



Revised National Tuberculosis Control Programme

REVISED RECORDING & REPORTING FORMATS

(Addendum to the existing RNTCP Training Modules)



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Introduction

The Revised National TB Control Programme is constantly evolving to attain best practices in advocacy, diagnosis, treatment, service delivery and for monitoring and supervision.

To enable this process, the programme has found it necessary to revise some of the recording and reporting formats. This will help to further streamline the process of recording data and reporting it systematically to the state and national levels.

In the light of intensified TB/HIV coordination activities, being implemented in states with higher burden of HIV, the programme requires documentation of hitherto unrecorded information. This would enable the monitoring of service delivery to patients unfortunately afflicted by either or both diseases.

This addendum has been prepared to highlight the changes and additions in existing records and reports. Relevant sections are to be used while training different personnel involved in the implementation of RNTCP. This addendum is to be utilized until the different modules are revised and these changes are incorporated accordingly.

To enable the process of sensitization, it is imperative that these booklets are printed immediately so that all personnel in the districts are trained within the shortest period of time. It is expected that the districts start reporting in new formats (excluding the changes for TB/HIV) from the first quarter, 2008.

Training is a continuous process that establishes a principle of change while keeping abreast with the rapid changes and developments in TB control activities worldwide.

It is a matter of pride that the programme has achieved its twin objectives of case detection and success rate in 2007 and we are well on our way to meeting the Millennium Development Goals by 2015. This booklet is a small but important tool in that direction.

New Delhi
February 2008

Tuberculosis treatment card

The revised version of the tuberculosis treatment card is given below

Front page of TB treatment card

REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME
Treatment Card

State _____ City / District with code _____ TB Unit with code _____

Name _____ Patient TB No / Year _____

Sex M F Age: _____ Occupation: _____ PHI: _____

Complete Address & Telephone number _____ Name and designation of DOT provider & Tel. No. _____

Name and Address of Contact Person & Telephone Number _____ DOT centre _____

Initial home visit by _____ Date _____ Signature of MO with date _____

Disease Classification	Type of patient	Month	Date	DMC	Lab No.	Smear Result	Patient Weight
<input type="checkbox"/> Pulmonary	<input type="checkbox"/> New <input type="checkbox"/> Relapse	Pre-treatment					
<input type="checkbox"/> Extra Pulmonary site _____	<input type="checkbox"/> Transfer in <input type="checkbox"/> Failure	End IP/Extended IP					
	<input type="checkbox"/> Treatment after default <input type="checkbox"/> Other (Specify) _____	2 Months CP					
		End treatment					

No previous Anti-TB treatment with duration _____

I. INTENSIVE PHASE - Prescribed regimen and dosages:
Tick (✓) the appropriate Category below

Category I
New Case
(Pulmonary Smear-Positive, Seriously III Smear Negative, or Seriously III extra pulmonary)

3 times / week

H R Z E

Category II
Retreatment,
(relapses, failure, treatment after default, others)

3 times / week

H R Z E S

Category III
New Case
(Pulmonary Smear Negative, not seriously III: or extra pulmonary, not seriously III)

3 times / week

H R Z

Tick (✓) appropriate date when the drugs have been swallowed under direct observation; Make a circle (O) on the date of missed doses

Month / Year	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

A, B, and C. To facilitate communication with the patient and DOT provider, record contact telephone numbers (if available) in the space provided

D. Record details of 'history of previous anti-TB treatment with duration' in the space provided

- If previously treated, details should include:
- a) Year of treatment
 - b) Duration of treatment
 - c) Drugs taken
 - d) Source of treatment (RNTCP/Non-RNTCP)
 - e) If RTNCP, TB number (if available)

Back page of TB treatment card

II Continuation Phase

Prescribed regimen and Dosages

Category I
3 times / week

H	R

Category II
3 times / week

H	R	E

Category III
3 times / week

H	R

Enter X on date when the first dose of drugs has been swallowed under direct observation and draw a horizontal line (x _____) to indicate the period during which medicines will be self administrated.

