

PITC Register and Monthly Report Tools

This SOP gives instructions on the use of three tools: the Adult In-Patient PITC Register, the Paediatric In-Patient PITC Register, and the Monthly PITC Report for In-Patient Wards. The registers were designed for use by HIV Testing and Counseling (HTC) providers in in-patient wards, but can be adapted for use in any department that does not keep a clear record of every patient's HIV status.

There are two versions of the PITC Register: one **Adult PITC Register** (for use on adult wards; patients ≥ 15 years old) and one **Paediatric PITC Register** (for use on general paediatric wards and nutritional rehabilitation unit - NRU; patients < 15 years old). The **PITC Monthly Report** is a form used to compile PITC data from all departments that the program has focused PITC efforts regardless of the method of record keeping. Using this data, coverage and yield of PITC by testing point can be calculated.

The procedure is separated into six sections:

PITC Register

[Section 1: Overview of the PITC Flowchart and PITC Outcomes](#)

[Section 2: Instructions for Filling PITC Registers](#)

[Section 3: PITC Register Heading Descriptions](#)

[Section 4: Special Paediatric PITC Cases](#)

PITC Monthly Report

[Section 5: Overview of Monthly Report](#)

[Section 6: Instructions for Filling Monthly PITC Report for Inpatient Wards](#)

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SCOPE:

The PIT Register part of the procedure is designed for use on the in-patient, short stay and/or NRU wards of any health facility that does not keep a clear record of every patient's HIV status. The PITC Monthly Report can be used to collect data and measure PITC efforts in in-patient wards (i.e. those that use the PITC register) and outpatient departments (i.e. departments that do not use the PITC register).

RESPONSIBILITIES:

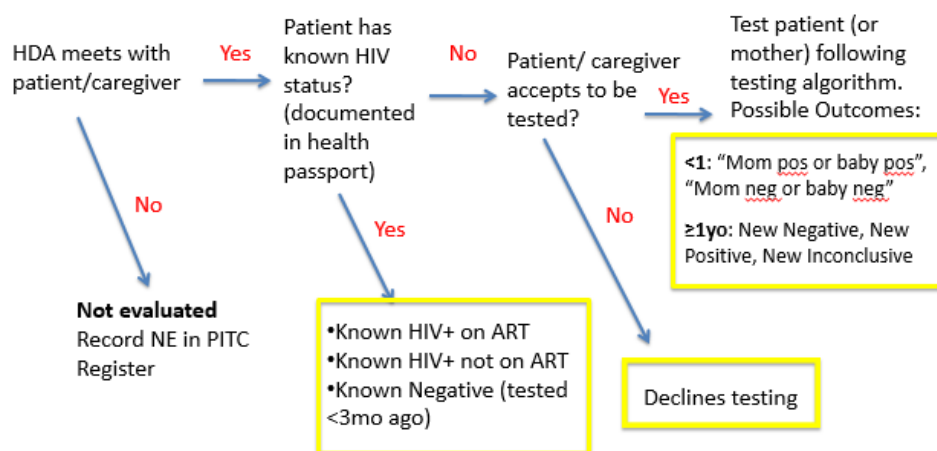
This is intended for use by HTC providers. HTC should only be done by qualified HTC providers. When/if possible, Ministry of Health (MOH) staff should be trained to complete PITC registers to ensure continuity of documentation.

PROCEDURE:

SECTION 1: OVERVIEW OF THE PITC FLOWCHART AND PITC OUTCOMES

The **PITC Register Testing Flowchart** (Figure 1) helps guide the HTC provider through all the steps needed to properly ascertain a patient's HIV status.

