994	3053	190	5088	511	9082	35	0	375	10207	5474	556	0	225	54	10041	0	9	146
16	Siraha	12	3013	14104	17117	9301	7808	691	8499	152	1224	1376	9875	1237	94	4859	666	8935	278	22	343	10241	3569	183	2	163	8	10576	0	6	104
	Eastern	192	28502	111800	140302	79825	75286	2905	78191	1529	5992	7521	85712	14350	824	56824	8394	65944	1437	362	15448	87566	30767	11590	57	2866	3084	80082	39	291	954
17	Dhanusha	12	4364	12493	16857	7852	1291	1627	2918	237	2872	3109	6027	129	5	0	428	11	7	205	7061	4488	476	57	15	36	6586	18	12	12	
18	Mahottari	12	3341	15738	19079	11690	3212	1661	4873	683	3810	4493	9366	1119	108	696	105	4132	183	75	7	10210	8345	62	3	35	22	10046	3	12	63
19	Sarlahi	12	5937	16553	22490	9586	5205	1616	6821	147	2591	2738	9559	3503	522	944	133	6719	300	1	0	12177	9466	435	0	75	46	11973	0	32	106
20	Sindhuli	12	1067	3251	4318	1953	1431	238	1669	153	389	542	2211	1037	9	463	58	2072	4	0	0	2596	1078	27	0	39	5	2562	3	15	35
21	Ramechhap	12	781	2175	2956	2267	1427	157	1584	34	160	194	1778	1299	74	127	7	1612	17	0	0	1805	523	144	7	17	14	1805	0	9	15
22	Dolkha	12	987	2851	3838	2365	969	342	1311	151	343	494	1805	615	45	369	27	1277	20	2	53	1650	948	409	1	74	55	1666	2	16	13
23	Sindhupalchowk	12	892	3023	3915	2427	1277	258	1535	128	172	300	1835	537	18	545	135	1335	21	7	28	2222	936	237	0	34	204	2133	4	36	24
24	Kavre	12	1517	6832	8349	5040	5586	86	5672	15	42	57	5729	1146	39	4449	472	4377	20	81	1205	5664	592	1314	20	156	165	5789	3	38	95
25	Lalitpur	12	0	14052	14052	10771	8979	2	8981	62	0	62	9043	0	0	0	144	0	0	0	4738	10291	2452	1945	0	0	0	4621	0	0	0
26	Bhaktapur	12	674	3081	3755	1903	1319	1	1320	0	5	5	1325	16	0	1301	23	1119	18	2	186	1399	202	821	10	223	43	1348	0	8	8
27	Kathmandu	12	4438	41667	46105	30828	32127	170	32297	175	13	188	32485	1191	485	9951	117	20645	653	168	10753	23706	13941	14267	233	1825	5171	18490	13	239	418
28	Nuwakot	12	991	3135	4126	1970	1959	135	2094	42	252	294	2388	379	12	1484	23	1648	119	31	70	2755	812	457	2	146	214	2904	3	7	40
29	Rasuwa	12	190	719	909	537	222	29	251	22	22	44	295	175	2	52	0	282	0	0	0	296	136	24	0	0	1	296	0	3	1
30	Dhading	12	1607	4749	6356	4647	3325	10	3335	105	1	106	3441	2335	24	1089	81	3399	17	0	14	3606	2265	683	24	83	94	3622	1	18	44
31	Makawanpur	12	1538	4767	6305	3402	2475	196	2671	137	11	148	2819	856	50	1274	108	2211	121	1	92	2815	1183	984	7	187	470	2807	3	27	23
32	Rautahat	12	4389	15806	20195	10826	3145	1551	4696	252	6972	7224	11920	1607	89	0	5470	73	14	32	12588	10816	300	110	6	7	12792	0	3	19	
33	Bara	12	2720	11781	14501	7556	5429	696	6125	245	2061	2306	8431	2400	147	1199	4	7096	18	0	58	6967	5088	108	2	66	28	6749	3	26	47
34	Parsa	12	0	14571	14571	8484	5867	0	5867	4959	0	4959	10826	0	0	4729	14	3811	423	0	547	9669	0	3216	0	0	0	4940	2	0	0
35	Chitwan	12	8543	21623	30166	14282	15488	126	15614	526	47	573	16187	954	87	2157	337														

Analysed Data Safe Motherhood

District Code	District Name	Received Report	1st ANC Visit as % of Expected Pregnancy		4th ANC Visit as % of Expected Pregnancy	Delivery Conducted as % of Expected Pregnancy										PNC first Visits	% of FP acceptors after abortion care	% of neonatal first time checkup	Maternal death as % of expected Pregnancy	% of institutional delivery among Live birth	% SBA delivery among Live birth	PNC 1st visit among Live Birth	4th ANC Visit as % of 1st ANC (total)
			<20 Yrs	Both (<20 and >20) Yrs		by SBA at			by other than SBA at			Delivery Conducted at BICEOC among total HF delivery	% of obstetric complication among total delivery	% of C/S among total Institutional deliveries									
						HF	Home	Total	HF	Home	Total												
	Mountain	192	18.19	74	40.09	27.06	3.56	30.61	2.92	4.65	7.57	24.88	1.97	2.12	40.22	20.64	47.47	0.07	34.14	34.86	45.8	54.17	
	Hill	468	16.85	80.23	50.69	40.46	1.3	41.75	1.38	2.17	3.55	42.57	3.47	17.12	44.78	22.72	49.82	0.03	48.33	48.24	51.73	63.19	
	Terai	240	17.44	92.25	52.7	43.84	2.82	46.66	3.06	6.77	9.83	50.72	6.24	14.93	58.81	26.36	59.11	0.03	53.8	53.52	67.46	57.13	
	National Total	900	17.24	85.84	50.97	41.24	2.21	43.45	2.33	4.65	6.98	46.14	4.95	15.23	51.5	24.32	54.33	0.04	50.1	49.97	59.23	59.38	
1	Taplejung	12	23.94	97.76	53.95	22.5	3.04	25.54	1.82	13.71	15.53	46.12	3.19	2.1	49.54	1.13	56.83	0.03	27.03	28.38	55.06	55.18	
2	Panchthar	12	20.17	88.07	51.31	35.91	0.9	36.8	1.39	3.39	4.79	54.46	19.82	5.69	48.75	8.76	54.97	0.04	42.06	41.49	54.96	58.26	
3	Ilam	12	11.95	63.35	46.12	19.77	1.51	21.28	1.13	2.24	3.37	64.26	6.67	10.77	24.81	28.31	29.34	0.05	23.58	24	27.99	72.8	
4	Jhapa	12	23.95	112.5	50.7	62.3	2.66	64.96	0.1	0.58	0.68	98.77	17.25	39.72	66.09	35.15	79.14	0	71.48	74.42	75.71	45.07	
5	Morang	12	19.92	95.85	48.16	68.34	0.46	68.81	0.02	0.38	0.39	83.79	17.78	28.52	69.24	17.01	82.41	0.04	78.3	78.81	79.31	50.24	
6	Sunsari	12	15.92	71.89	42.54	68.64	0.73	69.37	0.29	0.24	0.53	79.62	1.47	23.81	71.36	12.06	43.31	0.01	78.96	79.47	81.74	59.18	
7	Dhankuta	12	13.07	73.09	54.49	14.51	1.88	16.38	0.68	0.89	8.78	10.27	0.58	0.48	28.74	11.37	34.39	0.07	17.12	18.46	32.39	74.55	
8	Tehrathum	12	22.28	84.13	42.69	24.97	1.88	26.85	2.36	6.49	8.86	48.09	5.27	1.17	36.03	0	41.9	0	30.72	30.18	40.5	50.74	
9	Sankhuwasabha	12	21.23	80.07	45.03	46.33	1.12	47.45	0.92	0.7	1.62	47.09	1.37	8.62	46.38	3.03	55.74	0.07	52.73	52.95	51.76	56.24	
10	Bhojpur	12	15.8	67.73	31.42	15.44	1.16	16.6	5.87	2.74	8.61	12.57	3.89	6.18	26.91	17.05	31.63	0	23.96	18.67	30.26	46.39	
11	Solukhumbu	12	25.67	105.04	71.48	20.59	8.84	29.43	1.55	5.88	7.43	57.02	6.58	6.68	43.16	6.38	44.69	0.23	24.67	32.78	48.08	68.05	
12	Okhaldhunga	12	16.59	66.51	47.96	42.83	3.27	46.1	3.35	4.31	7.66	45.78	12.37	4.31	53.46	7.76	63.54	0.03	51.85	51.76	60.02	72.1	
13	Khotang	12	24.32	93.74	58.1	16.91	0.02	16.93	6.66	23.47	30.13	24.73	0.71	4.19	50.18	0	59.44	0.04	26.48	19.02	56.38	61.98	
14	Udayapur	12	19.81	86.85	48.65	37.19	1.3	38.49	1.1	4.66	5.76	66.15	9.15	6.13	41.92	2.65	48.19	0.05	43.22	43.45	47.33	56.02	
15	Saptari	12	14.01	108.05	78.96	48.4	2.52	50.92	0.62	7.05	7.67	60.85	5.11	4.49	59.83	6.91	70.31	0	56.03	58.21	68.4	73.08	
16	Siraha	12	17.73	100.72	54.73	45.94	4.07	50.01	0.89	7.2	8.1	61.04	6.74	4.31	60.26	2.31	74.37	0	53.56	57.19	68.91	54.34	
	Eastern	192	18.68	91.95	52.32	49.34	1.9	51.25	1	3.93	4.93	73.98	9.79	20.11	57.39	21.33	62.45	0.03	57.29	58.31	65.3	56.9	
17	Dhanusha	12	22.03	85.11	39.64	6.52	8.21	14.73	1.2	14.5	15.7	0	0	13.42	35.65	7.33	38.02	0.09	8.39	16.02	38.76	46.58	
18	Mahottari	12	20.3	115.91	71.02	19.51	10.09	29.61	4.15	23.15	27.3	17.87	1.12	0.18	62.03	22.68	69.83	0.02	25.73	32.19	67.45	61.27	
19	Sarlahi	12	28.84	109.23	46.56	25.28	7.85	33.13	0.71	12.58	13.3	17.64	1.39	0	59.14	9.02	66.52	0	28.26	36.02	64.3	42.62	
20	Sindhuli	12	13.18	53.32	24.12	17.67	2.94	20.61	1.89	4.8	6.69	29.23	2.62	0	32.06	7.58	38.56	0.04	22.69	23.91	37.19	45.23	
21	Ramechhap	12	14.5	54.86	42.07	26.48	2.91	29.4	0.63	2.97	3.6	8.69	0.39	0	33.5	8.7	40.68	0	31.43	34.07	38.83	76.69	
22	Dolkha	12	20.17	78.44	48.33	19.8	6.99	26.79	3.09	7.01	10.1	32.95	1.5	4.73	33.72	11.39	40.1	0.04	25.69	30.08	37.85	61.62	
23	Sindhupalchowk	12	12.08	53.03	32.87	17.3	3.49	20.79	1.73	2.33	4.06	38.79	7.36	1.99	30.1	75.28	34.01	0.05	21.37	23.34	33.79	61.99	
24	Kavre	12	14.97	82.38	49.73	55.12	0.85	55.96	0.15	0.41	0.56	79.43	8.24	21.51	55.89	11.22	69.47	0.03	64.04	64.85	64.76	60.37	
25	Lalitpur	12	0	103.1	79.02	65.88	0.01	65.89	0.45	0	0.45	0	1.59	52.41	75.5	0	41.5	0	77.1	76.59	87.76	76.65	
26	Bhaktapur	12	7.63	42.48	21.53	14.92	0.01	14.93	0	0.06	0.06	98.64	1.74	14.1	15.83	4.12	18.67	0	17.35	17.36	18.4	50.68	
27	Kathmandu	12	8.41	87.38	58.43	60.89	0.32	61.21	0.33	0.02	0.36	30.81	0.36	33.29	44.93	32.13	42.97	0.02	71.22	71.21	52.27	66.86	
28	Nuwakot	12	13.4	55.78	26.63	26.48	1.83	28.31	0.57	3.41	3.97	74.16	0.96	3.5	37.24	35.49	47.74	0.04	31.34	32.8	43.15	47.75	
29	Rasuwa	12	17.58	84.09	49.68	20.54	2.68	23.22	2.04	2.04	4.07	21.31	0	0	27.38	4.17	31.93	0	25.23	25.96	30.61	59.08	
30	Dhading	12	17.69	69.98	51.17	36.61	0.11	36.72	1.16	0.01	1.17	31.75	2.35	0.41	39.7	12.27	48.63	0.01	43.83	42.61	46.08	73.11	
31	Makawanpur	12	13.36	54.78	29.56	21.5	1.7	23.21	1.19	0.1	1.29	48.77	3.83	3.52	24.46	40.14	29.82	0.03	26.37	26.96	28.42	53.96	
32	Rautahat	12	23.62	108.69	58.27	16.93	8.35	25.27	1.36	37.52	38.88	0	0	0.94	67.75	2.29	78.72	0	19.88	27.48	73.66	53.61	
33	Bara	12	14.77	78.73	41.03	29.48	3.78	33.26	1.33	11.19	12.52	21.13	0.05	1.02	37.83	16.09	41.89	0.02	33.49	36.15	41.12	52.11	
34	Parsa	12	0	91.2	53.1	36.72	0	36.72	31.04	0	31.04	43.68	0.13	5.05	60.52	0	35.36	0.01	73.68	39.93	65.81	58.23	
35	Chitwan	12	55.69	196.65	93.1	100.96	0.82	101.79	3.43	0.31	3.74	13.47	2.08	20.7	104.14	21.03	111.28	0.03	113.66	110.82	113.39	47.34	
	Central	228	16.57	91.51	52.15	37.96	3.35	41.31	3.04	7.45	10.49	28.33	1.3	19.58	50.29	22.43	51.67	0.02	46.07	46.42	56.5	56.99	
36	Gorkha	12	19.48	76.65	42.46	26.06	0.93	26.99	1.04	2.25	3.29	66.51	15.86	8.68	41.12	4.83	50.03	0.04	31.53	31.39	47.84	55.4	
37	Lamjung	12	20	87.03	73.69	35.36	1.57	36.93	3.13	1.84	4.98	69.42	0.38	3.95	51.6	6.06	60.95	0.02	44.7	42.88	59.93	84.67	
38	Tanahu	12	22.66	75.45	48.38	19.63	1.03	20.66	0.41	0.61	1.02	64.28	6.2	0	28.29	20.76	37.16	0.01	23.37	24.1	32.99	64.12	
39	Syangja	12	16.13	74.44	54.47	19.14	2.41	21.55	0.12	1.7	1.82	72.27	0	0	27.03	36.21	29.85	0	22.42	25.08	31.47	73.18	
40	Kaski	12	35.38	168.06	103.2	100.24	0.96	101.2															

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	14357	120706	27445	16116	6709	120798
	Hill	468	70352	577029	128411	78335	21345	602579
	Terai	240	43031	306189	82211	176540	45513	521968
	National Total	900	127740	1003924	238067	270991	73567	1245345
1	Taplejung	12	2013	15257	3216	1892	1160	13955
2	Panchthar	12	1686	12816	7514	2545	585	10506
3	Ilam	12	2284	21004	12402	3328	1638	103500
4	Jhapa	12	1763	19830	7200	5847	1618	32162
5	Morang	12	3006	32214	11508	11779	2791	49754
6	Sunsari	12	1814	10454	4653	9547	932	9650
7	Dhankuta	12	1135	9171	2859	1187	564	6381
8	Tehrathum	12	657	4749	909	459	159	3875
9	Sankhuwasabha	12	1117	6343	2668	897	200	9247
10	Bhojpur	12	2189	12730	4104	1459	510	10798
11	Solukhumbu	12	827	6218	1303	559	310	3698
12	Okhaldhunga	12	2062	16651	3277	855	270	7365
13	Khotang	12	2336	13790	1861	1793	1054	11122
14	Udaypur	12	1667	11466	4113	2925	695	14288
15	Saptari	12	4804	18112	7970	19168	4271	40780
16	Siraha	12	3016	15818	2915	7345	1470	28174
	Eastern	192	32376	226623	78472	71585	18227	355255
17	Dhanusha	12	3394	27956	2816	16821	5142	27809
18	Mahottari	12	3144	21511	8021	23604	7398	56694
19	Sarlahi	12	2220	19417	2032	7072	3681	25272
20	Sindhuli	12	1525	11729	2913	1868	661	5843
21	Ramechhap	12	1510	9737	4107	1070	203	7990
22	Dolkha	12	1581	14745	3083	1768	587	5121
23	Sindhupalchowk	12	2051	14794	10576	1726	769	8225
24	Kavre	12	3529	34801	9600	2970	498	25489
25	Lalitpur	12	0	0	0	0	0	0
26	Bhaktapur	12	558	5530	1209	176	86	2061
27	Kathmandu	12	1708	20307	5395	1243	452	8078
28	Nuwakot	12	1837	15970	5157	1438	1003	8931
29	Rasuwa	12	563	5357	506	646	117	2426
30	Dhading	12	2010	18740	8761	2886	1215	17871
31	Makawanpur	12	1539	12719	8449	3414	533	13190
32	Rautahat	12	3405	21404	3071	13940	6018	25051
33	Bara	12	2345	13381	2028	7300	2443	19747
34	Parsa	12	0	0	0	0	0	0
35	Chitwan	12	1239	10684	3020	3199	910	9960
	Central	228	34158	278782	80744	91141	31716	269758
36	Gorkha	12	2345	24738	3287	1930	700	12632
37	Lamjung	12	2062	20974	1056	1949	265	13020
38	Tanahu	12	2014	16574	2328	2844	913	9617
39	Syangja	12	2073	15708	1173	2076	432	10104
40	Kaski	12	1968	24296	2263	3254	406	22880
41	Manang	12	111	701	3	10	3	115
42	Mustang	12	148	981	89	37	10	388
43	Myagdi	12	941	6963	745	1237	232	4492
44	Parbat	12	1009	7588	319	695	109	4508
45	Baglung	12	1500	20472	1038	1964	769	7448
46	Gulmi	12	4211	17088	2730	3702	899	14808
47	Palpa	12	2117	18964	2370	2849	212	7298
48	Nawalparasi	12	2235	17819	1514	6404	662	20218
49	Rupandehi	12	0	0	0	0	0	0
50	Kapilvastu	12	2962	23973	3272	11836	4602	29906
51	Arghakhanchi	12	799	14349	800	1247	102	2621
	Western	192	26495	231188	22987	42034	10316	160055
52	Pyuthan	12	1439	11455	2004	1689	365	9975
53	Rolpa	12	2086	12788	2110	1732	234	14358
54	Rukum	12	1375	8604	2637	1347	415	13174
55	Salyan	12	1918	11486	4674	1305	195	14076
56	Dang	12	1392	8106	5795	3804	341	34767
57	Banke	12	1543	11884	2758	9488	556	16520
58	Bardiya	12	1696	10010	4238	9619	722	33466
59	Surkhet	12	1756	15592	4038	4583	708	17201
60	Dalekh	12	2017	7471	1812	2076	378	24128
61	Jajarkot	12	800	5902	3156	1900	740	10537
62	Dolpa	12	205	1949	502	367	229	2363
63	Jumla	12	897	5182	972	1549	707	24069
64	Kalikot	12	780	5776	852	746	214	4158
65	Mugu	12	420	3405	394	449	262	2559
66	Humla	12	565	6432	716	779	259	3520
	Mid Western	180	18889	126042	36658	41433	6325	224871
67	Bajura	12	562	7403	789	1205	396	9833
68	Bajhang	12	1075	14598	782	1502	598	9546
69	Achham	12	3007	30130	1823	3663	1657	48830
70	Doti	12	2087	18412	2422	1752	597	32670
71	Kailali	12	2149	13682	7396	7789	1819	47399
72	Kanchanpur	12	904	9934	2004	1978	137	14639
73	Dadeldhura	12	768	10657	811	956	159	7221
74	Baitadi	12	3828	24908	2185	3969	732	43693
75	Darchhula	12	1442	11565	994	1984	888	21575
	Far Western	108	15822	141289	19206	24798	6983	235406

Raw Data																	
FCHV																	
District Code	District Name	Received Reports	Pills Distribution (Cycle)	Condom Distribution to (Pcs)	Iron Tablet Distribution	ORS Distribution (Pkts)	ANC Services Confirm		Confirm no Neonatal bath within 24 hours	Refer Cough Patients (2 weeks) to HFcs	Mothers Group Meeting	Confirmed Breast Feeding within 1 hour	Neonatal and Postnatal Mother (Vitis/Check)		FCHV Participated in PHCC/ORC	Total Loan Received (Persons)	Total Investment by Fund (Rs)
							1st	4 Times					3 Days	7 Days			
	Mountain	192	61751	567490	1406259	164879	27954	18125	20789	6843	43585	21110	20381	19228	12548	150356	15546530
	Hill	468	352471	3914605	7965862	813109	106493	96977	96927	47706	221315	94672	90893	90000	143010	210338	82647048
	Terai	240	499308	10024430	13915259	724342	218725	198059	171741	82589	154036	166035	182213	184980	55861	79708	32692654
	National Total	900	913530	14506525	23287380	1702330	353172	313161	289457	137138	418936	281817	293487	294208	211419	440402	130886232
1	Taplejung	12	4920	45866	26608	12337	1707	1287	1260	249	4969	1214	1025	919	1833	235	2227737
2	Panchthar	12	9277	67411	92583	11565	1941	1507	1882	1284	3610	1824	1833	1648	1796	207	711690
3	Ilam	12	11393	69831	45850	17246	2599	1924	2124	703	6840	1925	1795	1694	2579	166	1101446
4	Jhapa	12	56003	215602	813507	55025	13075	11566	8995	7549	6063	8667	7331	7494	2161	274	3067200
5	Morang	12	41672	217096	668571	39440	15166	16108	12794	8134	8024	11483	14487	16596	3324	236	2147880
6	Sunsari	12	38712	3992871	866435	44161	12611	13500	10037	6516	9322	10495	11934	12262	3088	75	336000
7	Dhankuta	12	8358	45993	69322	9602	2045	1255	1772	1300	3344	1537	1731	1952	1050	205	1799143
8	Tehrathum	12	2379	42322	14962	8626	1170	886	955	488	3236	888	837	840	572	10	112000
9	Sankhuwasabha	12	4525	32276	58205	6522	1097	1140	1253	404	1875	1289	1148	1141	699	95	1231315
10	Bhojpur	12	11081	83473	106067	14182	1711	1228	1727	736	6310	1687	1377	1352	2059	334	3041731
11	Solukhumbu	12	3404	20790	33819	9756	1469	1134	929	520	1769	999	1869	1827	551	56	583009
12	Okhaldhunga	12	8506	43438	52514	14660	1481	1337	1518	1258	7370	1355	1284	1246	2387	298	2869947
13	Khotang	12	7246	78421	109610	19849	2452	1668	1901	550	6964	1907	1687	1534	1769	347	2543145
14	Udaypur	12	14889	71146	225643	18450	4800	4079	3685	1494	4064	3608	3574	3314	1821	424	3572203
15	Saptari	12	22976	394322	891593	37470	14767	12075	9344	4981	11666	8684	10177	10194	5144	315	2287159
16	Siraha	12	21478	350839	682031	29481	10589	9872	8297	4574	10879	8313	7976	7781	3486	410	6086403
	Eastern	192	266819	5771697	4757320	348372	88680	80566	68473	40740	96305	65875	70065	71794	34319	3687	33718008
17	Dhanusha	12	12629	533861	767269	47786	11228	9480	9578	4465	9191	9756	9255	8888	3794	95	1001460
18	Mahottari	12	23812	277147	1310773	31262	18218	15157	12048	2858	7630	11328	14839	14844	3644	147	1393256
19	Sarlahi	12	22913	228011	788021	32479	15933	11003	15044	5779	11258	14062	13192	13154	2674	238	1990700
20	Sindhuli	12	14330	89780	305409	19072	3084	2020	2974	580	3919	3093	2592	1479	1200	125244	2242932
21	Ramechhap	12	6140	61438	145213	20167	2456	1799	1848	1125	6467	1795	1653	1545	1698	218	2492074
22	Dolkha	12	5945	65442	104001	23467	1992	1419	1546	572	8105	1566	1373	1299	1584	149154	1375262
23	Sindhupalchowk	12	6182	41899	100529	14346	2344	2219	2304	1022	5831	2228	1920	1950	1569	243	2862795
24	Kavre	12	13458	124207	329882	33436	3460	3467	3011	1436	9384	2803	4285	4637	3712	493	5090175
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	4943	36692	35724	11641	1030	1060	884	1623	2089	762	688	808	486	33	608001
27	Kathmandu	12	17053	130307	168908	36035	5278	5148	3836	4802	10902	3754	2678	3183	2086	125	2287000
28	Nuwakot	12	5083	73636	82340	15327	1524	1222	1682	910	5641	1645	1388	1286	2090	156	1619890
29	Rasuwa	12	1343	36689	52547	5191	631	583	496	265	2465	493	467	455	938	21	188000
30	Dhading	12	12161	103257	124310	26165	3675	3461	3034	1477	4653	2938	2393	2354	1901	204	2520732
31	Makawanpur	12	24919	91680	372601	24527	4835	5212	3814	3204	4521	3596	2757	2892	1833	127	1172918
32	Rautahat	12	14989	381904	677784	29689	16317	12975	13516	4112	8546	13375	13529	13315	3818	149	895000
33	Bara	12	13378	356777	893019	29335	14339	11059	10007	3706	9558	10013	11312	10033	2698	226	1986017
34	Parsa	12	276	3409	0	857	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	21384	157226	512339	33698	8371	8072	5866	4486	3965	5628	7580	8234	1283	127	1376925
	Central	228	220938	2793362	6770669	434480	114715	95356	91488	42422	114125	88835	91901	90356	37008	277000	31103137
36	Gorkha	12	7726	64126	104831	14662	2319	1885	1860	814	5276	1954	1567	1513	2294	260	3879473
37	Lamjung	12	5302	71616	109107	12433	1821	1746	1609	395	7179	1618	1594	1670	2306	374	4049851
38	Tanahu	12	6934	47540	151958	15883	3274	2769	2003	1034	3944	1970	1539	1584	1424	208	1557820
39	Syangja	12	10853	93566	250064	17547	2704	3069	2631	996	6422	2485	2465	2456	2051	202	1906897
40	Kaski	12	10422	141742	247159	27824	3769	5788	4621	3482	9807	4586	3932	4025	2760	46	686000
41	Manang	12	87	834	647	533	21	6	6	32	594	6	6	4	67	5	158900
42	Mustang	12	97	4042	1080	865	48	19	38	25	412	26	25	40	99	13	335000
43	Myagdi	12	5236	55742	114014	10895	1412	1189	1103	576	3185	1192	1166	1112	798	86	883118
44	Parbat	12	4214	51206	113878	9403	1225	1296	1191	446	4122	1111	1027	991	919	268	3028940
45	Baglung	12	9939	138804	214925	22182	3345	2858	3192	852	7687	3186	3087	2975	1218	217	1912410
46	Gulmi	12	12749	196474	248560	18895	2855	3096	2586	1801	9273	2862	2592	2515	2567	624	3154300
47	Palpa	12	9426	101455	297213	17853	2180	2648	2031	676	6110	1983	3241	3645	71788	292	4124690
48	Nawalparasi	12	22141	284551	637956	30853	11446	11285	8561	4181	7930	7331	10119	10781	2470	76767	2809539
49	Rupandehi	12	1559	7519	0	2840	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	14766	222428	593347	35455	9496	7466	8303	2505	8329	8250	9542	9517	3677	71	1150663
51	Argakhanchi	12	6458	18043	267074	16351	2742	2481	2459	547	7054	2197	2827	2846	963	92	948987
	Western	192	127909	1499688	3351813	254474	48657	47601	42194	18362	8737						

Analysed Data

FCHV

District Code	District Name	Received Report	% of distribution		% of Mothers group meeting held
			Pills	ORS	
	Mountain	192	57.59	21.98	67.91
	Hill	468	48.14	28.24	80.29
	Terai	240	56.63	70.03	79.7
	National Total	900	53.08	47.17	78.58
1	Taplejung	12	42.69	41.74	54.48
2	Panchthar	12	43.79	25.06	83.6
3	Ilam	12	23.7	26.04	64.51
4	Jhapa	12	68.77	41.33	95.66
5	Morang	12	67.42	36.68	96.72
6	Sunsari	12	68.2	762.06	79.33
7	Dhankuta	12	45.59	23.21	92.1
8	Teharthur	12	34.11	25.72	72.39
9	Sankhuwasabha	12	56.98	20.65	66.4
10	Bhojpur	12	54.82	47.38	94.92
11	Solukhumbu	12	25.57	13.31	57.45
12	Okhaldhunga	12	62.63	33.62	93.23
13	Khotang	12	37.73	40.3	68.89
14	Udaypur	12	82.71	44.12	86.16
15	Saptari	12	30	47.37	91.59
16	Siraha	12	51.61	51.22	97
	Eastern	192	51.65	112.32	81.78
17	Dhanusha	12	42.47	81.61	86.02
18	Mahottari	12	70.63	44.87	95.09
19	Sarlahi	12	71.88	52.58	76.03
20	Sindhuli	12	70.25	39.14	74.51
21	Ramechhap	12	86.39	41.76	80.72
22	Dolkha	12	53	26.96	67.41
23	Sindhupalchowk	12	36.57	20.22	78.94
24	Kavre	12	52.78	27.93	88.14
25	Lalitpur	12	0	0	0
26	Bhaktapur	12	32.79	24.94	71.44
27	Kathmandu	12	23.7	20.32	87.67
28	Nuwakot	12	44.58	34.77	55.85
29	Rasuwa	12	54	44.03	91.5
30	Dhading	12	40.07	18.67	89.48
31	Makawanpur	12	117.33	21.68	91.7
32	Rautahat	12	74.31	57.81	80.13
33	Bara	12	61.15	57.85	89.92
34	Parsa	12	1.74	0.85	
35	Chitwan	12	65.09	25.18	76.02
	Central	228	51.56	36.66	77.41
36	Gorkha	12	56.64	21.9	80.07
37	Lamjung	12	46.72	27.12	90.69
38	Tanahu	12	55.44	15.25	78.36
39	Syangja	12	54.81	30.08	89.88
40	Kaski	12	34.48	28.15	90.85
41	Manang	12	15.1	3.15	49.29
42	Mustang	12	6.45	8.8	39.77
43	Myagdi	12	97.65	26.07	77.55
44	Parbat	12	69.54	24.99	75.25
45	Baglung	12	62.09	44.16	70.04
46	Gulmi	12	57.62	27.77	80.66
47	Palpa	12	51.82	26.15	83.69
48	Nawalparasi	12	53.55	32.12	94.43
49	Rupandehi	12	3.11	1.37	0
50	Kapilvastu	12	40.73	42.09	71.1
51	Arghakhanchi	12	72.33	6.06	85.84
	Western	192	43.5	25.65	71.21
52	Pyuthan	12	34.55	24.55	90.93
53	Rolpa	12	62.17	26.84	78.27
54	Rukum	12	40.82	19.14	65.17
55	Salyan	12	66.4	32.01	83.03
56	Dang	12	75.65	24.02	81.14
57	Banke	12	56.53	34.07	91.55
58	Bardiya	12	83.42	56.06	83.7
59	Surkhet	12	53.91	38.05	94.18
60	Dailekh	12	42.21	37.39	83.62
61	Jajarkot	12	56.49	36.96	70.51
62	Dolpa	12	120.49	27.01	13.4
63	Jumla	12	114.34	27.67	95.5
64	Kalikot	12	63.58	14.39	62.53
65	Mugu	12	65.76	32.13	32.13
66	Humla	12	67.2	19.36	51.59
	Mid Western	180	58.88	32.25	81.3
67	Bajura	12	101.63	8.67	76.56
68	Bajhang	12	96.34	23.06	73.39
69	Achham	12	50.37	20.85	81.49
70	Doti	12	45.99	37.84	73.62
71	Kailali	12	68.18	72.43	91.67
72	Kanchanpur	12	64.3	41.76	88.92
73	Dadeldhura	12	44.33	21.37	95.69
74	Baitadi	12	57.5	49.3	95.29
75	Darchula	12	63.08	38.47	81
	Far Western	108	65.51	42.07	86.03

Raw Data
Family Planning Sheet 1 of 3

District Code	District Name	Received Reports	New Acceptors													
			Condom	Pills			Depo			IUD			NorPlant			Total (Temporary Methods)
				<20 Years	>=20 Years	Total	<20 Years	>=20 Years	Total	<20 Years	>=20 Years	Total	<20 Years	>=20 Years	Total	
	Mountain	192	17208	913	8966	9879	2171	22445	24616	173	1827	2000	92	2956	3048	56751
	Hill	468	92404	6368	45526	51894	9873	97697	107570	784	13710	14494	749	19733	20482	286844
	Terai	240	95432	3232	45292	48524	6447	96918	103365	646	18002	18648	517	13776	14293	280262
	National Total	900	205044	10513	99784	110297	18491	217060	235551	1603	33539	35142	1358	36465	37823	623857
1	Taplejung	12	732	90	844	934	181	1899	2080	7	178	185	8	172	180	4111
2	Panchthar	12	1793	58	696	754	204	2158	2362	1	70	71	8	354	362	5342
3	Ilam	12	1788	113	927	1040	302	2572	2874	108	311	419	10	433	443	6564
4	Jhapa	12	3477	291	3514	3805	545	5967	6512	5	278	283	28	1084	1112	15189
5	Morang	12	3945	140	1996	2136	495	5997	6492	76	1545	1621	21	1009	1030	15212
6	Sunsari	12	3493	217	2332	2549	264	5236	5500	19	1525	1544	15	923	938	14024
7	Dhankuta	12	1320	41	685	726	122	1783	1905	1	50	51	9	220	229	4231
8	Tehrathum	12	1097	39	409	448	109	1075	1184	2	59	61	0	89	89	2879
9	Sankhuwasabha	12	1042	56	697	753	252	2003	2255	0	253	253	9	165	174	4477
10	Bhojpur	12	1174	669	1095	1764	339	1574	1913	98	54	152	3	140	143	5146
11	Solukhumbu	12	1041	71	828	899	426	2368	2794	0	35	35	7	180	187	4956
12	Okhaldhunga	12	861	106	951	1057	202	2167	2369	0	2	2	4	215	219	4508
13	Khotang	12	1297	85	917	1002	161	1683	1844	0	13	13	2	225	227	4383
14	Udaypur	12	1075	103	1282	1385	246	3836	4082	3	227	230	3	190	193	6965
15	Saptari	12	5549	120	4197	4317	109	5657	5766	5	121	126	22	783	805	16563
16	Siraha	12	4566	42	1761	1803	103	4324	4427	7	1094	1101	1	147	148	12045
	Eastern	192	34250	2241	23131	25372	4060	50299	54359	332	5815	6147	150	6329	6479	126607
17	Dhanusha	12	4361	110	1736	1846	252	4698	4950	21	1038	1059	15	238	253	12469
18	Mahottari	12	4117	118	1584	1702	297	4055	4352	8	609	617	1	107	108	10896
19	Sarlahi	12	2890	441	2043	2484	585	3470	4055	16	1785	1801	5	1177	1182	12412
20	Sindhuli	12	1529	125	806	931	102	1689	1791	3	473	476	3	292	295	5022
21	Ramechhap	12	980	12	272	284	103	1297	1400	40	106	146	9	286	295	3105
22	Dolkha	12	1618	107	966	1073	248	2859	3107	54	50	104	1	318	319	6221
23	Sindhupalchowk	12	1381	45	641	686	168	2037	2205	29	983	1012	37	1038	1075	6359
24	Kavre	12	2965	70	902	972	297	2698	2995	43	708	751	68	2516	2584	10267
25	Lalitpur	12	1851	0	821	821	0	2228	2228	0	116	116	0	457	457	5473
26	Bhaktapur	12	980	13	742	755	133	2509	2642	11	869	880	4	401	405	5662
27	Kathmandu	12	4275	365	4429	4794	978	9070	10048	39	2879	2918	78	2572	2650	24685
28	Nuwakot	12	1412	218	1213	1431	341	2987	3328	49	596	645	81	393	474	7290
29	Rasuwa	12	555	15	193	208	60	801	861	0	6	6	1	59	60	1690
30	Dhading	12	3687	242	1720	1962	452	3894	4346	22	1130	1152	29	818	847	11994
31	Makawanpur	12	2818	169	1984	2153	491	4866	5357	89	481	570	22	1369	1391	12289
32	Rautahat	12	4404	235	1317	1552	131	2589	2720	37	825	862	6	35	41	9579
33	Bara	12	4111	59	1053	1112	80	3225	3305	44	851	895	0	158	158	9581
34	Parsa	12	2688	0	1924	1924	0	4034	4034	0	164	164	0	440	440	9250
35	Chitwan	12	4162	242	2151	2393	523	3835	4358	32	1091	1123	17	543	560	12596
	Central	228	50784	2586	26497	29083	5241	62841	68082	537	14760	15297	377	13217	13594	176840
36	Gorkha	12	1952	118	1419	1537	228	2908	3136	0	36	36	3	164	167	6828
37	Lamjung	12	1760	68	568	636	105	1270	1375	17	396	413	3	95	98	4282
38	Tanahu	12	2078	149	1123	1272	162	2228	2390	11	474	485	10	303	313	6538
39	Syangja	12	2073	28	652	680	48	797	845	10	113	123	1	67	68	3789
40	Kaski	12	3356	138	2053	2191	315	2730	3045	58	731	789	18	494	512	9893
41	Manang	12	176	0	38	38	3	64	67	0	0	0	0	49	49	330
42	Mustang	12	306	5	107	112	12	222	234	0	28	28	1	15	16	696
43	Myagdi	12	1425	1246	520	1766	193	1042	1235	9	111	120	11	252	263	4809
44	Parbat	12	1366	17	358	375	77	741	818	11	220	231	1	142	143	2933
45	Baglung	12	2095	213	1756	1969	299	2467	2766	43	495	538	0	391	391	7759
46	Gulmi	12	4716	239	1767	2006	74	2664	2738	20	26	46	1	23	24	9530
47	Palpa	12	2586	49	639	688	128	1302	1430	9	770	779	51	815	866	6349
48	Nawalparasi	12	5905	91	1522	1613	259	3473	3732	55	903	958	13	339	352	12560
49	Rupandehi	12	3671	0	5069	5069	0	8159	8159	0	1388	1388	0	871	871	19158
50	Kapilvastu	12	3523	59	2694	2753	107	5543	5650	15	180	195	0	166	166	12287
51	Arghakhanchi	12	1985	92	686	778	65	1084	1149	0	41	41	2	216	218	4171
	Western	192	38973	2512	20971	23483	2075	36694	38769	258	5912	6170	115	4402	4517	111912
52	Pyuthan	12	4427	103	1531	1634	217	2084	2301	3	109	112	12	374	386	8860
53	Rolpa	12	4680	154	836	990	537	3001	3538	33	227	260	155	1193	1348	10816
54	Rukum	12	1440	229	1564	1793	489	3694	4183	0	34	34	1	181	182	7632
55	Salyan	12	2439	83	710	793	315	2147	2462	9	218	227	11	426	437	6358
56	Dang	12	7949	390	1795	2185	842	4238	5080	149	1504	1653	93	912	1005	17872
57	Banke	12	6153	211	2247	2458	507	6763	7270	38	598	636	71	1421	1492	18009
58	Bardiya	12	5389	101	1089	1190	470	4087	4557	30	566	596	90	794	884	12616
59	Surkhet	12	4439	284	1543	1827	754	3433	4187	27	304	331	63	953	1016	11800
60	Dailekh	12	3795	228	1573	1801	436	3567	4003	4	155	159	21	704	725	10483
61	Jajarkot	12	791	257	1210	1467	528	2703	3231	2	106	108	31	382	413	6010
62	Dolpa	12	337	64	472	536	79	705	784	12	37	49	0	15	15	1721
63	Jumla	12	1264	67	399	466	129									

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											
			Institutions		Camp		Institutions		Camp									
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male						
	Mountain	192	41	377	105	1379	0	0	7	3	1912	58663	2581264	107232	129122	2186	3371	
	Hill	468	439	1289	1677	3108	325	570	53	254	7715	294559	13860727	732121	672387	16966	22231	
	Terai	240	7847	433	12196	346	6633	550	1493	88	29586	309848	14314804	881705	638759	21872	16165	
	National Total	900	8327	2099	13978	4833	6958	1120	1553	345	39213	663070	30756795	1721058	1440268	41024	41767	
1	Taplejung	12	0	3	0	28	0	0	0	0	31	4142	109896	11526	11051	232	189	
2	Panchthar	12	0	0	0	0	0	0	0	0	0	5342	269049	21183	20863	71	377	
3	Ilam	12	0	0	9	1	0	0	0	0	10	6574	268208	48078	40090	439	433	
4	Jhapa	12	68	0	549	1	2705	49	0	0	3372	18561	521685	81437	53468	290	1113	
5	Morang	12	111	5	1108	3	922	20	0	0	2169	17393	591830	61810	49810	1841	1081	
6	Sunsari	12	275	0	1079	2	109	32	0	0	1497	15521	523958	56765	45629	1596	989	
7	Dhankuta	12	0	2	0	0	0	0	0	0	2	4233	198143	18333	16915	51	229	
8	Teharhum	12	0	0	0	6	0	0	0	0	6	2885	164557	6975	7014	61	90	
9	Sankhuwasabha	12	34	3	0	0	0	0	0	0	37	4514	156306	7941	12243	110	188	
10	Bhojpur	12	0	13	0	29	0	0	0	2	44	5190	176164	20215	16176	91	281	
11	Solukhumbu	12	0	0	0	9	0	0	0	0	9	4965	156167	13313	16900	110	173	
12	Okhaldhunga	12	0	0	0	31	14	14	0	0	59	4567	129202	13582	15772	129	235	
13	Khotang	12	2	7	0	22	0	0	0	0	31	4414	194598	19204	13618	13	227	
14	Udaypur	12	1	2	0	0	7	0	0	0	10	6975	161266	18001	19536	246	193	
15	Saptari	12	1337	1	856	0	0	0	0	3	2197	18760	832443	76594	45818	126	805	
16	Siraha	12	0	0	46	0	3	0	0	0	49	12094	685030	41617	32746	1966	141	
	Eastern	192	1828	36	3647	132	3760	115	0	5	9523	136130	5138502	516574	417649	7372	6744	
17	Dhanusha	12	1170	3	20	0	199	0	72	0	1464	13933	654184	29735	25611	1475	425	
18	Mahottari	12	502	0	0	0	0	0	0	0	502	11398	617648	33713	31464	662	139	
19	Sarlahi	12	29	0	1313	0	29	3	1314	5	2693	15105	433620	31878	19426	2742	3238	
20	Sindhuli	12	0	1	127	11	0	0	0	12	151	5173	229403	20400	15999	476	295	
21	Ramechhap	12	0	0	0	51	0	0	0	0	51	3156	147135	7107	15647	269	681	
22	Dolkha	12	1	0	27	34	0	0	0	3	65	6286	242735	11217	15512	232	391	
23	Sindhupalchowk	12	0	0	0	0	0	0	0	0	0	6359	207250	16905	30193	1158	1006	
24	Kavre	12	0	0	37	58	62	160	0	0	317	10584	444767	25500	33805	790	2817	
25	Lalitpur	12	41	465	0	0	0	0	0	0	506	5979	277787	8819	13029	523	346	
26	Bhaktapur	12	33	71	12	33	25	1	0	0	175	5837	147129	15073	21931	1361	379	
27	Kathmandu	12	59	306	16	7	63	149	1	3	604	25289	641332	71949	84594	2918	2650	
28	Nuwakot	12	0	0	94	108	0	12	5	1	220	7510	211808	11403	17234	876	681	
29	Rasuwa	12	0	0	16	47	0	0	0	0	63	1753	83322	2487	3190	6	55	
30	Dhading	12	0	0	55	378	0	0	0	0	433	12427	553057	30352	31569	1152	847	
31	Makawanpur	12	0	0	0	20	0	0	14	161	195	12484	422788	21239	28528	773	1258	
32	Rautahat	12	1852	3	115	2	8	0	0	0	1980	11559	660618	20170	12341	910	354	
33	Bara	12	0	0	984	2	4	0	32	0	1022	10603	616761	21876	24607	919	157	
34	Parsa	12	480	0	507	2	2491	50	0	0	3530	12780	403305	15860	20760	583	66	
35	Chitwan	12	69	175	22	67	104	370	0	75	882	13478	624349	32851	19534	925	525	
	Central	228	4236	1024	3345	820	2985	745	1438	260	14853	191693	7618998	428534	464974	18750	16310	
36	Gorkha	12	36	51	46	53	0	0	0	0	186	7014	292842	13640	15548	84	169	
37	Lamjung	12	7	12	13	156	0	0	0	1	189	4471	264078	11348	7500	291	100	
38	Tanahu	12	0	0	88	83	0	0	0	0	171	6709	311804	12508	9279	534	317	
39	Syangja	12	0	0	47	9	2	1	0	0	59	3848	311012	19801	8129	166	67	
40	Kaski	12	90	57	99	158	45	117	28	60	654	10547	503480	30227	16417	789	501	
41	Manang	12	0	1	0	0	0	0	0	0	1	331	26455	576	412	0	38	
42	Mustang	12	0	0	8	1	0	0	0	0	9	705	45955	1505	915	28	16	
43	Myagdi	12	0	10	60	50	0	0	0	0	120	4929	213799	5362	4125	200	311	
44	Parbat	12	4	5	15	51	0	0	0	0	75	3008	204912	6060	4323	229	118	
45	Baglung	12	0	0	36	50	0	0	0	0	86	7845	314332	16008	10054	718	360	
46	Gulmi	12	0	0	106	41	0	0	0	0	147	9677	707459	22127	14691	83	35	
47	Palpa	12	3	0	58	66	107	48	5	14	301	6650	387941	18191	13141	1238	892	
48	Nawalparasi	12	44	0	1012	43	5	14	42	5	1165	13725	885898	41345	23015	998	405	
49	Rupandehi	12	1214	48	0	0	0	0	0	0	1262	20420	550753	50157	37331	1592	834	
50	Kapilvastu	12	6	0	480	11	24	0	0	0	521	12808	528504	36255	30220	468	209	
51	Arghakhanchi	12	1	0	47	18	0	0	0	0	66	4237	297847	8929	4941	123	259	
	Western	192	1405	184	2115	790	183	180	75	80	5012	116924	5847071	294039	200041	7541	4631	
52	Pyuthan	12	7	0	56	33	0	0	0	0	96	8956	664196	37616	17284	112	386	
53	Rolpa	12	0	0	0	63	0	0	0	0	63	10879	702071	11170	14556	296	760	
54	Rukum	12	0	0	5	13	0	0	0	0	18	7650	216088	14281	14617	34	190	
55	Salyan	12	0	0	0	187	0	0	0	0	187	6545	365952	12778	16982	227	437	
56	Dang	12	100	15	243	12	0	0	30	0	400	18272	1192426	40148	36970	1654	1005	
57	Banka	12	38	46	380	54	16	11	0	0	545	18554	923076	40851	33685	636	1492	
58	Bardiya	12	0	0	931	29	0	0	0	0	960	13576	808454	25803	23801	626	894	
59	Surkhet	12	119	90	231	355	0	68	0	0	863	12663	665937	31319	23225	331	1016	
60	Dailekh	12	3	74	0	336	0	0	0	0	413	10896	569296	25828	13541	159	753	
61	Jajarkot	12	0	0	0	200	0	0	0	0	200	6210	118695	9231	10603	221	321	
62	Dolpa	12	0	10	0	54	0	0	0	0	64	1785	50646	2548	3149	60	12	
63	Jumla	12	0	0	0	430	0	0	0	0	430	3480	189681	3486	3758	77	214	
64	Kalikot	12	3	89														

Raw Data
Family Planning Sheet 3 of 3

District Code	District Name	Received Reports	Current Users										Defaulter				
			Temporary Methods					Sterilization					Total all Methods	Pills	Depo	IUD	Norplant
			Condom	Pills	Depo	IUD	Norplant	Total (Temporary Methods)	Male	Female	Total Sterilization						
	Mountain	192	17208	9893	38141	5158	7944	78344	39398	9442	48840	127184	7625	21530	644	1112	
	Hill	468	92404	80399	200835	69800	80715	524153	244427	163963	408390	932543	45944	123569	3895	5018	
	Terai	240	95432	85171	187365	63720	43816	475504	187110	791703	978813	1454317	27888	75213	2642	3910	
	National Total	900	205044	175463	426341	138678	132475	1078001	470935	965108	1436043	2514044	81457	220312	7181	10040	
1	Taplejung	12	732	1361	4709	1016	321	8139	2129	3	2132	10271	546	1127	15	8	
2	Panchthar	12	1793	1972	5032	967	1280	11044	1977	405	2382	13426	1327	3777	6	104	
3	Ilam	12	1788	5677	12848	1805	1628	23746	1817	6552	8369	32115	2181	3351	397	301	
4	Jhapa	12	3477	6698	14206	3946	4515	32842	8500	59955	68455	101297	3466	7977	414	741	
5	Morang	12	3945	5866	16339	8905	4469	39524	5247	90159	95406	134930	2501	6821	112	326	
6	Sunsari	12	3493	5832	11786	3512	2974	27597	3127	40825	43952	71549	1552	6867	152	181	
7	Dhankuta	12	1320	3331	5483	649	1224	12007	2134	1891	4025	16032	466	1577	22	83	
8	Teharthur	12	1097	561	1749	419	541	4367	1713	138	1851	6218	571	1339	12	42	
9	Sankhuwasabha	12	1042	716	3311	653	821	6543	3058	21	3079	9622	919	2515	15	83	
10	Bhojpur	12	1174	1908	4557	369	915	8923	2604	129	2733	11656	758	1702	3	19	
11	Solukhumbu	12	1041	1209	5555	30	543	8378	876	185	1061	9439	893	2558	312	8	
12	Okhaldhunga	12	861	1369	5205	389	1157	8981	1702	262	1964	10945	1366	3359	47	131	
13	Khotang	12	1297	3873	8103	539	428	14240	2667	219	2886	17126	530	1183	0	0	
14	Udaypur	12	1075	1860	5255	678	482	9350	4174	4217	8391	17741	1144	3532	23	13	
15	Saptari	12	5549	7733	15449	800	866	30397	572	58191	58763	89160	798	2449	114	3	
16	Siraha	12	4566	3187	8537	2210	1598	20098	1120	55308	56428	76526	1614	4185	44	65	
	Eastern	192	34250	53153	128124	26887	23762	266176	43417	318460	361877	628053	20632	54319	1688	2108	
17	Dhanusha	12	4361	2045	6198	1528	273	14405	2745	76476	79221	93626	583	1547	281	73	
18	Mahottari	12	4117	2901	8391	1650	504	17563	457	52605	53062	70625	1444	3948	61	3	
19	Sarlahi	12	2890	4488	6628	1793	1312	17111	2559	63807	66366	83477	1670	2619	32	31	
20	Sindhuli	12	1529	2002	4250	1315	1598	10694	4393	4992	9385	20079	922	2019	2	12	
21	Ramechhap	12	980	611	3556	1373	1448	7968	3332	186	3518	11486	319	1870	75	141	
22	Dolkha	12	1618	821	3890	346	703	7378	4509	3038	7547	14925	654	3063	14	523	
23	Sindhupalchowk	12	1381	1132	7278	1834	1452	13077	7270	1993	9263	22340	1109	3790	142	92	
24	Kavre	12	2965	2189	8415	4508	8765	26842	8749	9341	18090	44932	1166	4895	164	386	
25	Lalitpur	12	1851	2021	10208	5147	7887	27114	19093	9360	28453	55567	0	0	0	0	
26	Bhaktapur	12	980	1134	5604	2763	2182	12663	3688	8138	11826	24489	1471	7236	12	3	
27	Kathmandu	12	4275	8246	23671	18908	11424	66524	19870	31996	51866	118390	5173	15711	1012	1287	
28	Nuwakot	12	1412	764	4767	1455	775	9173	7392	7334	14726	23899	1185	5329	40	187	
29	Rasuwa	12	555	191	848	55	454	2103	1864	674	2538	4641	135	521	0	10	
30	Dhading	12	3687	3184	9095	3559	3384	22909	9864	1679	11543	34452	1116	3315	142	323	
31	Makawanpur	12	2818	2854	8438	489	5524	20123	27981	4245	32226	52349	1567	5239	32	407	
32	Rautahat	12	4404	2709	3432	1705	180	12430	727	59256	59983	72413	523	1266	32	12	
33	Bara	12	4111	2288	8705	1368	1337	17809	1948	40305	42253	60062	595	2090	16	346	
34	Parsa	12	2688	1333	5404	670	1718	11813	71473	6378	77851	89664	0	0	0	0	
35	Chitwan	12	4162	3480	5439	3311	2918	19310	28822	13887	42709	62019	1837	3680	137	221	
	Central	228	50784	44393	134217	53777	53838	337009	226736	395690	622426	959435	21469	68138	2194	4057	
36	Gorkha	12	1952	1163	4095	181	419	7810	6773	6817	13590	21400	1000	3523	189	151	
37	Lamjung	12	1760	941	2003	208	234	5146	5926	2124	8050	13196	1131	3358	736	10	
38	Tanahu	12	2078	1194	2478	2813	954	9517	7432	6284	13716	23233	869	1728	154	86	
39	Syangja	12	2073	1851	2148	671	112	6855	9593	4280	13873	20728	1153	1456	13	8	
40	Kaski	12	3356	6328	10271	4807	2327	27089	13021	11381	24402	51491	1665	2424	41	29	
41	Manang	12	176	58	122	6	120	482	186	17	203	685	26	59	22	145	
42	Mustang	12	306	117	296	208	231	1158	307	254	561	1719	116	166	8	10	
43	Myagdi	12	1425	419	903	1237	1091	5075	3100	1014	4114	9189	548	1006	25	125	
44	Parbat	12	1366	543	930	152	76	3067	4078	1029	5107	8174	333	725	20	2	
45	Baglung	12	2095	2333	2286	2091	799	9604	6881	3741	10622	20226	1296	1722	13	3	
46	Gulmi	12	4716	1805	2309	361	212	9403	3662	5797	9459	18862	998	1825	5	1	
47	Palpa	12	2586	2279	4611	1419	1521	12416	3793	7971	11764	24180	1228	2059	141	125	
48	Nawalparasi	12	5905	3794	6089	3473	1083	20344	8108	31948	40056	60400	1122	3246	44	41	
49	Rupandehi	12	3671	5296	11277	2668	1830	24742	28551	3691	32242	56984	0	0	0	0	
50	Kapilvastu	12	3523	2997	8811	844	1016	17191	1702	13767	15469	32660	1579	4481	99	80	
51	Arghakhanchi	12	1985	683	1309	636	967	5580	3049	2649	5698	11278	291	498	5	4	
	Western	192	38973	31801	59938	21775	12992	165479	106162	102764	208926	374405	13355	28276	1515	820	
52	Pyuthan	12	4427	3102	4739	743	1239	14250	2870	2094	4964	19214	1396	2387	51	94	
53	Rolpa	12	4680	1197	4305	1090	5179	16451	3496	198	3694	20145	1023	3129	162	284	
54	Rukum	12	1440	1479	4438	200	628	8185	3086	208	3294	11479	2117	6151	4	20	
55	Salyan	12	2439	1139	4338	1610	2092	11618	5595	771	6366	17984	1109	4834	220	153	
56	Dang	12	7949	6404	14682	10906	4592	44533	3888	19651	23539	68072	2043	4364	55	25	
57	Banke	12	6153	3795	8828	3353	3421	25550	6138	16789	22927	48477	1624	6120	183	653	
58	Bardiya	12	5389	2416	6831	6059	3572	24267	2979	26031	29010	53277	1037	1825	460	55	
59	Surkhet	12	4439	2620	6095	2											

**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	Norplant	Total						
	Mountain	192	5.11	2.93	7.3	0.59	0.9	16.84	5.11	2.94	11.32	1.53	2.36	23.24	37.74	17208.43	8248.62	32280.5	17488	16855
	Hill	468	3.73	2.09	4.34	0.58	0.83	11.57	3.73	3.24	8.1	2.82	3.26	21.15	37.62	92404.85	56317	168096.75	135728	111155
	Teraí	240	3.43	1.74	3.72	0.67	0.51	10.07	3.43	3.06	6.74	2.29	1.58	17.09	52.28	95432.03	67823.46	159689.75	174976	80825
	National Total	900	3.66	1.97	4.21	0.63	0.68	11.15	3.66	3.13	7.62	2.48	2.37	19.26	44.91	205045.3	132389.08	360067	328192	208835
1	Taplejung	12	2.96	3.77	8.39	0.75	0.73	16.59	2.96	5.49	19	4.1	1.3	32.84	41.44	732.64	886.62	2762.75	1856	945
2	Panchthar	12	4.58	1.92	6.03	0.18	0.92	13.63	4.58	5.03	12.84	2.47	3.27	28.17	34.25	1793.66	1629.46	5215.75	568	1885
3	Ilam	12	2.83	1.64	4.54	0.66	0.7	10.37	2.83	8.97	20.3	2.85	2.57	37.52	50.74	1788.05	3698.31	10022.5	3512	2165
4	Jhapa	12	1.86	2.04	3.48	0.15	0.6	8.13	1.86	3.58	7.6	2.11	2.42	17.57	54.21	3477.9	6264.38	13367	2320	5565
5	Morang	12	1.85	1	3.04	0.76	0.48	7.13	1.85	2.75	7.66	4.17	2.09	18.52	63.23	3945.53	4754.62	12452.5	14728	5405
6	Sunsari	12	2.05	1.49	3.22	0.9	0.55	8.22	2.05	3.42	6.9	2.06	1.74	16.17	41.92	3493.05	4366.54	11407.25	12768	4945
7	Dhankuta	12	3.8	2.09	5.48	0.15	0.66	12.17	3.8	9.58	15.77	1.87	3.52	34.54	46.12	1320.95	1410.23	4228.75	408	1145
8	Teharthur	12	5.33	2.18	5.75	0.3	0.43	13.98	5.33	2.72	8.49	2.03	2.63	21.21	30.2	1097.05	536.54	1753.5	488	450
9	Sankhuwasabha	12	3.35	2.42	7.24	0.81	0.56	14.38	3.35	2.3	10.63	2.1	2.64	21.02	30.91	1042.04	610.85	3060.75	880	940
10	Bhojpur	12	3.33	5	5.42	0.43	0.41	14.59	3.33	5.41	12.92	1.05	2.59	25.3	33.05	1174.43	1555	4044	728	1405
11	Solukhumbu	12	5.09	4.39	13.65	0.17	0.91	24.21	5.09	5.91	27.13	0.15	2.65	40.92	46.11	1041.11	1024.08	4225	880	865
12	Okhaldhunga	12	3	3.69	8.26	0.01	0.76	15.72	3	4.78	18.16	1.36	4.04	31.33	38.18	861.35	1044.77	3943	1032	1175
13	Khotang	12	3.38	2.61	4.8	0.03	0.59	11.41	3.38	10.09	21.1	1.4	1.11	37.08	44.6	1297.32	1477.23	3404.5	104	1135
14	Udaypur	12	1.61	2.07	6.11	0.34	0.29	10.42	1.61	2.78	7.86	1.01	0.72	13.99	26.55	1075.11	1384.69	4884	1968	965
15	Saptari	12	4.36	3.39	4.53	0.1	0.63	13.02	4.36	6.08	12.14	0.63	0.68	23.9	70.09	5549.62	5891.85	11454.5	1008	4025
16	Siraha	12	3.63	1.43	3.52	0.88	0.12	9.58	3.63	2.53	6.79	1.76	1.27	15.98	60.86	4566.87	3201.31	8186.5	15728	705
	Eastern	192	2.79	2.07	4.43	0.5	0.53	10.32	2.79	4.33	10.44	2.19	1.94	21.69	51.17	34256.68	39736.46	104412.25	58976	33720
17	Dhanusha	12	2.95	1.25	3.34	0.72	0.17	8.42	2.95	1.38	4.19	1.03	0.18	9.73	63.23	4361.23	2287.31	6402.75	11800	2125
18	Mahottari	12	3.53	1.46	3.73	0.53	0.09	9.35	3.53	2.49	7.2	1.42	0.43	15.07	60.61	4117.65	2593.31	7866	5296	695
19	Sarlahi	12	2	1.72	2.81	1.25	0.82	8.59	2	3.11	4.59	1.24	0.91	11.84	57.78	2890.8	2452.15	4856.5	21936	16190
20	Sindhuli	12	2.65	1.62	3.11	0.83	0.51	8.71	2.65	3.47	7.37	2.28	2.77	18.56	34.84	1529.35	1569.23	3999.75	3808	1475
21	Ramechhap	12	2.47	0.72	3.53	0.37	0.74	7.82	2.47	1.54	8.95	3.46	3.65	20.06	28.92	980.9	546.69	3911.75	2152	3405
22	Dolkha	12	4.37	2.9	8.39	0.28	0.86	16.8	4.37	2.22	10.51	0.93	1.9	19.93	40.31	1618.23	862.85	3878	1856	1955
23	Sindhupalchowk	12	2.5	1.24	3.99	1.83	1.94	11.5	2.5	2.05	13.16	3.32	2.63	23.64	40.39	1381.67	1300.38	7548.25	9264	5030
24	Kavre	12	3.7	1.21	3.74	0.94	3.22	12.81	3.7	2.73	10.5	5.63	10.94	33.49	56.07	2965.11	1961.54	8451.25	6320	14085
25	Lalitpur	12	1.6	0.71	1.92	0.1	0.39	4.72	1.6	1.74	8.8	4.44	6.8	23.38	47.92	1851.91	678.38	3257.25	4184	1730
26	Bhaktapur	12	1.29	1	3.49	1.16	0.53	7.47	1.29	1.5	7.39	3.65	2.88	16.71	32.31	980.86	1159.46	5482.75	10888	1895
27	Kathmandu	12	0.94	1.06	2.22	0.64	0.59	5.45	0.94	1.82	5.23	4.17	2.52	14.69	26.14	4275.55	5534.54	21148.5	23344	13250
28	Nuwakot	12	2.54	2.57	5.99	1.16	0.85	13.12	2.54	1.37	8.58	2.62	1.39	16.5	43	1412.05	877.15	4308.5	7008	3405
29	Rasuwa	12	7.12	2.67	11.04	0.08	0.77	21.67	7.12	2.45	10.87	0.71	5.82	26.97	59.52	555.48	191.31	797.5	48	275
30	Dhading	12	5.43	2.89	6.4	1.7	1.25	17.67	5.43	4.69	13.4	5.24	4.99	33.76	50.76	3687.05	2334.77	7892.25	9216	4235
31	Makawanpur	12	3.26	2.49	6.2	0.66	1.61	14.22	3.26	3.3	9.76	0.57	6.39	23.29	60.58	2818.59	1633.77	7132	6184	6290
32	Rautahat	12	3.51	1.24	2.17	0.69	0.03	7.64	3.51	2.16	2.74	1.36	0.14	9.92	57.78	4404.12	1551.54	3085.25	7280	1770
33	Bara	12	3.18	0.86	2.55	0.69	0.12	7.4	3.18	1.77	6.73	1.06	1.03	13.76	46.42	4111.74	1682.77	6151.75	7352	785
34	Parsa	12	2.4	1.72	3.6	0.15	0.39	8.25	2.4	1.19	4.82	0.6	1.53	10.53	79.94	2688.7	1220	5190	4664	330
35	Chitwan	12	3.04	1.75	3.18	0.82	0.41	9.21	3.04	2.54	3.97	2.42	2.13	14.11	45.33	4162.33	2527	4883.5	7400	2625
	Central	228	2.48	1.42	3.33	0.75	0.66	8.65	2.48	2.17	6.56	2.63	2.63	16.48	46.92	50793.32	32964.15	116243.5	150000	81550
36	Gorkha	12	3.51	2.76	5.63	0.06	0.3	12.26	3.51	2.09	7.35	0.33	0.75	14.02	38.43	1952.28	1049.23	3887	672	845
37	Lamjung	12	5.04	1.82	3.94	1.18	0.28	12.27	5.04	2.7	5.74	0.6	0.67	14.74	37.8	1760.52	872.92	1875	2328	500
38	Tanahu	12	2.89	1.77	3.32	0.67	0.44	9.09	2.89	1.66	3.44	3.91	1.33	13.23	32.29	2078.69	962.15	2319.75	4272	1585
39	Syangja	12	3.35	1.1	1.36	0.2	0.11	6.12	3.35	2.99	3.47	1.08	0.18	11.07	33.46	2073.41	1523.15	2032.25	1328	335
40	Kaski	12	2.84	1.86	2.58	0.67	0.43	8.38	2.84	5.36	8.7	4.07	1.97	22.95	43.62	3356.53	2325.15	4104.25	6312	2505
41	Manang	12	17.26	3.72	6.56	0	4.79	32.29	17.26	5.68	11.94	0.59	11.74	47.16	67.03	176.37	44.31	103	0	190
42	Mustang	12	13.67	5	10.44	1.25	0.71	31.06	13.67	5.22	13.21	9.28	10.31	51.67	76.71	306.37	115.77	228.75	224	80
43	Myagdi	12	5.91	7.32	5.12	0.5	1.09	19.94	5.91	1.74	3.74	5.13	4.52	21.04	38.1	1425.33	412.46	1031.25	1600	1555
44	Parbat	12	4.39	1.2	2.63	0.74	0.46</													

**Analysed 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	14.49	8	92	21.86	78.14	99.48	0.52	90.52	72.15
	Hill	468	0.31	16.48	32.33	67.67	34	66	84.42	15.58	84.78	54.14
	Terai	240	1.06	35.19	95.21	4.79	52.26	47.74	70.38	29.62	96.03	71.99
	National Total	900	0.7	25.65	78.59	21.41	47.19	52.81	74.56	25.44	91.25	67.61
1	Taplejung	12	0.13	8.6	0	100	9.68	90.32	100	0	85.59	62
2	Panchthar	12	0	6.08							83.91	0
3	Ilam	12	0.02	13.22	90	10	0	100	100	0	86.8	6.67
4	Jhapa	12	1.8	36.63	98.52	1.48	83.69	16.31	18.33	81.67	94.67	124.89
5	Morang	12	1.02	44.71	98.71	1.29	48.78	51.22	56.57	43.43	96.38	61.97
6	Sunsari	12	0.88	25.75	97.73	2.27	27.79	72.21	90.58	9.42	86.2	83.17
7	Dhankuta	12	0.01	11.58	0	100	100	0	100	0	100.2	2
8	Teharthur	12	0.03	8.99	0	100	0	100	100	0	77.73	6
9	Sankhuwasabha	12	0.12	9.89	91.89	8.11	100	0	100	0	74.02	37
10	Bhojpur	12	0.12	7.75	0	100	29.55	70.45	95.45	4.55	58.28	44
11	Solukhumbu	12	0.04	5.18	0	100	0	100	100	0	85.81	18
12	Okhaldhunga	12	0.21	6.85	23.73	76.27	47.46	52.54	52.54	47.46	64.38	39.33
13	Khotang	12	0.08	7.52	6.45	93.55	29.03	70.97	100	0	61.16	31
14	Udaypur	12	0.01	12.56	80	20	100	0	30	70	70.96	3.33
15	Saptari	12	1.73	46.2	99.82	0.18	60.9	39.1	99.86	0.14	107.42	87.88
16	Siraha	12	0.04	44.88	100	0	6.12	93.88	93.88	6.12	92.2	1.75
	Eastern	192	0.78	29.49	96.98	3.02	60.26	39.74	59.26	40.74	89.85	65.23
17	Dhanusha	12	0.99	53.5	99.8	0.2	93.72	6.28	81.49	18.51	86.69	48.8
18	Mahottari	12	0.43	45.54	100	0	100	0	100	0	92.93	22.82
19	Sarlahi	12	1.86	45.94	99.7	0.3	2.27	97.73	49.83	50.17	98.21	107.72
20	Sindhuli	12	0.26	16.28	84.11	15.89	0.66	99.34	92.05	7.95	80.32	100.67
21	Ramechhap	12	0.13	8.86	0	100	0	100	100	0	67.56	51
22	Dolkha	12	0.18	20.38	43.08	56.92	1.54	98.46	95.38	4.62	74.63	32.5
23	Sindhupalchowk	12	0	16.75							82.74	0
24	Kavre	12	0.4	22.57	31.23	68.77	70.03	29.97	29.97	70.03	84.78	105.67
25	Lalitpur	12	0.44	24.54	8.1	91.9	100	0	100	0	74.09	72.29
26	Bhaktapur	12	0.23	15.6	40	60	74.29	25.71	85.14	14.86	81.63	70
27	Kathmandu	12	0.13	11.45	23.01	76.99	95.53	4.47	64.24	35.76	78.93	30.2
28	Nuwakot	12	0.4	26.49	45	55	5.45	94.55	91.82	8.18	79.66	73.33
29	Rasuwa	12	0.81	32.55	25.4	74.6	0	100	100	0	92.82	63
30	Dhading	12	0.64	17.01	12.7	87.3	0	100	100	0	76.56	72.17
31	Makawanpur	12	0.23	37.29	7.18	92.82	0	100	10.26	89.74	93.48	13
32	Rautahat	12	1.58	47.86	99.75	0.25	94.09	5.91	99.6	0.4	85.19	39.6
33	Bara	12	0.79	32.66	99.8	0.2	0.39	99.61	96.48	3.52	96.87	63.88
34	Parsa	12	3.15	69.4	98.53	1.47	85.58	14.42	28.02	71.98	96.93	100.86
35	Chitwan	12	0.64	31.21	22.11	77.89	81.41	18.59	37.76	62.24	103.37	67.85
	Central	228	0.73	30.44	80.82	19.18	60.53	39.47	63.46	36.54	87.1	58.02
36	Gorkha	12	0.33	24.4	44.09	55.91	46.77	53.23	100	0	97.27	46.5
37	Lamjung	12	0.54	23.06	10.58	89.42	10.05	89.95	99.47	0.53	77.62	75.6
38	Tanahu	12	0.24	19.06	51.46	48.54	0	100	100	0	82.98	34.2
39	Syangja	12	0.1	22.39	83.05	16.95	5.08	94.92	94.92	5.08	82.91	19.67
40	Kaski	12	0.55	20.67	40.06	59.94	47.25	52.75	61.77	38.23	107.27	93.43
41	Manang	12	0.1	19.86	0	100	100	0	100	0	68.5	2
42	Mustang	12	0.4	25.03	88.89	11.11	0	100	100	0	114.6	18
43	Myagdi	12	0.5	17.06	50	50	8.33	91.67	100	0	83.54	80
44	Parbat	12	0.24	16.4	25.33	74.67	12	88	100	0	54.49	37.5
45	Baglung	12	0.15	18.21	41.86	58.14	0	100	100	0	96.31	28.67
46	Gulmi	12	0.25	16	72.11	27.89	0	100	100	0	83.83	73.5
47	Palpa	12	0.53	20.59	57.48	42.52	52.49	47.51	42.19	57.81	89.56	75.25
48	Nawalparasi	12	0.8	27.67	94.68	5.32	5.41	94.59	94.33	5.67	97.42	89.62
49	Rupandehi	12	0.65	16.62	96.2	3.8	100	0	100	0	91.91	84.13
50	Kapilvastu	12	0.46	13.77	97.89	2.11	5.76	94.24	95.39	4.61	81.65	130.25
51	Arghakhanchi	12	0.16	13.55	72.73	27.27	1.52	98.48	100	0	75.19	33
	Western	192	0.47	19.55	75.38	24.62	38.95	61.05	89.66	10.34	89.57	72.64
52	Pyuthan	12	0.2	10.57	65.63	34.38	7.29	92.71	100	0	83.54	64
53	Rolpa	12	0.14	8.31	0	100	0	100	100	0	106.03	25.2
54	Rukum	12	0.04	7.94	27.78	72.22	0	100	100	0	95.66	9
55	Salyan	12	0.35	12	0	100	0	100	100	0	99.91	74.8
56	Dang	12	0.32	18.9	93.25	6.75	28.75	71.25	92.5	7.5	113.45	57.14
57	Banka	12	0.52	21.73	79.63	20.37	20.37	79.63	95.05	4.95	100.99	68.13
58	Bardiya	12	1.02	30.77	96.98	3.02	0	100	100	0	102.46	80
59	Surkhet	12	1.16	30.52	40.56	59.44	32.1	67.9	92.12	7.88	103	86.3
60	Dailikh	12	0.83	13.27	0.73	99.27	18.64	81.36	100	0	103.21	82.6
61	Jajarkot	12	0.64	15.27	0	100	0	100	100	0	67.91	100
62	Dolpa	12	0.92	12.56	0	100	15.63	84.38	100	0	91.83	64
63	Jumla	12	1.98	1.98	0	100	0	100	100	0	40.06	107.5
64	Kalikot	12	1.21	11.1	1.02	98.98	31.4	68.6	100	0	121.67	97.67
65	Mugu	12	1.54	19	0	100	100	0	100	0	106.23	100
66	Humla	12	1.81	18.17	0	100	34.15	65.85	100	0	118.34	164
	Mid Western	180	0.66	18.36	44.61	55.39	18.47	81.53	97.42	2.58	100.21	76.92
67	Bajura	12	0.39	15.15	0	100	0	100	100	0	112.44	64
68	Bajhang	12	0.85	25.45	9.3	90.7	0	100	100	0	159.52	75.25
69	Achham	12	0.69	8.3	11.31	88.69	41.59	58.41	100	0	136.45	163.5
70	Doti	12	0.42	10.61	7.88	92.12	0	100	100	0	104.09	82.5
71	Kailali	12	1.78	27.65	93.22	6.78	19.32	80.68	99.41	0.59	102.16	151.95
72	Kanchanpur	12	0.34	24.13	85.16	14.84	34.72	65.28	100	0	102.95	42.13
73	Dadeldhura	12	0.96	24.17	68.75	31.25	7.35	92.65	100	0	101.86	90.67
74	Baitadi	12	0.5	13.08	88.89	11.11	0	100	100	0	103.15	60.75
75	Darchula	12	0.77	8.68	18.09	81.91	34.17	65.83	96.48	3.52	94.03	132.67
	Far Western	108	0.96	20.69	73.05	26.95	18.64	81.36	99.5	0.5	107.3	108.24