Month / Year	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

Treatment out come with date: _____

Signature of MO with date: _____

Details of X ray / EP tests

Remarks _____

Retrieval Actions for Missed Doses

Date	By whom	Whom contacted	Reason for missed doses	Outcome of retrieval action

**Household Contacts
(Children < 6 yrs)**

No	Chemoprophylaxis

Additional Treatments

HIV status: Unknown Pos Neg (date) _____

CPT delivered on (date): (1) (2) (3) (4) (5)

Pt referred to ART centre (date): _____

Initiated on ART: No Yes (date) _____

E

E. Additional treatment

- **For select states:** To be filled only in states implementing the intensified TB/HIV package viz. Andhra Pradesh, Goa, Karnataka, Manipur, Maharashtra, Mizoram, Nagaland, Puducherry and Tamil Nadu.
- **Only recorded at PHI:** To ensure patient confidentiality is maintained within the health system, this section is to be filled only on the 'original TB treatment card' (kept at the PHI). It should not to be filled on the 'duplicate treatment card' kept with any community DOT provider.

Note: Information in the following section, on HIV status, CPT delivery and ART referral and treatment of the TB patient is to be kept confidential within health system. This should not be disclosed to the community DOT provider.

Additional Treatments					
1.	HIV status:	<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> Pos	<input type="checkbox"/> Neg	(date) _____
2.	CPT delivered on (date):	(1)	(2)	(3)	(4) (5)
	Pt referred to ART centre (date):	_____			
3.	Initiated on ART:	<input type="checkbox"/> No	<input type="checkbox"/> Yes	(date) _____	

1. HIV Status:

- i. HIV testing is a voluntary procedure and not mandatory. Patients not willing for HIV testing or sharing their HIV test result should not be forced to take the test or disclose this information.
- ii. If HIV status of the patient is known, tick the appropriate box ('Pos' or 'Neg') and record the date of test.
- iii. Patients already on HIV care should not be required to show proof of HIV test result
- iv. If the HIV status is ascertained during the course of TB treatment, the latest information should be updated on the card.
- v. If HIV status of the patient remains unknown at the end of the treatment, tick the appropriate box ('unknown'), at the time of declaring treatment outcome for the patient.

2. CPT (Cotrimoxazole preventive therapy) delivery

- i. All known HIV-infected TB patients are to be provided access to CPT.
- ii. If CPT provided from the PHI, record dates of each monthly delivery in the space provided.
- iii. In case the TB patient is already on CPT before the initiation of TB treatment, tick yes, and record approximate date of initiation.

3. Referral and initiation on ART

1. All known HIV-infected TB patients are to be referred for ART to the nearest ART Centre. For referred clients record the date of referral.
2. If patient initiated on ART, tick the "yes" box, and the date of initiation of ART should be entered on the treatment card.
3. In case the TB patient is already on ART before the initiation of TB treatment, tick yes, and record approximate date of initiation.

Tuberculosis Identity Card

The revised version of the tuberculosis identity card is given below:

Tuberculosis Identity Card

Front

Back

Revised National Tuberculosis Control Programme IDENTITY CARD

Name of Patient: _____

Complete address: _____

TU / district name _____ Ph _____

Sex: M F Age: _____ TB No. _____

PHI: _____ **A**

Disease Classification

Pulmonary

Extra-pulmonary

Site: _____

Treatment Started on

Date Month Year

Type of Patient

- New
- Relapse
- Treatment after default
- Failure
- Transfer In
- Other-Specify _____

Category of Treatment

Category I

Category II

Category III

CPT **B**

Follow up sputum examination

Time point	Date	Lab No.	Result
Pretreatment			
End of IP/extended IP			
2 months in CP			
End of treatment			

Appointment dates

IP	CP
_____	_____
_____	_____
_____	_____
_____	_____

Treatment outcome with date: _____

Signature and stamp of MO with date: _____

REMEMBER

1. Keep your card safely
2. You can be cured if you take treatment as advised.
3. You may infect your near and dear if you do not take your medicines as advised

A. The DTO or MOTC phone number should be included onto the card as per RNTCP policy. The space next to PHI name can be utilized for this purpose.