Figure 1. PITC Register Testing Flowchart



= Final outcome to be recorded in PITC register

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All yellow boxes on the flowchart represent potential outcomes of PITC evaluation for patients who are admitted to the hospital. The instructions are written for use in the inpatient wards but can be adapted to other settings. If evaluated, **each patient should only have ONE of the following outcomes:**

Heading	Subheading	Outcome Option	Definition
Testing Not Done	Known Status	Known HIV+ on ART	<i>Patient has a known HIV+ diagnosis and is taking ART</i>
		Known HIV+ not on ART	<i>Patient has a known HIV+ diagnosis but is not taking ART</i>
		Known HIV-	<i>Patient had a documented HIV-negative test result within the last 3 months</i>
		Declined	<i>Patient refuses testing</i>
Testing Done	Test Result <1yo	Mom Positive or Baby Positive	<i>Patient's mother is HIV+ <u>or</u> if the mother's test cannot be ascertained and the patient has a positive rapid test result</i>
		Mom Negative or Baby Negative	<i>Patient's mother is HIV- <u>or</u> if the mother's test cannot be ascertained and the patient has a negative rapid test result</i>
	Test Result ≥1yo	New Negative	<i>Patient's rapid test result is negative</i>
		New Positive	<i>Patient's rapid test result is positive</i>
		New Inconclusive	<i>Patient's rapid test result is inconclusive</i>

Full description of PITC Flowchart:

- If a patient does not receive any counseling/testing assessment from an HTC provider, the patient is recorded as Not Evaluated. These patients were entered into the PITC register on admission, but the HTC provider never evaluated and counseled the patient about PITC or offered a test. Evaluation date, patient status, and linkage columns are left blank.
 - Common reasons for this outcome in the inpatient setting include: busy ward with multiple new admissions, weekend admissions when there is no designated HTC provider, or difficulty accessing a patient who is receiving multiple ancillary services or critical care.
 - The goal is to minimize the number of patients who are not evaluated/tested.
- When the HTC provider evaluates a patient, s/he should first assess if the patient should be offered an HIV test or has a known HIV status by reviewing the patient's medical records (e.g. health passport book).

The patient should be offered an HIV test if:

- Never tested before
- Tested negative more than 3 months ago (or test after 1 month if high risk exposure – follow HTS risk assessment guidelines)
- Claims to have been tested any time in the past, but without documentation (being on ART counts as documented evidence). [Source: Malawi Integrated Clinical HIV Guidelines, 2016]

The patient should NOT be offered an HIV test if:

- Known HIV+ on ART, Known HIV+ Not on ART, and Known HIV-: These outcomes are used for patients who have a previous HIV status documented in their health passport book **and** do not need a repeat test.
- If a patient tested HIV-negative more than 3 months ago, do **not** mark 'Known HIV-' as the patient's outcome. The patient should be offered an HIV test.
- For known HIV+ patients, the HTC provider should assess whether the patient is enrolled in HIV care and on ART.

- If the patient does not have known HIV status, the patient should be offered an HIV test. The HTC provider should counsel the patient on the importance of knowing his/her HIV status. HIV testing is not mandatory and patients have the right to decline HIV testing.

Declined: This outcome is used if patient or caregiver (for patients under 13 yo) refuses HIV testing after appropriate counseling.

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4. If the patient consents for testing, the HTC provider should follow the **PITC testing algorithms** (Figures 2-4) based on patient age (<12mo, 12-24mo, >24mo).