Raw Data

Logistic Management

District Code	District Name	Received Reports	Stock at the End of Month											
			Condom	Pills	Depo	ORS	Cortim (120 mg)	Vitamin A	Iron	Albendazole	Cetamol	Tetracyclin (250 mg)	IUCD	Implant
	Mountain	192	16032548	1664229	1223299	2423342	6710503	1393538	16840913	8918906	49074996	3255303	27089	9750
	Hill	468	65913722	5446227	4425070	9312533	41514950	6095352	95659891	36662133	191438103	13066269	65619	38557
	Terai	240	70643997	4226352	3410726	6505236	29350540	8169264	92558506	36686518	215349636	11359091	102648	15829
	National Total	900	152590267	11336808	9059095	18241111	77575993	15658154	205059310	82267557	455862735	27680663	195356	64136
1	Taplejung	12	937047	175180	138157	144395	586357	85297	1402496	1386585	5809547	1434187	2961	897
2	Panchthar	12	2906950	266933	193798	339105	1321535	155945	1917050	2057404	14451340	709490	913	688
3	Ilam	12	1432074	205251	151662	194068	1085145	187501	1441995	468712	4255054	417540	2111	336
4	Jhapa	12	1804665	339472	162925	284206	2152578	109882	2405122	1453974	12272880	206571	778	850
5	Morang	12	5025450	336367	195009	303896	3265515	4198409	5160255	1891795	12472093	116825	3805	1443
6	Sunsari	12	2837852	397927	196706	452516	3196650	188670	5825838	1088214	10419187	359900	37652	149
7	Dhankuta	12	495688	58740	46721	99006	763866	119591	794788	434833	3030086	75750	670	806
8	Teharthur	12	791478	146193	89719	261078	977765	50589	1399818	367945	3505200	100460	250	100
9	Sankhuwasabha	12	2820980	189198	69111	236689	818890	74052	1824697	740522	8887056	331390	4856	1849
10	Bhojpur	12	2386096	265309	267175	294283	964876	203346	17871202	1662088	5721693	590902	123	130
11	Solukhumbu	12	958165	117476	112477	162414	589740	80317	894358	243567	1852740	297900	1164	630
12	Okhaldhunga	12	569401	182190	180531	173431	943657	107512	2468995	791595	3212100	197847	765	1007
13	Khotang	12	1125841	72513	77654	138623	868259	128508	950809	647902	5540502	256049	403	151
14	Udayapur	12	705350	134681	70801	213123	714382	83717	1604145	612316	3264881	307795	1208	431
15	Saptari	12	3245365	188081	203045	626111	1756000	162302	9346636	3168442	15137436	1476569	349	197
16	Siraha	12	7304163	330022	374270	375214	885536	192763	1725479	7085725	21216694	405766	532	535
	Eastern	192	35346565	3405533	2529761	4298158	20890751	6128401	57033683	24101619	131048489	7284941	58540	10198
17	Dhanusha	12	5033264	173151	100519	244790	1362590	121354	1721306	1982893	10510454	481212	23463	906
18	Mahottari	12	3189438	280528	506460	225562	790700	110801	2964112	931014	14978782	607812	1752	14
19	Sarlahi	12	2857383	238467	205172	220143	959831	134587	2440256	1495063	15025175	685535	2105	301
20	Sindhuli	12	1313300	136304	77597	235332	712187	128808	1502552	567915	7522670	268968	1414	838
21	Ramechhap	12	1815459	236053	149840	261025	882512	292516	5768728	878609	5621545	103214	4282	2075
22	Dolkha	12	4764039	358627	171681	769966	734640	223182	4395101	3091473	16796391	115446	973	712
23	Sindhupalchowk	12	2437420	251644	189779	231576	984294	338751	2199715	728272	5506265	228090	2298	854
24	Kavre	12	1966312	215408	132256	230802	1122400	335853	2611982	814139	3892790	454689	1816	819
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	1636695	166986	43126	123347	209865	74159	500890	378242	5031076	60040	941	978
27	Kathmandu	12	2747367	289066	305382	356178	783895	245593	4171286	1053864	12295008	19240	1699	2256
28	Nuwakot	12	1879654	183524	151018	178503	552553	107271	1621292	658100	3413258	148675	760	391
29	Rasuwa	12	927545	54232	183869	119056	486200	42100	1037140	172250	2670690	102620	199	397
30	Dhading	12	2246641	246197	189222	210361	1397512	163554	2248785	471184	7916806	367824	2928	3781
31	Makawanpur	12	1985233	187389	191321	230627	1069688	360951	2899885	571624	6778304	653305	2803	2870
32	Rautahat	12	2903248	195590	111658	179492	769930	114197	2617080	2694840	15197135	706585	3070	951
33	Bara	12	2857337	254551	95121	191218	452668	144263	1766372	1184537	9261912	742794	263	489
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	3839466	197531	210665	506757	2231675	304000	3407520	336143	7953807	315181	818	759
	Central	228	44399801	3665248	3014686	4514735	15503140	3241940	43874002	18010162	150372068	6061230	51584	19391
36	Gorkha	12	2143610	130431	222572	214570	1195642	205891	2138863	1442575	6998664	697810	530	415
37	Lamjung	12	1785278	134767	88848	246692	980465	123550	3324085	943878	5027921	100630	960	177
38	Tanahu	12	1036654	85268	84301	212609	976850	172025	1433614	654953	5218045	392602	2055	315
39	Syangja	12	3778226	181684	98359	199727	1075947	307556	3615553	1968379	5243253	84877	572	184
40	Kaski	12	2693060	116510	126765	480985	2301858	232202	4135935	1067517	6605777	671920	1942	471
41	Manang	12	99032	10598	6844	19426	64080	9317	130186	73481	267600	4000	0	0
42	Mustang	12	331488	14410	11176	19275	115674	19566	125626	62372	411226	4218	32	0
43	Myagdi	12	761999	53118	44765	148694	484249	106992	847546	681138	3147458	40141	396	296
44	Parbat	12	872755	75340	46092	168809	733335	118439	1430453	368589	2392718	178613	215	133
45	Baglung	12	981566	115910	117985	238886	885631	179245	2218295	1437392	6017917	767450	4579	858
46	Gulmi	12	2195170	135866	124216	252865	617759	366275	2424218	2280133	4834862	361359	5475	145
47	Palpa	12	3519987	192228	115147	361263	1652694	195247	2366790	2182141	6962240	746966	1076	980
48	Nawalparasi	12	2970747	249537	213389	405328	1885060	514901	3934897	1574884	16501980	186700	6472	2782
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	1745774	138376	38967	203156	915767	140862	2306002	782118	5183376	207050	1443	141
51	Arghakhanchi	12	1799249	67938	116380	289264	544840	118037	2078700	903315	2932920	576860	742	537
	Western	192	26714595	1701981	1455806	3461549	14429851	2810105	32510763	16422865	77745957	5021196	26489	7434
52	Pyuthan	12	4359213	229394	161634	235480	1120174	106141	1343255	1547441	5521290	521485	932	1261
53	Rolpa	12	2825811	181694	120897	372947	1937132	161708	2624235	2600659	7813390	667890	4043	3619
54	Rukum	12	757434	87545	80148	116381	538988	105920	1192499	558152	1179610	356456	8041	871
55	Salyan	12	2844176	127060	132498	185283	1292040	183402	1538657	537513	2493762	194887	1508	1395
56	Dang	12	3836765	170780	323533	447599	1772522	175689	31834696	4815440	12166820	297509	6957	1281
57	Banka	12	6996065	131690	109927	559921	1770010	176875	3924445	1128755	9399879	1416255	2326	1411
58	Bardiya	12	2871008	126787	86705	391426	2345668	372013	3965436	1501071	10893202	1706390	2708	1308
59	Surkhet	12	1563292	156512	93296	456863	1589333	111729	2279812	1308058	5299956	366813	1668	1395
60	Dailekh	12	1293442	92693	77534	305376	5782980	95914	1250010	512939	2316610	501314	277	952
61	Jajarkot	12	217788	56746	52562	114937	277053	77342	820429	310070	880494	61452	2271	617
62	Dolpa	12	83457	40826	22400	57240	111704	22678	127500	68620	154425	20760	60	189
63	Jumla	12	669164	83685	36717	89818	296321	40666	674000	448205	876830	34304	11258	501
64	Kailikot	12	248103	41432	23436	71925	229700	44893	192715	106183	550102	210332	323	714
65	Mugu	12	161147	17016	14046	33660	143130	98108	267954	168094	342787	14892	100	432
66	Humla	12	59005	89078	18753	46562	174940	31055	301965	85115	240642	53200	0	0
	Mid Western	180	28785870	1632938	1354086	3485418	19381695	1804133	52337608	15696315	60129799	6423939	42472	15946
67	Bajura	12	501866	82844	78989	111867	445711	57823	1207320	314283	1518405	243440	1376	892
68	Bajhang	12	636889	44193	49828	178213	473567	142163	929465	516249	1443710	46390	1084	1533
69	Achham	12	697053	37799	36916	263678	957507	59224	2274114	501569	2770959	414768	2105	1746
70	Doti	12	1134090	88491	67548	2595								

Raw Data
Malaria Sheet 1 of 4

District Code	District Name	Received Reports	Slide Collection			Examined			Positive Cases			Treatment Total	Pregnant Women Treatment	PV Indigenous						PV Imported					
			ACD	PCDH	Total	RDTs	Microscope	Total	RDTs	Microscope	Total			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	181	164	386	550	207	279	486	38	40	78	69	0	0	0	0	1	0	1	0	0	0	1	0	1
	Hill	456	1727	20833	22560	6375	15765	22140	391	294	685	517	6	7	10	72	142	79	152	0	0	12	104	12	104
	Terai	225	5939	84333	90272	24876	61302	86178	601	824	1425	1394	9	7	8	147	389	154	397	0	6	33	343	33	349
	National Total	862	7830	105552	113382	31458	77346	108804	1030	1158	1674	1980	15	14	18	219	532	233	550	0	6	45	448	45	454
1	Taplejung	12	0	82	82	30	63	93	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	Panchthar	12	2	797	799	108	695	803	0	3	3	3	0	0	0	0	0	0	0	0	0	1	2	1	2
3	Ilam	12	28	1988	2016	121	1873	1994	1	1	2	2	0	0	0	0	0	0	0	0	0	0	2	0	2
4	Jhapa	12	42	5114	5156	2877	2686	5563	28	61	89	89	0	2	1	4	49	6	50	0	0	0	22	0	22
5	Morang	12	374	7125	7499	1284	5292	6576	6	10	16	16	0	0	0	1	7	1	7	0	0	0	3	0	3
6	Sunsari	12	153	3227	3380	1991	570	2561	14	0	17	14	0	1	0	1	6	1	1	0	0	0	2	0	2
7	Dhankuta	12	150	247	397	155	146	301	0	4	2	2	0	0	0	1	1	1	1	0	0	0	0	0	0
8	Tehrathum	12	0	6	6	6	0	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	0	19	19	24	0	24	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	Bhojpur	12	0	164	164	40	29	69	0	1	6	6	0	0	0	0	0	0	0	0	0	0	1	0	1
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
12	Okhaldhunga	12	31	210	241	226	50	276		3	3	3	0	0	0	0	1	0	1	0	0	0	1	0	1
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
14	Udaypur	12	16	1327	1343	107	916	1023	2	3	5	5	0	0	0	1	0	1	0	0	0	2	2	2	2
15	Saptari	12	586	3398	3984	901	1361	2262	23	4	27	27	0	0	0	10	8	10	8	0	0	0	1	0	1
16	Siraha	12	2	1925	1927	1382	1252	2634	30	7	37	37	0	0	0	11	7	11	7	0	0	1	1	1	1
	Eastern	192	1384	25629	27013	9252	14933	24185	129	127	207	199	0	3	1	29	79	31	75	0	0	4	37	4	37
17	Dhanusha	11	1010	2129	3139	1155	1788	2943	31	10	41	41	1	0	3	11	18	11	21	0	0	1	0	1	0
18	Mahottari	12	612	5514	6126	1276	5394	6670	11	21	32	32	0	0	0	2	18	2	18	0	0	2	7	2	7
19	Sarlahi	9	412	1212	1624	145	984	1129	14	16	30	30	1	0	0	4	7	4	7	0	0	0	4	0	4
20	Sindhuli	12	44	588	632	564	89	653	6	0	6	6	0	0	0	1	1	1	1	0	0	1	1	1	1
21	Ramechhap	12	4	148	152	22	90	112	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Dolkha	12	164	70	234	70	104	174	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	Sindhupalchowk	12	0	61	61	39	2	41	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24	Kavre	12	5	995	1000	158	834	992	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	Lalitpur	12	209	91	300	0	91	91	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
27	Kathmandu	12	0	1	1	1	1	2	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Nuwakot	9	357	62	419	239	180	419	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
30	Dhading	12	183	773	956	720	136	856	5	0	5	5	1	0	0	2	0	2	0	0	0	2	0	2	0
31	Makawanpur	12	104	1400	1504	299	983	1282	4	2	6	6	2	0	0	0	0	0	0	0	0	0	5	0	4
32	Rautahat	8	234	344	578	122	247	369	0	5	5	4	0	1	2	0	1	2	0	0	0	1	0	1	0
33	Bara	12	855	2654	3806	140	823	963	28	19	47	47	0	1	1	17	20	0	0	0	0	0	0	0	0
34	Parsa	11	322	0	322	0	75	75	2	15	17	17	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	84	1021	1105	696	796	1492	19	5	24	24	0	0	0	1	13	1	0	0	0	0	7	0	7
	Central	216	4599	17063	21662	5646	12617	18263	79	258	214	391	5	2	6	38	77	50	73	0	0	7	24	7	23
36	Gorkha	12	18	161	179	124	131	255	0	3	3	3	0	0	0	0	0	0	0	0	0	0	3	0	3
37	Lamjung	12	10	641	651	6	641	647	1	2	3	3	0	0	0	1	1	1	1	0	0	0	0	0	0
38	Tanahu	12	19	243	262	3	223	226	0	2	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0
39	Syangja	12	100	525	625	500	0	500	4	0	4	4	0	0	0	1	3	0	1	0	0	0	2	0	2
40	Kaski	12	34	2215	2249	435	1808	2243	7	42	49	49	0	0	0	0	17	0	17	0	0	1	21	1	21
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	398	398	161	237	398	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
44	Parbat	12	13	103	116	31	85	116	2	1	3	3	0	0	0	0	0	0	0	0	0	1	0	1	0
45	Baglung	9	2	42	44	0	38	38	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
46	Gulmi	12	7	328	335	9	209	218	5	6	11	11	0	0	0	0	1	0	0	0	0	0	0	0	0
47	Palpa	11	45	439	484	12	493	505	7	8	15	15	0	0	0	2	8	2	8	0	0	1	4	1	4
48	Navalparasi	12	14	4876	4890	1654	2927	4581	52	37	89	70	0	1	1	18	20	0	0	8	14	7	9	0	0
49	Rupandehi	6	0	9048	9048	0	9042	9042	35	103	138	138	0	2	2	22	29	43	10	0	0	18	15	10	18
50	Kapilvastu	12	29	1013	1042	698	801	1499	93	19	112														

Raw Data
Malaria Sheet 2 of 4

District Code	District Name	Received Reports	PF Indigenous						PF Imported								PM Indigenous						PM Imported					
			Under 5 Years		5 Years & Above		Total		Under 5 Years		5 Years & Above		5 to 14 Years		Total		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	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
	Mountain	181	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	2
	Hill	456	0	0	8	12	8	12	0	1	2	16	2	17	0	0	2	3	2	3	0	0	2	16	2	16	4	32
	Terai	225	3	4	16	39	19	43	1	2	8	71	9	73	2	0	4	10	6	10	0	0	25	40	25	40	50	80
	National Total	862	3	4	24	51	27	55	1	3	10	88	11	91	2	0	6	13	8	13	0	0	27	57	27	57	54	114
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	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	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	0	0
4	Jhapa	12	0	0	0	4	0	4	0	0	0	4	0	4	0	4	0	1	0	1	1	1	0	2	0	2	0	4
5	Morang	12	0	0	0	1	0	1	0	0	1	3	1	3	1	3	0	0	0	0	0	0	0	0	0	0	0	0
6	Sunsari	12	0	0	0	0	0	0	0	1	1	4	1	4	1	4	0	1	0	1	1	1	0	0	0	0	0	0
7	Dhankuta	12	0	0	0	0	0	0	0	0	0	2	0	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	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	0	0
10	Bhojpur	12	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	2
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	0	0
12	Okhaldhunga	12	0	0	1	0	1	0	0	0	0	0	0	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	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	0	0	0	0	0	0	0	0	0	0	0
15	Saptari	12	0	0	1	0	1	0	0	0	2	3	2	3	0	0	0	1	0	1	1	1	0	1	0	1	0	2
16	Siraha	12	0	1	5	1	5	2	0	0	0	0	0	0	1	0	3	1	4	1	4	5	0	0	0	0	0	0
	Eastern	192	0	1	7	6	7	7	0	1	4	19	4	14	3	11	3	4	4	4	9	8	0	5	0	3	0	8
17	Dhanusha	11	0	0	1	2	1	2	1	0	0	1	1	1	1	0	0	0	1	0	0	1	1	2	1	2	2	4
18	Mahottari	12	0	0	1	0	1	0	0	0	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0
19	Sarlahi	9	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0	1	0	1	0	2	3	9	3	9	6	18
20	Sindhuli	12	0	0	0	2	0	2	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	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	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	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	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	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	0	0
27	Kathmandu	12	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Nuwakot	9	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	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	0	0
30	Dhading	12	0	0	1	0	1	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	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Rautahat	8	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33	Bara	12	0	0	0	1	0	1	0	0	0	1	0	1	0	0	0	0	0	0	0	0	1	2	1	2	2	4
34	Parsa	11	0	0	0	0	0	0	0	0	0	3	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	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Central	216	0	0	3	5	3	5	1	0	0	12	1	8	1	0	0	1	1	1	0	3	5	13	5	13	10	26
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	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	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	0	0
39	Syangja	12	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0
40	Kaski	12	0	0	0	0	0	0	0	0	0	7	0	7	0	7	0	2	0	2	2	2	0	1	0	1	0	2
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	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	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	0	0
44	Parbat	12	0	0	0	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0
45	Baglung	9	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	0
46	Gulmi	12	0	0	0	0	0	0	0	0	0	2	0	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0
47	Palpa	11	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	0
48	Nawalparasi	12	0	0	0	0	0	0	0	0	0	3	0	0	0	3	0	0	0	0	0	0	2	2	2	2	4	4
49	Rupandehi	6	0	0	0	5	0	5																				

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	181	0	2	14	13	14	15	0	2	10	11	10	13
	Hill	456	793	632	650	786	1443	1418	781	621	582	816	1363	1437
	Terai	225	2141	2114	9112	10269	11253	12383	927	982	3199	4043	4126	5025
	National Total	862	2934	2748	9776	11068	12710	13816	1708	1605	3791	4870	5499	6475
1	Taplejung	12	0	0	1	3	1	3	0	0	1	1	1	1
2	Panchthar	12	0	0	0	0	0	0	0	0	0	1	0	1
3	Ilam	12	0	0	1	1	1	1	0	0	1	3	1	3
4	Jhapa	12	62	67	210	294	272	361	27	28	49	81	76	109
5	Morang	12	112	90	982	975	1094	1065	91	72	817	803	908	875
6	Sunsari	12	5	4	547	625	552	629	5	5	524	605	529	610
7	Dhankuta	12	0	0	26	37	26	37	0	0	15	28	15	28
8	Teharhum	12	0	0	1	1	1	1	0	0	1	1	1	1
9	Sankhuwasabha	12	0	0	0	0	0	0	0	0	0	0	0	0
10	Bhojpur	12	1	0	23	41	24	41	1	0	23	44	24	44
11	Solukhumbu	12	0	0	0	0	0	0	0	0	0	0	0	0
12	Okhaldhunga	12	0	1	0	0	0	1	0	0	1	2	1	2
13	Khotang	12	0	0	0	0	0	0	0	0	0	0	0	0
14	Udaypur	12	3	4	18	22	21	26	1	0	3	6	4	6
15	Saptari	12	12	12	886	663	898	675	7	4	334	275	341	279
16	Siraha	12	2	1	480	433	482	434	0	1	22	20	22	21
	Eastern	192	197	179	3175	3095	3372	3274	132	110	1791	1870	1923	1980
17	Dhanusha	11	464	488	1601	1827	2065	2315	20	21	103	153	123	174
18	Mahottari	12	375	353	1584	1943	1959	2296	41	45	157	209	198	254
19	Sarlahi	9	31	42	345	575	376	617	0	0	31	49	31	49
20	Sindhuli	12	3	2	84	116	87	118	0	0	49	74	49	74
21	Ramechhap	12	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
23	Sindhupalchowk	12	0	2	12	9	12	11	0	2	8	6	8	8
24	Kavre	12	1	0	7	12	8	12	0	0	1	3	1	3
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	9	0	0	11	13	11	13	0	0	3	2	3	2
29	Rasuwa	12	0	0	0	0	0	0	0	0	0	0	0	0
30	Dhading	12	3	3	3	9	6	12	1	3	1	4	2	7
31	Makawanpur	12	1	2	31	25	32	27	0	0	0	0	0	0
32	Rautahat	8	7	6	156	193	163	199	0	0	9	15	9	15
33	Bara	12	17	24	727	741	744	765	1	3	60	39	61	42
34	Parsa	11	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	0	0	1	6	1	6	0	0	1	8	1	8
	Central	216	902	922	4562	5469	5464	6391	63	74	423	562	486	636
36	Gorkha	12	0	0	12	13	12	13	0	0	1	5	1	5
37	Lamjung	12	0	0	0	0	0	0	0	0	1	1	1	1
38	Tanahu	12	0	0	0	2	0	2	0	0	0	2	0	2
39	Syangja	12	0	0	1	2	1	2	0	0	1	6	1	6
40	Kaski	12	0	0	20	22	20	22	0	1	16	57	16	58
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	0	0	0	0	0	0	0	0	0
44	Parbat	12	2	0	0	0	2	0	0	0	4	0	4	0
45	Baglung	9	0	0	0	0	0	0	0	0	0	0	0	0
46	Gulmi	12	0	1	1	30	1	31	0	0	0	18	0	18
47	Palpa	11	0	1	11	12	11	13	0	1	13	19	13	20
48	Nawalparasi	12	15	20	465	437	480	457	0	6	92	113	92	119
49	Rupandehi	6	0	0	0	269	0	269	0	0	0	283	0	283
50	Kapilvastu	12	38	45	98	129	136	174	18	31	66	138	84	169
51	Arghakhanchi	12	0	0	4	0	4	0	0	0	0	0	0	0
	Western	182	55	67	612	916	667	983	18	39	194	642	212	681
52	Pyuthan	8	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
54	Rukum	12	0	0	0	0	0	0	0	0	0	0	0	0
55	Salyan	12	3	6	7	9	10	15	3	4	8	9	11	13
56	Dang	12	517	491	186	240	703	731	375	435	165	224	540	659
57	Banke	12	18	14	112	108	130	122	18	14	109	143	127	157
58	Bardiya	12	338	300	224	231	562	531	240	214	173	183	413	397
59	Surkhet	12	771	606	324	351	1095	957	771	607	349	429	1120	1036
60	Dailekh	12	2	1	23	18	25	19	2	1	24	26	26	27
61	Jajarkot	12	0	0	0	0	0	0	0	0	0	0	0	0
62	Dolpa	7	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
64	Kalikot	12	0	0	1	1	1	1	0	0	1	2	1	2
65	Mugu	12	0	0	0	0	0	0	0	0	0	0	0	0
66	Humla	7	0	0	0	0	0	0	0	0	0	0	0	0
	Mid Western	166	1649	1418	877	958	2526	2376	1409	1275	829	1016	2238	2291
67	Bajura	12	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
69	Achham	12	0	0	0	7	0	7	0	0	3	5	3	5
70	Doti	11	1	1	4	7	5	8	0	0	5	8	5	8
71	Kailali	12	128	157	508	580	636	737	84	101	472	605	556	706
72	Kanchanpur	12	0	0	0	0	0	0	2	15	97	15	99	
73	Dadeldhura	12	0	0	5	8	5	8	0	0	5	12	5	12
74	Baitadi	12	2	4	33	28	35	32	2	4	54	51	56	55
75	Darchula	11	0	0	0	0	0	0	0	0	2	0	0	2
	Far Western	106	131	162	550	630	681	792	86	107	554	780	640	887

Source: EDCD/HMIS

Malaria Sheet 4 of 4

District Code	District Name	Received Reports	Suspected/Possible Malaria						Confirmed Serious Malaria						Death											
			Under 5 Years		5 Years & Above		Total		Under 5 Years		5 Years & Above		Total		Suspected/Possible						Confirmed PF					
															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	181	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	456	2	0	14	7	16	7	0	0	2	6	2	6	0	0	0	0	0	0	0	0	0	0	0	0
	Terai	225	8	5	53	57	61	62	0	0	1	3	1	3	0	0	0	0	0	0	0	0	0	0	0	0
	National Total	862	10	5	67	64	77	69	0	0	3	9	3	9	0	0	0	0	0	0	0	0	0	0	0	0
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	
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	
3	Ilam	12	0	0	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4	Jhapa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5	Morang	12	0	0	5	4	5	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6	Sunsari	12	1	1	0	0	1	1	0	0	1	0	1	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	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	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	
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	
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	
12	Okhaldhunga	12	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0	0	0	
14	Udaypur	12	2	0	0	0	2	0	0	0	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	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	
	Eastern	192	3	1	6	5	9	6	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	
17	Dhanusha	11	0	0	21	21	21	21	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	
19	Sarlahi	9	3	2	18	24	21	26	0	0	0	2	0	2	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	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	
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	
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	
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	
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	
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	
27	Kathmandu	12	0	0	0	0	0	0	0	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	
28	Nuwakot	9	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	
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	
31	Makawanpur	12	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	
32	Rautahat	8	0	0	4	2	4	2	0	0	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	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	
34	Parsa	11	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	
	Central	216	3	2	43	47	46	49	0	0	1	5	1	5	0	0	0	0	0	0	0	0	0	0	0	
36	Gorkha	12	0	0	0	0	0	0	0	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	
37	Lamjung	12	0	0	10	3	10	3	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	
39	Syangja	12	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	
40	Kaski	12	0	0	0	0	0	0	0	0	1	0	1	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	
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	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	
45	Baglung	9	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	
47	Palpa	11	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0	0	0	
49	Rupandehi	6	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	4	2	5	6	9	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
51	Arghakhanchi	12	0	0	2	2	2	2	0	0	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	
	Western	182	4	2	17	11	21	13	0	0	2	4	2	4	0	0	0	0	0	0	0	0	0	0	0	
52	Pyuthan	8	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	
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	
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	
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	
57	Banke	12	0	0	0	0	0	0	0	1	0	1	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	
59	Surkhet	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
60	Dallekh	12	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	
62	Dolpa	7	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	
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	
65	Mugu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
66	Humla	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Mid Western	166	0	0																						

Source: ED CD/HMIS

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	0.4	3.02	0.5	0.19	3.85	75	7.69	92.31	38.46	61.54	11.71
	Hill	468	0.77	1.98	0.18	0.96	1.46	37.29	48.75	51.25	48.2	51.8	57.24
	Terai	240	1.03	1.56	0.13	2.58	1.32	46.29	19.25	80.75	46.48	53.52	98.49
	National Total	900	0.96	1.65	0.15	2.17	1.35	43.97	25.26	74.74	46.81	53.19	84.01
1	Taplejung	12	4.69	7.98	0	1.15	0	0	0	100	25	75	21.17
2	Panchthar	12	3.63	0.37	0.14	0	0	100	0	100	33.33	66.67	88.78
3	Ilam	12	1.78	0.15	0.02	0.02	0	100	0	100	25	75	51.69
4	Jhapa	12	0.81	1.6	0.13	0.92	3.74	31.46	25.7	74.3	40.65	59.35	52.08
5	Morang	12	0.83	0.26	0.02	2.71	0.28	43.75	9.07	90.93	51.03	48.97	75.75
6	Sunsari	12	0.63	0.39	0.02	2.9	0.44	70	0.88	99.12	46.44	53.56	75.11
7	Dhankuta	12	0.7	0.66	0.05	1.46	0	0	0	100	34.88	65.12	52.93
8	Teharthur	12	0.04	0	0	0.14	0	0	0	100	50	50	0.8
9	Sankhuwasabha	12		0									3.17
10	Bhojpur	12	0.43	1.45	1.05	4.02	0	100	1.47	98.53	35.29	64.71	21.87
11	Solukhumbu	12											
12	Okhaldhunga	12	4.2	17.03	0.61	0.15	33.33	33.33	0	100	33.33	66.67	32.13
13	Khotang	12	0		0	0							0
14	Udaypur	12	0.32	1.27	0.03	0.15	0	80	31.25	68.75	43.75	56.25	34.44
15	Saptari	12	2.1	1.19	0.25	14.58	0.97	25.93	1.77	98.23	55	45	94.86
16	Siraha	12	0.9	1.18	0.09	3.15	3.83	6.25	1.09	98.91	55.74	44.26	49.74
	Eastern	192	0.86	1.06	0.07	2.35	0.78	33.33	6.03	93.97	49.49	50.51	58.98
17	Dhanusha	12	0.9	2.25	0.24	13.67	0.68	13.64	10.52	89.48	45.08	54.92	51.46
18	Mahottari	12	2.33	0.66	0.24	14.86	0.24	32.26	29.72	70.28	47.05	52.95	102.1
19	Sarlahi	12	0.32	9.36	0.1	2.57	0.51	53.85	1.88	98.12	39.49	60.51	59.89
20	Sindhuli	12	0.26	1.07	0.03	0.8	1.63	33.33	0	100	39.84	60.16	14.04
21	Ramechhap	12	1.14	0	0.31	0							25.33
22	Dolkha	12		0									78
23	Sindhupalchowk	12	0.04	0	0.02	0.21	0	0	11.76	88.24	47.06	52.94	3.39
24	Kavre	12	0.47	0	0	0.09	0		0	100	25	75	25.21
25	Lalitpur	12	2.74	0	0	0							132.67
26	Bhaktapur	12											
27	Kathmandu	12		100			100	100	0	100	0	100	
28	Nuwakot	12		0			0		0	100	40.91	59.09	79.83
29	Rasuwa	12											
30	Dhading	12	6.45	0.48	0.68	2.3	8.33	40	33.33	66.67	16.67	83.33	189.83
31	Makawanpur	12	0.48	0.8	0.01	0.23	0	80	0	100	53.57	46.43	58.93
32	Rautahat	12	0.2	8.08	0.26	1.92	0	6.25	2.2	97.8	48.48	51.52	32.78
33	Bara	12	0.25	0.52	0.03	3.87	1.25	15.38	6.88	93.13	56.88	43.13	117.27
34	Parsa	12	0.04	0	0.11	0							44.17
35	Chitwan	12	0.97	0.47	0.05	0.01	11.11	41.67	0	100	7.41	92.59	31.44
	Central	228	0.64	1.61	0.14	3.44	0.61	30.81	11.65	88.35	45.18	54.82	54.97
36	Gorkha	12	0.36	1.96	0.14	0.35	0	100	0	100	16.67	83.33	29.83
37	Lamjung	12	3.18	0	0	0	0	0	0	100	50	50	108.5
38	Tanahu	12	1.4	0.88	0.19	0.12	0	0	0	100	0	100	34.93
39	Syangja	12	1.51	0.8	0.09	0.09	14.29	75	0	100	14.29	85.71	83.33
40	Kaski	12	0.65	2.18	0.14	0.12	9.46	61.22	1.35	98.65	21.62	78.38	374.83
41	Manang	12											
42	Mustang	12											
43	Myagdi	12	11.46	0	0	0							132.67
44	Parbat	12	0.47	3.45	0.16	0.08	50	100	0	100	100	0	38.67
45	Baglung	12	0.25	0	0	0							8.27
46	Gulmi	12	1.21	0	0.89	1.78	11.11	100	0	100	0	100	44.67
47	Palpa	12	1.06	2.26	0.36	0.58	2.7	56.25	2.7	97.3	37.84	62.16	88.67
48	Nawalparasi	12	0.87	1.94	0.13	1.77	1.42	84.07	2.84	97.16	43.6	56.4	108.67
49	Rupandehi	12	1.98	0.82	0	0							467.5
50	Kapilvastu	12	0.36	8.28	0.2	0.75	11.32	51.35	20.75	79.25	35.47	64.53	29.22
51	Arghakhanchi	12	1.24	2.16	0.24	0.12		2.63					64
	Western	192	1.18	1.53	0.11	0.57	7.21	60.34	10.1	89.9	35.42	64.58	154.61
52	Pyuthan	12	0		0.34	0		0					1
53	Rolpa	12		13.43									55.33
54	Rukum	12	1.17	0	0	0							0
55	Salyan	12	0.03	0	0	0.83	0	100	29.17	70.83	45.83	54.17	3
56	Dang	12	0.95	0.55	0.04	2.5	0.25	81.82	67.5	32.5	45.08	54.92	161.22
57	Banke	12	0.96	1.24	0.11	0.68	1.76	48.72	11.27	88.73	44.72	55.28	71.56
58	Bardiya	12	1.46	0.76	0.1	2.65	0.25	33.33	55.71	44.29	51.04	48.96	116.98
59	Surkhet	12	0.66	4.55	0.3	5.66	0.14	26.85	63.8	36.2	51.94	48.06	79.2
60	Dailekh	12	0.37	3.72	0.14	0.68	0	11.11	5.66	94.34	49.06	50.94	80.67
61	Jajarkot	12		0									121
62	Dolpa	12											
63	Jumla	12	0		0	0							0
64	Kalikot	12	1.79	0.71	0.13	0.25	0	100	0	100	33.33	66.67	47
65	Mugu	12											
66	Humla	12											
	Mid Western	180	1	1.38	0.12	2.64	0.55	34.29	59.13	40.87	49.44	50.56	96.72
67	Bajura	12	0		0	0							
68	Bajhang	12		16.67									0.67
69	Achham	12	1.09	4.07	0.25	0.05	35	56.14	0	100	15	85	166.67
70	Doti	12	0.2	3.45	0.07	0.06	15	90.91	0	100	25	75	81.83
71	Kailali	12	1.19	4.25	0.39	1.69	3.44	45.64	13.77	86.23	42.87	57.13	117.85
72	Kanchanpur	12	2.81	0.98	0.28	0	8.55	55.38	1.71	98.29	12.82	87.18	177.08
73	Dadeldhura	12	0.9	2.45	0.19	0.09	0	22.22	0	100	31.58	68.42	38.67
74	Baitadi	12	2.88	2.8	2.04	1.15	0	4.26	5.41	94.59	50.45	49.55	279.5
75	Darchula	12	0.1	15.38	0.16	0	50	100	0	100	0	100	2.17
	Far Western	108	1.5	2.5	0.35	0.8	4.09	46.17	11.92	88.08	40.6	59.4	130.14

Annual Leprosy (MB Cases) Statistics

F/Y 070/71 (2013/14)

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
NATIONAL	1559	1666	11	27	54	3317	1678	9	20	69	1776	1541	148	609	230	70	107	494
BHOJPUR	1	3				4	2				2	2		2	1		0	
DHANKUTA	3	0				3	3				3	0		0				2
ILAM	2	0			1	3	2	1			3	0		0				0
JHAPA	109	131	1	0	4	245	122	0	0	7	129	116	13	40	16	3	5	39
KHOTANG	1	3			1	5	1				1	4	0	2	1			0
MORANG	89	111	1	0	1	202	100	0	1	3	104	98	11	105	36	6	16	46
OKHALDHUNGA	0	0			0	0	0				0	0						
PANCHTHAR	2	1		0	1	4	3			0	3	1						
SANKHUWASABHA	1	3			0	4	1				1	3		1				1
SAPTARI	43	50	0	0	0	93	62			2	64	29	0	10	0	1	9	9
SIRAHA	50	49		0	0	99	54	0	0	0	54	45	10	14	6	1	1	11
SOLUKHUMBU	0	0			0	0	0				0	0						
SUNSARI	50	67	1	0	0	118	63	1	0	4	68	50	5	50	19	2	5	14
TAPEJUNG	0	0				0	0				0	0						0
TEHRATHUM	0	1				1	0				0	1	0					1
UDAYAPUR	15	13				28	16				16	12	1	5	0	0	0	2
EASTERN	366	432	3	0	8	809	429	2	1	16	448	361	40	229	79	13	36	125
BARA	71	52	0	0	4	127	57	0	2	1	60	67	1	0	0	1	1	6
BHAKTAPUR	4	2	1	0	0	7	1	0		6	7	0	0	0	0		0	0
CHITWAN	35	40	0	0	0	75	35		2	2	39	36	1	8	5	1	4	21
DHADING	3	3		0	1	7	5	0			5	2				1	0	1
DHANUSHA	81	78	1	3		163	88	1	5	4	98	65	10	46	24	5	15	28
DOLKHA	2	1		0		3	2				2	1	0				0	0
KATHMANDU	0	6				6	2				2	4		3	2		0	2
KAVRE	2	2				4	2			0	2	2		0			0	
LALITPUR	2	3				5	3				3	2		2	2		0	1
MAHOTTARI	68	75	3	3	0	149	82		1	1	84	65	14	65	31	6	22	12
MAKWANPUR	13	23				36	17				17	19					0	4
NUWAKOT	2	0				2	2	0			2	0					0	
PARSA	60	60		4	4	128	58	0	0	8	66	62	8			7	2	7
RAMECHHAP	1	2				3	1				1	2					0	
RASUWA	2	1			0	3	0			1	1	2		1			0	
RAUTAHAT	67	72		4	4	147	77	0		0	77	70	12			5	1	19
SARLAHI	95	75			2	172	92	1	0	2	95	77	33	59	22	8	9	34
SINDHULI	7	7	0			14	10			0	10	4				0	0	0
SINDHUPALCHOWK	2	6				8	3				3	5					1	
CENTRAL	517	508	5	14	15	1059	537	2	10	25	574	485	79	184	86	34	55	135
ARGHAKHANCHI	10	9		1	0	20	10				10	10		4	1	0	0	4
BAGLUNG	3	6	0			9	4				4	5	0	6	1		0	1
GORKHA	11	8	0	0	0	19	8			0	8	11	0	7	0		0	2
GULMI	12	5				17	7			0	7	10	1			0		1
KAPILVASTU	31	50	1	1		83	41				41	42	2	0	0	1		20
KASKI	22	37		0	2	61	27	4		3	34	27	3	37	10	2	1	11
LAMJUNG	6	10	0	0		16	6		0		6	10		2	2		0	5
MANANG	0	0				0	0				0	0						
MUSTANG	0	2				2	1				1	1	1			1		
MYAGDI	3	6	0	0		9	3				3	6		3	0	0		4
NAWALPARASI	63	83		0	8	154	79	0		9	88	66	3	10	4	1	1	39
PALPA	11	15			0	26	13			0	13	13	4	14	4	3	0	6
PARBAT	8	5				13	7		0		7	6	0	6	0			0
RUPANDEHI	86	97	0	2	5	190	87	0	1	2	90	100	3	28	11	1	1	13
SYANGJA	19	10				29	14				14	15	1	5	1	1	0	6
TANAHU	12	17			1	30	15	0		0	15	15		11	4	0		10
WESTERN	297	360	1	4	16	678	322	4	1	14	341	337	18	133	38	10	3	122
BANKE	56	64	0	3	3	126	59	0	1	1	61	65	3	0	0	6	1	24
BARDIYA	57	44	0	0	0	101	59	0	0	5	64	37	0	0	0	0	0	11
DAILEKH	21	5	1	0	0	27	20	0	0	0	20	7	0	1	0	0	0	3
DANG	32	24	0	0	1	57	29	1	0	1	31	26	0	0	0	0	0	11
DOLPA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
HUMLA	2	3	0	0	0	5	3	0	0	0	3	2	0	0	0	0	0	0
JAJARKOT	11	3	0	0	0	14	3	0	0	0	3	11	0	0	0	0	0	1
JUMLA	7	6	0	0	0	13	6	0	0	0	6	7	0	0	0	1	0	0
KALIKOT	2	2	0	0	0	4	2	0	0	0	2	2	1	0	0	1	0	0
MUGU	0	1	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0
PYUTHAN	4	5	1	0	0	10	6	0	0	0	6	4	0	0	0	0	0	1
ROLPA	6	8	0	2	1	17	7	0	0	0	7	10	0	0	0	0	1	0
RUKUM	15	20	0	0	0	35	9	0	0	0	9	26	0	0	0	0	1	9
SALYAN	7	16	0	0	1	24	7	0	2	0	9	15	1	0	0	0	0	9
SURKHET	8	19	0	1	0	28	9	0	0	0	9	19	0	7	0	0	1	2
MID-WEST	228	220	2	6	6	462	219	1	3	7	230	232	5	8	0	8	4	71
ACHHAM	25	18		0	1	44	22	0	0	1	23	21	1	20	15	0	5	5
BAITADI	6	7		0		13	6		0	0	6	7		2	2		1	3
BAJHANG	5	2			0	7	5			0	5	2		1	0	0	0	0
BAJURA	7	8		0	0	15	7		0	0	7	8		1	0			2
DADEL DHURA	6	1		0	0	7	5	0	1	0	6	1		1	0		0	0
DARCHULA	4	4	0		0	8	4			0	4	4		2	2		0	0
DOTI	5	3			0	8	4		1	0	5	3	0	2	0	0	0	1
KAILALI	68	71	0	3	0	142	76	0	3	2	81	61	4	11	6	3	3	21
KANCHANPUR	25	32	0	0	8	65	42	0	0	4	46	19	1	15	2	2	0	9
FAR-WEST	151	146	0	3	9	309	171	0	5	7	183	126	6	55	27	5	9	41

Annual Leprosy (PB Cases) Statistics

F/Y 070/71 (2013/14)

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
NATIONAL	669	1557	0	26	23	2275	1509	1	4	31	1545	730	164	442	10	134	2	649
BHOJPUR	0	1				1	0				0	1		1				
DHANKUTA	1	0				1	1				1	0						1
ILAM	0	0			0	0	0	0			0	0				0		0
JHAPA	48	98		0	3	149	92	0	0	3	95	54	5	19	1	8	0	48
KHOTANG	0	1			0	1	0				0	1	0			0	0	0
MORANG	43	113		1	1	158	101		0	0	101	57	9	99	3	7	0	58
OKHALDHUNGA	0					0					0	0						
PANCHTHAR	0	1			0	1	1				1	0						
SANKHUWASABHA	0	0				0	0				0	0		0				0
SAPTARI	15	43			1	59	38			1	39	20	1	4		4	1	11
SIRAHA	23	73				96	64		0	0	64	32	7	6	1	6		29
SOLUKHUMBU	0	0				0	0				0	0						
SUNSARI	22	53	0	0	0	75	52	0			54	21	10	32		4	0	19
TAPLEJUNG	0	0				0	0				0	0						0
TEHRATHUM	0	1				1	0				0	1						
UDAYAPUR	3	13				16	13				13	3		2		0	0	0
EASTERN	155	397	0	1	5	558	362	0	0	6	368	190	32	163	5	29	1	166
BARA	24	69	0	1	2	96	64		0	0	64	32	5	0		1	0	14
BHAKTAPUR	2	0				2	2				2	0		0			0	0
CHITWAN	15	27	0	2	2	46	32			0	32	14	6	10		3	0	17
DHADING	0	1				1	1	0			1	0	0			0	0	
DHANUSHA	66	179	0	4		249	170		2	4	176	73	27	50	3	31	0	108
DOLKHA	0	0				0	0				0	0					0	0
KATHMANDU	1	2				3	3				3	0		1			0	2
KAVRE	0	0				0	0				0	0		0			0	
LALITPUR	1	0				1	1				1	0		0	0		0	0
MAHOTTARI	50	146		5	4	205	133		0	5	138	67	36	98		20	0	68
MAKWANPUR	2	5				7	2				2	5					0	1
NUWAKOT	0	0				0	0	0			0	0					0	
PARSA	34	63		4	2	103	66	0	0	1	67	36	1			4	0	10
RAMECHHAP	0	0				0	0				0	0					0	
RASUWA	0	0				0					0	0					0	
RAUTAHAT	68	74		7	6	155	116	1		0	117	38	7			3	0	24
SARLAHI	56	139			0	195	139	0		2	141	54	27	98	0	18	0	45
SINDHULI	4	8				12	7			0	7	5				0	0	4
SINDHUPALCHOWK	0	0				0	0				0	0					0	
CENTRAL	323	713	0	23	16	1075	736	1	2	12	751	324	109	257	3	80	0	293
ARGHAKHANCHI	0	2		0		2	0				0	2		1				1
BAGLUNG	0	2				2	0				0	2	0	1		1	0	1
GORKHA	0	0				0	0				0	0		0				0
GULMI	0	0				0	0				0	0						0
KAPILVASTU	20	43				63	35				35	28	6	0		6		17
KASKI	5	3		0		8	5	0		3	8	0	0	3		0	0	3
LAMJUNG	0	1				1	0				0	1		0			0	1
MANANG	0	0				0	0				0	0						
MUSTANG	0	0				0	0				0	0						
MYAGDI	1	3				4	3				3	1		0				2
NAWALPARASI	24	51			0	75	55	0		3	58	17	3	2	0	2	0	29
PALPA	1	1				2	1				1	1	1	1		1	0	0
PARBAT	0	2				2	2				2	0	0					1
RUPANDEHI	24	68		0	0	92	62			2	64	28	2	2	2	2	0	9
SYANGJA	2	2				4	4				4	0		1				1
TANAHU	2	6				8	6				6	2		1				3
WESTERN	79	184	0	0	0	263	173	0	0	8	181	82	12	12	2	12	0	68
BANKE	21	67	0	0	0	88	53	0	0	0	53	35	0	0	0	0	0	38
BARDIYA	20	35	0	0	0	55	31	0	0	0	31	24	0	0	0	4	0	9
DAILEKH	1	4	0	0	0	5	4	0	0	0	4	1	0	0	0	0	0	2
DANG	6	4	0	0	0	10	9	0	0	0	9	1	0	0	0	0	0	1
DOLPA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
HUMLA	3	0	0	0	0	3	3	0	0	0	3	0	0	0	0	0	0	0
JAJARKOT	0	1	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	0
JUMLA	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
KALIKOT	0	0	0	0	0	0	0	0	0	0	0	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	0	1	1	0	0	0	0	0	0
ROLPA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
RUKUM	1	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	0
SALYAN	0	3	0	0	1	4	1	0	0	0	1	3	0	0	0	0	0	3
SURKHET	3	3	0	0	0	6	4	0	0	0	4	2	0	1	0	0	0	1
MID-WEST	56	118	0	0	1	175	108	0	0	0	108	67	1	1	0	4	0	55
ACHHAM	0	1				1	1		0		1	0	0	1				0
BAITADI	0	0				0	0				0	0						
BAJHANG	0	0				0	0				0	0		0				0
BAJURA	2	0		0		2	1		0	1	2	0		0	0			0
DADEL DHURA	1	1				2	2			0	2	0		1			0	1
DARCHULA	2	0	0		0	2	2			0	2	0		0	0		0	0
DOTI	0	0				0	0		0		0	0	0	0	0	0	0	0
KAILALI	37	107		1	0	145	95	0	2	3	100	45	8	4	0	7	1	50
KANCHANPUR	14	36	0	1	1	52	29	0	0	1	30	22	2	3	0	2		16
FAR-WEST	56	145	0	2	1	204	130	0	2	5	137	67	10	9	0	9	1	67

Annual Leprosy (MB+PB Cases) Statistics
FIY 070/71 (2013/14)

District	Patients at end previous year	New Patients	Release	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	New Case Detection Rate	Prevalence Rate	MB proportions among New	Child proportions among new	G II proportion among new	Defaulter proportions	Female Proportion
NATIONAL	2228	3223	11	53	77	5592	3187	10	24	1388	3321	2271	312	1051	240	204	109	1143	1.2	0.8	51.7	6.3	3.4	0.4	35.5
BHOJPUR	1	4	0	0	0	5	2	0	0	0	2	3	0	3	1	0	0	0	0.2	0.2	75.0	0.0	0.0	0.0	0.0
DHANKUTA	4	0	0	0	0	4	4	0	0	0	4	0	0	0	0	0	0	3	0.0	0.0				0.0	
ILAM	2	0	0	0	1	3	2	1	0	0	3	0	0	0	0	0	0	0	0.0	0.0				0.0	
JHAPA	157	229	1	0	7	394	214	0	0	10	224	170	18	59	17	11	5	87	2.7	2.0	57.2	4.8	2.2	0.0	38.0
KHOTANG	1	4	0	0	1	6	1	0	0	0	1	5	0	2	1	0	0	0	0.2	0.3	75.0	0.0	0.0	0.0	0.0
MORANG	132	224	1	1	2	360	201	0	1	3	205	155	20	204	39	13	16	104	2.3	1.6	49.6	5.8	7.1	0.3	46.4
OKHALDHUNGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0					
PANCHTHAR	2	2	0	0	1	5	4	0	0	0	4	1	0	0	0	0	0	0	0.1	0.1	50.0	0.0	0.0	0.0	0.0
SANKHUWASABHA	1	3	0	0	0	4	1	0	0	0	1	3	0	1	0	0	0	1	0.2	0.2	100.0	0.0	0.0	0.0	33.3
SAPTARI	58	93	0	0	1	152	100	0	0	3	103	49	1	14	0	5	10	20	1.4	0.7	53.8	5.4	10.8	0.0	21.5
SIRAHA	73	122	0	0	0	195	118	0	0	0	118	77	17	20	7	7	1	40	1.9	1.2	40.2	5.7	0.8	0.0	32.8
SOLUKHUMBU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0					
SUNSARI	72	120	1	0	0	193	115	1	0	6	122	71	15	82	19	6	5	33	1.5	0.9	55.8	5.0	4.2	0.0	27.5
TAPLEJUNG	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0					
TEHRATHUM	0	2	0	0	0	2	0	0	0	0	0	2	0	0	0	0	0	1	0.2	0.2	50.0	0.0	0.0	0.0	50.0
UDAYAPUR	18	26	0	0	0	44	29	0	0	0	29	15	1	7	0	0	0	2	0.8	0.5	50.0	0.0	0.0	0.0	7.7
EASTERN	521	829	3	1	13	1367	791	2	1	22	816	551	72	392	84	42	37	291	1.4	0.9	52.1	5.1	4.5	0.1	35.1
BARA	95	121	0	1	6	223	121	0	2	1	124	99	6	0	0	2	1	20	1.7	1.4	43.0	1.7	0.8	0.9	16.5
BHAKTAPUR	6	2	1	0	0	9	3	0	0	6	9	0	0	0	0	0	0	0	0.1	0.0	100.0	0.0	0.0	0.0	0.0
CHITWAN	50	67	0	2	2	121	67	0	2	2	71	50	7	18	5	4	4	38	1.1	0.8	59.7	6.0	6.0	1.7	56.7
DHADING	3	4	0	0	1	8	6	0	0	0	6	2	0	0	0	1	0	1	0.1	0.1	75.0	25.0	0.0	0.0	25.0
DHANUSHA	147	257	1	7	0	412	258	1	7	8	274	138	37	96	27	36	15	136	3.3	1.8	30.4	14.0	5.8	1.7	52.9
DOLKHA	2	1	0	0	0	3	2	0	0	0	2	1	0	0	0	0	0	0	0.1	0.1	100.0	0.0	0.0	0.0	0.0
KATHMANDU	1	8	0	0	0	9	5	0	0	0	5	4	0	4	2	0	0	4	0.0	0.0	75.0	0.0	0.0	0.0	50.0
KAVRE	2	2	0	0	0	4	2	0	0	0	2	2	0	0	0	0	0	0	0.1	0.1	100.0	0.0	0.0	0.0	0.0
LALITPUR	3	3	0	0	0	6	4	0	0	0	4	2	0	2	2	0	0	1	0.1	0.0	100.0	0.0	0.0	0.0	33.3
MAHOTTARI	118	221	3	8	4	354	215	0	1	6	222	132	50	163	31	26	22	80	3.4	2.0	33.9	11.8	10.0	0.3	36.2
MAKWANPUR	15	28	0	0	0	43	19	0	0	0	19	24	0	0	0	0	0	5	0.7	0.6	82.1	0.0	0.0	0.0	17.9
NUWAKOT	2	0	0	0	0	2	2	0	0	0	2	0	0	0	0	0	0	0	0.0	0.0				0.0	
PARSA	94	123	0	8	6	231	124	0	0	9	133	98	9	0	0	11	2	17	2.0	1.6	48.8	8.9	1.6	0.0	13.8
RAMECHHAP	1	2	0	0	0	3	1	0	0	0	1	2	0	0	0	0	0	0	0.1	0.1	100.0	0.0	0.0	0.0	0.0
RASUWA	2	1	0	0	0	3	0	0	0	1	1	2	0	1	0	0	0	0	0.2	0.5	100.0	0.0	0.0	0.0	0.0
RAUTAHAT	135	146	0	11	10	302	193	1	0	0	194	108	19	0	0	8	1	43	2.0	1.5	49.3	5.5	0.7	0.0	29.5
SARLAHI	151	214	0	0	2	367	231	1	0	4	236	131	60	157	22	26	9	79	2.6	1.6	35.0	12.1	4.2	0.0	36.9
SINDHULI	11	15	0	0	0	26	17	0	0	0	17	9	0	0	0	0	0	4	0.5	0.3	46.7	0.0	0.0	0.0	26.7
SINDHUPALCHOWK	2	6	0	0	0	8	3	0	0	0	3	5	0	0	0	0	1	0	0.2	0.2	100.0	0.0	16.7	0.0	0.0
CENTRAL	840	1221	5	37	31	2134	1273	3	12	1325	1325	809	188	441	89	114	55	428	1.2	0.8	41.6	9.3	4.5	0.6	35.1
ARGHAKHANCHI	10	11	0	1	0	22	10	0	0	0	10	12	0	5	1	0	0	5	0.6	0.6	81.8	0.0	0.0	0.0	45.5
BAGLUNG	3	8	0	0	0	11	4	0	0	0	4	7	0	7	1	1	0	2	0.3	0.3	75.0	12.5	0.0	0.0	25.0
GORKHA	11	8	0	0	0	19	8	0	0	0	8	11	0	7	0	0	0	2	0.3	0.4	100.0	0.0	0.0	0.0	25.0
GULMI	12	5	0	0	0	17	7	0	0	0	7	10	1	0	0	0	0	1	0.2	0.4	100.0	0.0	0.0	0.0	20.0
KAPILVASTU	51	93	1	1	0	146	76	0	0	0	76	70	8	0	0	7	0	37	1.6	1.2	53.8	7.5	0.0	0.0	39.8
KASKI	27	40	0	0	2	69	32	4	0	6	42	27	3	40	10	2	1	14	0.8	0.5	92.5	5.0	2.5	0.0	35.0
LAMJUNG	6	11	0	0	0	17	6	0	0	0	6	11	0	2	2	0	0	6	0.7	0.7	90.9	0.0	0.0	0.0	54.5
MANANG	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MUSTANG	0	2	0	0	0	2	1	0	0	0	1	1	1	0	0	1	0	0	1.8	0.9	0.0	0.0	0.0	0.0	0.0
MYAGDI	4	9	0	0	0	13	6	0	0	0	6	7	0	3	0	0	0	6	0.8	0.6	66.7	0.0	0.0	0.0	66.7
NAWALPARASI	87	134	0	0	8	229	134	0	0	12	146	83	6	12	4	3	1	68	2.0	1.3	61.9	2.2	0.7	0.0	50.7
PALPA	12	16	0	0	0	28	14	0	0	0	14	14	5	15	4	4	0	6	0.6	0.5	93.8	25.0	0.0	0.0	37.5
PARBAT	8	7	0	0	0	15	9	0	0	0	9	6	0	6	0	0	0	1	0.5	0.4	71.4	0.0	0.0	0.0	14.3
RUPANDEHI	110	165	0	2	5	282	149	0	1	4	154	128	5	30	13	3	1	22	1.8	1.4	58.8	1.8	0.6	0.4	13.3
SYANGJA	21	12	0	0	0	33	18	0	0	0	18	15	1	6	1	1	0	7	0.4	0.5	83.3	8.3	0.0	0.0	58.3
TANAHU	14	23	0	0	1	38	21	0	0	0	21	17	0	12	4	0	0	13	0.7	0.5	73.9	0.0	0.0	0.0	56.5
WESTERN	376	544	1	4	16	941	495	4	1	22	522	419	30	145	40	22	3	190	1.1	0.8	66.2	4.0	0.6	0.1	34.9
BANKE	77	131	0	3	3	214	112	0	1	1	114	100	3	0	0	6	1	62	2.5	1.9	48.9	4.6	0.8	0.5	47.3
BARDIYA	77	79	0	0	0	156	90	0	0	5	95	61	0	0	0	4	0	20	1.8	1.4	55.7	5.1	0.0	0.0	25.3
DAILEKH	22	9	1	0	0	32	24	0	0	0	24	8	0	1	0	0	0	5	0.3	0.3	55.6	0.0	0.0	0.0	55.6
DANG	38	28	0	0	1	67	38	1	0	1	40	27	0	0	0	0	0	12	0.5	0.5	85.7	0.0	0.0	0.0	42.9
DOLPA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0					
HUMLA	5	3	0	0	0	8	6	0	0	0	6	2	0	0	0	0	0	0	0.6	0.4	100.0	0.0	0.0	0.0	0.0
JAJARHOT	11	4	0	0	0	15	4	0	0	0	4	11	0	0	0	0	0	1	0.2	0.6	75.0	0.0	0.0	0.0	25.0
JUMLA	7	6	0	0	0	13	6	0	0	0	6	7	1	0	0	1	0	1	0.5	0.6	100.0	16.7	0.0	0.0	16.7
KALIKOT	2	2	0	0	0	4	2	0	0	0	2														

Tuberculosis: Case Finding FY 2070/71 (Sheet 1 of 2)

S.N	Districts	Estimated Population	Smear Positive								Smear Negative				T in		Other		Total		Treatment regimen			
			New		Relapse		Failure		RAD		SNEG		EP											
			F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	I	II	0-9yrs	Total
1	Bhojpur	176,227	8	28	0	1	1	0	0	1	2	9	6	17	7	14	0	3	17	59	87	4	6	97
2	Dhankuta	160,439	10	43	2	3	0	0	0	0	2	4	17	24	0	0	0	0	31	74	93	5	7	105
3	Ilam	289,531	33	65	1	11	1	1	0	1	12	26	26	27	6	5	1	5	74	136	198	16	7	221
4	Jhapa	836,899	191	448	14	45	1	4	0	4	119	262	117	160	13	23	18	32	460	955	1346	94	11	1451
5	Khotang	199,242	6	20	0	0	0	0	0	1	5	8	8	13	2	6	0	1	19	43	65	2	3	70
6	Morang	993,610	221	432	16	56	4	6	5	12	77	144	123	171	13	17	21	32	467	853	1191	131	28	1350
7	O'dhunga	144,555	14	23	0	6	0	1	0	0	1	9	5	18	0	5	0	1	20	58	74	9	0	83
8	Panchthar	187,917	24	37	4	2	0	0	0	1	8	14	13	13	2	1	0	1	49	68	112	7	1	120
9	S'sava	158,191	12	31	0	5	0	0	0	0	8	10	11	12	0	4	2	2	33	60	86	9	2	97
10	Saptari	657,055	74	191	2	9	0	1	0	4	86	167	28	40	8	2	4	6	194	418	549	22	51	622
11	Siraha	654,291	128	267	5	30	4	5	0	6	59	97	33	46	6	2	1	5	230	456	631	52	11	694
12	Solukhumbu	104,570	13	20	0	3	0	0	0	0	1	3	5	12	5	3	0	0	19	38	58	7	0	65
13	Sunsari	792,728	167	355	13	45	4	6	1	10	53	133	142	153	14	26	18	52	398	754	1041	114	37	1192
14	Taplejung	124,630	8	24	4	6	0	2	0	0	3	11	10	9	4	5	1	4	26	56	75	16	0	91
15	Tehrathum	98,015	5	12	0	0	0	0	0	0	0	6	5	6	0	1	0	0	10	24	35	0	0	35
16	Udayapur	323,476	57	129	5	12	0	0	1	0	16	27	25	32	4	2	0	4	104	204	291	20	3	314
EDR Total		5,901,376	971	2125	66	234	15	26	7	40	452	930	574	753	84	116	66	148	2151	4256	5932	508	167	6607
17	Bara	723,097	185	316	16	49	3	2	3	9	126	213	90	128	7	5	4	10	427	727	1026	91	49	1166
18	Bhaktapur	323,860	73	126	13	37	1	0	0	2	43	64	127	116	15	15	22	16	279	361	560	92	18	670
19	Chitawan	600,324	168	323	24	98	3	5	1	8	104	152	100	134	17	18	12	20	412	740	986	165	36	1187
20	Dhading	333,937	37	96	2	21	1	0	0	2	15	40	24	51	4	11	2	5	81	215	264	32	13	309
21	Dhanusha	777,416	168	307	13	31	2	2	3	4	102	168	60	92	7	8	5	15	353	619	846	60	81	987
22	Dolakha	186,415	11	23	2	8	0	0	0	0	3	18	11	14	4	10	1	3	28	66	90	14	4	108
23	Kathmandu	1,931,225	423	678	46	151	8	10	6	20	201	311	743	770	82	151	128	147	1555	2087	3278	437	160	3875
24	Kavre	374,104	54	90	7	16	0	1	1	0	14	44	57	63	7	13	6	9	139	223	330	36	16	382
25	Lalitpur	499,879	96	178	11	32	2	2	0	2	48	74	181	156	21	23	24	41	362	485	759	95	37	891
26	Mahottari	645,690	166	355	18	35	3	6	0	8	161	277	37	64	8	2	3	10	388	755	1018	73	62	1153
27	Makwanpur	422,626	111	283	17	57	2	4	6	16	62	92	40	66	2	6	4	6	242	524	636	113	25	774
28	Nuwakot	273,123	19	73	12	19	0	0	0	0	7	26	24	24	0	1	3	2	65	144	172	35	3	210
29	Parsa	627,073	148	272	12	51	3	0	5	8	137	218	79	108	7	3	2	3	386	660	887	85	84	1056
30	Ramechhap	198,961	15	53	1	7	0	0	0	2	5	22	23	27	2	6	0	2	44	113	147	13	5	165
31	Rasuwa	41,521	9	11	2	2	0	0	0	0	0	3	4	5	1	1	0	0	15	21	32	5	1	38
32	Rautahat	729,176	153	287	10	30	0	7	1	5	183	272	63	63	10	8	2	6	412	670	1025	55	20	1100
33	Sarlahi	808,320	186	404	24	69	2	8	0	4	168	275	66	91	8	13	21	47	467	898	1187	142	57	1386
34	Sindhuli	298,213	51	122	4	29	1	1	0	1	20	46	15	39	2	4	4	2	95	240	291	43	7	341
35	Sindhupalchow	281,585	24	94	3	17	1	3	0	0	13	24	35	59	7	8	3	7	79	204	251	35	12	298
CDR Total		10,076,545	2097	4091	237	759	32	51	26	91	1412	2339	1779	2070	211	306	246	351	5829	9752	13785	1621	690	16096
36	Arghakhanchi	194,651	20	72	3	22	0	1	0	0	13	44	45	53	3	2	4	11	85	203	252	33	8	293
37	Baglung	266,900	23	42	2	6	0	0	0	2	9	17	19	34	3	3	0	1	53	102	144	10	7	161
38	Gorkha	264,854	34	103	5	12	2	3	0	1	14	23	34	42	4	13	0	1	89	185	256	25	10	291
39	Gulmi	275,084	34	94	4	22	1	1	0	0	18	47	51	77	6	6	2	6	110	247	321	32	16	369
40	Kapilvastu	595,488	136	342	13	21	3	9	1	2	52	64	50	66	1	0	0	1	255	505	699	50	12	761
41	Kaski	517,181	75	156	7	20	2	0	1	0	16	29	72	77	5	11	11	11	184	293	436	48	9	493
42	Lamjung	164,784	17	44	0	15	0	0	0	0	6	11	12	22	1	7	0	1	35	93	114	16	6	136
43	Manang	5,284	0	3	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	3	4	0	0	4
44	Mustang	10,908	2	0	0	0	0	0	0	0	2	5	1	3	1	2	0	0	5	8	15	1	0	16
45	Myagdi	115,997	12	19	1	1	0	0	0	0	2	5	12	9	1	2	0	2	27	36	64	2	0	66
46	Nawalparasi	661,107	155	361	23	61	1	4	0	7	57	117	85	137	4	7	7	13	328	700	911	109	17	1037
47	Palpa	257,537	47	101	6	21	0	1	0	1	26	45	65	84	5	5	6	9	150	262	363	41	18	422
48	Parbat	143,457	11	25	3	3	0	0	0	0	10	10	4	19	0	1	0	1	28	58	77	9	1	87
49	Rupandehi	925,084	189	436	31	64	2	6	1	9	164	282	146	149	7	13	8	28	541	974	1387	132	11	1530
50	Syangja	281,726	48	91	7	23	1	1	0	1	17	24	23	38	2	2	2	3	98	181	230	36	17	283
51	Tanahun	324,254	52	105	7	30	0	2	0	0	19	22	30	41	5	8	1	17	109	217	282	49	8	339
WDR Total		5,004,296	855	1994	112	321	12	28	3	23	425	745	650	851	48	82	41	105	2098	4067	5555	593	140	6288
52	Banka	516,289	175	284	14	58	7	12	2	5	93	121	65	92	4	23	23	30						