B. CPT: (Only of states implementing intensified TB/HIV package)

- If the patient is HIV-infected, and not already being provided CPT from any other source, MO (PHI) is to prescribe CPT by ticking in the section on CPT
- Institutional DOT provider on seeing the ticked box provides monthly supply of CPT and records the same on Original treatment card.

Right side of the TB register

Revised National Tuberculosis Control Programme – TB Register Quarter _____ Year _____

End of I.P. / Extended I.P.				2 Months in C.P. Exam				End of Treatment Exam				Treatment Outcome#		Remarks
Date	DMC Name	Lab No	Smear	Date	DMC Name	Lab No	Smear	Date	DMC Name	Lab No	Smear	Outcome	Date	

D

DOTS SUMMARY	Cured		Comp Tx.		Died		Default		Failed		Transfer Out	
NSP	M	F	M	F	M	F	M	F	M	F	M	F
NSP [M F]												
NSN												
NEP												
New Others												
Relapse												
TAD												
Failure												
Cat II Others												

Treatment Outcome – use complete words Cured, Completed treatment, Died, Defaulted, Failure, or Transferred out

‡ Additional treatments if patient HIV-positive Required only for patients known to be HIV-positive. If provided by any source during TB treatment, enter “Y” and approximate date. If not provided/unknown, enter “N”.

D. Summary (DOTS cases only):

- This section summarizes the TB treatment outcomes of cases registered on DOTS to facilitate quarterly report preparation.
- Segregate treatment outcomes of TB patients as shown. This will facilitate reporting in the quarterly results of treatment report. Note: New others TB cases have been included in the summary table.

E. CPT and ART delivery: (for intensified TB/HIV package)

- The section is to be filled up for all TB patients known to be HIV-infected and should be left blank for others.
- CPT and ART information should be recorded on the register at the same time of treatment outcome recording i.e. within a month of TB treatment completion.
- Record CPT started as ‘yes’, with the date, if at least one month of CPT delivery is recorded in the original treatment card.
- Record ART started as ‘yes’ if recorded as ‘yes’ in the original TB treatment card. Record the documented approximate date of ART initiation from the original TB treatment card.
- For patients who were already taking CPT or ART at the time of TB diagnosis, the dates for CPT and/or ART initiation would be expected to be earlier than the date of initiation of TB treatment.

Quarterly report on Case finding

The revised version of the tuberculosis case finding report is given below:

REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME
Quarterly Report on New and Retreatment Cases of Tuberculosis

Patients registered during ____ quarter of 200__.	Name of area _____ No.# _____
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Name of Reporter : _____, Signature : _____ Date of completion of this form

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Block 1: All new and retreatment patients registered in the quarter

	New cases				Retreatment Cases				Total
	New Smear Positive pulmonary TB	New Smear Negative pulmonary TB	New extra-pulmonary TB	Others	Relapses	Failures	Treatment After Default	Others	
0-14 yrs									
≥ 15 yrs									
Total									
Male									
Female									
Total									

Block 2 : New Smear Positive Pulmonary TB cases only: from column above

Age	0-14	15-24	25-34	35-44	45-54	55-64	≥ 65	Total
Male								
Female								
Total								

Notes : Quarterly : 1st quarter January, February, March
 2nd quarter April, May, June
 3rd quarter July, August, September
 4th quarter October, November, December
 # Number Identification number of the area.

Block 3: TB/HIV Collaboration

Of all Registered TB cases no. known to be tested for HIV before or during the TB treatment (a)	Of (a), No. known to be HIV infected (b)

Only cases treated under DOTS (CAT I, II and III) are included in this report.