Figure 2. PITC Testing Algorithm for Patients < 12months

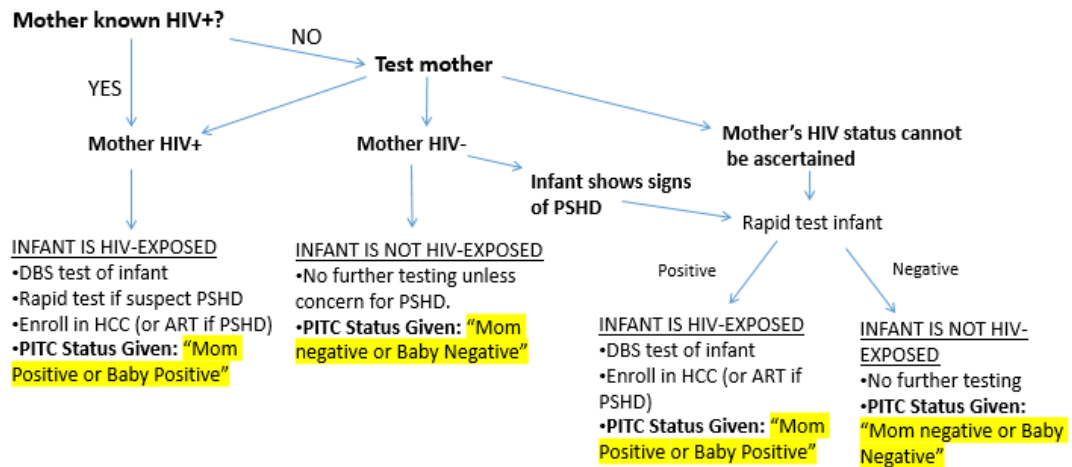


Figure 3. PITC Testing Algorithm for Patients 12 – 24 months

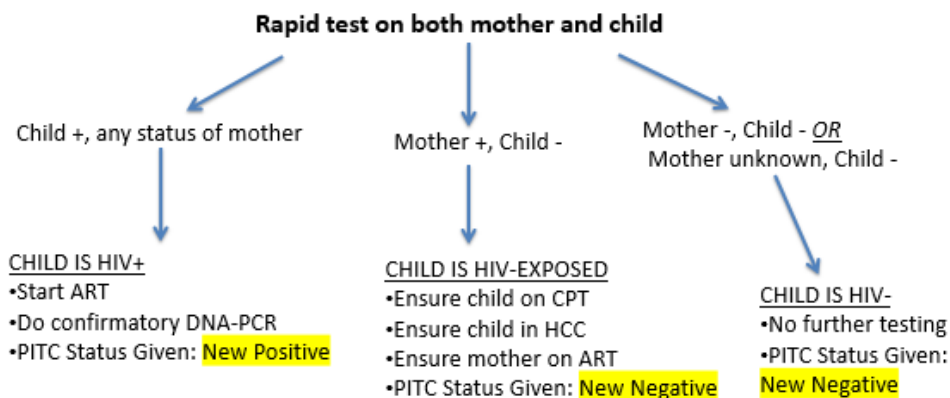
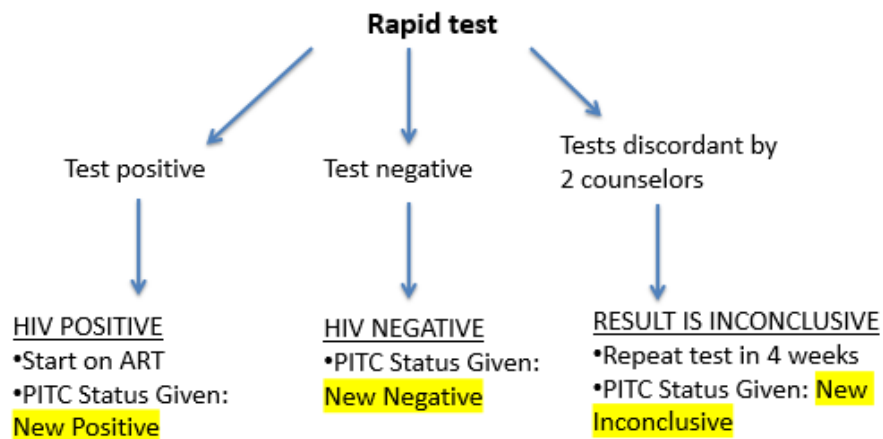


Figure 4. PITC Testing Algorithm for Patients > 24 months



5. The patient will have one of the following testing outcomes:
 - <12mo: Possible results include:
 - Mom Positive or Baby Positive (mother has a known or new positive HIV status; or if mother is not available, child’s rapid test is positive)
 - Mom Negative or Baby Negative (mother tests HIV negative; if mother is not available, child’s rapid test is negative)
 - ≥12mo: Possible results include – New HIV Positive, New HIV Negative, New HIV test Inconclusive
 - Special scenarios are discussed below [see Section 4. Special Paediatric PITC Cases]

6. Thus, for outcomes **Known status and Declined**, the patient is not tested during the inpatient admission. For **Testing Done** outcomes, either the patient or mother is tested during the inpatient admission (based on PITC algorithm).