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S.N	Districts	NSPP age group distribution																Total		CNR of New and Relapse PBC Cases	CNR of all forms of TB	Case Finding Rate (New PBC)
		0-4		5-14		15-24		25-34		35-44		45-54		55-64		65+						
		F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M			
1	Bhojpur	0	0	1	1	0	5	2	4	1	2	2	6	2	4	0	6	8	28	21	43	39%
2	Dhankuta	0	0	0	0	1	6	1	11	3	9	3	6	2	7	0	4	10	43	36	65	62%
3	Illam	0	0	1	0	7	14	4	15	12	5	5	12	4	8	0	11	33	65	38	73	64%
4	Jhapa	0	1	10	8	31	86	41	96	31	79	29	61	30	61	19	56	191	448	83	169	74%
5	Khotang	0	0	0	0	4	3	0	7	0	2	2	2	0	4	0	2	6	20	13	31	25%
6	Morang	0	0	3	4	46	73	50	67	35	75	38	69	32	93	17	51	221	432	73	133	64%
7	O'dhunga	0	0	0	0	2	5	4	6	4	3	2	3	0	5	2	1	14	23	30	54	48%
8	Panchthar	0	0	1	0	5	9	6	4	4	6	3	12	1	2	4	4	24	37	36	62	61%
9	S'sava	0	0	2	1	7	6	2	3	1	8	0	5	0	6	0	2	12	31	30	59	82%
10	Saptari	0	0	1	4	13	22	16	27	19	37	5	23	9	36	11	42	74	191	42	93	39%
11	Siraha	0	0	1	2	12	37	25	32	23	31	20	45	32	58	15	62	128	267	66	105	59%
12	Solukhumbu	0	0	2	1	4	4	3	4	1	3	2	3	0	3	1	2	13	20	34	55	96%
13	Sunsari	0	0	5	0	49	58	33	59	24	65	29	72	17	51	10	50	167	355	73	145	64%
14	Taplejung	0	0	0	1	2	2	3	5	1	12	1	3	1	1	0	0	8	24	34	66	78%
15	Tehrathum	0	0	0	5	0	5	0	1	2	1	2	0	1	0	0	0	5	12	17	35	33%
16	Udayapur	0	0	2	1	10	13	13	34	19	37	9	27	3	13	1	4	57	129	63	95	108%
EDR Total		0	1	29	28	193	348	203	375	180	375	152	349	134	352	80	297	971	2125	58	109	74%
17	Bara	0	0	5	6	28	38	30	35	29	46	26	59	45	85	22	47	185	316	78	160	67%
18	Bhaktapur	0	0	5	9	37	31	12	28	7	20	5	13	3	17	4	8	73	126	77	198	40%
19	Chitawan	0	0	8	5	51	69	33	57	16	44	23	52	20	50	17	46	168	323	102	192	79%
20	Dhading	0	0	0	1	17	18	8	13	7	18	5	27	0	12	0	7	37	96	47	89	75%
21	Dhanusha	0	0	6	2	20	44	26	25	34	51	33	62	30	75	19	48	168	307	67	125	59%
22	Dolakha	0	0	0	0	3	5	4	7	1	3	1	1	1	5	1	2	11	23	24	50	55%
23	Kathmandu	1	1	25	15	202	213	88	161	40	97	20	80	25	64	22	47	423	678	67	189	37%
24	Kavre	1	0	4	1	10	15	12	15	7	18	14	9	4	18	2	14	54	90	45	97	73%
25	Lalitpur	0	0	3	2	46	47	18	30	10	28	6	31	6	22	7	18	96	178	63	169	36%
26	Mahottari	0	0	4	5	21	60	35	46	32	48	25	58	29	73	20	65	166	355	89	177	78%
27	Makwanpur	0	0	2	2	37	49	14	47	23	49	17	56	11	41	7	39	111	283	111	181	176%
28	Nuwakot	0	0	0	0	3	17	0	9	3	10	8	13	3	15	2	9	19	73	45	77	64%
29	Parsa	2	1	13	6	21	34	14	32	20	38	31	52	28	76	18	34	147	273	77	167	65%
30	Ramechhap	0	0	1	1	4	10	0	8	5	9	1	12	1	5	3	8	15	53	38	79	64%
31	Rasuwa	0	0	0	0	3	4	2	2	3	3	0	1	1	0	0	1	9	11	58	87	142%
32	Rautahat	0	0	1	5	21	37	33	39	27	42	24	41	28	69	19	54	153	287	66	148	59%
33	Sarlahi	0	0	2	9	36	72	30	39	34	52	30	70	26	85	28	77	186	404	84	169	71%
34	Sindhuli	1	0	5	4	8	16	10	23	13	18	4	25	4	20	6	16	51	122	69	112	109%
35	Sindhupalchowk	0	0	0	0	5	15	3	22	4	16	4	14	6	15	2	12	24	94	49	101	127%
CDR Total		5	2	84	73	573	794	372	638	315	610	277	676	271	747	199	552	2096	4092	71	155	87%
36	Arghakhanchi	0	0	0	0	7	11	1	7	4	9	4	17	3	11	1	17	20	72	60	148	89%
37	Baglung	0	1	1	0	3	7	0	2	7	3	0	11	6	9	6	9	23	42	27	58	46%
38	Gorkha	0	0	1	1	5	19	5	17	6	12	6	20	6	23	5	11	34	103	58	103	98%
39	Gulmi	0	0	0	1	5	14	7	14	3	14	4	16	7	17	8	18	34	94	56	130	88%
40	Kapilvastu	0	0	6	6	31	58	30	66	15	52	21	57	21	50	12	53	136	342	86	128	78%
41	Kaski	0	0	0	1	35	28	15	41	10	26	7	26	1	13	7	21	75	156	50	92	84%
42	Lamjung	0	0	0	0	6	10	5	5	3	10	2	6	0	5	1	8	17	44	46	78	70%
43	Manang	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	0	0	3	57	76	172%
44	Mustang	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	2	0	18	119	56%	
45	Myagdi	0	0	0	0	3	1	4	9	1	4	1	1	1	3	2	1	12	19	28	54	50%
46	Nawalparasi	0	0	4	2	31	62	30	46	12	60	30	57	26	57	22	77	155	361	91	155	76%
47	Palpa	0	0	3	2	14	9	7	12	5	8	9	34	6	21	3	15	47	101	68	160	108%
48	Parbat	0	0	1	4	3	4	1	0	2	3	3	4	0	6	1	4	11	25	29	60	47%
49	Rupandehi	0	0	4	4	57	91	32	65	23	51	28	79	27	86	18	60	189	436	78	164	66%
50	Syangja	0	0	1	0	12	8	10	18	9	17	5	19	7	16	4	13	48	91	60	99	93%
51	Tanahun	0	0	0	0	21	19	6	11	6	13	6	18	4	21	9	23	52	105	60	101	91%
WDR Total		0	1	21	21	233	341	153	314	108	284	126	365	115	338	99	330	855	1994	66	123	81%
52	Banke	0	0	7	10	49	64	38	44	21	50	27	38	20	41	13	37	175	284	103	190	86%
53	Bardiya	0	0	4	0	28	53	10	48	17	27	18	34	23	49	8	25	108	236	89	161	77%
54	Dailekh	0	0	0	2	3	8	4	14	3	13	2	9	3	8	0	2	15	56	30	84	49%
55	Dang	0	0	2	1	31	47	17	44	20	40	27	44	25	57	30	47	152	280	91	206	73%
56	Dolpa	0	0	2	0	1	1	0	0	1	0	0	0	1	1	0	1	5	3	24	68	62%
57	Humla	0	0	1	1	1	1	0	1	0	0	0	0	1	0	0	0	3	3	13	47	33%
58	Jajartkot	0	0	1	0	4	5	6	6	2	5	0	5	1	12	0	6	14	39	32	79	55%
59	Jumla	0	0	2	0	1	6	3	2	3	3	3	3	1	1	0	0	13	15	29	82	69%
60	Kalikot	0	0	0	2	5	5	1	4	0	1	0	4	2	2							

Tuberculosis: Treatment outcome FY 2069/70 (Sheet 1 of 2)

N S	Districts	New Smear Positive																Relapse											
		Registere d		Cured		Complete		Failure		Died		Defaulted		Transfer Out		No result		Total		Registere d		Cured		Complete		Failure		Died	
		F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M
1	Bhojpur	4	3	4	3	0	0	0	0	0	0	0	0	0	0	0	0	4	3	0	0	0	0	0	0	0	0	0	0
2	Dhankuta	5	12	5	10	0	0	0	0	0	2	0	0	0	0	0	0	5	12	1	0	1	0	0	0	0	0	0	0
3	Ilam	8	15	6	14	0	1	1	0	1	0	0	0	0	0	0	0	8	15	0	1	0	1	0	0	0	0	0	0
4	Jhapa	63	150	59	137	1	1	0	0	0	4	0	5	1	1	2	2	63	150	6	19	5	14	0	2	0	0	1	1
5	Khotang	3	10	3	10	0	0	0	0	0	0	0	0	0	0	0	0	3	10	1	2	1	2	0	0	0	0	0	0
6	Morang	89	163	77	143	0	2	0	1	3	6	6	6	3	5	0	0	89	163	5	21	4	15	1	0	0	1	0	2
7	O'dhunga	2	5	2	4	0	0	0	0	1	0	0	0	0	0	0	0	2	5	1	3	1	1	0	0	0	0	0	1
8	Panchthar	6	21	6	20	0	0	0	0	0	1	0	0	0	0	0	0	6	21	0	1	2	1	1	0	0	0	0	0
9	S'sava	3	5	3	5	0	0	0	0	0	0	0	0	0	0	0	0	3	5	0	0	0	0	0	0	0	0	0	0
10	Saptari	26	71	25	69	0	0	0	0	1	2	0	0	0	0	0	0	26	71	4	3	4	3	0	0	0	0	0	0
11	Siraha	54	120	53	104	0	0	0	4	1	7	0	4	0	1	0	0	54	120	2	12	2	11	0	0	0	0	0	1
12	Solukhumbu	5	6	5	6	0	0	0	0	0	0	0	0	0	0	0	0	5	6	1	0	1	0	0	0	0	0	0	0
13	Sunsari	60	115	50	86	2	5	0	1	4	10	3	10	1	3	0	0	60	115	2	9	1	8	0	0	0	1	1	0
14	Taplejung	4	2	4	2	0	0	0	0	0	0	0	0	0	0	0	0	4	2	0	1	0	1	0	0	0	0	0	0
15	Tehrathum	3	7	3	6	0	0	0	0	0	0	0	0	0	1	0	0	3	7	0	0	0	0	0	0	0	0	0	0
16	Udayapur	16	38	16	35	0	0	0	0	0	2	0	1	0	0	0	0	16	38	4	5	4	5	0	0	0	0	0	0
EDR Total		351	743	321	654	3	9	1	7	10	34	9	26	5	11	2	2	345	722	28	78	25	62	1	2	0	2	2	5
17	Bara	73	140	56	99	8	18	0	2	5	7	0	6	0	1	4	7	73	140	12	25	11	16	1	5	0	0	0	1
18	Bhaktapur	20	45	20	40	0	4	0	1	0	0	0	0	0	0	0	0	20	45	4	15	3	13	0	0	1	1	0	0
19	Chitawan	55	116	51	107	0	1	1	0	2	1	1	4	0	3	0	0	55	116	10	31	8	28	0	2	1	1	1	0
20	Dhading	32	41	29	38	2	1	0	0	0	1	0	1	1	0	0	0	32	41	3	8	2	7	1	0	0	0	0	1
21	Dhanusha	55	93	40	69	6	8	0	2	1	7	7	6	1	1	0	0	55	93	2	9	1	8	0	0	0	0	1	0
22	Dolakha	3	9	3	7	0	0	0	0	0	1	0	0	0	1	0	0	3	9	1	2	1	1	0	0	0	0	0	0
23	Kathmandu	154	260	125	200	3	4	3	3	0	7	5	12	18	33	0	1	154	260	16	49	15	38	0	3	0	3	0	2
24	Kavre	8	36	5	34	1	1	0	0	1	0	0	0	1	1	0	0	8	36	1	5	0	5	0	0	0	0	1	0
25	Lalitpur	32	43	31	39	0	0	1	1	0	2	0	0	0	0	0	1	32	43	5	10	5	8	0	0	0	1	0	1
26	Mahottari	52	105	46	90	5	3	0	1	0	2	1	9	0	0	0	0	52	105	2	11	2	11	0	0	0	0	0	0
27	Makwanpur	43	101	38	92	0	4	0	1	2	2	1	0	2	0	0	2	43	101	6	16	6	11	0	0	0	1	0	2
28	Nuwakot	11	28	9	24	2	3	0	0	0	0	0	0	1	0	0	0	11	28	0	7	0	6	0	1	0	0	0	0
29	Parsa	67	110	57	99	2	6	0	1	3	2	4	2	1	0	0	0	67	110	4	26	4	19	0	2	0	2	0	3
30	Ramechhap	3	20	3	20	0	0	0	0	0	0	0	0	0	0	0	0	3	20	0	1	0	1	0	0	0	0	0	0
31	Rasuwa	2	6	2	6	0	0	0	0	0	0	0	0	0	0	0	0	2	6	0	1	0	1	0	0	0	0	0	0
32	Rautahat	58	129	53	113	2	3	0	1	3	7	0	5	0	0	0	0	58	129	2	10	2	8	0	0	0	0	0	1
33	Sarlahi	68	138	62	119	1	9	1	0	2	6	0	3	2	1	0	0	68	138	5	29	4	23	0	1	0	0	0	3
34	Sindhuli	5	35	5	32	0	0	0	0	0	0	0	2	0	0	0	1	5	35	3	5	2	5	0	0	1	0	0	0
35	Sindhupalchowk	13	31	12	26	0	3	0	0	1	1	0	1	0	0	0	0	13	31	3	6	2	4	1	0	0	1	0	0
CDR Total		754	1486	647	1254	32	68	6	13	20	46	19	52	26	41	4	12	746	1450	79	266	68	213	3	14	3	10	3	14
36	Arghakhanchi	11	25	11	23	0	0	0	0	0	1	0	1	0	0	0	0	11	25	0	4	0	3	0	0	0	0	0	1
37	Baglung	5	15	4	14	0	0	0	0	1	1	0	0	0	0	0	0	5	15	1	6	1	5	0	0	0	0	0	1
38	Gorkha	15	29	12	25	1	1	0	0	1	3	0	0	1	0	0	0	15	29	1	5	1	4	0	1	0	0	0	0
39	Gulmi	10	32	10	30	0	0	0	1	0	1	0	0	0	0	0	0	10	32	1	9	1	7	0	0	0	0	0	1
40	Kapilvastu	33	101	27	85	0	0	0	1	4	7	2	6	0	0	0	2	33	101	4	3	3	2	0	0	0	1	1	0
41	Kaski	24	49	22	44	0	0	1	0	1	3	0	1	0	1	0	0	24	49	3	6	2	6	0	0	1	0	0	0
42	Lamjung	7	20	6	18	0	0	0	0	1	0	0	0	0	2	0	0	7	20	0	1	0	1	0	0	0	0	0	0
43	Manang	1	2	1	2	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0
44	Mustang	0	3	0	2	0	0	0	0	0	0	0	0	1	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0
45	Myagdi	4	3	4	3	0	0	0	0	0	0	0	0	0	0	0	0	4	3	0	2	0	2	0	0	0	0	0	0
46	Nawalparasi	59	140	54	125	0	0	0	0	1	8	2	6	2	1	0	0	59	140	7	34	5	34	0	0	0	0	2	0
47	Palpa	14	38	13	37	0	0	0	0	1	1	0	0	0	0	0	0	14	38	3	12	3	10	0	0	0	1	0	0
48	Parbat	3	11	1	11	0	0	0	0	0	0	0	1	0	1	0	0	3	11	3	2	2	2	0	0	0	0	0	0
49	Rupandehi	67	156	64	135	0	4	0	1	1	6	1	7	1	3	0	0	67	156	5	35	5	26	0	0	0	1	0	3
50	Syangja	12	31	11	29	0	0	0	1	1	1	0	1	0	0	0	0	12	31	2	6	2	6	0	0	0	0	0	0
51	Tanahun	21	48	18	37	0	2	1	3	1	2	0	1	1	3	0													

Tuberculosis: Treatment outcome FY 2069/70 (Sheet 2 of 2)

S.N.	Districts	Relapse								Bacteriologically Confirmed Total Registered	Bacteriologically Confirmed Cure+Complete	New and Relapse Registered	Number of Treatment Success Cases (New and Relapse)	Treatment Success Rate (New and Relapse)
		Defaulted		Transfer Out		No result		Total						
		F	M	F	M	F	M	F	M					
1	Bhojpur	0	0	0	0	0	0	0	0	7	7	7	7	100%
2	Dhankuta	0	0	0	0	0	0	1	0	18	16	18	16	89%
3	Ilam	0	0	0	0	0	0	0	1	24	22	24	22	92%
4	Jhapa	0	0	0	2	0	0	6	19	238	219	238	219	92%
5	Khotang	0	0	0	0	0	0	1	2	16	16	16	16	100%
6	Morang	0	1	0	2	0	0	5	21	278	242	278	242	87%
7	O'dhunga	0	0	0	1	0	0	1	3	11	8	11	8	73%
8	Panchthar	0	1	0	0	0	0	1	2	30	28	30	28	93%
9	S'sava	0	0	0	0	0	0	0	0	8	8	8	8	100%
10	Saptari	0	0	0	0	0	0	4	3	104	101	104	101	97%
11	Siraha	0	0	0	0	0	0	2	12	188	170	188	170	90%
12	Solukhumbu	0	0	0	0	0	0	1	0	12	12	12	12	100%
13	Sunsari	0	0	0	0	0	0	2	9	186	152	186	152	82%
14	Taplejung	0	0	0	0	0	0	0	1	7	7	7	7	100%
15	Tehrathum	0	0	0	0	0	0	0	0	10	9	10	9	90%
16	Udayapur	0	0	0	0	0	0	4	5	63	60	63	60	95%
EDR Total		0	2	0	5	0	0	28	78	1200	1077	1200	1077	90%
17	Bara	0	3	0	0	0	0	12	25	250	214	250	214	86%
18	Bhaktapur	0	0	0	0	0	1	4	15	84	80	84	80	95%
19	Chitawan	0	0	0	0	0	0	10	31	212	197	212	197	93%
20	Dhading	0	0	0	0	0	0	3	8	84	80	84	80	95%
21	Dhanusha	0	1	0	0	0	0	2	9	159	132	159	132	83%
22	Dolakha	0	0	0	1	0	0	1	2	15	12	15	12	80%
23	Kathmandu	0	1	1	2	0	0	16	49	479	388	479	388	81%
24	Kavre	0	0	0	0	0	0	1	5	50	46	50	46	92%
25	Lalitpur	0	0	0	0	0	0	5	10	90	83	90	83	92%
26	Mahottari	0	0	0	0	0	0	2	11	170	157	170	157	92%
27	Makwanpur	0	2	0	0	0	0	6	16	166	151	166	151	91%
28	Nuwakot	0	0	0	0	0	0	0	7	46	45	46	45	98%
29	Parsa	0	0	0	0	0	0	4	26	207	189	207	189	91%
30	Ramechhap	0	0	0	0	0	0	0	1	24	24	24	24	100%
31	Rasuwa	0	0	0	0	0	0	0	1	9	9	9	9	100%
32	Rautahat	0	1	0	0	0	0	2	10	199	181	199	181	91%
33	Sarlahi	0	1	1	1	0	0	5	29	240	219	240	219	91%
34	Sindhuli	0	0	0	0	0	0	3	5	48	44	48	44	92%
35	Sindhupalchowk	0	0	0	1	0	0	3	6	53	48	53	48	91%
CDR Total		0	9	2	5	0	1	79	266	2585	2299	2585	2299	89%
36	Arghakhanchi	0	0	0	0	0	0	0	4	40	37	40	37	93%
37	Baglung	0	0	0	0	0	0	1	6	27	24	27	24	89%
38	Gorkha	0	0	0	0	0	0	1	5	50	45	50	45	90%
39	Gulmi	0	1	0	0	0	0	1	9	52	48	52	48	92%
40	Kapilvastu	0	0	0	0	0	0	4	3	141	117	141	117	83%
41	Kaski	0	0	0	0	0	0	3	6	82	74	82	74	90%
42	Lamjung	0	0	0	0	0	0	0	1	28	25	28	25	89%
43	Manang	0	0	0	0	0	0	0	0	3	3	3	3	100%
44	Mustang	0	0	0	0	0	0	0	0	3	2	3	2	67%
45	Myagdi	0	0	0	0	0	0	0	2	9	9	9	9	100%
46	Nawalparasi	0	0	0	0	0	0	7	34	240	218	240	218	91%
47	Palpa	0	0	0	1	0	0	3	12	67	63	67	63	94%
48	Parbat	0	0	1	0	0	0	3	2	19	16	19	16	84%
49	Rupandehi	0	3	0	0	0	2	5	35	263	234	263	234	89%
50	Syangja	0	0	0	0	0	0	2	6	51	48	51	48	94%
51	Tanahun	0	0	0	0	0	0	3	6	78	63	78	63	81%
WDR Total		0	4	1	1	0	2	33	131	1153	1026	1153	1026	89%
52	Banke	0	1	0	1	0	0	0	10	138	122	138	122	88%
53	Bardiya	0	2	0	0	0	0	3	13	137	118	137	118	86%
54	Dailekh	0	0	0	0	0	0	1	1	16	10	16	10	63%
55	Dang	0	1	0	1	0	0	14	21	192	169	192	169	88%
56	Dolpa	0	0	0	0	0	0	0	1	3	2	3	2	67%
57	Humla	0	0	0	0	0	0	0	0	2	2	2	2	100%
58	Jajartkot	0	0	0	0	0	0	0	0	31	26	31	26	84%
59	Jumla	0	0	0	0	0	0	0	3	20	20	20	20	100%
60	Kalikot	0	0	0	0	0	0	1	2	14	14	14	14	100%
61	Mugu	0	0	0	0	0	0	0	0	10	10	10	10	100%
62	Pyuthan	0	1	0	0	0	0	4	11	61	56	61	56	92%
63	Rolpa	0	0	0	0	0	0	1	4	46	43	46	43	93%
64	Rukum	0	0	0	0	0	0	0	2	37	36	37	36	97%
65	Sayan	0	0	0	0	0	0	1	5	33	32	33	32	97%
66	Surkhet	0	0	0	0	0	0	2	9	74	69	74	69	93%
MDR Total		0	5	0	2	0	0	27	82	814	729	814	729	90%
67	Achham	0	0	0	0	0	0	1	2	32	30	32	30	94%
68	Baitadi	0	0	0	0	0	0	1	5	47	38	47	38	81%
69	Bajhang	0	1	0	0	0	0	5	2	35	34	35	34	97%
70	Bajura	0	0	0	0	0	0	0	1	21	21	21	21	100%
71	Dadeldhura	0	0	0	0	0	0	0	0	20	19	20	19	95%
72	Darchula	0	0	0	0	0	0	0	1	17	17	17	17	100%
73	Doti	0	0	0	0	0	0	3	4	47	39	47	39	83%
74	Kailali	0	1	0	0	0	0	7	29	229	210	229	210	92%
75	Kanchanpur	0	0	1	0	0	0	5	23	222	202	222	202	91%
FDR Total		0	2	1	0	0	0	22	67	670	610	670	610	91%
National Total		0	22	4	13	0	3	189	624	6422	5741	6422	5741	89%

Source: NTC

PLHIV in Antiretroviral Therapy in FY 070-71

Districts	Currently Receiving Antiretroviral Therapy				Newly enrolled in Antiretroviral Therapy			
	Male	Female	TG	Total	Male	Female	TG	Total
Achham	165	254	0	419	6	22	0	28
Arghakhachi	0	0	0	0	0	0	0	0
Baglung	65	64	0	129	6	9	0	15
Baitadi	30	38	0	68	5	9	0	14
Bajhang	14	17	0	31	6	14	0	20
Bajura	13	16	0	29	8	6	0	14
Banke	175	129	0	304	43	23	0	66
Bara	0	0	0	0	0	0	0	0
Bardiya	14	21	0	35	0	2	0	2
Bhaktapur	6	4	0	10	6	4	0	10
Chitwan	274	256	7	537	57	44	0	101
Dadeldhura	20	30	0	50	2	8	0	10
Dailekh	35	51	0	86	4	15	0	19
Dang	71	72	0	143	8	16	0	24
Darchula	0	0	0	0	0	0	0	0
Dhanusha	237	135	0	372	48	31	0	79
Doti	181	216	0	397	15	16	0	31
Gorkha	54	48	0	102	16	16	0	32
Gulmi	28	42	0	70	5	13	0	18
Jhapa	86	72	0	158	17	6	0	23
Kailali	470	553	2	1025	9	26	1	36
Kanchanpur	72	88	0	160	12	19	0	31
Kapilvastu	109	99	0	208	20	17	0	37
Kaski	383	314	0	697	40	36	0	76
Kathmandu	1092	830	8	1930	122	81	0	203
Kavre	14	20	0	34	0	5	0	5
Lalitpur	123	30	0	153	19	10	0	29
Lamjung	30	34	0	64	6	11	0	17
Makwanpur	36	34	0	70	11	4	0	15
Morang	105	62	4	171	12	12	1	25
Myagdi	0	0	0	0	0	0	0	0
Nawalparasi	0	0	0	0	0	0	0	0
Nuwakot	24	36	0	60	4	10	0	14
Palpa	71	94	0	165	13	8	0	21
Parsa	208	130	3	341	38	18	0	56
Pyuthan	18	19	0	37	7	5	0	12
Rautahat	1	0	0	1	1	0	0	1
Rolpa	7	7	0	14	5	0	0	5
Rupandehi	368	329	5	702	39	53	2	94
Saptari	36	28	2	66	11	8	0	19
Sindhupalchowk	0	0	0	0	0	0	0	0
Siraha	0	0	0	0	0	0	0	0
Sunsari	333	187	0	520	38	22	0	60
Surkhet	105	87	0	192	24	15	0	39
Syanja	72	80	0	152	0	7	0	7
Tanahun	55	61	0	116	8	9	0	17
Grand Total	5200	4587	31	9818	691	630	4	1325

Source: NCASC

HIV Cases reported by Districts (FY 070-71)

Districts	Male	Female	TG	Total
Achham	35	44		79
Arghakhachi	4	2		6
Baglung	7	9		16
Baitadi	10	17		27
Bajhang	14	6		20
Bajura	7	4		11
Banke	35	51	1	87
Bara	3	8	2	13
Bardiya	2	6		8
Bhaktapur	5	2		7
Bhojpur	2	2		4
Chitwan	51	58		109
Dadeldhura	11	5		16
Dailekh	16	9		25
Dang	14	17		31
Dhading	4	9		13
Dhankuta	2			2
Dhanusa	36	55		91
Doti	14	13		27
Gorkha	15	18		33
Gulmi	10	6		16
Jhapa	24	41	2	67
Kailali	53	77	1	131
Kanchanpur	8	13		21
Kapilbastu	24	44		68
Kaski	44	52		96
Kathmandu	153	238	2	393
Kavre	2	2		4
Lalitpur	8	16		24
Lamjung	3	3		6
Mahottari	1	2		3
Makwanpur	6	6		12
Morang	33	42	2	77
Myagdi		2		2
Nawalparasi	14	14	1	29
Nuwakot	3	3		6
Palpa	40	67		107
Parbat		2		2
Parsa	30	65		95
Pyuthan	7	3		10
Ramechhap	2	2		4
Rautahat	3	6	1	10
Rolpa	2	3		5
Rukum	1	4		5
Rupandehi	81	112		193
Salyan	1	1		2
Saptari	7	14		21
Sarlahi	9	3	2	14
Sindhupalchowk	1			1
Siraha	5	8		13
Sunsari	37	51	1	89
Surkhet	20	21		41
Syangja	4	4		8
Tanahun	13	15		28
Grand Total	936	1277	15	2228

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 Flacid Paralysis (AFP)	Rubella	Mumps	Chicken pox	Hepatitis B
	Mountain	192	1809484	89	12	433	1	42	474	10	80	3933	1691	48
	Hill	468	9862701	993	1025	2424	45	755	9490	60	518	17694	9340	2162
	Terai	240	9989664	197	42	3239	11	86	11309	108	106	12407	4833	278
	National Total	900	21661849	1279	1079	6096	57	883	21273	178	704	34034	15864	2488
1	Taplejung	12	121230	14	0	30	0	0	14	0	6	323	277	11
2	Panchthar	12	120300	3	0	1	0	0	34	1	0	344	154	0
3	Ilam	12	137869	20	0	0	0	0	77	0	6	262	271	2
4	Jhapa	12	496949	60	0	0	0	0	1482	2	0	1159	434	32
5	Morang	12	768077	6	0	20	0	15	778	17	16	1335	489	77
6	Sunsari	12	457851	10	2	1	0	1	215	11	12	1174	210	6
7	Dhankuta	12	150016	27	6	8	2	4	54	2	8	690	256	1
8	Tehrathum	12	93494	12	0	0	0	0	10	0	8	398	131	0
9	Sankhuwasabha	12	168807	11	0	65	0	1	31	0	29	314	309	3
10	Bhojpur	12	169931	7	0	1	0	0	42	0	7	458	232	0
11	Solukhumbu	12	153311	6	0	1	0	3	44	3	6	179	123	6
12	Okhaldhunga	12	198416	6	0	8	0	2	207	0	6	562	195	0
13	Khotang	12	227340	8	0	57	0	13	16	8	9	508	160	0
14	Udaypur	12	250355	1	0	146	0	7	304	1	3	902	257	0
15	Saptari	12	503111	1	0	17	3	4	118	0	7	476	16	0
16	Siraha	12	547688	14	0	46	0	1	330	2	6	484	43	2
	Eastern	192	4564745	206	8	401	5	51	3756	47	129	9568	3557	140
17	Dhanusha	12	544637	14	6	4	2	4	416	7	6	201	25	9
18	Mahottari	12	502913	14	7	118	3	23	632	31	9	445	261	0
19	Sarlahi	12	658722	7	0	216	0	7	403	2	4	394	79	13
20	Sindhuli	12	153399	32	3	13	2	5	339	2	6	322	207	4
21	Ramechhap	12	199514	25	1	28	0	1	62	0	0	1067	219	0
22	Dolkha	12	208170	17	0	30	0	1	114	1	20	1268	144	1
23	Sindhupalchowk	12	249282	32	9	202	0	11	91	3	5	727	291	4
24	Kavre	12	460688	68	11	3	0	0	219	8	13	846	323	3
25	Lalitpur	12	221276	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	219478	77	0	20	0	9	165	0	14	671	295	19
27	Kathmandu	12	953601	514	995	1320	4	672	3351	3	245	1097	692	1863
28	Nuwakot	12	210620	12	0	4	0	1	178	0	0	384	102	0
29	Rasuwa	12	52283	3	0	1	0	1	17	1	6	114	67	0
30	Dhading	12	333898	42	0	57	0	2	303	4	29	1268	451	28
31	Makawanpur	12	193722	50	0	69	1	1	185	2	7	487	169	10
32	Rautahat	12	478529	5	0	66	1	10	252	3	4	149	79	0
33	Bara	12	492943	10	0	344	0	3	465	4	2	729	34	0
34	Parsa	12	5288	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	809033	13	26	1871	0	9	1890	14	1	1212	628	79
	Central	228	6947996	935	1058	4366	13	760	9082	85	371	11381	4066	2033
36	Gorkha	12	284034	9	0	1	0	0	288	0	1	600	347	5
37	Lamjung	12	220030	7	0	16	0	0	34	3	5	408	211	3
38	Tanahu	12	181293	9	0	23	0	0	138	8	1	470	336	12
39	Syangja	12	246754	3	0	0	0	0	157	0	22	611	205	5
40	Kaski	12	639013	13	0	67	0	1	138	0	13	737	568	24
41	Manang	12	12683	2	0	0	0	0	1	0	0	9	8	0
42	Mustang	12	24198	0	0	0	0	0	4	0	1	14	10	0
43	Myagdi	12	120463	0	0	5	0	0	60	0	0	193	177	2
44	Parbat	12	170237	3	0	17	0	2	26	1	3	317	132	1
45	Baglung	12	263081	2	0	0	0	7	49	0	15	359	149	6
46	Gulmi	12	301525	0	0	0	0	0	154	1	0	177	112	0
47	Palpa	12	412754	5	1	9	0	0	1282	1	4	307	237	45
48	Nawalparasi	12	442876	1	0	0	0	0	1104	4	4	727	260	2
49	Rupandehi	12	741954	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	481049	0	0	348	0	6	573	3	0	260	9	0
51	Arghakhanchi	12	153203	1	0	0	0	6	61	4	6	418	209	0
	Western	192	4695147	55	1	486	0	22	4069	25	75	5607	2970	105
52	Pyuthan	12	267938	4	0	8	0	2	271	0	1	395	238	0
53	Rolpa	12	155552	2	0	1	0	2	98	0	6	297	91	0
54	Rukum	12	177023	1	0	7	0	0	336	0	0	86	150	20
55	Salyan	12	228115	2	0	1	0	0	26	0	0	123	178	0
56	Dang	12	453285	10	0	1	0	0	852	0	0	1234	427	0
57	Banke	12	412219	4	0	23	0	0	212	2	22	322	240	35
58	Bardiya	12	398568	14	1	0	0	1	299	4	2	950	595	11
59	Surkhet	12	395290	0	0	73	0	0	327	0	2	838	443	16
60	Dailekh	12	257115	0	0	135	0	0	73	0	0	464	240	13
61	Jajarkot	12	137279	0	0	0	0	0	0	0	1	122	69	3
62	Dolpa	12	60592	0	0	4	0	0	2	0	0	1	3	0
63	Jumla	12	81235	2	2	7	0	0	7	0	0	85	44	0
64	Kalikot	12	101780	0	0	9	0	0	5	0	0	464	210	3
65	Mugu	12	48117	0	0	2	0	22	7	0	0	0	0	0
66	Humla	12	93085	0	0	7	0	0	0	0	0	88	6	0
	Mid Western	180	3267193	39	3	278	0	27	2515	6	34	5469	2934	101
67	Bajura	12	146828	1	0	62	0	3	44	0	1	161	96	0
68	Bajhang	12	169093	1	1	4	1	0	89	2	1	152	83	20
69	Achham	12	363577	2	2	20	0	4	188	3	2	154	419	10
70	Doti	12	224337	1	0	68	0	0	35	0	0	63	136	0
71	Kailali	12	498658	13	0	141	2	1	579	1	5	617	491	1
72	Kanchanpur	12	295314	1	0	23	0	1	709	1	6	539	513	11
73	Dadeldhura	12	176129	25	6	233	36	14	144	8	73	233	519	67
74	Baitadi	12	194042	0	0	5	0	0	59	0	2	56	60	0
75	Darchula	12	118790	0	0	9	0	0	4	0	5	34	20	0
	Far Western	108	2186768	44	9	565	39	23	1851	15	95	2009	2337	109

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	24	4	193	5	8	71	0	38702	30869	54741	26418	53683	593	83874	4255
	Hill	468	97	139	4704	260	443	64	54	244570	142651	218488	91034	264254	1079	231122	29151
	Terai	240	155	477	29408	469	870	324	92	216489	156568	263987	114629	314059	2498	411225	22128
	National Total	900	276	620	34305	734	1321	459	146	499761	330088	537216	232081	631996	4170	726221	55534
1	Taplejung	12	0	0	2	0	1	52	0	2771	1792	2598	862	2747	103	8407	1187
2	Panchthar	12	0	0	13	0	0	0	0	2515	491	1827	645	4199	0	5107	233
3	Ilam	12	0	0	72	1	2	0	0	1449	917	1996	507	2076	0	4979	266
4	Jhapa	12	0	16	632	9	77	202	12	14986	8206	11877	5597	7894	76	25880	2077
5	Morang	12	0	7	2406	37	30	1	6	18092	17227	11744	5233	11021	352	21510	4456
6	Sunsari	12	0	17	1459	25	2	0	0	5770	5761	11286	5025	16090	1	22151	739
7	Dhankuta	12	0	0	79	0	0	0	0	4082	1513	3350	728	3156	9	4803	525
8	Tehrathum	12	1	0	15	0	0	0	0	2285	793	2055	871	2310	0	4044	191
9	Sankhuwasabha	12	0	0	13	0	0	0	0	4772	2617	2264	1029	5120	81	7434	650
10	Bhojpur	12	2	0	87	0	1	0	0	3738	2127	3785	1667	5141	0	4980	376
11	Solukhumbu	12	0	0	0	0	4	0	0	1520	2679	2861	1838	4349	0	8871	267
12	Okhaldhunga	12	2	0	2	1	0	0	0	3549	1988	3676	1431	5996	0	6552	291
13	Khotang	12	0	0	0	0	0	0	0	5491	5075	7140	3679	4134	0	17938	819
14	Udaypur	12	0	2	176	1	9	0	5	7467	5777	7180	4065	7514	0	12937	858
15	Saptari	12	0	6	1737	15	18	0	2	5859	9566	18679	6151	38136	0	35577	190
16	Siraha	12	21	1	999	8	12	0	16	16720	9159	14936	6438	24276	202	34641	467
	Eastern	192	26	49	7692	97	156	255	41	101066	75688	107254	45766	144159	824	225811	13592
17	Dhanusha	12	25	154	5396	17	32	7	40	19310	9041	16161	7154	20900	272	40354	754
18	Mahottari	12	8	23	4524	65	39	0	11	16336	8195	17160	8345	17556	423	41744	764
19	Sarlahi	12	0	20	1782	45	18	0	3	16707	10638	26899	10279	18560	144	43390	501
20	Sindhuli	12	0	0	455	2	15	1	0	7375	2111	4013	1854	4443	63	6904	267
21	Ramechhap	12	3	3	9	3	17	0	6	4297	1533	2690	1067	7647	130	4403	529
22	Dolkha	12	5	0	3	0	0	0	0	3996	2787	4324	1649	6818	213	7344	391
23	Sindhupalchowk	12	16	3	47	0	1	19	0	6996	3378	5973	2431	8088	0	6531	388
24	Kavre	12	1	3	138	0	0	0	0	13468	4032	8960	2646	16079	8	5912	1738
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	1	0	0	0	0	0	0	3087	3856	3238	898	4546	2	2527	839
27	Kathmandu	12	37	50	48	75	52	55	19	13528	18715	13353	4715	15031	157	10532	5829
28	Nuwakot	12	0	16	50	0	29	0	0	8887	5654	6918	2882	5212	177	4690	1137
29	Rasuwa	12	0	0	0	0	0	0	0	948	1201	857	643	1930	0	1184	33
30	Dhading	12	1	8	147	3	5	0	0	13590	5368	7854	3281	9557	16	7124	1558
31	Makawanpur	12	2	22	120	19	9	0	0	2962	2051	4527	1871	8854	85	3956	283
32	Rautahat	12	1	15	1000	14	1	1	2	10802	6335	17642	8195	23912	330	30478	502
33	Bara	12	44	81	1816	49	3	0	0	10010	7851	19960	7536	20680	489	27660	902
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	31	0	220	9	33	111	0	6619	24579	10741	3663	12932	107	12582	2511
	Central	228	175	398	15755	301	254	194	81	158918	117325	171270	69109	202745	2616	257315	18926
36	Gorkha	12	0	0	28	1	6	0	0	6277	5831	6663	2355	5816	0	6123	838
37	Lamjung	12	19	0	7	3	0	0	0	4153	2296	3450	1426	7085	14	5293	545
38	Tanahu	12	1	4	24	0	1	0	0	4157	2091	2994	1166	4878	57	5142	827
39	Syangja	12	0	0	4	1	4	0	0	8364	3126	5223	1159	6231	0	5096	461
40	Kaski	12	0	1	93	6	4	0	0	10786	15027	9227	2832	8063	0	7033	3440
41	Manang	12	0	0	0	0	0	0	0	81	292	521	122	330	6	578	4
42	Mustang	12	0	0	0	0	0	0	0	73	652	410	70	435	3	459	12
43	Myagdi	12	0	0	0	0	0	0	0	1200	815	2574	1157	3935	0	2458	325
44	Parbat	12	0	0	3	1	0	0	0	4218	1538	3331	634	3948	0	2705	186
45	Baglung	12	2	0	1	0	4	0	1	11147	4229	6152	2875	6754	0	6113	829
46	Gulmi	12	0	0	27	0	0	0	0	5167	2055	4972	1514	2801	0	7878	688
47	Palpa	12	16	2	48	1	27	4	4	8437	2720	4994	1616	8176	15	5326	320
48	Nawalparasi	12	1	1	1235	12	51	1	0	8318	6457	7590	3456	23380	0	9644	467
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	1	92	607	11	25	0	0	10988	10209	26316	12336	16071	87	16324	524
51	Arghakhanchi	12	0	0	68	11	4	0	0	5994	2038	5002	1822	4352	23	4545	470
	Western	192	40	100	2145	47	126	5	5	89360	59376	89419	34540	102255	205	84717	9936
52	Pyuthan	12	0	0	110	13	10	0	0	8015	3513	6809	3217	12751	0	4516	928
53	Rolpa	12	0	0	76	0	0	0	0	6420	2712	5404	2226	7366	0	3320	256
54	Rukum	12	0	0	0	0	1	0	4	7212	2089	5292	2508	7272	1	5546	181
55	Salyan	12	0	0	95	0	0	0	0	8914	3290	9319	5200	6989	0	4847	505
56	Dang	12	4	3	1434	2	19	0	0	14540	4523	10523	5022	12589	0	9582	2109
57	Banke	12	6	4	263	4	32	0	0	7294	5997	13258	6000	15552	0	12342	308
58	Bardiya	12	1	22	1126	2	41	1	0	13085	5233	11634	6315	10822	0	11729	1012
59	Surkhet	12	0	1	2172	0	47	1	3	13639	7915	10100	5375	7078	0	11972	808
60	Dailekh	12	0	0	60	0	9	0	0	13345	3080	5687	3245	17336	0	5748	204
61	Jajarkot	12	0	0	0	0	0	0	0	3954	3845	4388	2788	3871	48	5858	202
62	Dolpa	12	0	0	1	0	0	0	0	544	435	1344	651	1277	0	6082	107
63	Jumla	12	0	1	4	1	0	0	0	853	2552	2762	1551	2422	0	5971	105
64	Kalikot	12	0	0	5	0	0	0	0	1717	2196	4482	2771	2910	0	6290	136
65	Mugu	12	0	0	0	0	0	0	0	508	1315	2107	1100	743	5	3848	53
66	Humla	12	0	0	0	0	0	0	0	755	3247	4171	2863	2270	0	6914	132
	Mid Western	180	11	31	5346	22	159	2	7	100795	51942	97280	50832	111248	54	104565	7046
67	Bajura	12	3	0	72	0	1	0	0	4589	2450	7873	3637	5050	46	4131	158
68	Bajhang	12	0	0	32	2	1	0	0	6669	2647	7693	3614	5448	108	6524	521
69	Achham	12	5	12	36	15	46	0	6	5173	4590	14172	6002	14436	14	10078	311
70	Doti	12	0	12	204	4	5	3	1	3329	4091	7642	4151	8955	0	8108	437
71	Kailali	12	8	15	2752	142	323	0	0	12917	5426	9301	4152	14896	0	10140	2418
72	Kanchanpur	12	4	0	20	3	114	0	0	8136	2165	8280	3732	8792	15	5497	1427
73	Dadeldhura	12	4	3	159	90	104	0	5	3049	1908	4145	2136	5232	245	2516	423
74	Baitadi	12	0	0	78	9	32	0	0	3850	1851	8386	2823	5034	15	3513	228
75	Darchula	12	0	0	14	2	0	0	0	1910	629	4501	1587	3746	28	3306	111
	Far Western	108	24	42	3367	267	626	3	12	49622	25757	71993	31834	71589	471	53813	6034

Raw Data
Morbidity Sheet 3 of 11

District Code	District Name	Received Reports	Other Communicable				Other Infectious Disease									Reproductive Tract Infection (RTI) male	Reproductive Tract Infection (RTI) female
			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			
	Mountain	192	2350	94	31	185	92587	101947	35083	2983	21371	35878	28411	21365	740	1280	
	Hill	468	19842	1253	413	2106	477810	529504	157205	10910	111989	172441	158086	109657	3291	6591	
	Terai	240	21935	1575	2374	461	438501	467889	132488	8154	134979	164497	135525	92972	3585	6094	
	National Total	900	44127	2922	2818	2752	1008898	1099340	324776	22047	268339	372816	322022	223994	7616	13965	
1	Taplejung	12	97	0	0	25	5743	6155	3313	241	988	1539	1209	645	22	32	
2	Panchthar	12	160	0	0	0	7271	7197	3879	79	851	1337	1182	524	2	18	
3	Ilam	12	87	6	3	28	7881	7143	3196	117	1435	1823	1881	3642	94	150	
4	Jhapa	12	3143	67	194	1	26954	29066	11460	395	9209	8067	11295	15767	558	832	
5	Morang	12	902	244	61	98	32419	32847	10866	721	9627	8473	23282	5572	213	383	
6	Sunsari	12	426	36	99	9	28791	29257	8867	277	2773	6229	6093	3292	118	230	
7	Dhankuta	12	311	3	1	0	8822	8747	3721	79	1539	1631	2186	2194	24	26	
8	Teharthur	12	29	0	2	0	3928	5871	2109	92	1380	1301	1213	980	37	33	
9	Sankhuwasabha	12	104	0	0	32	7714	8192	4843	141	759	1840	2096	445	25	67	
10	Bhojpur	12	95	0	2	2	7107	7657	3684	148	1929	3270	2813	1725	114	194	
11	Solukhumbu	12	59	0	0	101	7407	7238	2201	227	2478	2458	2025	1027	29	46	
12	Okhaldhunga	12	11	0	0	13	14135	12062	3061	43	1881	3197	2240	1363	37	130	
13	Khotang	12	57	0	1	0	12099	11819	6834	391	2637	3382	3550	93	63	138	
14	Udaypur	12	1160	2	11	1	9945	8844	4653	530	3505	3069	3644	2048	68	124	
15	Saptari	12	426	0	35	0	29945	20512	5213	84	8647	8359	5941	5982	23	143	
16	Siraha	12	371	21	25	24	31074	31137	9021	443	9486	8387	6653	2671	96	154	
	Eastern	192	7438	379	434	334	241235	233744	86921	4008	59124	64362	77303	47970	1523	2700	
17	Dhanusha	12	675	18	969	56	31805	23209	6089	565	8560	9241	5357	4927	128	201	
18	Mahottari	12	1742	255	124	23	21623	23220	6499	433	12403	11989	6581	5368	175	334	
19	Sarlahi	12	615	10	74	1	26284	25491	7764	428	14405	16183	4964	2452	77	174	
20	Sindhuli	12	263	2	7	1	6116	6436	3346	102	1767	2924	2199	1203	58	132	
21	Ramechhap	12	45	0	2	1	12047	9943	3342	248	1864	2684	3018	2402	53	86	
22	Dolkha	12	404	50	10	6	14024	10972	2604	261	2090	3644	3690	5244	137	93	
23	Sindhupalchowk	12	447	21	2	3	14823	13976	4390	466	3379	5922	3601	5927	184	544	
24	Kavre	12	666	1	15	52	28908	32006	7021	282	4280	9122	6921	6859	52	279	
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26	Bhaktapur	12	170	2	1	19	11373	11709	1941	54	1299	2437	3524	2799	37	22	
27	Kathmandu	12	3146	606	65	367	26556	29091	7889	897	7895	14509	17073	10460	685	1243	
28	Nuwakot	12	468	20	0	0	10792	10005	3966	278	3012	7006	3656	3488	167	275	
29	Rasuwa	12	46	0	1	0	2105	6432	199	3	386	596	592	482	4	4	
30	Dhading	12	1041	9	6	23	16719	14376	7761	641	3713	6252	5454	11917	103	215	
31	Makawanpur	12	1104	69	54	2	7709	10878	3836	242	2706	3528	1943	3023	20	33	
32	Rautahat	12	772	60	100	35	12642	14271	6581	725	8892	11451	2995	1900	89	175	
33	Bara	12	724	24	36	1	16408	18481	4642	568	8265	9974	3874	2151	107	259	
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35	Chitwan	12	2265	557	279	82	35497	37948	11768	692	5859	9922	15849	7661	1119	1324	
	Central	228	14593	1704	1745	672	295431	298444	89638	6885	90775	127384	91291	78263	3195	5393	
36	Gorkha	12	270	13	6	2	11533	22403	5156	114	2860	3942	5683	7185	57	53	
37	Lamjung	12	100	0	1	9	7856	8883	3458	145	2998	4477	5098	2911	26	38	
38	Tanahu	12	482	35	13	27	7671	8652	2446	220	2439	3399	3087	3076	227	313	
39	Syangja	12	328	9	8	2	17237	17858	2038	89	4693	5364	4405	3624	75	162	
40	Kaski	12	652	23	6	281	26846	30725	7948	1220	8130	10630	11731	6214	174	818	
41	Manang	12	39	1	0	0	552	587	87	0	234	170	156	189	0	5	
42	Mustang	12	11	0	2	0	1464	2482	58	3	81	114	234	11	5	3	
43	Myagdi	12	120	14	4	0	5897	9883	1171	175	1353	1334	1856	1449	34	43	
44	Parbat	12	87	19	8	0	15515	16327	2720	54	2186	2970	1644	1293	6	28	
45	Baglung	12	540	154	37	57	16404	22802	5578	379	4516	3335	4191	1519	133	363	
46	Gulmi	12	120	0	0	970	7593	7743	2180	219	3247	3373	3734	2251	4	13	
47	Palpa	12	96	89	30	162	14090	13419	4831	99	4674	6067	7887	5243	76	134	
48	Nawalparasi	12	94	5	99	0	27944	29263	6566	264	4880	8802	5500	3121	28	23	
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
50	Kapilvastu	12	1757	50	44	0	14672	25988	6027	686	7720	8825	5432	3452	281	460	
51	Arghakhanchi	12	1219	1	1	4	9877	6033	2993	122	2925	3422	2602	1668	39	67	
	Western	192	5915	413	259	1514	185151	223048	53257	3789	52936	66224	63240	43206	1165	2523	
52	Pyuthan	12	127	0	2	0	11739	15706	5365	290	4663	5353	3047	796	32	60	
53	Rolpa	12	233	10	10	0	10460	7243	3453	73	1499	2412	2416	402	26	36	
54	Rukum	12	333	10	20	7	7841	11978	3949	543	2034	2951	4319	363	54	85	
55	Salyan	12	343	11	14	4	11843	11472	5209	499	3865	6471	3757	1024	32	171	
56	Dang	12	1636	72	11	0	13418	24682	8118	627	5883	9659	5964	3330	149	233	
57	Banke	12	1498	0	65	7	20857	24636	5181	221	4388	6344	4166	3885	18	92	
58	Bardiya	12	1850	39	65	1	20467	29359	6244	132	6297	6750	7762	2954	299	861	
59	Surkhet	12	1483	1	14	1	20238	23672	6507	407	5300	8177	7597	5062	100	183	
60	Dailekh	12	562	50	2	1	19570	14767	4510	505	3591	5743	3011	1282	27	31	
61	Jajarkot	12	252	1	0	0	4825	7472	1912	331	1793						

Raw Data
Morbidity Sheet 4 of 11

District Code	District Name	Received Reports	Nutritional and Metabolic Disorder								
			Malnutrition	Avitaminoses and other nutri deficiency	Polynueritis	Anaemia	Goitre, Cretinism	Diabetic mellitis	Obesity	Dehydration	Night blindness
	Mountain	192	3393	6856	4062	5543	261	1374	180	6900	977
	Hill	468	10155	51835	25798	29056	5044	45687	3492	24556	2326
	Terai	240	16162	96773	25768	60966	2002	43026	1680	39503	11013
	National Total	900	29710	155464	55628	95565	7307	90087	5352	70959	14316
1	Taplejung	12	81	480	158	236	20	133	13	187	18
2	Panchthar	12	22	676	161	305	1	18	0	342	4
3	Ilam	12	133	942	368	589	23	86	25	277	11
4	Jhapa	12	481	1914	2156	2139	91	1332	109	2597	251
5	Morang	12	787	6339	1756	3350	270	18031	144	2657	163
6	Sunsari	12	602	7625	1460	1938	3	231	17	1925	175
7	Dhankuta	12	18	1104	225	160	48	100	6	496	3
8	Teharthur	12	66	614	218	162	20	244	1	280	8
9	Sankhuwasabha	12	14	703	21	414	26	297	59	318	18
10	Bhojpur	12	62	1266	48	498	3	127	15	384	27
11	Solukhumbu	12	120	456	310	580	41	225	6	607	107
12	Okhaldhunga	12	182	780	59	303	59	369	0	476	8
13	Khotang	12	258	676	232	551	17	20	16	1373	51
14	Udaypur	12	167	1496	674	537	20	305	16	569	163
15	Saptari	12	1084	7172	821	4328	17	48	6	3952	615
16	Siraha	12	360	8695	1656	3064	86	498	236	4495	745
	Eastern	192	4437	40938	10323	19154	745	22064	669	20935	2367
17	Dhanusha	12	974	7497	842	4641	62	881	71	1325	637
18	Mahottari	12	689	4852	761	3445	139	1280	48	2195	1094
19	Sarlahi	12	1466	8529	1308	5893	55	300	90	4399	2380
20	Sindhuli	12	117	777	263	643	59	150	15	1161	61
21	Ramechhap	12	112	1279	475	449	33	259	3	59	16
22	Dolkha	12	63	463	252	326	51	397	23	328	48
23	Sindhupalchowk	12	226	793	1316	786	24	189	28	565	93
24	Kavre	12	136	3023	932	2097	211	2718	582	990	14
25	Lalitpur	12	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	13	600	153	295	6	1667	29	32	5
27	Kathmandu	12	465	3926	946	2799	569	15382	1162	2742	292
28	Nuwakot	12	262	769	254	633	19	693	175	708	78
29	Rasuwa	12	0	706	25	92	1	4	2	312	7
30	Dhading	12	303	1955	1455	1475	27	1182	60	798	139
31	Makawanpur	12	202	1074	508	671	27	110	18	288	23
32	Rautahat	12	1920	6692	728	6427	48	130	116	5309	1294
33	Bara	12	582	7570	1528	3981	153	435	83	2275	1041
34	Parsa	12	0	0	0	0	0	0	0	0	0
35	Chitwan	12	256	3469	1226	3177	773	15715	402	1365	254
	Central	228	7786	53974	12972	37830	2257	41492	2907	24851	7476
36	Gorkha	12	62	915	1394	1066	40	787	13	302	41
37	Lamjung	12	202	2451	611	843	14	1818	11	305	52
38	Tanahu	12	71	1166	495	725	222	1272	69	261	72
39	Syangja	12	161	2931	906	847	16	509	52	256	56
40	Kaski	12	3017	4213	1190	2187	2006	11027	690	1460	31
41	Manang	12	0	45	1	33	0	30	0	0	0
42	Mustang	12	0	132	4	39	0	14	0	55	2
43	Myagdi	12	121	634	189	274	28	73	7	214	19
44	Parbat	12	58	1962	744	728	24	202	5	116	39
45	Baglung	12	130	1576	1382	924	188	309	28	574	87
46	Gulmi	12	56	423	802	430	268	330	132	128	2
47	Palpa	12	158	3119	656	897	809	4241	94	1382	10
48	Nawalparasi	12	390	5488	1077	2196	52	672	129	735	135
49	Rupandehi	12	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	3749	5899	2249	4394	97	98	26	1320	1062
51	Arghakhanchi	12	57	1161	816	429	2	81	1	160	0
	Western	192	8232	32115	12516	16012	3766	21463	1257	7268	1608
52	Pyuthan	12	90	688	1128	405	5	244	0	327	6
53	Rolpa	12	76	345	439	319	9	18	20	593	29
54	Rukum	12	505	1243	1120	597	21	87	27	396	72
55	Salyan	12	222	580	1230	700	40	282	17	852	145
56	Dang	12	824	1997	2153	1434	28	1427	37	1389	286
57	Banke	12	261	2960	943	2136	12	283	78	1742	521
58	Bardiya	12	549	3732	3175	2260	17	357	8	796	206
59	Surkhet	12	372	2029	2534	1190	11	137	17	1740	95
60	Dailekh	12	123	1084	650	413	1	21	8	1077	73
61	Jajarkot	12	554	514	607	637	43	12	34	322	180
62	Dolpa	12	41	112	18	120	23	3	15	201	7
63	Jumla	12	553	519	96	249	5	3	2	520	138
64	Kalikot	12	343	494	240	309	0	1	0	656	142
65	Mugu	12	539	222	94	75	5	0	5	204	80
66	Humla	12	578	344	60	559	4	1	8	543	4
	Mid Western	180	5630	16863	14487	11403	224	2876	276	11358	1984
67	Bajura	12	413	603	215	832	5	11	0	819	45
68	Bajhang	12	300	447	951	549	10	62	19	1470	247
69	Achham	12	785	1974	742	1198	65	212	1	648	106
70	Doti	12	519	936	665	927	46	201	8	889	66
71	Kailali	12	406	4691	1645	4410	12	1192	77	767	101
72	Kanchanpur	12	782	1652	284	1753	87	116	3	260	53
73	Dadeldhura	12	149	528	240	488	42	282	135	772	111
74	Baitadi	12	149	406	287	665	2	112	0	807	131
75	Darchula	12	122	337	301	344	46	4	0	115	21
	Far Western	108	3625	11574	5330	11166	315	2192	243	6547	881

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	39820	30308	31172	30881	42082	955	662	2375	28924	13778	49742	19415	973		
	Hill	468	241860	155918	185607	197040	184270	12300	8904	18743	168739	90033	267014	120738	7250		
	Terai	240	462784	213556	219555	292990	302527	7882	5381	11712	230769	62591	126436	68627	3577		
	National Total	900	744464	399782	436334	520911	528879	21137	14947	32830	428432	166402	443192	208780	11800		
1	Taplejung	12	3281	3379	1308	2754	2473	103	106	256	2004	1501	8382	1776	130		
2	Panchthar	12	5233	1798	3351	3169	1931	38	65	297	1882	915	10675	1742	35		
3	Ilam	12	3529	2169	3066	3180	2392	142	81	365	2344	1288	8680	3367	92		
4	Jhapa	12	19590	9912	11155	18124	10739	155	242	1802	9865	7311	16134	10108	224		
5	Morang	12	28888	10239	10143	19578	14651	237	129	1315	14119	6655	14953	8042	267		
6	Sunsari	12	25729	7160	11534	14393	11718	153	33	693	12916	2567	9004	3818	83		
7	Dhankuta	12	4699	2219	3724	2751	1799	30	31	419	2324	1008	11709	3254	31		
8	Teharhum	12	3193	1971	3023	2040	2086	68	12	263	1980	1147	6570	2812	53		
9	Sankhuwasabha	12	3933	2044	3068	2792	2130	47	29	228	2675	840	6719	3255	49		
10	Bhojpur	12	6017	3730	4508	3089	4033	32	111	373	3085	936	12896	4411	96		
11	Solukhumbu	12	4588	2258	3286	2620	4405	50	10	67	2830	1523	7418	3007	117		
12	Okhaldhunga	12	5897	2585	3339	3528	2997	26	178	224	2780	1084	9058	4616	36		
13	Khotang	12	7336	4363	4059	5040	5611	38	28	469	4133	2075	13505	4476	217		
14	Udaypur	12	9856	6683	4095	5562	4242	44	135	677	5512	1609	7708	4915	139		
15	Saptari	12	28052	17404	8558	9683	21905	265	76	421	16852	2417	4884	3198	69		
16	Siraha	12	32007	16001	9541	13102	21772	288	77	497	15866	2845	5338	2663	189		
	Eastern	192	191828	93915	87758	111405	114884	1716	1343	8366	101167	35721	153633	65460	1827		
17	Dhanusha	12	25193	18493	25503	33868	22299	2236	1617	420	14132	2153	4677	2479	184		
18	Mahottari	12	28235	13007	7750	11292	16828	246	76	357	11762	2828	5591	1726	115		
19	Sarlahi	12	33434	18604	9775	15847	26559	423	174	769	14770	3508	6326	3355	192		
20	Sindhuli	12	5455	4050	2495	3330	4736	66	37	291	2670	1247	4814	1763	42		
21	Ramechhap	12	7156	3106	3678	3907	1949	52	38	303	3683	1579	8238	4210	53		
22	Dolkha	12	5247	2469	3372	2635	2235	50	196	90	2842	1792	6751	2801	155		
23	Sindhupalchowk	12	5384	5172	3537	3641	2524	113	82	780	3781	2797	8017	3702	152		
24	Kavre	12	8922	6524	8302	8838	2725	109	131	206	7387	2952	15905	5471	121		
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0		
26	Bhaktapur	12	4415	2744	3731	3234	1409	121	103	212	3588	1853	6358	4112	48		
27	Kathmandu	12	15242	10770	17543	17181	7542	4420	3998	4975	15616	13449	24187	18063	2469		
28	Nuwakot	12	5386	4558	3851	5303	3107	215	153	319	3225	2175	6001	2171	140		
29	Rasuwa	12	1217	1236	1361	866	617	3	28	35	857	314	1406	484	20		
30	Dhading	12	11998	6821	6548	7382	4088	266	101	740	5599	2826	8234	3146	145		
31	Makawanpur	12	8695	4041	4377	4959	2121	82	29	243	4089	1418	4784	2397	38		
32	Rautahat	12	30870	15258	8681	12254	25843	331	72	578	13880	1220	2534	1060	85		
33	Bara	12	40463	14361	9533	16536	24561	237	95	629	13128	1470	4330	1612	61		
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0		
35	Chitwan	12	22424	12788	19432	25870	7578	867	1492	1051	21846	12103	20423	13304	1451		
	Central	228	259736	144002	139469	176943	156721	9837	8422	11998	142855	55684	138576	71856	5471		
36	Gorkha	12	8024	4616	5769	5619	2869	61	78	446	4953	2644	8754	3539	31		
37	Lamjung	12	6344	3837	5039	6124	3216	119	76	463	3241	2618	5288	1519	22		
38	Tanahu	12	4099	2825	4362	4951	3868	312	236	326	3422	2455	4538	1872	132		
39	Syangja	12	8528	3992	4895	5470	3819	213	90	174	3452	5556	7947	2899	44		
40	Kaski	12	4702	8231	9027	11172	4628	3471	1152	1107	13941	9522	14237	10200	641		
41	Manang	12	106	183	188	365	235	0	2	6	138	230	448	94	2		
42	Mustang	12	412	225	594	414	262	0	2	10	327	386	914	418	4		
43	Myagdi	12	2611	2393	3277	2240	1786	25	60	97	2519	1321	3598	843	91		
44	Parbat	12	3532	2740	3580	3410	2318	18	76	576	2999	3087	7116	2472	49		
45	Baglung	12	5572	2951	6391	4413	5042	149	56	454	4215	3408	8559	3557	117		
46	Gulmi	12	4428	2436	2810	3988	5019	68	11	551	2877	1866	3855	1465	51		
47	Palpa	12	8493	6251	8468	7704	5736	251	675	365	5417	4053	7922	4113	1438		
48	Nawalparasi	12	22767	9408	15127	14445	10967	132	51	333	9331	4958	6585	2380	124		
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0		
50	Kapilvastu	12	22995	11587	11636	19988	25197	686	690	455	10961	3819	5233	3046	197		
51	Arghakhanchi	12	4804	2434	3475	4076	5678	40	70	340	2680	1915	3735	1479	36		
	Western	192	107417	64109	84638	94379	80640	5545	3325	5703	70473	47838	88729	39896	2979		
52	Pyuthan	12	12123	4974	5290	5756	8222	170	375	657	4798	2185	3982	2335	21		
53	Roipa	12	4581	3207	3637	3354	3823	44	42	354	3334	840	2632	1692	19		
54	Rukum	12	3508	3024	3792	4270	7887	73	54	153	3446	950	2288	1352	44		
55	Salyan	12	6665	3804	5926	6589	8002	180	40	406	4697	1802	3139	2138	125		
56	Dang	12	15424	7955	11008	13179	8722	461	112	455	11390	2669	4864	3021	93		
57	Banke	12	30332	10360	10530	18191	19641	171	81	164	12681	1024	2598	1364	60		
58	Bardiya	12	23539	9873	13437	13948	14408	435	288	1039	9729	2412	5620	3729	22		
59	Surkhet	12	11422	6345	8340	9836	11021	182	181	464	8676	3196	6243	1952	107		
60	Dailekh	12	7098	6145	3982	4668	11739	153	30	207	4462	1098	2739	937	29		
61	Jajarkot	12	2316	3167	3261	3548	10384	299	74	177	2662	838	1393	784	75		
62	Dolpa	12	379	338	344	713	1371	17	0	11	262	275	433	147	19		
63	Jumla	12	1445	1205	1585	898	3031	53	12	18	1533	476	966	489	43		
64	Kalikot	12	2322	1602	1526	1400	5692	110	76	170	1665	633	1008	638	75		
65	Mugu	12	743	1011	1685	885	1749	31	10	70	600	342	647	176	28		
66	Humla																

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	43334	6213	4643	9039	49359	977	788	2704
	Hill	468	227491	50839	48674	70493	215254	2346	10290	15718
	Terai	240	173263	37078	19907	59188	204329	2448	108878	11455
	National Total	900	444088	94130	73224	138720	468942	5771	119956	29877
1	Taplejung	12	2737	604	752	537	3953	156	45	34
2	Panchthar	12	2003	574	92	699	4517	13	8	5
3	Ilam	12	2427	835	926	1640	3554	53	31	14
4	Jhapa	12	9563	3415	1381	3568	9562	116	9853	5895
5	Morang	12	10132	2188	1352	3894	21298	247	74293	429
6	Sunsari	12	10034	2472	811	4580	8275	47	24	171
7	Dhankuta	12	2236	590	356	1102	4325	22	15	12
8	Teharthur	12	2152	325	230	704	3335	12	1	13
9	Sankhuwasabha	12	2688	315	125	923	4086	28	19	86
10	Bhojpur	12	3657	478	323	1113	4729	33	118	40
11	Solukhumbu	12	3692	544	578	1192	5238	114	110	271
12	Okhaldhunga	12	3705	559	202	820	5263	4	23	24
13	Khotang	12	5283	782	339	1443	5534	21	11	16
14	Udaypur	12	3731	1200	564	1589	5289	31	84	79
15	Saptari	12	9466	1380	901	3381	10160	47	28	147
16	Siraha	12	10855	1457	1131	2828	12025	36	30	101
	Eastern	192	84361	17718	10063	30013	111143	980	84693	7337
17	Dhanusha	12	12656	1781	1026	2392	9901	72	82	166
18	Mahottari	12	11440	1180	1171	1418	8859	55	52	272
19	Sarlahi	12	13255	2383	1387	3054	19529	195	2747	2176
20	Sindhuli	12	2768	478	239	955	3317	73	81	246
21	Ramechhap	12	5540	604	438	1294	6194	100	54	25
22	Dolkha	12	6112	1407	1084	1469	5973	80	291	1556
23	Sindhupalchowk	12	4076	699	259	1357	6263	99	69	164
24	Kavre	12	11203	2316	875	4535	17323	26	246	1738
25	Lalitpur	12	0	0	0	0	0	0	0	0
26	Bhaktapur	12	12201	4734	1945	2482	4322	21	37	258
27	Kathmandu	12	40949	16119	19805	13327	15111	391	1687	3880
28	Nuwakot	12	5546	1424	455	2466	5812	43	101	308
29	Rasuwa	12	965	95	8	617	2239	3	50	35
30	Dhading	12	6062	1171	979	2949	8141	65	240	497
31	Makawanpur	12	3478	926	402	3122	5627	28	654	291
32	Rautahat	12	9575	1313	1038	1487	9304	105	86	170
33	Bara	12	11306	1564	1198	2262	12644	65	173	273
34	Parsa	12	0	0	0	0	0	0	0	0
35	Chitwan	12	23680	8830	3691	6995	12520	737	1399	875
	Central	228	180812	47024	36000	52181	153079	2158	8049	12930
36	Gorkha	12	6413	923	316	2135	6788	14	91	82
37	Lamjung	12	8420	1897	1135	1648	6266	292	1154	24
38	Tanahu	12	4050	635	543	833	3386	37	276	107
39	Syangja	12	5229	569	327	1340	3842	17	107	73
40	Kaski	12	9572	2638	11110	7228	9383	431	1985	1185
41	Manang	12	458	58	51	43	564	1	0	0
42	Mustang	12	560	36	38	141	587	0	1	5
43	Myagdi	12	2904	182	178	548	3485	80	11	4917
44	Parbat	12	3391	342	166	665	3269	3	192	269
45	Baglung	12	6786	657	404	1662	5214	35	25	18
46	Gulmi	12	3932	240	125	505	1321	3	0	0
47	Palpa	12	8194	2605	1668	1124	6502	111	1318	856
48	Nawalparasi	12	5818	1058	341	2836	9783	38	15	55
49	Rupandehi	12	0	0	0	0	0	0	0	0
50	Kapilvastu	12	9756	2309	1747	3046	12915	277	249	167
51	Arghakhanchi	12	2764	421	126	614	2945	26	4	6
	Western	192	78247	14570	18275	24368	76250	1365	5428	7764
52	Pyuthan	12	3780	534	186	1195	6026	18	18	7
53	Rolpa	12	2611	243	60	722	4272	13	21	13
54	Rukum	12	3560	432	178	597	3101	1	12	1
55	Salyan	12	5039	677	899	1111	4903	40	68	57
56	Dang	12	8020	2033	1244	3242	7290	134	66	103
57	Banke	12	4939	784	166	6482	20635	193	19442	186
58	Bardiya	12	5342	1428	402	3365	6697	65	244	137
59	Surkhet	12	10208	2564	1500	2839	11255	41	1378	97
60	Dailekh	12	4255	362	488	1208	5706	13	23	38
61	Jajarkot	12	3298	481	301	380	2932	44	85	129
62	Dolpa	12	767	66	49	44	1649	11	11	22
63	Jumla	12	2024	271	231	332	2481	99	5	33
64	Kailikot	12	2336	356	183	573	1794	136	29	78
65	Mugu	12	1625	198	199	108	1111	59	31	20
66	Humla	12	1895	453	397	417	3303	0	0	10
	Mid Western	180	59699	10882	6483	22615	83155	867	21433	931
67	Bajura	12	3041	301	153	271	3404	6	80	144
68	Bajhang	12	5204	451	334	636	3424	176	27	228
69	Achham	12	5102	378	211	1024	8449	30	19	153
70	Doti	12	5190	326	245	1087	6772	91	23	30
71	Kailali	12	3789	604	532	2357	8181	19	92	111
72	Kanchanpur	12	3637	899	388	2001	4751	0	3	21
73	Dadeldhura	12	3515	293	187	491	3011	58	63	162
74	Baitadi	12	6337	325	151	1297	4033	12	26	48
75	Darchula	12	5154	359	202	379	3290	9	20	18
	Far Western	108	40969	3936	2403	9543	45315	401	353	915