Block 1:

- The purpose of block 1 is to provide information on the total number of cases registered during the given quarter.
- It is subdivided into two major columns: New cases and re-treatment TB cases.
- The column on New cases are further subdivided into new smear-positive pulmonary tuberculosis cases, new smear-negative pulmonary tuberculosis cases, new extra-pulmonary tuberculosis cases and new 'others' cases.
- Similarly the column on re-treatment cases is also further subdivided into relapse, failure, treatment after default and others.
- This block will also provide information on the sex-wise and age wise (0-14 yrs and ≥ 15 years) break-up of TB cases.
- Data on shaded areas is not to be reported.

Procedure for preparing the quarterly report on case finding

Locate the section of the Tuberculosis Register that corresponds to the three – month period (quarter) which you are to review. To locate the section of the Tuberculosis Register to be reviewed, examine the **Date of registration** column and identify the pages where cases during the just concluded quarter have been **registered**. For example, while compiling the case finding report of 2nd quarter in the first week of July, only count those cases that were registered in the period between 1st April and 30th June. It is best to start the registration of cases on a new page in the Tuberculosis Register at the beginning of each quarter.

Remember: The reference date for inclusion of a patient in a quarterly cohort is the date of registration in the TB register and not the date of initiation of treatment.

- a. Enter the total number of such cases (in pencil) in the summary table at the bottom of each left sided page of the Tuberculosis Register.
- b. The above exercise should be continued in all the pages of the TB register covering all cases registered in that quarter. Re-count the cases to make sure that the numbers obtained are correct.
- c. Add the number of new smear-positive pulmonary cases (0-14 years) from the summary table on each left sided page of the TB register you have reviewed.
- d. Enter the aggregate number of 0-14 year New smear-positive pulmonary cases in column 1 of Block 1 in the Quarterly Report on Case Finding.
- e. Next count the number of new smear-positive pulmonary cases in the age group ≥ 15 years. To count the number of new smear-positive pulmonary cases ≥ 15 years, complete the same process as described above for the 0-14 years and enter it in the corresponding cell ≥ 15 years under NSP.
- f. Now total the number of cases 0-14 years and ≥ 15 years and enter it in the cell corresponding to the total of NSP cases. This total should be equal to the total of NSP cases registered in the TB register during the quarter.
- g. Similarly repeat the process for new smear negative pulmonary tuberculosis cases, new extra-pulmonary tuberculosis cases, new 'others' cases, relapse, failure, treatment after default and re-treatment others.
- h. Next total the number of cases of different types with age 0-14 years and enter it in the first cell of last column labeled as "Total". This total should be equal to the total number of cases 0-14 years in the TB register. Similarly total the number of cases ≥ 15 years of different types and total cases and enter it into the cells of the last column. **The cell corresponding to the total number of cases should be equal to the total number of cases registered during the reporting quarter.**
- i. Count the number of male and female NSP pulmonary TB cases from the summary table of the TB register for all the pages of the quarter and enter it in the corresponding cells under NSP in Block 1. Similarly repeat the process for new smear negative pulmonary tuberculosis cases, new extra-pulmonary tuberculosis cases, new 'others' cases and relapse cases. Please note that the sum of the number of cases 0-14 years and ≥ 15 years should be equal to the sum of Male and female cases for all the columns.

Block 2:

Block 2 : New Smear Positive Pulmonary TB cases only: from Column (1) above								
Age	0-14	15-24	25-34	35-44	45-54	55-64	≥ 65	Total
Male								
Female								
Total								

- The purpose of block 2 is to provide further age-wise information on the new smear positive pulmonary TB cases registered during the quarter.
- New smear positive pulmonary TB cases is sub-divided into seven age groups (0-14, 15-24, 25-34, 35-44, 45-54, 55-64 and ≥ 65) as shown.
- Only New smear-positive pulmonary tuberculosis cases reported in Block 1 should be included in Block 2.
- The number of new smear-positive males, females and total should match with those reported in new smear positive TB case column of Block1.