7. The date of evaluation is the date that the HTC provider evaluated the HIV status of the patient and should be completed whether or not testing is done.

SECTION 2: INSTRUCTIONS FOR COMPLETING PITC REGISTERS

Instructions are generally the same for both the adult and paediatric registers. The instructions are written for use in inpatient wards, but can be adapted for other testing points.

1. Enter all new admissions/registrations into the PITC register each day. Fill in one patient per line. See Section 3 for details on how to fill in the information for each column heading.

Notes:

- All patients on the designated ward should be entered into the PITC Register. By entering all new admissions each day, the HTC provider can track which patients need evaluation for PITC, and the program can gather accurate data on PITC coverage.
 - Only enter the names of the patients admitted to the ward. Do not enter the name of the patient’s mother into the PITC register, even if she is tested on the ward. **(All persons tested should be entered in the HTC register per usual protocol.)**
2. Using the PITC flowchart as a guide, circle the outcome of PITC counseling/testing. Only one outcome should be given per patient. Below are samples of the Paediatric PITC Register (Figure 5) and Adult PITC Register (Figure 6), and possible outcomes are highlighted.

Figure 5. Paediatric PITC Register

Date of Admission (dd/mm/yy)	Child Name		Sex of Child		Age of Child		Date of Evaluation da/mm/yy	Patient (child) HTC status: Pick one status only.							Linkage to Care- EID (For mom positive or baby positive <1yo)		Comments		
			Male	Female	0-11 months	1-14 years		Not Evaluated	Testing not done				Testing done			DNA-PCR DONE?			
									Known status				Test Result <1yo		Test Result ≥1yo	Yes		No	
									Known positive, on ART	Known positive, not on ART	Known negative (tested <3mo ago)	Declined	Mom positive OR baby positive	Mom negative OR baby Negative	New Negative				New Positive
			M	F	A	B	NE	ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N	
			M	F	A	B	NE	ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N	
			M	F	A	B	NE	ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N	
			M	F	A	B	NE	ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N	

Figure 6. Adult PITC Register

Date of Admission (dd/mm/yy)	Patient Name	Sex			Age			Date of Evaluation dd/mm/yy	Patient status: Pick one status only.							Comments
		Male	Female non Preg	Female Pregnant	15-24 years	25+ years	Not Evaluated		Testing not done			Testing done				
									Known status			Declined	New Negative	New Positive	New Inconclusive	
									Known positive, on ART	Known positive, not on ART	Known negative (tested <3mo ago)					
		M	FNP	FP	C	D	NE	ART	Kn+	Kn-	D	N-	N+	Nin		
		M	FNP	FP	C	D	NE	ART	Kn+	Kn-	D	N-	N+	Nin		
		M	FNP	FP	C	D	NE	ART	Kn+	Kn-	D	N-	N+	Nin		
		M	FNP	FP	C	D	NE	ART	Kn+	Kn-	D	N-	N+	Nin		
		M	FNP	FP	C	D	NE	ART	Kn+	Kn-	D	N-	N+	Nin		

3. Provide appropriate counseling and referral for services based on the patient's outcome. Situations in which special counseling and referrals are needed include:
 - a. If the patient has a **known positive status**:
 - i. Assess whether the client is already on ART.
 - ii. If the client is known positive but not on ART, refer case to ward clinician and counsel patient on the importance of enrolling in HIV care. (Note: All Known HIV+ clients should be on ART under Test and Treat guidelines.)
 - b. If the patient **declines**:
 - i. Counsel the patient on the importance of HIV testing.
 - ii. Continue to follow up with the patient to encourage HTC until the patient is discharged.
 - c. If the patient is **New Positive (≥1yo)** or **Mom Positive or Baby Positive (<1yo)**:
 - i. Refer case to ward clinician and counsel patient on the importance of enrolling in HIV care.
 - ii. Enter all **New Positives** in the Linkage Register and facilitate linkage to care.
 - iii. If the mother of a patient <12 mo is newly diagnosed positive, assess if mother is on ART. If not, refer mother for ART to start immediately and enroll child in HCC.
4. If there is a question about how to fill in a data field in the register, make notes in the **Comments** section and discuss the case with your supervisor.
5. All patients without an outcome completed before they are discharged from the hospital should be recorded as **Not evaluated**.
6. At the end of each page of the register, total the number of responses in each column and write the numbers in the "Totals" boxes at the bottom. These totals can be used to fill the **Monthly PITC In-Patient Report**.