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	197	300	21	79	123	27	23	194	103	17	37	304	612	384
	Hill	468	936	1127	592	1411	1834	238	216	957	689	151	281	970	4340	2985
	Terai	240	997	1327	290	1713	2699	303	165	1831	921	110	364	971	7697	1608
	National Total	900	2130	2754	903	3203	4656	568	404	2982	1713	278	682	2245	12649	4977
1	Taplejung	12	1	3	0	12	19	0	1	6	3	0	0	16	4	17
2	Panchthar	12	5	7	0	0	2	0	0	23	2	0	0	22	24	19
3	Ilam	12	10	7	0	1	28	5	0	36	2	0	0	14	4	10
4	Jhapa	12	58	76	13	17	84	1	0	13	1	0	1	35	17	135
5	Morang	12	198	158	153	263	281	93	47	353	185	16	134	122	344	72
6	Sunsari	12	3	25	0	2	0	0	7	18	4	0	1	70	144	1
7	Dhankuta	12	13	32	0	32	37	1	0	48	0	1	30	14	5	33
8	Tehrathum	12	1	4	1	0	1	0	0	5	1	0	0	3	0	5
9	Sankhuwasabha	12	4	8	0	2	3	0	0	6	3	1	4	16	18	19
10	Bhojpur	12	9	3	1	6	0	2	0	2	5	0	2	12	5	42
11	Solukhumbu	12	9	6	0	1	0	0	0	5	20	3	5	16	57	10
12	Okhaldhunga	12	2	15	0	0	0	2	1	15	3	0	0	46	12	11
13	Khotang	12	9	9	0	0	13	0	0	12	0	0	4	44	4	3
14	Udaypur	12	7	14	5	17	30	2	8	62	10	0	0	61	11	61
15	Saptari	12	25	14	2	30	4	3	2	9	1	0	11	15	38	23
16	Siraha	12	69	114	21	114	284	49	30	45	6	3	15	37	57	66
	Eastern	192	423	495	196	497	786	158	96	658	246	24	207	543	744	527
17	Dhanusha	12	15	14	6	33	37	6	7	18	7	19	6	43	25	54
18	Mahottari	12	145	230	12	74	9	4	6	126	37	3	10	50	58	82
19	Sarlahi	12	17	58	0	17	10	3	4	40	8	4	3	37	60	17
20	Sindhuli	12	22	34	5	3	1	7	1	39	4	8	6	59	2	21
21	Ramechhap	12	11	27	2	15	1	0	0	24	5	0	0	9	14	11
22	Dolkha	12	16	16	8	20	20	13	10	86	41	3	2	19	23	35
23	Sindhupalchowk	12	6	29	2	14	68	2	3	42	6	0	4	44	379	40
24	Kavre	12	4	49	2	2	9	4	1	48	15	0	3	19	11	93
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	1	1	1	11	24	0	0	0	0	0	0	0	9	10
27	Kathmandu	12	285	113	223	679	934	45	61	48	76	17	41	63	1468	910
28	Nuwakot	12	1	9	12	162	13	0	1	6	1	0	3	37	64	34
29	Rasuwa	12	1	7	0	0	0	0	0	0	0	0	2	1	1	5
30	Dhading	12	32	38	2	13	35	1	3	131	24	0	19	54	585	146
31	Makawanpur	12	5	16	0	7	5	8	3	15	4	0	10	16	104	11
32	Rautahat	12	51	74	0	115	14	3	8	54	266	3	6	23	1	41
33	Bara	12	31	38	2	23	20	2	13	60	19	4	1	27	16	55
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	134	241	61	897	1467	121	32	830	255	54	123	310	1795	185
	Central	228	777	994	338	2085	2667	219	153	1567	768	115	239	811	4615	1750
36	Gorkha	12	3	3	0	10	3	0	0	28	1	0	0	17	10	5
37	Lamjung	12	1	1	0	3	9	0	0	0	0	0	1	0	4	34
38	Tanahu	12	9	17	8	27	12	3	1	27	31	5	5	32	51	32
39	Syangja	12	3	7	0	65	25	2	0	4	3	0	1	30	155	78
40	Kaski	12	81	75	108	196	262	48	29	32	62	33	10	59	615	286
41	Manang	12	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	1	0
43	Myagdi	12	24	23	0	2	9	2	0	2	4	1	3	5	3	19
44	Parbat	12	2	1	0	0	2	0	0	0	0	0	1	4	6	1
45	Baglung	12	27	19	2	5	8	2	1	18	9	0	0	22	62	35
46	Gulmi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	13
47	Palpa	12	24	73	22	48	28	21	24	123	297	2	13	40	252	207
48	Nawalparasi	12	9	20	8	23	39	3	1	20	5	1	18	34	9	38
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	68	26	0	52	331	0	0	18	1	2	1	14	3	14
51	Arghakhanchi	12	2	10	6	3	9	2	0	16	2	0	3	7	83	16
	Western	192	253	275	154	434	737	83	56	288	415	44	56	264	1254	778
52	Pyuthan	12	4	20	0	1	0	0	2	8	2	1	1	12	3	5
53	Rolpa	12	7	12	0	0	0	1	1	11	5	2	5	22	2	22
54	Rukum	12	20	24	33	3	233	0	0	23	5	0	2	22	28	135
55	Salyan	12	5	19	0	5	1	0	0	7	4	0	1	5	0	6
56	Dang	12	45	98	9	11	30	10	7	107	51	0	12	96	79	291
57	Banke	12	4	7	0	4	4	1	0	16	13	0	0	13	19	3
58	Bardiya	12	49	38	0	23	55	3	0	68	44	0	6	15	72	80
59	Surkhet	12	38	45	2	4	1	17	1	22	11	0	8	45	83	95
60	Dailekh	12	13	27	1	27	31	2	2	5	7	0	8	18	81	55
61	Jajarkot	12	27	48	1	12	0	0	1	14	2	0	6	28	12	67
62	Dolpa	12	4	14	0	0	0	1	0	2	0	1	0	1	0	1
63	Jumla	12	6	14	0	0	0	0	0	3	2	0	0	16	17	13
64	Kalikot	12	20	30	0	4	0	1	0	9	6	0	5	84	15	18
65	Mugu	12	3	2	0	0	0	0	0	0	0	0	0	3	2	21
66	Humla	12	18	25	0	0	0	0	0	2	1	0	0	33	0	6
	Mid Western	180	263	423	46	94	355	36	14	297	153	4	54	413	413	818
67	Bajura	12	23	59	2	0	2	1	6	1	1	0	2	22	7	18
68	Bajhang	12	76	78	9	26	7	4	3	27	11	5	12	27	85	168
69	Achham	12	29	48	1	1	5	0	1	2	4	1	18	10	44	158
70	Doti	12	55	39	2	8	1	5	1	11	0	0	4	30	127	126
71	Kailali	12	10	54	1	8	25	1	0	15	12	1	5	17	2760	65
72	Kanchanpur	12	66	42	2	7	5	0	1	21	6	0	11	13	2200	386
73	Dadeldhura	12	135	209	152	40	62	56	72	86	82	80	66	63	66	116
74	Baitadi	12	10	29	0	3	0	0	1	4	6	0	7	26	331	54
75	Darchula	12	10	9	0	0	4	5	0	5	9	4	1	6	3	13
	Far Western	108	414	567	169	93	111	72	85	172	131	91	126	214	5623	1104

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District Code	District Name	Received Reports	Gyne Problems								Mental Health related problems						
			Prolapsed uterus	Pelvic Inflammatory Disease (PID)	Leukorrhoea (Vaginal discharge syndrome)	Menstrual disorder	Distfunctional uterine bleeding	Breast lumps / Breast Abscess	Mastitis (Ingorged breast)		Dipression	Psychosis	Anxiety (Neurosis)	Mental retardation	Conversive disorder (Hysteria)	Alcoholism	Eplepsy
	Mountain	192	1270	10188	3741	4043	2142	1101	673		1012	243	1270	63	403	746	681
	Hill	468	12595	65758	41231	32271	17086	8595	4353		21824	6941	24813	2270	4357	8822	11683
	Terai	240	4878	34507	43055	25142	13170	6370	2233		16700	4176	9423	6598	7046	5414	7118
	National Total	900	18743	110453	88027	61456	32398	16066	7259		39536	11360	35506	8931	11806	14982	19482
1	Taplejung	12	4	1402	95	178	106	68	47		29	1	71	2	38	85	6
2	Panchthar	12	110	478	255	319	225	59	32		51	1	50	1	3	36	58
3	Ilam	12	63	586	289	339	230	65	63		80	2	186	8	17	55	27
4	Jhapa	12	314	2394	2370	1612	932	404	179		628	15	765	13	63	307	29
5	Morang	12	666	2458	2032	3728	1305	802	367		7237	510	2867	4823	4598	1447	4617
6	Sunsari	12	96	834	1180	936	428	173	69		117	12	339	2	16	130	5
7	Dhankuta	12	207	709	351	364	189	134	78		223	28	144	4	25	305	19
8	Teharhum	12	72	392	122	194	167	61	20		22	0	14	4	22	36	5
9	Sankhuwasabha	12	102	787	349	489	270	167	85		63	5	18	1	34	103	25
10	Bhojpur	12	101	370	230	833	151	181	75		11	0	41	0	10	40	73
11	Solukhumbu	12	88	385	198	427	191	61	57		86	80	95	2	1	40	290
12	Okhaldhunga	12	143	829	227	578	153	151	40		888	367	798	4	4	53	304
13	Khotang	12	56	1080	390	472	230	190	70		33	0	56	3	78	37	1
14	Udaypur	12	380	1213	1132	906	357	365	157		197	12	120	18	46	111	36
15	Saptari	12	177	372	1286	726	273	181	70		140	12	10	2	5	14	5
16	Siraha	12	161	890	1462	887	647	323	91		172	27	128	20	61	164	41
	Eastern	192	2740	15179	11968	12988	5854	3385	1500		9977	1072	5702	4907	5021	2963	5541
17	Dhanusha	12	159	723	1300	709	404	159	66		158	61	104	24	16	84	19
18	Mahottari	12	430	1742	1948	1397	510	252	73		253	86	355	78	65	161	35
19	Sarlahi	12	101	733	1921	1266	293	249	70		109	13	111	131	39	92	57
20	Sindhuli	12	119	432	367	370	129	140	51		42	7	74	7	24	48	23
21	Ramechhap	12	285	1160	482	1149	336	162	153		229	48	179	10	17	63	35
22	Dolkha	12	207	1846	263	1350	227	122	77		77	12	194	8	95	83	248
23	Sindhupalchowk	12	323	1019	681	455	406	163	93		193	69	284	24	97	132	17
24	Kavre	12	862	3512	1277	2004	769	409	248		2082	10	619	4	29	883	74
25	Lalitpur	12	0	0	0	0	0	0	0		0	0	0	0	0	0	0
26	Bhaktapur	12	89	1603	1402	950	252	184	64		308	41	271	30	156	147	33
27	Kathmandu	12	1672	6518	5545	7025	2931	1403	825		5895	2090	3925	767	1347	1581	4031
28	Nuwakot	12	351	1466	1008	544	379	215	76		107	104	91	24	52	259	36
29	Rasuwa	12	6	271	65	138	56	44	28		14	12	41	2	2	4	11
30	Dhading	12	646	2764	1850	1408	977	461	205		453	62	572	87	125	210	154
31	Makawanpur	12	213	812	954	413	473	199	87		220	153	253	0	14	70	431
32	Rautahat	12	227	875	1506	756	236	195	72		129	0	73	14	12	11	3
33	Bara	12	105	1100	1454	930	251	173	61		172	47	95	30	16	154	82
34	Parsa	12	0	0	0	0	0	0	0		0	0	0	0	0	0	0
35	Chitwan	12	1486	6594	5024	3577	2651	1820	403		5481	3225	2832	1129	1586	1754	1108
	Central	228	7281	33170	27047	24441	11280	6350	2652		15922	6040	10073	2369	3692	5736	6397
36	Gorkha	12	601	3507	1536	1032	555	346	281		1088	38	342	6	84	79	335
37	Lamjung	12	172	1855	1055	547	259	106	69		101	16	653	8	197	171	319
38	Tanahu	12	251	1809	1417	778	217	159	122		317	38	341	18	115	311	150
39	Syangja	12	224	1541	1202	626	244	158	114		492	25	814	9	176	78	79
40	Kaski	12	1295	6474	5670	3518	1973	942	270		2826	3182	4801	957	748	1823	3256
41	Manang	12	1	34	22	10	1	1	3		2	0	0	0	0	0	1
42	Mustang	12	4	122	51	41	15	8	7		3	0	18	1	2	9	13
43	Myagdi	12	100	607	416	529	152	88	110		59	16	65	4	26	12	3
44	Parbat	12	64	912	506	174	111	57	47		71	10	189	0	8	40	2
45	Baglung	12	403	1723	1284	733	318	164	103		621	49	728	42	29	172	81
46	Gulmi	12	71	522	199	109	81	84	27		539	28	149	0	19	8	31
47	Palpa	12	762	4083	1971	1404	951	339	121		2784	218	6221	59	519	1387	1085
48	Nawalparasi	12	76	1736	3775	1634	614	191	78		99	3	228	9	45	78	76
49	Rupandehi	12	0	0	0	0	0	0	0		0	0	0	0	0	0	0
50	Kapilvastu	12	79	1800	3412	1703	517	200	178		361	2	192	17	12	38	17
51	Arghakhanchi	12	76	1333	609	222	179	94	34		195	10	284	11	6	28	10
	Western	192	4179	28058	23125	13060	6187	2937	1564		9558	3635	15025	1141	1986	4234	5458
52	Pyuthan	12	193	1785	985	414	294	286	72		258	60	228	4	22	152	159
53	Rolpa	12	136	932	602	567	305	135	107		287	10	209	2	18	42	41
54	Rukum	12	487	1735	882	370	334	106	65		117	36	432	5	61	52	52
55	Salyan	12	372	1917	931	430	230	83	36		72	9	243	5	13	33	33
56	Dang	12	382	2804	2601	987	841	435	152		655	104	767	59	246	484	240
57	Banke	12	61	872	1658	472	378	101	46		33	6	83	6	3	9	54
58	Bardiya	12	146	2357	3835	1362	802	344	139		228	19	192	19	55	27	124
59	Surkhet	12	355	3228	2170	695	621	270	109		253	12	288	18	45	77	73
60	Dailekh	12	284	1407	768	278	482	120	45		87	12	169	11	42	44	19
61	Jajarkot	12	581	1123	648	350	193	125	101		62	34	93	2	29	58	13
62	Dolpa	12	21	261	74	45	8	25	8		5	0	2	1	10	162	1
63	Jumla	12	19	600	276	38	27	33	10		3	1	7	0	0	2	1
64	Kalikot	12	120	638	324	188	183	113	62		23	4	37	4	12	18	12
65	Mugu	12	15	251	85	9	2	28	8		12	0	10	1	0	17	5
66	Humla	12	16	660	328	184	112	100	66		12	0	1	2	1	7	1
	Mid Western	180	3188	20570	16167	6389	4812	2304	1026		2107	307	2761	139	557	1184	828
67	Bajura	12	34	562	268	190	193	57	60		7	0	14	0	6	3	2
68	Bajhang	12	270	976	568	251	231	88	50		458	58	460	15	92	80	48
69	Achham	12	195	2234	788	508	712	190	91		446	130	825	16	82	22	399
70	Doti	12	228	782	412	240	238	132	47		75	4	100	0	24	142	42
71	Kailali	12	135	3947	3432	1291	1335	212	72		707	28	279	220	169	376	583
72	Kanchanpur	12	77	2276	2859	1169	753	156	47		21	6	3	2	39	84	23
73	Dadeldhura	12	114	1032	781	557	426	145	112		219	79	231	122	118	157	153
74	Baitadi	12	262	1293	518	322	263	87	26		14	0	15	0	7	0	8
75	Darchula	12	40	374	94	50	114	23	12		25	1	18	0	13	1	0
	Far Western	108	1355	13476	9720	4578	4265	1090	517		1972	306	1945	375	550	865	1258

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 (CCF)	COPD (Corpomonale)	Acute rheumatic fever	Rheumatic heart disease	Ischemic heart disease	Other cardiovascular problems
	Mountain	192	27	25	14	24	12578	657	19843	997	322	48	198
	Hill	468	1419	1007	1529	7491	123180	7604	120436	8080	7326	7463	9966
	Terai	240	152	294	406	749	96710	3090	78298	4903	4456	2424	3458
	National Total	900	1598	1326	1949	8264	232468	11351	218577	13980	12104	9935	13622
1	Taplejung	12	12	20	0	5	1284	46	488	92	25	4	16
2	Panchthar	12	1	0	0	1	1469	6	689	22	5	6	14
3	Ilam	12	0	0	0	7	2286	52	761	97	31	1	41
4	Jhapa	12	1	0	0	1	7223	11	4662	83	8	31	28
5	Morang	12	1	12	23	40	20422	771	11185	638	772	605	675
6	Sunsari	12	1	0	0	6	3865	154	2184	108	21	68	183
7	Dhankuta	12	0	0	0	8	1537	22	755	73	24	2	37
8	Tehrathum	12	1	0	1	0	1064	30	694	89	3	0	1
9	Sankhuwasabha	12	0	1	0	0	1107	6	1466	55	12	0	9
10	Bhojpur	12	0	1	1	7	1153	38	805	89	14	0	8
11	Solukhumbu	12	0	0	0	1	3875	105	1125	198	135	23	34
12	Okhaldhunga	12	1	0	0	0	1621	380	1947	54	118	3	125
13	Khotang	12	0	0	0	0	1238	0	1372	157	37	0	0
14	Udaypur	12	0	1	0	0	1839	24	2236	181	17	0	9
15	Saptari	12	0	0	0	0	3869	19	3984	118	50	5	12
16	Siraha	12	2	18	0	1	4873	85	4191	222	39	11	11
	Eastern	192	20	53	25	77	58725	1749	38544	2276	1311	759	1203
17	Dhanusha	12	5	0	1	3	4772	258	3648	264	187	42	54
18	Mahottari	12	1	0	2	3	5919	99	2278	152	176	1	49
19	Sarlahi	12	5	3	0	2	3728	94	3736	338	18	1	22
20	Sindhuli	12	1	2	0	3	1938	16	1037	34	44	31	8
21	Ramechhap	12	0	0	0	2	1848	23	1647	43	83	2	14
22	Dolkha	12	0	2	4	1	1895	69	2452	73	65	4	12
23	Sindhupalchowk	12	6	0	0	2	1672	46	4539	139	30	4	32
24	Kavre	12	0	0	3	1	4892	200	6419	46	423	424	389
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	1	1	0	2	3867	136	3497	58	38	8	181
27	Kathmandu	12	238	236	391	1009	30924	1734	15904	1851	1418	2790	3481
28	Nuwakot	12	7	2	2	3	2882	331	4206	101	25	0	26
29	Rasuwa	12	1	0	0	4	231	3	508	4	1	4	29
30	Dhading	12	5	2	2	4	3655	190	3789	96	211	53	214
31	Makawanpur	12	10	7	1	9	1869	48	1974	9	11	2	5
32	Rautahat	12	0	0	10	0	3620	16	2663	258	167	17	48
33	Bara	12	2	0	0	0	3188	89	2913	477	24	14	40
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	123	261	367	680	17001	844	12731	1046	2298	1376	1874
	Central	228	405	516	783	1728	93901	4196	73941	4989	5219	4773	6478
36	Gorkha	12	1	0	0	5	3296	71	4717	168	820	24	74
37	Lamjung	12	1	0	7	0	2939	188	2449	398	136	22	88
38	Tanahu	12	61	1	11	2	3647	153	3497	530	297	38	141
39	Syangja	12	1	0	0	2	4975	50	2909	15	22	4	43
40	Kaski	12	1052	677	1033	6115	16371	2104	16046	1808	2145	3518	3927
41	Manang	12	0	0	0	0	316	1	154	0	1	0	0
42	Mustang	12	0	0	0	0	850	0	79	3	0	0	2
43	Myagdi	12	0	0	0	5	691	22	695	33	33	23	11
44	Parbat	12	1	0	0	1	2029	35	1351	34	1	0	83
45	Baglung	12	2	1	19	4	3205	161	3935	68	65	7	49
46	Gulmi	12	0	0	0	0	2944	55	2079	45	27	2	169
47	Palpa	12	7	43	16	208	7755	834	6058	37	585	307	432
48	Nawalparasi	12	0	0	0	0	3762	66	3172	170	101	2	46
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	0	0	0	1	2817	107	4339	237	52	0	23
51	Arghakhanchi	12	5	0	0	1	2148	35	2908	80	17	0	23
	Western	192	1131	722	1086	6344	57745	3882	54388	3626	4302	3947	5111
52	Pyuthan	12	0	0	17	1	1883	0	2667	63	9	2	2
53	Rolpa	12	0	9	0	10	182	172	492	449	57	6	59
54	Rukum	12	2	3	6	10	593	104	1338	175	154	23	5
55	Salyan	12	0	1	0	1	615	62	2533	193	62	2	26
56	Dang	12	0	0	0	0	3815	112	2803	174	153	7	131
57	Banke	12	1	0	0	0	1078	1	2482	112	0	0	21
58	Bardiya	12	2	0	0	7	2788	28	3723	110	1	0	4
59	Surkhet	12	4	0	0	1	1685	2	3466	266	9	7	36
60	Dailekh	12	0	4	3	4	411	44	2147	138	47	4	40
61	Jajarkot	12	10	6	0	10	271	48	1494	121	23	0	9
62	Dolpa	12	0	0	0	0	87	5	305	2	0	0	0
63	Jumla	12	0	0	0	0	109	46	1313	93	8	0	3
64	Kalikot	12	1	0	8	0	168	207	1414	178	13	1	10
65	Mugu	12	0	0	0	1	38	1	747	17	0	0	0
66	Humla	12	0	0	0	0	233	0	1616	30	0	0	0
	Mid Western	180	20	23	34	45	13956	832	28540	2121	536	52	346
67	Bajura	12	7	0	0	3	193	26	1382	83	18	6	27
68	Bajhang	12	0	2	2	7	322	42	1613	28	12	2	24
69	Achham	12	0	4	2	14	1537	49	4126	52	132	19	37
70	Doti	12	5	0	13	8	841	66	2108	99	30	7	10
71	Kailali	12	8	0	1	4	3177	312	4538	353	389	244	237
72	Kanchanpur	12	0	0	2	1	793	24	3066	43	0	0	0
73	Dadeldhura	12	2	6	1	30	639	111	2311	260	142	126	116
74	Baitadi	12	0	0	0	3	441	8	3378	48	11	0	33
75	Darchula	12	0	0	0	0	198	54	642	2	2	0	0
	Far Western	108	22	12	21	70	8141	692	23164	968	736	404	484

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 (CCF)	COPD (Cor pulmonale)	Acute rheumatic fever	Rheumatic heart disease	Ischemic heart disease	Other cardiovascular problems
	Mountain	192	27	25	14	24	12578	657	19843	997	322	48	198
	Hill	468	1419	1007	1529	7491	123180	7604	120436	8080	7326	7463	9966
	Terai	240	152	294	406	749	96710	3090	78298	4903	4456	2424	3458
	National Total	900	1598	1326	1949	8264	232468	11351	218577	13980	12104	9935	13622
1	Taplejung	12	12	20	0	5	1284	46	488	92	25	4	16
2	Panchthar	12	1	0	0	1	1469	6	689	22	5	6	14
3	Ilam	12	0	0	0	7	2286	52	761	97	31	1	41
4	Jhapa	12	1	0	0	1	7223	11	4662	83	8	31	28
5	Morang	12	1	12	23	40	20422	771	11185	638	772	605	675
6	Sunsari	12	1	0	0	6	3865	154	2184	108	21	68	183
7	Dhankuta	12	0	0	0	8	1537	22	755	73	24	2	37
8	Tehrathum	12	1	0	1	0	1064	30	694	89	3	0	1
9	Sankhuwasabha	12	0	1	0	0	1107	6	1466	55	12	0	9
10	Bhojpur	12	0	1	1	7	1153	38	805	89	14	0	8
11	Solukhumbu	12	0	0	0	1	3875	105	1125	198	135	23	34
12	Okhaldhunga	12	1	0	0	0	1621	380	1947	54	118	3	125
13	Khotang	12	0	0	0	0	1238	0	1372	157	37	0	0
14	Udaypur	12	0	1	0	0	1839	24	2236	181	17	0	9
15	Saptari	12	0	0	0	0	3869	19	3984	118	50	5	12
16	Siraha	12	2	18	0	1	4873	85	4191	222	39	11	11
	Eastern	192	20	53	25	77	58725	1749	38544	2276	1311	759	1203
17	Dhanusha	12	5	0	1	3	4772	258	3648	264	187	42	54
18	Mahottari	12	1	0	2	3	5919	99	2278	152	176	1	49
19	Sarlahi	12	5	3	0	2	3728	94	3736	338	18	1	22
20	Sindhuli	12	1	2	0	3	1938	16	1037	34	44	31	8
21	Ramechhap	12	0	0	0	2	1848	23	1647	43	83	2	14
22	Dolkha	12	0	2	4	1	1895	69	2452	73	65	4	12
23	Sindhupalchowk	12	6	0	0	2	1672	46	4539	139	30	4	32
24	Kavre	12	0	0	3	1	4892	200	6419	46	423	424	389
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	1	1	0	2	3867	136	3497	58	38	8	181
27	Kathmandu	12	238	236	391	1009	30924	1734	15904	1851	1418	2790	3481
28	Nuwakot	12	7	2	2	3	2882	331	4206	101	25	0	26
29	Rasuwa	12	1	0	0	4	231	3	508	4	1	4	29
30	Dhading	12	5	2	2	4	3655	190	3789	96	211	53	214
31	Makawanpur	12	10	7	1	9	1869	48	1974	9	11	2	5
32	Rautahat	12	0	0	10	0	3620	16	2663	258	167	17	48
33	Bara	12	2	0	0	0	3188	89	2913	477	24	14	40
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	123	261	367	680	17001	844	12731	1046	2298	1376	1874
	Central	228	405	516	783	1728	93901	4196	73941	4989	5219	4773	6478
36	Gorkha	12	1	0	0	5	3296	71	4717	168	820	24	74
37	Lamjung	12	1	0	7	0	2939	188	2449	398	136	22	88
38	Tanahu	12	61	1	11	2	3647	153	3497	530	297	38	141
39	Syangja	12	1	0	0	2	4975	50	2909	15	22	4	43
40	Kaski	12	1052	677	1033	6115	16371	2104	16046	1808	2145	3518	3927
41	Manang	12	0	0	0	0	316	1	154	0	1	0	0
42	Mustang	12	0	0	0	0	850	0	79	3	0	0	2
43	Myagdi	12	0	0	0	5	691	22	695	33	33	23	11
44	Parbat	12	1	0	0	1	2029	35	1351	34	1	0	83
45	Baglung	12	2	1	19	4	3205	161	3935	68	65	7	49
46	Gulmi	12	0	0	0	0	2944	55	2079	45	27	2	169
47	Palpa	12	7	43	16	208	7755	834	6058	37	585	307	432
48	Nawalparasi	12	0	0	0	0	3762	66	3172	170	101	2	46
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	0	0	0	1	2817	107	4339	237	52	0	23
51	Arghakhanchi	12	5	0	0	1	2148	35	2908	80	17	0	23
	Western	192	1131	722	1086	6344	57745	3882	54388	3626	4302	3947	5111
52	Pyuthan	12	0	0	17	1	1883	0	2667	63	9	2	2
53	Rolpa	12	0	9	0	10	182	172	492	449	57	6	59
54	Rukum	12	2	3	6	10	593	104	1338	175	154	23	5
55	Salyan	12	0	1	0	1	615	62	2533	193	62	2	26
56	Dang	12	0	0	0	0	3815	112	2803	174	153	7	131
57	Banke	12	1	0	0	0	1078	1	2482	112	0	0	21
58	Bardiya	12	2	0	0	7	2788	28	3723	110	1	0	4
59	Surkhet	12	4	0	0	1	1685	2	3466	266	9	7	36
60	Dailekh	12	0	4	3	4	411	44	2147	138	47	4	40
61	Jajarkot	12	10	6	0	10	271	48	1494	121	23	0	9
62	Dolpa	12	0	0	0	0	87	5	305	2	0	0	0
63	Jumla	12	0	0	0	0	109	46	1313	93	8	0	3
64	Kalikot	12	1	0	8	0	168	207	1414	178	13	1	10
65	Mugu	12	0	0	0	1	38	1	747	17	0	0	0
66	Humla	12	0	0	0	0	233	0	1616	30	0	0	0
	Mid Western	180	20	23	34	45	13956	832	28540	2121	536	52	346
67	Bajura	12	7	0	0	3	193	26	1382	83	18	6	27
68	Bajhang	12	0	2	2	7	322	42	1613	28	12	2	24
69	Achham	12	0	4	2	14	1537	49	4126	52	132	19	37
70	Doti	12	5	0	13	8	841	66	2108	99	30	7	10
71	Kailali	12	8	0	1	4	3177	312	4538	353	389	244	237
72	Kanchanpur	12	0	0	2	1	793	24	3066	43	0	0	0
73	Dadeldhura	12	2	6	1	30	639	111	2311	260	142	126	116
74	Baitadi	12	0	0	0	3	441	8	3378	48	11	0	33
75	Darchula	12	0	0	0	0	198	54	642	2	2	0	0
	Far Western	108	22	12	21	70	8141	692	23164	968	736	404	484

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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	5773	138541	43655	55281	128804	3942	47944	26076	718	5056	3185	292	87	201	602
	Hill	468	39245	556856	234783	336644	586936	16726	211887	137181	5286	22608	15867	1549	454	1522	3039
	Terai	240	42708	416720	396285	177203	493123	11855	229389	142052	4025	18904	15477	704	465	2433	2775
	National Total	900	87726	1112117	674723	569128	1208863	32523	489220	305309	10029	46568	34529	2545	1006	4156	6416
1	Taplejung	12	297	11535	1516	2874	5849	711	3056	754	125	291	351	61	49	29	19
2	Panchthar	12	153	8718	5134	3951	6229	116	1788	1310	41	269	306	22	3	15	7
3	Ilam	12	640	8997	3339	5543	7333	252	2830	1291	42	203	102	9	3	1	9
4	Jhapa	12	2082	20361	11694	5385	32679	654	11871	5110	139	725	367	20	6	7	33
5	Morang	12	8902	32392	8989	14878	37036	986	19198	10398	537	898	747	27	3	62	58
6	Sunsari	12	992	21267	32131	8485	24535	584	11932	8466	139	892	187	21	3	0	8
7	Dhankuta	12	877	9244	4620	5565	6926	127	3499	1609	162	258	242	19	0	11	11
8	Tehrathum	12	91	6552	3116	3197	4777	74	1895	1192	50	334	129	10	0	22	41
9	Sankhuwasabha	12	340	12629	2916	6026	11142	210	2968	2385	54	359	242	28	9	32	3
10	Bhojpur	12	272	12370	5930	4835	9423	191	2857	2132	27	360	345	13	5	21	6
11	Solukhumbu	12	258	10253	3957	4706	11253	369	3830	3040	66	515	177	23	6	28	8
12	Okhaldhunga	12	73	19591	4179	5220	12592	181	5270	2344	19	312	294	2	1	13	1
13	Khotang	12	316	20698	1632	4504	14220	390	5296	1846	41	696	393	17	11	42	10
14	Udaypur	12	939	15092	8771	6159	13058	348	6363	2546	25	610	569	42	4	53	1
15	Saptari	12	979	20923	25170	12820	27231	195	12047	12408	90	1066	36	25	9	182	0
16	Siraha	12	2351	25280	30505	8149	27634	621	14845	11945	292	1192	1739	76	14	299	1257
	Eastern	192	19562	255902	153599	102297	251917	6009	109545	68776	1849	8980	6226	415	126	817	1472
17	Dhanusha	12	1229	20475	11171	7852	28031	570	12907	7433	114	866	284	13	30	1	42
18	Mahottari	12	2039	27693	27564	6280	28127	514	12340	7493	189	1319	974	29	32	157	20
19	Sarlahi	12	961	32000	50615	6427	34660	637	16645	10445	234	1310	333	15	20	666	7
20	Sindhuli	12	253	10873	10277	2607	8342	191	4650	1425	19	350	384	6	52	172	128
21	Ramechhap	12	456	15687	8368	7572	12641	456	4208	3669	80	362	572	17	14	21	28
22	Dolkha	12	619	12377	3799	5195	16944	338	3890	2404	87	259	433	58	3	18	123
23	Sindhupalchowk	12	2592	19241	12012	9052	15394	187	4805	4177	22	657	582	10	8	42	264
24	Kavre	12	2241	23076	12001	22213	26698	622	11373	6975	147	1023	557	32	6	77	27
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	1336	8778	9162	7382	11429	339	5011	3340	61	548	477	40	10	9	4
27	Kathmandu	12	10803	35498	16700	28010	46298	1063	19460	10974	890	1882	1812	307	41	29	1083
28	Nuwakot	12	1379	12552	3871	5458	14001	281	4640	2708	98	414	574	7	0	86	17
29	Rasuwa	12	66	4069	1454	2862	4112	67	826	1239	4	134	75	1	0	7	0
30	Dhading	12	2586	19058	6520	15506	21999	406	6400	6865	85	799	1519	118	20	91	406
31	Makawanpur	12	1129	9256	10760	7027	9808	322	4806	2680	55	456	165	28	5	18	1
32	Rautahat	12	1959	23187	46323	6136	23975	629	12477	6433	79	1495	1492	13	151	311	39
33	Bara	12	1296	21770	40440	6857	24757	846	13253	6668	234	1286	2205	10	7	65	8
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	9488	21745	15714	24749	36948	2287	14523	12787	515	1110	391	61	21	172	759
	Central	228	40432	317335	286751	171185	364164	9755	152214	97715	2913	14270	12829	765	420	1942	2956
36	Gorkha	12	376	18868	5115	12773	20197	508	5673	7747	108	576	586	58	0	55	19
37	Lamjung	12	620	14312	13220	8798	16836	201	3585	2475	52	445	301	56	14	39	19
38	Tanahu	12	1588	11168	4208	7202	11795	404	5661	3264	128	433	273	50	5	99	61
39	Syangja	12	710	12887	2326	12921	16140	405	4950	4810	28	562	367	26	3	120	18
40	Kaski	12	6288	20953	10263	21127	32118	662	14772	11476	496	998	579	63	154	96	160
41	Manang	12	41	1107	429	542	1361	12	446	288	0	15	5	0	0	0	0
42	Mustang	12	59	1428	583	1508	1789	50	532	430	18	106	48	0	0	1	0
43	Myagdi	12	116	9372	3160	5513	6265	297	1523	2092	179	400	149	19	9	18	15
44	Parbat	12	269	12950	4872	8765	11607	247	2420	1888	38	307	179	9	5	41	63
45	Baglung	12	536	13889	1270	10987	16301	468	4157	4023	184	650	316	14	19	32	142
46	Gulmi	12	336	8315	1837	6520	14023	367	2000	4097	51	558	145	13	0	1	0
47	Palpa	12	728	17431	6143	16193	23016	307	5488	6219	149	676	629	36	13	174	154
48	Nawalparasi	12	2494	25593	18864	10175	26420	376	10453	7963	341	874	2003	137	135	260	51
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	1708	24772	25597	5553	26304	713	14228	8560	606	1140	125	1	0	18	6
51	Arghakhanchi	12	563	7344	3418	4923	11726	237	3364	4548	65	521	131	14	1	12	1
	Western	192	16432	200389	101305	133500	235898	5254	79252	69880	2443	8261	5836	496	358	966	709
52	Pyuthan	12	701	19621	5063	10782	16147	189	6836	3533	18	765	254	3	0	12	8
53	Rolpa	12	73	7371	6959	5088	9890	3497	2809	2811	933	365	326	102	3	9	36
54	Rukum	12	154	13136	6571	6657	12840	298	4114	1620	42	443	357	9	6	9	0
55	Salyan	12	250	18524	5498	5857	18317	259	8377	2916	176	474	155	1	0	4	9
56	Dang	12	1851	19432	1102	10901	27936	687	11875	6173	250	1085	1223	217	12	83	81
57	Banke	12	1154	21356	8251	7462	22399	306	10501	4626	57	629	56	11	0	0	36
58	Bardiya	12	860	17345	10828	8434	21004	300	10288	6252	49	1142	440	11	0	2	55
59	Surkhet	12	451	15319	22	10307	29009	599	9639	3927	93	1599	233	38	6	48	7
60	Dailekh	12	87	23153	5699	9420	16022	382	5974	3059	119	631	291	50	2	15	30
61	Jajarkot	12	304	9645	2395	2704	9516	734	4778	939	100	508	751	56	8	6	4
62	Dolpa	12	6	4508	687	556	4421	192	1424	297	10	93	95	6	0	1	0
63	Jumla	12	227	6101	837	1883	6025	231	3310	1189	69	345	83	1	3	1	0
64	Kalikot	12	433	7974	1968	2837	7812	295	3303	1574	81	373	262	19	3	6	21
65	Mugu	12	40	3830	213	1023	4164	297	1981	944	59	91	48	0	1	2	0
66	Humla	12	0	5496	11	1487	7088	207	3920	2009	1	793	143	0	2	13	10
	Mid Western	180	6591	192811	56104	85398	212590	8473	89129	41869	2057	9336	4717	524	46	211	297
67	Bajura	12	279	12340	7857	3862	11926	186	5411	1435	19	411	219	30	2	5	1
68	Bajhang	12	416	14177	4390	5707	11641	263	5357	2100	43	357	311	38	1	16	153
69	Achham	12	193	24748	9941	13133	30447	287	9898	6060	116	954	534	54	3	5	25
70	Doti	12	706	18127	8000	7767	15656	365	4775	1881	76	685	334	27	8	18	223
71	Kailali	12	1789	28133	27730	16182	28643	564	12111	5262	139	815	1488	9	17	121	9
72	Kanchanpur	12	574	12996	3597	10478	14804	386	7895	36							

Raw Data
Morbidity Sheet 11 of 11

District Code	District Name	Received Reports	Surgical Problems						Others
			Hernia	Hydrocele	Phimosi/sPar a - Phimosi	Haemorrhoids/ (Piles)	Epedidymiti/s/ Orchiti	Prostatism (BEP/BPH)	
	Mountain	192	500	352	211	1301	274	288	199423
	Hill	468	6963	5352	2597	13007	3041	6683	1548464
	Terai	240	7257	6340	2525	14051	3408	2079	1499271
	National Total	900	14720	12044	5333	28359	6723	9050	3247158
1	Taplejung	12	27	16	7	48	19	9	10578
2	Panchthar	12	8	20	3	58	20	1	9495
3	Ilam	12	10	21	2	65	9	4	18743
4	Jhapa	12	350	524	122	911	175	55	13653
5	Morang	12	633	494	357	748	115	584	57886
6	Sunsari	12	38	44	5	150	25	5	40084
7	Dhankuta	12	88	44	1	143	9	7	17667
8	Teharhum	12	20	20	7	94	11	1	5124
9	Sankhuwasabha	12	51	37	13	106	32	31	35006
10	Bhojpur	12	48	31	13	79	17	27	18979
11	Solukhumbu	12	13	8	12	49	9	5	12671
12	Okhaldhunga	12	12	5	3	76	21	88	27393
13	Khotang	12	21	38	4	110	22	22	17321
14	Udaypur	12	49	39	12	282	27	40	32774
15	Saptari	12	16	17	23	99	14	14	19015
16	Siraha	12	59	49	32	206	29	28	28778
	Eastern	192	1443	1407	616	3224	554	921	365167
17	Dhanusha	12	127	95	61	328	9	12	29106
18	Mahottari	12	120	128	24	400	16	7	24269
19	Sarlahi	12	90	181	38	391	21	15	57686
20	Sindhuli	12	24	15	15	173	24	10	12857
21	Ramechhap	12	56	19	22	136	22	15	22643
22	Dolkha	12	72	32	40	166	33	67	28602
23	Sindhupalchowk	12	178	88	44	180	44	117	22902
24	Kavre	12	329	236	157	553	191	243	58571
25	Lalitpur	12	0	0	0	0	0	0	221276
26	Bhaktapur	12	57	52	20	321	45	60	41242
27	Kathmandu	12	2196	1460	630	2858	337	1933	150402
28	Nuwakot	12	85	177	29	263	31	46	15447
29	Rasuwa	12	3	14	2	40	6	3	4342
30	Dhading	12	133	206	24	366	80	137	26978
31	Makawanpur	12	43	28	30	146	11	20	22876
32	Rautahat	12	40	47	9	175	3	12	23082
33	Bara	12	44	52	11	280	27	3	22761
34	Parsa	12	0	0	0	0	0	0	5288
35	Chitwan	12	4813	2766	1508	6285	2512	1089	108318
	Central	228	8410	5596	2664	13061	3412	3789	898648
36	Gorkha	12	208	86	65	353	70	81	28175
37	Lamjung	12	79	85	63	331	54	95	20514
38	Tanahu	12	118	99	49	283	23	81	17576
39	Syangja	12	21	20	12	174	33	98	25066
40	Kaski	12	2090	1640	896	2788	746	2672	88694
41	Manang	12	1	7	0	10	2	1	614
42	Mustang	12	2	3	1	22	2	1	4193
43	Myagdi	12	15	21	7	55	11	35	16436
44	Parbat	12	22	25	20	86	17	13	16580
45	Baglung	12	109	75	19	256	38	34	31801
46	Gulmi	12	36	19	11	57	3	7	160813
47	Palpa	12	394	195	135	653	744	449	108344
48	Nawalparasi	12	22	38	9	233	12	23	43481
49	Rupandehi	12	0	0	0	0	0	0	741954
50	Kapilvastu	12	87	280	63	511	77	1	18031
51	Arghakhanchi	12	29	18	3	92	13	24	11307
	Western	192	3233	2611	1353	5904	1845	3615	1333579
52	Pyuthan	12	13	19	3	96	26	76	40632
53	Rolpa	12	11	8	22	28	36	20	16324
54	Rukum	12	72	38	62	198	49	24	14665
55	Salyan	12	56	47	4	157	26	10	14464
56	Dang	12	109	260	54	816	94	131	102399
57	Banke	12	187	317	92	344	59	4	24573
58	Bardiya	12	119	246	69	1032	126	38	29924
59	Surkhet	12	121	210	22	431	34	48	63541
60	Dailekh	12	44	38	18	156	15	26	22876
61	Jajarkot	12	63	27	13	169	76	24	11291
62	Dolpa	12	0	7	0	30	2	0	24492
63	Jumla	12	8	16	8	38	0	1	2095
64	Kalikot	12	33	29	19	135	17	6	4957
65	Mugu	12	14	5	3	15	6	5	1496
66	Humla	12	27	31	9	108	10	7	8287
	Mid Western	180	877	1298	398	3753	576	420	382016
67	Bajura	12	3	11	1	60	7	5	14723
68	Bajhang	12	64	48	46	260	80	28	10916
69	Achham	12	80	60	52	315	87	69	38327
70	Doti	12	45	62	75	157	13	82	31156
71	Kailali	12	350	700	40	699	62	40	71926
72	Kanchanpur	12	53	102	8	443	32	18	37057
73	Dadeldhura	12	141	100	58	271	39	48	20354
74	Baitadi	12	17	49	16	178	11	13	29740
75	Darchula	12	4	0	6	34	5	2	13549
	Far Western	108	757	1132	302	2417	336	305	267748

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	99.95	54.32	45.68	0.38	0.02	16.2	0.15	18.88	1.63	9.85	6.24	3.49
	Hill	468	84.55	56.82	43.18	0.45	0.06	12.39	0.24	17.62	2.01	10.19	6.63	4.03
	Terai	240	72.19	54.97	45.03	0.33	0.32	15.03	0.26	15.86	2.97	15.18	4.93	2.9
	National Total	900	79.31	55.75	44.25	0.39	0.17	13.93	0.24	16.91	2.42	12.46	5.81	3.46
1	Taplejung	12	97.27	54.03	45.97	0.56	0.05	16.88	0.1	16.4	1.09	11.27	11.38	3.82
2	Panchthar	12	64.02	54.91	45.09	0.45	0.01	12.48	0.13	18.57	1.27	13.2	12.68	2.8
3	Ilam	12	47.62	56.16	43.84	0.46	0.05	8.84	0.09	19.85	1.78	10.82	11.44	4.23
4	Jhapa	12	59.38	52.91	47.09	0.64	0.19	15.41	0.69	22.86	2.23	14.43	8.78	3.61
5	Morang	12	77.3	54.31	45.69	0.36	0.32	11.67	0.17	16.2	4.36	11.09	5.73	2.29
6	Sunsari	12	57.76	56.86	43.14	0.36	0.33	14.59	0.12	18.77	3.05	15.6	6.2	3.91
7	Dhankuta	12	93.5	55.13	44.87	0.71	0.05	12.11	0.21	19.31	1.44	10.45	12.22	2.86
8	Tehrathum	12	95.39	55.31	44.69	0.6	0.02	13.42	0.03	18.12	1.73	13.54	13.44	3.65
9	Sankhuwasabha	12	106.71	57	43	0.45	0.01	14.2	0.08	15.47	1.11	8.45	8.02	2.4
10	Bhojpur	12	96.43	56.07	43.93	0.44	0.05	12.84	0.06	16.85	1.43	12.88	12.61	3.28
11	Solukhumbu	12	146.61	55.71	44.29	0.24	0	14.6	0.1	16.4	1.6	11.27	9.72	3.92
12	Okhaldhunga	12	137.26	57.56	42.44	0.5	0	11.84	0.01	19.23	1.13	9.46	8.86	2.66
13	Khotang	12	114.1	54.66	45.34	0.34	0	19.48	0.03	18.04	1.4	11.85	10.74	3.45
14	Udaypur	12	77.4	55.35	44.65	0.65	0.08	18.29	0.47	14.55	1.58	12.5	7.94	2.83
15	Saptari	12	76.57	54.38	45.62	0.13	0.35	22.69	0.09	16.86	3.59	17.17	5.45	3.01
16	Siraha	12	83.71	54.7	45.3	0.17	0.19	19.51	0.08	18.1	3.62	17.03	4.91	2.97
	Eastern	192	77.35	55.01	44.99	0.39	0.18	15.65	0.19	17.94	2.66	13.39	7.84	3.11
17	Dhanusha	12	70.06	52.37	47.63	0.13	1.04	20.92	0.32	16.54	3.11	23.8	4.34	3.28
18	Mahottari	12	77.89	52.85	47.15	0.31	0.93	21.98	0.43	17.62	2.88	15.47	4.38	3.02
19	Sarlahi	12	81.49	51.13	48.87	0.17	0.28	19.3	0.11	14.91	3.71	16.03	4.27	3.05
20	Sindhuli	12	51.44	55.14	44.86	0.61	0.31	17.62	0.18	15.83	2.12	13.34	6.87	2.89
21	Ramechhap	12	100.28	59.43	40.57	0.7	0.02	11.18	0.02	17.89	1.35	10.12	8.9	3.95
22	Dolkha	12	111.67	58.28	41.72	0.77	0	13.22	0.23	20.54	0.94	7.83	6.89	4.84
23	Sindhupalchowk	12	88.53	56.92	43.08	0.55	0.03	13.55	0.19	21.35	1.61	8.52	7.4	2.56
24	Kavre	12	123.14	58.31	41.69	0.32	0.03	11.47	0.16	20.78	2.32	7.76	6.91	4.11
25	Lalitpur	12	44.27	57.5	42.5	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	67.77	57.71	42.29	0.58	0	8.65	0.09	16.04	1.28	7.28	7.27	9.73
27	Kathmandu	12	49.38	54.28	45.72	1.13	0.04	8.58	0.44	12.2	2.97	8.56	7.74	9.46
28	Nuwakot	12	77.12	55.58	44.42	0.32	0.05	16.88	0.23	20.25	1.7	10.87	6.51	4.7
29	Rasuwa	12	125.92	55.33	44.67	0.4	0	13	0.09	20.66	2.2	10.26	5.89	3.22
30	Dhading	12	99.99	57.57	42.43	0.65	0.05	14.48	0.32	20.11	2.21	11.36	5.97	3.34
31	Makawanpur	12	45.84	57.42	42.58	0.51	0.09	12.69	0.63	17.51	1.51	12.67	6.57	4.09
32	Rautahat	12	65.63	51.54	48.46	0.12	0.22	20.52	0.2	12.48	4.74	19.62	3.92	2.8
33	Bara	12	68.17	52.04	47.96	0.32	0.4	19.29	0.16	13.13	3.58	21.59	4.18	3.31
34	Parsa	12	0.84	46.37	53.63	0	0	0	0	0	0	0	0	0
35	Chitwan	12	134.77	54.6	45.4	0.71	0.05	9.11	0.39	15.78	3.29	11.31	8.54	5.34
	Central	228	68.95	54.56	45.44	0.49	0.25	14.37	0.27	15.64	2.76	13.06	5.96	4.55
36	Gorkha	12	107.24	58.74	41.26	0.44	0.01	11.94	0.1	20.77	1.63	9.68	7.01	3.45
37	Lamjung	12	133.53	56.98	43.02	0.31	0.01	11.03	0.05	16.31	2.87	11.46	5.77	5.95
38	Tanahu	12	55.91	57.26	42.74	0.55	0.02	11.76	0.31	17.39	2.4	11.57	6.85	3.34
39	Syangja	12	87.59	58.59	41.41	0.41	0	12.02	0.14	22.51	2.32	11.02	8.06	3.03
40	Kaski	12	123.56	55.04	44.96	0.24	0.02	8.83	0.15	16.34	4.04	6.81	7.6	4.78
41	Manang	12	240.03	48.25	51.75	0.16	0	15.25	0.32	15.61	0.86	8.55	7.19	4.81
42	Mustang	12	221.84	50.24	49.76	0.12	0	8.74	0.05	18.41	1.02	7.93	8.47	3.2
43	Myagdi	12	103.85	57.23	42.77	0.36	0	10.35	0.11	19.25	1.29	10.37	6.95	3.16
44	Parbat	12	118.67	57.65	42.35	0.29	0	9.73	0.07	25.11	2.28	9.55	9.24	2.68
45	Baglung	12	98.57	58.6	41.4	0.22	0	14.48	0.3	22.51	1.98	9.51	7.55	3.61
46	Gulmi	12	109.61	56.96	43.04	0.15	0.01	8.32	0.36	10.07	0.85	6.4	3.35	1.59
47	Palpa	12	160.27	57.9	42.1	0.46	0.02	7.66	0.09	13.69	2.75	9.19	5.56	3.29
48	Nawalparasi	12	66.99	58.85	41.15	0.47	0.29	13.39	0.04	19.51	2.46	16.54	5.28	2.27
49	Rupandehi	12	80.2	56.14	43.86	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	80.78	54.55	45.45	0.25	0.15	19.3	0.38	15.29	3.93	19.38	4.83	3.5
51	Arghakhanchi	12	78.71	57.18	42.82	0.46	0.05	15.83	0.8	19.42	1.77	13.65	6.43	2.56
	Western	192	93.82	56.86	43.14	0.29	0.05	10.01	0.17	14.79	2.22	9.49	5.32	2.89
52	Pyuthan	12	116.06	59.18	40.82	0.34	0.05	14.84	0.05	17.56	1.08	14.02	4.97	2.13
53	Rolpa	12	69.34	53.57	46.43	0.32	0.05	17.81	0.16	18.01	1.19	12.24	5.48	2.34
54	Rukum	12	83.12	58	42	0.34	0	17	0.21	19.27	2.3	12.86	4.56	2.69
55	Salyan	12	84.58	58.31	41.69	0.14	0.04	17.12	0.16	19.44	1.78	13.86	5.22	3.39
56	Dang	12	78.96	58.38	41.62	0.56	0.32	12.99	0.38	15.9	2.11	12.64	4.86	3.21
57	Banke	12	79.84	56.24	43.76	0.21	0.07	14.74	0.38	16.93	2.17	21.7	4.3	3
58	Bardiya	12	91.55	57.94	42.06	0.47	0.3	15.01	0.49	20.35	2.78	19.31	5.4	2.64
59	Surkhet	12	109.12	61.29	38.71	0.43	0.56	14.39	0.38	19.54	2.06	12.09	5.1	4.33
60	Dailikh	12	94.81	56.93	43.07	0.36	0.03	18.92	0.24	20.63	1.34	13.23	3.6	2.46
61	Jajarkot	12	76	53.34	46.66	0.14	0	18.18	0.18	16.47	2.11	16.92	4.19	3.25
62	Dolpa	12	159.44	53.07	46.93	0.02	0	17.23	0.03	7.89	0.89	5.24	1.87	1.53
63	Jumla	12	67.58	51.08	48.92	0.18	0.01	19.96	0.17	24.96	2.57	10.15	4.32	3.52
64	Kalikot	12	69.55	51.75	48.25	0.68	0	20.14	0.37	19.19	2.15	12.67	3.95	3.39
65	Mugu	12	81.48	50.99	49.01	0.06	0	20.12	0.15	21.34	2.54	12.85	3.73	4.43
66	Humla	12	175.83	51.12	48.88	0.11	0	21.86	0.13	16.75	2.26	10.98	5.39	3.4
	Mid Western	180	88.44	57.09	42.91	0.35	0.17	16.03	0.29	18.36	1.99	14.71	4.71	3.05
67	Bajura	12	103.15	52.26	47.74	0.25	0.05	19.02	0.16	16.38	2	11.49	3.32	2.56
68	Bajhang	12	83.41	52.45	47.55	0.21	0.02	19.65	0.08	20.99	2.4	10.02	3.39	3.92
69	Achham	12	138.04	57	43	0.22	0.03	15.07	0.56	23.28	1.58	11.18	3.07	1.85
70	Doti	12	108.24	56.21	43.79	0.14	0.1	16.37	0.23	19.65	1.9	8.91	3.65	3.05
71	Kailali	12	61.28	60.74	39.26	0.37	0.65	11.88	0.58	18.84	2.67	13.71	3.67	1.46
72	Kanchanpur	12	62.77	58.34	41.66	0.61	0.05	12.88	0.17	24.01	1.69	15.25	4.44	2.34
73	Dadeldhura	12	121.23	56.02	43.98	0.77	0.21	11.16	0.45	24.03	1.56	9.37	4.15	2.55
74	Baitadi	12	76.18	54.72	45.28	0.09	0.06	13.24	0.3	21.19	1.32	9.12	4.3	4.18
75	Darchula	12	87.61	51.77	48.23	0.06	0.01	13.32	0.08	22.98	1.09	10.63	4.79	5.13
	Far Western	108	82.97	56.72	43.28	0.32	0.2	14.23	0.35	21.21	1.91	11.65	3.78	2.6

Analysed Data
Morbidity Sheet 2 of 2

District Code	District Name	Received Report	% of OPD Visits for								Not Mentioned Others
			Eye Problem	Obstetrics Complications	Gyne Problems	Mental Health related problems	Malignancy	Cardiovascular related problem	Other Diseases and Injuries	Surgical Problems	
	Mountain	192	2.97	0.13	1.28	0.24	0	1.91	25.43	0.16	11.02
	Hill	468	2.47	0.17	1.84	0.82	0.12	2.88	22.01	0.38	15.7
	Terai	240	3.27	0.21	1.29	0.57	0.02	1.94	19.56	0.36	15.01
	National Total	900	2.88	0.19	1.54	0.65	0.06	2.36	21.17	0.35	14.99
1	Taplejung	12	3.45	0.07	1.57	0.19	0.03	1.61	22.7	0.1	8.73
2	Panchthar	12	3.78	0.09	1.23	0.17	0	1.84	23.33	0.09	7.89
3	Ilam	12	2.65	0.08	1.19	0.27	0.01	2.37	22.19	0.08	13.59
4	Jhapa	12	5.12	0.09	1.65	0.37	0	2.42	18.34	0.43	2.75
5	Morang	12	12.53	0.31	1.48	3.4	0.01	4.57	17.59	0.38	7.54
6	Sunsari	12	1.86	0.06	0.81	0.14	0	1.44	23.95	0.06	8.75
7	Dhankuta	12	2.92	0.16	1.35	0.5	0.01	1.63	22.11	0.19	11.78
8	Tehrathum	12	3.59	0.02	1.1	0.11	0	2.01	22.97	0.16	5.48
9	Sankhuwasabha	12	2.5	0.05	1.33	0.15	0	1.57	23.31	0.16	20.74
10	Bhojpur	12	2.9	0.05	1.14	0.1	0.01	1.24	22.83	0.13	11.17
11	Solukhumbu	12	3.74	0.09	0.92	0.39	0	3.58	25.11	0.06	8.26
12	Okhaldhunga	12	2.68	0.05	1.07	1.22	0	2.14	25.25	0.1	13.81
13	Khotang	12	2.46	0.04	1.09	0.09	0	1.23	22.04	0.1	7.62
14	Udaypur	12	2.19	0.12	1.8	0.22	0	1.72	21.8	0.18	13.09
15	Saptari	12	2.06	0.04	0.61	0.04	0	1.6	22.5	0.04	3.78
16	Siraha	12	2.23	0.17	0.81	0.11	0	1.72	23.04	0.07	5.25
	Eastern	192	4.47	0.12	1.17	0.77	0	2.29	21.63	0.18	8
17	Dhanusha	12	1.88	0.05	0.65	0.09	0	1.69	16.71	0.12	5.34
18	Mahottari	12	1.84	0.17	1.26	0.21	0	1.72	22.82	0.14	4.83
19	Sarlahi	12	3.74	0.04	0.7	0.08	0	1.2	23.53	0.11	8.76
20	Sindhuli	12	2.42	0.14	1.05	0.15	0	2.03	25.9	0.17	8.38
21	Ramechhap	12	3.19	0.06	1.87	0.29	0	1.83	27.14	0.14	11.35
22	Dolkha	12	3.79	0.15	1.97	0.34	0	2.2	22.36	0.2	13.74
23	Sindhupalchowk	12	2.65	0.26	1.26	0.33	0	2.59	27.7	0.26	9.19
24	Kavre	12	4.2	0.06	1.97	0.8	0	2.78	23.24	0.37	12.71
25	Lalitpur	12	0	0	0	0	0	0	0	0	100
26	Bhaktapur	12	2.11	0.03	2.07	0.45	0	3.55	21.84	0.25	18.79
27	Kathmandu	12	2.21	0.52	2.72	2.06	0.2	6.09	18.34	0.99	15.77
28	Nuwakot	12	2.97	0.16	1.92	0.32	0.01	3.59	21.88	0.3	7.33
29	Rasuwa	12	4.45	0.03	1.16	0.16	0.01	1.49	28.53	0.13	8.3
30	Dhading	12	2.68	0.32	2.49	0.5	0	2.46	24.67	0.28	8.08
31	Makawanpur	12	3.41	0.11	1.63	0.59	0.01	2.02	24.01	0.14	11.81
32	Rautahat	12	2.02	0.14	0.81	0.05	0	1.42	26.06	0.06	4.82
33	Bara	12	2.67	0.06	0.83	0.12	0	1.37	24.28	0.08	4.62
34	Parsa	12	0	0	0	0	0	0	0	0	100
35	Chitwan	12	1.92	0.8	2.66	2.12	0.18	4.59	17.46	2.35	13.39
	Central	228	2.54	0.25	1.62	0.72	0.05	2.78	21.24	0.53	12.93
36	Gorkha	12	2.46	0.03	2.77	0.69	0	3.23	25.58	0.3	9.92
37	Lamjung	12	3.52	0.02	1.85	0.67	0	2.83	27.71	0.32	9.32
38	Tanahu	12	2.1	0.14	2.62	0.71	0.04	4.58	25.56	0.36	9.69
39	Syangja	12	1.64	0.15	1.67	0.68	0	3.25	22.81	0.15	10.16
40	Kaski	12	2.03	0.3	3.15	2.75	1.39	7.19	18.81	1.7	13.88
41	Manang	12	4.45	0	0.57	0.02	0	3.72	33.48	0.17	4.84
42	Mustang	12	2.45	0	1.02	0.19	0	3.86	27.08	0.13	17.33
43	Myagdi	12	7.05	0.08	1.66	0.15	0	1.25	24.18	0.12	13.64
44	Parbat	12	2.19	0.01	1.1	0.19	0	2.08	25.65	0.11	9.74
45	Baglung	12	2.01	0.08	1.8	0.65	0.01	2.85	20.14	0.2	12.09
46	Gulmi	12	0.44	0	0.36	0.26	0	1.76	12.69	0.04	53.33
47	Palpa	12	2.13	0.28	2.33	2.97	0.07	3.88	18.74	0.62	26.25
48	Nawalparasi	12	2.23	0.05	1.83	0.12	0	1.65	23.97	0.08	9.82
49	Rupandehi	12	0	0	0	0	0	0	0	0	100
50	Kapilvastu	12	2.83	0.11	1.64	0.13	0	1.57	22.73	0.21	3.75
51	Arghakhanchi	12	1.95	0.1	1.66	0.36	0	3.4	24.06	0.12	7.38
	Western	192	1.93	0.11	1.68	0.87	0.2	2.83	18.34	0.4	28.4
52	Pyuthan	12	2.27	0.02	1.5	0.33	0.01	1.73	23.86	0.09	15.16
53	Rolpa	12	2.78	0.06	1.79	0.39	0.01	0.91	25.89	0.08	10.49
54	Rukum	12	1.76	0.3	2.25	0.43	0.01	1.35	26.13	0.25	8.28
55	Salyan	12	2.22	0.02	1.75	0.18	0	1.53	26.66	0.13	6.34
56	Dang	12	1.68	0.19	1.81	0.56	0	1.59	18.29	0.32	22.59
57	Banke	12	9.81	0.02	0.87	0.05	0	0.9	18.64	0.24	5.96
58	Bardiya	12	1.79	0.11	2.25	0.17	0	1.67	19.32	0.41	7.51
59	Surkhet	12	3.23	0.09	1.88	0.19	0	1.38	18.04	0.22	16.07
60	Dailekh	12	2.25	0.11	1.32	0.15	0	1.1	25.25	0.12	8.9
61	Jajarkot	12	2.32	0.16	2.27	0.21	0.02	1.43	23.64	0.27	8.22
62	Dolpa	12	2.79	0.04	0.73	0.3	0	0.66	20.29	0.06	40.42
63	Jumla	12	3.22	0.09	1.23	0.02	0	1.94	25	0.09	2.58
64	Kalikot	12	2	0.19	1.6	0.11	0.01	1.96	26.49	0.23	4.87
65	Mugu	12	2.54	0.06	0.83	0.09	0	1.67	26.38	0.1	3.11
66	Humla	12	3.56	0.09	1.57	0.03	0	2.02	22.75	0.21	8.9
	Mid Western	180	3.26	0.1	1.67	0.24	0	1.42	21.74	0.22	11.69
67	Bajura	12	2.48	0.1	0.93	0.02	0.01	1.18	29.96	0.06	10.03
68	Bajhang	12	2.28	0.32	1.44	0.72	0.01	1.21	26.59	0.31	6.46
69	Achham	12	2.38	0.09	1.3	0.53	0.01	1.64	26.51	0.18	10.54
70	Doti	12	3.08	0.18	0.93	0.17	0.01	1.41	26.14	0.19	13.89
71	Kailali	12	1.69	0.6	2.09	0.47	0	1.85	24.67	0.38	14.42
72	Kanchanpur	12	1.62	0.93	2.48	0.06	0	1.33	19.36	0.22	12.55
73	Dadeldhura	12	1.87	0.73	1.8	0.61	0.02	2.1	26.69	0.37	11.56
74	Baitadi	12	2.12	0.24	1.43	0.02	0	2.02	24.88	0.15	15.33
75	Darchula	12	2.81	0.06	0.6	0.05	0	0.76	26.19	0.04	11.41
	Far Western	108	2.15	0.41	1.6	0.33	0.01	1.58	25.18	0.24	12.24

Raw Data
Free Health Services Sheet 1 of 5

District Code	District Name	Received Reports	OPD						Total
			Hospital					PHC	
			Ultrapoor Destitute	Poor	Disable	Senior Citizen	FCHV		
	Mountain	192	13171	30699	869	3734	831	64475	113779
	Hill	468	170378	31488	4031	67174	3392	343420	619883
	Terai	240	73852	28817	5850	16205	3516	362878	491118
	National Total	900	257401	91004	10750	87113	7739	770773	1224780
1	Taplejung	12	266	12901	8	210	3	0	13388
2	Panchthar	12	9	167	0	574	201	9282	10233
3	Ilam	12	0	13	3	617	14	340	987
4	Jhapa	12	1570	2467	71	1331	45	18152	23636
5	Morang	12	9807	6546	362	3362	92	50686	70855
6	Sunsari	12	0	0	0	0	0	0	0
7	Dhankuta	12	2	3147	0	2068	0	2369	7586
8	Teharthurm	12	1	0	0	0	0	490	491
9	Sankhuwasabha	12	239	239	114	615	57	1463	2727
10	Bhojpur	12	31	184	0	565	2	10519	11301
11	Solukhumbu	12	0	0	0	0	0	1766	1766
12	Okhaldhunga	12	898	1112	10	447	10	0	2477
13	Khotang	12	143	57	42	1267	118	962	2589
14	Udaypur	12	816	552	44	4794	463	0	6669
15	Saptari	12	0	0	0	0	0	31248	31248
16	Siraha	12	13378	11440	1731	1317	101	15346	43313
	Eastern	192	27160	38825	2385	17167	1106	142623	229266
17	Dhanusha	12	0	0	0	0	0	0	0
18	Mahottari	12	328	363	2434	443	36	34528	38132
19	Sarlahi	12	0	0	0	0	0	20420	20420
20	Sindhuli	12	1105	2916	52	672	267	10950	15962
21	Ramechhap	12	577	0	13	534	22	4865	6011
22	Dolkha	12	158	137	28	0	0	0	323
23	Sindhupalchowk	12	379	105	43	918	82	19874	21401
24	Kavre	12	3	1	0	2	0	24618	24624
25	Lalitpur	12	83642	0	0	17765	11	0	101418
26	Bhaktapur	12	0	0	0	0	0	6804	6804
27	Kathmandu	12	0	0	0	0	0	0	0
28	Nuwakot	12	2336	107	0	3444	175	7334	13396
29	Rasuwa	12	449	0	37	269	53	0	808
30	Dhading	12	25969	0	0	0	0	27277	53246
31	Makawanpur	12	0	7	0	0	0	27090	27097
32	Rautahat	12	3097	0	0	0	1619	940	5656
33	Bara	12	0	0	0	0	0	36957	36957
34	Parsa	12	11766	235	25	1586	81	0	13693
35	Chitwan	12	10239	1965	330	4	0	15642	28180
	Central	228	140048	5836	2962	25637	2346	237299	414128
36	Gorkha	12	5404	0	5	3611	27	11214	20261
37	Lamjung	12	4	95	47	1154	14	2796	4110
38	Tanahu	12	6389	38	67	2175	35	14260	22964
39	Syangja	12	230	0	109	3198	146	15348	19031
40	Kaski	12	539	15	12	20	127	2101	2814
41	Manang	12	0	0	0	0	0	0	0
42	Mustang	12	572	2897	3	554	222	2005	6253
43	Myagdi	12	21	0	124	0	0	3677	3822
44	Parbat	12	0	0	0	0	0	1167	1167
45	Baglung	12	0	0	0	0	0	0	0
46	Gulmi	12	5955	52	46	11801	28	3099	20981
47	Palpa	12	2680	62	17	1790	121	3345	8015
48	Nawalparasi	12	26	0	0	49	4	27755	27834
49	Rupandehi	12	376	364	54	347	42	0	1183
50	Kapilvastu	12	0	0	0	0	0	0	0
51	Arghakhanchi	12	2720	2049	292	2366	168	6158	13753
	Western	192	24916	5572	776	27065	934	92925	152188
52	Pyuthan	12	158	1	16	534	12	24517	25238
53	Rolpa	12	882	94	32	524	14	7950	9496
54	Rukum	12	0	0	0	0	0	2954	2954
55	Salyan	12	0	0	0	0	0	11899	11899
56	Dang	12	107	0	0	46	347	42182	42682
57	Banke	12	0	0	0	0	0	919	919
58	Bardiya	12	4693	0	0	0	0	35380	40073
59	Surkhet	12	0	0	0	0	0	56749	56749
60	Dailekh	12	2398	3735	29	1842	92	23784	31880
61	Jajarkot	12	14843	4	99	1289	69	0	16304
62	Dolpa	12	8826	2700	405	415	296	0	12642
63	Jumla	12	0	0	0	0	0	3031	3031
64	Kalikot	12	859	5606	221	603	91	1427	8807
65	Mugu	12	0	0	0	0	0	0	0
66	Humla	12	1423	981	10	150	27	0	2591
	Mid Western	180	34189	13121	812	5403	948	210792	265265
67	Bajura	12	0	0	0	0	0	14555	14555
68	Bajhang	12	0	0	0	0	0	20354	20354
69	Achham	12	5954	2924	2671	2953	407	0	14909
70	Doti	12	865	2998	62	262	89	3487	7763
71	Kailali	12	16047	1009	155	6083	831	5768	29893
72	Kanchanpur	12	2418	4428	688	1637	318	26955	36444
73	Dadeldhura	12	1179	10444	183	641	116	5408	17971
74	Baitadi	12	4625	714	56	265	644	10607	16911
75	Darchula	12	0	5133	0	0	0	0	5133
	Far Western	108	31088	27650	3815	11841	2405	87134	163933

Raw Data
Free Health Services Sheet 2 of 5

District Code	District Name	Received Reports	Emergency						
			Hospital					PHC	Total
			Ultrapoorestitute	Poor	Disable	Senior Citizen	FCHV		
	Mountain	192	1888	4641	199	633	109	4337	11807
	Hill	468	13391	2931	977	5860	720	18921	42800
	Terai	240	13295	2399	793	2510	681	38111	57789
	National Total	900	28574	9971	1969	9003	1510	61369	112396
1	Taplejung	12	125	2814	0	88	0	0	3027
2	Panchthar	12	9	0	0	84	33	1389	1515
3	Ilam	12	0	0	0	0	0	240	240
4	Jhapa	12	12	0	1	2	5	345	365
5	Morang	12	419	698	21	68	80	4291	5577
6	Sunsari	12	0	0	0	0	0	0	0
7	Dhankuta	12	0	301	0	304	0	531	1136
8	Teharthur	12	0	0	0	0	0	0	0
9	Sankhuwasabha	12	70	86	28	114	20	161	479
10	Bhojpur	12	5	0	0	261	2	622	890
11	Solukhumbu	12	14	7	0	0	3	46	70
12	Okhaldhunga	12	11	1	0	1	1	0	14
13	Khotang	12	141	54	28	443	30	0	696
14	Udaypur	12	89	105	7	3	2	0	206
15	Saptari	12	0	0	0	0	0	446	446
16	Siraha	12	5666	87	287	626	5	899	7570
	Eastern	192	6561	4153	372	1994	181	8970	22231
17	Dhanusha	12	0	0	0	0	149	242	391
18	Mahottari	12	2231	30	74	51	9	9715	12110
19	Sarlahi	12	0	0	0	0	0	1032	1032
20	Sindhuli	12	47	107	5	25	7	901	1092
21	Ramechhap	12	704	0	2	322	0	347	1375
22	Dolkha	12	156	0	0	0	0	0	156
23	Sindhupalchowk	12	178	112	31	165	18	2033	2537
24	Kavre	12	4	0	0	1	0	434	439
25	Lalitpur	12	0	0	0	0	0	0	0
26	Bhaktapur	12	0	0	0	0	0	162	162
27	Kathmandu	12	0	0	0	0	0	0	0
28	Nuwakot	12	10	16	0	725	6	370	1127
29	Rasuwa	12	156	0	0	48	3	0	207
30	Dhading	12	2776	0	0	0	0	3352	6128
31	Makawanpur	12	1	86	2	5	2	2010	2106
32	Rautahat	12	160	0	0	0	103	0	263
33	Bara	12	0	0	0	0	0	10796	10796
34	Parsa	12	0	0	0	10	0	0	10
35	Chitwan	12	1787	369	3	0	0	352	2511
	Central	228	8210	720	117	1352	297	31746	42442
36	Gorkha	12	471	685	42	1100	40	401	2739
37	Lamjung	12	0	9	5	50	4	157	225
38	Tanahu	12	1336	0	13	164	0	470	1983
39	Syangja	12	48	0	5	117	5	1620	1795
40	Kaski	12	62	11	8	17	12	322	432
41	Manang	12	0	0	0	0	0	0	0
42	Mustang	12	117	249	0	42	11	91	510
43	Myagdi	12	0	0	0	0	0	40	40
44	Parbat	12	0	0	0	0	0	13	13
45	Baglung	12	0	0	0	0	0	0	0
46	Gulmi	12	983	59	17	667	5	400	2131
47	Palpa	12	144	43	4	101	36	204	532
48	Nawalparasi	12	408	0	0	0	94	1996	2498
49	Rupandehi	12	942	928	366	413	167	0	2816
50	Kapilvastu	12	0	0	0	0	0	0	0
51	Arghakhanchi	12	148	50	9	16	226	463	912
	Western	192	4659	2034	469	2687	600	6177	16626
52	Pyuthan	12	69	0	1	375	1	1116	1562
53	Rolpa	12	183	37	46	69	138	248	721
54	Rukum	12	0	0	0	0	0	228	228
55	Salyan	12	0	0	0	0	0	320	320
56	Dang	12	0	0	0	0	0	6114	6114
57	Banke	12	0	0	0	0	0	0	0
58	Bardiya	12	42	0	0	0	0	827	869
59	Surkhet	12	0	0	0	0	0	1602	1602
60	Dailekh	12	792	240	6	252	11	0	1301
61	Jajarkot	12	2540	0	18	224	13	0	2795
62	Dolpa	12	891	195	111	112	51	0	1360
63	Jumla	12	0	0	0	0	0	15	15
64	Kalikot	12	181	905	29	64	3	177	1359
65	Mugu	12	0	0	0	0	0	0	0
66	Humla	12	0	0	0	0	0	0	0
	Mid Western	180	4698	1377	211	1096	217	10647	18246
67	Bajura	12	0	0	0	0	0	784	784
68	Bajhang	12	0	0	0	0	0	1030	1030
69	Achham	12	1976	0	668	361	38	0	3043
70	Doti	12	87	185	47	24	40	178	561
71	Kailali	12	1426	11	0	1186	32	100	2755
72	Kanchanpur	12	202	276	41	154	37	956	1666
73	Dadeldhura	12	316	887	38	102	30	490	1863
74	Baitadi	12	439	55	6	47	38	291	876
75	Darchula	12	0	273	0	0	0	0	273
	Far Western	108	4446	1687	800	1874	215	3829	12851

