Health Information System		Organisation:
6.0	Disease Control	Location:
Eme	ergency Reporting Pad	cettings
	en	ergencyse
	Foruseine	ergency settings
		XXXXX XXXXX_EN_ddmmyy

Health Information System

Emergency Reporting Form

6.0 Disease Control

Organisation: _____

Location: _____

Reporting period:

6.1 Tuberculosis Program		< 5		≥ 5		
			М	F	М	F
	Number of patients under treatment at beginning of period					
	Number of new TB cases in program					
	Number of discharges	treatment success				
		treatment failure				
		death				
		default				
		transfer out				
Number of patients under treatment at end of period						

6.2 Leprosy Program		< 5		≥ 5		
			М	F	М	F
Number of patients under treatment at beginning of period						
Nur	Number of new Leprosy cases in program					
Nur	Number of discharges	treatment success				
		treatment failure				
		death				
		default				
		transfer out				
Number of patients under treatment at end of period						