Block 3: (only for states implementing intensified TB/HIV package)

Block 3: TB/HIV Collaboration

Of all Registered TB cases no. known to be tested for HIV before or during the TB treatment (a)	Of (a), No. known to be HIV infected (b)

The purpose of this block 3 is to provide information on the process of ascertainment of HIV status of TB patients:

- In cell 'a', enter the sum of all TB patients registered in this quarter, with their HIV status recorded as either positive (P) or negative (N) in the TB register. Do not include those patients with HIV status recorded as (U) unknown, or those patients with no information available regarding HIV status.
- In cell 'b', enter the sum of all TB patients registered in this quarter, with their HIV status recorded as positive (P) in the TB register.
- It is to be noted that the number of patients known to be HIV-infected may be less than the number that will ultimately be reported in the Results of Treatment quarterly report, as it is expected that some patients will undergo HIV testing during the course of treatment after the case finding report is prepared.

Quarterly report of sputum conversion of New and Re-treatment cases registered 4-6 months earlier

The revised version of the tuberculosis sputum conversion report is given below.

REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME Quarterly Report of Sputum Conversion of New and Retreatment cases Registered 4-6 Months Earlier

Patients Registered during _____ quarter of 200____.
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Name of area: _____ No. _____

Name of reporter: _____

Signature: _____

Date of completion of this form:

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Complete this proforma for sputum smear-positive patients. The total no should be the same as in the Quarterly Report on New and Retreatment Cases of Tuberculosis.

Total no. of New Sputum - Positive Patients	Sputum at the end of IP (2 months)			Sputum at the end of extended IP (3 months)		
	Negative	Positive	N.A.	Negative	Positive	N.A.

Total no. of Sputum Positive Cat II Retreatment Patients (excluding 'Others')	Sputum at the end of IP (3 months)		
	Negative	Positive	N.A.

N.A.: Not available. Sputum Examination was not done.

- Review every page of the TB register for the quarter being reported.
- Make sure all available sputum results have been entered into the register.
- Record the appropriate total for sputum results at the end of IP for the relevant group of patients.
- Every NSP and every retreatment patient (excluding 'others') must be included in this report.

Quarterly report on results of treatment of tuberculosis patients registered 13-15 months earlier

The revised version of the tuberculosis treatment outcomes report is given below.

REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME
Quarterly Report on the Results of Treatment of Tuberculosis Patients Registered 13-15 Months Earlier

Name of area : _____ No : _____ Date _____		No registered during _____ quarter of _____			Name & signature of Reporter* : _____			
Patient reported during quarter **	Type of Patient	Cured	Treatment completed	Died	Failure	Defaulted	Transferred to another district	Total number evaluated (sum of columns 1 to 6)
		(1)	(2)	(3)	(4)	(5)	(6)	
	NEW CASES							
	Smear-positive- Total NSP							
	A Male							
	Female							
	Smear-negative							
	Extra-pulmonary							
	Others							
	TOTAL NEW CASES							
	RETREATMENT CASES							
	Smear-positive relapses							
	Smear-positive failures							
	Smear-positive treatment after default							
	Others treated with Category II							
	TOTAL RETREATMENT CASES							

*The Reporter is the Medical Officer responsible not the person completing this form.

** Of these, _____ (number) were excluded from evaluation of treatment outcome (Annex details with the hard copy).

B TB treatment outcomes of HIV positive TB patients

Type of TB case	Total No. known to be HIV infected	Treatment outcomes					Transfer out
		Cure	Treatment completed	Died	Treatment failure	Default	
NSP							
All TB cases							

Total no of TB patients known to be HIV infected	No. given CPT#	No. given ART#

During TB treatment

A. TB treatment outcomes of cases registered on DOTS

- Enter treatment outcomes of registered TB cases as shown
- Summary section on the right hand page of the TB register would facilitate compilation of the report
- Sex wise disaggregation of only new smear positive cases to be reported.