Raw Data
Free Health Services Sheet 3 of 5

District Code	District Name	Received Reports	Inpatients						
			Hospital					PHC	Total
			Ultrapoorestitute	Poor	Disable	Senior Citizen	FCHV		
	Mountain	192	1566	3913	106	1015	43	1851	8494
	Hill	468	7276	1285	364	3066	348	6605	18944
	Terai	240	11717	684	212	1487	420	7270	21790
	National Total	900	20559	5882	682	5568	811	15726	49228
1	Taplejung	12	123	2680	0	83	0	0	2886
2	Panchthar	12	3	0	0	0	0	112	115
3	Ilam	12	0	0	0	0	0	7	7
4	Jhapa	12	0	0	0	0	0	0	0
5	Morang	12	3880	54	21	859	6	461	5281
6	Sunsari	12	0	0	0	0	0	0	0
7	Dhankuta	12	0	36	0	54	0	48	138
8	Teharthur	12	0	0	0	0	0	0	0
9	Sankhuwasabha	12	269	28	15	456	4	15	787
10	Bhojpur	12	3	1	0	469	0	502	975
11	Solukhumbu	12	9	14	0	0	4	34	61
12	Okhaldhunga	12	237	230	1	10	2	0	480
13	Khotang	12	0	0	0	0	0	0	0
14	Udaypur	12	7	3	0	0	0	0	10
15	Saptari	12	0	0	0	0	0	323	323
16	Siraha	12	2434	2	7	10	0	107	2560
	Eastern	192	6965	3048	44	1941	16	1609	13623
17	Dhanusha	12	0	0	0	125	127	0	252
18	Mahottari	12	0	0	0	0	0	497	497
19	Sarlahi	12	659	0	0	0	0	57	716
20	Sindhuli	12	54	36	1	0	52	354	497
21	Ramechhap	12	192	0	0	232	2	169	595
22	Dolkha	12	4	88	0	0	0	0	92
23	Sindhupalchowk	12	784	172	33	299	1	1380	2669
24	Kavre	12	0	0	0	0	0	216	216
25	Lalitpur	12	0	0	0	0	0	0	0
26	Bhaktapur	12	0	0	0	0	0	16	16
27	Kathmandu	12	0	0	0	0	0	0	0
28	Nuwakot	12	20	7	4	179	2	145	357
29	Rasuwa	12	95	0	0	14	0	0	109
30	Dhading	12	1025	0	0	0	0	985	2010
31	Makawanpur	12	96	0	0	0	0	517	613
32	Rautahat	12	7	0	0	0	0	0	7
33	Bara	12	0	0	0	0	0	2319	2319
34	Parsa	12	940	0	0	50	0	0	990
35	Chitwan	12	105	21	0	0	0	42	168
	Central	228	3981	324	38	899	184	6697	12123
36	Gorkha	12	242	166	1	521	4	171	1105
37	Lamjung	12	7	25	6	175	2	30	245
38	Tanahu	12	358	0	8	122	0	27	515
39	Syangja	12	58	0	0	46	0	367	471
40	Kaski	12	58	8	4	7	2	727	806
41	Manang	12	0	0	0	0	0	0	0
42	Mustang	12	70	164	0	58	0	103	395
43	Myagdi	12	0	0	0	0	0	0	0
44	Parbat	12	0	0	0	0	0	10	10
45	Baglung	12	0	0	0	0	0	0	0
46	Gulmi	12	0	0	38	85	0	63	186
47	Palpa	12	25	15	1	141	8	113	303
48	Nawalparasi	12	442	0	0	0	105	145	692
49	Rupandehi	12	297	298	127	127	167	0	1016
50	Kapilvastu	12	0	0	0	0	0	0	0
51	Arghakhanchi	12	871	0	0	0	184	55	1110
	Western	192	2428	676	185	1282	472	1811	6854
52	Pyuthan	12	40	0	0	190	0	415	645
53	Rolpa	12	504	146	22	84	12	211	979
54	Rukum	12	0	0	0	0	0	0	0
55	Salyan	12	0	0	0	0	0	100	100
56	Dang	12	0	0	0	0	0	228	228
57	Banke	12	0	0	0	0	0	0	0
58	Bardiya	12	4	36	0	11	5	477	533
59	Surkhet	12	0	0	0	0	0	1136	1136
60	Dailekh	12	763	279	2	181	12	0	1237
61	Jajarkot	12	1041	0	11	153	8	0	1213
62	Dolpa	12	148	93	55	64	33	2	395
63	Jumla	12	0	0	0	0	0	0	0
64	Kalikot	12	64	575	3	41	1	0	684
65	Mugu	12	0	0	0	0	0	0	0
66	Humla	12	0	0	0	0	0	0	0
	Mid Western	180	2564	1129	93	724	71	2569	7150
67	Bajura	12	0	0	0	0	0	0	0
68	Bajhang	12	0	0	0	0	0	317	317
69	Achham	12	1168	0	243	196	0	0	1607
70	Doti	12	5	11	7	15	21	6	65
71	Kailali	12	2693	0	0	151	0	0	2844
72	Kanchanpur	12	256	273	57	154	10	2614	3364
73	Dadeldhura	12	138	322	15	48	7	0	530
74	Baitadi	12	361	0	0	158	30	103	652
75	Darchula	12	0	99	0	0	0	0	99
	Far Western	108	4621	705	322	722	68	3040	9478

Raw Data
Free Health Services Sheet 4 of 5

District Code	District Name	Received Reports	Reffer						
			Hospital					PHC	Total
			Ultrapoor Destitute	Poor	Disable	Senior Citizen	FCHV		
	Mountain	192	170	176	27	209	28	311	921
	Hill	468	1897	298	71	792	65	3616	6739
	Terai	240	225	43	45	43	118	4400	4874
	National Total	900	2292	517	143	1044	211	8327	12534
1	Taplejung	12	36	102	4	33	0	10	185
2	Panchthar	12	15	10	1	6	0	4	36
3	Ilam	12	0	0	0	0	0	4	4
4	Jhapa	12	0	0	0	0	0	154	154
5	Morang	12	17	2	4	3	0	377	403
6	Sunsari	12	0	0	0	0	0	0	0
7	Dhankuta	12	0	0	0	0	0	0	0
8	Teharthur	12	0	0	0	0	0	0	0
9	Sankhuwasabha	12	24	4	5	121	2	0	156
10	Bhojpur	12	1	2	0	114	4	132	253
11	Solukhumbu	12	2	0	0	0	0	14	16
12	Okhaldhunga	12	6	0	0	0	0	0	6
13	Khotang	12	0	0	0	0	0	5	5
14	Udaypur	12	7	3	1	2	2	0	15
15	Saptari	12	0	0	0	0	0	95	95
16	Siraha	12	0	0	0	0	0	68	68
	Eastern	192	108	123	15	279	8	863	1396
17	Dhanusha	12	0	0	0	2	0	5	7
18	Mahottari	12	1	0	6	4	0	158	169
19	Sarlahi	12	0	0	0	0	0	66	66
20	Sindhuli	12	2	5	4	4	2	190	207
21	Ramechhap	12	0	0	0	0	0	36	36
22	Dolkha	12	0	0	0	0	0	0	0
23	Sindhupalchowk	12	27	10	0	14	0	105	156
24	Kavre	12	0	0	0	0	0	132	132
25	Lalitpur	12	0	0	0	0	0	0	0
26	Bhaktapur	12	0	0	0	0	0	45	45
27	Kathmandu	12	0	0	0	0	0	0	0
28	Nuwakot	12	0	0	0	0	0	131	131
29	Rasuwa	12	8	0	0	0	0	0	8
30	Dhading	12	996	0	0	0	0	721	1717
31	Makawanpur	12	0	0	0	0	0	131	131
32	Rautahat	12	24	0	0	0	10	3	37
33	Bara	12	0	0	0	0	0	86	86
34	Parsa	12	0	0	0	0	0	0	0
35	Chitwan	12	0	0	0	0	0	91	91
	Central	228	1058	15	10	24	12	1900	3019
36	Gorkha	12	21	10	0	61	0	36	128
37	Lamjung	12	0	1	0	0	0	11	12
38	Tanahu	12	0	0	0	0	0	0	0
39	Syangja	12	84	0	19	301	20	25	449
40	Kaski	12	29	5	5	6	5	18	68
41	Manang	12	0	0	0	0	0	0	0
42	Mustang	12	13	26	0	19	0	20	78
43	Myagdi	12	0	0	0	0	0	0	0
44	Parbat	12	0	0	0	0	0	1	1
45	Baglung	12	0	0	0	0	0	0	0
46	Gulmi	12	4	0	0	0	0	210	214
47	Palpa	12	26	5	1	5	0	14	51
48	Nawalparasi	12	169	0	0	0	35	140	344
49	Rupandehi	12	0	0	0	0	0	0	0
50	Kapilvastu	12	0	0	0	0	0	0	0
51	Arghakhanchi	12	143	0	0	0	0	8	151
	Western	192	489	47	25	392	60	483	1496
52	Pyuthan	12	77	0	0	119	0	80	276
53	Rolpa	12	29	139	0	10	0	17	195
54	Rukum	12	0	0	0	0	0	0	0
55	Salyan	12	0	0	0	0	0	19	19
56	Dang	12	0	0	0	0	0	1046	1046
57	Banke	12	0	0	0	0	0	0	0
58	Bardiya	12	0	0	0	0	0	1454	1454
59	Surkhet	12	0	0	0	0	0	155	155
60	Dailekh	12	36	8	0	12	0	1	57
61	Jajarkot	12	226	0	13	82	6	160	487
62	Dolpa	12	57	22	18	22	26	0	145
63	Jumla	12	0	0	0	0	0	51	51
64	Kalikot	12	3	12	0	0	0	25	40
65	Mugu	12	0	0	0	0	0	0	0
66	Humla	12	0	0	0	0	0	0	0
	Mid Western	180	428	181	31	245	32	3008	3925
67	Bajura	12	0	0	0	0	0	33	33
68	Bajhang	12	0	0	0	0	0	53	53
69	Achham	12	93	0	16	16	0	0	125
70	Doti	12	1	5	1	2	1	2	12
71	Kailali	12	2	21	35	18	73	466	615
72	Kanchanpur	12	12	20	0	16	0	191	239
73	Dadeldhura	12	66	105	10	47	25	1297	1550
74	Baitadi	12	35	0	0	5	0	31	71
75	Darchula	12	0	0	0	0	0	0	0
	Far Western	108	209	151	62	104	99	2073	2698

Free Health Services Sheet 5 of 5

District Code	District Name	Received Reports	HP/SHP			PHC		Hospital					PHC		HP/SHP				Total				
			>60 Yrs	<60 Yrs	Refer	>60 Yrs	<60 Yrs	OPD	Emergency	Indoor	Refer	OPD	Emergency	Indoor	Refer	OPD	OPD	Emergency	Indoor	Refer	Total		
	Mountain	192	151043	1169257	21302	18299	132415	49304	7470	6643	610	64475	4337	1851	311	1320300	1434079	11807	8494	22223	1476603		
	Hill	468	832027	5408849	65356	253615	637981	276463	23879	12339	3123	343420	18921	6605	3616	6240876	6860759	42800	18944	72095	6994598		
	Terai	240	890550	6517798	76915	140381	828002	128240	19678	14520	474	362878	38111	7270	4400	7408348	7899466	57789	21790	81789	8060834		
	National Total	900	1873620	13095904	163573	412295	1598398	454007	51027	33502	4207	770773	61369	15726	8327	14969524	16194304	112396	49228	176107	1652038		
1	Taplejung	12	6911	80033	308	1365	5030	13388	3027	2886	175	0	0	0	10	86944	100332	3027	2886	493	106738		
2	Panchthar	12	8255	106506	986	836	10318	951	126	3	32	9282	1389	112	4	114761	124994	1515	115	1022	127646		
3	Ilam	12	12774	110654	383	2280	13420	647	0	0	0	340	240	7	4	123428	124415	240	7	387	125049		
4	Jhapa	12	41529	318107	5019	16636	87973	5484	20	0	0	18152	345	0	154	359636	383272	365	0	5173	388810		
5	Morang	12	42717	360308	5178	7152	73379	20169	1286	4820	26	50686	4291	461	377	403025	473880	5577	5281	5581	490319		
6	Sunsari	12	48333	352015	1731	7822	50108	0	0	0	0	0	0	0	0	400348	400348	0	0	1731	402079		
7	Dhankuta	12	10462	109067	283	1685	10951	5217	605	90	0	2369	531	48	0	119529	127115	1136	138	283	128672		
8	Teharthur	12	8346	68833	64	516	5393	1	0	0	0	490	0	0	0	77179	77670	0	0	64	77734		
9	Sankhuwasabha	12	14753	123497	724	1666	10594	1264	318	772	156	1463	161	15	0	138250	140977	479	787	880	143123		
10	Bhojpur	12	14065	119497	655	4091	10735	782	268	473	121	10519	622	502	132	133562	144863	890	975	908	147636		
11	Solukhumbu	12	9591	85717	14173	884	5610	0	24	27	2	1766	46	34	14	95308	97074	70	61	14189	111394		
12	Okhaldhunga	12	18225	154895	449	245	2451	2477	14	480	6	0	0	0	0	173120	175597	14	480	455	176546		
13	Khotang	12	19182	158929	882	874	9603	1627	696	0	0	962	0	0	5	178111	180700	696	0	887	182283		
14	Udaypur	12	16818	156807	671	2513	24740	6669	206	10	15	0	0	0	0	173625	180294	206	10	686	181196		
15	Saptari	12	51968	456766	2432	3872	30693	0	0	0	0	31248	446	323	95	508734	539982	446	323	2527	543278		
16	Siraha	12	51038	434040	1858	5176	36705	27967	6671	2453	0	15346	899	107	68	485078	528391	7570	2560	1926	540447		
	Eastern	192	374967	3195671	35796	57613	387703	86643	13261	12014	533	142623	8970	1609	863	3570638	3799904	22231	13623	37192	3872950		
17	Dhanusha	12	43541	355035	10312	4562	32634	0	149	252	2	0	242	0	5	398576	398576	391	252	10319	409538		
18	Mahottari	12	48964	355773	3382	11051	40021	3604	2395	0	11	34528	9715	497	158	404737	442869	12110	497	3551	459027		
19	Sarlahi	12	88250	476982	3347	14632	52888	0	0	659	0	20420	1032	57	66	565232	585652	1032	716	3413	590813		
20	Sindhuli	12	10570	108662	1044	2891	18333	5012	191	143	17	10950	901	354	190	119232	135194	1092	497	1251	138034		
21	Ramechhap	12	21232	132454	706	1793	12970	1146	1028	426	0	4865	347	169	36	153686	159697	1375	595	742	162409		
22	Dolkha	12	23116	112315	2473	4426	24664	323	156	92	0	0	0	0	0	135431	135754	156	92	2473	138475		
23	Sindhupalchowk	12	25992	136144	1200	3097	24262	1527	504	1289	51	19874	2033	1380	105	162136	183537	2537	2669	1356	190099		
24	Kavre	12	49604	253777	973	5391	30203	6	5	0	0	24618	434	216	132	306981	331605	439	216	1105	333365		
25	Lalitpur	12	0	0	0	0	0	101418	0	0	0	0	0	0	0	0	101418	0	0	0	101418		
26	Bhaktapur	12	17375	67828	938	3473	12416	0	0	0	0	6804	162	16	45	85203	92007	162	16	983	93168		
27	Kathmandu	12	39893	173147	2820	7053	40472	0	0	0	0	0	0	0	0	213040	213040	0	0	2820	215860		
28	Nuwakot	12	23490	113009	509	2586	13218	6062	757	212	0	7334	370	145	131	136499	149895	1127	357	640	152019		
29	Rasuwa	12	5437	37710	9	1575	6482	808	207	109	8	0	0	0	0	43147	43955	207	109	17	442288		
30	Dhading	12	31489	224433	919	3777	27095	25969	2776	1025	996	27277	3352	985	721	255922	309168	6128	2010	2636	319942		
31	Makawanpur	12	17141	129861	3177	3623	47036	7	96	96	0	27090	2010	517	131	147002	174099	2106	613	3308	180126		
32	Rautahat	12	39467	286893	12905	4785	17765	4716	263	7	34	940	0	0	3	326360	332016	263	7	12942	345228		
33	Bara	12	45867	366335	1723	4178	36807	0	0	0	0	36957	10796	2319	86	412202	449159	10796	2319	1809	464083		
34	Parsa	12	0	0	0	0	0	13693	10	990	0	0	0	0	0	0	13693	10	990	0	14693		
35	Chitwan	12	45214	282118	1953	16371	67913	12538	2159	126	0	15642	352	42	91	327332	355512	2511	168	2044	360235		
	Central	228	576642	3616076	48390	95264	505179	176829	10696	5426	1119	237299	31746	6697	1900	4192718	4606846	42442	12123	51409	4712820		
36	Gorkha	12	30179	163093	618	3271	17684	9047	2338	934	92	11214	401	171	36	193272	213533	2739	1105	746	218123		
37	Lamjung	12	27322	109376	26	1372	5452	1314	68	215	1	2796	157	30	11	136698	140808	225	245	38	141316		
38	Tanahu	12	19526	107654	355	4284	13672	8704	1513	488	0	14260	470	27	0	127180	150144	1983	515	355	152997		
39	Syangja	12	35042	156799	32	3942	33712	3683	175	104	424	15348	1620	367	25	191841	210872	1795	471	481	213619		
40	Kaski	12	32921	119459	4786	3708	13942	713	110	79	50	2101	322	727	18	152380	155194	432	806	4854	161286		
41	Manang	12	1335	7517	1	0	0	0	0	0	0	0	0	0	0	8852	8852	0	0	1	8853		
42	Mustang	12	2038	13324	82	400	3330	4248	419	292	58	2005	91	103	20	15362	21615	510	395	160	22680		
43	Myagdi	12	13772	71311	62	1042	6508	145	0	0	0	3677	40	0	0	85083	88905	40	0	62	89007		
44	Parbat	12	23594	125077	96	1995	10336	0	0	0	0	1167	13	10	1	148671	149838	13	10	97	149958		
45	Baglung	12	28468	170869	331	3927	24726	0	0	0	0	0	0	0	0	199337	199337	0	0	331	199668		
46	Gulmi	12	44948	131299	693	5302	15367	17882	1731	123	4	3099	400	63	210	258247	279228	2131	186	907	282452		
47	Palpa	12	29665	172591	3008	4514	21482	4670	328	190	37	3345	204	113	14	202256	210271	532	303	3059	214165		
48	Nawalparasi	12	53590	305667	4388	5237	60639	79	502	547	204	27755	1996	145	140	359257	387091	2498	692	4732	395013		
49	Rupandehi	12	76596	378765	0	0	1183	2816	1016	0	0	0	0	0	0	455361	456544	2816	1016	0	460376		
50	Arghavastu	12	45463	289530	3328	9742	20070	0	0	0	0	0	0	0	0	334993	334993	0	0	3328	338321		
51	Kaphhanchi	12	19230	98984	691	4712	18914	7595	449	1055	143	6158	463	55	8	118214	131967	912	1110	842	134831		
	Western	192	483689	2503315	18497	53448	265821	59263	10449	5043	1013	92925	6177	1811	483	2987004	3139192	16626	6854	19993	3182665		
52	Pyuthan	12	19096	192233	57	2513	23036	721	446	230	196	24517	1116	415	80	211329	236567	1562	645	333	239107		
53	Rolpa	12	12892	1177	14306	150592	2924	1546	473	768	178	7950	248	211	17	14069	23565	721	979	14501	397766		
54	Rukum	12	8099	95364	401	1014	5578	0	0	0	0	2954	228	0	0	103463	106417	228	0	401	107046		
55	Salyan	12	20137	166179	1007																		

Health Laboratory Services
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District Code	District Name	Received Reports	BACTERIOLOGY															
			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	Leptospiro	CSF Culture	Others
												Total	+ve					
	Mountain	192	152	12	0	0	0	0	1	42	2	5712	284	9784	24	0	0	50
	Hill	468	16479	40353	86886	5251	3479	119	7484	8048	1112	59032	4296	76494	3174	832	996	2536
	Terai	240	4466	6458	19938	693	870	44	2360	13533	757	64674	5865	64591	3927	526	352	933
	National Total	900	21097	46823	106824	5944	4349	163	9845	21623	1871	12941	10445	15086	7125	1358	1348	3519
1	Taplejung	12	9	8	0	0	0	0	0	28	2	347	15	1509	0	0	0	0
2	Panchthar	12	0	0	0	0	0	0	0	0	0	481	24	859	0	0	0	0
3	Ilam	12	1	0	0	0	0	0	0	0	0	2001	81	946	0	0	0	0
4	Jhapa	12	306	939	3333	120	35	4	421	11375	309	22022	783	8623	88	0	20	355
5	Morang	12	2291	1788	6744	298	495	8	742	443	300	3964	378	8618	272	24	190	80
6	Sunsari	12	0	0	0	0	0	0	0	0	0	511	27	179	5	0	0	0
7	Dhankuta	12	0	0	0	4	0	0	0	131	0	788	32	1404	33	0	0	10
8	Teharhum	12	0	0	0	0	0	0	0	0	0	129	7	639	0	0	0	0
9	Sankhuwasabha	12	0	0	0	0	0	0	0	0	0	505	39	1802	0	0	0	0
10	Bhojpur	12	0	0	0	0	0	0	0	0	0	455	27	2554	3	0	0	0
11	Solukhumbu	12	42	4	0	0	0	0	1	1	0	127	14	199	0	0	0	0
12	Okhaldhunga	12	0	0	0	0	0	0	0	0	0	1070	141	357	75	0	0	5
13	Khotang	12	40	1	0	2	0	0	0	0	0	706	4	994	0	0	0	0
14	Udaypur	12	0	0	0	0	0	0	0	0	0	1013	130	2674	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	5	0	0	0	0	0	0	75	9	5889	458	2364	0	0	0	0
	Eastern	192	2694	2740	10077	424	530	12	1164	12053	620	40008	2160	33721	476	24	210	450
17	Dhanusha	12	35	0	491	0	0	0	9	167	4	677	1374	1566	2869	0	10	0
18	Mahottari	12	127	0	0	0	0	0	0	0	0	0	0	1863	0	0	0	0
19	Sarlahi	12	2	5	0	0	0	0	0	0	0	1299	149	2598	252	0	0	0
20	Sindhuli	12	0	0	0	0	0	0	0	0	0	575	79	850	0	211	0	0
21	Ramechhap	12	3	0	0	0	0	0	0	0	0	607	33	577	0	0	0	0
22	Dolkha	12	78	0	0	0	0	0	0	0	0	285	12	1221	0	0	0	20
23	Sindhupalchowk	12	0	0	0	0	0	0	0	9	0	284	15	820	0	0	0	0
24	Kavre	12	349	2437	3389	6	257	31	282	15	0	1574	62	3394	1	0	0	19
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	118	1548	3437	23	18	12	181	84	15	288	12	617	0	2	9	1
27	Kathmandu	12	12075	29578	68560	4003	2895	52	4301	6224	457	12792	728	16348	1318	509	725	1230
28	Nuwakot	12	5	0	0	0	0	0	0	156	2	806	20	2444	0	0	0	2
29	Rasuwa	12	5	0	0	0	0	0	0	4	0	246	14	95	0	0	0	0
30	Dhading	12	273	273	89	0	0	0	0	0	0	1713	100	4707	0	0	0	4
31	Makawanpur	12	13	5	0	0	0	0	0	0	0	0	0	760	0	0	0	0
32	Rautahat	12	0	0	0	0	0	0	0	0	0	337	43	358	0	0	0	0
33	Bara	12	22	0	43	0	1	0	1	2	0	103	0	1505	0	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	1373	3544	7801	241	282	29	552	674	60	2864	145	1341	306	502	120	24
	Central	228	14478	37390	83810	4273	3453	124	5326	7335	538	24450	2786	41064	4746	1224	864	1300
36	Gorkha	12	36	6	4	1	0	0	0	0	0	3131	323	2781	16	1	0	85
37	Lamjung	12	68	98	126	14	0	0	51	0	0	664	41	1655	166	5	1	36
38	Tanahu	12	3	0	8	4	0	0	0	4	0	1437	81	3959	81	43	0	149
39	Syangja	12	0	0	0	0	0	0	0	58	3	960	51	3268	0	0	0	0
40	Kaski	12	1905	3688	7377	971	297	24	1490	1018	131	2790	115	4179	439	50	220	10
41	Manang	12	0	0	0	0	0	0	0	0	0	108	3	4	0	0	0	0
42	Mustang	12	0	0	0	0	0	0	0	0	0	155	1	24	0	0	0	0
43	Myagdi	12	0	0	0	0	0	0	0	133	8	873	28	659	0	0	0	8
44	Parbat	12	0	0	0	0	0	0	0	0	0	450	5	833	0	0	0	0
45	Baglung	12	46	52	19	1	0	0	0	140	42	751	17	1229	2	0	0	0
46	Gulmi	12	17	0	0	0	0	0	0	0	0	493	43	1161	24	0	0	0
47	Palpa	12	436	2319	3672	210	3	0	1155	85	92	7848	947	970	590	11	29	802
48	Nawalparasi	12	3	1	55	0	2	0	3	3	0	6636	748	5142	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	0	0	0	0	0	0	0	0	0	208	21	74	0	0	0	0
51	Arghakhanchi	12	0	0	0	0	0	0	0	0	0	657	36	950	0	0	0	0
	Western	192	2514	6164	11261	1201	302	24	2699	1441	276	27161	2460	26888	1318	110	250	1090
52	Pyuthan	12	0	0	0	0	0	0	0	0	0	2687	246	2039	0	0	0	0
53	Rolpa	12	2	0	0	0	0	0	0	0	357	1102	90	738	0	0	7	63
54	Rukum	12	21	6	0	0	0	0	0	0	0	1287	82	2478	394	0	4	18
55	Salyan	12	4	0	0	0	0	0	0	0	0	2064	249	297	0	0	0	0
56	Dang	12	26	21	30	1	19	0	6	726	75	7600	475	4942	15	0	0	280
57	Banke	12	119	114	1370	22	35	3	625	29	0	5409	643	2169	114	0	12	194
58	Bardiya	12	0	0	0	0	0	0	0	0	0	3033	236	7644	0	0	0	0
59	Surkhet	12	11	2	10	1	2	0	6	0	0	1303	91	845	0	0	0	0
60	Dailekh	12	5	0	0	0	0	0	0	0	0	726	48	558	0	0	0	17
61	Jajarkot	12	0	0	0	0	0	0	0	0	3	514	27	533	0	0	0	0
62	Dolpa	12	0	0	0	0	0	0	0	0	0	153	18	112	0	0	0	0
63	Jumla	12	3	0	0	0	0	0	0	0	0	761	5	730	0	0	0	0
64	Kalikot	12	2	0	0	0	0	0	0	0	0	639	20	330	24	0	0	30
65	Mugu	12	0	0	0	0	0	0	0	0	0	76	2	70	0	0	0	0
66	Humla	12	11	0	0	0	0	0	0	0	0	86	5	59	0	0	0	0
	Mid Western	180	204	143	1410	24	56	3	637	755	435	27440	2237	23544	547	0	23	602
67	Bajura	12	0	0	0	0	0	0	0									

Health Laboratory Services
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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	Phosphorus	GGT	CPK	CPK MB	24 Hrs Urinary Protein	Creatinine Clearance	S. Tropolin-I	24 hours urinary Uric Acid	Others
	Mountain	192	17696	5971	423	1629	603	546	10275	1371	869	6170	7551	365	1157	144	0	282	1	133	2	2	7	0	16	1	62
	Hill	468	756725	481629	39959	253590	165952	210533	396216	301347	197909	178299	430274	84097	299109	9474	1049	33451	11291	23697	3437	6656	1641	9711	5826	343	5851
	Terai	240	310425	129394	13370	73362	22603	24724	74459	42480	36496	61484	143425	14078	31935	5097	1249	14229	1351	2696	1443	2617	479	6884	2239	471	891
	National Total	900	1084846	616994	53752	328581	189158	235803	480950	345198	235274	245953	581250	98540	332201	147115	2298	47962	12643	26526	4882	9275	2127	16595	8081	815	6804
1	Taplejung	12	2194	280	0	0	100	157	2027	0	0	1060	1669	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	Panchthar	12	1781	406	0	6	0	0	738	0	0	720	621	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3	Ilam	12	4399	1720	59	799	309	308	966	368	334	904	1692	41	360	4	0	271	0	0	0	0	0	0	5	0	1
4	Jhapa	12	53974	23894	3633	17536	2746	4223	11245	7088	5193	6069	23481	757	5154	2103	419	1648	14	127	207	766	128	1110	691	132	388
5	Morang	12	92771	42119	2801	26190	16801	16939	22092	10442	15783	25325	40991	8294	8701	2198	819	6931	783	19	1143	1390	179	5613	412	336	243
6	Sunsari	12	108	10	0	0	0	0	30	0	0	14	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	Dhankuta	12	3174	1084	30	156	229	248	1687	336	387	1003	1169	266	513	0	0	133	23	0	0	0	4	20	0	0	173
8	Teharthur	12	1641	249	0	0	44	49	267	38	40	275	287	41	38	22	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	5182	1661	58	202	124	1	2964	190	71	1266	1699	127	195	101	0	0	0	0	0	0	0	0	0	0	0
10	Bhojpur	12	4652	1089	60	307	243	261	873	352	410	1447	1209	185	461	53	0	38	0	0	0	51	0	0	0	0	0
11	Solukhumbu	12	1371	698	4	283	239	206	388	577	168	553	745	66	326	23	0	17	0	133	0	0	7	0	16	0	0
12	Okhaldhunga	12	3546	281	100	609	175	158	1808	347	267	655	2052	133	350	0	0	32	13	0	0	0	1	0	0	0	41
13	Khotang	12	1059	811	0	0	150	150	591	0	0	497	693	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Udaypur	12	4290	512	32	568	368	368	1651	291	363	811	491	167	309	130	0	38	0	0	54	0	0	151	0	6	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	0
16	Siraha	12	6407	871	0	0	0	0	987	8	0	992	1612	37	6	0	0	0	0	0	0	0	0	0	0	0	0
	Eastern	192	186549	75685	6777	46656	21528	23068	48314	20037	23016	41591	78420	10114	16413	4634	1238	9108	833	279	1404	2207	319	6894	1124	474	846
17	Dhanusha	12	6634	1316	79	156	35	29	1430	276	80	892	1199	45	361	88	2	2	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	1418	738	0	85	10	169	335	0	0	824	306	48	6	11	2	1	0	0	0	0	0	0	0	0	0
20	Sindhuli	12	574	244	3	0	1	1	271	1	0	209	172	0	1	0	0	0	0	0	0	0	0	0	0	0	0
21	Ramechhap	12	4728	963	61	119	140	190	1088	303	169	1057	1694	81	251	52	14	12	0	0	0	0	0	0	0	0	0
22	Dolkha	12	4149	1425	248	964	87	107	936	191	219	1240	1099	111	210	9	0	262	1	0	0	0	0	0	0	0	0
23	Sindhupalchowk	12	1247	186	0	38	5	16	233	44	33	347	169	0	38	0	0	0	0	0	0	0	0	0	0	0	0
24	Kavre	12	19914	3569	516	3118	66	146	4946	1670	3189	3635	4287	1231	3095	4	0	286	11	2	33	89	6	0	135	0	10
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	13549	5276	331	4044	259	307	1742	1465	1315	1286	4552	676	1485	41	2	237	12	2	16	79	12	0	107	0	0
27	Kathmandu	12	519192	361487	34102	178519	151974	193963	320449	274479	169868	130326	332866	73641	272931	8266	908	26790	10163	23424	3064	4927	1160	9295	3359	316	944
28	Nuwakot	12	3818	1394	14	187	0	32	1801	0	0	1500	1022	44	40	0	0	0	0	0	0	0	0	0	0	0	0
29	Rasuwa	12	302	39	0	0	3	2	134	20	18	121	46	22	20	0	0	3	0	0	0	0	0	0	0	0	0
30	Dhading	12	8818	2569	48	1162	9	23	2719	672	656	2821	2572	32	567	0	0	41	0	0	0	0	0	3	0	5	2
31	Makawanpur	12	1880	424	0	562	0	0	1485	0	0	581	982	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Rautahat	12	313	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33	Bara	12	2257	167	49	381	43	15	481	61	46	363	481	287	103	24	0	200	15	11	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	0	0	0	0	0	0	0
35	Chitwan	12	86504	33414	4694	13732	1579	1776	13897	17244	9113	13446	47467	3329	11166	579	7	4142	539	2525	93	274	84	37	1031	3	172
	Central	228	675297	413211	40145	203067	154211	196776	351947	296426	184706	158648	398914	79547	290274	9074	935	31976	10741	25964	3206	5369	1262	9335	4632	324	1128
36	Gorkha	12	6334	1836	0	1115	8	22	2546	45	42	2098	2159	10	45	2	0	1	0	0	0	0	0	0	0	0	0
37	Lamjung	12	5992	1194	284	119	74	57	1439	479	335	1088	1531	191	469	0	0	29	0	0	0	0	0	0	0	0	0
38	Tanahu	12	12516	3340	323	1397	167	166	4895	843	540	3096	3251	457	702	43	0	53	0	0	0	2	0	0	12	0	5
39	Syangja	12	5102	637	46	12	4	78	1614	49	0	1711	608	5	49	0	0	33	0	0	0	0	0	38	0	0	0
</																											

Health Laboratory Services
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District Code	District Name	Received Reports	Virology													
			HIV		HCV		Western Bloot		HBsAg		HEV		CD4 count	Viral Load	Others	
			Total	+Ve	Total	+Ve	Total	+Ve	Total	+Ve	Total	+Ve				
	Mountain	192	6507	36	2463	78	58	0	6596	130	2	0	0	0	0	447
	Hill	468	323931	2211	250080	1116	14299	878	325416	2111	13853	87	2410	82	607	
	Terai	240	83470	534	26065	644	825	16	96323	904	1804	75	1994	0	642	
	National Total	900	413908	2781	278608	1838	15182	894	428335	3145	15659	162	4404	82	1696	
1	Taplejung	12	511	1	511	0	0	0	541	1	0	0	0	0	0	
2	Panchthar	12	261	0	8	0	0	0	36	0	4	0	0	0	0	
3	Ilam	12	1068	3	57	0	0	77	891	70	0	0	0	0	0	
4	Jhapa	12	16512	38	3577	11	55	0	22887	460	18	0	112	0	201	
5	Morang	12	14946	46	5975	554	640	16	19241	130	412	56	0	0	33	
6	Sunsari	12	157	0	0	0	0	0	57	0	0	0	0	0	0	
7	Dhankuta	12	1174	1	258	0	0	0	1178	2	0	0	0	0	0	
8	Teharhum	12	418	0	2	0	0	0	377	0	0	0	0	0	0	
9	Sankhuwasabha	12	1135	2	11	0	0	0	1488	2	0	0	0	0	0	
10	Bhojpur	12	923	3	344	0	0	0	974	1	0	0	0	0	0	
11	Solukhumbu	12	626	2	380	78	49	0	501	20	0	0	0	0	177	
12	Okhaldhunga	12	1588	0	311	0	0	0	1706	1	0	0	0	0	0	
13	Khotang	12	624	1	388	0	0	0	624	0	0	0	0	0	0	
14	Udaypur	12	523	5	206	0	0	0	665	4	2	0	0	0	0	
15	Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	
16	Siraha	12	3690	9	2165	0	0	0	3852	12	0	0	0	0	0	
	Eastern	192	44156	111	14193	643	744	93	55018	703	436	56	112	0	411	
17	Dhanusha	12	3346	26	96	0	20	0	2978	17	120	3	31	0	0	
18	Mahottari	12	0	0	0	0	0	0	131	0	0	0	0	0	0	
19	Sarlahi	12	397	4	71	0	0	0	423	24	0	0	0	0	0	
20	Sindhuli	12	155	0	0	0	92	0	185	0	20	0	0	0	0	
21	Ramechhap	12	512	5	52	0	0	0	227	6	3	0	0	0	0	
22	Dolkha	12	714	0	362	0	0	0	695	3	2	0	0	0	4	
23	Sindhupalchowk	12	434	5	0	0	0	0	272	0	0	0	0	0	0	
24	Kavre	12	3081	2	426	1	2	0	4406	6	1	0	0	0	0	
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	
26	Bhaktapur	12	3633	13	504	0	0	0	1563	2	1	0	0	6	0	
27	Kathmandu	12	255223	1736	230037	973	13924	28	270884	1419	13538	55	621	76	494	
28	Nuwakot	12	2160	9	37	5	0	0	1649	2	27	0	0	0	0	
29	Rasuwa	12	110	1	8	0	0	0	80	0	0	0	0	0	0	
30	Dhading	12	1509	14	184	1	0	0	1343	13	0	0	0	0	0	
31	Makawanpur	12	1220	0	163	0	0	0	1085	225	0	0	0	0	0	
32	Rautahat	12	149	12	0	6	0	0	14	0	0	0	0	0	0	
33	Bara	12	91	0	4	0	0	0	204	0	0	0	0	0	4	
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	
35	Chitwan	12	17328	340	8340	66	0	0	22159	127	322	14	607	0	77	
	Central	228	290062	2167	240284	1052	14038	28	308298	1844	14034	72	1259	82	579	
36	Gorkha	12	2451	35	147	0	0	0	2090	8	0	1	0	0	4	
37	Lamjung	12	2058	1	113	0	0	0	270	1	0	0	0	0	0	
38	Tanahu	12	2824	16	802	0	104	0	1533	20	0	0	0	0	5	
39	Syangja	12	983	5	53	0	37	1	1973	10	0	0	0	0	0	
40	Kaski	12	10127	39	8056	19	0	710	9464	51	35	0	0	0	92	
41	Manang	12	7	0	0	0	0	0	2	0	0	0	0	0	0	
42	Mustang	12	31	5	0	0	6	0	13	2	0	0	0	0	0	
43	Myagdi	12	849	5	0	0	56	2	949	13	0	0	0	0	0	
44	Parbat	12	208	3	0	0	0	0	808	1	0	0	0	0	0	
45	Baglung	12	3017	26	498	0	0	0	1609	1	0	0	245	0	0	
46	Gulmi	12	1003	7	12	0	4	0	26	0	0	0	0	0	0	
47	Palpa	12	11280	91	4383	5	0	0	7951	82	139	31	94	0	0	
48	Nawalparasi	12	1598	7	99	0	0	0	501	1	0	0	0	0	0	
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	
50	Kapilvastu	12	70	0	0	0	0	0	6	0	0	0	0	0	0	
51	Arghakhanchi	12	122	0	285	0	46	0	564	0	32	0	0	0	0	
	Western	192	36628	240	14448	24	253	713	27759	190	206	32	339	0	101	
52	Pyuthan	12	1022	4	790	112	0	0	1012	1	0	0	0	0	0	
53	Rolpa	12	474	1	18	0	0	60	495	6	30	0	0	0	0	
54	Rukum	12	1688	5	280	0	0	0	1853	28	0	0	0	0	8	
55	Salyan	12	1058	4	7	0	0	0	987	4	0	0	0	0	4	
56	Dang	12	5383	6	113	1	4	0	6211	9	10	0	0	0	3	
57	Banke	12	9831	14	4396	4	0	0	8244	51	916	2	0	0	279	
58	Bardiya	12	1860	4	0	0	0	0	1404	16	6	0	14	0	3	
59	Surkhet	12	798	8	2	0	0	0	380	3	0	0	33	0	0	
60	Dailekh	12	1137	15	115	0	0	0	893	73	2	0	0	0	0	
61	Jajarkot	12	164	0	0	0	34	0	79	0	0	0	0	0	0	
62	Dolpa	12	23	0	0	0	0	0	25	6	0	0	0	0	0	
63	Jumla	12	447	1	412	0	0	0	476	12	0	0	0	0	0	
64	Kalikot	12	272	0	30	0	0	0	237	1	0	0	0	0	21	
65	Mugu	12	31	0	17	0	0	0	28	1	0	0	0	0	0	
66	Humla	12	27	0	0	0	0	0	18	45	0	0	0	0	0	
	Mid Western	180	24215	62	6180	117	38	60	22342	256	964	2	47	0	318	
67	Bajura	12	994	6	61	0	3	0	221	2	0	0	0	0	0	
68	Bajhang	12	1128	12	671	0	0	0	1992	28	0	0	0	0	245	
69	Achham	12	3424	80	1100	0	0	0	2607	39	0	0	736	0	0	
70	Doti	12	1192	45	34	0	0	0	560	8	0	0	505	0	0	
71	Kailali	12	5348	15	1202	2	0	0	5165	38	0	0	1207	0	0	
72	Kanchanpur	12	2764	13	27	0	106	0	2846	19	0	0	23	0	42	
73	Dadeldhura	12	855	8	119	0	0	0	601	5	19	0	22	0	0	
74	Baitadi	12	3125	21	289	0	0	0	919	6	0	0	154	0	0	
75	Darchula	12	17	1	0	0	0	0	7	7	0	0	0	0	0	
	Far Western	108	18847	201	3503	2	109	0	14918	152	19	0	2647	0	287	

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District Code	District Name	Received Reports	Histology	Cytology				Immunohistochemistry						
			Biopsy	Pap smear	Sputum smear	Bodyfluid smear	Other	ER	PR	GFAP	S100	Vimenton	Cytokeratin	Others
	Mountain	192	0	6	942	44	0	0	0	0	0	0	0	43
	Hill	468	22126	30526	4301	2105	1586	436	37	0	0	3307	12	288
	Terai	240	4610	3738	4547	476	941	23	0	0	0	0	0	113
	National Total	900	26736	34270	9790	2625	2527	459	37	0	0	3307	12	444
1	Taplejung	12	0	0	0	0	0	0	0	0	0	0	0	0
2	Panchthar	12	0	0	3	2	0	0	0	0	0	0	0	0
3	Ilam	12	0	0	83	0	0	0	0	0	0	0	0	0
4	Jhapa	12	291	71	1972	103	0	23	0	0	0	0	0	107
5	Morang	12	1018	829	201	153	130	0	0	0	0	0	0	0
6	Sunsari	12	0	0	0	0	0	0	0	0	0	0	0	0
7	Dhankuta	12	0	0	7	0	0	0	0	0	0	0	0	0
8	Teharthur	12	0	0	0	0	0	0	0	0	0	0	0	0
9	Sankhuwasabha	12	0	0	162	0	0	0	0	0	0	0	0	0
10	Bhojpur	12	0	0	0	0	0	0	0	0	0	0	0	0
11	Solukhumbu	12	0	6	256	23	0	0	0	0	0	0	0	0
12	Okhaldhunga	12	0	0	0	0	0	0	0	0	0	0	0	0
13	Khotang	12	0	0	0	3	0	0	0	0	0	0	0	0
14	Udaypur	12	0	0	51	0	0	0	0	0	0	0	0	0
15	Saptari	12	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
	Eastern	192	1309	906	2735	284	130	23	0	0	0	0	0	107
17	Dhanusha	12	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
19	Sarlahi	12	0	0	0	0	0	0	0	0	0	0	0	0
20	Sindhuli	12	0	0	26	21	0	0	0	0	0	0	0	0
21	Ramechhap	12	0	0	0	0	0	0	0	0	0	0	0	0
22	Dolkha	12	0	0	2	0	0	0	0	0	0	0	0	0
23	Sindhupalchowk	12	0	0	0	0	0	0	0	0	0	0	0	0
24	Kavre	12	54	20	8	0	0	0	0	0	0	0	0	0
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	204	200	2	17	19	0	0	0	0	0	0	0
27	Kathmandu	12	20021	27918	2476	1485	1469	436	37	0	0	3305	12	198
28	Nuwakot	12	0	0	2	0	0	0	0	0	0	0	0	0
29	Rasuwa	12	0	0	0	0	0	0	0	0	0	0	0	0
30	Dhading	12	0	0	85	0	0	0	0	0	0	0	0	0
31	Makawanpur	12	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
33	Bara	12	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
35	Chitwan	12	2240	2327	464	155	0	0	0	0	0	0	0	0
	Central	228	22519	30465	3065	1678	1488	436	37	0	0	3305	12	198
36	Gorkha	12	0	0	0	2	0	0	0	0	0	0	0	0
37	Lamjung	12	0	0	1	0	0	0	0	0	0	0	0	0
38	Tanahu	12	0	0	197	0	2	0	0	0	0	0	0	4
39	Syangja	12	0	5	0	0	3	0	0	0	0	0	0	0
40	Kaski	12	376	1140	180	226	38	0	0	0	0	2	0	79
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	0	0	0	0	0	0	0	0	0
44	Parbat	12	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
46	Gulmi	12	0	0	60	0	0	0	0	0	0	0	0	0
47	Palpa	12	1465	741	161	318	49	0	0	0	0	0	0	0
48	Nawalparasi	12	0	0	37	0	0	0	0	0	0	0	0	0
49	Rupandehi	12	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
51	Arghakhanchi	12	0	0	0	0	0	0	0	0	0	0	0	0
	Western	192	1841	1886	636	546	92	0	0	0	0	2	0	83
52	Pyuthan	12	0	0	87	0	0	0	0	0	0	0	0	0
53	Rolpa	12	0	0	99	0	0	0	0	0	0	0	0	0
54	Rukum	12	0	502	57	8	0	0	0	0	0	0	0	7
55	Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0
56	Dang	12	0	0	6	4	0	0	0	0	0	0	0	0
57	Banke	12	1061	511	12	10	811	0	0	0	0	0	0	4
58	Bardiya	12	0	0	592	6	0	0	0	0	0	0	0	0
59	Surkhet	12	0	0	1	0	0	0	0	0	0	0	0	0
60	Dailekh	12	0	0	26	2	0	0	0	0	0	0	0	0
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	0	0	0
64	Kalikot	12	0	0	446	1	0	0	0	0	0	0	0	43
65	Mugu	12	0	0	0	20	0	0	0	0	0	0	0	0
66	Humla	12	0	0	0	0	0	0	0	0	0	0	0	0
	Mid Western	180	1061	1013	1326	51	811	0	0	0	0	0	0	54
67	Bajura	12	0	0	76	0	0	0	0	0	0	0	0	0
68	Bajhang	12	0	0	0	0	0	0	0	0	0	0	0	0
69	Achham	12	0	0	465	7	6	0	0	0	0	0	0	0
70	Doti	12	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
72	Kanchanpur	12	0	0	1263	45	0	0	0	0	0	0	0	2
73	Dadeldhura	12	0	0	0	0	0	0	0	0	0	0	0	0
74	Baitadi	12	6	0	224	14	0	0	0	0	0	0	0	0
75	Darchula	12	0	0	0	0	0	0	0	0	0	0	0	0
	Far Western	108	6	0	2028	66	6	0	0	0	0	0	0	2

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District Code	District Name	Received Reports	PARASITOLOGY													
			Stool Test	Occult blood	Reducing sugar	Urine test	Bile salts	Bile Pigments	Urobili nogen	Porpho bilinogen	Acetone	Chyle	Semen Analysis	Bence John's Protein	Specific gravity	Others
	Mountain	192	9927	701	162	28635	48	33	29	0	5	1	228	3	0	94
	Hill	468	199382	22619	14731	614133	8995	10128	12374	1156	12000	1128	7057	5177	29590	21005
	Terai	240	65567	12144	5092	288406	13746	13076	13511	1417	11409	3354	2751	2872	8068	422
	National Total	900	274876	35464	19985	931174	22789	23237	25914	2573	23414	4483	10036	8052	37658	21521
1	Taplejung	12	1614	77	0	2560	0	0	0	0	0	0	0	0	0	0
2	Panchthar	12	258	37	0	2717	0	0	0	0	0	0	4	0	0	16
3	Ilam	12	410	41	37	4010	83	0	0	0	5	0	76	0	0	10
4	Jhapa	12	9663	1960	864	46045	508	63	15	0	1054	1	257	994	6442	372
5	Morang	12	18832	4058	1748	73235	12715	12924	13423	1377	9644	3337	1535	1850	1470	0
6	Sunsari	12	75	0	0	474	0	0	0	0	0	0	0	0	0	0
7	Dhankuta	12	1428	86	81	4549	0	0	0	0	0	0	19	9	0	19
8	Teharthur	12	299	17	0	1374	0	0	0	0	0	0	1	0	0	0
9	Sankhuwasabha	12	1478	53	0	5772	0	0	0	0	0	0	5	0	0	0
10	Bhojpur	12	1628	105	0	5586	0	0	0	0	17	0	17	0	0	0
11	Solukhumbu	12	965	165	82	2909	20	18	18	0	0	1	16	3	0	0
12	Okhaldhunga	12	1166	137	9	6802	0	0	80	0	13	0	53	0	0	2
13	Khotang	12	1491	82	2	3391	0	0	0	0	14	0	25	0	0	0
14	Udaypur	12	3327	74	816	7789	0	0	0	0	0	1	101	801	221	0
15	Saptari	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Siraha	12	1966	120	0	10408	270	0	0	0	0	0	1	0	0	0
	Eastern	192	44600	7012	3639	177621	13596	13005	13536	1377	10747	3340	2110	3657	8133	419
17	Dhanusha	12	8948	1703	1612	14396	50	55	27	4	17	0	47	0	0	0
18	Mahottari	12	603	16	0	3418	0	0	0	0	0	0	0	0	0	0
19	Sarlahi	12	890	72	276	3707	0	0	0	0	0	0	2	0	148	0
20	Sindhuli	12	856	16	0	2948	0	0	0	0	0	0	11	0	0	0
21	Ramechhap	12	910	50	3	3807	91	91	91	91	115	94	4	0	246	0
22	Dolkha	12	2492	250	0	6146	10	0	1	0	5	0	15	0	0	0
23	Sindhupalchowk	12	432	4	80	1658	0	0	0	0	0	0	2	0	0	0
24	Kavre	12	4932	2499	8	18392	0	0	1115	1	10	2	79	0	2	0
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	4253	578	13	8752	0	0	0	0	180	0	50	1	0	97
27	Kathmandu	12	127228	13776	8507	330949	4760	5227	5173	985	5137	992	4816	389	6784	107
28	Nuwakot	12	2053	287	85	5292	0	50	0	0	0	0	98	0	0	0
29	Rasuwa	12	113	5	0	530	3	0	0	0	0	0	6	0	0	0
30	Dhading	12	4088	560	1286	13205	0	0	0	0	7	0	115	0	295	7
31	Makawanpur	12	1910	0	0	2680	0	0	0	0	0	0	0	0	0	0
32	Rautahat	12	187	0	0	2338	0	0	0	0	0	0	0	0	0	0
33	Bara	12	501	10	1	1843	0	0	0	0	0	0	1	0	0	4
34	Parsa	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Chitwan	12	11306	2895	210	66610	105	32	32	0	445	0	649	28	7	12
	Central	228	171702	22721	12081	486671	5019	5455	6439	1081	5916	1088	5895	418	7482	227
36	Gorkha	12	2342	164	0	14239	0	0	0	9	81	1	19	0	0	14
37	Lamjung	12	1857	102	0	11242	0	0	0	7	49	0	8	28	0	0
38	Tanahu	12	2842	247	161	11285	6	0	0	0	36	0	59	0	4	9
39	Syangja	12	2061	21	0	6360	0	0	0	0	4	0	3	0	0	2
40	Kaski	12	12660	1843	417	34656	351	128	253	24	675	25	937	95	13649	6
41	Manang	12	21	0	0	52	0	0	0	0	0	0	0	0	0	0
42	Mustang	12	61	0	0	315	0	0	0	0	0	0	0	0	0	0
43	Myagdi	12	401	5	0	3739	0	0	0	0	0	0	7	0	0	6
44	Parbat	12	228	3	0	1598	0	0	0	0	0	0	3	0	0	0
45	Baglung	12	863	54	791	7332	0	0	0	0	0	0	5	0	0	0
46	Gulmi	12	573	9	0	5017	4	2	0	0	5	0	0	0	0	0
47	Palpa	12	5527	769	0	39629	3	3	3	39	505	2	133	0	0	20670
48	Nawalparasi	12	865	50	0	11476	0	0	4	0	5	0	2	0	1	3
49	Rupandehi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Kapilvastu	12	80	1	0	142	0	0	0	0	0	0	0	0	0	0
51	Arghakhanchi	12	513	0	0	3082	0	0	0	0	0	0	0	0	0	0
	Western	192	30894	3268	1369	150164	364	133	260	79	1360	28	1176	123	13654	20710
52	Pyuthan	12	2159	43	328	5601	0	0	0	0	0	0	9	0	0	0
53	Rolpa	12	878	305	0	3019	0	0	0	0	0	3	21	0	0	0
54	Rukum	12	2510	150	0	12809	3673	4604	5636	0	5091	0	110	3854	8366	40
55	Salyan	12	56	5	0	1915	0	0	0	0	0	0	24	0	0	0
56	Dang	12	5891	509	0	17271	98	2	2	0	19	0	39	0	0	0
57	Banke	12	2071	206	127	10755	0	0	0	0	133	0	122	0	0	0
58	Bardiya	12	427	5	1	5525	0	0	8	0	0	0	2	0	0	1
59	Surkhet	12	345	4	0	2680	0	0	0	0	0	0	4	0	0	0
60	Dailekh	12	170	16	0	3532	0	0	0	0	0	0	22	0	0	0
61	Jajarkot	12	251	0	0	1278	0	0	0	0	0	0	7	0	0	0
62	Dolpa	12	136	0	0	115	0	0	0	0	0	0	5	0	0	0
63	Jumla	12	1161	57	0	1584	0	0	0	0	0	0	78	0	0	0
64	Kalikot	12	355	25	0	1066	0	0	0	0	0	0	44	0	0	0
65	Mugu	12	160	0	0	277	0	0	0	0	0	0	14	0	0	0
66	Humla	12	154	0	0	233	15	15	10	0	0	0	3	0	0	0
	Mid Western	180	16724	1325	456	67660	3786	4621	5656	0	5243	3	504	3854	8366	41
67	Bajura	12	326	44	0	1395	0	0	0	0	0	0	7	0	0	0
68	Bajhang	12	457	21	0	3933	0	0	0	0	0	0	33	0	0	94
69	Achham	12	4257	392	2187	10815	23	23	23	0	39	8	83	0	23	0
70	Doti	12	877	56	0	5142	0	0	0	0	0	0	50	0	0	0
71	Kailali	12	1648	380	253	10601	0	0	0	36	77	16	61	0	0	21
72	Kanchanpur	12	1614	159	0	10162	0	0	0	0	15	0	33	0	0	9
73	Dadeldhura	12	1324	58	0	4153	0	0	0	0	17	0	59	0	0	0
74	Baitadi	12	451	28	0	2767	1	0	0	0	0	0	25	0	0	0
75	Darchula	12	2	0	0	90	0	0	0	0	0	0	0	0	0	0
	Far Western	108	10956	1138	2440	49058	24	23	23	36	148	24	351	0	23	124

Health Laboratory Services
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District Code	District Name	Received Reports	IMMUNOLOGY																		
			Pregnancy test	Rh Factor	ASOT	CRP	Blood Group	TPHA		ANA		DNA		VDRL		CEA	CA-125	CA 19-9	TORCH IgG, IgM	Measles/ IgG	Rubella IgG
								Total	+ Ve	Total	+ Ve	Total	+ Ve	Total	+ Ve						
	Mountain	192	9627	2890	602	954	7861	754	10	7	7	107	5	4709	23	0	0	0	0	0	0
	Hill	468	89133	63061	12560	49642	30498	18854	1358	5591	88	4441	1280	27381	1695	861	3039	371	471	9316	9032
	Terai	240	41273	31952	10722	21742	81326	4887	274	679	21	445	2519	60846	317	161	191	20	455	17	123
	National Total	900	14003	97903	23884	72338	39417	19418	1642	6277	116	4993	3804	33937	2035	1022	3230	391	926	9333	9155
1	Taplejung	12	493	311	192	0	650	0	0	0	0	0	0	393	0	0	0	0	0	0	0
2	Panchthar	12	387	109	0	3	760	3	0	0	0	0	0	451	0	0	0	0	0	0	0
3	Ilam	12	375	394	27	68	1359	4	0	0	0	0	62	1098	0	0	0	0	0	0	0
4	Jhapa	12	8694	4283	1901	3727	10037	878	13	127	3	126	8	20520	36	16	0	0	60	0	0
5	Morang	12	6053	11646	5036	6394	16654	116	183	135	12	69	60	10248	101	56	83	20	341	17	103
6	Sunsari	12	118	73	0	0	105	0	0	0	0	0	0	108	0	0	0	0	0	0	0
7	Dhankuta	12	1286	257	154	223	1531	0	0	0	0	0	0	1349	2	0	0	0	0	0	0
8	Teharthur	12	232	105	61	0	410	0	0	0	0	0	0	393	0	0	0	0	0	0	0
9	Sankhuwasabha	12	1369	600	114	182	1510	250	0	0	0	0	0	918	0	0	0	0	0	0	0
10	Bhojpur	12	829	569	311	382	1199	79	12	0	0	0	0	928	2	0	0	0	0	0	0
11	Solukhumbu	12	1037	163	97	124	795	254	1	0	0	10	0	601	0	0	0	0	0	0	0
12	Okhaldhunga	12	1564	329	73	49	2277	13	0	0	0	0	0	1656	0	0	0	0	0	0	0
13	Khotang	12	784	502	101	395	1329	0	0	0	0	0	0	666	0	0	0	0	0	0	0
14	Udaypur	12	1389	494	305	267	1092	338	4	0	0	0	0	1334	11	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
16	Siraha	12	1439	2677	276	311	4708	237	5	0	0	0	0	3673	11	0	0	0	0	0	0
	Eastern	192	26049	22512	8648	12125	44416	2172	218	262	15	205	130	44336	163	72	83	20	401	17	103
17	Dhanusha	12	1918	422	135	439	3461	2	0	0	0	0	0	2180	6	0	0	0	0	0	0
18	Mahottari	12	275	91	5	0	106	0	0	0	0	0	0	87	0	0	0	0	0	0	0
19	Sarlahi	12	1007	377	176	315	913	0	0	0	0	0	0	462	6	0	0	0	0	0	0
20	Sindhuli	12	153	154	2	0	265	0	0	0	0	0	0	239	12	0	0	0	0	0	0
21	Ramechhap	12	1327	368	68	115	474	17	0	0	0	0	0	447	3	0	0	0	0	0	0
22	Dolkha	12	2659	825	59	409	1116	61	1	0	0	0	0	524	6	0	0	0	0	0	0
23	Sindhupalchowk	12	631	109	7	11	382	3	1	0	0	2	0	252	2	0	0	0	0	0	0
24	Kavre	12	2942	778	109	2274	3932	4	0	20	0	104	27	1842	3	2	8	1	1	0	0
25	Lalitpur	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Bhaktapur	12	932	517	49	1338	2010	9	0	26	0	2	0	2787	11	22	31	2	6	0	0
27	Kathmandu	12	35798	39698	6190	27869	22524	18347	1227	5401	70	4219	1100	22351	991	817	2959	359	463	9316	9032
28	Nuwakot	12	2125	502	80	473	2078	75	0	0	0	0	0	1754	78	0	0	0	0	0	0
29	Rasuwa	12	221	30	0	4	241	2	0	0	0	0	0	105	0	0	0	0	0	0	0
30	Dhading	12	3495	1383	409	1142	2842	4	2	0	0	11	0	1490	16	0	0	0	0	0	0
31	Makawanpur	12	655	686	315	221	2373	0	0	0	0	0	0	1265	0	0	0	0	0	0	0
32	Rautahat	12	70	229	0	0	267	0	0	0	0	0	0	171	4	0	0	0	0	0	0
33	Bara	12	345	85	39	127	321	0	0	2	0	0	25	205	1	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	0
35	Chitwan	12	5882	5453	1705	4799	15792	1124	46	408	6	189	506	9865	64	83	63	0	0	0	0
	Central	228	60435	51707	9348	39536	26182	18477	1277	5857	76	4527	1658	24719	1203	924	3061	362	470	9316	9032
36	Gorkha	12	1998	567	174	1007	3166	524	1	0	0	0	0	2049	2	0	0	0	0	0	0
37	Lamjung	12	1244	540	46	83	2476	259	2	0	0	0	0	2060	2	0	0	0	0	0	0
38	Tanahu	12	3141	2382	608	3230	2295	64	7	0	0	0	0	2157	17	0	0	0	0	0	0
39	Syangja	12	2041	906	63	100	2278	545	3	0	0	0	0	1563	6	0	0	0	0	0	0
40	Kaski	12	5678	4413	1296	5586	9436	1416	41	74	12	9	5	5904	376	20	20	9	1	0	0
41	Manang	12	23	0	0	0	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42	Mustang	12	179	9	0	0	57	0	0	0	0	0	0	9	0	0	0	0	0	0	0
43	Myagdi	12	757	136	19	187	907	0	0	0	0	86	1	1001	7	0	0	0	0	0	0
44	Parbat	12	368	213	27	43	533	0	0	0	0	0	0	369	3	0	0	0	0	0	0
45	Baglung	12	506	403	20	22	2620	56	5	0	0	0	0	2795	7	0	0	0	0	0	0
46	Gulmi	12	711	124	25	15	1094	19	0	0	0	0	0	31	0	0	0	0	0	0	0
47	Palpa	12	2569	2266	240	1565	14466	102	47	70	6	0	0	3166	61	0	21	0	0	0	0
48	Navalparasi	12	2026	507	11	123	3536	856	3	0	0	0	0	2640	6	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
50	Kapilvastu	12	65	27	0	0	49	0	0	0	0	0	0	37	0	0	0	0	0	0	0
51	Arghakhanchi	12	572	175	122	0	896	0	0	0	0	0	0	736	8	0	0	0	0	0	0
	Western	192	21878	12668	2651	11961	43815	3841	109	144	18	95	6	24517	495	20	41	9	1	0	0
52	Pyuthan	12	972	982	105	197	1826	7	3	0	0	0	0	1474	0	0	0	0	0	0	0
53	Rolpa	12	861	190	27	169	700	24	0	0	0	0	65	506	57	0	0	0	0	0	0
54	Rukum	12	2334	581	330	80	2168	512	0	0	0	0	0	1568	0	0	0	0	0	0	0
55	Salyan	12	317	110	22	3	1227	131	0	0	0	0	0	1050	0	0	0	0	0	0	0
56	Dang	12	2505	2777	760	1805	7700	758	12	1	0	24	3	4417	73	0	0	0	0	0	0
57	Banke	12	3064	2080	221																

Health Laboratory Services

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District Code	District Name	Received Reports																	Rapid MP Test					
			Echino cocus	Amoe biasis	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		PV	PF		
	Mountain	192	0	0	0	131	123	142	11	0	0	659	0	0	0	0	0	0	0	200	69	1		
	Hill	468	27	94	47790	4533	1086	106	1672	5	8	5751	325	828	32	661	0	1035	124	21029	899	84		
	Terai	240	9	0	6882	188	58	4	238	0	16	1222	4	2131	65	0	0	2833	361	19656	899	37		
	National Total	900	36	94	54672	4852	1267	252	1921	5	24	7632	329	2959	97	661	0	3868	485	40885	1867	122		
1	Taplejung	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	45	10	0		
2	Panchthar	12	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	55	0	0		
3	Ilam	12	0	0	0	0	0	0	0	0	0	12	0	0	0	0	0	0	0	302	22	0		
4	Jhapa	12	0	0	5378	17	24	0	0	0	0	463	0	68	0	0	0	412	145	3250	5	1		
5	Morang	12	9	0	159	141	17	0	8	0	12	144	4	591	15	0	0	1	0	3173	181	2		
6	Sunsari	12	0	0	0	0	0	0	0	0	0	0	0	10	0	0	0	0	0	1	20	0		
7	Dhankuta	12	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	8	49	0	0		
8	Tehrathum	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	60	0	0		
9	Sankhuwasabha	12	0	0	0	0	0	0	0	0	0	70	0	0	0	0	0	0	0	46	43	0		
10	Bhojpur	12	0	0	0	0	0	0	0	0	0	10	0	13	0	0	0	0	0	98	5	0		
11	Solukhumbu	12	0	0	0	123	123	142	11	0	0	164	0	0	0	0	0	0	0	8	0	0		
12	Okhaldhunga	12	0	0	0	0	0	0	0	0	0	0	0	70	8	0	0	0	0	257	26	0		
13	Khotang	12	0	0	0	0	0	0	0	0	0	70	0	0	0	0	0	0	0	0	0	0		
14	Udaypur	12	0	0	0	0	0	0	0	0	0	0	0	117	0	0	0	0	0	334	53	1		
15	Saptari	12	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	1005	44	0	0	0	0	1719	32	17		
	Eastern	192	9	3	5537	281	164	142	19	0	12	935	4	1874	67	0	0	413	153	9397	397	21		
17	Dhanusha	12	0	0	0	0	0	0	0	0	0	0	0	228	4	0	0	0	0	765	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		
19	Sarlahi	12	0	0	0	0	0	0	0	0	0	0	0	110	0	0	0	21	0	697	9	1		
20	Sindhuli	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	14	1	0		
21	Ramechhap	12	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	46	0	0		
22	Dolkha	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	0	0		
23	Sindhupalchowk	12	0	0	0	0	0	0	0	0	0	49	0	0	0	0	0	0	0	10	12	0		
24	Kavre	12	0	0	0	1	0	0	450	0	0	0	0	0	0	0	0	0	0	82	4	0		
25	Lalitpur	12	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	7	33	6	0	8	0	0	16	1	2	0	1	0	1	0	50	0	0		
27	Kathmandu	12	27	4	47714	4340	1078	106	1147	5	8	1683	321	483	16	660	0	874	94	11885	316	7		
28	Nuwakot	12	0	0	0	0	0	0	0	0	0	240	0	0	0	0	0	0	0	114	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		
30	Dhading	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	843	4	0		
31	Makawanpur	12	0	0	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	0	0	6	1	0	0	0	0	21	6	1		
33	Bara	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0		
34	Parsa	12	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	1176	19	0	0	230	0	0	4	0	46	1	0	0	2232	209	2252	284	4		
	Central	228	27	4	48897	4393	1084	106	1835	5	8	1992	322	876	22	661	0	3128	303	16786	636	13		
36	Gorkha	12	0	0	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	553	16	1		
37	Lamjung	12	0	0	0	0	0	0	0	0	0	199	0	1	0	0	0	0	0	13	0	0		
38	Tanahu	12	0	0	7	0	0	0	0	0	0	0	0	0	0	0	0	4	0	238	28	0		
39	Syangja	12	0	0	0	0	0	0	0	0	0	356	0	0	0	0	0	0	0	653	5	1		
40	Kaski	12	0	86	7	75	2	0	67	0	0	525	3	0	0	0	0	46	0	221	6	0		
41	Manang	12	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		
43	Myagdi	12	0	0	0	0	0	0	0	0	0	55	0	0	0	0	0	0	0	72	53	0		
44	Parbat	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	47	2	1		
45	Baglung	12	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	1	0	17	2	1		
47	Palpa	12	0	0	49	84	0	0	0	0	0	47	0	32	1	0	0	106	22	1132	36	46		
48	Nawalparasi	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	17	1	976	143	2		
49	Rupandehi	12	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	12	0	0	0	0	0	0	0	16	0	0		
51	Arghakhanchi	12	0	0	0	0	0	0	0	0	0	68	0	0	0	0	0	0	0	292	8	6		
	Western	192	0	86	69	159	2	0	67	0	0	1262	3	33	1	0	0	174	23	4230	299	58		
52	Pyuthan	12	0	0	0	0	0	0	0	0	0	6	0	0	0	0	0	0	0	446	25	2		
53	Rolpa	12	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	1001	0	24	2	0	0	0	0	316	149	0		
55	Salyan	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	27	22	0		
56	Dang	12	0	0	0	0	0	0	0	0	0	158	0	0	0	0	0	12	0	1252	71	5		
57	Banke	12	0	0	161	2	17	4	0	0	4	374	0	67	0	0	0	28	0	1898	4	1		
58	Bardiya	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1065	78	0		
59	Surkhet	12	0	0	0	0	0	0	0	0	0	532												

Sheet 7 of 8

	Far Western	108	4895	4784	5734	2039	6816	820	1539	8	658	6529	952	54	1112	117	584	3	0	1492	26	0	0	374	0	0	0	0	0	7	0	74

Health Laboratory Services

ENDOCRINOLOGY

District Code	District Name	Received Reports	ENDOCRINOLOGY														
			FSH	LH	Prolactin	Testosterone	T3	T4	TSH	Lipid Profile	Microalbumin	Carbamazepin	Cyclosporine	Valporic Acid	Phenytoin	Digoxine	Others
	Mountain	192	0	0	0	0	0	0	0	144	0	0	0	20	0	0	1
	Hill	468	3947	1516	3862	795	47868	50202	85998	57240	3794	126	2	83	81	26	6518
	Terai	240	271	286	500	22	15393	13684	18675	12823	931	143	0	24	9	0	312
	National Total	900	4218	1802	4362	817	63261	63886	104673	70207	4725	269	2	127	90	26	6831
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	75	0	0	0	0	0	0	0
4	Jhapa	12	22	21	24	5	977	979	1455	1433	114	143	0	0	1	0	93
5	Morang	12	226	240	389	17	4766	4937	6265	5471	782	0	0	15	8	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	27	0	0	0	0	0	0	0
8	Tehrathum	12	0	0	0	0	0	0	0	36	0	0	0	0	0	0	23
9	Sankhuwasabha	12	0	0	0	0	0	0	0	94	0	0	0	0	0	0	0
10	Bhojpur	12	0	0	0	0	0	0	0	139	0	0	0	0	0	0	0
11	Solukhumbu	12	0	0	0	0	0	0	0	42	0	0	0	0	0	0	0
12	Okhaldhunga	12	0	0	0	0	0	0	0	6	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	156	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	248	261	413	22	5743	5916	7720	7479	896	143	0	15	9	0	116
17	Dhanusha	12	0	0	0	0	0	0	0	12	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	11	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	6	0	0	0	0	0	0	0
22	Dolkha	12	0	0	0	0	0	0	0	8	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	39	621	669	825	840	41	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	2	3	12	1	336	336	338	676	24	0	0	0	0	0	42
27	Kathmandu	12	3869	1451	3531	742	40885	43161	74673	48613	3435	126	2	82	81	26	80
28	Nuwakot	12	0	0	0	0	0	0	0	8	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	17	17	17	14	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	4	0	0	0	27	27	28	46	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	8808	6926	10083	4809	35	0	0	0	0	0	0
	Central	228	3875	1454	3543	782	50694	51136	85964	55043	3535	126	2	82	81	26	122
36	Gorkha	12	0	0	0	0	0	0	0	17	0	0	0	0	0	0	0
37	Lamjung	12	0	0	0	0	8	8	8	17	0	0	0	0	0	0	0
38	Tanahu	12	0	0	0	0	0	0	0	129	24	0	0	0	0	0	1
39	Syangja	12	0	0	0	0	0	0	0	52	0	0	0	0	0	0	0
40	Kaski	12	70	48	310	13	5297	5296	7271	5288	270	0	0	1	0	0	505
41	Manang	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
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	6	6	9	0	704	715	2866	1089	0	0	0	0	0	0	5867
48	Nawalparasi	12	0	0	0	0	5	5	5	27	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	8	0	0	0	0	0	0	0	0	0	0	0	0	0
	Western	192	76	62	319	13	6014	6024	10150	6619	294	0	0	1	0	0	6374
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	21	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	9	0	0	0	0	0	103	0	0	0	0	0	0	0
57	Banke	12	11	8	83	0	803	803	833	634	0	0	0	0	0	0	219
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	20	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	11	17	83	0	803	803	833	758	0	0	0	20	0	0	219
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	11	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	230	0	0	0	0	0	0	0
72	Kanchanpur	12	8	8	4	0	7	7	6	47	0	0	0	9	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	20	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	8	8	4	0	7	7	6	308	0	0	0	9	0	0	0

