

FOR EXERCISE # 6 Name: _____

Report 6. Quarterly Report of Hospital TB Referrals

(Data Source: Form 8. Hospital TB Referral Logbook and Hospital Records)

For the __ Quarter, Year ____

<i>Name of Hospital</i>		<i>Category</i>	TDPH		TDRH	
<i>Location</i>		<i>Date submitted</i>				
<i>Prepared by</i>		<i>Designation</i>				

Indicators		No.	%
1	Total no. of referrals (presumptive TB/TB patients) to hospital TB team		
2	Total no. of referrals from the wards		
3	No. of TB patients admitted at the ward <i>(Source: Hospital Discharge Census)</i>		
4	Intrahospital referral rate (ward) <i>[No. 2/No.3 x 100]</i>		
5	No. of bacteriologically confirmed cases referred to the hospital TB team		
6	No. of bacteriologically confirmed cases detected by laboratory <i>(Source: Hospital Laboratory Register)</i>		
7	Laboratory referral rate <i>[No. 5 /No. 6 x 100]</i>		
8	“Internal referrals” that were confirmed as TB cases (by TB clinic)		
9	No. of TB cases, all forms		
10	TB cases referred to peripheral DOTS facilities (external referral)		[=10/8]
11	TB cases registered by TDPH (managed by the TB clinic)		[=11/8]
12	No. of TB cases started treatment at the ward		

Referral outcome of patients referred during the quarter prior to this reporting period:

13	Total no. of TB cases referred to peripheral DOTS facilities during the quarter prior to this reporting period		
14	No. accepted and registered <i>(with TB case number)</i> at the peripheral DOTS facility		
15	External referral acceptance rate <i>[No. 14/No. 13 x 100]</i>		%