SECTION 3. PITC REGISTER COLUMN HEADING DESCRIPTIONS

Note: There are slight differences in the adult and paediatric registers as labeled below.

Column Heading	Description	Response Options
Date of Admission	Date that the patient was admitted to the ward	DD/MM/YY
Patient Name	Patient's first and surname	First name then Surname
Sex (Sex of Child)	The gender and pregnancy status of the patient	Adult Register: M = Male; FNP = Non-pregnant female; FP = Pregnant female Child Register: M=Male; F=Female
Age (Age of Child)	Age of patient	Paediatric Register:

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		A= 0-11 months; B= 1- 14 years Adult Register: C= 15-24 years; D= 25+ years	
Not Evaluated	Patients that do not receive HTC testing/ assessment from an HTC provider.	NE= Not evaluated	
Date of Evaluation	Date that patient was evaluated by the HTC provider to determine HIV status	DD/MM/YY	
Patient HTC status: Testing not done	Known Status	<p>Patient has a known HIV status and does not need a re-test.</p> <p>This means that the HTC provider has seen documentation of the patient's HIV status and s/he does <u>not</u> need to receive HTC services.</p>	<p>ART = Known positive, on ART: <i>patient has a known HIV+ diagnosis and is taking ART</i></p> <p>Kn+ = Known positive, not on ART: <i>patient has a known HIV+ diagnosis but is not taking ART</i></p> <p>Kn- = Known negative: <i>patient had a documented HIV-negative test result within the last 3 months</i></p>
	Declined	Patient has an unknown HIV status, has been offered HTC services, and denied/refused to receive them.	D = Declined

Paediatric Register

Column Heading	Column Subheading	Description	Response Options
Patient (child) status: Testing Done	<1yo	The HIV status based on the testing of the patient and/or mother (use PITC algorithms to determine testing approach); for infant less than 1 year old.	<p>M/B+ = Mom Positive or Baby Positive: <i>patient's mother is HIV+ <u>or</u> if the mother's test cannot be ascertained and the patient has a positive rapid test result</i></p> <p>M/B- = Mom Negative or Baby Negative: <i>patient's mother is HIV- <u>or</u> if the mother's test cannot be ascertained and the patient has a negative rapid test result</i></p>
	≥1yo	The HIV test result based on the testing of the patient and/or mother (use PITC algorithms to determine testing approach); for child one year old (12 months) or older.	<p>N- = New negative: <i>patient's rapid test result is negative</i></p> <p>N+ = New positive: <i>patient's rapid test result is positive</i></p> <p>Nin = New inconclusive: <i>patient's rapid test result is inconclusive</i></p> <p>Note: Use N- for any child ≥1yo where rapid test is negative during the admission. Even if a child ≥1yo is HIV-exposed, the PITC Register outcome is based on the testing on that day.</p>
Linkage to care- EID <i>For mom positive or baby positive <1yo</i>	DNA-PCR Done?	<p>Was a sample taken from the patient for DNA-PCR? Cases that require DNA-PCR taken:</p> <ul style="list-style-type: none"> ○ Mother of patient <12mo tests positive ○ Infant <12mo with a positive rapid test ○ Confirmatory test for patient 12-24mo with a positive rapid test 	<p>Y = Yes: <i>sample was taken for DNA-PCR</i></p> <p>N = No: <i>sample was not taken for DNA-PCR</i></p>
	HCC Number	Record HCC number for newly exposed infant.	

SECTION 4. SPECIAL PAEDIATRIC PITC CASES

NOTE: Use **PITC testing algorithms** to clarify the testing recommendations based on patient age (<12mo, 12-24mo, >24mo).