Hospital Analysis Major Indicators

Sheet 1 of 2

Sl	Hospital Name	Received Reports	Average Length of Stay	Bed Occupancy Rate	Bed Turnover Interval	Throughput	% of Inpatients	% of OPD	% of Emergency
Eastern Region									
1	District Hospital, Taplejung	12	2.04	57.76	1.36	107.21	12.98	72.32	14.7
2	District Hospital, Panchathar	12	2.08	71.25	0.81	126.5	9.68	52.25	38.08
3	District Hospital, Ilam	12	2.64	54.28	2.26	74.76	8.72	60.92	30.35
4	Dr. Megh Bdr. Parajuli Community Hospital	12	0.4	3.47	30	12.67	13.22	70.68	16.11
5	Mechi Zonal Hospital, Jhapa	12	3.02	43.38	3.87	53.19	9.45	72.43	18.12
6	AMDA Hospital	8	2.8	51.85	2.4	70.5	25.87	57.34	16.79
7	Kanchanjangha Hospital	11	2.1	48.87	2.23	84.92	25.1	47.2	27.69
8	Om International Mechi Hospital Pvt Ltd	4	0	0	4.74	77.47	11.94	67.58	20.48
9	Damak Hospital & Research Centre	3	2.16	2.02	89	4.4	15.5	43.61	40.89
10	Life Line Hospital Pvt Ltd	10	2.1	42.88	2.3	83.13	23.86	55.71	20.43
11	Om Shai Pathivara Hospital	11	3.11	26.51	8.65	31.08	17.74	65.45	16.81
12	Kankai Hospital Pvt Ltd	8	1.84	12.75	11.14	28.85	8.58	67.68	23.74
13	Manmohan Memorial WRCH	8	2.53	19.88	10.43	28.7	10.94	71.48	17.58
14	Anjali Hospital, Jhapa	12	1.22	29.7	2.75	92.13	14.95	66.75	18.3
15	Koshi Zonal Hospital, Biratnagar	12	3.63	58.33	2.42	60.73	9.25	68.89	21.86
16	Rangeli Hospital, Morang	12	0.93	2.16	44.63	8.47	0.74	65.8	33.46
17	Green Cross Hospital	6	1	4.37	23.27	15.93	4.03	82.87	13.1
18	Biratnagar Hospital	8	3.27	46.88	3.73	52.37	16.2	73.07	10.73
19	Abadh Narayan Memorial Hospital	6	2.17	2.14	119	3.6	15.38	84.62	0
20	Neuro Hospital Pvt. Ltd.	5	5.45				14.09	68.73	17.18
21	Shree Hospital	6	2.21	14.83	11.77	26.47	9.15	85.9	4.96
22	Golden Hospital	2	1.66	3	59	6.67	6.91	87.85	5.24
23	Vardan Hospital	2					0	43.4	56.6
24	Biratnagar City Hospital	7	0.27				28.29	68.09	3.61
25	Hamro Hospital, Biratnagar	3	0.03	0.03	121.67	3.83	28.5	53.29	18.22
26	District Hospital, Sunsari	12	1.56	56.85	0.99	143.2	8.21	70.22	21.58
27	District Hospital, Dhankuta	12	2.53	26.75	6.82	39	3.19	72.76	24.05
28	Model Hospital, Dhankuta	12		0		0	0	85.19	14.81
29	Hile Samudaiyik Swasthya Upchar Kendra PVT LTD	12	1.2				0.66	95.16	4.17
30	Hile Polyclinic PVT LTD	12	1.33	6.06	20.06	17.78	4.67	87.42	7.91
31	Subhash Medical & Diagnosis Center PVT LTD	11					0	91.75	8.25
32	District Hospital, Terhathum	12	2.06	43.85	2.03	89.42	9.12	72.4	18.47
33	District Hospital, Sankhuwasabha	12	2.47	88.11	0.32	130.67	9.46	75.86	14.68
34	GB Pradhan Memorial Hospital	12	2.83	1.81	179	2.4	0.45	99.13	0.42
35	Harisiddhee Hospital	11	2.07	19.78	8.34	35.4	13.94	74.73	11.33
36	District Hospital, Bhojpur	12	2.44	79.61	0.64	118.14	12.33	78.58	9.09
37	Siddhakali hospital	12	3.94	6.05	68.6	5.6	2.58	92.36	5.06
38	District Hospital Solukhumbu	12	2.6	77.1	1.01	101	9.18	81.39	9.43
39	Pasang Lhamu Hospital	11	3.56	4.18	86.75	4.96	2.01	89.44	8.55
40	Khunde Hospital	12	2.74	4.51	58	6.07	1.47	95.51	3.02
41	Rumjatar Hospital, Okhaldhunga	12	2.59	43.7	3.27	62.38	5.37	87.33	7.3
42	Okhaldhunga Community Hospital	12	4.04	96.37	0.1	88.17	15.17	76.51	8.32
43	District Hospital, Khotang	12	2.48	50.3	2.45	74.35	5.09	75.28	19.64
44	Katari Hospital, Udaypur	12	0.01	0.46	2.79	130.33	1.06	88.06	10.88
45	District Hospital, Udayapur	12	2.86	40.8	3.75	55.58	4.67	74.8	20.53
46	Suryodaya Hospital	12	1.35	17.64	6.4	47.8	15.98	53.83	30.19
47	Astha Hospital Katari	12	1.04	4.75	18.16	19.47	6.41	70.48	23.11
48	Sagarmatha Hospital Katari	11	1.29	6.21	20.12	17.53	11.26	81.08	7.66
49	Sagarmatha Zonal Hospital	12	2.65	64.39	1.07	98.19	15.52	60.44	24.04
50	Siraha Hospital, Siraha	12	2.14	41.48	2.99	71.47	4.89	71.07	24.04
51	Lahan Hospital, Siraha	12	1.72	40.96	2.07	96.38	17.14	52.81	30.06
52	Saptrishi Hospital, Lahan	12	1.87	59.81	0.87	133	41.66	44.59	13.75
Central Region									
53	Janakpur Zonal Hospital Dhanusha	12	3.73	86.76	0.65	83.45	18.59	53.92	27.49
54	District Hospital Mahottari	10	4.19	46.31	4.85	40.84	3.82	78.08	18.1
55	Malangawa District Hospital Sarlahi	12	3.6	63.85	1.98	65.6	2.88	58.04	39.08
56	Jayshree Om Health Care Center PVT LTD	1	2.22	2.19	118.67	3.87	60.67	19.1	20.22
57	District Hospital Sindhuli	12	2.07				6.36	69.85	23.78
58	Sindhuli General Hospital	6	0.86				10.08	76.62	13.31
59	Bharosa Community Hospital	12	1.1	0.82	181	2.73	2.26	86.64	11.1
60	District Hospital Ramechhap	12	2.52				5.14	80.81	14.04
61	Jiri District Hospital Dolakha	12	3.05	61.86	1.6	78.8	4.86	68.59	26.55
62	Tsho- Rolpa General Hospital	12	1.51	28.38	5	56	12.22	65.7	22.08
63	Dolkha Samudaik Hospital	12	3	31.89	6.55	38.8	6.41	82.07	11.52
64	District Hospital Sindhupalchowk	12	3.1	50.54	3.17	58.6	4.99	86.53	8.48
65	Methinkot Hospital	12	2.38	7.96	28	12.27	2.22	94.3	3.49
66	Hospital and Rhabilitation for Disabled Children	4	23.5	31.32	49.4	5.04	11.27	88.73	0
67	Spinal Injury Rehabilitation Center	4	8.64	2.09	170	2.92	13.85	86.15	0
68	Krishna Prasad Hospital Banepa	4	1.64	0.33		0.87	0.2	98.66	1.14
69	Banepa Hospital	4	1.93	4.31	38.56	9.2	1.21	96.89	1.9
70	Korea Nepal Friendship Hospital	5	3.72	11.17	29.36	11.42	3.98	81.86	14.16
71	Nagarik Hospital	11	22.3	74.54	-8.81	27.06	5.38	79.88	14.75
72	Kathmandu Medical College Bhaktapur	10	7.77	5.94	112.67	3.46	2.28	89.18	8.54
73	Siddhi Memorial Hospital	11	3.43	39	5.02	43.52	6.52	68.34	25.14
74	Madhyapur Hospital	10	3.63	40.17	5.45	40.41	7	84.27	8.73
75	Bhaktapur Model Clinic	10					0	100	0
76	Bir Hospital Kathmandu	12	8.84				2.89	84.09	13.02
77	Central Jail Hospital	12					0	98.52	1.48
78	International Friendship Childrens' Hospital	5	0.32	2.47	11.09	32.1	6.91	86.66	6.43
79	Kanti Children Hospital	10	6.58				5.35	62.92	31.74
80	Maternity Hospital	12	4.05	63.09	2.33	57.25	14.4	74.66	10.94
81	Sahid Memorial Hospital	5	1.92	1.96	119.33	3.8	12.02	45.03	42.96

Hospital Analysis Major Indicators

Sheet 2 of 2

N ^o	Hospital Name	Received Reports	Average Length of Stay	Bed Occupancy Rate	Bed Turnover Interval	Throughput	% of Inpatients	% of OPD	% of Emergency
82	Sukraraj Tropical Hospital	12	3.17	35.08	7.53	34.44	20.05	72.35	7.6
83	Trisuli Hospital Nuwakot	12	2.03	49.58	1.88	93.32	14.94	70.25	14.81
84	District Hospital Rasuwa	12	2.13	4.2	49.86	7.4	1.94	84.16	13.89
85	District Hospital Dhading	12	2.78	107	-0.22	142.53	4.75	68.17	27.08
86	Gajuri Vinayak Asptal	9		0		0	0	89.28	10.72
87	Shahid Memorial Hospital	12	1.98	4.56	43.5	8.5	9.3	51.96	38.74
88	Gajuri Hospital	12	1	1.57	71.8	5.73	2.29	68.34	29.37
89	Highway Community Hospital	12	3.15	2.3	178	2.93	1.38	45.08	53.54
90	Galchhi Hospital	12	0.12	0.46	24.2	15.87	6.16	72.07	21.78
91	Shivdarshan Hospital	8	0	0	30.42	12.13	12.56	49.48	37.96
92	Makwanpur District Hospital	11	2.08				7.78	65.85	26.37
93	Gaur Hospital Rautahat	12	1.34	30.1	2.49	95.16	7.48	71.47	21.05
94	Kalaiya District Hospital Bara	12	1.21	46.96	1.36	142	9.59	49.67	40.75
95	Tarai simra Hospital	9	2.48	12.84	14.81	21.73	7.36	66.5	26.13
96	community Metanety home	11	0.33				14.3	79.14	6.57
97	Bharatpur Hospital Chitwan	12	3.19	70.52	1.28	81.84	18.52	67.53	13.94
98	Chitwan Hospital Pvt Ltd	7	4.5				7.75	90.34	1.92
Western Region									
100	District Hospital, Gorkha	12	2.27	37.93	3.78	60.96	6.27	71.98	21.75
101	Aanppipal Hospital	12	3.82	37.09	6.85	34.57	7.9	89	3.1
102	Aama-baa Hospital & Research Centre	9	4.61	13.04	31.9	10.07	2.77	69.15	28.08
103	Manakamana mai hospital	9	1	0.15		0.53	0.71	83.9	15.39
104	Lamjung Community Hospital	12	2.47	52.46	2.25	77.54	7.15	80.42	12.43
105	Damauli District Hospital, Tanahu	12	1.24	1.17	44.38	8.35	3.29	80.91	15.81
106	Bandipur Hospital, Tanahu	12	2.64	23.53	8.75	32.13	5.38	77.83	16.79
107	District Hospital, Syangja	12	1.84	35.8	3.67	66.8	5.04	71.19	23.77
108	Kalika Community Hospital	10	1.43	2.37	59.33	6.05	2.68	77.79	19.53
109	Galyang Community Hospital	11	1.4	1.15	120.33	3	0.12	91.82	8.05
110	Gandaki Gramin Community Hospital	7	0.38	0.18	364	1.73	2.62	85.47	11.91
111	Western Regional Hospital, Pokhara	12	3.76	70.29	1.37	71.21	9.99	70.97	19.03
112	Manipal Teaching Hospital	12	5.12	51.25	4.94	36.56	9.33	83.94	6.73
113	District Hospital, Manang	12	2.82				1.7	90.4	7.91
114	Mustang District Hospital	12	1.93	9.72	18.33	18.2	3.8	70.68	25.52
115	Myagdi District Hospital	12	1.98	61.25	1.24	113.57	8.57	72.22	19.22
116	Parbat District Hospital, Parbat	12	2.65	40.4	3.33	61	7.39	73.61	18.99
117	Dhaulagiri Zonal Hospital	12	2.15	44.71	2.64	76.68	11.5	58.91	29.59
118	Tamghas Hospital, Gulmi	12	2.77	147.67	-0.78	183.2	6.08	78.26	15.66
119	Rampur Hospital	12	0.94	7.38	12.07	28.47	3.07	92.39	4.54
120	District Hospital, Palpa	12	3.71	30.3	8.37	30.8	3.83	85.28	10.89
121	United Mission Hospital, Palpa	11	3.95	74.32	1.62	65.85	11.83	73.28	14.89
122	Lumbini Medical College	11	4.28	16.24	21.71	14.16	8.26	84.59	7.14
123	Prithiv Chandra Hospital, Nawalparasi	12	1.76	48.4	1.84	101.5	6.97	66.04	26.99
124	Kaligandaki Hospital	7	2.55	4.02	58.17	6.12	9.74	57.37	32.89
125	Mid Point Community Hospital	10	3.35	9.58	33	10.42	6.26	71.34	22.4
126	Bahadurganj Hospital, Kapilbastu	9	1.1	53.81	0.94	179.2	5.42	90.84	3.74
127	Prithiv Bir Hospital, Kapilbastu	10	1.55	38.48	2.73	85.75	9.38	71.38	19.24
128	District Hospital, Arghakhanchi	12	1.94	46.42	2.23	87.9	17.12	57.6	25.28
129	Arghakhanchi Hospital	12	1.24	11.71	6.67	46.73	11.19	74.14	14.67
Mid-western Region									
130	District Hospital, Pyuthan	11	2.4	15.25	12.79	24.19	6.52	80.16	13.33
131	District Hospital, Rolpa	12	3.29	66.45	1.64	74.07	9.52	76.41	14.06
132	Jivan Anamol Hospital	1	2.67	1.9	179	2.73	8.46	86.98	4.56
133	Rolpa Janakalyan Hospital	1	1	0.03		0.1	1.43	85.71	12.86
134	District Hospital, Rukum	12	2.05	52.47	1.79	95	7.13	83.53	9.34
135	H.D.C.S. Hospital Chaurjahari	12	4.89	86.62	0.52	67.48	11.25	78.34	10.41
136	District Hospital, Salyan	12	2.44	49.68	2.36	76.13	5.58	87.55	6.87
137	Rapti Sub Regional Hospital	12	1.88				7.73	69.6	22.67
138	Rapti Zonal Hospital	12	0.37	4.15	6.63	52.52	6.66	66.57	26.77
139	Bheri Zonal Hospital, Banke	12	2.85	66.74	1.45	85.14	13.84	82.01	4.15
140	Bardiya Hospital	12	1.99	40.23	2.92	74.72	7.82	73.65	18.54
141	Mid Western Regional Hospital, Surkhet	12	2.53	96.61	-0.04	146.6	15.65	73.86	10.49
142	District Hospital, Dailekh	12	2.73	42.27	3.65	57.7	8.7	76.99	14.31
143	District Hospital, Jagarkot	12	2.09	55.38	1.55	100.47	6.12	81.02	12.86
144	District Hospital, Dolpa	12	3.24	27.95	8.48	31.4	1.65	86.43	11.93
145	Karnali Academy of Health Science	10	1.24	5.75	20.18	17.86	8.2	75.91	15.89
146	District Hospital, Kalikot	12	3.13	38.43	5.11	44.81	7.33	80.24	12.43
147	District Hospital, Mugu	12	3.7	57.11	2.7	57.13	6.09	86.26	7.64
148	District Hospital, Humla	12	2.45	76.13	0.78	113	9.44	73.87	16.69
Far western Region									
149	District Hospital, Bajura	12	2.3	27.73	5.8	45.2	4.16	86.53	9.31
150	District Hospital, Bajhang	12	2.19	50.54	1.99	87.64	8.34	66.81	24.85
151	Amisha Hospital Pvt. LTD	12	2.04	34.79	1.33	108.15	10.52	86.79	2.69
152	District Hospital, Achham	12	2.66				7.35	72.84	19.81
153	Bayalpata Hospital (Nyaya Health)	12	3.12				3.09	89.12	7.8
154	District Hospital, Doti	12	3.16	57.95	1.97	71.27	3.53	79.52	16.95
155	Sujiang Hospital	12	1.66	7.06	22.6	15.78	9.21	76.07	14.72
156	Seti Zonal Hospital, Kailali	10	2.66	67.2	1.26	93.32	20.5	52.77	26.72
157	Tikapur Hospital, Kailali	12	1.99	74.36	0.63	139.5	4.37	81.77	13.86
158	Lal Ratna Hospital	10	1				1.96	39.24	58.8
159	Ghoda Ghodi Hospital	10	1.56	10.43	13.63	24.4	3.49	73.59	22.92
160	Nawa Jeewan Hospital	10	3.21	14.14	19.44	16.88	12.02	54.41	33.57
161	Sewa Nurshing Home	4	1.67	1.65	119.67	3.61	6.42	59.07	34.52
162	Mahakali Zonal Hospital	12	2.32	34.61	4.29	55.89	9.3	51.93	38.77
163	District Hospital, Dadeldhura	12	4.73				3.9	72.83	23.27
164	District Hospital, Baitadi	12	1.28	13.43	13.32	25.06	7.95	82.48	9.58

Raw Data

Hospital Summary

SN	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	Neonatal Services Provided
													X-Ray	Ultra Sound	Endoscopy / Colonoscopy	ECG / Echocardiograph	CT-Scan / MRI			
Eastern Region																				
1	District Hospital, Taplejung	12	15	28	3002	5903	2890	16103	3273	2903	8998	34167	2653	491	21	0	0	2333	15921	355
2	District Hospital, Panchathar	12	15	30	3795	7802	3756	20280	14781	7294	963	47074	2052	1389	0	0	0	2976	21507	806
3	District Hospital, Ilam	12	15	25	1869	4953	1874	13087	6520	2074	181	23736	939	292	0	306	0	971	39460	837
4	Dr. Megh Bdr. Parajuli Community Hospital	12	15	15	190	190	471	2519	574	0	296	3860	480	51	0	112	0	4	2797	0
5	Mechi Zonal Hospital, Jhapa	12	50	114	6064	18051	5985	45882	11481	8896	4052	76296	14340	5003	0	2642	0	1128	82915	1111
6	AMDA Hospital	8	75	100	7050	18927	6761	14983	4386	0	1376	27506	4314	2886	0	1132	0	4170	96115	3812
7	Kanchanjangha Hospital	11	25	25	2123	4459	2123	3992	2342	0	535	8992	1855	4800	0	2278	0	0	30675	0
8	Om International Mechi Hospital Pvt Ltd	4	15	15	1162	0	603	3412	1034	6	0	5055	49	1118	0	0	0	508	2750	680
9	Damak Hospital & Research Centre	3	50	50	220	369	171	481	451	238	102	1443	311	247	0	50	0	50	569	6
10	Life Line Hospital Pvt Ltd	10	100	100	8313	15653	7461	17424	6389	1413	143	32830	6814	7964	75	2218	0	4191	25478	4392
11	Om Shai Pathivara Hospital	11	100	100	3108	9676	3111	11478	2949	168	1512	19218	7211	3820	58	2706	1108	38	73030	38
12	Kankai Hospital Pvt Ltd	8	55	55	1587	2559	1389	10958	3843	0	1965	18155	6210	3373	872	1209	0	6606	25389	0
13	Bajaranga Medical & Diagnostic Centre	9	0	0	0	0	0	2023	0	0	0	2023	1253	1719	253	537	0	0	9709	0
14	Manmohan Memorial WRCH	8	100	100	2870	7257	2871	18767	4616	4135	1956	32345	9413	6528	211	1972	0	227	118434	225
15	Anjali Hospital, Jhapa	12	15	15	1382	1626	1335	5960	1634	121	417	9467	1311	907	20	0	0	30	20338	5
16	Koshi Zonal Hospital, Biratnagar	12	250	300	18219	63870	17610	131194	41639	26270	16709	233422	33209	20022	266	5026	0	9505	435081	735
17	Rangeli Hospital, Morang	12	15	15	127	118	127	11256	5723	2971	1216	21293	1233	0	0	0	0	102	9110	0
18	Green Cross Hospital	6	15	15	239	239	239	4916	777	0	0	5932	1473	991	0	0	0	0	3320	0
19	Biratnagar Hospital	8	100	100	5237	17111	5236	23611	3467	3090	4138508	10490	12895	773	2044	1758	965	122810	1089	
20	Abadhi Narayan Memorial Hospital	6	15	15	54	117	54	297	0	59	0	410	23	241	0	0	0	177	834	44
21	Neuro Hospital Pvt. Ltd.	5	100	0	5342	29111	5342	26048	6511	0	1976	39877	18106	5890	563	1311	5246	1140	0	0
22	Shree Hospital	6	15	15	397	812	367	3447	199	0	48	4061	1310	1004	677	111	189	352	0	786
23	Golden Hospital	2	15	15	100	164	99	1258	75	0	0	1432	579	66	74	577	0	7	4313	0
24	Vardan Hospital	2	15	0	0	0	0	23	30	0	0	53	35	12	29	18	0	0	84	0
25	Biratnagar City Hospital	7	0	0	646	137	509	1225	65	36	46	1881	938	313	80	166	21	0	1469	0
26	Hamro Hospital, Biratnagar	3	100	100	383	12	377	705	241	0	0	1323	745	315	0	486	0	67	1292	36
27	District Hospital, Sunsari	12	25	25	3580	5188	3331	28505	8759	7021	0	47616	1820	1930	0	0	0	0	0	0
28	District Hospital, Dhankuta	12	50	27	1053	2636	1042	23765	7856	18469	4098	55230	2392	2545	0	194	0	4011	21353	334
29	Model Hospital, Dhankuta	12	15	15	0	0	0	3151	548	0	339	4038	766	247	0	15	0	0	1270	6
30	Hile Samudaiyik Swasthya Upchar Kendra PVT LTD	12	0	0	25	30	25	3581	157	354	173	4290	746	451	0	1	0	0	1476	0
31	Hile Polyclinic PVT LTD	12	15	9	160	199	150	2808	254	20	0	3232	314	176	0	26	0	163	3323	25
32	Subhash Medical & Diagnosis Center PVT LTD	11	0	0	0	0	0	89	8	0	621	718	1011	72	0	0	0	0	1858	0
33	District Hospital, Terhathum	12	15	19	1699	3041	1476	11714	2989	1279	0	17458	2043	1104	0	207	0	217	3528	173
34	District Hospital, Sankhuwasabha	12	15	18	2352	5789	2342	18789	3636	24	3265	28056	5923	2871	0	746	0	855	26330	759
35	GB Pradhan Memorial Hospital	12	15	15	36	99	35	7787	33	798	0	8653	1455	2311	17	74	0	0	3111	0
36	Harisiddhee Hospital	11	15	15	531	1083	524	2810	426	0	1031	4791	891	964	0	66	1	22	4895	0
37	District Hospital, Bhojpur	12	15	22	2599	6393	2617	16684	1931	27413	3046	51691	2693	276	0	131	0	750	23619	328
38	Siddhakali hospital	12	15	15	84	331	84	3012	165	0	0	3261	1234	172	0	184	0	0	2092	0
39	District Hospital Solukhumbu	12	15	15	1515	4221	1624	14406	1669	0	436	18135	665	1344	136	0	0	0	1678	765
40	Pasang Lhamu Hospital	11	25	25	124	381	107	4752	454	207	576	6096	430	255	294	103	320	266	2116	27
41	Khunde Hospital	12	15	15	91	247	90	5845	185	194	523	6837	141	164	0	19	0	243	252	62
42	Rumjatar Hospital, Okhaldhunga	12	15	8	499	1276	492	7995	668	390	2920	12465	522	316	0	12	0	468	1922	59
43	Okhaldhunga Community Hospital	12	32	46	4056	16180	4008	20216	2198	2666	0	29088	4493	3195	0	765	0	2153	38610	1484
44	District Hospital, Khotang	12	15	20	1487	3672	1483	21953	5726	3504	3268	35934	2460	1560	0	344	0	1979	6318	354
45	Katari Hospital, Udaypur	12	15	3	391	5	391	32505	4018	3407	561	40882	14	0	0	2	0	1483	2663	399
46	District Hospital, Udayapur	12	50	36	2001	5361	1873	30020	8240	0	5022	45155	5206	4893	0	108	0	1427	19556	1347
47	Suryodaya Hospital	12	15	15	717	966	717	2416	1355	0	0	4488	1866	1096	0	221	0	0	2851	0
48	Astha Hospital Katari	12	15	15	292	260	249	2736	897	0	175	4057	730	0	0	96	0	0	2679	0
49	Sagarmatha Hospital Katari	11	15	15	263	340	263	1894	179	9	113	2458	321	6	0	6	0	20	3098	3
50	Sagarmatha Zonal Hospital	12	50	100	9819	23502	8875	34560	13744	0	0	57179	3829132	0	0	581	0	5864	7106	172
51	Siraha Hospital, Siraha	12	15	15	1072	2271	1060	15398	5208	0	71	21737	3386	0	0	91	0	426	23399	425
52	Lahan Hospital, Siraha	12	50	50	4819	7475	4352	13412	7634	0	0	25398	3540	0	2494	430	0	2229	26685	2355
53	Saptrishi Hospital, Lahan	12	50	50	6650	10916	5838	6248	1926	0	0	14012	5203	4222	0	81	0	3153	5774	3118
Central Region																				
54	Janakpur Zonal Hospital Dhanusha	12	200	200	16690	63336	16997	49299	25132	142018	7017	240463	13839	4262	43	746	0	9376	76471	2011
55	District Hospital Mahottari	10	25	25	1021	4226	1008	20612	4777	0	0	26397	3439	60	0	0	0	775	13539	764
56	Malangawa District Hospital Sarlahi	12	15	15	984	3496	970	19541	13158	0	0	33669	0	0	0	0	0	1015	9183	1015
57	Jayshree Om Health Care Center PVT LTD	1	15	15	58	120	54	17	18	0	22	111	225	151	0	46	0	0	439	7
58	District Hospital Sindhuli	12	0	0	1306	2603	1258	13806	4701	0	0	19765	1705	457	0	15	0	428	9692	423
59	Sindhuli General Hospital	6	0	0	342	291	340	2585	449	0	0	3374	334	44	0	0	0	45	1397	45
60	Bharosa Community Hospital	12	15	15	41	45	41	1569	201	29	0	1840	175	61	0	11	0	10	355	6
61	District Hospital Ramechhap	12	0	0	982	245														

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Hospital Summary

SN	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	Neonatal Services Provided		
													X-Ray	Ultra Sound	Endoscopy / Colonoscopy	ECG / Echocardiograph	CT-Scan / MRI					
85	District Hospital Rasuwa	12	15	15	111	230	108	4676	772	447	0	6003	703	1	0	0	0	233	1270	48		
86	District Hospital Dhading	12	15	15	2138	5858	2109	30286	12031	824	921	46171	9064	3012	0	902	0	1081	81068	609		
87	Gajuri Vinayak Asptal	9	15	15	0	0	0	1791	215	0	0	2006	158	0	0	60	0	0	404	0		
88	Shahid Memorial Hospital	12	50	50	425	833	421	2351	1753	0	1160	5685	1662	1087	0	101	0	23	3858	26		
89	Gajuri Hospital	12	15	15	86	86	86	2566	1103	0	0	3755	1280	1075	0	31	0	0	1577	0		
90	Highway Community Hospital	12	15	15	44	126	40	1310	1556	0	754	3660	936	126	0	0	0	3	228	3		
91	Galchhi Hospital	12	15	15	238	25	201	2353	711	150	212	3627	1147	45	0	0	0	0	905	23		
92	Shivdarshan Hospital	8	15	15	182	0	181	713	547	35	0	1476	553	0	0	46	0	0	723	0		
93	Makwanpur District Hospital	11	0	0	4450	9079	4367	36970	14804	0	0	56141	7802	19	0	239	0	1514	55728	1277		
94	Gaur Hospital Rautahat	12	25	25	2379	2747	2048	19581	5767	0	0	27396	1756	0	0	0	0	1778	8175	3262		
95	Kalaia District Hospital Bara	12	50	25	3550	4285	3528	18274	14992	0	0	36794	3052	37	0	0	0	2753	7503	218		
96	Tarai simra Hospital	9	15	15	326	703	284	2565	1008	0	0	3857	1891	0	0	143	0	0	2451	0		
97	community Metanety home	11	0	0	562	170	516	2856	237	155	60	3824	75	0	0	0	0	221	3720	90		
98	Bharatpur Hospital Chitwan	12	300	415	33962	106817	33514	122190	25226	8667	11599	201196	34463	26987	960	4544	0	8390	412486	774		
99	Chitwan Hospital Pvt Ltd	7	0	0	1827	8016	1783	20787	441	0	0	23011	7368	4585	1220	3236	0	0	5864	0		
Western Region																						
100	District Hospital, Gorkha	12	50	50	3048	6922	3048	34995	10572	893	327	49835	6178	3066	0	766	0	1109	47304	1114		
101	Aanppipal Hospital	12	15	46	1590	6227	1629	18352	640	1769	969	23359	1691	965	10	101	0	800	10262	203		
102	Aama-baa Hospital & Research Centre	9	15	15	151	714	155	3864	1569	0	0	5588	1512	1597	0	131	0	0	2594	0		
103	Manakamana mai hospital	9	15	15	8	8	8	943	173	0	0	1124	89	0	0	0	0	0	363	0		
104	Lamjung Community Hospital	12	50	52	4032	9956	4025	45240	6993	3482	1648	61388	9500	4394	39	1090	0	7471	56441	1052		
105	Damauli District Hospital, Tanahu	12	50	23	192	98	79	1945	380	5105	0	7509	0	0	0	0	0	466	0	0		
106	Bandipur Hospital, Tanahu	12	15	15	482	1288	488	7056	1522	2248	9501	20815	533	1	0	86	0	277	5912	55		
107	District Hospital, Syangja	12	25	15	1002	1960	1067	15079	5034	13036	0	34216	1806	670	0	152	0	427	13339	416		
108	Kalika Community Hospital	10	100	20	121	173	121	3514	882	0	341	4858	1033	170	0	275	0	8	3942	8		
109	Galyang Community Hospital	11	15	5	15	21	15	11096	973	0	0	12084	1013	609	0	56	0	2	2873	24		
110	Gandaki Gramin Community Hospital	7	15	15	26	10	26	847	118	0	0	991	166	13	0	1	0	0	309	0		
111	Western Regional Hospital, Pokhara	12	300	300	21362	76973	20455	145253	38956	0	0	204664	47958	17224	1543	16478	1682	17088	314925	8067		
112	Manipal Teaching Hospital	12	750	700	25593	130937	25593	230308	18472	3665	2033	280071	34005	18986	661	13594	7760	6689	877371	4157		
113	District Hospital, Manang	12	0	0	80	223	79	4207	368	112	13	47779	117	54	0	0	0	49	114	8		
114	Mustang District Hospital	12	15	15	273	532	275	5116	1847	293	0	7531	682	172	0	7	0	198	2117	41		
115	Myagdi District Hospital	12	15	23	2612	5142	2596	21888	5824	6031	797	37136	2132	962	0	119	0	748	31725	579		
116	Parbat District Hospital, Parbat	12	15	26	1586	3834	1445	14388	3712	10424	135	30104	2239	1645	0	149	0	3410	10575	354		
117	Dhaulagiri Zonal Hospital	12	50	50	3834	8160	3804	19490	9788	4206	0	37288	4009	3281	87	1197	0	4081	28855	1449		
118	Tamghas Hospital, Gulmi	12	15	15	2748	8085	2922	37606	7526	3258	0	51312	5588	2693	0	299	0	2797	12966	818		
119	Rampur Hospital	12	15	15	427	404	430	12937	635	7417	4850	26269	995	0	0	0	0	2216	1895	263		
120	District Hospital, Palpa	12	15	15	462	1659	447	9958	1272	250	0	11927	2893	0	0	11	0	2028	11346	17		
121	United Mission Hospital, Palpa	11	165	165	10865	44761	11328	70174	14261	2989	0	98752	30660	7494	278	5291	0	1957	186165	3634		
122	Lumbini Medical College	11	600	600	8497	35571	8313	85106	7187	10494	4827	115927	24598	9902	378	3939	2480	2277	171774	1803		
123	Prithiv Chandra Hospital, Nawalparasi	12	15	18	1827	3180	1807	17124	7000	6924	0	32855	3184	1707	0	228	0	2216	20555	1105		
124	Kaligandaki Hospital	7	51	51	312	748	293	1725	989	0	0	3007	921	235	0	135	0	0	1356	0		
125	Mid Point Community Hospital	10	55	52	542	1818	542	6182	1941	200	0	8865	2277	1071	0	442	0	36	850	19		
126	Bahadurganj Hospital, Kapilbastu	9	15	5	896	982	896	15010	618	102	132	16758	0	0	0	0	0	767	335	420		
127	Prithiv Bir Hospital, Kapilbastu	10	15	20	1715	2809	1811	13785	3715	1678	0	20989	2027	1858	0	45	0	967	10226	955		
128	District Hospital, Arghakhanchi	12	15	30	2637	5083	2615	8800	3863	2787	0	18065	1600	818	0	64	0	2807	15717	549		
129	Arghakhanchi Hospital	12	15	15	701	641	518	3431	679	85	1256	5969	1972	1688	0	204	0	276	10630	3		
Mid-western Region																						
130	District Hospital, Pyuthan	11	15	26	629	1447	602	7405	1231	0	0	9238	1372	223	0	0	0	179	10501	193		
131	District Hospital, Rolpa	12	15	15	1111	3638	1106	8873	1633	253	5352	17217	2970	956	7	47	0	458	14257	134		
132	Jivan Anamol Hospital	1	15	15	41	104	39	401	21	0	0	461	54	0	0	13	0	1	1450	0		
133	Rolpa Janakalyan Hospital	1	10	10	1	1	1	60	9	0	22	92	4	16	0	0	0	0	43	0		
134	District Hospital, Rukum	12	15	25	2375	4788	2333	27340	3057	451	463	33644	2654	1922	0	89	0	3299	12889	525		
135	H.D.C.S. Hospital Chaurjahari	12	40	40	2699	12647	2586	18003	2393	4274	1764	29020	7104	3902	0	364	0	1763	50521	519		
136	District Hospital, Salyan	12	15	15	1142	2720	1114	17471	1370	21532	3244	44731	1047	946	0	8	0	2722	12965	506		
137	Rapti Sub Regional Hospital	12	0	0	6291	11566	6153	55402	18047	35211	210	115023	11707	5008	0	1227	0	3525	188286	3882		
138	Rapti Zonal Hospital	12	50	50	2626	758	2032	20318	8172	11959	10081	52562	3852	2674	0	370	0	4900	13030	1111		
139	Bheri Zonal Hospital, Banke	12	200	150	12771	36538	12834	76056	3845	222395	1728	316858	14163	7091	0	2366	976	9942	213807	896		
140	Bardiya Hospital	12	25	25	1868	3671	1842	17359	4369	4186	0	27756	1279	158	0	0	0	3053	16085	770		
141	Mid Western Regional Hospital, Surkhet	12	50	50	7330	17631	6959	32850	4665	194	162	44830	8008	6944	111	0	0	8266	74506	2988		
142	District Hospital, Dailekh	12	15	30	1731	4629	1698	15022	2792	1525	1380	22417	2909	2940	0	116	0	1633	19622	418		
143	District Hospital, Jagarkot	12	15	15	1507	3032	1451	19208	3048	1167	0	24874	792	938	0	36	0	2215	3791	171		
144	District Hospital, Dolpa	12	15	15	4714																	

Raw Data

Hospital Summary

SN	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		Intermedi ate		Minor		OPD Surgery		OPD Plaster													
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Normal	Forceps	Vaccum	Breach	C/S							
Eastern Region																								
1	District Hospital, Taplejung	12	0	0	0	0	52	73	89	126	76	112	348	8	3	2	15	218	70	0	1	0	0	0
2	District Hospital, Panchathar	12	98	0	0	0	193	0	247	474	145	219	632	0	25	15	97	287	69	6	0	0	4	10
3	District Hospital, Ilam	12	167	0	6	1	0	0	55	74	49	62	561	0	91	14	167	95	30	0	0	0	9	9
4	Dr. Megh Bdr. Parajuli Community Hospital	12	23	0	0	0	0	0	0	0	1	1	3	0	1	0	0	0	0	0	0	0	0	0
5	Mechi Zonal Hospital, Jhapa	12	396	185	6	60	191	267	224	296	1	2	746	0	18	5	359	38	123	4	0	0	32	36
6	AMDA Hospital	8	1479	41	40	63	333	320	756	800	59	80	2270	53	112	17	1656	20	46	0	0	0	1	1
7	Kanchanjangha Hospital	11	8	17	0	11	25	21	0	0	10	7	0	0	0	0	0	0	0	0	0	0	0	0
8	Om International Mechi Hospital Pvt Ltd	4	0	0	0	0	0	0	0	0	0	0	256	16	13	0	313	0	45	0	0	0	0	0
9	Damak Hospital & Research Centre	3	9	14	0	0	12	14	20	17	0	0	0	0	0	0	0	6	1	0	0	0	0	0
10	Life Line Hospital Pvt Ltd	10	2053	63	193	84	337	301	0	0	0	0	2003	50	80	27	1847	0	13	1	0	6	20	
11	Om Shai Pathivara Hospital	11	469	295	0	0	112	179	0	0	14	22	4	0	0	0	34	24	40	0	0	0	38	38
12	Kankai Hospital Pvt Ltd	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	Baranganga Medical & Diagnostic Centre	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Manmohan Memorial WRCH	8	201	196	175	239	42	46	9	15	331	268	127	0	14	2	86	58	172	0	0	0	13	13
15	Anjali Hospital, Jhapa	12	0	0	1	0	12	18	0	0	5	6	3	0	0	0	0	0	0	0	0	0	0	0
16	Koshi Zonal Hospital, Biratnagar	12	2284	290	81	231	393	123	78	120	399	840	5588	2	176	76	1755	179	308	31	7	3	99	140
17	Rangeli Hospital, Morang	12	0	0	0	0	0	0	0	3	0	0	89	0	0	0	0	0	0	0	0	0	1	1
18	Green Cross Hospital	6	29	36	15	15	12	21	0	0	15	36	0	0	0	0	0	0	0	0	0	0	0	0
19	Biratnagar Hospital	8	555	257	64	65	148	130	0	2	36	62	165	0	0	0	272	0	58	0	0	0	46	46
20	Abadh Narayan Memorial Hospital	6	31	0	0	0	0	0	0	0	0	0	16	0	0	0	24	0	0	1	0	0	0	1
21	Neuro Hospital Pvt. Ltd.	5	77	105	17	33	10	20	0	0	0	0	0	0	0	0	0	0	0	0	0	0	19	19
22	Shree Hospital	6	50	23	21	30	16	11	2	3	3	42	13	0	0	20	0	0	0	0	0	0	3	3
23	Hamro Hospital, Biratnagar	3	70	21	13	27	16	17	0	0	9	25	6	0	0	0	21	0	0	1	0	1	2	4
24	District Hospital, Sunsari	12	0	0	0	0	0	0	0	0	0	0	1634	0	0	0	0	0	0	0	0	0	0	0
25	District Hospital, Dhankuta	12	67	107	0	0	11	0	148	130	4	8	273	0	11	1	3	141	28	0	0	0	1	1
26	Subhash Medical & Diagnosis Center PVT LTD	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27	District Hospital, Terhathum	12	0	0	0	0	25	30	50	62	140	174	227	0	10	2	8	47	38	1	0	0	3	4
28	District Hospital, Sankhuwasabha	12	24	0	0	0	0	0	0	0	7	7	104	0	2	0	24	71	0	0	0	0	1	1
29	GB Pradhan Memorial Hospital	12	0	0	0	0	44	35	0	0	6	7	0	0	0	0	0	1	0	0	0	0	0	0
30	Harisiddhee Hospital	11	0	0	0	0	0	0	0	0	3	7	0	0	0	0	0	0	0	0	0	0	0	0
31	District Hospital, Bhojpur	12	72	0	0	0	26	18	0	0	59	67	233	0	10	1	54	37	43	1	0	0	10	11
32	Siddhakali hospital	12	0	0	0	0	24	27	0	0	11	9	0	0	0	0	0	0	0	0	0	0	0	0
33	District Hospital Solukhumbu	12	5	2	0	0	2	2	93	86	95	129	130	0	5	1	39	131	4	0	0	0	1	1
34	Pasang Lhamu Hospital	11	0	0	0	0	0	0	0	0	0	0	25	0	1	0	0	0	0	0	0	0	0	0
35	Khunde Hospital	12	0	0	0	0	6	13	10	8	4	4	15	0	0	1	0	0	0	0	0	0	0	0
36	Rumjatar Hospital, Okhaldhunga	12	0	0	0	0	0	0	38	65	4	14	49	0	0	0	0	30	2	0	0	0	0	0
37	Okhaldhunga Community Hospital	12	158	62	32	42	218	287	373	443	53	88	662	1	26	21	59	0	63	14	0	0	35	49
38	District Hospital, Khotang	12	50	0	0	0	0	0	0	0	0	0	289	0	1	2	50	122	75	0	0	1	4	5
39	Katari Hospital, Udaypur	12	0	0	0	0	0	0	0	0	0	0	352	0	0	3	0	8	2	0	0	0	1	1
40	District Hospital, Udayapur	12	0	0	0	0	0	0	0	0	0	0	1043	0	81	15	195	4	14	0	0	0	0	0
41	Suryodaya Hospital	12	0	0	0	0	5	7	3	3	7	13	0	0	0	0	0	0	0	0	0	0	0	0
42	Sagarmatha Zonal Hospital	12	68	0	0	0	7	3	0	0	0	0	3651	0	35	53	375	105	223	1	1	2	12	16
43	Siraha Hospital, Siraha	12	0	0	0	0	0	0	0	0	11	17	346	0	1	1	0	0	9	0	0	1	2	3
44	Lahan Hospital, Siraha	12	248	0	9	2	19	0	0	0	0	0	1947	0	37	19	103	6	98	0	0	1	2	3
45	Saptrishi Hospital, Lahan	12	310	99	73	60	52	56	57	54	132	147	2193	0	197	87	230	90	41	0	0	0	5	5
Central Region																								
46	District Hospital Mahottari	10	0	0	0	0	6	8	3	6	11	27	742	16	14	3	1	0	13	0	0	2	2	4
47	Malangawa District Hospital Sarlahi	12	0	0	0	0	0	0	0	0	16	30	1023	0	0	9	0	10	43	0	0	0	0	0
48	District Hospital Sindhuli	12	0	0	0	0	0	0	0	0	0	0	416	6	2	2	0	15	22	0	0	1	3	4
49	Sindhuli General Hospital	6	0	0	0	0	0	0	0	0	0	0	44	0	1	0	0	1	3	0	0	0	0	0
50	Hospital and Rhabilitation for Disabled Children	4	104	165	0	0	70	160	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Nagarik Hospital	11	18	29	7	9	17	27	102	130	10	15	4	0	0	0	0	1	0	0	0	0	4	4
52	Siddhi Memorial Hospital	11	25	0	0	0	5	0	0	0	0	0	63	0	1	0	20	30	9	3	0	0	0	3
53	Madhyapur Hospital	10	0	0	0	0	0	0	0	0	0	0	11	1	1	0	18	40	3	1	0	0	5	6
54	Sahid Memorial Hospital	5	2	7	16	21	5	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Highway Community Hospital	12	0	0	0	0	13	27	6	4	63	96	3	0	0	0	0	0	0	0	0	0	0	0
56	Makwanpur District Hospital	11	114	0	0	0	0	0	0	0	0	0	1313	0	3	7	132	25	106	0	0	0	16	16
57	Gaur Hospital Rautahat	12	14	0	0	0	13	6	47	62	57	73	1709	18	14	4	30	2	0	0	0	0	1	1
58	Janakpur Zonal Hospital Dhanusha	12	1170	44	15	11	40	59	763	1014	317	468	7772	1	565	130	1186	36	90	58	5	0	41	104
59	Bir Hospital Kathmandu	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	47	47
60	International Friendship Childrens' Hospital	5	21	47	33	84	37	70	90	220	28	52	0	0	0	0	0	0	0	0	0	0	0	0
61	District Hospital Dhading	12	0	0	1	0	56	73	113	108	532	682	573	0	9	4	14	350	56	0	0	0	8	

Raw Data

Hospital Summary

SN	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		Intermedi ate		Minor		OPD Surgery		OPD Plaster		Normal	Forceps	Vaccum	Breech	C/S								
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male													
71	Kalaiya District Hospital Bara	12	52	0	0	0	0	0	0	0	0	0	2394	0	0	0	36	52	0	47	0	0	0	1	1
72	Tarai simra Hospital	9	0	0	0	0	0	0	2	7	27	46	0	0	0	0	0	0	0	0	0	0	0	0	0
73	Bharatpur Hospital Chitwan	12	149	137	226	202	414	395	559	540	271	345	7881	3	449	46	1875	339	169	15	0	223	197	435	
74	Bharosa Community Hospital	12	0	0	0	0	0	0	0	1	2	3	6	0	0	0	0	0	0	0	0	0	0	0	0
75	District Hospital Ramechhap	12	0	0	0	0	59	71	109	148	113	119	123	0	2	0	0	98	16	0	0	2	6	8	
76	Jiri District Hospital Dolakha	12	7	0	0	0	128	118	179	171	184	234	130	0	1	5	12	41	31	1	0	2	3	6	
77	District Hospital Sindhupalchowk	12	0	0	0	0	32	35	66	73	40	63	201	2	5	2	0	11	24	0	0	0	6	6	
78	Korea Nepal Friendship Hospital	5	5	7	7	1	11	2	4	1	15	21	1	0	0	0	1	0	0	0	0	0	0	0	0
79	Maternity Hospital	12	4606	0	0	0	2490	0	0	0	0	0	11884	0	0	0	4475	114	3	67	0	0	22	89	
Western Region																									
80	District Hospital, Gorkha	12	249	16	31	26	120	95	1619	2168	145	197	908	1	27	11	128	68	68	0	0	2	15	17	
81	Aanppipal Hospital	12	90	75	64	63	370	419	0	0	54	101	139	1	5	1	36	0	7	0	0	0	8	8	
82	Aama-baa Hospital & Research Centre	9	0	0	0	0	19	8	2	1	24	19	0	0	0	0	0	0	0	0	0	0	0	0	0
83	Lamjung Community Hospital	12	109	38	124	121	245	211	0	24	86	77	897	2	20	9	66	0	67	1	1	0	11	13	
84	Bandipur Hospital, Tanahu	12	7	0	0	0	0	0	0	0	0	0	43	0	1	0	0	0	0	0	0	0	3	3	
85	District Hospital, Syangja	12	0	0	0	0	9	0	29	21	45	38	398	0	1	0	0	48	10	0	0	0	0	0	0
86	Kalika Community Hospital	10	0	0	12	23	44	62	63	88	56	95	2	0	0	0	0	0	0	0	0	1	3	4	
87	Western Regional Hospital, Pokhara	12	2229	491	364	483	716	869	0	0	0	5283	44	165	55	1713	186	253	31	2	16	115	164		
88	Manipal Teaching Hospital	12	1026	581	110	188	247	240	87	195	91	147	1131	17	36	11	573	17	195	10	2	13	289	314	
89	District Hospital, Manang	12	0	0	0	0	2	4	0	0	1	2	6	0	0	0	0	0	0	0	0	0	0	0	0
90	Mustang District Hospital	12	0	0	0	0	29	72	45	96	9	14	40	0	0	2	0	9	0	0	0	0	3	3	
91	Myagdi District Hospital	12	1	0	18	29	36	25	1130	1132	112	131	476	50	8	5	0	388	55	1	0	0	8	9	
92	Parbat District Hospital, Parbat	12	0	0	0	0	0	0	0	0	118	144	353	0	1	0	0	113	45	0	0	0	0	0	0
93	Dhaulagiri Zonal Hospital	12	0	0	2	2	1	0	2	1	10	12	1218	0	49	9	167	363	91	0	0	0	6	6	
94	Tamghas Hospital, Gulmi	12	7	0	0	0	0	0	265	73	294	244	410	0	32	0	21	11	17	0	0	0	0	0	0
95	Rampur Hospital	12	0	0	22	0	0	0	0	0	0	0	101	0	0	0	0	0	0	0	0	0	0	0	0
96	District Hospital, Palpa	12	0	0	0	0	1	2	34	28	25	29	9	0	0	0	0	11	7	0	0	0	1	1	
97	United Mission Hospital, Palpa	11	797	771	219	396	391	405	1208	1446	596	886	1427	6	69	14	241	0	153	22	1	31	154	208	
98	Lumbini Medical College	11	719	683	0	0	175	136	0	0	103	148	674	8	67	60	118	2	40	0	0	0	39	39	
99	Prithiv Chandra Hospital, Nawalparasi	12	23	0	0	0	0	0	172	245	110	158	936	0	13	7	23	20	68	0	0	0	14	14	
100	Kaligandaki Hospital	7	1	0	0	0	7	11	12	6	25	35	9	0	0	0	0	0	0	0	0	0	0	0	0
101	Mid Point Community Hospital	10	0	0	0	0	0	0	7	13	20	19	22	0	0	0	0	0	5	1	0	0	3	4	
102	Bahadurganj Hospital, Kapilbastu	9	0	0	0	0	0	0	0	0	0	4	188	0	10	1	0	0	13	0	0	0	0	0	0
103	Prithiv Bir Hospital, Kapilbastu	10	0	0	0	0	0	0	0	0	0	0	932	10	5	20	2	15	81	0	0	0	10	10	
104	District Hospital, Arghakhanchi	12	0	0	0	0	18	13	0	0	0	0	519	0	56	4	4	310	60	0	0	0	1	1	
Mid-western Region																									
105	District Hospital, Rolpa	12	0	0	0	0	0	0	7	7	2	2	114	0	0	0	0	84	37	0	0	0	6	6	
106	Jivan Anamol Hospital	1	0	0	0	0	0	0	3	5	5	7	0	0	0	0	0	0	0	0	0	0	0	0	0
107	District Hospital, Rukum	12	9	0	0	0	5	2	38	36	99	112	369	1	53	11	15	87	29	1	1	0	2	4	
108	H.D.C.S. Hospital Chaurjahari	12	210	115	23	39	14	10	114	143	47	104	375	2	7	3	52	0	128	3	0	0	2	5	
109	District Hospital, Salyan	12	6	0	0	0	1	0	254	302	22	54	492	0	0	4	9	117	51	1	0	1	0	2	
110	Rapti Sub Regional Hospital	12	458	90	73	86	680	729	35	37	165	178	2846	0	179	131	361	226	215	6	4	0	18	28	
111	Rapti Zonal Hospital	12	0	0	0	0	12	15	1	1	3	3	669	4	12	3	0	84	128	0	0	0	7	7	
112	Bheri Zonal Hospital, Banke	12	1987	36	158	116	60	224	222	94	162	0	3605	7	0	0	47	52	197	49	8	0	46	103	
113	Bardiya Hospital	12	5	0	0	0	0	8	0	0	0	0	815	1	7	8	6	61	88	3	0	0	6	9	
114	Mid Western Regional Hospital, Surkhet	12	863	287	33	43	740	490	44	0	0	0	2232	18	348	45	590	231	123	1	3	0	39	43	
115	District Hospital, Dailekh	12	69	0	4	0	3	0	17	19	143	191	382	0	21	6	24	281	26	5	0	0	21	26	
116	District Hospital, Jagarkot	12	0	2	0	0	158	120	201	174	30	26	163	0	0	0	0	60	47	0	0	0	3	3	
117	District Hospital, Dolpa	12	0	0	0	0	27	23	7	0	27	32	81	0	0	0	0	5	1	0	0	0	0	1	
118	Karnali Academy of Health Science	10	58	20	1	1	38	117	0	0	18	36	277	3	0	9	52	107	10	0	2	0	5	7	
119	District Hospital, Kalikot	12	11	4	5	6	19	30	2	7	79	127	178	0	7	6	10	44	6	0	0	0	3	3	
120	District Hospital, Mugu	12	1	1	0	0	4	4	0	0	0	0	228	0	2	8	5	22	11	0	0	0	0	0	0
121	District Hospital, Humla	12	0	0	0	0	46	39	0	0	11	19	113	0	0	0	0	0	29	1	0	0	0	0	1
Far western Region																									
122	District Hospital, Bajura	12	0	0	0	0	0	0	0	0	0	0	161	0	0	1	3	25	39	1	0	0	0	1	
123	District Hospital, Bajhang	12	12	0	25	17	38	38	664	878	537	712	327	0	12	15	10	163	54	2	0	0	13	15	
124	Amisha Hospital Pvt. LTD	12	1	3	2	1	6	9	18	20	80	66	0	0	0	0	0	42	0	0	0	0	0	0	0
125	District Hospital, Achham	12	29	0	0	2	14	25	252	246	135	167	279	0	5	5	29	308	30	0	0	0	8	8	
126	Bayalpata Hospital (Nyaya Health)	12	2	0	0	0	0	0	0	0	0	0	421	2	2	3	37	54	73	5	1	5	60	71	
127	District Hospital, Doti	12	66	15	4	6	84	86	15	28	48	68	464	0	8	4	61	444	101	0	0	0	3	3	
128	Sujang Hospital	12	11	4	22	18	108	110	172	175	134	192	193	0	30	3	0	0	7	0	0	5	6	11	
129	Seti Zonal Hospital, Kailali	10	765	95	57	72	399	608	0	0	0	6	3530	1	324	3	733	3	0	1	0	0	42	43	
130	Tikapur Hospital, Kailali	12	85	89	94	205	76	70	49	48	78	67	1424	0	13	15	7	385	208	9	2	0	6	17	
131	Lal Ratna Hospital	10																							

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																								Grand Total	Total Deaths	
		<28 days		29days-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	5538	6836	5174	8902	5979	8640	6903	9916	27890	5392	93853	8290	22964	7285	10184	7393	8212	7153	15563	15548	202260	85355	287615	974	1369		
A00	Cholera	1	2	3	0	0	1	0	1	0	0	1	0	0	0	0	0	0	0	0	0	5	4	9	0	0		
A01	Typhoid and paratyphoid fevers	24	56	96	179	263	470	843	1092	619	570	994	678	712	483	595	378	359	273	529	469	5034	4648	9682	14	4		
A01.0	Typhoid fever	0	1	1	1	2	5	30	20	30	13	50	14	31	17	25	12	10	15	18	7	197	105	302	0	0		
A02	Other salmonella infections	0	0	0	0	0	0	0	2	1	2	0	0	0	0	1	0	0	0	0	0	2	4	6	0	0		
A03	Shigellosis	3	0	9	16	40	53	43	58	47	50	51	54	48	40	47	29	44	22	41	41	373	363	736	0	0		
A03.9	Shigellosis, unspecified	0	0	0	3	1	5	2	1	1	0	1	1	0	1	0	0	0	0	0	0	5	11	16	0	0		
A05	Other bacterial foodborne intoxications, not elsewhere	1	0	3	4	1	0	2	1	0	0	0	0	0	0	0	0	0	0	0	0	7	5	12	0	0		
A06	Amoebiasis	3	0	14	13	34	36	22	21	22	14	43	25	29	18	16	12	18	6	25	10	226	155	381	0	0		
A06.9	Amoebiasis, unspecified	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		
A07	Other protozoal intestinal diseases	0	0	0	0	0	1	2	1	1	1	0	3	2	1	1	0	0	1	0	0	6	8	14	0	0		
A07.1	Giardiasis [lamblasis]	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		
A08	Viral and other specified intestinal infections	0	0	1	1	6	2	8	0	0	4	4	0	2	0	0	0	0	0	0	0	21	7	28	0	0		
A08.4	Viral intestinal infection, unspecified	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0		
A09	Diarrhoea and gastroenteritis of presumed infectious origin	24	52	599	1105	773	1226	436	459	291	263	708	334	488	298	410	315	374	253	672	473	4775	4778	9553	16	18		
A15	Respiratory tuberculosis, bacteriologically and histologically confirmed	0	0	0	0	5	7	7	5	7	14	28	32	24	35	33	60	26	48	62	96	192	297	489	6	7		
A15.0	Tuberculosis of lung, confirmed by sputum microscopy with or without culture	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	1	0	5	2	6	8	0	0		
A15.9	Respiratory tuberculosis unspecified, confirmed bacteriologically and histologically	0	0	0	0	0	0	0	0	0	0	1	1	2	1	2	3	1	1	2	1	8	7	15	0	0		
A16	Respiratory tuberculosis, not confirmed bacteriologically or	1	1	7	2	7	15	21	30	17	13	64	60	46	86	91	116	93	112	192	234	539	669	1208	16	24		
A16.1	Tuberculosis of lung, bacteriological and histological examination not	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	2	2	0	0		
A16.9	Respiratory tuberculosis unspecified, without mention of bacteriological or histological	0	0	1	0	0	0	0	2	2	1	6	11	2	3	2	6	5	6	5	31	23	60	83	0	1		
A18	Tuberculosis of other organs	0	1	0	1	2	3	5	7	4	3	13	9	9	5	5	7	3	1	0	10	41	47	88	1	1		
A18.2	Tuberculous peripheral lymphadenopathy	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		
A18.3	Tuberculosis of intestines, peritoneum and mesenteric glands	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	1	0	0	1	2	3	0	1		
A19	Miliary tuberculosis	0	0	0	0	0	0	0	0	0	0	0	2	0	0	1	0	0	0	1	1	2	3	5	0	0		
A19.9	Miliary tuberculosis, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	5	0	6	6	0	0		
A23	Brucellosis	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	1	0	0	0	2	2	4	0	0		
A27	Leptospirosis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	2	1	3	0	0		
A30	Leprosy [Hansen's disease]	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	3	1	1	1	3	3	9	12	0	0		
A30.9	Leprosy, 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		
A32	Listeriosis	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	1	0		
A33	Tetanus neonatorum	2	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	3	5	1	0		
A35	Other tetanus	0	0	0	0	1	0	0	3	0	2	2	0	1	0	0	3	0	7	0	7	4	22	26	1	6		
A37	Whooping cough	0	0	2	4	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	5	4	9	0	0		
A39	Meningococcal infection	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		
A40	Streptococcal septicaemia	0	0	1	0	0	1	0	1	0	1	1	1	0	0	0	0	1	1	2	2	5	7	12	0	0		
A41	Other septicaemia	68	107	112	249	26	56	66	76	3	6	26	7	14	9	5	15	10	14	19	22	349	561	910	15	27		
A41.9	Septicaemia, unspecified	26	31	2	2	0	1	0	0	0	1	3	0	0	0	3	0	1	0	3	0	38	35	73	2	1		
A42	Actinomycosis	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		
A42.1	Abdominal actinomycosis	0	0	0	0	1	1	1	1	0	0	0	3	2	1	0	2	2	1	1	1	0	10	7	17	0	0	
A46	Erysipelas	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		
A49	Bacterial infection of unspecified site	4	2	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	3	7	0	0		
A51	Early syphilis	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0		
A53	Other and unspecified syphilis	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		
A54.0	Gonococcal infection of lower genitourinary tract without periurethral or accessory gland	0	0	0	3	2	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2	7	9	0	0		
A54.9	Gonococcal infection, 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		
A57	Chancroid	0	0	0	0	0	1	0	2	0	0	0	1	0	0	0	0	0	1	0	0	0	5	5	0	0		
A60	Anogenital herpesviral [herpes simplex] infection	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		
A63	Other predominantly sexually transmitted diseases, 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		
A64	Unspecified sexually transmitted disease	0	0	0	0	0	0	0	0	13	7	21	7	10	3	5	1	3	2	1	0	53	20	73	0	0		
A71	Trachoma	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	2	1	3	0	0		

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																				Grand Total	Total Deaths				
		<28 days		29days-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						
A80.3	Acute paralytic poliomyelitis, other and unspecified	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	
A82	Rabies	0	0	1	0	2	1	0	0	0	1	2	1	2	3	0	4	2	0	0	2	9	12	21	1	3	
A85.8	Other specified viral encephalitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0		
A86	Unspecified viral encephalitis	0	0	1	3	3	2	6	7	3	1	1	4	4	2	4	2	3	4	2	3	27	28	55	1	0	
A87	Viral meningitis	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	
A90	Dengue fever [classical dengue]	0	0	0	1	1	1	7	9	6	16	17	27	10	20	2	16	7	4	5	3	55	97	152	0	0	
A91	Dengue haemorrhagic fever	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	
A92	Other mosquito-borne viral fevers	1	0	7	6	22	23	13	29	12	16	23	22	19	9	9	7	1	4	6	8	113	124	237	0	0	
A92.8	Other specified mosquito-borne viral fevers	0	0	0	0	0	0	0	1	0	2	2	1	1	0	2	0	1	1	2	0	8	5	13	0	0	
A92.9	Mosquito-borne viral fever,	0	0	0	0	0	0	1	0	0	0	2	0	0	0	3	0	0	0	0	0	6	0	6	0	0	
A94	Unspecified arthropod-borne viral	2	2	10	6	7	0	0	1	1	1	3	0	0	1	0	0	0	1	0	25	10	35	0	0		
A99	Unspecified viral haemorrhagic	1	0	4	11	16	15	4	10	1	3	7	4	5	2	1	3	2	1	1	2	42	51	93	0	0	
B00	Herpesviral [herpes simplex]	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	1	2	3	5	0	0	
B01	Varicella [chickenpox]	1	0	1	1	3	11	16	15	6	11	4	10	3	2	0	0	1	0	2	0	37	50	87	0	0	
B01.9	Varicella without complication	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	
B02	Zoster [herpes zoster]	0	0	0	0	1	3	1	0	0	2	2	3	2	3	0	0	1	1	5	3	12	15	27	0	0	
B02.9	Zoster without complication	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	1	0	3	1	5	6	0	0	
B04	Monkeypox	0	0	0	0	0	1	1	0	0	0	1	0	0	0	0	0	0	0	0	0	2	1	3	0	0	
B05	Measles	0	0	0	2	0	1	1	2	1	0	0	0	0	0	0	0	0	0	0	0	2	5	7	0	0	
B06	Rubella [German measles]	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	
B07	Viral warts	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	
B15	Acute hepatitis A	0	0	0	0	2	7	10	15	6	5	11	3	5	6	5	7	4	1	11	6	54	50	104	0	0	
B15.9	Hepatitis A without hepatic coma	0	0	0	0	0	2	4	6	0	5	0	4	0	3	0	3	0	2	0	2	4	27	31	0	0	
B16	Acute hepatitis B	0	2	1	4	1	5	14	36	6	7	12	8	2	3	3	2	3	2	1	6	43	75	118	0	2	
B16.9	Acute hepatitis B without delta-agent and without hepatic coma	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	1	1	2	0	0		
B17	Other acute viral hepatitis	0	0	0	1	4	4	7	11	6	5	9	6	5	6	5	6	2	5	5	7	43	51	94	0	0	
B18	Chronic viral hepatitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	2	1	0	
B19	Unspecified viral hepatitis	0	1	1	1	2	1	4	12	6	4	13	6	4	6	0	7	4	10	1	3	35	51	86	2	1	
B19.9	Unspecified viral hepatitis without hepatic coma	0	0	0	0	1	2	6	6	9	17	23	33	13	15	7	15	0	10	4	12	63	110	173	0	1	
B20	Human immunodeficiency virus [HIV] disease resulting in infectious and parasitic diseases	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	1	1	2	0	0	
B24	Unspecified human immunodeficiency virus [HIV]	0	0	0	1	5	2	6	19	9	15	39	63	101	170	68	164	43	45	29	30	300	509	809	21	52	
B26	Mumps	0	0	0	0	1	12	1	34	2	17	0	7	1	9	0	2	1	1	0	0	6	82	88	0	0	
B26.9	Mumps without complication	0	0	0	0	0	1	1	0	1	2	0	0	1	1	0	0	0	0	0	0	3	4	7	0	0	
B34	Viral infection of unspecified site	1	0	1	5	4	5	6	5	4	1	3	2	2	2	2	2	1	0	0	2	24	24	48	0	0	
B34.9	Viral infection, unspecified	0	0	0	0	0	2	1	2	0	0	0	0	0	0	0	0	0	0	0	0	1	4	5	0	0	
B35	Dermatophytosis	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	2	0	2	0	0	
B36	Other superficial mycoses	0	0	3	5	6	4	11	7	10	11	15	9	8	5	1	0	3	1	1	1	58	43	101	0	0	
B37	Candidiasis	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2	2	0	0	
B49	Unspecified mycosis (Fungaemia NOS)	10	12	8	8	20	15	12	23	24	26	35	26	22	19	20	11	15	19	51	53	217	212	429	4	4	
B50	Plasmodium falciparum malaria	0	0	0	2	1	0	1	3	2	7	6	5	6	7	4	7	0	2	6	2	26	35	61	0	0	
B50.9	Plasmodium falciparum malaria, unspecified	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	
B51	Plasmodium vivax malaria	0	1	0	2	0	1	2	3	2	2	4	7	4	4	1	4	3	1	1	4	17	29	46	0	0	
B54	Unspecified malaria	0	1	0	1	0	6	2	5	1	9	6	19	6	8	5	5	0	2	4	27	58	85	0	0		
B55	Leishmaniasis	0	0	0	0	0	13	17	20	5	4	12	23	22	9	8	6	1	7	3	8	68	90	158	1	0	
B55.0	Visceral leishmaniasis	0	0	0	0	1	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	3	1	4	0	0	
B64	Unspecified protozoal disease	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	2	0	1	1	0	4	2	6	0	0	
B65	Schistosomiasis [bilharziasis]	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	
B67	Echinococcosis	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	1	2	2	4	6	0	0	
B69	Cysticercosis	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2	0	0	0	0	0	2	1	4	5	0	0
B71	Other cestode infections	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	
B74	Filariasis	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	
B76	Hookworm diseases	0	0	0	0	0	1	0	2	0	0	2	0	0	0	1	1	1	1	2	1	6	6	12	0	0	
B76.9	Hookworm disease, 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	
B77.9	Ascariasis, unspecified	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	
B78	Strongyloidiasis	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	
B79	Trichuriasis	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	
B81	Other intestinal helminthiasis, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2	0	2	0	0	
B82	Unspecified intestinal parasitism	0	0	8	7	12	10	54	12	16	9	10	11	6	8	8	6										

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																				Grand Total	Total Deaths			
		<28 days		29days-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					
B90.9	Sequelae of respiratory and unspecified tuberculosis	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
B96	Other bacterial agents as the cause of diseases classified to other	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	3	3	0	0
B99	Other and unspecified infectious diseases	0	1	1	3	3	3	3	3	1	0	2	0	0	0	0	0	0	0	0	0	10	10	20	0	0
C02	Malignant neoplasm of other and unspecified parts of tongue	0	0	0	0	0	0	0	1	0	0	1	1	0	0	0	0	0	1	0	0	1	3	4	0	0
C02.9	Tongue, 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	
C06	Malignant neoplasm of other and unspecified parts of mouth	0	0	0	0	0	0	0	0	2	0	0	1	0	0	0	0	0	0	0	2	1	3	0	0	
C08.9	Major salivary gland, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	
C11	Malignant neoplasm of nasopharynx	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	2	0	0
C13	Malignant neoplasm of hypopharynx	0	0	0	0	0	0	1	1	0	0	0	0	1	0	0	0	0	0	0	2	1	3	0	0	
C14	Malignant neoplasm of other and ill-defined sites in the lip, oral cavity and pharynx	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2	2	0	0
C15	Malignant neoplasm of oesophagus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	1	0	4	4	0	0
C16	Malignant neoplasm of stomach	0	0	0	0	0	0	0	0	0	0	5	2	2	6	5	8	4	10	8	11	24	37	61	1	2
C16.9	Stomach, unspecified	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
C18	Malignant neoplasm of colon	0	0	0	0	0	0	0	0	0	0	1	0	0	4	1	0	1	1	3	6	6	11	17	1	2
C18.9	Colon, 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
C20	Malignant neoplasm of rectum	0	0	0	0	0	0	0	0	0	0	7	0	1	6	2	6	1	4	2	1	13	17	30	0	0
C22	Malignant neoplasm of liver and intrahepatic bile ducts	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	2	1	3	4	0	0
C22.0	Liver cell carcinoma	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
C22.9	Liver, 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
C23	Malignant neoplasm of gallbladder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	2	2	3	3	6	1	1
C25	Malignant neoplasm of pancreas	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	2	3	2	5	2	0
C25.9	Pancreas, 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	1
C26	Malignant neoplasm of other and ill-defined digestive organs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	2	0	2	0	0
C30	Malignant neoplasm of nasal cavity and middle ear	0	0	0	0	1	0	0	2	0	1	1	0	0	0	1	0	0	0	1	0	4	3	7	0	0
C31	Malignant neoplasm of accessory sinuses	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	0	0	1	2	3	0	1
C32	Malignant neoplasm of larynx	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	2	2	3	5	0	0
C34	Malignant neoplasm of bronchus and lung	0	0	0	0	0	0	0	0	0	0	15	3	12	13	21	12	27	29	94	108	169	165	334	5	9
C34.3	Lower lobe, bronchus or 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
C34.9	Bronchus or lung, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2	4	4	5	9	0	1
C37	Malignant neoplasm of thymus	0	0	0	0	0	0	2	2	2	1	2	1	6	5	4	2	4	3	5	3	25	17	42	0	0
C40.2	Long bones of lower limb	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
C41.2	Vertebral column	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
C44	Other malignant neoplasms of skin	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
C49	Malignant neoplasm of other connective and soft tissue	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	1	2	3	0	0
C49.9	Connective and soft tissue,	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
C50	Malignant neoplasm of breast	0	0	0	0	0	0	0	0	0	0	4	1	8	0	64	2	29	0	21	4	126	7	133	2	0
C51	Malignant neoplasm of vulva	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
C53	Malignant neoplasm of cervix uteri	0	0	0	0	0	0	0	0	0	0	2	0	16	0	13	0	32	0	40	2	103	2	105	0	0
C53.9	Cervix uteri, unspecified	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
C56	Malignant neoplasm of ovary	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	2	0	3	0	9	0	9	0	0
C57.9	Female genital organ, unspecified	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
C60	Malignant neoplasm of penis	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	2	0	0	4	4	0	0
C61	Malignant neoplasm of prostate	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	3	3	0	1
C62	Malignant neoplasm of testis	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
C63.0	Epididymis	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
C64	Malignant neoplasm of kidney, except renal pelvis	0	0	1	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0
C67	Malignant neoplasm of bladder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	4	0	5	5	0	0
C68	Malignant neoplasm of other and unspecified urinary 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	0
C68.9	Urinary organ, unspecified	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
C70	Malignant neoplasm of meninges	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
C71	Malignant neoplasm of brain	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	1	1	2	0	1
C73	Malignant neoplasm of thyroid gland	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
C76.0	Head, face and neck	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
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	2	0	2	2	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	2	0	0	1	2	2	4	0	0
C80	Malignant neoplasm without specification of site	0	0	0	1	3	4	2	5	4	4	12	14	16	13	25	20	32	37	125	202	219	300	519	1	1
C81	Hodgkin's disease	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