Procedure for preparing the quarterly report on treatment outcomes

To compile the Quarterly Report on the Results of Treatment, you will need to review the Quarterly Report on Case Finding you compiled for patients registered 13 to 15 months earlier. You will also need to review the Tuberculosis Register for the same period. For example, if you are compiling the Quarterly Report at the beginning of the 1st quarter of 2008 (i.e. the first week of January), go back to the records of the Tuberculosis Register 13 to 15 months earlier. Thus you will be reviewing the patients registered from 1 October 2006 to 31 December 2006, in the Tuberculosis Register of the TU.

Once you know the quarter for which you are reporting, look at the dates in the column **Date of registration** in the Tuberculosis Register to find the cases registered during that quarter.

1. Complete the top portion of the Quarterly Report on the Results of Treatment as per the following:

- a. **Name of area:** Write the name of the sub-district/district.
- b. **No:** Write the identification number for the sub-district/district.
- c. Date of completion of this form: Write the day, month and year you are completing the Quarterly Report.
- d. **Patients Registered during the quarter of 20....:** Write the quarter and the year corresponding to 13 to 15 months earlier.
- e. **Name of Reporter:** Write full name of the reporting Medical Officer.
- f. **Signature:** Give the complete signature.

2. Complete the first column (Patient registered during the quarter) of the table using the case finding report of the same quarter.**

- a. For example if the treatment outcomes are being reported for 1Q07, look into the case finding report of 1Q07.
- b. As per the case finding report of 1Q07, find out the total number of NSP cases registered.
- c. Enter this in the cell corresponding to the Smear positive- Total NSP.
- d. Enter the number of Male NSP and female NSP cases registered in the next two cells below
- e. Similarly by looking into the case finding report, complete the first column for NSN, NEP, New Others and total new cases
- f. Similarly enter number of cases reported as registered in the cells corresponding to smear positive relapse, smear positive failure, smear positive treatment after default and others treated with Cat-II and total re-treatment cases.

3. Next look into the TB register and complete the summary table given on the right hand side of every page of the quarter

4. After this add the number of NSP cases reported as cured, treatment completed, died, failure, defaulted, transferred out from all pages of the TB register corresponding to the quarter and enter this in the first row corresponding to smear positive-NSP.

5. The last column of the table, 'total number evaluated' will be equal to the sum of the number of cases whose outcome is declared (Sum of 1 to 6) for each row. In case of difference in number registered and number evaluated, please refer to the note below.

6. Similarly complete the rows corresponding to New Smear positive males, New Smear positive females, New Smear Negative, New Others, total new cases, smear positive relapse, smear positive failure, smear positive treatment after default and others treated with Cat-II and total re-treatment cases.

Note: Please note that if there are any difference in the number registered and number evaluated, then adequate justification must be given to explain the difference. The same must be annexed to the hard copy and then submitted to CTD.

C. Treatment outcomes of HIV positive TB patients: (only for 9 states implementing intensified TB/HIV package)

Type of TB case	Total No. known to be HIV infected	Treatment outcomes					
		Cure	Treatment completed	Died	Treatment failure	Default	Transfer out
NSP							
All TB cases							

- In this section TB treatment outcomes of HIV-infected TB patients are to be reported
- In the first column 'Total No known to be HIV-infected', enter the sum of all TB patients registered in the relevant quarter, whose HIV status was recorded as positive (P) in the TB register, for 'NSP' only in the first row, and for 'All TB cases' (including NSP) in the second row.
- **Note:** This number of known HIV-infected TB cases may be greater than reported in block 3 of case finding reported for this quarter, as more TB patients will have been identified as HIV positive during the course of treatment subsequent to the time of submission of the quarterly CF report.
- Record the treatment outcomes of the known HIV-infected TB patients as indicated.

D. Provision of CPT & ART to HIV-infected TB patients

Total no of TB patients known to be HIV infected	No. given CPT#	No. given ART#

During TB treatment

- Enter the sum of HIV-infected TB patients that had 'yes' recorded in the CPT started column of the TB register and record in the space provided.
- Enter the sum of HIV-infected TB patients that had 'yes' recorded in the ART started column of the TB register and record in the space provided.