Case	Testing	Outcome in Register
<p>Infant <12mo on inpatient ward; unable to ascertain mother's status</p> <p>Example: 9mo admitted for diarrhea. Caregiver is grandmother; mother died during childbirth.</p>	<p>Rapid test of infant (to determine HIV exposure status)</p>	<p>If rapid test result is positive, PITC outcome is: Mom Positive or Baby Positive*</p> <p>If rapid test result is negative, PITC outcome is: Mom Negative or Baby Negative</p> <p>*Note: If rapid test result is positive, child needs DNA-PCR testing and evaluation by clinician to determine if meets criteria for PSHD.</p>
<p>Known exposed infant, <12mo</p> <p>Example: A 6 month old who is in the hospital with malaria, no signs of PSHD, and had a negative DBS done at 6 weeks of age. Mother is on ART and infant is enrolled in HCC.</p>	<p>No testing needed</p>	<p>Mom positive OR Baby Positive</p> <p>*Note: This is the one exception where the outcome is in the section "Patient Status: Testing done" even though no testing was done.</p>
<p>Known exposed infant, 12-24mo</p> <p>Example: A 16mo known HIV-exposed infant with previous negative DBS at 6 weeks of age and rapid test at 12mo of age. The child is admitted with malaria and no signs of PSHD. Mother is on ART and infant is enrolled in HCC.</p>	<p>Rapid test of child</p> <p>Note: Per national guidelines, all patients attending a health facility should be re-tested if tested negative more than 3 months ago. (Follow risk assessment guidelines and test after 1 month if history of high risk exposure.)</p>	<p>If rapid test negative, outcome is: New Negative</p> <p>If rapid test positive, outcome is: New Positive</p> <p>*Note: Although child is also HIV exposed, the outcome is based on the testing on that day. Thus, if the rapid test is negative, the outcome is New Negative, even though the child continues to be HIV exposed.</p>

SECTION 5: OVERVIEW OF PITC MONTHLY REPORT

1. It is the responsibility of HDA focal person to fill the PITC Monthly Report.
2. Fill the report at the end of each month and complete before the end of the first week of the following month (e.g. the monthly report for June should be completed by the first week July).
3. Fill in the first row of the form with:
 - a. Site (health facility name)
 - b. District
 - c. Reporting Month (e.g. a June reporting month covers all PITC done from June 1st -30th)
4. There are two sections of the Monthly Report. Complete them using Sections 6 and 7 of this SOP. Descriptions of each column's headings are provided in the table below.
5. When the monthly report is completed, the HDA focal person completing the report should sign and date. The site supervisor should perform a quality check (check the report data against the PITC register data), then sign and date.
6. When report is completed, signed and checked for quality, it should be submitted to the M&E team.

Descriptions of Column Headings

Column Heading	Description
Indicator	Indicator which corresponds with the data being collected
Description	Description of the data needed
Data Location	Location that the data can be found (i.e. register name, row, etc) and/or calculation that needs to be made
Site Result	Corresponding data filled by the HTC provider at the site
M&E Check	Confirmation of correct data entry by the HTC provider by the M&E team

SECTION 6: INSTRUCTIONS FOR FILLING MONTHLY PIC REPORT FOR INPATIENT WARDS

SPECIAL NOTES:

- This section of the Monthly Report uses data from Ministry of Health (MOH) registers from departments that use the PITC register because the existing department registers do not keep a clear record of every patient's HIV status.
- Programs should adapt this section of the monthly report depending on their own existing resources and needs.

Section 1 of the Monthly PITC Report for In-Patient Wards has three parts:

- PITC- NRU: PITC in the nutritional rehabilitation unit (NRU) ward for paediatric patients
- PITC-Inpatient/Short Stay Paeds: PITC in a short stay or in-patient paediatric ward
- PITC- Inpatient/Short Stay Adult: PITC in a short stay or in-patient adult ward

Notice how each department has a specific register (either **Adult** or **Paediatric PITC Register**) associated with it. One PITC register should be used for each ward.