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male				
C82	Follicular [nodular] non-Hodgkin's lymphoma	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0	
C83	Diffuse non-Hodgkin's lymphoma	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	
C85	Other and unspecified types of non-Hodgkin's lymphoma	0	0	1	2	1	2	5	6	0	6	8	3	1	2	3	3	1	3	3	4	23	31	54	1	7	
C85.9	Non-Hodgkin's lymphoma, unspecified type	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	
C88	Malignant immunoproliferative diseases	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	
C90	Multiple myeloma and malignant plasma cell neoplasms	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	1	0	2	1	3	1	0	
C92	Myeloid leukaemia	0	0	0	0	5	4	3	1	10	14	4	5	14	4	5	4	9	13	10	10	60	55	115	0	0	
C95	Leukaemia of unspecified cell type	0	0	0	2	1	1	2	7	0	1	1	1	1	1	0	1	0	2	5	0	10	16	26	0	0	
C95.9	Leukaemia, unspecified	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	
D06	Carcinoma in situ of cervix uteri	0	0	0	0	0	0	0	0	0	0	0	5	0	0	0	1	0	0	0	0	6	0	6	0	0	
D07.4	Penis	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	
D10	Benign neoplasm of mouth and pharynx	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	
D12	Benign neoplasm of colon, rectum, anus and anal canal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2	0	0	0	
D13	Benign neoplasm of other and ill-defined parts of digestive system	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1	2	3	0	0
D13.9	Ill-defined sites within the digestive system	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	2	0	2	0	0	
D14	Benign neoplasm of middle ear and respiratory system	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	3	1	2	4	5	7	12	0	0
D16	Benign neoplasm of bone and articular cartilage	0	0	2	3	2	4	1	1	0	1	3	0	1	2	2	1	1	0	1	0	13	12	25	0	0	
D17	Benign lipomatous neoplasm	0	0	0	1	0	0	0	1	7	3	1	1	2	1	3	3	0	2	1	1	14	13	27	0	0	
D17.0	Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and 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	0	
D17.9	Benign lipomatous neoplasm, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	2	1	0	0	0	2	4	6	0	0	
D18	Haemangioma and lymphangioma, any site	0	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	0	1	0	3	1	4	0	0	
D18.0	Haemangioma, any site	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	
D22	Melanocytic naevi	0	0	0	1	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0	
D23	Other benign neoplasms of skin	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0	3	0	3	0	0	
D24	Benign neoplasm of breast	0	0	0	0	0	0	1	0	4	0	6	1	7	0	0	0	0	0	1	0	19	1	20	0	0	
D25	Leiomyoma of uterus	0	0	0	0	0	0	0	0	2	0	10	0	45	0	103	0	46	0	2	0	208	0	208	0	0	
D25.9	Leiomyoma of uterus, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	4	0	5	0	3	0	0	0	12	0	12	0	0	
D26.9	Uterus, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	3	0	3	0	0	
D27	Benign neoplasm of ovary	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	2	0	2	1	0	
D28	Benign neoplasm of other and unspecified female genital organs	0	0	0	0	0	0	0	0	0	0	0	0	2	0	5	0	6	0	0	0	13	0	13	0	0	
D29	Benign neoplasm of male genital organs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	0	5	5	0	0	
D32	Benign neoplasm of meninges	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	3	0	0	0	1	1	5	6	0	1	
D36	Benign neoplasm of other and unspecified sites	13	13	1	1	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	16	14	30	0	0	
D36.7	Other specified sites	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	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	1	0	4	0	4	0	4	0	13	0	13	0	0	
D41	Neoplasm of uncertain or unknown behaviour of urinary organs	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	
D46	Myelodysplastic syndromes	0	0	0	0	0	0	9	1	0	1	1	0	0	2	1	0	3	1	1	2	15	7	22	0	0	
D47	Other neoplasms of uncertain or unknown behaviour of lymphoid, haematopoietic and related tissue	0	0	0	0	0	0	0	0	0	0	12	0	2	0	0	0	0	0	0	0	14	0	14	0	0	
D50	Iron deficiency anaemia	0	0	0	0	0	0	1	0	0	0	3	0	0	1	1	0	1	0	1	0	7	1	8	0	0	
D51	Vitamin B 12 deficiency anaemia	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	
D53.1	Other megaloblastic anaemias, 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	
D56	Thalassaemia	0	0	2	6	29	32	75	70	33	29	2	4	3	0	0	0	0	0	0	0	144	141	285	1	0	
D56.9	Thalassaemia, unspecified	0	0	0	0	3	1	1	3	0	0	0	0	0	0	0	0	0	0	1	0	5	4	9	0	0	
D57	Sickle-cell disorders	0	0	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	1	1	3	4	1	0	
D58	Other hereditary haemolytic	0	0	0	0	1	0	1	1	1	0	0	0	1	0	0	0	0	0	0	0	4	1	5	0	0	
D58.9	Hereditary haemolytic anaemia, unspecified	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	
D59	Acquired haemolytic anaemia	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	
D61	Other aplastic anaemias	0	0	1	5	5	6	10	8	8	6	7	20	15	19	4	8	5	10	5	8	60	90	150	0	2	
D61.0	Constitutional aplastic anaemia	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	
D61.9	Aplastic anaemia, unspecified	0	0	0	0	1	0	0	0	0	1	2	0	0	0	0	1	0	0	0	0	3	2	5	0	0	
D62	Acute posthaemorrhagic anaemia	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2	0	2	0	0	
D64	Other anaemias	20	19	28	58	19	82	114	97	146	55	289	112	201	92	233	116	120	94	253	236	1423	961	2384	6	15	
D64.9	Anaemia, unspecified	0	0	0	0	0	1	4	3	10	2	20	3	11	3	8	11	5	3	8	9	66	35	101	0	0	

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		<28 days		29days-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			
D65	Disseminated intravascular coagulation [defibrination syndrome]	0	0	0	0	0	1	0	0	1	0	2	0	1	0	0	0	0	0	0	0	1	4	2	6	0	0
D66	Hereditary factor VIII deficiency	0	0	0	4	2	4	2	9	1	0	0	1	0	0	0	0	0	0	0	0	0	5	18	23	1	0
D68	Other coagulation defects	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	
D69	Purpura and other haemorrhagic conditions	0	0	2	0	3	7	30	28	0	0	4	2	4	1	2	0	1	1	0	1	46	40	86	0	0	
D71	Functional disorders of polymorphonuclear neutrophils	0	0	0	0	0	0	0	0	2	0	1	0	1	0	0	0	1	1	0	0	5	1	6	0	0	
D72	Other disorders of white blood cells	1	0	1	0	2	5	5	7	0	0	0	0	0	0	0	0	0	0	0	9	12	21	0	0		
D73	Diseases of spleen	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0		
D80	Immunodeficiency with predominantly antibody defects	0	0	0	0	0	0	0	0	12	0	217	0	8	0	0	0	0	0	0	237	0	237	0	0		
D81	Combined immunodeficiencies	0	0	0	0	0	0	0	0	0	0	5	0	1	0	0	0	0	0	0	6	0	6	0	0		
D84	Other immunodeficiencies	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0		
D89	Other disorders involving the immune mechanism, not elsewhere	0	0	0	0	0	0	0	0	1	0	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	2	0	3	2	4	0	5	4	0	2	6	4	20	12	32	0	1	
E03.9	Hypothyroidism, 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		
E04	Other nontoxic goitre	0	0	0	0	0	0	0	0	1	0	4	0	2	0	3	3	4	0	8	2	22	5	27	0	0	
E05	Thyrotoxicosis [hyperthyroidism]	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	
E05.0	Thyrotoxicosis with diffuse goitre	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0		
E05.9	Thyrotoxicosis, 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		
E06	Thyroiditis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0		
E07	Other disorders of thyroid	1	1	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	3	1	4	0	0		
E10	Insulin-dependent diabetes mellitus	0	0	0	0	0	0	0	0	0	0	1	1	0	6	0	1	3	3	3	7	14	21	0	0		
E11	Non-insulin-dependent diabetes mellitus	0	1	0	0	0	1	0	1	1	5	5	6	23	54	49	19	29	65	94	151	202	353	2	1		
E13	Other specified diabetes mellitus	0	2	1	2	0	1	0	3	0	0	0	0	0	0	0	0	0	0	0	1	8	9	0	0		
E14	Unspecified diabetes mellitus	66	3	1	5	0	2	18	19	6	8	32	18	56	60	171	149	195	205	299	352	844	821	1665	9	18	
E16	Other disorders of pancreatic internal secretion	1	0	0	0	0	1	0	0	1	4	3	3	5	2	5	11	6	3	13	19	34	43	77	1	1	
E16.1	Other hypoglycaemia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0		
E16.2	Hypoglycaemia, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	1	1	4	1	5	0	0	
E20	Hypoparathyroidism	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
E24	Cushing's syndrome	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	0	0		
E27	Other disorders of adrenal gland	0	0	0	0	0	0	0	0	0	0	3	0	3	0	0	0	0	0	0	6	0	6	0	0		
E27.8	Other specified disorders of adrenal gland	0	0	0	0	0	0	0	0	1	0	2	0	2	0	3	0	1	0	0	9	0	9	0	0		
E32	Diseases of thymus	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
E40	Kwashiorkor	1	1	0	1	1	0	2	0	0	1	0	0	0	0	0	0	0	0	0	4	3	7	0	0		
E41	Nutritional marasmus	0	0	0	0	0	0	0	0	1	1	2	0	0	0	0	0	0	0	0	3	1	4	0	0		
E45	Retarded development following protein-energy malnutrition	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0		
E46	Unspecified protein-energy	18	10	73	78	113	124	34	38	1	0	1	0	0	0	1	3	1	2	1	2	243	257	500	1	2	
E50	Vitamin A deficiency	0	0	0	2	2	3	6	3	6	2	10	1	6	1	4	3	0	2	0	1	34	18	52	0	0	
E54	Ascorbic acid deficiency	0	0	0	0	0	0	0	0	0	0	2	1	0	0	0	1	0	0	0	2	2	4	0	0		
E55	Vitamin D deficiency	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0		
E59	Dietary selenium deficiency	0	0	0	0	0	0	2	0	3	0	3	2	1	0	0	1	1	0	2	0	12	3	15	0	0	
E64	Sequelae of malnutrition and other nutritional deficiencies	0	0	2	13	16	9	5	3	0	0	0	0	0	0	0	0	0	0	0	23	25	48	0	0		
E67	Other hyperalimentation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	1	0	0		
E68	Sequelae of hyperalimentation	0	0	0	0	1	0	1	0	0	0	1	0	0	0	1	0	0	0	0	4	0	4	0	0		
E72	Other disorders of amino-acid metabolism	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0		
E79	Disorders of purine and pyrimidine metabolism	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	1	1	2	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	0	0	0	0	0	1	0	1	1	0	0		
E83	Disorders of mineral metabolism	1	0	0	0	0	0	0	0	2	0	2	0	0	1	2	1	0	1	3	0	10	3	13	0	0	
E83.5	Disorders of calcium metabolism	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	0		
E85	Amyloidosis	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0		
E86	Volume depletion	4	8	40	61	40	79	3	2	6	0	9	1	4	3	6	3	4	3	9	5	125	165	290	0	0	
E87	Other disorders of fluid, electrolyte and acid-base balance	0	0	0	1	0	0	0	0	2	0	1	1	0	2	0	1	2	0	1	0	6	5	11	0	1	
E88	Other metabolic disorders	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0		
E89	Postprocedural endocrine and metabolic disorders, not elsewhere classified	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
F05.9	Delirium, unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	1	0		
F10	Mental and behavioural disorders due to use of alcohol	0	0	0	0	1	0	0	3	3	3	8	25	14	80	31	108	30	79	31	65	118	363	481	1	4	
F10.2	Mental and behavioural disorders due to use of alcohol - Dependence syndrome	0	0	0	0	0	0	0	0	0	0	0	0	2	1	0	0	0	0	0	2	1	3	0	0		

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																				Grand Total	Total Deaths					
		<28 days		29days-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					
F10.3	Mental and behavioural disorders due to use of alcohol - Withdrawal	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	1	1	2	0	0
F10.5	Mental and behavioural disorders due to use of alcohol - Psychotic	0	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	
F13	Mental and behavioural disorders due to use of sedatives or hypnotics	0	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	
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	1	0	1	0	1	0	0	0	
F19	Mental and behavioural disorders due to multiple drug use and use of other psychoactive substances	0	0	0	0	0	1	0	0	1	0	2	0	0	0	0	0	0	0	0	0	3	1	4	0	0		
F20	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	Persistent delusional disorders	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	1	0	3	0	3	0	0		
F25	Schizoaffective 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		
F28	Other nonorganic psychotic	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		
F29	Unspecified nonorganic psychosis	0	0	0	0	0	0	2	18	25	27	31	31	19	9	22	34	20	4	12	8	131	131	262	0	0		
F31	Bipolar affective disorder	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		
F32	Depressive episode	1	0	0	0	0	0	1	1	10	3	13	5	8	5	3	2	4	2	4	5	44	23	67	0	0		
F32.9	Depressive episode, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	2	1	3	0	0		
F40	Phobic anxiety disorders	0	0	0	0	2	3	4	11	3	0	8	2	0	0	1	1	0	0	0	0	18	17	35	0	0		
F41	Other anxiety disorders	0	0	0	0	0	0	8	3	47	17	82	19	69	26	32	8	14	6	18	11	270	90	360	1	0		
F42	Obsessive-compulsive disorder	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		
F43	Reaction to severe stress, and adjustment disorders	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	2	0	2	0	0		
F44	Dissociative [conversion] disorders	0	0	0	0	1	2	9	3	63	6	35	3	14	1	7	3	4	3	1	1	134	22	156	0	0		
F44.9	Dissociative [conversion] disorder, unspecified	0	0	0	0	0	0	0	0	4	0	10	1	5	0	0	0	0	0	0	0	19	1	20	0	0		
F45	Somatoform disorders	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	1	1	0	0	0	2	2	4	0	0		
F48	Other neurotic disorders	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	1	0	0	0	3	0	3	0	0		
F48.9	Neurotic disorder, 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		
F79	Unspecified mental retardation	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		
F99	Mental disorder, not otherwise specified	0	0	0	0	0	0	0	0	3	0	4	3	1	1	2	0	1	0	0	0	11	4	15	1	1		
G00	Bacterial meningitis, not elsewhere classified	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		
G00.9	Bacterial meningitis, unspecified	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0			
G03	Meningitis due to other and unspecified causes	4	17	22	75	25	28	62	101	15	32	16	11	15	12	8	3	11	5	13	11	191	295	486	4	11		
G03.9	Meningitis, unspecified	1	0	5	6	2	3	3	2	1	1	0	0	0	1	0	0	0	0	0	0	12	13	25	0	0		
G04	Encephalitis, myelitis and encephalomyelitis	8	0	2	2	21	14	15	17	8	2	9	12	7	7	5	3	2	2	7	7	84	66	150	1	3		
G04.9	Encephalitis, myelitis and encephalomyelitis, unspecified	0	0	0	1	0	1	6	5	0	0	1	0	0	0	0	1	0	0	2	0	9	8	17	1	0		
G06	Intracranial and intraspinal abscess and granuloma	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	2	0	0		
G06.0	Intracranial abscess and granuloma	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		
G12	Spinal muscular atrophy and related syndromes	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		
G20	Parkinson's disease	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	2	1	3	4	0	0		
G37	Other demyelinating diseases of central nervous system	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	1	1	2	0	0		
G40	Epilepsy	0	6	10	26	3	4	7	15	16	14	8	14	7	11	2	5	3	9	0	1	56	105	161	0	1		
G43	Migraine	0	0	0	0	0	0	0	1	0	0	5	1	1	1	5	1	0	0	0	0	11	4	15	0	0		
G43.9	Migraine, 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		
G44	Other headache syndromes	0	0	0	0	0	0	0	0	1	1	1	1	1	0	1	0	0	0	2	1	6	3	9	0	0		
G45	Transient cerebral ischaemic attacks and related syndromes	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	0	1	5	7	7	9	16	0	0		
G51	Facial nerve 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		
G56.3	Lesion of radial nerve	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		
G58	Other mononeuropathies	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	2	0	0		
G60	Hereditary and idiopathic	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2	0	0		
G61	Inflammatory polyneuropathy	0	0	0	0	0	0	0	1	0	1	3	0	0	0	0	0	0	0	0	0	3	2	5	1	0		
G62	Other polyneuropathies	0	0	0	0	0	0	1	6	3	2	8	2	1	2	1	0	2	3	0	1	16	16	32	0	1		
G80	Cerebral palsy	2	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	4	0	4	0	0		
G80.9	Cerebral palsy, unspecified	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0		
G81	Hemiplegia	0	0	0	1	0	1	2	3	1	0	0	0	0	1	1	1	2	3	6	9	12	19	31	0	2		
G81.9	Hemiplegia, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	1	0	4	0	4	0	0		
G82	Paraplegia and tetraplegia	0	0	0	1	1	2	0	0	1	1	1	3	2	2	4	2	0	3	1	4	10	18	28	0	3		
G83	Other paralytic syndromes	0	0	0	0	2	0	4	3	1	1	2	0	0	0	0	2	1	2	1	2	11	10	21	0	0		
G90	Disorders of autonomic nervous system	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		
G91	Hydrocephalus	0	0	1	4	3	1	1	2	1	2	1	4	1	0	2	1	2	0	1	2	13	16	29	3	2		
G91.9	Hydrocephalus, 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		
G92	Toxic encephalopathy	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		

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																				Grand Total	Total Deaths				
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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male			
G93	Other disorders of brain	0	0	0	0	1	0	3	1	0	2	0	0	0	0	0	2	0	0	0	4	4	9	13	0	1	
G93.2	Benign intracranial hypertension	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	
G93.4	Encephalopathy, unspecified	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	
G95	Other diseases of spinal cord	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	
G95.9	Disease of spinal cord, 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	
G96	Other disorders of central nervous system	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	
G97	Postprocedural disorders of nervous system, not elsewhere classified	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	
G98	Other disorders of nervous system, not elsewhere classified	0	0	0	0	0	1	0	0	0	0	0	2	0	2	0	3	0	1	0	0	0	9	9	0	0	
H00	Hordeolum and chalazion	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	
H05	Disorders of orbit	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	
H10	Conjunctivitis	0	0	0	0	2	0	0	0	1	0	2	0	1	0	0	0	0	0	0	1	6	1	7	0	0	
H20	Iridocyclitis	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	
H26	Other cataract	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	1	4	2	21	27	26	32	58	0	0	
H49	Paralytic strabismus	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	
H53	Visual disturbances	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	2	0	0	
H60	Otitis externa	0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	0	
H65	Nonsuppurative otitis media	0	0	0	0	0	0	5	10	5	12	17	29	15	8	8	2	0	4	0	0	50	65	115	0	0	
H66	Suppurative and unspecified otitis media	0	0	3	2	9	10	18	18	8	6	14	4	11	5	4	1	1	6	4	2	72	54	126	0	0	
H70	Mastoiditis and related conditions	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	2	3	0	0		
H74	Other disorders of middle ear and mastoid	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	1	0	0	3	1	4	0	0	
H81	Disorders of vestibular function	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	
H92	Otalgia and effusion of ear	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	2	0	0	
H93	Other disorders of ear, not elsewhere classified	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	
I00	Rheumatic fever without mention of heart involvement	0	0	2	0	1	0	2	2	1	0	1	1	0	0	0	0	0	0	0	0	7	3	10	0	0	
I01	Rheumatic fever with heart	0	0	0	0	0	1	4	4	2	2	1	3	2	2	0	0	1	0	1	2	11	14	25	0	0	
I02	Rheumatic chorea	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	
I05	Rheumatic mitral valve diseases	0	0	0	0	0	0	0	1	0	0	0	1	1	1	1	0	2	0	2	0	6	3	9	0	0	
I09	Other rheumatic heart diseases	0	0	2	3	6	9	17	21	8	9	14	7	25	11	28	12	29	10	20	31	149	113	262	1	5	
I09.9	Rheumatic heart disease,	0	0	0	0	2	0	0	0	0	1	3	0	3	1	4	1	0	1	4	0	16	4	20	0	0	
I10	Essential (primary) hypertension	0	2	0	5	2	3	4	6	23	16	63	52	122	165	254	294	352	383	941	1051	1761	1977	3738	23	20	
I11	Hypertensive heart disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	1	2	0	0	
I12	Hypertensive renal disease	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	
I13	Hypertensive heart and renal	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	
I15	Secondary hypertension	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	1	2	0	0	0	4	2	6	0	0	
I20	Angina pectoris	0	0	0	0	0	0	0	1	0	0	0	1	2	0	0	2	4	6	16	12	22	22	44	0	0	
I20.0	Unstable angina	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	2	3	5	0	0	
I21	Acute myocardial infarction	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	1	2	0	4	5	8	7	15	2	1	
I22	Subsequent myocardial infarction	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	
I24	Other acute ischaemic heart	0	0	0	0	0	0	1	0	2	0	4	0	1	0	4	2	14	9	51	47	77	58	135	1	1	
I25	Chronic ischaemic heart disease	0	0	0	0	0	1	0	0	1	1	5	4	7	6	16	13	15	4	40	26	84	55	139	2	2	
I25.1	Atherosclerotic heart disease	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	2	2	3	5	6	8	14	0	0	
I25.9	Chronic ischaemic heart disease, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	3	4	7	4	12	16	1	1	
I26	Pulmonary embolism	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	
I27	Other pulmonary heart diseases	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	1	0	1	0	2	2	4	0	0	
I30	Acute pericarditis	0	0	0	2	0	1	10	1	0	0	2	2	0	0	4	0	1	0	0	0	17	6	23	0	0	
I30.1	Infective pericarditis	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	
I31	Other diseases of pericardium	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	3	1	1	0	5	3	8	0	0	
I31.3	Pericardial effusion	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	
I34	Nonrheumatic mitral valve disorders	0	0	0	0	0	0	0	0	1	0	3	0	1	0	1	0	0	0	0	0	6	0	6	0	0	
I38	Endocarditis, valve unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	1	0	0	2	1	3	0	0
I40	Acute myocarditis	1	0	0	0	0	0	0	0	0	0	0	0	3	3	1	3	3	4	2	9	10	19	29	0	2	
I40.0	Infective myocarditis	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	1	0	2	6	3	8	7	15	0	1
I42	Cardiomyopathy	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	1	1	4	3	6	6	11	17	0	2	
I42.9	Cardiomyopathy, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	0	0	1	2	3	0	0	
I45	Other conduction disorders	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	
I46	Cardiac arrest	0	1	0	0	0	0	0	0	0	0	1	0	0	1	0	0	4	4	3	3	8	9	17	5	7	
I47	Paroxysmal tachycardia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	2	2	3				

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																								Grand Total	Total Deaths	
		<28 days		29days-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					
I60	Subarachnoid haemorrhage	0	0	0	0	0	0	0	2	0	0	1	1	0	2	2	0	1	5	4	2	8	12	20	1	2		
I61	Intracerebral haemorrhage	0	0	0	0	0	0	0	0	1	0	2	1	1	1	7	14	10	14	9	11	30	41	71	6	3		
I62	Other nontraumatic intracranial haemorrhage	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		
I62.0	Subdural haemorrhage (acute)(nontraumatic)	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		
I63	Cerebral infarction	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		
I64	Stroke, not specified as haemorrhage or infarction	0	0	0	0	1	0	0	1	7	7	5	12	10	12	26	29	24	33	87	121	160	215	375	14	15		
I67	Other cerebrovascular diseases	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	2	5	3	6	5	11	0	0		
I70	Atherosclerosis	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		
I72	Other aneurysm	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	1	0	2	1	3	1	0		
I73	Other peripheral vascular diseases	0	0	0	0	0	0	0	1	0	1	0	1	1	1	0	1	0	1	1	3	2	9	11	0	0		
I77	Other disorders of arteries and arterioles	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	1	0	3	3	0	0		
I78.0	Hereditary haemorrhagic	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		
I80	Phlebitis and thrombophlebitis	0	0	0	0	0	0	0	0	0	0	2	3	1	1	2	1	0	1	1	2	6	8	14	0	2		
I80.9	Phlebitis and thrombophlebitis of unspecified site	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		
I82	Other venous embolism and thrombosis	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	1	0	0	1	2	1	5	6	0	1		
I83	Varicose veins of lower extremities	0	0	0	0	0	0	0	0	0	3	1	7	2	3	4	3	2	1	1	2	10	19	29	0	0		
I84	Haemorrhoids	0	1	0	0	0	1	2	2	2	3	8	6	8	26	10	18	5	18	15	20	50	95	145	0	0		
I84.9	Unspecified haemorrhoids without complication	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	3	1	3	4	0	0			
I86	Varicose veins of other sites	0	0	0	0	0	0	0	0	0	1	0	3	0	1	0	0	0	0	0	0	0	5	5	0	0		
I86.1	Scrotal varices	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		
I88	Nonspecific lymphadenitis	0	0	0	2	0	5	8	19	3	3	3	0	1	0	0	1	1	0	1	1	17	31	48	0	0		
I88.0	Nonspecific mesenteric	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0			
I88.9	Nonspecific lymphadenitis,	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	1	1	2	0	0			
I89	Other noninfective disorders of lymphatic vessels and lymph nodes	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0			
I95	Hypotension	0	0	0	0	0	0	0	0	0	0	3	0	0	0	1	0	1	1	0	1	5	2	7	0	0		
I99	Other and unspecified disorders of circulatory system	0	0	1	1	0	0	1	3	0	0	0	2	0	0	1	0	1	0	2	4	6	10	16	1	3		
J01	Acute sinusitis	0	0	0	0	0	0	1	0	0	0	2	1	0	0	0	0	0	0	0	0	3	1	4	0	0		
J01.4	Acute pansinusitis	0	0	0	0	1	1	0	3	2	3	2	1	6	2	4	2	4	5	5	8	24	25	49	0	0		
J01.9	Acute sinusitis, unspecified	0	0	0	0	0	0	0	0	0	2	1	0	1	0	0	0	1	0	3	1	6	3	9	0	0		
J02	Acute pharyngitis	0	0	0	5	12	30	26	32	26	26	27	24	24	25	5	4	2	12	9	17	131	175	306	0	0		
J02.9	Acute pharyngitis, unspecified	0	0	0	0	2	0	5	2	4	3	7	4	3	1	1	0	1	0	1	1	24	11	35	0	0		
J03	Acute tonsillitis	1	0	4	14	23	30	62	79	40	47	102	66	69	41	29	11	5	4	7	8	342	300	642	1	0		
J03.0	Streptococcal tonsillitis	0	0	2	0	1	2	5	3	1	1	4	0	0	0	1	0	2	0	2	0	18	6	24	0	0		
J03.9	Acute tonsillitis, unspecified	0	0	0	0	3	1	9	6	2	1	9	0	3	1	0	1	3	1	0	1	29	12	41	0	0		
J04	Acute laryngitis and tracheitis	0	0	0	0	0	0	0	0	1	0	4	5	1	3	2	4	4	5	0	4	12	21	33	0	0		
J05	Acute obstructive laryngitis [croup] and epiglottitis	0	0	0	1	0	1	1	0	0	0	0	0	2	0	0	0	0	1	1	0	4	3	7	0	0		
J06	Acute upper respiratory infections of multiple and unspecified sites	13	7	88	123	79	126	62	95	61	47	113	44	71	46	52	64	44	48	102	78	685	678	1363	0	2		
J06.8	Other acute upper respiratory infections of multiple sites	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
J06.9	Acute upper respiratory infection, unspecified	0	0	0	0	1	0	1	2	0	0	0	0	0	1	0	0	0	0	1	0	3	3	6	0	0		
J09	Influenza due to identified avian influenza virus	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	1	0	2	0	0	1	5	6	0	1		
J10	Influenza due to other identified influenza virus	0	0	0	1	0	2	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	4	5	0	0		
J11	Influenza, virus not identified	0	1	6	5	18	16	13	23	21	15	43	11	23	12	27	12	8	12	24	15	183	122	305	0	0		
J13	Pneumonia due to Streptococcus pneumoniae	0	0	4	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	6	2	8	0	0		
J14	Pneumonia due to Haemophilus influenzae	0	1	5	13	4	5	2	5	0	0	3	7	4	2	2	4	3	2	4	1	27	40	67	0	0		
J15	Bacterial pneumonia, not elsewhere classified	41	37	155	233	131	163	17	21	7	7	16	2	7	9	5	3	8	8	14	15	401	498	899	5	6		
J15.9	Bacterial pneumonia, unspecified	0	0	2	2	3	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	3	8	0	0		
J16	Pneumonia due to other infectious organisms, not elsewhere classified	0	0	0	0	0	3	3	2	0	1	0	0	0	0	0	0	0	0	0	0	3	6	9	0	0		
J18	Pneumonia, organism unspecified	213	293	1437	2376	1159	1504	289	474	61	88	146	105	95	88	104	112	125	148	365	376	3994	5564	9558	67	46		
J18.0	Bronchopneumonia, unspecified	0	1	1	17	2	2	1	1	0	0	0	0	0	0	0	0	0	0	0	0	4	21	25	0	0		
J18.9	Pneumonia, unspecified	17	55	111	230	81	117	32	32	7	5	9	8	7	13	4	9	15	16	34	37	317	522	839	1	6		
J20	Acute bronchitis	0	5	74	116	2	7	3	7	1	2	0	8	9	6	8	8	19	22	25	25	141	206	347	0	0		
J20.9	Acute bronchitis, unspecified	0	0	0	0	0	0	1	1	1	0	8	0	2	0	3	0	0	0	0	0	15	1	16	0	0		
J21	Acute bronchiolitis	1	0	8	6	3	4	0	0	0	0	0	0	0	0	0	0	1	0	2	0	15	10	25	0	0		
J21.9	Acute bronchiolitis, unspecified	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0			
J22	Unspecified acute lower respiratory infection	80	143	762	1372	796	1021	386	459	90	88	190	98	152	76	184	156	193	122	341	352	3174	3887	7061	3	4		

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Inpatient Morbidity

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male	Female	Male	
J30	Vasomotor and allergic rhinitis	0	3	6	7	5	6	7	7	2	3	4	3	1	2	2	2	0	2	5	4	32	39	71	0	0	
J32	Chronic sinusitis	0	0	0	1	0	2	4	6	10	18	34	16	5	3	4	3	3	6	5	7	65	62	127	0	0	
J33	Nasal polyp	0	0	0	1	0	0	3	1	2	0	2	0	1	4	0	3	0	1	0	0	8	10	18	0	0	
J34	Other disorders of nose and nasal sinuses	1	0	1	0	1	0	0	5	2	5	5	20	18	11	13	23	4	2	19	16	64	82	146	0	0	
J35	Chronic diseases of tonsils and adenoids	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	
J35.8	Other chronic diseases of tonsils and adenoids	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	
J36	Peritonsillar abscess	0	0	0	0	0	0	0	0	1	1	0	1	0	1	0	0	0	0	0	2	1	5	6	0	0	
J37	Chronic laryngitis and	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	
J38	Diseases of vocal cords and larynx, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2	0	2	0	0	
J39	Other diseases of upper respiratory tract	0	0	3	5	9	12	3	3	1	1	8	5	2	2	0	0	0	2	1	2	27	32	59	0	1	
J39.9	Disease of upper respiratory tract, unspecified	0	1	7	6	4	6	4	4	2	1	1	1	1	0	1	1	1	1	3	1	24	22	46	0	0	
J40	Bronchitis, not specified as acute or chronic	4	8	174	341	73	129	15	19	9	4	13	12	12	10	25	15	22	17	31	38	378	593	971	0	1	
J42	Unspecified chronic bronchitis	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	
J43	Emphysema	0	0	0	2	0	1	1	1	0	0	0	0	0	2	0	0	0	2	0	0	1	8	9	0	1	
J43.9	Emphysema, unspecified	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	
J44	Other chronic obstructive pulmonary disease	3	1	10	27	18	21	14	17	5	10	62	45	102	111	290	205	733	504	3316	2856	4553	3797	8350	139	114	
J44.1	Chronic obstructive pulmonary disease with acute exacerbation,	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6	2	16	7	85	55	107	64	171	2	1	
J44.9	Chronic obstructive pulmonary disease, unspecified	0	0	0	0	0	0	0	1	0	1	1	0	2	0	7	4	29	7	86	66	125	79	204	3	1	
J45	Asthma	5	4	15	20	15	32	26	39	10	15	52	38	75	33	45	63	111	107	255	152	609	503	1112	7	7	
J45.0	Predominantly allergic asthma	0	0	0	0	0	0	2	0	0	0	1	1	5	0	1	2	0	1	1	0	10	4	14	0	0	
J45.9	Asthma, unspecified	0	0	3	10	4	5	0	2	2	0	4	2	8	2	1	0	1	1	3	2	26	24	50	0	0	
J46	Status asthmaticus	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	1	0	1	0	4	0	4	0	0	
J47	Bronchiectasis	0	0	0	1	0	1	0	0	0	0	1	0	0	3	1	1	0	1	2	0	4	7	11	0	0	
J64	Unspecified pneumoconiosis	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	3	3	1	2	5	5	10	0	1	
J65	Pneumoconiosis associated with tuberculosis	0	0	0	0	0	0	0	0	1	0	1	0	1	1	0	1	0	0	0	0	3	2	5	0	0	
J67	Hypersensitivity pneumonitis due to organic dust	0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3	0	0	
J68	Respiratory conditions due to inhalation of chemicals, gases, fumes and vapours	0	0	0	0	0	1	3	2	0	0	0	0	0	0	0	0	0	0	0	0	3	3	6	0	0	
J69	Pneumonitis due to solids and	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	2	0	5	1	6	1	0	
J69.0	Pneumonitis due to food and vomit	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	1	0	2	1	3	1	0	
J70	Respiratory conditions due to other external agents	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	2	1	0	1	4	5	0	0	
J80	Adult respiratory distress syndrome	0	0	0	0	0	0	0	0	0	0	1	3	0	3	1	0	0	0	0	0	2	6	8	1	1	
J81	Pulmonary oedema	0	0	0	0	0	0	1	0	1	1	1	1	2	2	0	0	0	0	0	0	5	4	9	0	0	
J82	Pulmonary eosinophilia, 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	
J84	Other interstitial pulmonary diseases	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	2	3	0	0	
J85	Abscess of lung and mediastinum	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	1	0	1	2	1	3	4	7	0	0
J86	Pyothorax	0	0	0	2	0	1	0	5	0	1	0	0	0	0	0	0	0	1	0	0	0	10	10	0	0	
J86.9	Pyothorax without fistula	0	0	1	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	1	1	2	3	5	1	2	
J90	Pleural effusion, not elsewhere classified	2	1	1	3	5	4	12	37	14	25	47	60	34	41	14	40	40	47	91	98	260	356	616	2	10	
J92	Pleural plaque	0	0	0	1	6	12	6	5	6	0	7	3	4	2	2	0	2	2	0	0	33	25	58	0	0	
J93	Pneumothorax	0	0	0	0	1	0	0	0	0	3	0	1	0	3	2	5	1	6	1	3	5	21	26	1	0	
J93.9	Pneumothorax, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2	0	3	3	0	1	
J94	Other pleural conditions	0	0	0	0	0	0	0	1	0	0	0	1	0	0	3	1	1	0	2	2	6	5	11	0	0	
J94.8	Other specified pleural conditions	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	1	1	2	0	0	
J96	Respiratory failure, not elsewhere classified	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	4	4	0	2	
J96.0	Acute respiratory failure	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	
J96.9	Respiratory failure, 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	
J98	Other respiratory disorders	31	40	3	9	2	9	1	4	0	0	21	4	3	1	2	3	2	4	12	18	77	92	169	0	1	
J98.1	Pulmonary collapse	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	
J98.8	Other specified respiratory disorders	0	0	0	2	2	1	2	1	0	0	1	1	0	0	1	0	0	1	0	0	6	6	12	0	0	
K00	Disorders of tooth development and eruption	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	
K02	Dental caries	0	0	1	0	3	3	7	9	7	2	16	8	8	7	9	1	4	1	7	3	62	34	96	0	0	
K02.9	Dental caries, unspecified	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	
K04	Diseases of pulp and periapical tissues	0	0	0	0	0	0	4	3	3	1	7	2	3	4	4	1	2	4	3	1	26	16	42	0	0	
K05	Gingivitis and periodontal diseases	0	0	1	0	2	3	2	2	0	0	7	5	0	1	2	1	2	2	2	0	18	14	32	0	0	

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																								Grand Total	Total Deaths	
		<28 days		29days-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					
K06	Other disorders of gingiva and edentulous alveolar ridge	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	0	0	0	2	1	3	0	0	
K07	Dentofacial anomalies [including malocclusion]	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		
K08	Other disorders of teeth and supporting structures	0	0	1	1	1	0	2	14	2	7	6	0	3	5	7	1	0	1	1	0	23	29	52	0	0		
K09	Cysts of oral region, not elsewhere classified	0	0	0	0	0	0	0	1	0	0	1	0	2	1	0	0	0	0	0	0	3	2	5	0	0		
K10	Other diseases of jaws	0	0	0	0	1	0	0	1	0	0	1	0	1	0	1	0	0	0	0	1	4	2	6	0	0		
K11	Diseases of salivary glands	0	0	3	0	1	1	2	0	1	0	1	0	0	0	0	2	0	0	0	11	8	14	22	0	0		
K11.2	Sialoadenitis	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		
K11.3	Abscess of salivary gland	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0			
K12	Stomatitis and related lesions	2	0	1	1	9	6	2	1	0	1	0	1	1	0	1	0	2	0	0	1	18	11	29	0	0		
K12.1	Other forms of stomatitis	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	4	0	4	0	0		
K13	Other diseases of lip and oral	2	0	1	0	1	1	1	1	0	0	2	0	1	0	0	0	2	0	1	1	11	3	14	0	0		
K13.7	Other and unspecified lesions of oral mucosa	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		
K14	Diseases of tongue	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		
K20	Oesophagitis	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	2	0	3	3	0	0			
K21	Gastro-oesophageal reflux disease	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		
K22	Other diseases of oesophagus	0	0	0	0	0	0	1	0	0	0	1	1	0	0	0	0	0	0	0	0	2	1	3	0	0		
K22.6	Gastro-oesophageal laceration-haemorrhage 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		
K25	Gastric ulcer	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	2	2	6	4	9	13	0	0		
K26	Duodenal ulcer	2	0	0	0	2	1	19	7	37	12	53	29	47	37	58	41	40	46	108	89	366	262	628	1	2		
K27	Peptic ulcer, site unspecified	2	1	0	0	0	0	2	4	9	1	46	28	35	37	42	33	26	6	21	9	183	119	302	1	0		
K28	Gastrojejunal ulcer	0	1	1	1	2	0	1	0	0	0	1	0	2	2	0	2	2	6	2	2	11	14	25	1	0		
K29	Gastritis and duodenitis	2	2	2	4	27	21	66	68	248	119	427	233	317	238	304	181	243	203	348	244	1984	1313	3297	8	10		
K29.1	Other acute gastritis	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		
K29.3	Chronic superficial gastritis	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		
K29.5	Chronic gastritis, unspecified	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		
K29.7	Gastritis, unspecified	0	0	0	0	0	0	1	1	1	0	5	0	5	2	3	1	2	1	4	4	21	9	30	0	0		
K29.8	Duodenitis	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		
K29.9	Gastroduodenitis, unspecified	1	0	0	0	0	1	2	2	12	1	27	5	16	4	15	6	19	7	22	18	114	44	158	0	0		
K30	Dyspepsia	0	0	0	2	2	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2	3	5	0	0		
K31	Other diseases of stomach and duodenum	1	0	1	8	1	1	12	4	7	8	20	13	20	15	21	19	9	11	32	22	124	101	225	0	1		
K31.2	Hourglass stricture and stenosis of stomach	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		
K35	Acute appendicitis	2	2	12	41	17	44	126	241	193	169	376	265	156	171	83	121	47	46	47	21	1059	1121	2180	3	1		
K35.0	Acute appendicitis with generalized peritonitis	0	0	0	0	0	0	1	2	0	1	0	0	1	2	0	0	0	0	0	0	2	5	7	0	0		
K35.9	Acute appendicitis, unspecified	0	0	0	0	0	2	10	15	10	13	20	9	11	9	4	4	2	2	4	0	61	54	115	0	0		
K36	Other appendicitis	0	0	0	0	0	0	0	1	0	1	1	0	1	1	0	0	0	1	0	1	2	5	7	0	0		
K37	Unspecified appendicitis	0	1	2	11	4	10	38	69	74	71	91	62	59	55	48	20	23	24	24	16	363	339	702	0	0		
K38	Other diseases of appendix	0	0	0	2	2	5	16	34	3	7	10	13	4	9	9	11	4	2	1	0	49	83	132	0	1		
K40	Inguinal hernia	0	0	3	8	8	32	24	70	7	41	18	79	20	75	17	89	32	89	21	146	150	629	779	1	1		
K40.2	Bilateral inguinal hernia, without obstruction or gangrene	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	2	0	0	0	2	0	6	6	0	0		
K40.9	Unilateral or unspecified inguinal hernia, without obstruction or	0	0	0	0	2	7	1	23	1	2	5	10	0	6	2	13	1	20	1	29	13	110	123	0	0		
K41	Femoral hernia	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	1	0	2	1	3	0	0		
K41.9	Unilateral or unspecified femoral hernia, without obstruction or	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		
K42	Umbilical hernia	0	0	0	1	3	0	3	0	1	0	0	0	2	2	0	2	0	1	0	1	9	7	16	1	0		
K42.9	Umbilical hernia without obstruction or gangrene	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		
K43	Ventral hernia	0	0	0	0	0	0	0	0	0	0	1	0	1	1	2	0	0	2	0	0	4	3	7	0	0		
K43.9	Ventral hernia without obstruction or gangrene	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	1	0	0	1	2	3	5	0	0		
K44	Diaphragmatic hernia	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		
K45	Other abdominal hernia	0	0	0	1	1	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0	1	5	6	0	0		
K46	Unspecified abdominal hernia	1	3	6	12	9	18	14	53	4	31	23	46	18	63	23	45	26	45	20	55	144	371	515	1	1		
K46.0	Unspecified abdominal hernia with obstruction, without gangrene	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		
K46.9	Unspecified abdominal hernia without obstruction or gangrene	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2	0	3	3	0	0			
K52	Other noninfective gastroenteritis and colitis	5	3	38	46	47	30	32	38	22	22	41	20	26	22	26	14	14	12	14	10	265	217	482	0	0		
K56	Paralytic ileus and intestinal obstruction without hernia	8	16	9	44	10	14	15	36	10	10	18	16	5	16	19	13	26	15	18	39	138	219	357	4	13		
K56.1	Intussusception	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2	2	0	0		
K56.2	Volvulus	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	1	1	2	0	0		

Raw Data

Inpatient Morbidity

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male						
K56.4	Other impaction of intestine	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
K56.6	Other and unspecified intestinal obstruction	0	0	0	0	0	1	0	1	0	0	1	1	1	2	2	2	3	2	2	7	9	16	25	0	1	
K57	Diverticular disease of intestine	0	0	0	0	0	0	0	1	0	0	1	2	0	1	0	3	1	1	0	1	2	9	11	0	1	
K57.8	Diverticular disease of intestine, part unspecified, with perforation and abscess	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	
K58	Irritable bowel syndrome	0	0	0	0	0	0	0	0	0	0	2	0	0	0	1	1	0	0	1	1	4	2	6	0	0	
K59	Other functional intestinal disorders	0	0	1	3	1	0	1	7	2	3	16	10	22	6	20	3	8	12	19	7	90	51	141	0	0	
K59.0	Constipation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2	0	2	0	0	
K60	Fissure and fistula of anal and rectal regions	4	10	1	3	0	2	1	2	1	0	9	9	3	6	3	4	1	3	0	1	23	40	63	1	2	
K60.0	Acute anal fissure	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	1	2	0	0	
K60.2	Anal fissure, 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	
K60.3	Anal fistula	0	0	0	0	0	0	0	0	0	0	2	4	0	1	1	1	0	1	0	0	3	7	10	0	0	
K61	Abscess of anal and rectal regions	0	0	0	0	0	0	1	0	0	0	0	0	3	2	1	2	0	1	0	0	5	5	10	0	0	
K61.0	Anal abscess	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	2	0	2	0	0	1	5	6	0	0	
K62	Other diseases of anus and rectum	0	0	0	0	1	1	1	2	0	1	2	1	1	0	0	2	1	0	2	0	8	7	15	0	0	
K62.1	Rectal polyp	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	
K62.5	Haemorrhage of anus and rectum	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	
K63	Other diseases of intestine	1	1	0	0	0	2	0	1	0	1	3	3	2	1	1	1	1	2	3	9	15	24	0	1		
K63.1	Perforation of intestine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	2	2	0	1		
K65	Peritonitis	0	2	2	1	0	1	5	7	1	6	7	10	2	11	2	5	2	6	6	7	27	56	83	4	6	
K65.9	Peritonitis, unspecified	0	0	0	0	0	0	0	1	0	0	0	1	1	1	1	0	0	1	0	1	2	5	7	1	0	
K66	Other disorders of peritoneum	0	0	0	0	0	0	0	0	0	0	0	4	0	5	0	2	2	4	2	3	4	18	22	0	3	
K70	Alcoholic liver disease	0	0	0	0	0	0	1	15	6	20	34	54	77	110	100	149	89	144	96	142	403	634	1037	22	23	
K70.1	Alcoholic hepatitis	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	
K70.3	Alcoholic cirrhosis of liver	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3	0	0	0	2	0	6	6	0	0	
K70.9	Alcoholic liver disease, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	1	0	1	3	4	4	8	0	0	
K72	Hepatic failure, not elsewhere classified	0	0	0	0	0	0	0	0	1	0	2	2	1	1	2	2	3	2	0	2	9	9	18	1	0	
K72.9	Hepatic failure, 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	
K74	Fibrosis and cirrhosis of liver	0	0	0	0	0	1	0	0	0	0	3	10	11	21	20	45	22	49	54	73	110	199	309	12	25	
K74.6	Other and unspecified cirrhosis of liver	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2	0	2	0	0	
K75	Other inflammatory liver diseases	0	1	2	4	5	9	45	67	10	10	21	35	43	22	36	48	28	42	30	26	220	264	484	4	6	
K75.0	Abscess of liver	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	0	0	1	2	3	0	0	
K75.9	Inflammatory liver disease, unspecified	0	0	0	0	0	0	0	0	1	0	0	0	1	1	1	0	0	0	0	0	3	1	4	0	0	
K76	Other diseases of liver	0	0	0	1	0	1	1	0	1	4	11	15	20	50	32	84	23	59	27	44	115	258	373	12	27	
K76.9	Liver disease, unspecified	0	1	0	0	0	0	0	0	0	0	1	1	1	0	3	3	1	2	1	5	7	12	19	0	4	
K80	Cholelithiasis	1	0	0	1	0	1	20	7	30	10	320	147	323	109	286	82	209	91	217	64	1406	512	1918	1	4	
K80.2	Calculus of gallbladder without cholecystitis	0	0	0	0	1	0	0	0	4	0	47	2	41	4	37	5	17	6	16	6	163	23	186	0	0	
K80.5	Calculus of bile duct without cholangitis or cholecystitis	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	
K80.8	Other cholelithiasis	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	
K81	Cholecystitis	0	0	3	2	2	1	7	6	17	10	61	19	72	20	67	25	49	33	61	35	339	151	490	2	2	
K81.9	Cholecystitis, unspecified	0	0	0	0	0	0	1	2	0	7	0	2	0	7	1	4	2	8	0	30	4	34	0	0		
K82	Other diseases of gallbladder	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	1	0	0	0	1	2	3	0	0		
K83	Other diseases of biliary tract	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	1	2	3	0	0	
K83.0	Cholangitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	2	1	0	
K85	Acute pancreatitis	0	0	0	0	0	1	3	5	1	8	9	20	18	31	14	25	15	15	14	16	74	121	195	4	3	
K85.9	Acute pancreatitis, 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	
K86	Other diseases of pancreas	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	1	0	0	1	2	3	0	0	
K90	Intestinal malabsorption	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	
K91	Postprocedural disorders of digestive system, not elsewhere	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	1	0	0	1	2	4	6	0	1	
K92	Other diseases of digestive system	0	0	0	0	0	2	4	4	5	5	3	38	22	37	31	47	37	71	75	96	177	300	477	1	15	
K92.2	Gastrointestinal haemorrhage, unspecified	0	0	0	0	0	0	0	0	3	1	1	3	4	1	2	2	2	1	4	8	16	24	0	0		
L00	Staphylococcal scalded skin	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	
L01	Impetigo	1	6	7	5	13	15	17	24	19	14	17	15	11	6	4	4	5	4	11	100	117	217	0	1		
L01.0	Impetigo [any organism] [any site]	0	0	0	0	0	1	0	1	0	2	0	0	0	0	0	0	0	0	0	0	3	0	3	0	0	
L02	Cutaneous abscess, furuncle and carbuncle	2	4	38	29	102	144	147	208	86	94	148	93	86	81	66	69	46	68	73	99	794	889	1683	0	0	
L02.2	Cutaneous abscess, furuncle and carbuncle of trunk	0	0	0	0	0	0	0	2	0	0	0	1	0	0	0	0	0	0	0	0	0	3	3	0	0	
L02.3	Cutaneous abscess, furuncle and carbuncle of buttock	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	
L02.4	Cutaneous abscess, furuncle and carbuncle of limb	0	0	0	0	0	0	2	1	0	0	2	0	0	1	0	1	1	0	1	0	6	3	9	0	0	
L02.8	Cutaneous abscess, furuncle and carbuncle of other sites	0	0	0	0	0	0	1	1	0	1	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0	
L02.9</																											

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																				Grand Total	Total Deaths			
		<28 days		29days-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
L03.9	Cellulitis, unspecified	0	0	0	1	0	0	0	2	2	5	0	1	0	1	2	0	2	1	1	1	7	12	19	0	0
L04	Acute lymphadenitis	0	1	1	0	1	1	2	2	1	0	1	3	1	0	1	0	1	0	1	0	10	7	17	0	0
L04.9	Acute lymphadenitis, unspecified	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	
L05	Pilonidal cyst	0	0	0	0	0	0	0	0	1	1	2	1	0	3	0	0	0	0	0	0	3	5	8	1	0
L05.9	Pilonidal cyst without abscess	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
L08	Other local infections of skin and subcutaneous tissue	0	2	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2	0	6	6	0	0
L10	Pemphigus	0	0	0	0	0	0	0	0	1	0	0	1	0	3	6	5	3	13	15	8	25	30	55	0	1
L20	Atopic dermatitis	0	0	0	0	0	0	0	3	0	0	0	0	0	3	0	3	0	1	2	1	2	11	13	1	0
L23	Allergic contact dermatitis	1	1	6	4	3	2	3	2	0	2	0	3	0	2	0	0	0	0	0	0	13	16	29	0	0
L24	Irritant contact dermatitis	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
L25	Unspecified contact dermatitis	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
L26	Exfoliative dermatitis	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
L30	Other dermatitis	2	1	2	3	10	18	11	19	16	8	11	17	11	12	5	10	2	7	8	8	78	103	181	0	0
L30.9	Dermatitis, 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
L40	Psoriasis	0	0	0	0	0	1	1	0	1	2	3	3	3	2	3	1	1	0	1	1	13	10	23	0	1
L42	Pityriasis rosea	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	2	0	2	2	0	0
L50	Urticaria	0	0	0	1	7	12	10	5	1	1	1	0	2	1	5	1	0	0	4	6	30	27	57	0	1
L50.6	Contact urticaria	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
L50.9	Urticaria, unspecified	0	0	0	0	0	2	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	4	4	0	0
L51	Erythema multiforme	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	4	0	4	0	1	0
L52	Erythema nodosum	0	0	0	0	0	0	0	2	0	0	2	0	0	0	0	0	0	0	1	2	3	5	0	0	0
L56	Other acute skin changes due to ultraviolet radiation	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
L58	Radiodermatitis	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	1	2	3	0	0	0
L64	Androgenic alopecia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	6	4	7	4	11	1	1
L67	Hair colour and hair shaft abnormalities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	8	4	8	12	0	0	0
L71.1	Rhinophyma	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
L72	Follicular cysts of skin and subcutaneous tissue	0	0	0	0	1	0	1	1	0	1	2	2	2	0	1	3	2	1	2	5	11	13	24	0	0
L72.0	Epidermal cyst	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0
L72.1	Trichilemmal cyst	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
L72.9	Follicular cyst of skin and subcutaneous tissue, unspecified	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
L73	Other follicular 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
L75	Apocrine sweat disorders	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
L81	Other disorders of pigmentation	0	0	0	0	1	1	1	1	1	2	5	3	3	4	3	1	1	0	0	0	15	12	27	0	0
L84	Corns and callosities	0	0	0	0	2	0	0	1	2	0	2	2	3	3	0	1	1	5	0	3	10	15	25	0	0
L88	Pyoderma gangrenosum	0	0	1	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	2	1	3	0	0
L89	Decubitus ulcer	0	0	0	0	0	0	0	0	0	0	1	0	1	2	0	0	0	0	2	1	4	3	7	0	0
L90.5	Scar conditions and fibrosis of skin	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
L91.0	Keloid scar	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
L92	Granulomatous disorders of skin and subcutaneous tissue	0	0	1	1	0	1	0	0	0	1	0	1	1	2	1	7	1	0	2	5	6	18	24	0	0
L92.1	Necrobiosis lipoidica, not elsewhere classified	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
L92.8	Other granulomatous disorders of skin and subcutaneous tissue	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
L94.9	Localized connective tissue 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
L97	Ulcer of lower limb, not elsewhere classified	0	0	0	0	0	0	1	0	0	1	0	0	1	1	1	0	1	0	1	3	5	5	10	0	0
L98	Other disorders of skin and subcutaneous tissue, not elsewhere classified	0	0	0	0	0	2	2	1	0	3	3	7	4	7	1	7	0	0	0	2	10	29	39	0	1
M00	Pyogenic arthritis	0	0	0	0	0	0	8	4	1	0	0	0	2	2	2	1	2	2	0	0	15	9	24	0	0
M00.9	Pyogenic arthritis, unspecified	0	0	0	0	0	0	1	3	0	1	0	1	1	0	1	0	0	0	1	0	4	5	9	0	0
M05	Seropositive rheumatoid arthritis	0	0	1	3	1	6	0	3	0	0	0	0	0	0	1	0	0	0	0	1	3	13	16	0	0
M06	Other rheumatoid arthritis	0	0	0	0	0	0	1	2	0	0	2	0	1	0	1	0	0	1	0	0	5	3	8	0	0
M06.9	Rheumatoid arthritis, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2	0	2	0	0	0
M08	Juvenile arthritis	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	2	0	2	0	0
M10	Gout	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	1	1	2	0	0
M12	Other specific arthropathies	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
M13	Other arthritis	2	1	2	3	1	9	16	17	19	19	42	14	19	13	27	32	37	24	51	55	216	187	403	1	0
M13.0	Polyarthritis, 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
M13.9	Arthritis, unspecified	0	0	0	0	0	0	0	0	1	0	0	1	0	0	1	0	0	0	1	0	3	1	4	0	0
M19	Other arthrosis	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
M20.0	Deformity of finger(s)	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0
M21	Other acquired deformities of limbs	0	0	0	0	0	1	0	0	1	0	1	0	0	0	0	0	0	0	0	0	2	1	3	0	0
M24.5	Contracture of joint	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
M25	Other joint disorders, not elsewhere classified	0	0	0	0	0	0	2	4	1	0	3	2	0	1	2	1	1	1	0	3	9	12	21	0	0

Raw Data

Inpatient Morbidity

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male	Female	Male			
M25.4	Effusion of joint	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
M25.5	Pain in joint	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
M30	Polyarteritis nodosa and related conditions	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3	0	0
M32	Systemic lupus erythematosus	0	0	0	0	0	0	0	0	6	1	5	1	2	0	4	1	1	0	0	0	18	3	21	3	0	
M33	Dermatopolymyositis	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	
M34.9	Systemic sclerosis, 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	
M41	Scoliosis	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	
M43	Other deforming dorsopathies	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	
M45	Ankylosing spondylitis	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	2	0	0	
M46	Other inflammatory spondylopathies	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
M46.9	Inflammatory spondylopathy, 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	
M47	Spondylosis	0	0	1	0	0	0	1	0	0	0	1	2	0	1	6	13	1	1	11	18	21	35	56	0	0	
M50	Cervical disc disorders	0	0	0	0	0	0	0	0	0	0	0	0	4	0	5	0	3	0	0	0	12	0	12	0	0	
M51	Other intervertebral disc disorders	0	0	0	0	0	0	0	0	0	0	1	2	6	1	4	3	0	6	1	4	12	16	28	0	1	
M51.2	Other specified intervertebral disc displacement	0	0	0	0	0	0	0	0	0	0	1	0	2	1	0	0	0	0	1	0	4	1	5	0	0	
M54	Dorsalgia	0	0	0	0	0	0	1	3	3	2	9	3	9	5	11	2	6	5	11	6	50	26	76	0	0	
M54.3	Sciatica	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	1	0	0	0	4	0	4	0	0	
M54.9	Dorsalgia, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	1	0	0	2	2	4	0	0	
M60	Myositis	0	0	0	1	0	1	2	2	1	3	0	0	2	0	0	0	0	0	1	0	6	7	13	1	0	
M60.0	Infective myositis	0	0	0	0	1	1	1	1	0	1	0	1	1	0	0	0	0	0	0	0	2	4	6	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	0	1	0	0	
M62	Other disorders of muscle	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	1	2	1	3	0	0	
M65	Synovitis and tenosynovitis	0	0	0	0	0	1	2	1	0	0	0	0	0	0	0	0	0	0	0	2	2	4	0	0	0	
M65.9	Synovitis and tenosynovitis,	0	0	0	0	0	0	2	0	0	1	0	0	1	0	0	0	0	0	0	3	1	4	0	0	0	
M66	Spontaneous rupture of synovium and tendon	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	
M67	Other disorders of synovium and tendon	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	
M70	Soft tissue disorders related to use, overuse and pressure	0	0	0	0	0	0	0	0	0	2	1	1	0	2	0	2	0	0	0	3	1	10	11	0	0	
M71	Other bursopathies	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	1	1	0	0	0	4	1	5	0	0	
M71.2	Synovial cyst of popliteal space	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	1	1	2	3	5	0	0	
M72	Fibroblastic disorders	0	0	0	0	0	0	0	2	0	1	0	1	2	0	0	0	0	1	2	0	4	5	9	0	0	
M79	Other soft tissue disorders, not elsewhere classified	0	1	2	0	1	3	3	4	1	5	3	2	3	2	3	1	3	5	6	5	25	28	53	0	0	
M79.0	Rheumatism, 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	
M79.1	Myalgia	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	
M79.8	Other specified soft tissue disorders	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	
M80	Osteoporosis with pathological	0	0	0	0	1	1	0	0	1	4	8	6	17	8	21	24	13	37	21	40	82	120	202	9	10	
M81	Osteoporosis without pathological fracture	0	0	0	0	0	0	0	0	0	1	1	0	1	0	1	0	2	0	2	0	7	1	8	0	0	
M84	Disorders of continuity of bone	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	
M85	Other disorders of bone density and structure	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	2	2	0	0	
M86	Osteomyelitis	0	0	0	0	0	4	9	10	2	3	0	1	1	1	1	3	3	3	2	5	18	30	48	0	0	
M86.1	Other acute osteomyelitis	0	0	0	0	0	0	1	1	0	1	0	0	0	0	0	0	0	0	0	1	2	3	0	0	0	
M86.6	Other chronic osteomyelitis	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2	0	2	0	0	
M86.9	Osteomyelitis, unspecified	0	0	0	0	0	0	1	1	0	2	0	0	0	0	0	0	0	0	0	1	3	4	0	0	0	
M88	Paget's disease of bone [osteitis deformans]	0	0	0	0	0	0	0	0	0	0	0	1	0	3	0	2	0	1	0	0	0	7	7	0	0	
M91	Juvenile osteochondrosis of hip and pelvis	0	0	0	0	0	0	0	0	1	1	1	2	0	0	0	0	0	0	0	2	2	5	7	0	0	
M92	Other juvenile osteochondrosis	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	
M93	Other osteochondropathies	0	0	0	0	0	0	1	1	1	1	3	0	0	0	2	2	0	0	0	3	7	7	14	1	1	
M94	Other disorders of cartilage	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	
M95	Other acquired deformities of musculoskeletal system and connective tissue	1	0	0	0	0	0	1	3	0	1	2	2	2	2	2	4	1	1	0	1	9	14	23	0	0	
M95.2	Other acquired deformity of head	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	
N00	Acute nephritic syndrome	0	0	1	0	2	1	12	30	3	1	11	1	10	0	2	0	7	0	3	2	51	35	86	0	0	
N00.9	Acute nephritic syndrome - Unspecified	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0	0	
N02	Recurrent and persistent	0	0	0	0	0	0	0	1	0	2	5	7	2	5	7	5	1	2	0	0	15	22	37	0	0	
N03	Chronic nephritic syndrome	0	0	0	0	0	0	1	0	0	0	1	4	1	7	1	4	1	2	5	8	10	25	35	1	2	
N04	Nephrotic syndrome	0	1	6	14	19	29	49	73	3	3	7	6	2	4	3	3	1	8	5	1	95	142	237	0	2	
N05	Unspecified nephritic syndrome	1	1	3	4	10	8	46	85	6	9	9	2	2	4	3	1	1	1	1	3	82	118	200	0	0	
N05.9	Unspecified nephritic syndrome - Unspecified	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	
N10	Acute tubulo-interstitial nephritis	0	0	0	0	0	0	0	0	1	1	1	0	1	1	1	0	0	0	1	0	5	2	7	0	0	
N11	Chronic tubulo-interstitial nephritis	0	0	0	0	0	0	0	0	0	0	0	3	1	0	1	0	0	0	0	0	3	2	5	0	0	
N11.8	Other chronic tubulo-interstitial nephritis	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	2	0	2	0	0	
N12	Tubulo-interstitial nephritis, not specified as acute or chronic	0	0	0	2	1	2	1	2	9	0	23															

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																			Grand Total	Total Deaths					
		<28 days		29days-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			
N14	Drug- and heavy-metal-induced tubulo-interstitial and tubular	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
N15	Other renal tubulo-interstitial	0	0	1	0	0	0	0	0	1	0	0	0	2	1	0	0	0	0	0	0	1	2	4	6	0	0
N17	Acute renal failure	0	0	0	0	0	0	0	0	0	2	0	0	1	0	0	0	1	0	3	2	6	3	9	1	0	
N17.9	Acute renal failure, unspecified	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	
N18	Chronic renal failure	0	0	0	0	0	0	0	0	0	2	2	6	9	7	7	10	21	9	10	18	21	52	70	122	3	3
N18.9	Chronic renal failure, unspecified	0	0	0	0	0	0	0	0	0	0	0	3	0	4	4	2	1	0	6	13	17	22	28	50	0	0
N19	Unspecified renal failure	0	0	0	0	0	1	2	1	2	1	3	6	8	8	4	6	10	9	11	21	40	53	93	2	10	
N20	Calculus of kidney and ureter	2	1	0	2	1	3	7	17	43	17	67	52	50	59	34	29	17	22	16	17	237	219	456	0	0	
N20.0	Calculus of kidney	0	0	0	0	0	0	1	5	6	3	14	13	17	9	7	5	3	4	3	3	51	42	93	0	0	
N20.1	Calculus of ureter	0	0	0	0	0	0	0	0	0	0	0	2	1	2	1	2	0	0	0	0	6	2	8	0	0	
N20.9	Urinary calculus, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	2	2	2	0	0	
N21	Calculus of lower urinary tract	0	0	0	1	4	3	1	2	1	1	9	3	4	4	2	2	2	1	1	3	24	20	44	0	0	
N21.0	Calculus in bladder	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	2	2	0	0	
N21.1	Calculus in urethra	0	0	0	0	0	0	0	0	0	3	1	5	1	2	1	0	1	2	0	1	4	13	17	0	0	
N23	Unspecified renal colic	0	0	2	0	1	0	5	7	26	14	91	37	33	34	23	17	13	11	13	5	207	125	332	0	0	
N25	Disorders resulting from impaired renal tubular function	0	0	0	0	0	0	0	0	1	0	0	0	2	0	10	0	4	0	0	0	17	0	17	0	0	
N26	Unspecified contracted kidney	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	
N28	Other disorders of kidney and ureter, not elsewhere classified	0	0	0	3	1	2	2	1	1	5	4	6	9	9	2	4	13	42	16	13	48	85	133	2	4	
N28.9	Disorder of kidney and ureter, unspecified	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	
N30	Cystitis	0	0	0	1	2	0	1	4	12	0	20	5	12	3	2	5	4	2	6	2	59	22	81	0	0	
N30.8	Other cystitis	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	1	0	0	0	3	0	3	0	0	
N30.9	Cystitis, unspecified	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	
N31	Neuromuscular dysfunction of bladder, not elsewhere classified	0	0	0	2	1	0	1	1	0	0	0	0	0	1	0	0	0	0	0	0	2	4	6	0	0	
N31.2	Flaccid neuropathic bladder, not elsewhere classified	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	
N32	Other disorders of bladder	0	0	0	2	0	0	0	1	2	0	6	0	2	0	0	0	0	1	0	0	10	4	14	0	0	
N34	Urethritis and urethral syndrome	0	0	0	0	0	0	0	2	0	0	0	0	0	1	0	0	0	1	0	2	0	6	6	0	0	
N34.2	Other urethritis	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	
N35	Urethral stricture	0	0	0	0	0	0	0	0	0	1	0	0	2	0	0	0	1	2	0	0	3	6	9	0	0	
N36	Other disorders of urethra	0	1	0	1	0	0	1	0	6	1	5	8	7	4	4	2	1	2	2	7	26	26	52	0	1	
N39	Other disorders of urinary system	19	29	81	107	181	219	358	382	697	213	1610	347	831	294	505	253	432	232	698	526	5412	2602	8014	5	4	
N39.0	Urinary tract infection, site not	0	0	2	3	4	12	16	16	25	7	88	11	24	5	10	6	25	7	41	24	235	91	326	0	0	
N39.1	Persistent proteinuria, 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	0	
N39.9	Disorder of urinary system,	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0	0	0	0	4	0	4	0	0	0	
N40	Hyperplasia of prostate	0	0	0	0	0	1	0	4	0	4	0	10	0	9	0	12	0	25	0	129	0	194	194	0	1	
N41	Inflammatory diseases of prostate	0	0	0	0	0	0	0	4	0	2	0	4	0	1	0	9	0	9	0	127	0	156	156	0	0	
N41.9	Inflammatory disease of prostate, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	6	0	9	9	0	0	
N42	Other disorders of prostate	0	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	0	0	9	0	34	0	73	0	46	0	79	0	75	0	72	0	51	0	56	0	495	495	0	1	
N43.0	Encysted hydrocele	0	0	0	0	0	1	0	7	0	0	0	2	0	2	0	1	0	4	0	3	0	20	20	0	0	
N43.3	Hydrocele, unspecified	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	4	0	3	0	2	0	11	11	0	0	
N44	Torsion of testis	0	0	0	0	0	1	0	0	0	0	0	2	0	1	0	0	0	1	0	0	5	5	0	0	0	
N45	Orchitis and epididymitis	0	0	0	0	0	1	0	9	0	5	0	11	0	11	0	7	0	4	0	5	0	53	53	0	0	
N45.9	Orchitis, epididymitis and epididymo-orchitis without abscess	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	
N47	Redundant prepuce, phimosis and paraphimosis	0	1	0	6	0	30	0	100	0	16	0	21	0	4	0	11	0	5	0	6	0	200	200	0	0	
N48	Other disorders of penis	0	0	0	0	0	0	0	6	0	1	0	1	0	0	0	0	0	0	0	0	8	8	0	0	0	
N48.1	Balanoposthitis	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	
N49	Inflammatory disorders of male genital organs, not elsewhere	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	0	0	2	0	5	5	0	0	0	
N49.2	Inflammatory disorders of scrotum	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	
N50	Other disorders of male genital	0	0	0	0	0	0	1	0	1	0	1	0	0	1	0	0	0	0	1	0	4	4	0	0	0	
N60	Benign mammary dysplasia	0	0	0	0	0	1	1	3	0	3	1	4	1	0	0	3	2	1	1	1	6	16	22	0	2	
N61	Inflammatory disorders of breast	0	3	0	0	0	1	3	0	13	6	50	2	7	0	5	0	1	0	1	0	80	12	92	0	0	
N62	Hypertrophy of breast	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	1	1	2	0	0	0	
N63	Unspecified lump in breast	0	0	0	0	1	0	1	2	58	5	139	1	40	0	9	0	3	0	2	4	253	12	265	0	0	
N64	Other disorders of breast	1	1	0	0	0	0	0	0	4	0	8	0	0	0	0	0	0	0	0	13	1	14	0	0	0	
N70	Salpingitis and oophoritis	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	3	0	3	0	0	0	
N71	Inflammatory disease of uterus, except cervix	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	3	0	3	0	0	0	
N72	Inflammatory disease of cervix uteri	0	0	0	0	0	0	0	0	0	0	0	0	3	0	1	0	0	0	0	4	0	4	0	0	0	
N73	Other female pelvic inflammatory diseases	0	0	0	0	0	0	4	0	63	0	196	0	123	0	75	0	28	0	13	0	502	0	502	1	0	
N73.9	Female pelvic inflammatory disease, unspecified	0	0	0	0	0	0																				

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Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																		Grand Total	Total Deaths					
		<28 days		29days-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		
N76	Other inflammation of vagina and	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	0	3	0	3	0	0
N76.0	Acute vaginitis	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
N76.4	Abscess of vulva	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
N80	Endometriosis	0	0	0	0	0	0	0	0	1	0	1	0	1	0	1	0	0	0	1	0	5	0	5	0	0
N81	Female genital prolapse	0	0	0	0	0	0	0	0	1	0	23	0	119	0	167	0	198	0	303	0	811	0	811	0	0
N81.2	Incomplete uterovaginal prolapse	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
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	6	0	17	0	33	0	34	0	26	0	116	0	116	0	0
N83	Noninflammatory disorders of ovary, fallopian tube and broad ligament	0	0	0	0	0	0	1	0	22	0	103	0	72	0	62	0	31	0	18	0	309	0	309	0	0
N83.2	Other and unspecified ovarian cysts	0	0	0	0	0	0	1	0	1	0	2	0	3	0	4	0	1	0	0	0	12	0	12	0	0
N84	Polyp of female genital tract	0	0	0	0	0	0	0	0	0	0	8	0	30	0	117	0	17	0	1	0	173	0	173	0	0
N84.0	Polyp of corpus uteri	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
N84.1	Polyp of cervix uteri	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
N85	Other noninflammatory disorders of uterus, except cervix	0	0	0	0	0	0	0	0	1	0	4	0	2	0	17	0	5	0	0	0	29	0	29	0	0
N85.2	Hypertrophy of uterus	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
N85.7	Haematometra	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
N86	Erosion and ectropion of cervix uteri	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	2	0	2	0	0
N88	Other noninflammatory disorders of cervix uteri	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
N89	Other noninflammatory disorders of vagina	0	0	0	0	0	0	0	0	0	0	7	0	5	0	3	0	0	0	1	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	1	0	0	0	0	0	0	0	1	0	1	0	0
N90	Other noninflammatory disorders of vulva and perineum	0	0	0	0	0	0	3	0	0	0	3	0	1	0	0	0	0	0	0	0	7	0	7	0	0
N90.7	Vulvar cyst	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
N90.8	Other specified noninflammatory disorders of vulva and perineum	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
N91	Absent, scanty and rare	0	0	0	0	0	0	1	0	6	0	4	0	2	0	4	0	0	0	1	0	18	0	18	0	0
N92	Excessive, frequent and irregular menstruation	0	0	0	0	0	0	10	0	48	0	70	0	79	0	175	0	89	0	7	0	478	0	478	0	0
N92.0	Excessive and frequent menstruation with regular cycle	0	0	0	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	0	0	3	0	3	0	0
N92.6	Irregular menstruation, unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	3	0	3	0	0
N93	Other abnormal uterine and vaginal bleeding	0	0	0	0	0	0	4	0	122	0	375	0	174	0	154	0	49	0	18	0	896	0	896	0	0
N93.8	Other specified abnormal uterine and vaginal bleeding	0	0	0	0	0	0	0	0	2	0	5	0	5	0	7	0	0	0	1	0	20	0	20	0	0
N93.9	Abnormal uterine and vaginal bleeding, unspecified	0	0	0	0	0	0	0	0	2	0	19	0	10	0	5	0	1	0	0	0	37	0	37	0	0
N94	Pain and other conditions associated with female genital organs and menstrual cycle	0	0	0	0	0	0	0	0	4	0	8	0	1	0	4	0	0	0	0	0	17	0	17	0	0
N94.6	Dysmenorrhoea, unspecified	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
N95	Menopausal and other perimenopausal disorders	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2	0	3	0	3	0	10	0	10	0	0
N97	Female infertility	0	0	1	0	0	0	0	0	1	0	5	0	9	0	2	0	0	0	0	0	18	0	18	0	0
N98	Complications associated with artificial fertilization	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
N99	Postprocedural disorders of genitourinary system, not elsewhere classified	0	0	0	0	0	1	0	1	2	1	2	1	1	0	0	0	0	0	0	0	5	4	9	0	0
O00	Ectopic pregnancy	0	0	0	0	0	0	0	0	17	0	97	0	48	0	8	0	0	0	0	0	170	0	170	0	0
O00.9	Ectopic pregnancy, unspecified	0	0	0	0	0	0	0	0	0	0	8	0	3	0	0	0	0	0	0	0	11	0	11	0	0
O01	Hydatidiform mole	0	0	0	0	0	0	0	0	23	0	97	0	17	0	5	0	5	0	0	0	147	0	147	0	0
O01.9	Hydatidiform mole, unspecified	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	2	0	2	0	0
O02	Other abnormal products of	0	0	0	0	0	0	0	0	18	0	126	0	40	0	11	0	0	0	0	0	195	0	195	0	0
O02.0	Blighted ovum and nonhydatidiform mole	0	0	0	0	0	0	0	0	3	0	12	0	4	0	0	0	0	0	0	0	19	0	19	0	0
O02.1	Missed abortion	0	0	0	0	0	0	0	0	2	0	17	0	4	0	0	0	0	0	0	0	23	0	23	0	0
O02.8	Other specified abnormal products of conception	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
O03	Spontaneous abortion	0	0	0	0	0	0	0	0	52	0	188	0	81	0	18	0	0	0	0	0	339	0	339	0	0
O03.9	Spontaneous abortion - Complete or unspecified, without complication	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
O04	Medical abortion	0	0	0	0	0	0	1	0	29	0	144	0	77	0	8	0	2	0	0	0	261	0	261	0	0
O05	Other abortion	0	0	0	0	0	0	0	0	7	0	33	0	12	0	2	0	1	0	0	0	55	0	55	0	0
O06	Unspecified abortion	0	0	0	0	0	0	7	0	1502	0	2692	0	931	0	218	0	10	0	3	0	5363	0	5363	1	0
O06.3	Unspecified abortion - Incomplete, with other and unspecified	0	0	0	0	0	0	0	0	25	0	67	0	24	0	3	0	0	0	0	0	119	0	119	0	0
O06.4	Unspecified abortion - Incomplete, without complication	0	0	0	0	0	0	0	0	7	0	54	0	14	0	6	0	0	0	0	0	81	0	81	0	0

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Inpatient Morbidity

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
O06.7	Unspecified abortion - Complete or unspecified, complicated by	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
O06.8	Unspecified abortion - Complete or unspecified, with other and unspecified complications	0	0	0	0	0	0	0	0	0	0	3	0	3	0	1	0	0	0	0	0	7	0	7	0	0
O06.9	Unspecified abortion - Complete or unspecified, without complication	0	0	0	0	0	0	0	0	0	0	1	0	5	0	0	0	0	0	0	0	6	0	6	0	0
O07	Failed attempted abortion	0	0	0	0	0	0	0	0	11	0	51	0	19	0	8	0	0	0	0	0	89	0	89	0	0
O08	Complications following abortion and ectopic and molar pregnancy	0	0	0	0	0	0	0	0	26	0	52	0	23	0	9	0	0	0	0	0	110	0	110	0	0
O08.8	Other complications following abortion and ectopic and molar	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
O08.9	Complication following abortion and ectopic and molar pregnancy, unspecified	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
O10	Pre-existing hypertension complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	1	0	3	0	3	0	0
O11	Pre-existing hypertensive disorder with superimposed proteinuria	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
O12	Gestational [pregnancy-induced] oedema and proteinuria without hypertension	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
O13	Gestational [pregnancy-induced] hypertension without significant proteinuria	0	0	0	0	0	0	0	0	4	0	25	0	7	0	2	0	0	0	0	0	38	0	38	0	0
O14	Gestational [pregnancy-induced] hypertension with significant proteinuria	0	0	0	0	0	0	0	0	10	0	33	0	12	0	0	0	0	0	0	0	55	0	55	0	0
O14.0	Moderate pre-eclampsia	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
O15	Eclampsia	0	0	0	0	0	0	0	0	5	0	23	0	3	0	1	0	0	0	0	0	32	0	32	0	0
O15.2	Eclampsia in the puerperium	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
O15.9	Eclampsia, unspecified as to time period	0	0	0	0	0	0	0	0	2	0	6	0	1	0	0	0	0	0	0	0	9	0	9	0	0
O16	Unspecified maternal hypertension	0	0	0	0	0	0	0	0	3	0	10	0	7	0	0	0	0	0	0	0	20	0	20	0	0
O20	Haemorrhage in early pregnancy	0	0	0	0	0	0	0	0	28	0	90	0	27	0	4	0	0	0	0	0	149	0	149	0	0
O20.0	Threatened abortion	0	0	0	0	0	0	0	0	13	0	83	0	6	0	2	0	0	0	0	0	104	0	104	0	0
O21	Excessive vomiting in pregnancy	0	0	0	0	0	0	0	0	60	0	323	0	46	0	1	0	0	0	1	0	431	0	431	0	0
O21.0	Mild hyperemesis gravidarum	0	0	0	0	0	0	0	0	5	0	13	0	1	0	0	0	0	0	0	0	19	0	19	0	0
O21.1	Hyperemesis gravidarum with metabolic disturbance	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
O23	Infections of genitourinary tract in pregnancy	0	0	0	0	0	0	1	0	44	0	137	0	17	0	1	0	0	0	1	0	201	0	201	0	0
O23.9	Other and unspecified genitourinary tract infection in pregnancy	0	0	0	0	0	0	0	0	2	0	5	0	0	0	0	0	0	0	0	0	7	0	7	0	0
O24	Diabetes mellitus in pregnancy	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
O25	Malnutrition in pregnancy	0	0	0	0	0	0	0	0	0	0	0	0	3	0	6	0	5	0	0	0	14	0	14	0	0
O28	Abnormal findings on antenatal screening of mother	0	0	0	0	0	0	0	0	0	0	3	0	2	0	0	0	0	0	0	0	5	0	5	0	0
O30	Multiple gestation	0	0	0	0	0	0	0	0	9	0	23	0	11	0	2	0	0	0	0	0	45	0	45	0	0
O30.1	Triplet pregnancy	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
O32	Maternal care for known or suspected malpresentation of fetus	0	0	0	0	0	0	0	0	12	0	54	0	9	0	0	0	0	0	0	0	75	0	75	0	0
O33	Maternal care for known or suspected disproportion	0	0	0	0	0	0	0	0	1	0	3	0	0	0	0	0	0	0	0	0	4	0	4	0	0
O34	Maternal care for known or suspected abnormality of pelvic	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	3	0	3	0	0
O34.8	Maternal care for other abnormalities of pelvic 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
O35	Maternal care for known or suspected fetal abnormality and	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
O36	Maternal care for other known or suspected fetal problems	0	0	0	0	0	0	0	0	15	0	63	0	19	0	3	0	1	0	0	0	101	0	101	1	0
O36.4	Maternal care for intrauterine death	0	0	0	0	0	0	0	0	2	0	6	0	3	0	0	0	0	0	0	0	11	0	11	0	0
O36.9	Maternal care for fetal problem, unspecified	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
O41	Other disorders of amniotic fluid and membranes	0	0	0	0	0	0	0	0	24	0	78	0	29	0	0	0	0	0	0	0	131	0	131	0	0
O41.0	Oligohydramnios	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	2	0	15	0	0	0	0	0	0	0	0	0	17	0	17	0	0
O42.9	Premature rupture of 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

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Inpatient Morbidity

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	
O43	Placental disorders	0	0	0	0	0	0	0	0	35	0	95	0	21	0	15	0	0	0	0	0	166	0	166	0	0
O44	Placenta praevia	0	0	0	0	0	0	0	0	2	0	6	0	3	0	0	0	0	0	0	0	11	0	11	0	0
O44.1	Placenta praevia with haemorrhage	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
O45	Premature separation of placenta [abruptio placentae]	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
O46	Antepartum haemorrhage, not elsewhere classified	0	0	0	0	0	0	0	0	8	0	67	0	14	0	2	0	0	0	1	0	92	0	92	0	0
O46.9	Antepartum haemorrhage,	0	0	0	0	0	0	0	0	1	0	5	0	1	0	0	0	0	0	0	0	7	0	7	0	0
O47	False labour	0	0	0	0	0	0	5	0	447	0	1731	0	238	0	11	0	2	0	1	0	2435	0	2435	0	0
O47.9	False labour, unspecified	0	0	0	0	0	0	0	0	0	0	5	0	0	0	0	0	0	0	0	0	5	0	5	0	0
O48	Prolonged pregnancy	0	0	0	0	0	0	0	0	16	0	37	0	3	0	0	0	0	0	0	0	56	0	56	0	0
O60	Preterm labour	0	0	0	0	0	0	1	0	55	0	253	0	38	0	3	0	0	0	0	0	350	0	350	0	0
O61	Failed induction of labour	0	0	0	0	0	0	0	0	1	0	5	0	3	0	0	0	0	0	0	0	9	0	9	0	0
O62	Abnormalities of forces of labour	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
O62.0	Primary inadequate contractions	0	0	0	0	0	0	0	0	0	0	4	0	1	0	0	0	0	0	0	0	5	0	5	0	0
O63	Long labour	0	0	0	0	0	0	0	0	30	0	96	0	17	0	2	0	2	0	0	0	147	0	147	0	0
O63.9	Long labour, unspecified	0	0	0	0	0	0	0	0	11	0	36	0	1	0	1	0	0	0	0	0	49	0	49	0	0
O64	Obstructed labour due to malposition and malpresentation of	0	0	0	0	0	0	0	0	13	0	44	0	7	0	0	0	0	0	0	0	64	0	64	0	0
O65	Obstructed labour due to maternal pelvic abnormality	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
O65.1	Obstructed labour due to generally contracted pelvis	0	0	0	0	0	0	0	0	3	0	18	0	3	0	0	0	0	0	0	0	24	0	24	0	0
O66	Other obstructed labour	0	0	0	0	0	0	0	0	65	0	258	0	31	0	2	0	1	0	0	0	357	0	357	0	0
O66.9	Obstructed labour, unspecified	0	0	0	0	0	0	0	0	1	0	2	0	0	0	1	0	0	0	0	0	4	0	4	0	0
O67	Labour and delivery complicated by intrapartum haemorrhage, not elsewhere classified	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
O68	Labour and delivery complicated by fetal stress [distress]	0	0	0	0	0	0	0	0	27	0	52	0	27	0	2	0	1	0	0	0	109	0	109	0	0
O69	Labour and delivery complicated by umbilical cord complications	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
O70	Perineal laceration during 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
O70.0	First degree perineal laceration during delivery	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	0	0	0	0	3	0	3	0	0
O70.1	Second degree perineal laceration during delivery	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
O71	Other obstetric trauma	0	0	0	0	0	0	0	0	0	0	5	0	1	0	0	0	0	0	0	0	6	0	6	0	0
O71.5	Other obstetric injury to pelvic	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
O71.7	Obstetric haematoma of pelvis	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
O72	Postpartum haemorrhage	0	0	0	0	0	0	0	0	100	0	367	0	112	0	13	0	6	0	0	0	598	0	598	0	0
O72.0	Third-stage haemorrhage	0	0	0	0	0	0	0	0	3	0	34	0	5	0	0	0	0	0	0	0	42	0	42	0	0
O72.1	Other immediate postpartum haemorrhage	0	0	0	0	0	0	0	0	0	0	13	0	1	0	0	0	0	0	0	0	14	0	14	0	0
O72.2	Delayed and secondary postpartum haemorrhage	0	0	0	0	0	0	0	0	7	0	9	0	3	0	0	0	0	0	0	0	19	0	19	0	0
O73	Retained placenta and membranes, without haemorrhage	1	0	0	0	0	0	1	0	117	0	464	0	136	0	13	0	0	0	1	0	733	0	733	0	0
O73.0	Retained placenta without haemorrhage	0	0	0	0	0	0	1	0	8	0	22	0	6	0	2	0	0	0	0	0	39	0	39	0	0
O74	Complications of anaesthesia during labour and delivery	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
O75	Other complications of labour and delivery, not elsewhere classified	0	0	0	0	0	0	0	0	57	0	288	0	61	0	7	0	3	0	0	0	416	0	416	0	0
O75.9	Complication of labour and delivery, unspecified	0	0	0	0	0	0	0	0	0	0	6	0	1	0	0	0	0	0	0	0	7	0	7	0	0
O80	Single spontaneous delivery	0	0	0	0	1	0	20	0	14756	0	57690	0	7850	0	396	0	9	0	1	0	80723	0	80723	17	0
O80.9	Single spontaneous delivery, unspecified	0	0	0	0	0	0	1	0	288	0	1084	0	154	0	11	0	0	0	0	0	1538	0	1538	0	0
O81	Single delivery by forceps and vacuum extractor	0	0	0	0	0	0	2	0	379	0	1188	0	271	0	8	0	0	0	1	0	1849	0	1849	1	0
O81.1	Mid-cavity forceps delivery	0	0	0	0	0	0	0	0	1	0	11	0	0	0	0	0	0	0	0	0	12	0	12	0	0
O81.3	Other and unspecified forceps	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
O81.4	Vacuum extractor delivery	0	0	0	0	0	0	0	0	41	0	156	0	7	0	3	0	0	0	0	0	207	0	207	1	0
O82	Single delivery by caesarean	1	0	0	0	0	0	28	0	1546	0	6633	0	1474	0	101	0	1	0	1	0	9785	0	9785	5	0
O82.0	Delivery by elective caesarean	0	0	0	0	0	0	0	0	1	0	10	0	0	0	0	0	0	0	0	0	11	0	11	0	0
O82.1	Delivery by emergency caesarean section	0	0	0	0	0	0	0	0	7	0	29	0	2	0	1	0	0	0	0	0	39	0	39	0	0
O82.9	Delivery by caesarean section, unspecified	0	0	0	0	0	0	0	0	100	0	596	0	89	0	1	0	0	0	0	0	786	0	786	1	0
O83	Other assisted single delivery	0	0	0	0	0	0	0	0	102	0	305	0	58	0	1	0	0	0	0	0	466	0	466	1	0
O83.1	Other assisted breech delivery	0	0	0	0	0	0	0	0	13	0	71	0	5	0	0	0	0	0	0	0	89	0	89	0	0

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male		
O84	Multiple delivery	0	0	0	0	0	0	0	0	161	0	486	0	284	0	51	0	0	0	0	0	982	0	982	0	0
O84.0	Multiple delivery, all spontaneous	0	0	0	0	0	0	0	0	1	0	16	0	3	0	0	0	0	0	0	0	20	0	20	0	0
O84.9	Multiple delivery, unspecified	0	0	0	0	0	0	0	0	1	0	7	0	1	0	0	0	0	0	0	0	9	0	9	0	0
O85	Puerperal sepsis	0	0	0	0	0	0	0	0	31	0	62	0	11	0	2	0	1	0	0	0	107	0	107	1	0
O86	Other puerperal infections	0	0	0	0	0	0	0	0	3	0	10	0	6	0	2	0	2	0	1	0	24	0	24	0	0
O86.0	Infection of obstetric surgical wound	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
O86.4	Pyrexia of unknown origin following delivery	0	0	0	0	0	0	0	0	0	0	5	0	0	0	0	0	0	0	0	0	5	0	5	0	0
O89	Complications of anaesthesia during the puerperium	0	0	0	0	0	0	0	0	2	0	5	0	0	0	0	0	0	0	0	0	7	0	7	0	0
O90	Complications of the puerperium, not elsewhere classified	0	0	0	0	0	0	0	0	2	0	3	0	1	0	0	0	0	0	0	0	6	0	6	0	0
O95	Obstetric death of unspecified cause	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3	3	0
O98	Maternal infectious and parasitic diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium	0	0	0	0	0	0	0	0	1	0	2	0	3	0	0	0	0	0	0	0	6	0	6	0	0
O99	Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the	0	0	0	0	0	0	0	0	143	0	597	0	86	0	30	0	5	0	3	0	864	0	864	2	0
P00	Fetus and newborn affected by maternal conditions that may be unrelated to present pregnancy	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
P01	Fetus and newborn affected by maternal complications of	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0
P05	Slow fetal growth and fetal	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
P07	Disorders related to short gestation and low birth weight, not elsewhere classified	166	168	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	166	168	334	20	20
P07.1	Other low birth weight	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
P11.1	Other specified brain damage due to birth injury	2	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	8	10	0	0
P15	Other birth injuries	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	20	25	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	20	25	45	1	5
P21	Birth asphyxia	288	454	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	288	454	742	28	24
P21.9	Birth asphyxia, unspecified	11	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	11	10	21	2	0
P22	Respiratory distress of newborn	13	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	13	11	24	0	1
P24	Neonatal aspiration syndromes	9	13	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	9	13	22	2	0
P26	Pulmonary haemorrhage 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	0	1	1	0	0
P36	Bacterial sepsis of newborn	1199	1548	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1199	1548	2747	30	27
P36.0	Sepsis of newborn due to streptococcus, group B	81	113	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	81	113	194	2	2
P36.9	Bacterial sepsis of newborn, unspecified	37	66	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	37	66	103	1	0
P37	Other congenital infectious and parasitic diseases	19	18	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	19	18	37	2	2
P38	Omphalitis of newborn with or without mild haemorrhage	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0
P39	Other infections specific to the perinatal period	144	222	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	144	222	366	4	4
P51	Umbilical haemorrhage of newborn	3	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1	4	0	0
P55	Haemolytic disease of fetus and newborn	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	0
P58	Neonatal jaundice due to other excessive haemolysis	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
P59	Neonatal jaundice from other and unspecified causes	189	246	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	189	246	435	1	3
P59.9	Neonatal jaundice, unspecified	2	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	5	7	0	0
P61	Other perinatal haematological disorders	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
P71	Transitory neonatal disorders of calcium and magnesium metabolism	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
P74	Other transitory neonatal electrolyte and metabolic disturbances	4	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	3	7	0	0
P74.1	Dehydration of newborn	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3	0	0
P80	Hypothermia of newborn	2	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	3	5	1	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	0	1	1	0	0
P92	Feeding problems of newborn	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0
P95	Fetal death of unspecified cause	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	4	2	2
P96	Other conditions originating in the perinatal period	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	3	1	1
Q01	Encephalocele	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

Raw Data

Inpatient Morbidity

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		<28 days		29days-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						
Q03	Congenital hydrocephalus	1	0	0	0	0	0	0	0	1	0	4	0	0	0	0	0	0	0	0	0	0	6	0	6	1	0
Q05	Spina bifida	1	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
Q07	Other congenital malformations of nervous system	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0
Q13	Congenital malformations of anterior segment of eye	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
Q21	Congenital malformations of cardiac septa	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
Q24	Other congenital malformations of heart	0	1	1	5	1	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	9	14	0	0
Q27	Other congenital malformations of peripheral vascular system	1	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
Q28	Other congenital malformations of circulatory system	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	2	1	0	0
Q33.0	Congenital cystic lung	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
Q35	Cleft palate	0	0	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	3	0	0
Q37	Cleft palate with cleft lip	1	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
Q37.3	Cleft soft palate with unilateral cleft	0	0	0	0	0	2	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3	0	0
Q37.9	Unspecified cleft palate with unilateral cleft lip	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
Q38.1	Ankyloglossia	0	0	0	0	0	2	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	4	4	0	0
Q40	Other congenital malformations of upper alimentary tract	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
Q42	Congenital absence, atresia and stenosis of large intestine	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	0	0
Q43	Other congenital malformations of intestine	4	12	6	23	1	6	3	7	0	0	0	0	0	0	0	0	0	0	0	0	0	14	48	62	0	3
Q44	Congenital malformations of gallbladder, bile ducts and liver	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
Q50	Congenital malformations of ovaries, fallopian tubes and broad	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
Q52	Other congenital malformations of female genitalia	0	0	0	0	0	0	2	0	3	0	5	0	6	0	9	0	1	0	7	0	33	0	33	0	0	0
Q52.3	Imperforate hymen	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
Q52.7	Other congenital malformations of	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
Q52.8	Other specified congenital malformations of female genitalia	0	0	0	0	0	0	0	0	2	0	1	0	2	0	0	0	3	0	0	0	8	0	8	0	0	0
Q53	Undescended testicle	0	0	0	3	0	2	0	13	0	0	0	0	0	0	0	3	0	0	0	0	0	21	21	0	0	0
Q53.9	Undescended testicle, unspecified	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
Q54	Hypospadias	0	1	0	7	0	5	0	13	0	0	0	1	0	0	0	8	0	0	0	0	0	35	35	0	0	0
Q55	Other congenital malformations of male genital organs	0	0	0	1	0	0	0	2	0	6	0	10	0	6	0	11	0	5	0	0	0	41	41	0	0	0
Q55.8	Other specified congenital malformations of male genital	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	2	2	0	0	0
Q60	Renal agenesis and other reduction defects of kidney	0	3	0	1	1	7	10	9	4	11	13	13	20	15	20	28	116	27	109	124	293	238	531	0	0	0
Q63	Other congenital malformations of kidney	0	0	0	0	0	0	1	0	18	0	86	0	17	0	0	0	0	0	2	1	124	1	125	0	0	0
Q64	Other congenital malformations of urinary system	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	0
Q67	Congenital musculoskeletal deformities of head, face, spine and chest	0	0	0	0	0	0	1	2	0	3	1	4	0	2	1	2	1	0	0	0	4	13	17	0	0	0
Q69	Polydactyly	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
Q70.9	Syndactyly, unspecified	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
Q76	Congenital malformations of spine and bony thorax	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	1	1	2	0	0	0
Q79	Congenital malformations of the musculoskeletal system, not elsewhere classified	3	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	4	7	0	2	0
Q87	Other specified congenital malformation syndromes affecting multiple systems	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0
Q89	Other congenital malformations, not elsewhere classified	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	0	0	0	2	0	2	3	5	0	0	0
Q89.2	Congenital malformations of other endocrine glands	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
Q90	Down's syndrome	0	0	2	4	0	3	0	1	0	0	0	0	0	0	0	0	0	0	0	0	2	8	10	0	0	0
R00	Abnormalities of heart beat	0	0	1	1	0	1	0	0	1	0	1	0	0	1	0	1	2	0	3	0	8	4	12	0	0	0
R02	Gangrene, not elsewhere classified	0	0	0	0	1	1	2	2	1	1	0	3	2	5	6	5	4	6	3	5	19	28	47	0	1	0
R04	Haemorrhage from respiratory passages	0	0	1	0	0	4	4	4	7	5	11	23	15	18	17	25	11	33	23	47	89	159	248	1	3	0
R04.0	Epistaxis	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	2	0	3	2	5	4	9	0	0	0
R04.2	Haemoptysis	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	1	2	1	4	2	6	1	0	0
R05	Cough	0	0	3	6	1	11	8	28	0	2	9	1	6	0	12	14	18	22	65	58	122	142	264	0	0	0

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
R06	Abnormalities of breathing	1	1	1	1	0	0	0	1	14	0	3	0	3	0	0	16	24	0	3	2	49	21	70	2	1
R07	Pain in throat and chest	0	0	4	0	2	0	5	0	1	3	6	8	9	1	8	2	4	1	4	6	43	21	64	0	0
R07.2	Precordial pain	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	
R07.4	Chest pain, unspecified	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	1	2	3	0	0
R09	Other symptoms and signs involving the circulatory and respiratory	0	1	0	0	0	0	0	2	1	0	2	1	1	0	1	0	0	0	0	0	5	4	9	1	0
R10	Abdominal and pelvic pain	13	15	18	14	50	41	184	208	199	129	412	151	215	96	156	84	91	65	110	110	1448	913	2361	2	0
R10.0	Acute abdomen	0	0	0	0	1	0	6	4	7	2	11	1	7	4	6	1	6	3	5	3	49	18	67	0	0
R10.4	Other and unspecified abdominal	0	0	0	0	2	3	3	1	5	0	9	2	12	6	5	3	5	4	8	45	28	73	0	0	
R11	Nausea and vomiting	7	9	20	48	27	57	34	46	30	18	34	22	33	23	24	18	17	15	24	15	250	271	521	0	0
R13	Dysphagia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2	2	0	1
R14	Flatulence and related conditions	0	7	3	4	16	2	4	5	1	3	3	4	6	1	0	0	0	0	1	33	27	60	0	0	
R16	Hepatomegaly and splenomegaly, not elsewhere classified	0	1	1	3	2	4	0	4	0	1	0	4	4	2	3	1	3	7	4	10	17	37	54	0	0
R16.1	Splenomegaly, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	
R17	Unspecified jaundice	56	98	5	16	10	15	7	46	19	12	20	11	21	13	23	19	23	10	20	18	204	258	462	0	1
R18	Ascites	0	0	0	0	1	3	3	5	3	3	3	1	3	13	11	17	20	19	29	21	73	82	155	1	0
R19	Other symptoms and signs involving the digestive system and abdomen	0	0	0	0	0	0	7	2	6	7	6	4	5	3	6	1	3	3	4	1	37	21	58	0	0
R19.0	Intra-abdominal and pelvic swelling, mass and lump	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
R20	Disturbances of skin sensation	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	2	0	3	3	0	0
R21	Rash and other nonspecific skin eruption	0	1	1	0	1	3	1	2	0	0	1	0	0	0	0	0	0	0	0	0	4	6	10	0	0
R22	Localized swelling, mass and lump of skin and subcutaneous tissue	21	33	0	0	0	1	3	3	1	1	2	1	2	1	3	5	4	2	9	9	45	56	101	4	1
R22.2	Localized swelling, mass and lump, trunk	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
R22.3	Localized swelling, mass and lump, upper limb	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	1	0	0	0	4	0	4	0	0
R22.4	Localized swelling, mass and lump, lower limb	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
R23	Other skin changes	3	7	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	4	7	11	0	0	
R25.2	Cramp and spasm	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
R29	Other symptoms and signs involving the nervous and musculoskeletal systems	0	0	0	0	1	0	1	0	0	0	2	2	3	1	2	2	0	2	0	1	9	8	17	0	0
R31	Unspecified haematuria	0	0	0	1	2	2	2	2	1	0	1	0	0	4	1	3	2	1	1	4	10	17	27	0	0
R32	Unspecified urinary incontinence	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	2	0	3	3	0	0	
R33	Retention of urine	0	0	0	1	5	3	4	12	4	0	22	24	22	8	9	16	11	6	40	44	117	114	231	0	2
R34	Anuria and oliguria	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
R35	Polyuria	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
R39	Other symptoms and signs involving the urinary system	0	0	1	1	2	3	1	2	3	0	0	0	3	1	0	0	0	0	0	0	10	7	17	0	0
R40	Somnolence, stupor and coma	0	0	0	0	0	0	1	0	4	0	3	5	1	0	2	1	1	0	0	0	12	6	18	0	0
R41	Other symptoms and signs involving cognitive functions and awareness	0	0	0	0	0	0	2	0	0	1	1	1	0	2	0	1	0	1	1	3	4	9	13	0	1
R42	Dizziness and giddiness	0	0	0	0	0	3	0	0	4	6	22	2	13	2	17	7	8	5	8	3	72	28	100	0	0
R44	Other symptoms and signs involving general sensations and perceptions	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
R47	Speech disturbances, not elsewhere classified	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
R50	Fever of other and unknown origin	43	43	124	200	228	286	239	384	186	202	385	231	191	162	155	136	167	127	226	192	1944	1963	3907	1	1
R50.9	Fever, unspecified	21	39	15	24	29	27	23	36	14	13	40	22	23	14	21	12	17	6	24	16	227	209	436	0	1
R51	Headache	0	0	0	0	0	3	8	21	27	14	63	28	35	25	34	19	26	13	15	15	208	138	346	0	0
R52	Pain, not elsewhere classified	0	0	0	0	1	1	4	1	3	2	4	0	0	2	3	3	1	1	1	1	17	11	28	0	0
R53	Malaise and fatigue	5	6	4	0	5	0	2	0	5	14	35	6	52	9	23	3	17	2	14	36	162	76	238	0	0
R55	Syncope and collapse	1	0	5	0	2	0	0	9	4	0	1	1	2	2	0	1	0	14	2	13	17	40	57	1	0
R56	Convulsions, not elsewhere	47	50	71	154	109	197	46	91	32	46	36	34	18	26	15	28	13	32	37	35	424	693	1117	1	4
R56.0	Febrile convulsions	0	0	2	1	3	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	6	2	8	0	0
R56.8	Other and unspecified convulsions	0	0	2	2	1	6	2	3	1	0	1	0	1	1	2	1	1	0	0	0	11	13	24	0	0
R57	Shock, not elsewhere classified	1	0	0	0	0	0	0	0	2	0	3	2	5	1	5	0	6	5	3	9	25	17	42	4	5
R58	Haemorrhage, not elsewhere classified	0	0	0	0	1	2	0	1	0	0	4	0	2	1	0	0	0	1	2	6	9	11	20	0	2
R59	Enlarged lymph nodes	109	138	16	58	4	40	11	39	24	41	74	40	32	0	34	24	23	0	24	13	351	393	744	2	2
R59.1	Generalized enlarged lymph nodes	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
R60	Oedema, not elsewhere classified	0	0	0	0	0	0	0	3	1	0	0	0	0	2	0	0	1	0	0	0	2	5	7	0	0
R61	Hyperhidrosis	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	2	2	0	0
R62	Lack of expected normal physiological development	0	0	1	0	0	2	1	1	0	1	2	1	2	2	0	0	0	0	0	0	6	7	13	0	0
R63	Symptoms and signs concerning food and fluid intake	0	0	0	0	0	0	1	0	0	0	1	0	0	1	0	1	0	1	0	1	2	4	6	0	0
R63.3	Feeding difficulties and mismanagement	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

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																				Grand Total	Total Deaths				
		<28 days		29days-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				
R64	Cachexia	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
R68	Other general symptoms and signs	26	18	0	3	0	2	1	17	0	0	0	0	0	3	0	0	0	0	0	0	0	27	43	70	0	0
R69	Unknown and unspecified causes of morbidity	921	1127	486	683	375	534	489	926	1321	518	3358	1016	1243	841	788	825	739	841	1802	2245	11522	9556	21078	158	419	
R71	Abnormality of red blood cells	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	
R72	Abnormality of white blood cells, 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	
R73	Elevated blood glucose level	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	1	2	1	3	0	0	
R73.9	Hyperglycaemia, unspecified	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	
R75	Laboratory evidence of human immunodeficiency virus [HIV]	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	
R80	Isolated proteinuria	0	0	0	1	0	2	4	0	0	0	0	0	0	0	2	0	0	0	0	0	6	3	9	0	0	
R82	Other abnormal findings in urine	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	
R99	Other ill-defined and unspecified causes of mortality	17	24	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	17	24	41	0	0	
S00	Superficial injury of head	0	0	0	0	0	1	0	2	0	1	0	2	0	1	0	0	0	0	0	1	0	8	8	0	0	
S01	Open wound of head	0	0	0	3	0	2	1	3	2	0	4	11	1	0	0	8	2	0	0	0	10	27	37	0	0	
S02	Fracture of skull and facial bones	0	0	0	0	0	1	0	0	1	0	0	2	1	0	0	0	0	0	1	0	3	3	6	0	0	
S02.2	Fracture of nasal bones	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2	2	0	0	
S05	Injury of eye and orbit	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	
S05.8	Other injuries of eye and orbit	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	1	3	1	1	3	5	8	0	0	
S06	Intracranial injury	0	0	0	0	0	1	1	9	1	1	1	4	1	7	1	7	1	7	5	20	11	56	67	1	4	
S06.5	Traumatic subdural haemorrhage	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	
S06.6	Traumatic subarachnoid	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	
S09	Other and unspecified injuries of	0	0	0	0	6	5	12	13	2	18	5	31	9	17	7	15	12	8	12	5	65	112	177	3	2	
S09.9	Unspecified injury of head	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	2	0	2	0	0	
S12	Fracture of neck	0	0	0	0	0	0	0	1	0	1	2	0	1	0	2	0	4	3	2	2	11	7	18	0	0	
S13	Dislocation, sprain and strain of joints and ligaments at neck level	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	
S14	Injury of nerves and spinal cord at neck level	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	
S15	Injury of blood vessels at neck level	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	
S19	Other and unspecified injuries of	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	
S20	Superficial injury of thorax	0	0	0	0	1	1	0	3	0	1	2	1	4	4	2	8	2	8	2	9	13	35	48	0	0	
S21.0	Open wound 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	
S22	Fracture of rib(s), sternum and thoracic spine	0	0	0	0	1	1	0	6	1	3	1	4	2	4	5	1	2	2	4	11	16	32	48	1	0	
S22.3	Fracture of rib	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1	0	0	0	1	1	3	2	5	0	0	
S22.4	Multiple fractures of ribs	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	
S25	Injury of blood vessels of thorax	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	
S27.2	Traumatic haemopneumothorax	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	
S30	Superficial injury of abdomen, lower back and pelvis	0	0	0	0	0	0	1	9	1	0	2	1	0	2	0	2	1	1	1	0	6	15	21	0	2	
S30.2	Contusion of external genital organs	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	
S31.1	Open wound of abdominal wall	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	
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	
S31.5	Open wound of other and unspecified external genital organs	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	
S32	Fracture of lumbar spine and pelvis	0	0	0	0	0	0	0	0	1	2	1	2	36	2	1	2	3	0	0	0	42	8	50	0	0	
S32.0	Fracture of lumbar vertebra	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	
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	0	0	0	0	0	0	1	1	0	0	
S33.2	Dislocation of sacroiliac and sacrococcygeal joint	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	
S34	Injury of nerves and lumbar spinal cord at abdomen, lower back and pelvis level	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	
S34.8	Injury of other and unspecified nerves at abdomen, lower back and pelvis level	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	
S36	Injury of intra-abdominal organs	0	0	0	0	0	0	0	0	0	0	0	0	2	1	0	0	0	0	0	0	2	1	3	0	0	
S37	Injury of urinary and pelvic organs	0	0	0	0	0	0	0	1	1	2	1	0	3	1	0	0	0	0	2	2	7	6	13	0	0	
S39	Other and unspecified injuries of abdomen, lower back and pelvis	0	0	0	0	0	0	3	1	0	0	2	2	0	0	0	1	0	0	0	0	5	4	9	0	0	
S39.9	Unspecified injury of abdomen, lower back and pelvis	0	0	0	0	0	0	2	3	1	2	6	0	0	0	0	1	0	0	0	3	9	9	18	0	0	
S40	Superficial injury of shoulder and upper arm	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	
S41	Open wound of shoulder and upper arm	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	
S42	Fracture of shoulder and upper arm	0	0	0	1	11	24	68	104	6	16	9	12	6	13	6	8	9	11	11	9	126	198	324	0	0	
S42.0	Fracture of clavicle	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	
S42.1	Fracture of scapula	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	
S42.3	Fracture of shaft of humerus	0	0	0	0	0	2	2	7	2	0	2	2	1	0	0	0	1	0	1	0	9	11	20	0	0	
S42.4	Fracture of lower end of humerus	0	0	0	0	0	0	0	2	0	0	1	0	0	0	0	0	0	0	0	0	1	2	3	0	0	

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male				
S43	Dislocation, sprain and strain of joints and ligaments of shoulder	0	0	0	0	0	0	2	1	0	1	0	0	1	1	2	1	2	0	1	2	8	6	14	0	0	
S44	Injury of nerves at shoulder and upper arm level	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	
S49	Other and unspecified injuries of shoulder and upper arm	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	
S51	Open wound of forearm	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	
S52	Fracture of forearm	0	0	0	0	11	18	36	118	21	26	24	48	37	40	27	44	22	22	20	34	198	350	548	0	0	
S52.0	Fracture of upper end of ulna	0	0	0	0	0	0	2	2	0	0	0	0	0	0	0	0	1	0	0	0	3	2	5	0	0	
S52.1	Fracture of upper end of radius	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	2	1	3	0	0	
S52.2	Fracture of shaft of ulna	0	0	0	0	0	0	0	0	1	0	0	0	1	0	3	0	0	0	0	0	0	5	5	0	0	
S52.3	Fracture of shaft of radius	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	
S52.5	Fracture of lower end of radius	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	
S52.6	Fracture of lower end of both ulna and radius	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	
S52.7	Multiple fractures of forearm	0	0	0	0	0	0	0	1	0	3	0	1	1	0	0	2	0	0	0	0	1	7	8	0	0	
S52.8	Fracture of other parts of forearm	0	0	0	0	0	0	0	0	1	1	0	0	0	1	2	0	0	0	0	0	3	2	5	0	0	
S52.9	Fracture of forearm, part unspecified	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2	2	0	0	
S53	Dislocation, sprain and strain of joints and ligaments of elbow	0	0	0	0	0	0	1	8	0	1	1	0	2	1	1	1	1	0	0	1	6	12	18	0	0	
S53.1	Dislocation of elbow, unspecified	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	
S56	Injury of muscle and tendon at forearm level	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	
S59.9	Unspecified injury of forearm	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	
S61	Open wound of wrist and hand	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	
S62	Fracture at wrist and hand level	0	0	0	0	5	14	57	89	26	43	35	49	27	33	41	24	42	18	22	19	255	289	544	1	0	
S62.6	Fracture of other finger	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	2	0	0	
S62.8	Fracture of other and unspecified parts of wrist and hand	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	
S63	Dislocation, sprain and strain of joints and ligaments at wrist and	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	2	0	0	0	0	1	3	4	0	0	
S64	Injury of nerves at wrist and hand	0	0	0	0	2	2	4	2	3	1	3	0	1	0	0	0	0	0	0	0	13	5	18	0	0	
S68	Traumatic amputation of wrist and	0	0	0	0	1	2	0	1	1	1	1	5	3	1	1	1	0	1	1	2	8	14	22	0	0	
S69	Other and unspecified injuries of wrist and hand	0	0	0	0	0	0	0	2	0	0	0	0	0	1	0	0	0	0	0	1	0	4	4	0	0	
S72	Fracture of femur	0	0	5	2	12	26	26	68	12	9	12	21	9	14	8	15	13	9	38	37	135	201	336	0	1	
S72.4	Fracture of lower end of femur	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	
S72.9	Fracture of femur, part unspecified	0	0	0	0	0	0	5	7	2	1	0	3	0	2	4	5	3	3	9	9	23	30	53	0	0	
S73	Dislocation, sprain and strain of joint and ligaments of hip	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	
S73.0	Dislocation of hip	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	
S74	Injury of nerves at hip and thigh	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
S79	Other and specified injuries of hip and thigh	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	
S80	Superficial injury of lower leg	0	0	0	0	0	0	0	0	0	1	1	0	0	4	0	0	0	0	1	0	2	5	7	0	0	
S81	Open wound of lower leg	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	1	0	0	0	0	2	1	3	0	0	
S81.7	Multiple open wounds of lower leg	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	
S81.9	Open wound of lower leg, part 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	
S82	Fracture of lower leg, including	0	0	0	0	3	13	19	44	46	25	19	39	21	26	22	23	14	30	15	23	159	223	382	0	0	
S82.0	Fracture of patella	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	1	2	1	0	2	2	7	9	0	0	
S82.1	Fracture of upper end of tibia	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	
S82.2	Fracture of shaft of tibia	0	0	0	0	1	0	0	1	0	0	1	0	0	2	1	2	1	1	0	0	4	6	10	0	0	
S82.3	Fracture of lower end of tibia	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	2	0	2	1	3	0	0	
S82.4	Fracture of fibula alone	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	1	0	0	4	4	0	0	
S82.6	Fracture of lateral malleolus	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	
S82.7	Multiple fractures of lower leg	0	0	0	0	0	0	0	0	1	0	0	2	0	1	0	0	1	1	0	0	2	4	6	0	0	
S82.8	Fractures of other parts of lower leg	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	0	0	3	3	0	0	
S82.9	Fracture of lower leg, part	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	0	0	0	3	3	0	0	
S83	Dislocation, sprain and strain of joints and ligaments of knee	0	0	0	0	1	0	1	0	0	0	1	1	1	1	0	3	1	1	2	2	7	8	15	0	0	
S83.1	Dislocation of knee	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	
S84	Injury of nerves at lower leg level	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	
S87	Crushing injury of lower leg	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	
S89	Other and unspecified injuries of lower leg	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	2	2	0	0	
S89.9	Unspecified injury of lower leg	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	
S92	Fracture of foot, except ankle	0	0	0	1	1	4	16	10	7	13	2	12	10	11	9	15	9	4	3	1	57	71	128	0	0	
S92.0	Fracture of calcaneus	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	
S92.1	Fracture of talus	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	
S92.3	Fracture of metatarsal bone	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	
S93	Dislocation, sprain and strain of joints and ligaments at ankle and	0	0	0	0	0	0	1	2	0	0	1	1	0	0	0	1	1	0	0	1	3	5	8	0	0	
S93.1	Dislocation of toe(s)	0	0	0	0	0	0																				

Raw Data

Inpatient Morbidity

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
S99.9	Unspecified injury of ankle and foot	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
T00	Superficial injuries involving multiple body regions	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
T01	Open wounds involving multiple body regions	0	0	0	0	0	0	0	0	0	2	1	1	2	0	0	2	0	0	0	0	3	5	8	0	0
T03	Dislocations, sprains and strains involving multiple body regions	0	0	0	0	0	0	2	3	3	1	1	3	2	0	0	1	1	0	0	2	9	10	19	0	0
T04	Crushing injuries involving multiple body regions	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
T06	Other injuries involving multiple body regions, not elsewhere	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0	0	0	1	0	4	4	0	0
T06.0	Injuries of brain and cranial nerves with injuries of nerves and spinal cord at neck level	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
T08	Fracture of spine, level unspecified	0	0	0	0	0	1	0	1	0	0	0	1	0	1	0	1	2	2	0	0	2	7	9	0	0
T09	Other injuries of spine and trunk, level unspecified	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
T09.3	Injury of spinal cord, level	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	1	1	2	0	0
T10	Fracture of upper limb, level unspecified	0	1	1	1	3	7	0	2	0	0	1	1	0	0	0	0	0	2	1	1	6	15	21	0	0
T11	Other injuries of upper limb, level unspecified	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	1	2	0	0
T12	Fracture of lower limb, level	0	0	0	0	0	0	1	0	0	1	0	0	0	0	4	0	0	0	0	0	1	5	6	0	0
T14	Injury of unspecified body region	6	3	14	23	96	171	286	604	200	342	327	502	307	383	213	302	174	257	245	362	1868	2949	4817	6	9
T14.0	Superficial injury of unspecified body region	0	0	0	0	0	0	2	1	0	0	2	0	0	0	2	0	1	0	0	3	7	4	11	0	0
T14.1	Open wound of unspecified body region	2	0	0	0	0	0	0	2	0	1	1	0	1	1	1	1	1	1	1	1	7	7	14	0	0
T14.2	Fracture of unspecified body region	0	0	0	0	0	0	1	4	2	1	4	0	0	0	2	0	2	3	1	0	12	8	20	0	0
T14.5	Injury of blood vessel(s) of unspecified body region	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	1	1	2	3	0	0
T14.6	Injury of muscles and tendons of unspecified body region	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
T14.9	Injury, unspecified	0	0	0	3	1	0	7	8	7	10	45	13	51	24	20	12	10	14	15	20	156	104	260	0	0
T16	Foreign body in ear	0	0	0	0	0	0	1	1	0	0	1	0	0	0	0	0	0	0	0	0	2	1	3	0	0
T17	Foreign body in respiratory tract	0	0	0	0	4	6	3	3	2	0	2	1	3	0	0	1	3	2	7	7	24	20	44	0	0
T18	Foreign body in alimentary tract	0	0	10	10	12	9	3	2	0	0	2	0	2	0	2	2	0	1	4	1	35	25	60	0	0
T18.8	Foreign body in other and multiple parts of alimentary tract	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
T19	Foreign body in genitourinary tract	0	0	0	1	3	10	6	9	6	3	1	4	4	4	1	2	2	3	2	1	25	37	62	0	0
T19.9	Foreign body in genitourinary tract, part unspecified	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
T20	Burn and corrosion of head and neck	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	0	1	1	0	0	3	2	5	0	0
T20.0	Burn of unspecified degree of head and neck	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	2	2	0	0
T23.0	Burn of unspecified degree of wrist and hand	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
T24	Burn and corrosion of hip and lower limb, except ankle and foot	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
T29.0	Burns of multiple regions, unspecified degree	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
T30	Burn and corrosion, body region unspecified	0	3	46	93	104	153	127	103	55	55	55	28	146	47	41	14	31	26	58	40	663	562	1225	2	10
T30.0	Burn of unspecified body region, unspecified degree	0	0	2	1	2	4	2	0	1	0	2	1	2	0	1	0	1	0	2	0	15	6	21	1	0
T31	Burns classified according to extent of body surface involved	0	0	0	0	2	0	4	3	13	3	17	13	14	6	8	5	7	5	2	2	67	37	104	23	6
T31.0	Burns involving less than 10% of body surface	0	0	0	0	1	0	1	1	0	0	1	0	0	1	0	0	1	0	0	0	4	2	6	0	0
T31.1	Burns involving 10-19% of body	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	1	0	0	0	3	1	4	0	0
T31.2	Burns involving 20-29% of body	0	0	0	0	1	0	1	0	0	0	3	1	1	0	0	1	0	0	1	0	7	2	9	0	0
T31.3	Burns involving 30-39% of body	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	2	0	2	0	0
T31.4	Burns involving 40-49% of body	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
T32	Corrosions classified according to extent of body surface involved	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
T38	Poisoning by hormones and their synthetic substitutes and antagonists, not elsewhere	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
T40	Poisoning by narcotics and psychodysleptics [hallucinogens]	0	0	0	0	1	0	1	0	0	1	1	0	0	1	0	0	1	0	2	0	6	2	8	0	0
T42	Poisoning by antiepileptic, sedative-hypnotic and antiparkinsonism	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
T44	Poisoning by drugs primarily affecting the autonomic nervous	0	0	0	0	1	0	2	1	0	0	3	0	3	1	3	2	6	5	45	38	63	47	110	0	0

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Inpatient Morbidity

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		Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male		Female	Male			
T45	Poisoning by primarily systemic and haematological agents, not elsewhere classified	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	0	0	0	1	2	3	0	0
T49	Poisoning by topical agents primarily affecting skin and mucous membrane and by ophthalmological, otorhinolaryngological and dental drugs	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	1	14	9	17	10	27	0	0	
T50	Poisoning by diuretics and other and unspecified drugs, medicaments and biological substances	0	0	0	0	2	2	2	0	0	1	2	0	2	1	1	0	1	0	0	0	10	4	14	0	0	
T50.9	Other and unspecified drugs, medicaments and biological	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	
T51	Toxic effect of alcohol	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	
T52	Toxic effect of organic solvents	0	0	0	1	13	19	4	4	7	2	4	6	5	5	2	3	0	0	1	1	36	41	77	0	0	
T52.0	Petroleum products	0	0	0	0	3	5	0	0	1	0	0	1	0	0	0	0	0	0	0	0	4	6	10	0	0	
T53.7	Other halogen derivatives of aromatic hydrocarbons	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	
T56	Toxic effect of metals	0	0	0	0	1	0	0	2	1	3	6	4	2	2	3	0	0	2	0	0	13	13	26	1	0	
T57	Toxic effect of other inorganic substances	0	0	0	0	0	0	1	0	0	0	1	1	1	0	0	0	1	1	1	0	5	2	7	1	0	
T60	Toxic effect of pesticides	0	0	1	0	3	5	8	2	38	16	55	39	26	19	15	10	7	5	5	13	158	109	267	1	7	
T60.0	Organophosphate and carbamate insecticides	0	0	0	0	1	0	1	0	2	3	6	2	2	3	3	3	1	0	0	2	16	13	29	0	0	
T60.4	Rodenticides	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	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0		
T62	Toxic effect of other noxious substances eaten as food	0	0	2	9	9	14	25	23	17	21	39	28	16	3	16	14	3	4	1	2	128	118	246	0	0	
T62.9	Noxious substance eaten as food, unspecified	0	0	0	0	0	2	7	1	1	1	1	0	2	0	0	0	0	0	0	11	4	15	0	0		
T63	Toxic effect of contact with venomous animals	0	0	0	0	1	2	7	10	7	2	14	12	12	6	12	6	16	7	10	9	79	54	133	1	0	
T63.0	Snake venom	0	0	1	0	0	0	0	0	0	0	0	0	1	1	3	0	0	1	1	0	6	2	8	0	0	
T64	Toxic effect of aflatoxin and other mycotoxin food contaminants	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	1	0	1	0	3	1	4	0	0	
T65	Toxic effect of other and unspecified substances	0	0	0	2	7	22	41	38	124	80	160	89	82	54	37	25	24	16	17	17	492	343	835	19	14	
T65.9	Toxic effect of unspecified	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	3	3	0	1	
T67	Effects of heat and light	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	
T68	Hypothermia	8	11	2	2	0	1	0	3	0	0	0	0	1	0	0	0	0	0	0	0	10	18	28	0	0	
T70	Effects of air pressure and water pressure	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	
T71	Asphyxiation	0	0	0	0	0	0	0	1	1	2	5	3	1	0	1	0	4	1	0	0	12	7	19	2	0	
T73.3	Exhaustion due to excessive	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	
T74	Maltreatment syndromes	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	
T75	Effects of other external causes	0	0	0	0	1	0	2	5	0	2	4	0	8	3	7	3	3	2	2	0	27	15	42	0	0	
T75.1	Drowning and nonfatal submersion	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	
T75.4	Effects of electric current	0	0	0	0	0	0	1	0	1	0	0	1	0	1	0	0	1	0	0	0	3	2	5	0	0	
T78	Adverse effects, not elsewhere classified	1	0	0	0	14	17	8	8	14	15	17	14	15	11	17	2	12	12	15	11	113	90	203	0	0	
T78.3	Angioneurotic oedema	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	
T79	Certain early complications of trauma, not elsewhere classified	0	0	1	0	14	10	8	21	20	16	41	34	33	10	15	24	9	14	21	30	162	159	321	1	0	
T79.3	Post-traumatic wound infection, not elsewhere classified	0	0	0	0	0	0	0	0	6	0	16	1	2	0	0	0	0	1	0	0	24	2	26	0	0	
T81	Complications of procedures, not elsewhere classified	0	0	0	0	0	2	1	4	12	3	51	5	16	14	7	10	3	3	9	16	99	57	156	3	2	
T81.4	Infection following a procedure, not elsewhere classified	0	0	0	0	0	0	0	0	1	1	7	0	4	2	1	2	2	2	3	3	18	10	28	0	0	
T82	Complications of cardiac and vascular prosthetic devices,	0	0	0	0	0	1	0	5	5	4	4	1	0	0	0	0	0	0	0	0	9	11	20	0	0	
T83	Complications of genitourinary prosthetic devices, implants and	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	
T84	Complications of internal orthopaedic prosthetic devices,	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	1	0	0	1	3	4	0	0	
T84.9	Unspecified complication of internal orthopaedic prosthetic device, implant and graft	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	
T88	Other complications of surgical and medical care, not elsewhere	0	0	0	1	0	2	7	1	7	2	7	3	6	4	2	1	1	0	5	1	35	15	50	0	0	
T90	Sequelae of injuries of head	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	
T91	Sequelae of injuries of neck and	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	

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		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	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	1	0	1	2	3	0	0
T98	Sequelae of other and unspecified effects of external causes	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
U89	Agent resistant to other and unspecified antibiotics	0	0	0	0	0	1	1	0	0	0	0	1	0	0	0	1	0	0	0	1	1	4	5	0	0
V05	Pedestrian injured in collision with railway train or railway vehicle	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
V39	Occupant of three-wheeled motor vehicle injured in other and unspecified transport accidents	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	0	1	0	0	2	2	4	0	0
V52	Occupant of pick-up truck or van injured in collision with two- or three-wheeled motor vehicle	0	0	0	0	0	0	8	7	0	0	0	0	0	0	0	0	0	0	0	0	8	7	15	0	0
V59	Occupant of pick-up truck or van injured in other and unspecified transport accidents	0	0	0	0	0	0	0	1	1	2	0	3	0	3	0	1	0	0	0	0	1	10	11	0	0
V59.9	Occupant [any] of pick-up truck or van injured in unspecified traffic	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	1	0	0	0	3	3	0	0
V89	Motor- or nonmotor-vehicle accident, type of vehicle unspecified	0	0	0	0	15	27	53	80	58	123	121	246	99	163	71	116	40	59	46	63	503	877	1380	2	9
V89.2	Person injured in unspecified motor-vehicle accident, traffic	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
V89.9	Person injured in unspecified vehicle accident	0	0	0	0	2	0	0	0	0	0	2	3	0	1	1	0	0	1	0	1	5	6	11	0	0
V93	Accident on board watercraft without accident to watercraft, not causing drowning and submersion	0	0	0	0	0	0	0	0	0	0	2	0	3	1	1	0	0	1	0	0	6	2	8	0	0
V98	Other specified transport accidents	0	0	0	0	0	0	0	0	0	2	0	2	0	3	0	0	0	0	0	0	7	7	0	0	
V99	Unspecified transport accident	0	0	0	0	0	0	1	1	0	2	3	6	0	6	1	5	0	2	0	1	5	23	28	0	0
W14	Fall from tree	0	0	0	0	0	0	1	1	0	2	1	2	1	1	2	0	1	2	2	0	8	8	16	0	0
W19	Unspecified fall	0	0	1	3	16	30	49	71	46	49	66	46	50	40	60	66	27	35	38	38	353	378	731	0	0
W52	Crushed, pushed or stepped on by crowd or human stampede	0	0	0	0	0	0	1	0	1	0	0	0	0	0	1	0	0	1	0	0	3	1	4	0	0
W54	Bitten or struck by dog	0	0	0	0	1	4	10	10	4	4	4	2	8	3	5	0	3	0	5	3	40	26	66	0	0
W55	Bitten or struck by other mammals	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	1	0	3	0	3	0	0
W57	Bitten or stung by nonvenomous insect and other nonvenomous	0	0	0	1	1	2	7	17	1	8	6	7	11	2	6	4	6	1	5	6	43	48	91	0	0
W59	Bitten or crushed by other reptiles	0	0	0	2	2	12	36	28	57	40	74	65	75	60	56	29	60	36	27	30	387	302	689	0	0
W74	Unspecified drowning and	0	0	0	1	0	0	0	1	0	0	2	0	0	0	0	0	0	0	0	0	2	2	4	0	0
W79	Inhalation and ingestion of food causing obstruction of respiratory	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
W83	Other specified threats to breathing	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
W87	Exposure to unspecified electric	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
X20	Contact with venomous snakes and lizards	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
X44	Accidental poisoning by and exposure to other and unspecified drugs, medicaments and biological substances	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
X48	Accidental poisoning by and exposure to pesticides	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
X49	Accidental poisoning by and exposure to other and unspecified chemicals and noxious substances	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
X59	Exposure to unspecified factor	0	0	1	0	0	2	22	12	0	22	44	20	27	13	26	8	24	41	5	0	149	118	267	0	0
X60	Intentional self-poisoning by and exposure to nonopioid analgesics, antipyretics and antirheumatics	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0
X68	Intentional self-poisoning by and exposure to pesticides	0	0	0	0	1	1	1	1	10	4	13	0	8	0	6	4	2	0	2	0	43	10	53	0	0
X70	Intentional self-harm by hanging, strangulation and suffocation	0	0	0	0	0	0	0	0	1	0	4	0	0	0	1	0	0	2	0	0	6	2	8	0	0
X78	Intentional self-harm by sharp object	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
X85	Assault by drugs, medicaments and biological substances	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	1	1	2	0	0
X99	Assault by sharp object	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
Y00	Assault by blunt object	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
Y04	Assault by bodily force	0	0	0	1	1	0	13	30	34	111	180	197	154	131	155	125	100	82	22	56	659	733	1392	1	1
Y05	Sexual assault by bodily force	0	0	0	0	0	0	2	0	2	0	0	0	1	0	0	0	0	0	0	5	0	5	0	0	0
Y06	Neglect and abandonment	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	1	1	0	3	4	4	8	0	0
Y09	Assault by unspecified means	0	0	0	0	0	0	0	0	0	0	2	3	0	0	1	0	0	1	0	1	3	5	8	0	0

Raw Data

Inpatient Morbidity

ICD Code	Diseases	Inpatient Morbidity (age group)																				Grand Total	Total Deaths			
		<28 days		29days-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			
Y18	Poisoning by and exposure to pesticides, undetermined intent	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
Y20	Hanging, strangulation and suffocation, undetermined intent	0	0	0	0	0	0	0	0	0	1	4	1	2	1	0	0	0	0	0	0	6	3	9	0	0
Y28	Contact with sharp object, undetermined intent	0	1	0	2	4	19	12	31	28	21	21	39	19	21	22	22	20	14	14	27	140	197	337	0	0
Y30	Falling, jumping or pushed from a high place, undetermined intent	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0	0	0	0	1	0	3	1	4	0	0
Y36	Operations of war	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
Y40.8	Other systemic antibiotics	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
Y89	Sequelae of other external causes	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2	0	2	0	0
Z03	Medical observation and evaluation for suspected diseases and	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	1	0	1	3	3	6	2	0
Z10	Routine general health check-up of defined subpopulation	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
Z13	Special screening examination for other diseases and disorders	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
Z30	Contraceptive management	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
Z31	Procreative management	0	0	0	0	0	0	0	0	0	0	3	0	8	0	1	0	0	0	0	0	12	0	12	0	0
Z32	Pregnancy examination and test	0	0	0	0	0	0	0	0	10	0	21	0	6	0	0	0	0	0	0	0	37	0	37	0	0
Z33	Pregnant state, incidental	0	0	0	0	0	0	0	0	0	1	0	3	0	1	0	0	0	0	0	0	5	0	5	0	0
Z34	Supervision of normal pregnancy	0	0	0	0	0	0	0	0	43	0	187	0	40	0	2	0	0	0	0	0	272	0	272	0	0
Z35	Supervision of high-risk pregnancy	0	0	0	0	0	0	0	0	19	0	63	0	13	0	0	0	0	0	0	0	95	0	95	0	0
Z35.4	Supervision of pregnancy with grand multiparity	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
Z38	Liveborn infants according to place of birth	184	208	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	184	208	392	0	0
Z38.1	Singleton, born outside hospital	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
Z42.3	Follow-up care involving plastic surgery of upper extremity	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
Z42.8	Follow-up care involving plastic surgery of other body part	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
Z42.9	Follow-up care involving plastic surgery, unspecified	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
Z43	Attention to artificial openings	8	20	12	17	6	8	5	6	0	0	0	0	0	0	1	0	0	1	0	1	32	53	85	0	2
Z45	Adjustment and management of implanted device	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
Z46.5	Fitting and adjustment of ileostomy and other intestinal appliances	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	3	3	0	0
Z47	Other orthopaedic follow-up care	0	0	0	0	0	0	1	4	0	2	5	0	1	2	1	2	1	1	1	1	10	12	22	0	0
Z47.0	Follow-up care involving removal of fracture plate and other internal fixation device	0	0	0	0	0	0	0	0	0	2	3	0	1	0	0	2	0	1	0	0	4	5	9	0	0
Z48	Other surgical follow-up care	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	2	0	2	0	0
Z48.0	Attention to surgical dressings and sutures	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
Z49	Care involving dialysis	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2	2	0	0
Z73	Problems related to life-management difficulty	0	0	0	0	0	0	0	0	0	0	0	1	1	3	1	0	1	3	0	1	3	8	11	0	0
Z76	Persons encountering health services in other circumstances	1020	940	0	1	4	1	1	0	3	1	17	3	1	0	1	0	0	0	1	0	1048	946	1994	0	0
Z89	Acquired absence of limb	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
Z90	Acquired absence of organs, not elsewhere classified	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	0	3	0	3	0	0
Z93	Artificial opening status	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
Z93.0	Tracheostomy status	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2	0	2	0	0

ANNEX: 4

Human Resource by District, Fiscal Year 2070-71

SN	District	Doctor		Nursing Staff		SAHW/HA/AHW		Lab Staff		Other Health Staff		Administrative & others		Total			FCHV		
		Sanctioned	Fulfilled	Sanctioned	Fulfilled	Sanctioned	Fulfilled	Sanctioned	Fulfilled	Sanctioned	Fulfilled	Sanctioned	Fulfilled	Sanctioned	Fulfilled	Vaccant	Rural	Urban	Total
1	Taplejung	4	3	64	47	70	43	4	2	6	6	33	55	181	156	25	855	0	855
2	Panchthar	5	5	94	77	113	74	5	4	2	1	45	35	264	196	68	394	0	394
3	Ilam	7	6	80	64	121	101	9	8	11	11	51	39	279	229	50	1,056	18	1074
4	Jhapa	6	1	69	68	156	133	10	8	7	7	13	13	261	230	31	509	151	660
5	Morang	6	1	112	108	217	177	11	10	17	9	51	33	414	338	76	595	135	730
6	Sunsari	9	3	88	85	160	151	10	9	6	6	39	35	312	289	23	1064	179	1243
7	Dhankuta	5	2	64	50	107	71	6	6	11	11	26	19	219	159	60	315	27	342
8	Teharthur	4	4	48	35	86	59	4	3	9	5	28	26	179	132	47	411	0	411
9	Sankhuwasabha	4	4	48	35	86	59	4	3	9	5	28	26	179	132	47	297	27	324
10	Bhojpur	6	6	91	71	162	111	8	2	5	5	39	39	311	234	77	567	0	567
11	Solukhumbu	5	4	63	59	93	77	5	4	4	4	32	31	202	179	23	306	0	306
12	Okhaldhunga	4	1	81	72	138	116	3	2	0	11	19	32	245	234	11	713	0	713
13	Khotang	5	4	103	72	173	121	5	3	19	9	35	17	340	226	114	933	0	933
14	Udaypur	21	8	71	55	118	106	5	5	9	9	43	34	267	217	50	396	54	450
15	Saptari	7	0	157	110	303	298	10	8	1	1	30	97	508	514	-6	1026	48	1074
16	Siraha	8	3	8	5	40	21	9	8	4	4	8	8	77	49	28	954	57	1011
17	Dhanusha	5	5	139	99	267	229	9	9	10	9	131	94	561	445	116	909	37	946
18	Mahottari	13	17	13	13	203	203	12	12	83	83	6	6	330	334	-4	684	26	710
19	Sarlahi	25	7	143	112	265	232	10	9	32	10	13	6	488	376	112	1323	27	1350
20	Sindhuli	25	7	143	112	265	232	10	9	32	10	13	6	488	376	112	477	18	495
21	Ramechhap	5	5	6	3	232	166	5	4	7	7	25	24	280	209	71	752	0	752
22	Dolkha	4	3	92	90	138	133	3	3	1	0	38	36	276	265	11	1226	36	1262
23	Sindhupalchowk	6	3	5	4	278	182	5	2	12	12	38	42	344	245	99	711	0	711
24	Kavre	7	7	141	108	210	155	8	8	6	6	28	21	400	305	95	849	145	994
25	Lalitpur	4	3	82	81	136	98	4	4	4	10	18	28	248	224	24	369	143	512
26	Bhaktapur	2	2	34	41	69	60	5	3	10	12	26	33	146	151	-5	144	135	279
27	Kathmandu	14	13	125	125	228	213	11	10	10	7	42	50	430	418	12	1042	671	1713
28	Nuwakot	20	5	125	96	174	106	10	7	4	3	54	78	387	295	92	1080	43	1123
29	Rasuwa	3	2	33	24	57	40	12	6	4	4	25	24	134	100	34	245	0	245
30	Dhading	5	5	98	78	144	102	7	7	10	9	26	25	290	226	64	463	0	463
31	Makawanpur	10	5	87	75	132	71	8	7	10	10	58	45	305	213	92	400	44	444
32	Rautahat	10	10	140	92	246	204	10	10	15	19	41	108	462	443	19	864	65	929
33	Bara	5	5	154	105	406	273	7	3	27	25	16	6	615	417	198	884	57	941
34	Parsa	7	2	139	95	252	120	8	6	13	12	45	27	464	262	202	738	58	796
35	Chitwan	3	3	74	76	134	125	7	7	9	10	27	43	254	264	-10	324	132	456
36	Gorkha	4	1	93	65	75	51	4	2	49	42	51	75	276	236	40	594	27	621
37	Lamjung	3	4	79	65	137	88	3	3	5	5	22	22	249	187	62	669	0	669
38	Tanahu	7	7	77	61	119	69	7	4	9	6	44	33	263	180	83	414	52	466
39	Syangja	6	5	100	70	161	104	6	4	8	7	39	35	320	225	95	540	72	612
40	Kaski	3	2	71	60	129	87	6	6	30	30	20	20	259	205	54	741	328	1069
41	Manang	2	1	8	4	27	18	2	2	6	6	8	7	53	38	15	118	0	118
42	Mustang	3	2	24	19	44	26	4	2	32	22	32	22	139	93	46	144	0	144
43	Myagdi	3	3	56	47	94	59	3	2	8	5	29	29	193	145	48	370	0	370
44	Parbat	5	2	76	72	192	134	7	7	7	4	43	33	330	252	78	500	0	500
45	Baglung	8	1	103	77	168	102	8	6	9	5	53	46	349	237	112	897	53	950
46	Gulmi	5	2	76	72	192	134	7	7	7	4	43	33	330	252	78	997	0	997
47	Palpa	8	1	103	77	168	102	8	6	9	5	53	46	349	237	112	585	30	615
48	Nawalparasi	10	3	118	106	240	177	0	0	0	72	25	4	393	362	31	677	36	713
49	Rupandehi	5	4	110	104	200	174	5	5	15	16	17	64	352	367	-15	1270	241	1511
50	Kapilvastu	11	5	117	101	195	173	10	9	11	11	114	89	458	388	70	1058	49	1107
51	Arghakhanchi	5	5	74	43	112	62	5	3	7	4	25	38	228	155	73	842	0	842
52	Pyuthan	5	2	49	28	93	72	5	4	60	45	27	19	239	170	69	441	0	441
53	Rolpa	5	4	72	46	131	64	4	2	7	6	28	28	247	150	97	459	0	459
54	Rukum	4	2	60	51	109	71	4	4	7	6	67	43	251	177	74	387	0	387
55	Salyan	5	3	32	18	72	49	4	2	91	58	33	21	237	151	86	423	0	423
56	Dang	4	1	63	58	128	102	6	6	8	11	31	42	240	220	20	808	114	922
57	Banka	3	2	76	64	140	118	3	3	10	14	36	37	268	238	30	704	85	789
58	Bardiya	6	1	60	52	113	92	8	8	12	10	38	30	237	193	44	755	86	841
59	Surkhet	3		81	64	137	99	5	5	7	8	26	48	259	224	35	936	51	987
60	Dailekh	7	3	86	61	141	93	6	5	9	5	9	6	258	173	85	750	60	810
61	Jajarkot	4	1	58	35	60	37	5	2	6	2	55	29	188	106	82	270	0	270
62	Dolpa	2	1	19	17	59	54	2	2	2	1	6	5	90	80	10	207	0	207
63	Jumla	1	0	18	21	47	35	2	1	40	39	151	135	259	231	28	550	0	550
64	Kalikot	3	2	35	21	81	56	3	2	6	2	18	9	146	92	54	294	0	294
65	Mugu	3	1	32	32	75	64	3	2	1	0	23	23	137	122	15	216	0	216
66	Humla	2	1	23	23	60	60	2	1	6	5	31	30	124	120	4	243	0	243
67	Bajura	3	1	30	24	126	98	3	2	22	18	30	17	214	160	54	258	0	258
68	Bajhang	4	2	59	42	76	58	5	2	53	40	62	37	259	181	78	429	0	429
69	Achham	4	3	77	77	246	213	4	4	5	4	73	73	409	374	35	941	0	941
70	Doti	5	2	101	82	124	76	6	6	9	8	22	46	267	220	47	635	30	665
71	Kailali	10	6	84	82	144	143	9	7	15	13	41	54	303	305	-2	1151	196	1347
72	Kanchanpur	3	2	26	25	53	43	7	7	32	30	30	17	151	124	27	666	152	818
73	Dadeldhura	3	1	39	35	69	49	4	4	18	17	33	26	166	132	34	387	75	462
74	Baitadi	5	2	87	80	162	88	4	3	11	5	70	66	339	244	95	758	72	830
75	Darchula	5	3	73	67	87	80	4	4	0	10	61	48	230	212	18	369	0	369
Grand Total		466	258	5639	4590	10765	8136	452	367	1068	963	2809	2726	21199	17040	4159	47328	4142	51470

Source : Respective DHOs and DPHOs

NEPAL