1. Ensure that the PITC registers for each ward have their totals summed at the bottom of each page.
2. Enter the PITC Register data requested in the 'Description' column into the corresponding 'Site Result' column.
 - a. The first row in each section is **# Admissions**. This should be obtained from the total number of patients recorded in the ward/in-patient admission register during the monthly reporting period.
 - b. The row for **Evaluated** is the Sum of boxes A1 through B5
 # Evaluated = A1+A2+A3+A4+B1+B2+B3+B4+B5
 - c. Most rows only require copying the column total onto the report (Figure 7).
 - d. The row for the outcome 'Known Positive' requires addition of Boxes A1 and A2 to get the total number of Known Positives. (Example: 3 Known positives on ART [Box A1] + 1 Known positive not on ART [Box A2] = 4 Known Positives).

Figure 7. Example of data transfer from PITC Register to PITC Monthly Report

Date of Admission (dd/mm/yy)	Child Name	Sex of Child		Age of Child		Date of Evaluation dd/mm/yy	Patient (child) HTC status: Pick one status only.										Linkage to Care- EID (For mom positive or baby positive <1yo)		Comments	
		Male	Female	0-11 months	1-14 years		Not Evaluated	Testing not done				Testing done						DNA-PCR DONE?		HCC Number
								Known status				Test Result <1yo		Test Result ≥1yo						
		ART	Kn+	Kn-	D		M/B+	M/B-	N-	N+	Nin	Y	N							
Totals		M	F	A	B	NE	ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
Fill at the end of each page (15 rows per page)							A1	A2	A3	A4	B1	B2	B3	B4	B5					

SECTION 1. For Inpatient wards; use the Tingathe PITC Register

Indicator	Description	Data Location	Site Result	M&E Check
PITC- NRU				
NR_1	# Admissions	NRU Register		
NR_2	# Evaluated	PITC Register [Sum of A1 to B5]		
NR_3	# Known positive	PITC Register (Box A1+A2)		
NR_4	# Known negative	PITC Register (Box A3)		
NR_5	# Refused testing	PITC Register (Box A4)		
NR_6	# <1 Mom HIV+ or Baby HIV+	PITC Register (Box B1)	5	
NR_7	# <1 Mom HIV- or Baby HIV-	PITC Register (Box B2)		
NR_8	# New negative	PITC Register (Box B3)		
NR_9	# New positive	PITC Register (Box B4)		
NR_10	# Inconclusive	PITC Register (Box B5)		

SECTION 7: INSTRUCTIONS FOR FILLING MONTHLY PITC REPORT FOR OUTPATIENT DEPARTMENTS

SPECIAL NOTES:

- This section of the Monthly Report uses data from Ministry of Health (MOH) registers from departments that track the HIV status of patients.
- Departments were included in this section because: 1) PITC data could not be abstracted from existing MOH quarterly reports, and 2) the department has 'high risk' clients and the program had focused PITC efforts there.
- Due to the variation in recording HIV status information for patients in each of the MOH registers, that data reported from departments that do not use the PITC Registers is more general than from those that do.
- Programs should adapt this section of the monthly report depending on their own existing resources and needs.

Section 2 of the Monthly PITC Report for Outpatient Departments has three parts.

- PITC – OTP: PITC in the outpatient therapeutic program (OTP) – a nutritional rehabilitation program
- PITC – SFP: PITC in the supplementary feeding program (SFP) - a nutritional rehabilitation program
- PITC – STI: PITC in the sexually transmitted infections department

Note that each department/program has a different way of recording HIV status in their register.

1. Collect registers from each of the departments. Check for completeness of the 'HIV Status' columns in each register. If columns are not completed appropriately, discuss with the head of that department.
2. Enter the PITC Register data requested in the 'Description' column into the corresponding 'Site Result' column.
 - a. The first row in each section is **# Admissions**. This should be obtained from the total number of patients recorded in the register during the monthly reporting period.
 - b. The second row in each section is **# HIV Status Ascertained**. This should be obtained by counting the number of patients that have any HIV status recorded, regardless of whether it was new or known.
 - c. The third row in each section is **# HIV Positive (new or known)**. This should be obtained by counting the number of patients that have a positive HIV status recorded, regardless of whether it was a new or known diagnosis.

Date of Admission (dd/mm/yy)	Child Name	Sex of Child Male Female	Age of Child 0-11 months 1-14 years		Not Evaluated	Date of Evaluation dd/mm/yy	Patient (child) HTC status: Pick one status only.									Linkage to Care- EID (Exposed Infants)		Comments	
							Testing not done				Testing done					DNA-PCR DONE?			HCC Number
							Known status			Declined	Test Result <1yo		Test Result ≥1yo			Yes	No		
							Known positive, on ART	Known positive, not on ART	Known negative (tested <3mo ago)		Mom positive OR baby positive	Mom negative OR baby Negative	New Negative	New Positive	New Inconclusive				
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
		M F	A B	NE		ART	Kn+	Kn-	D	M/B+	M/B-	N-	N+	Nin	Y	N			
Totals																			

Fill at the end of each page (15 rows per page)

A1 A2 A3 A4 B1 B2 B3 B4 B5

Tingathe Site Monthly Report

Site: _____

District: _____

Reporting Month: _____

Year: _____

Instructions: Site supervisor must sign for data quality check before submitting. M&E must also verify and not accept reports as final until all data quality checks have been completed. Use comments sections to explain any unusual or incomplete data.

SECTION 1. For Inpatient wards: use the Tingathe PITC Register

Indicator	Description	Data Location	Site Result	M&E Check
PITC- NRU				
NR. 1	# Admissions	NRU Register		
NR. 2	# Evaluated	PITC Register [Sum of A1 to B5]		
NR. 3	# Known positive	PITC Register (Box A1+A2)		
NR. 4	# Known negative	PITC Register (Box A3)		
NR. 5	# Refused testing	PITC Register (Box A4)		
NR. 6	# <1 Mom HIV+ or Baby HIV+	PITC Register (Box B1)		
NR. 7	# <1 Mom HIV- or Baby HIV-	PITC Register (Box B2)		
NR. 8	# New negative	PITC Register (Box B3)		
NR. 9	# New positive	PITC Register (Box B4)		
NR. 10	# Inconclusive	PITC Register (Box B5)		

Comments:

PITC – Inpatient/Short Stay Paeds				
SP. 1	# Admissions	Ward Admissions Register		
SP. 2	# Evaluated	PITC Register [Sum of A1 to B5]		
SP. 3	# Known positive	PITC Register (Box A1+A2)		
SP. 4	# Known negative	PITC Register (Box A3)		
SP. 5	# Refused testing	PITC Register (Box A4)		
SP. 6	# <1 Mom HIV+ or Baby HIV+	PITC Register (Box B1)		
SP. 7	# <1 Mom HIV- or Baby HIV-	PITC Register (Box B2)		
SP. 8	# New negative	PITC Register (Box B3)		
SP. 9	# New positive	PITC Register (Box B4)		
SP. 10	# Inconclusive	PITC Register (Box B5)		

Comments:

PITC – In Patient/Short Stay Adult				
SA. 1	# Admissions	Ward Admissions Register		
SA. 2	# Evaluated	PITC Register [Sum of A1 to B5]		
SA. 3	# Known positive	PITC Register (Box A1+A2)		
SA. 4	# Known negative	PITC Register (Box A3)		
SA. 5	# Refused testing	PITC Register (Box A4)		
SA. 6	# New negative	PITC Register (Box B3)		
SA. 7	# New positive	PITC Register (Box B4)		
SA. 8	# Inconclusive	PITC Register (Box B5)		

Comments:

SECTION 2. For Outpatient Department: use department registers

	Description	Data Location	Site Result	
PITC –OTP				
OP 1	# Registrations in OTP	OTP Dept Register		
OP 2	# HIV Status Ascertained	OTP Dept Register		
OP 3	# HIV Positive (New or Known)	OTP Dept Register		
PITC –SFP				
SP 1	# Registrations in SFP	SFP Dept Register		
SP 2	# HIV Status Ascertained	SFP Dept Register		
SP 3	# HIV Positive (New or Known)	SFP Dept Register		
PITC –STI				
ST	# Registrations in STI	STI Dept Register		
ST	# HIV Status Ascertained	STI Dept Register		
ST	# HIV Positive (New or Known)	STI Dept Register		

Comments: