



Panyadoli Health Centre Upgrade and Support

Date: June 30, 2019	Prepared by: Sylvia Nakiirya and Daniel Wakibi
I. Demographic Information	
1. City & Province: Bweyale, Kiryandongo District, Uganda	
2. Organization: Real Medicine Foundation Uganda (www.realmedicinefoundation.org) World Children's Fund (www.worldchildrensfund.net)	
3. Project Title: Panyadoli Health Centre Upgrade and Support	
4. Reporting Period: April 1, 2019 – June 30, 2019	
5. Project Location (region & city/town/village): Panyadoli Health Care Centre, Bweyale, Kiryandongo District, Uganda	
6. Target Population:	
<p>As of the 2014 census, there are over 266,197 residents in the Kiryandongo District, and according to records provided by the UNHCR and OPM (Office of the Prime Minister), there are more than 110,000 asylum seekers and refugees living in Kiryandongo Refugee Settlement. This includes Ugandan IDPs, Bududa survivors, and Congolese, Kenyan, and South Sudanese refugees, who are the main target population for this project. There are also refugees from Burundi and Rwanda.</p> <p>The refugee community has increased lately due to push factors in refugees' countries of origin, especially South Sudan. Push factors include violence, financial instability, famine, lack of reliable services, etc. According to UNHCR statistics, there were 19,730 new South Sudanese arrivals in Kiryandongo between July 1, 2016 and September 25, 2016. The influx of South Sudanese refugees has led to the closure of the settlement to new arrivals, since it cannot accommodate more people. However, numbers continue to increase, mainly due to family members being reunited. Children and mothers constitute about 80% of the settlement's population.</p>	
II. Project Information	
7. Project Goals:	
<ul style="list-style-type: none"> • Upgrade and maintain the Panyadoli Health Care Centres at a high level of hygienic and operating standards. • Provide primary health care to refugees and IDPs living in Kiryandongo Refugee Settlement and to the host population around Kiryandongo Refugee Settlement in accordance with the set SOPs (Standard Operating Procedures) of the UNHCR and Ministry of Health of Uganda. • Provide high-quality services to our beneficiaries by continuing to support a highly trained and professional workforce for service provision. • Expand the Maternity ward and construct a Minor Operating Theatre at Panyadoli Health Centre III. 	
8. Project Objectives:	
<p>To improve the health status of the population:</p> <ul style="list-style-type: none"> • Provide medicine, medical supplies, laboratory supplies, cleaning supplies, and medical support for the smooth and continuous operation of the health facilities. 	

- Continue equipment of newly constructed Maternity ward expansion and Minor Operating Theatre at Panyadoli Health Centre III.
- Support service delivery by employing more medical personnel to match the ever-growing population.
- Maintain highly motivated staff through salary top-ups and salary increments.
- Support and maintain the security of the health centers by employing security guards.
- Stimulate community involvement and raise awareness about health services by promoting healthy living through community outreaches conducted by active community health teams.
- Support the Health Management Information System maintenance (staff and petrol supply).
- Maintain hygiene at the health facility to Best Practice Modern Medicine standards.
- Enhance existing structures for the Malnutrition ward and main health center.
- Promote hygiene through recruitment of more compound and ward cleaners.
- Provide upkeep and renovation of the health center through periodic re-painting and re-plastering.
- Provide overall management of health care in Kiryandongo Refugee Settlement in partnership with UNHCR and the government of Uganda.

9. Summary of RMF/WCF-sponsored activities carried out during the reporting period under each project objective (note any changes from original plans):

- 22 medical personnel were trained in blood transfusion, with the goal of enhancing blood transfusion services at Panyadoli Health Centre III.
- Operating Theatre operations continued to take place at the Panyadoli Health Centre III, with weekly theatre days. This has significantly reduced the number of surgical referrals.
- Conducted integrated outreaches in hard-to-reach areas such as Kimogora, Cluster G, etc.
- Received dignity kits from UNFPA and monthly consignments of medicines from RMF.
- Screened 58 (21 male, 36 female, and 1 gender non-conforming) clients for war-related illnesses and injuries. All 58 required medical rehabilitation.
- In April 2019, 119 (30 male and 89 female) clients were transported for medical rehabilitation to Lacor (118) and Mulago (1). These clients included new patients for medical rehabilitation as well as returning patients who had come for their follow-up reviews.
- In May 2019, 80 (53 female, 25 male, and 2 gender non-conforming) clients with war-related illnesses and injuries were transported for medical rehabilitation from Kiryandongo Refugee Settlement to St. Mary's Hospital Lacor, Mulago Hospital in Kampala, and CORSU Hospital in Kampala. 67 were transported to St. Mary's Hospital Lacor, 1 to Mulago for implant removal, and 1 to CORSU Hospital for surgery.
- In June 2019, 49 (16 male, 33 female) clients with war-related illnesses and injuries were transported for medical rehabilitation from Kiryandongo Refugee Settlement to St. Mary's Hospital Lacor. Of these, 9 (2 male and 7 female) were new clients, and 40 (14 male and 26 female) were review cases.
- Conducted food demonstrations in all the facilities to improve nutrition among the refugee and host communities.
- Successfully conducted Child Days Plus activities for the mass vaccination of children and young adults; all schools were covered, and compilation of the report is ongoing.
- 275 (194 refugees and 81 nationals) attended sensitization sessions at the Mother-Baby Area.
- 117 Village Health Teams (VHTs) received umbrellas, solar flashlights, rainboots, raincoats, and backpacks to facilitate their work.
- Successfully conducted quarterly door-to-door weight-for-height nutrition screening in the settlement and surrounding host community. The data is still undergoing analysis.
- Conducted a Knowledge, Attitude and Practices (KAP) survey on Infant and Young Child Feeding (IYCF), Maternal and Child Health and Nutrition (MCHN), Supplementary Feeding Programs (SFP), and cooking lessons among care groups.
- Received a container of medical equipment from the HUDO Centre through Real Medicine Foundation, further boosting operations at Panyadoli Health Centre III, especially in the new Operating Theatre.
- Construction of a new pit latrine at Panyadoli Health Centre III is about 90 percent completed.
- Instituted an Ebola preparedness committee and continued to conduct Ebola preparedness meetings on a weekly basis.
- Successfully celebrated World Refugee Day, during which several activities, such as Ebola screenings and HIV testing, were held.

- Conducted community dialogues on good hygiene practices in Magamaga, Congodoki, and Bweyale from June 24 to 26. 165 caregivers (22 pregnant women, 116 lactating women, 23 non-pregnant or lactating women, and 4 men) were in attendance.
- Continued to enroll malnourished children and pregnant and lactating women (PLW) in the outpatient therapeutic care (OTC) and SFP programs. Overall, 173 new individuals were enrolled.
- Supported outreaches at Kicwabujingo Health Centre II, Panyadoli Hills Health Centre II, Diika Health Centre II, and Panyadoli Health Centre III.
- Supported monthly VHT meetings in the settlement and at Diika Health Centre II and Kiryandongo Hospital.
- 6 demonstration gardens were established at 6 health facilities: Kiryandongo Hospital, Diika Health Centre II, Kicwabujingo Health Centre II, Nyakadot Health Centre II, Panyadoli Hills Health Centre II, and Panyadoli Health Centre III.
- All patients that came to the health facilities received treatment, and those whose conditions were beyond the capacity of the health facilities were referred accordingly.
- Integrated services that benefit both refugees and the host community were continuously provided. For example, RMF's surgeon works certain days at the nearby district hospital.
- The mental health department continues to conduct community sensitization outreaches on mental illness. The community was sensitized on the prevention of mental illness and relapses and educated on how to provide support by referring cases to a health facility.
- Salaries, wages, and top-up allowances for all RMF staff members were paid in a timely manner. This kept the team's morale high.
- Conducted staff meetings so as to keep the team well-coordinated.
- Carried out Continuous Medical Education (CME) sessions for all medical and support staff at the health facilities, so that team members keep sharing and increasing their knowledge.
- Maintenance and repair were promptly performed for hospital equipment, furniture, water sources, generators, etc.
- The health facility was maintained and cleaned, ensuring that the compound, wards, offices, common areas, and the entire facility are hygienic and conducive to healing and working.
- Strengthened data collection and processing in all health centers of the settlement by ensuring that every health center has an RMF staff member in charge of data. This enables us to have our reports prepared on time.
- Continued to facilitate integrated outreaches. During these outreaches, community members are empowered with preventive health strategies and knowledge concerning malaria, HIV/AIDS, and more.
- In partnership with the Infectious Diseases Institute (IDI), ART clinic staff members were given additional training on HIV/AIDS management and also continued to conduct follow-ups in order to reduce the number of untracked patients. On June 11, 2019, the IDI trained staff on TB case management at Panyadoli Health Centre III.
- Continuous immunization of all under-5 children living in and around the settlement was implemented through the health facilities and outreach activities.
- Facilitated the disease surveillance team to strengthen disease surveillance activities in the settlement and surrounding areas, especially with the measles outbreak.
- Continuous in-house training on medical waste management and occupational hazards was conducted for the cleaners.
- Medical screening of new refugees at Kiryandongo Refugee Settlement was effectively performed during the reporting period.
- Facilitated UNHCR and partners' coordination meetings both in the settlement and regional offices, helping to promote cohesiveness in operations.
- Continued facilitating demonstration gardens at Panyadoli Health Centre III as part of our growing Nutrition department.
- Continued to provide dental services to clients through the dental clinic.
- RMF procured and delivered sufficient cleaning supplies and tools, maintaining a highly motivated, well-equipped team of cleaners who continued to keep the health centers clean and neat.
- Provided sufficient laboratory supplies so that patients requiring laboratory services are tested accordingly.
- Provided sufficient stationery and printing supplies for the program, mainly to support the data department.

- Conducted nutrition assessment, counseling, and support training for people living with HIV/TB.
- On-the-job mentorship is ongoing at the health facilities.

10. Results and/or accomplishments achieved during this reporting period:

- Lifesaving medical treatment and preventive health services were continuously provided to the refugee and host communities through outpatient, inpatient, maternity, nutrition, ART, and outreach services. Thanks to this comprehensive health coverage, very few lives were lost.
- During the reporting period, all patients that came to the health centers were treated, and those whose conditions were beyond the capacity of the health facilities were referred accordingly.
- Received a consignment of operating theatre equipment from UNHCR.
- Construction of waiting and storage areas commenced in facilities such as Kicwabujingo Health Centre II, Nyakadot Health Centre II, and Panyadoli Hills Health Centre II. The projects are the final stages of the construction.
- Received tires for the ambulances from African Initiatives for Relief and Development (AIRD) through UNHCR.
- Reconstruction of the generator housing was done by the contractor at Panyadoli Health Centre III after it was recalled for substandard work.
- 3 motorcycles were procured by UNHCR, which will facilitate follow-ups for clients in the community.
- 30 VHTs received training in mental health from Nipissing University, which was aimed at equipping them with skills to identify and refer patients with mental illness. This was followed with 3 outreaches (2 in the settlement and 1 in the host community) to raise awareness on mental health.
- 80 VHTs were trained by Kiryandongo District Local Government on Community-Led Total Sanitation as one of the approaches to disease prevention.
- 28 VHTs in the settlement were supervised by PATH on the self-administration of the family planning method Sayana Press.
- 35 VHTs were trained by Kiryandongo District Local Government on communicable and non-communicable diseases.
- Received government supply of medicines.
- Received and distributed infrared thermometers at contact points of all the health centers in the settlement for Ebola screening.
- Conducted comprehensive individual case assessment for 4 clients from the community who had breastfeeding problems and other issues. The clients were supported with items including thermos flasks, blankets, infant formula, feeding and cleaning utensils, and soap to enable them care for the affected infants.
- Nutrition Week was held both in the settlement and the immediate host community.
- Stakeholders joint monitoring was conducted for nutrition programs.
- MOH mentorship on management and reporting of nutrition data was conducted for 6 health facilities.
- As a result of the generous compensation for ward and compound cleaners, as well as the constant flow of cleaning supplies, the cleanliness of the health centers and compounds has been kept in excellent condition, benefiting both patients and health workers. This was possible because funds for purchasing cleaning supplies were readily provided, and the supplies were purchased in adequate quantities.
- The ART clinic is implementing the 90-90-90 government strategy of testing all patients that come to the health facility for HIV/AIDS. Those found HIV-positive are immediately enrolled for treatment.
- Provided continuous in-house training of cleaners on medical waste management and related occupational hazards. In this way, the capacity of the cleaners to safely manage their work is being improved.
- Monthly general staff meetings were conducted. These help to resolve any issues and boost teambuilding.
- Continuous in-house trainings were conducted.
- Sensitization meetings and dialogues were continuously conducted.
- RMF has been able to eliminate unnecessary referrals to the district and national hospitals. This has been achieved because RMF now has 4 medical doctors based full-time in Kiryandongo, including a competent surgeon who is conducting most of the surgeries at the nearby district hospital. This has helped to eliminate deaths that could occur because of delayed surgical procedures and has strengthened RMF's cooperation with Kiryandongo Hospital and Kiryandongo District's local government.

- Both incoming referrals from the community and outgoing referrals to other health facilities for secondary or tertiary care were managed efficiently because of the ambulance system that RMF has established. This helped to save lives.
- In partnership with the Infectious Diseases Institute (IDI), RMF has improved laboratory services at Panyadoli Health Centre III. The laboratory now offers a wider range of tests and performs them effectively. These include hepatitis B, hemoglobin estimation, blood grouping, urine gram stain, urinalysis, stool tests, and ZN stain. IDI's plan to elevate the status of the laboratory to a regional hub is still underway.
- Persons of concern have expressed increased confidence in the health facilities as well as in RMF and the treatment being offered.
- Provision of quarterly medical and cleaning supplies has kept the health facilities running effectively. There were very few stock-outs during this reporting period.
- RMF ensured that Panyadoli Health Centre III has essential medicines needed for the management of mental health conditions.
- RMF health centers continue to enjoy maximum security; there were no cases of theft reported for medicines or any other facility equipment.
- The solar-powered water pump is continuing to run successfully, providing clean running water to the clinic wards and offices and greatly increasing hygienic conditions of the clinics.
- RMF has continued to deliver health services according to the tripartite agreement between the UNHCR, OPM, and RMF; we are still performing our duties as UNHCR Health Implementing Partner in Kiryandongo Refugee Settlement and, since 2016, have extended our efforts to Bidibidi Refugee Settlement in Yumbe District. RMF ensures that health indicators are kept within acceptable ranges.
- Continued to facilitate the demonstration gardens at Panyadoli Health Centre III as part of our growing Nutrition department.
- Continued to provide dental treatment through the new dental clinic

11. Impact this project has on the community (who is benefiting and how):

Through RMF/WCF's support, Panyadoli Health Centre III has become a reliable source of healthcare services to the community. As a result, faith has been restored in the settlement's health services, evidenced by the increasing percentage of health facility utilization seen in the attached morbidity reports. The death rates have been reduced significantly both in the refugee and host communities, and we have continued to maintain the reliability of care by recruiting additional staff members, ensuring a reliable referral system, and providing additional medications to meet the needs of the ever-growing population.

The health program has also continued to contribute to the health status of the district through the improvement of existing services and introduction of new services. We have introduced dental services at the health center, and the Operating Theatre is now fully functional; thus, we are able to carry out minor operations at the health center. This has continued to significantly reduce referrals to other health centers in and around the settlement.

In addition to providing quality healthcare services, Panyadoli Health Centre III has also become a source of knowledge. Since RMF has brought in a professional and experienced workforce, medical and social institutions are now sending students to complete their internships here, and our team is doing tremendous work in guiding them. Thus, the project is promoting learning and sharing of knowledge and skills within Uganda.

The program is helping communities overcome ethnic prejudices that each group of people had against the other. This is because RMF employs workers from all different areas and tribes of the country. When people meet together, they learn to appreciate each other. Dinka and Nuer tribes may not like each while in South Sudan, but at the health centers in Kiryandongo Refugee Settlement, they are able to meet and receive the same services. Thus, this program increases the chance for person-to-person interaction. Since the health and other services supported by RMF also cater to both the refugee and host community, peaceful coexistence has been strengthened on a larger scale as well. The host community is able to see the benefits of hosting refugees.

There has been a general improvement in quality of life among the population served. People of concern receive adequate medical care, and they are gradually improving their personal hygiene; they now understand the importance of wearing clean clothes, keeping their homes and land clean, etc. Because the community is

healthier, people engage in productive, income-generating activities, especially farming. We have been able to empower the people to engage in agriculture through use of the demonstration gardens. As a result, a number of families are producing food and vegetables to supplement the food rations provided by WFP, while others are starting small businesses. Psychological health and happiness are also improved because of increased health and activity and the reduced death rate. The variety of services available at our health centers has also reduced the burden of patients having to travel long distances to government health facilities. Overall, the project has helped to eliminate unnecessary loss of life in the community by providing timely treatment and reducing the levels of distress among the people of concern.

Health seeking behaviors and attitudes towards health facility utilization have also improved among people of concern. Previously, many people of concern had a negative view of modern medicine. For instance, expectant mothers were reluctant to give birth at a health facility. With the availability of skilled midwives and ANC services, however, women are increasingly choosing to deliver at the health centers, which has added greatly to safe motherhood in the community. This is because of the high level of customer care that RMF's staff provides, improved even further by our recently constructed Maternity ward expansion and Operating Theatre, as well as the Dental clinic.

The project has been one of the driving factors for extending social services, such as electricity and running water, to Kiryandongo Refugee Settlement.

The project has improved the economy, both directly and indirectly. Refugees that have been employed at the health centers can now earn a salary, which has helped them improve their lives and the lives of their families. Furthermore, the project has created employment for both trained and untrained personnel who perform a variety of jobs. A local trading center has developed near Panyadoli Health Centre III, and other services, such as mobile money transfers, have extended near the facility. The project has also helped create a market for some local products, including food, fruit, and other goods. Because of these activities and the labor force the project has attracted, business in the nearby town of Bweyale has benefited and the town council's tax base has widened (employees pay a local service tax).

Immunization at static and outreach points is high. RMF took an integrated outreach approach with services covering immunization, HCT, ANC, deworming, condom distribution, and health education (including vital information on other cross cutting issues like gender-based violence) since the community is reached with various medical services in consideration of time and cost implications. An integrated team of qualified staff with a clear work plan are now scheduled for regular outreach visits to established sites.

Community health promoters were trained on disease surveillance and prevention, as well as additional role-related training. An assessment of the training needs for the Health Unit Management Committee members has been conducted.

HIV/AIDS counseling and testing services were provided at Panyadoli Health Centre III in accordance with the government's 90-90-90 strategy. The ART clinics have been conducted continuously, condoms have been distributed, and opportunistic infections properly managed with survivors assisted and supported. Communities have been sensitized on prevention, care, and protection against discrimination and stigma, and given strategies to avoid risky lifestyles that lead to the spread of HIV/AIDS. These services are conducted both at static units and through outreaches. The recruitment of HIV/AIDS counselors has helped build confidence among the clients in need of HCT services at the health facility and outreach sessions. HIV/AIDS services utilization is high.

The program is attracting other potential partners to collaborate with RMF in our refugee protection work. For instance, the HUDO Centre provided a container of medical equipment for Panyadoli Health Centre III during this quarter, which is greatly benefitting the Operating Theatre. RMF/WCF's contribution towards the project has also become the basis for negotiating increased UNHCR funding to further improve service delivery.

The funding and work that RMF contributes towards this program have helped make Kiryandongo a model refugee settlement that is now being used as a case study for the world.

12. Number served/number of direct project beneficiaries (for example, average number treated per day or month and if possible, per health condition):

A total of **26,763** outpatients and **3,745** inpatients were treated during the reporting period:

Outpatients

Month	0–4 years		5 years and above		Total
	Male	Female	Male	Female	
April	862	870	1,947	3,346	7,025
May	1,192	1,144	2,978	3,765	9,079
June	1,203	1,233	3,404	4,819	10,659
Total	3,257	3,247	8,329	11,930	26,763

Inpatients

Month	0–4 years		5 years and above		Total
	Refugees	Nationals	Refugees	Nationals	
April	77	95	256	262	690
May	154	200	611	370	1,335
June	234	271	772	443	1,720
Total	465	566	1,639	1,075	3,745

A total of **12** deaths were reported at the clinics during this reporting period:

- April: **3** death(s), 1 caused by head injury, and 2 immediate neonatal deaths (within 24 hours).
- May: **0** deaths were registered.
- June: **9** deaths, 1 caused by respiratory complications, 2 caused by malaria (pediatric), 1 caused by dehydration (pediatric), and 2 immediate neonatal deaths.

13. Number of indirect project beneficiaries (geographic coverage):

Over 200,000 in the refugee settlement and host community combined.

14. If applicable, please list the medical services provided:

Please see sections 9 through 12.

15. Please list the most common health problems treated through this project.

- Malaria
- Respiratory Tract Infections
- Gastrointestinal Disorders
- Skin Diseases
- Urinary Tract Infections
- Acute Diarrhea

16. Notable project challenges and obstacles:

- Collapse of the temporary structure which had been acting as an isolation unit at Panyadoli Health Centre III.
- There were stock-outs of some diabetic, antipsychotic, and hypertensive medicines.
- The worn-out incinerator at Panyadoli Health Centre III does not meet the MOH standards.
- Inadequate toilets for both the Panyadoli Health Centre III facility and staff quarters; for example, 10 staff units are using a 2-stall pit latrine.
- There was a minor stock-out of CSB++, which is given to both children and pregnant mothers.
- Lack of rapid diagnostic tests (RDTs) for malaria testing has resulted in long wait times, since only microscopies can currently be done, which take longer.
- Due to high numbers of patients in the inpatient department (IPD), we have had to accommodate some of the patients on the floor rather than in beds.
- We experienced a high number of patients, causing congestion and high consumption of medicines both at the outpatient department and in the medical wards.

- Due to high malaria prevalence, we have seen an increase in deaths as a result of malaria or malaria-related anemia during this quarter. 3 such cases were recorded.
- There are still transportation challenges hindering follow-ups of ART/TB clients as we wait for the delivery of the 3 motorcycles.
- We have started experiencing cases of prescriptions forged by patients.
- Some of the cultural beliefs that the different tribes within the settlement hold interfere with treatment. For example, in the delivery of twins, the family often prefers to take the mother home immediately to perform some rituals, which can prevent mothers from receiving the necessary 6 hours of postnatal care. Regarding mental illness, many believe it is caused by witchcraft; this also hinders proper treatment.
- Network challenges persist at Panyadoli Health Centre III, and we are awaiting an update on the MTN signal booster that was meant to be installed but has been delayed.

17. If applicable, plans for next reporting period:

- Continue to provide healthcare and nutrition services at the facilities and integrated outreaches.
- Continue to purchase medicines, medical supplies, and cleaning supplies for the health centers.
- Continue door-to-door weight-for-height mass screening.
- Conduct nutrition sensitization on general food distribution.
- Celebrate nutrition week with activities aimed at creating awareness on available nutrition and health services in the settlement and host community, with Action Against Hunger and RMF taking the lead.
- Conduct care group modular training on postnatal and antenatal care.
- Ongoing construction work for waiting areas and stores.
- Finalize KAP survey on nutrition in communities with care group interventions.
- Continue to support medical rehabilitation of victims with war-related illnesses.
- Conduct individual and household preparatory counseling.
- Continue to transport clients for medical rehabilitation.
- Conduct post-rehabilitation documentation and profiling of the rehabilitated clients.
- Continue to support outreaches in the settlement and host community.
- Conduct joint monitoring of nutrition programs with stakeholders.
- Analyze weight-for-height survey data.
- Continue to provide primary health care.
- Support ongoing Mother-Baby Association (MBA) routine sessions, including home visits and follow ups.
- Conduct a cooking demonstration in Cluster N.
- Continue ongoing community dialogues.
- Train the nutrition counselors and volunteers on use of the kitchen garden.
- Continue carrying out sensitization meetings on the prevention of gender-based violence (GBV) and implement a referral pathway for nutrition actors.
- Continue to conduct VHT monthly meetings.
- Continue routine activities for the supplementary feeding program (SFP), outpatient therapeutic care (OTC), and MCHN for children and PLW.
- Continue to conduct care group modules.
- Conduct screenings for war-related illnesses and injuries.

18. If applicable, summary of RMF/WCF-sponsored medical supply distribution and use:

RMF provides medicines, medical supplies, emergency medicines, and medical support. RMF also provides equipment for VHTs.

Please see Appendices.

19. Success story(s) highlighting project impact:

Please see Appendix I.

20. Photos of project activities (file attachment is fine):

Please see Appendices.

III. Financial Information

21. Detailed summary of expenditures within each budget category as presented in your funded proposal (file attachment is fine). Please note any changes from plans.

Sent separately.

APPENDIX A: Operating Theatre



Operating Theatre staff with a medical officer, preparing a surgical kit for one of the procedures to be performed later in the day



Some of the equipment in the Operating Theatre at Panyadoli Health Centre III; the theater is now fully operational with weekly theatre days and minor surgeries being carried out as we await the functionality of the blood bank in order to perform major surgeries.



The new anesthetic machine that was purchased for the new Operating Theatre at Panyadoli Health Centre III



Different surgeons at Panyadoli Health Centre III performing minor surgeries concurrently at the Operating Theatre on one of the theatre days at the health center



The sterilization machine at Panyadoli Health Centre III. This used to sterilize the equipment in the Operating Theatre to prevent infection.

APPENDIX B: Immunizations



Mothers waiting patiently in the queue to get their babies vaccinated at Panyadoli Health Centre III



EPI activities at Nyakadot Health Centre II. RMF believes in immunization and encourages all mothers to bring their babies in for immunization against deadly diseases.





Health workers monitoring babies' growth before immunization. The EPI department at Panyadoli Health Centre III operates every weekday.





Some of the equipment in the EPI section, which is important for maintaining the temperature of vaccines in order to keep them safe and effective for use on babies.

APPENDIX C: Supplementary Feeding Program



Pregnant and lactating mothers at Nyakadot Health Centre II waiting in line for their turn to receive rations from the supplementary feeding program (SFP) point.



The Nutrition Officer at Panyadoli Health Centre III showing part of the demonstration gardens, which were set up in order to guide mothers and other patients at the facility on how to achieve a balanced diet in an affordable and easy way.



The demonstration gardens at Panyadoli Health Centre III are under the care of the Nutrition department.

APPENDIX D: Inpatient Care



A client at the Inpatient Therapeutic Centre at Panyadoli Health Centre III; the baby was admitted to the ITC with severe acute malnutrition (SAM) for close monitoring and management by the nutrition experts.



Mr. Gakwaya, the Nursing Officer in charge of the Inpatient section, attending to patients in the ward for patients 5 years and older.



In an effort to contribute to the empowerment of communities, we run an internship program. Above is an intern from Gulu School of Clinical Medicine and Community Health undergoing internship training at Panyadoli Health Centre III.

APPENDIX E: Outpatient Care



Patients at the triage section of the health center waiting to receive medical assistance. This is the initial stage in seeking medical assistance at the health center.



A lab assistant at Panyadoli Hills Health Centre II drawing a sample from a patient to run the necessary tests as requested by the MCO.



Patients waiting in line at the Panyadoli Hills Health Centre II

APPENDIX F: Stores, Equipment, and Supplies



Some of the medicines in the facility storage areas; it is important to have fully stocked stores at the health centers in order to avoid stock-outs at the dispensaries.



A glimpse into the container that was donated to RMF from the HUDO Centre. The container was delivered to Panyadoli Health Center III.



Representatives from RMF, OPM, UNHCR, the local government, and HUDO Centre witnessing the delivery of the container of medical equipment at Panyadoli Health Centre III.



The container that was delivered at Panyadoli Health Centre III; beside it is a container that was delivered previously.



The Kiryandongo health program received 3 new motorcycles from UNHCR through AIRD. These will help boost community services, such as EPI, as well as increase community surveillance to boost disease detection.

APPENDIX G: Construction of Stores



The construction of the store at Panyadoli Hills Health Centre II is almost complete. The construction is funded through a partnership with Cap Anamur (German Emergency Doctors).



Construction of the store at Nyakadot Health Centre II is still ongoing. This will help decongest the small facility store and also the OPD space, which is occupied by some facility property.

APPENDIX H: Staff Trainings



Staff at Panyadoli Health Centre III during a training on TB case management organized by the Infectious Disease Institute (IDI)

APPENDIX I: Success Stories

Samuel Juma, 6 months

Samuel was brought to the health center on June 12, 2019 by his mother. On arrival, his mother reported that Samuel had vomited all night, and in the morning, she decided to rush him to the health center, because he was weak and couldn't play with his peers around the home. Samuel was admitted with a fever, and he was diagnosed with pneumonia.

While at the health center, he was given intravenous (IV) fluids and medicines, including hydrocortisone (50 mg), gentamycin (400 mg), and ampicillin (400 mg). According to the nurse on the ward, Samuel had signs of dehydration and was immediately given a drip of Ringer's lactate solution and also admitted for monitoring and further management.



Samuel Juma receiving IV fluids and medicines



Samuel with his mother at the health center

Sharon Aweko, 24 months

Sharon Aweko is a Ugandan national living with her grandmother in Kombe village in Kiryandongo District. Her parents are divorced, and because of the divorce, Aweko's mother left her with her father. The father did not have the capacity to look after the baby, and therefore handed her over to the grandmother.

Our Nutrition Officer explained that Sharon was admitted to the Inpatient Therapeutic Care (ITC) unit with grade II edema and grade III dermatosis. At the time of admission on June 10, 2019, Sharon weighed 9.5 kg due to edema. Sharon presented with signs of open wounds on the body, pale skin, and brownish hair. However, she was conscious. During her hospital visit, Sharon's condition improved, and she weighed 8.9 kg.

She was treated with Formula 57 (F-75) therapeutic milk, which was given twice hourly, 12 times per day, as well as antibiotics and zinc oxide in intensive care at the Panyadoli ITC unit.



Sharon recovering from edema in the ITC



An RMF team member attending to Sharon

APPENDIX J

MORBIDITY REPORT

Health Unit: Panyadoli Health Centre III

Month: April 2019

Laboratory Tests

Category	Number of tests		Number positive	
	Male	Female	Male	Female
Malaria blood smear	1,642	2,235	121	299
TB sputum	45	50	2	3
Syphilis screening	0	55	0	5
Pap smear	0	0	0	0
Other lab tests	154	218	0	50

Outpatient Attendance

Category	0-4 years		5 years and above	
	Male	Female	Male	Female
New attendance	499	484	1,455	2,293
Re attendance	8	11	63	51
Total attendance	507	495	1,518	2,344
Referral to unit (all ages)	0	0	2	10
Referrals from units (all ages)	5	5	19	23

Outpatient Diagnoses

Diagnosis	0-4 years		5 years and above		Diagnosis	0-4 years		5 years and above	
	Male	Female	Male	Female		Male	Female	Male	Female
Epidemic – Prone Diseases					34 Death in OPD	0	0	0	0
01 Acute Flaccid Paralysis	0	0	0	0	Maternal and Perinatal Diseases				
02 Cholera	0	0	0	0	35 Abortions	0	0	0	18
03 Dysentery	1	1	1	1	36 Malaria in Pregnancy	0	0	0	11
04 Guinea Worms	0	0	0	0	37 High Blood Pressure in Pregnancy	0	0	0	0
05 Meningitis (meningococcal)	0	0	0	0	38 Obstructed Labor	0	0	0	1
06 Measles	17	10	3	3	39 Hemorrhage related to Pregnancy (APH and/or PPH)	0	0	0	0
07 Newborn Tetanus (0-28 days age)	0	0	0	0	40 Perinatal Conditions (in Newborns (0-28 days)	0	0	0	0
08 Plague	0	0	0	0	Non-Communicable Diseases				
09 Rabies	0	0	0	0	41 Anemia	1	1	2	2

10 Yellow Fever	0	0	0	0	42 Asthma	0	1	4	8
11 Other Viral Hemorrhagic Fevers	0	0	0	0	43 Periodontal Disease	5	2	133	221
12 Other Emerging Infectious Diseases (specify)	0	0	0	0	44 Diabetes Mellitus	0	0	3	12
Other Infectious/Communicable Diseases					45 Gastrointestinal Disorders (non-infectious)	2	1	61	211
13 HIV/AIDS	0	0	0	0	46 Hypertension	1	2	14	17
14 Acute Diarrhea	76	67	38	37	47 Anxiety Disorders	0	0	1	4
15 Persistent Diarrhea	14	22	13	6	48 Mania	0	0	0	0
16 ENT Conditions	7	8	13	9	49 Depression	0	0	1	2
17 Eye Conditions	14	12	29	43	50 Schizophrenia	0	0	1	0
18 Sexually Transmitted Infections (STI)	1	4	23	45	51 Alcohol & Drug Abuse	0	0	4	0
19 Urinary Tract Infections (UTI)	9	6	30	105	52 Childhood Mental Disorders	0	0	0	0
20 Intestinal Worms	18	9	83	114	More Non-Communicable Diseases				
21 Leprosy	0	0	0	0	53 Epilepsy	0	1	26	27
22 Malaria	59	48	118	165	54 Other forms of Mental Illnesses	0	0	30	32
23 Other types of Meningitis	0	0	0	0	55 Other Cardiovascular Diseases	0	0	0	0
24 No Pneumonia-Cough or Cold	132	124	178	230	56 Severe Malnutrition (Kwashiorkor & Marasmus)	22	12	19	36
25 Pneumonia	46	51	46	57	57 Low Weight for Age	0	0	0	0
26 Schocerciasis	0	0	0	0	58 Injuries (Road Traffic Accidents)	0	0	14	10
27 Onchocerciasis	0	0	0	0	59 Injuries (Trauma due to other causes)	0	27	90	75
28 Skin Diseases	34	32	111	103	60 Animal/Snake Bites	2	1	9	8
29 Tuberculosis (New Cases)	0	0	0	0	61 Other Diagnoses (Priority Diseases for District)	0	0	0	0
30 Typhoid Fever	0	0	0	0	All Others	47	60	415	712
31 Tetanus (over 28 days of age)	0	0	0	0		0	0	0	0
32 Sleeping Sickness	0	0	0	0	Total Diagnoses	508	502	1,513	2,410
33 Pelvic Inflammatory Disease (PID)	0	0	0	85					

Morbidity Summary - Number of Patients

Age	Male	Female	Subtotal
0-4 Years	507	495	1,002
5 Years and above	1,518	2,344	3,862
Total	2,025	2,839	4,864

Mortality

S. No.	Section	Number of Deaths	Cause of Death
1	Medical	1	Head Injury
2	Maternity	0	0

3	Pediatric	2	2 Immediate Neonatal Deaths within 24 hours
4	Therapeutic Feeding Center	0	0
5	Surgical	0	0
	Total	3	3

Most Prevalent Diseases in April 2019

S. No.	Name of Disease	Number of Patients Treated
1	Respiratory Tract Infections	664
2	Malaria	390
3	Dental Conditions	361
4	Skin Infections	280
5	Gastrointestinal Disorders	275

Immunization Data – April 2019

Total number of children immunized at Panyadoli Health Centre III:

- Male 470
- Female 401

MORBIDITY REPORT

Health Unit: Panyadoli Health Centre III

Month: May 2019

Laboratory Tests

Category	Number of tests		Number positive	
	Male	Female	Male	Female
Malaria blood smear	1,091	1,778	315	658
TB sputum	5	8	0	1
Syphilis screening	0	122	0	1
Pap smear	0	0	0	0
Other lab tests	197	132	0	42

Outpatient Attendance

Category	0-4 years		5 years and above	
	Male	Female	Male	Female
New attendance	671	642	2,018	2,125
Re attendance	8	11	76	62
Total attendance	679	653	2,094	2,187
Referral to unit (all ages)	8	11	13	9
Referrals from units (all ages)	16	11	19	15

Outpatient Diagnoses

Diagnosis	0-4 years		5 years and above		Diagnosis	0-4 years		5 years and above	
	Male	Female	Male	Female		Male	Female	Male	Female
Epidemic – Prone Diseases					34 Death in OPD	0	0	0	0
01 Acute Flaccid Paralysis					Maternal and Perinatal Diseases				
	0	0	0	0					

02 Cholera	0	0	0	0	35 Abortions	0	0	0	22
03 Dysentery	0	1	0	6	36 Malaria in Pregnancy	0	0	0	33
04 Guinea Worms	0	0	0	0	37 High Blood Pressure in Pregnancy	0	0	0	0
05 Meningitis (meningococcal)	0	0	0	0	38 Obstructed Labor	0	0	0	7
06 Measles	12	9	3	2	39 Hemorrhage related to Pregnancy (APH and/or PPH)	0	0	0	0
07 Newborn Tetanus (0-28 days age)	0	0	0	0	40 Perinatal Conditions (in Newborns (0-28 days))	4	2	0	0
08 Plague	0	0	0	0	Non-Communicable Diseases				
09 Rabies	0	0	0	0	41 Anemia	5	0	2	0
10 Yellow Fever	0	0	0	0	42 Asthma	1	0	0	2
11 Other Viral Hemorrhagic Fevers	0	0	0	0	43 Periodontal Disease	3	1	155	273
12 Other Emerging Infectious Diseases (specify)	0	0	0	0	44 Diabetes Mellitus	0	4	5	3
Other Infectious/Communicable Diseases					45 Gastrointestinal Disorders (non-infectious)	0	0	103	223
13 HIV/AIDS	0	0	0	0	46 Hypertension	0	0	16	24
14 Acute Diarrhea	61	49	56	60	47 Anxiety Disorders	0	0	6	9
15 Persistent Diarrhea	0	0	0	0	48 Mania	0	0	0	0
16 ENT Conditions	11	10	13	17	49 Depression	0	0	4	7
17 Eye Conditions	21	12	42	44	50 Schizophrenia	0	0	3	1
18 Sexually Transmitted Infections (STI)	0	0	11	28	51 Alcohol & Drug Abuse	0	0	9	3
19 Urinary Tract Infections (UTI)	5	6	25	72	52 Childhood Mental Disorders	0	2	4	2
20 Intestinal Worms	21	22	144	129	More Non-Communicable Diseases				
21 Leprosy	0	0	0	0	53 Epilepsy	1	2	39	45
22 Malaria	113	122	441	438	54 Other forms of Mental Illnesses	0	0	38	43
23 Other types of Meningitis	0	0	0	0	55 Other Cardiovascular Diseases	0	0	0	0
24 No Pneumonia-Cough or Cold	137	157	210	249	56 Severe Malnutrition (Kwashiorkor & Marasmus)	33	28	318	243
25 Pneumonia	36	22	41	48	57 Low Weight for Age	0	0	0	0
26 Schocerciasis	0	0	0	0	58 Injuries (Road Traffic Accidents)	0	0	4	4
27 Onchocerciasis	0	0	0	0	59 Injuries (Trauma due to other causes)	5	3	103	77
28 Skin Diseases	38	57	113	118	60 Animal/Snake Bites	0	1	3	2
129 Tuberculosis (New Cases)	0	0	0	0	61 Other Diagnoses (Priority Diseases for District)	0	0	0	0

30 Typhoid Fever	0	0	0	0		All Others	181	175	242	398
31 Tetanus (over 28 days of age)	0	0	0	0			0	0	0	0
32 Sleeping Sickness	0	0	0	0		Total Diagnoses	688	685	2,153	2,753
33 Pelvic Inflammatory Disease (PID)	0	0	0	121						

Morbidity Summary - Number of Patients

Age	Male	Female	Subtotal
0-4 Years	679	653	1,332
5 Years and above	2,094	2,187	4,281
Total	2,773	2,840	5,613

Mortality

S. No.	Section	Number of Deaths	Cause of Death
1	Medical	0	0
2	Maternity	0	0
3	Pediatric	0	0
4	Therapeutic Feeding Center	0	0
5	Surgical	0	0
	Total	0	0

Most Prevalent Diseases in May 2019

S. No.	Name of Disease	Number of Patients Treated
1	Malaria	1,114
2	Respiratory Tract Infections	753
3	Acute Malnutrition	622
4	Dental Conditions	432
5	Skin Infections	326

Immunization Data – May 2019

Total number of children immunized at Panyadoli Health Centre III:

- Male 443
- Female 447

MORBIDITY REPORT

Health Unit: Panyadoli Health Centre III

Month: June 2019

Laboratory Tests

Category	Number of tests		Number positive	
	Male	Female	Male	Female
Malaria blood smear	1,022	3,288	487	1,852
TB sputum	10	6	2	4
Syphilis screening	0	49	0	8
Pap smear	0	0	0	0
Other lab tests	209	328	4	36

Outpatient Attendance

Category	0-4 years		5 years and above	
	Male	Female	Male	Female

New attendance	578	586	2,184	2,760
Re attendance	4	5	78	59
Total attendance	582	591	2,262	2,819
Referral to unit (all ages)	4	2	6	5
Referrals from units (all ages)	26	15	23	18

Outpatient Diagnoses

Diagnosis	0-4 years		5 years and above		Diagnosis	0-4 years		5 years and above	
	Male	Female	Male	Female		Male	Female	Male	Female
Epidemic – Prone Diseases					34 Death in OPD	0	0	0	0
01 Acute Flaccid Paralysis	0	0	0	0	Maternal and Perinatal Diseases				
02 Cholera	0	0	0	0	35 Abortions	0	0	0	30
03 Dysentery	0	0	0	2	36 Malaria in Pregnancy	0	0	0	80
04 Guinea Worms	0	0	0	0	37 High Blood Pressure in Pregnancy	0	0	0	0
05 Meningitis (meningococcal)	0	0	0	0	38 Obstructed Labor	0	0	0	0
06 Measles	4	6	1	1	39 Hemorrhage related to Pregnancy (APH and/or PPH)	0	0	0	0
07 Newborn Tetanus (0-28 days age)	0	0	0	0	40 Perinatal Conditions (in Newborns (0-28 days))	03	02	0	0
08 Plague	0	0	0	0	Non-Communicable Diseases				
09 Rabies	0	0	0	0	41 Anemia	7	11	4	5
10 Yellow Fever	0	0	0	0	42 Asthma	0	0	3	13
11 Other Viral Hemorrhagic Fevers	0	0	0	0	43 Periodontal Disease	1	4	133	220
12 Other Emerging Infectious Diseases (specify)	0	0	0	0	44 Diabetes Mellitus	2	0	5	13
Other Infectious/Communicable Diseases					45 Gastrointestinal Disorders (non-infectious)	5	3	123	377
13 HIV/AIDS	0	0	0	0	46 Hypertension	0	0	8	16
14 Acute Diarrhea	123	93	69	86	47 Anxiety Disorders	0	0	0	0
15 Persistent Diarrhea	0	0	0	0	48 Mania	0	0	0	0
16 ENT Conditions	14	8	13	21	49 Depression	0	0	0	0
17 Eye Conditions	25	21	76	76	50 Schizophrenia	0	0	0	0
18 Sexually Transmitted Infections (STI)	0	6	7	139	51 Alcohol & Drug Abuse	0	0	0	0
19 Urinary Tract Infections (UTI)	7	8	39	135	52 Childhood Mental Disorders	0	0	0	0
20 Intestinal Worms	15	19	87	97	More Non-Communicable Diseases				
21 Leprosy	0	0	0	0	53 Epilepsy	1	1	17	18
22 Malaria	255	233	1,017	920	54 Other forms of Mental Illnesses	0	0	5	5
23 Other types of Meningitis	0	0	0	0	55 Other Cardiovascular Diseases	0	0	0	0

24 No Pneumonia-Cough or Cold	184	158	327	414	56 Severe Malnutrition (Kwashiorkor & Marasmus)	28	30	402	289
25 Pneumonia	51	46	67	66	57 Low Weight for Age	0	0	0	0
26 Schocerciasis	0	0	0	0	58 Injuries (Road Traffic Accidents)	1	2	0	1
27 Onchocerciasis	0	0	0	0	59 Injuries (Trauma due to other causes)	3	11	100	92
28 Skin Diseases	45	43	199	160	60 Animal/Snake Bites	0	2	5	6
29 Tuberculosis (New Cases)	0	0	0	0	61 Other Diagnoses (Priority Diseases for District)	0	0	0	0
30 Typhoid Fever	0	0	0	0	All Others	73	90	417	515
31 Tetanus (over 28 days of age)	0	0	0	0		0	0	0	0
32 Sleeping Sickness	0	0	0	0	Total Diagnoses	847	797	3,124	3,879
33 Pelvic Inflammatory Disease (PID)	0	0	0	82					

Morbidity Summary - Number of Patients

Age	Male	Female	Subtotal
0-4 Years	582	591	1,173
5 Years and above	2,262	2,819	5,081
Total	2,844	3,410	6,254

Mortality

S. No.	Section	Number of Deaths	Cause of Death
1	Medical	1	Respiratory Complication
2	Maternity	0	0
3	Pediatric	8	5 Immediate Neonatal Deaths within 24 hours, 2 Malaria, and 1 Dehydration
4	Therapeutic Feeding Center	0	0
5	Surgical	0	0
	Total	9	9

Most Prevalent Diseases in June 2019

S. No.	Name of Disease	Number of Patients Treated
1	Malaria	2,425
2	Respiratory Tract Infections	1,083
3	Acute Malnutrition	749
4	Gastrointestinal Disorders	508
5	Skin Conditions	447

Immunization Data – June 2019

Total number of children immunized at Panyadoli Health Centre III:

- Male 460
- Female 420

Quarter II Inpatient Admissions

Month	0–4 years		5 years and above		Total
	Refugee	National	Refugee	National	
April	77	95	256	262	690
May	154	200	611	370	1,335

June	234	271	772	443	1,720
Total	465	566	1,639	1,075	3,745

MORBIDITY REPORT

Health Unit: Panyadoli Hills Health Centre II
Month: April 2019

Laboratory Tests

Category	Number of tests		Number positive	
	Male	Female	Male	Female
Malaria blood smear	80	224	16	43
TB sputum	0	0	0	0
Syphilis screening	0	0	0	0
Pap smear	0	0	0	0
Other lab tests	0	0	0	0

Outpatient Attendance

Category	0-4 years		5 years and above	
	Male	Female	Male	Female
New attendance	133	142	185	383
Re attendance	0	0	1	1
Total attendance	133	142	186	384
Referral to unit (all ages)	0	0	0	0
Referrals from units (all ages)	4	2	1	3

Outpatient Diagnoses

Diagnosis	0-4 years		5 years and above		Diagnosis	0-4 years		5 years and above	
	Male	Female	Male	Female		Male	Female	Male	Female
Epidemic – Prone Diseases					34 Death in OPD	0	0	0	0
01 Acute Flaccid Paralysis	0	0	0	0	Maternal and Perinatal Diseases				
02 Cholera	0	0	0	0	35 Abortions	0	0	0	9
03 Dysentery	2	3	0	1	36 Malaria in Pregnancy	0	0	0	0
04 Guinea Worms	0	0	0	0	37 High Blood Pressure in Pregnancy	0	0	0	0
05 Meningitis (meningococcal)	0	0	0	0	38 Obstructed Labor	0	0	0	0
06 Measles	0	0	0	0	39 Hemorrhage related to Pregnancy (APH and/or PPH)	0	0	0	0
07 Newborn Tetanus (0-28 days age)	0	0	0	0	40 Perinatal Conditions (in Newborns (0-28 days)	0	0	0	0

08 Plague	0	0	0	0		Non-Communicable Diseases				
09 Rabies	0	0	0	0		41 Anemia	0	0	0	1
10 Yellow Fever	0	0	0	0		42 Asthma	0	0	1	1
11 Other Viral Hemorrhagic Fevers	0	0	0	0		43 Periodontal Disease	1	0	2	3
12 Other Emerging Infectious Diseases (specify)	0	0	0	0		44 Diabetes Mellitus	0	0	0	0
Other Infectious/Communicable Diseases						45 Gastrointestinal Disorders (non-infectious)	7	4	19	45
13 HIV/AIDS	0	0	0	0		46 Hypertension	0	0	0	0
14 Acute Diarrhea	35	32	7	15		47 Anxiety Disorders	0	0	0	0
15 Persistent Diarrhea	0	0	0	0		48 Mania	0	0	0	0
16 ENT Conditions	1	2	3	3		49 Depression	0	0	0	0
17 Eye Conditions	8	8	3	23		50 Schizophrenia	0	0	0	0
18 Sexually Transmitted Infections (STI)	1	2	3	6		51 Alcohol & Drug Abuse	0	0	0	0
19 Urinary Tract Infections (UTI)	2	4	9	23		52 Childhood Mental Disorders	0	0	0	0
20 Intestinal Worms	7	8	19	49		More Non-Communicable Diseases				
21 Leprosy	0	0	0	0		53 Epilepsy	0	0	0	0
22 Malaria	8	8	18	25		54 Other forms of Mental Illnesses	0	0	7	9
23 Other types of Meningitis	0	0	0	0		55 Other Cardiovascular Diseases	0	0	0	0
24 No Pneumonia-Cough or Cold	60	72	39	52		56 Severe Malnutrition (Kwashiorkor & Marasmus)	0	0	0	0
25 Pneumonia	8	9	2	3		57 Low Weight for Age	0	0	0	0
26 Schocerciasis	0	0	0	0		58 Injuries (Road Traffic Accidents)	1	0	2	0
27 Onchocerciasis	0	0	0	0		59 Injuries (Trauma due to other causes)	1	0	18	0
28 Skin Diseases	17	13	12	30		60 Animal/Snake Bites	0	0	0	0
29 Tuberculosis (New Cases)	0	0	0	0		61 Other Diagnoses (Priority Diseases for District)	0	0	0	0
30 Typhoid Fever	0	0	0	0		All Others	29	24	65	126
31 Tetanus (over 28 days of age)	0	0	0	0			0	0	0	0
32 Sleeping Sickness	0	0	0	0		Total Diagnoses	188	189	229	427
33 Pelvic Inflammatory Disease (PID)	0	0	0	3						

Morbidity Summary - Number of Patients

Age	Male	Female	Subtotal
0-4 Years	133	142	275
5 Years and above	186	384	570
Total	319	526	845

Mortality

S. No.	Section	Number of Deaths	Cause of Death
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1	Medical	0	0
2	Maternity	0	0
3	Pediatric	0	0
4	Therapeutic Feeding Center	0	0
5	Surgical	0	0
	Total	0	0

Most Prevalent Diseases in April 2019

S. No.	Name of Disease	Number of Patients Treated
1	Respiratory Tract Infections	223
2	Acute Diarrhea	89
3	Intestinal Worms	83
4	Gastrointestinal Disorders	75
5	Skin Diseases	72

Immunization Data – April 2019

Total number of children immunized at Panyadoli Hills Health Centre II:

- Male 53
- Female 62

MORBIDITY REPORT

Health Unit: Panyadoli Hills Health Centre II

Month: May 2019

Laboratory Tests

Category	Number of tests		Number positive	
	Male	Female	Male	Female
Malaria blood smear	225	872	91	459
TB sputum	0	0	0	0
Syphilis screening	0	22	0	2
Pap smear	0	0	0	0
Other lab tests	9	9	0	7

Outpatient Attendance

Category	0-4 years		5 years and above	
	Male	Female	Male	Female
New attendance	196	130	383	667
Re attendance	2	1	1	4
Total attendance	198	131	384	671
Referral to unit (all ages)	0	0	0	0
Referrals from units (all ages)	2	2	2	3

Outpatient Diagnoses

Diagnosis	0-4 years		5 years and above		Diagnosis	0-4 years		5 years and above	
	Male	Female	Male	Female		Male	Female	Male	Female

Epidemic – Prone Diseases					34 Death in OPD	0	0	0	0
01 Acute Flaccid Paralysis	0	0	0	0	Maternal and Perinatal Diseases				
02 Cholera	0	0	0	0	35 Abortions	0	0	0	0
03 Dysentery	3	0	1	0	36 Malaria in Pregnancy	0	0	0	7
04 Guinea Worms	0	0	0	0	37 High Blood Pressure in Pregnancy	0	0	0	0
05 Meningitis (meningococcal)	0	0	0	0	38 Obstructed Labor	0	0	0	0
06 Measles	0	0	0	0	39 Hemorrhage related to Pregnancy (APH and/or PPH)	0	0	0	0
07 Newborn Tetanus (0-28 days age)	0	0	0	0	40 Perinatal Conditions (in Newborns (0-28 days))	0	0	0	0
08 Plague	0	0	0	0	Non-Communicable Diseases				
09 Rabies	0	0	0	0	41 Anemia				
10 Yellow Fever	0	0	0	0	42 Asthma	1	0	2	0
11 Other Viral Hemorrhagic Fevers	0	0	0	0	43 Periodontal Disease	0	0	0	0
12 Other Emerging Infectious Diseases (specify)	0	0	0	0	44 Diabetes Mellitus	0	0	0	3
Other Infectious/Communicable Diseases					45 Gastrointestinal Disorders (non-infectious)	0	2	25	75
13 HIV/AIDS	0	0	0	0	46 Hypertension	0	0	1	2
14 Acute Diarrhea	52	51	11	12	47 Anxiety Disorders	0	0	0	0
15 Persistent Diarrhea	0	0	0	0	48 Mania	0	0	0	0
16 ENT Conditions	7	4	4	11	49 Depression	0	0	0	0
17 Eye Conditions	10	4	13	28	50 Schizophrenia	0	0	0	0
18 Sexually Transmitted Infections (STI)	6	9	7	17	51 Alcohol & Drug Abuse	0	0	0	0
19 Urinary Tract Infections (UTI)	4	4	19	50	52 Childhood Mental Disorders	0	0	0	0
20 Intestinal Worms	15	12	53	105	More Non-Communicable Diseases				
21 Leprosy	0	0	0	0	53 Epilepsy	0	0	0	0
22 Malaria	55	51	201	265	54 Other forms of Mental Illnesses	2	2	2	12
23 Other types of Meningitis	0	0	0	0	55 Other Cardiovascular Diseases	0	0	0	0
24 No Pneumonia-Cough or Cold	67	106	59	111	56 Severe Malnutrition (Kwashiorkor & Marasmus)	1	2	0	1
25 Pneumonia	4	6	0	0	57 Low Weight for Age	0	0	0	0
26 Schocerciasis	0	0	0	0	58 Injuries (Road Traffic Accidents)	0	0	0	0
27 Onchocerciasis	0	0	0	0	59 Injuries (Trauma due to other causes)	5	2	16	25
28 Skin Diseases	24	27	26	35	60 Animal/Snake Bites	0	0	0	0
29 Tuberculosis (New Cases)	0	0	0	0	61 Other Diagnoses	0	0	0	0

					(Priority Diseases for District)				
30 Typhoid Fever	0	0	0	0	All Others	37	36	80	90
31 Tetanus (over 28 days of age)	0	0	0	0		0	0	0	0
32 Sleeping Sickness	0	0	0	0					
33 Pelvic Inflammatory Disease (PID)	0	0	0	0					
					Total Diagnoses	293	318	520	849

Morbidity Summary - Number of Patients

Age	Male	Female	Subtotal
0-4 Years	198	131	329
5 Years and above	384	671	1,055
Total	582	802	1,384

Mortality

S. No.	Section	Number of Deaths	Cause of Death
1	Medical	0	0
2	Maternity	0	0
3	Pediatric	0	0
4	Therapeutic Feeding Center	0	0
5	Surgical	0	0
	Total	0	0

Most Prevalent Diseases in May 2019

S. No.	Name of Disease	Number of Patients Treated
1	Malaria	572
2	Respiratory Tract Infections	343
3	Intestinal Worms	185
4	Acute Diarrhea	126
5	Skin Disease	112

Immunization Data – May 2019

Total number of children immunized at Panyadoli Hills Health Centre II:

- Male 57
- Female 56

MORBIDITY REPORT

Health Unit: Panyadoli Hills Health Centre II

Month: June 2019

Laboratory Tests

Category	Number of tests		Number positive	
	Male	Female	Male	Female
Malaria blood smear	123	382	77	235
TB sputum	0	0	0	0
Syphilis screening	0	0	0	0
Pap smear	0	0	0	0
Other lab tests	0	22	0	1

Outpatient Attendance

Category	0-4 years		5 years and above	
	Male	Female	Male	Female
New attendance	262	252	581	886
Re attendance	1	2	0	1
Total attendance	263	254	581	887
Referral to unit (all ages)	1	0	0	0
Referrals from units (all ages)	4	3	3	7

Outpatient Diagnoses

Diagnosis	0-4 years		5 years and above		Diagnosis	0-4 years		5 years and above	
	Male	Female	Male	Female		Male	Female	Male	Female
Epidemic – Prone Diseases					34 Death in OPD	0	0	0	0
01 Acute Flaccid Paralysis	0	0	0	0	Maternal and Perinatal Diseases				
02 Cholera	0	0	0	0	35 Abortions	0	0	0	2
03 Dysentery	1	5	2	1	36 Malaria in Pregnancy	0	0	0	1
04 Guinea Worms	0	0	0	0	37 High Blood Pressure in Pregnancy	0	0	0	0
05 Meningitis (meningococcal)	0	0	0	0	38 Obstructed Labor	0	0	0	0
06 Measles	0	0	0	0	39 Hemorrhage related to Pregnancy (APH and/or PPH)	0	0	0	0
07 Newborn Tetanus (0-28 days age)	0	0	0	0	40 Perinatal Conditions (in Newborns (0-28 days))	0	0	0	0
08 Plague	0	0	0	0	Non-Communicable Diseases				
09 Rabies	0	0	0	0	41 Anemia	2	0	0	1
10 Yellow Fever	0	0	0	0	42 Asthma	0	0	2	1
11 Other Viral Hemorrhagic Fevers	0	0	0	0	43 Periodontal Disease	0	0	2	7
12 Other Emerging Infectious Diseases (specify)	0	0	0	0	44 Diabetes Mellitus	0	0	0	0
Other Infectious/Communicable Diseases					45 Gastrointestinal Disorders (non-infectious)	1	4	19	48
13 HIV/AIDS	0	0	0	0	46 Hypertension	0	0	0	2
14 Acute Diarrhea	58	38	7	19	47 Anxiety Disorders	0	0	0	0
15 Persistent Diarrhea	0	0	0	0	48 Mania	0	0	0	0
16 ENT Conditions	5	3	4	12	49 Depression	0	0	0	0
17 Eye Conditions	14	7	15	21	50 Schizophrenia	0	0	0	0
18 Sexually Transmitted Infections (STI)	3	6	3	10	51 Alcohol & Drug Abuse	0	0	0	0
19 Urinary Tract Infections (UTI)	5	1	15	33	52 Childhood Mental Disorders	0	0	0	0
20 Intestinal Worms	19	21	78	124	More Non-Communicable Diseases				
21 Leprosy	0	0	0	0	53 Epilepsy	0	1	0	0

22 Malaria	121	102	283	341	54 Other forms of Mental Illnesses	0	2	12	0
23 Other types of Meningitis	0	0	0	0	55 Other Cardiovascular Diseases	0	0	0	0
24 No Pneumonia-Cough or Cold	108	98	132	185	56 Severe Malnutrition (Kwashiorkor & Marasmus)	0	0	0	0
25 Pneumonia	7	7	5	4	57 Low Weight for Age	0	0	0	0
26 Schocerciasis	0	0	0	0	58 Injuries (Road Traffic Accidents)	0	0	0	0
27 Onchocerciasis	0	0	0	0	59 Injuries (Trauma due to other causes)	0	0	0	0
28 Skin Diseases	29	26	36	28	60 Animal/Snake Bites	0	0	0	0
29 Tuberculosis (New Cases)	0	0	0	0	61 Other Diagnoses (Priority Diseases for District)	0	0	0	0
30 Typhoid Fever	0	0	0	0	All Others	13	28	88	198
31 Tetanus (over 28 days of age)	0	0	0	0		0	0	0	0
32 Sleeping Sickness	0	0	0	0	Total Diagnoses	386	349	703	1,045
33 Pelvic Inflammatory Disease (PID)	0	0	0	7					

Morbidity Summary - Number of Patients

Age	Male	Female	Subtotal
0-4 Years	263	254	517
5 Years and above	581	887	1,468
Total	844	1,141	1,985

Mortality

S. No.	Section	Number of Deaths	Cause of Death
1	Medical	0	0
2	Maternity	0	0
3	Pediatric	0	0
4	Therapeutic Feeding Center	0	0
5	Surgical	0	0
	Total	0	0

Most Prevalent Diseases in June 2019

S. No.	Name of Disease	Number of Patients Treated
1	Malaria	847
2	Respiratory Tract Infections	523
3	Intestinal Worms	242
4	Acute Diarrhea	122
5	Skin Diseases	119

Immunization Data – June 2019

Total number of children immunized at Panyadoli Hills Health Centre II:

- Male 61
- Female 67

MORBIDITY REPORT

Health Unit: Nyakadot Health Centre II
Month: April 2019

Laboratory Tests

Category	Number of tests		Number positive	
	Male	Female	Male	Female
Malaria blood smear	180	320	81	71
TB sputum	0	0	0	0
Syphilis screening	0	0	0	0
Pap smear	0	0	0	0
Other lab tests	0	0	0	0

Outpatient Attendance

Category	0-4 years		5 years and above	
	Male	Female	Male	Female
New attendance	222	233	243	618
Re attendance	0	0	0	0
Total attendance	222	233	243	618
Referral to unit (all ages)	0	0	0	0
Referrals from units (all ages)	5	1	2	3

Outpatient Diagnoses

Diagnosis	0-4 years		5 years and above		Diagnosis	0-4 years		5 years and above	
	Male	Female	Male	Female		Male	Female	Male	Female
Epidemic – Prone Diseases					34 Death in OPD	0	0	0	0
01 Acute Flaccid Paralysis	0	0	0	0	Maternal and Perinatal Diseases				
02 Cholera	0	0	0	0	35 Abortions	0	0	0	0
03 Dysentery	1	1	1	1	36 Malaria in Pregnancy	0	0	0	7
04 Guinea Worms	0	0	0	0	37 High Blood Pressure in Pregnancy	0	0	0	0
05 Meningitis (meningococcal)	0	0	0	0	38 Obstructed Labor	0	0	0	0
06 Measles	0	0	0	0	39 Hemorrhage related to Pregnancy (APH and/or PPH)	0	0	0	2
07 Newborn Tetanus (0-28 days age)	0	0	0	0	40 Perinatal Conditions (in Newborns (0-28 days))	1	1	0	0
08 Plague	0	0	0	0	Non-Communicable Diseases				
09 Rabies	0	0	0	0	41 Anemia	0	0	0	2
10 Yellow Fever	0	0	0	0	42 Asthma	0	0	1	0
11 Other Viral Hemorrhagic Fevers	0	0	0	0	43 Periodontal Disease	5	3	2	6

12 Other Emerging Infectious Diseases (specify)	0	0	0	0	44 Diabetes Mellitus	0	0	0	0
Other Infectious/Communicable Diseases					45 Gastrointestinal Disorders (non-infectious)	0	0	0	0
13 HIV/AIDS	0	0	0	0	46 Hypertension	0	0	0	0
14 Acute Diarrhea	22	20	0	0	47 Anxiety Disorders	0	0	0	0
15 Persistent Diarrhea	0	0	0	0	48 Mania	0	0	0	0
16 ENT Conditions	6	3	1	2	49 Depression	0	0	0	0
17 Eye Conditions	9	16	6	16	50 Schizophrenia	0	0	0	0
18 Sexually Transmitted Infections (STI)	0	0	4	0	51 Alcohol & Drug Abuse	0	0	0	0
19 Urinary Tract Infections (UTI)	2	5	7	32	52 Childhood Mental Disorders	0	0	0	0
20 Intestinal Worms	4	2	8	17	More Non-Communicable Diseases				
21 Leprosy	0	0	0	0	53 Epilepsy	0	0	2	3
22 Malaria	80	96	129	206	54 Other forms of Mental Illnesses	0	0	1	0
23 Other types of Meningitis	0	0	0	0	55 Other Cardiovascular Diseases	0	0	0	0
24 No Pneumonia-Cough or Cold	56	74	51	118	56 Severe Malnutrition (Kwashiorkor & Marasmus)	7	21	0	4
25 Pneumonia	20	13	7	19	57 Low Weight for Age	0	0	0	0
26 Schocerciasis	0	0	0	0	58 Injuries (Road Traffic Accidents)	0	0	0	0
27 Onchocerciasis	0	0	0	0	59 Injuries (Trauma due to other causes)	4	10	6	6
28 Skin Diseases	36	33	45	1	60 Animal/Snake Bites	0	0	0	0
29 Tuberculosis (New Cases)	0	0	0	0	61 Other Diagnoses (Priority Diseases for District)	0	0	0	0
30 Typhoid Fever	0	0	0	0	All Others	0	0	0	200
31 Tetanus (over 28 days of age)	0	0	0	0		0	0	0	0
32 Sleeping Sickness	0	0	0	0	Total Diagnoses	253	298	271	657
33 Pelvic Inflammatory Disease (PID)	0	0	0	15					

Morbidity Summary - Number of Patients

Age	Male	Female	Subtotal
0-4 Years	222	233	455
5 Years and above	243	618	861
Total	465	851	1,316

Mortality

S. No.	Section	Number of Deaths	Cause of Death
1	Medical	0	0
2	Maternity	0	0
3	Pediatric	0	0
4	Therapeutic Feeding Center	0	0
5	Surgical	0	0

	Total	0	0
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Most Prevalent Diseases in April 2019

S. No.	Name of Disease	Number of Patients Treated
1	Malaria	511
2	Respiratory Tract Infections	299
3	Skin Diseases	115
4	Pneumonia	59
5	Eye Conditions	47

Immunization Data – April 2019

Total number of children immunized at Nyakadot Health Centre II:

- Male 338
- Female 317

MORBIDITY REPORT

Health Unit: Nyakadot Health Centre II

Month: May 2019

Laboratory Tests

Category	Number of tests		Number positive	
	Male	Female	Male	Female
Malaria blood smear	551	1248	366	789
TB sputum	0	0	0	0
Syphilis screening	0	176	0	4
Pap smear	0	0	0	0
Other lab tests	22	23	9	11

Outpatient Attendance

Category	0-4 years		5 years and above	
	Male	Female	Male	Female
New attendance	315	360	500	907
Re attendance	0	0	0	0
Total attendance	315	360	500	907
Referral to unit (all ages)	0	0	0	0
Referrals from units (all ages)	3	2	2	4

Outpatient Diagnoses

Diagnosis	0-4 years		5 years and above		Diagnosis	0-4 years		5 years and above	
	Male	Female	Male	Female		Male	Female	Male	Female
Epidemic – Prone Diseases					34 Death in OPD	0	0	0	0
01 Acute Flaccid Paralysis	0	0	0	0	Maternal and Perinatal Diseases				
02 Cholera	0	0	0	0	35 Abortions	0	0	0	1
03 Dysentery	0	6	1	6	36 Malaria in Pregnancy	0	0	0	21

04 Guinea Worms	0	0	0	0	37 High Blood Pressure in Pregnancy	0	0	0	0
05 Meningitis (meningococcal)	0	0	0	0	38 Obstructed Labor	0	0	0	0
06 Measles	6	5	3	3	39 Hemorrhage related to Pregnancy (APH and/or PPH)	0	0	0	0
07 Newborn Tetanus (0-28 days age)	0	0	0	0	40 Perinatal Conditions (in Newborns (0-28 days))	0	2	0	0
08 Plague	0	0	0	0	Non-Communicable Diseases				
09 Rabies	0	0	0	0	41 Anemia	0	0	0	1
10 Yellow Fever	0	0	0	0	42 Asthma	0	0	3	2
11 Other Viral Hemorrhagic Fevers	0	0	0	0	43 Periodontal Disease	4	1	5	5
12 Other Emerging Infectious Diseases (specify)	0	0	0	0	44 Diabetes Mellitus	0	0	0	0
Other Infectious/Communicable Diseases					45 Gastrointestinal Disorders (non-infectious)	0	0	0	0
13 HIV/AIDS	0	0	0	0	46 Hypertension	0	0	0	4
14 Acute Diarrhea	17	10	28	1	47 Anxiety Disorders	0	0	0	0
15 Persistent Diarrhea	0	0	0	0	48 Mania	0	0	0	0
16 ENT Conditions	13	8	0	7	49 Depression	0	0	0	0
17 Eye Conditions	8	17	15	27	50 Schizophrenia	0	0	0	0
18 Sexually Transmitted Infections (STI)	0	0	0	0	51 Alcohol & Drug Abuse	0	0	0	0
19 Urinary Tract Infections (UTI)	6	2	8	30	52 Childhood Mental Disorders	0	0	0	0
20 Intestinal Worms	4	6	10	24	More Non-Communicable Diseases				
21 Leprosy	0	0	0	0	53 Epilepsy	0	0	8	4
22 Malaria	192	201	374	603	54 Other forms of Mental Illnesses	0	0	0	0
23 Other types of Meningitis	0	0	0	0	55 Other Cardiovascular Diseases	0	0	0	0
24 No Pneumonia-Cough or Cold	67	101	65	173	56 Severe Malnutrition (Kwashiorkor & Marasmus)	14	13	0	11
25 Pneumonia	6	2	1	1	57 Low Weight for Age	0	0	0	0
26 Schocerciasis	0	0	0	0	58 Injuries (Road Traffic Accidents)	0	0	0	0
27 Onchocerciasis	0	0	0	0	59 Injuries (Trauma due to other causes)	2	3	6	12
28 Skin Diseases	44	52	47	72	60 Animal/Snake Bites	0	0	0	0
29 Tuberculosis (New Cases)	0	0	0	0	61 Other Diagnoses (Priority Diseases for District)	0	0	0	0
30 Typhoid Fever	0	0	0	0	All Others	9	11	23	67
31 Tetanus (over 28 days of age)	0	0	0	0		0	0	0	0

32 Sleeping Sickness	0	0	0	0		Total Diagnoses	392	440	597	1,096
33 Pelvic Inflammatory Disease (PID)	0	0	0	21						

Morbidity Summary - Number of Patients

Age	Male	Female	Subtotal
0-4 Years	315	360	675
5 Years and above	500	907	1,407
Total	815	1,267	2,082

Mortality

S. No.	Section	Number of Deaths	Cause of Death
1	Medical	0	0
2	Maternity	0	0
3	Pediatric	0	0
4	Therapeutic Feeding Center	0	0
5	Surgical	0	0
	Total	0	0

Most Prevalent Diseases in May 2019

S. No.	Name of Disease	Number of Patients Treated
1	Malaria	1,370
2	Respiratory Tract Infections	406
3	Skin Diseases	215
4	Eye Conditions	67
5	Acute Diarrhea	56

Immunization Data – May 2019

Total number of children immunized at Nyakadot Health Centre II:

- Male 361
- Female 355

MORBIDITY REPORT

Health Unit: Nyakadot Health Centre II

Month: June 2019

Laboratory Tests

Category	Number of tests		Number positive	
	Male	Female	Male	Female
Malaria blood smear	0	0	0	0
TB sputum	0	0	0	0
Syphilis screening	0	78	0	1
Pap smear	0	0	0	0
Other lab tests	0	15	0	9

Outpatient Attendance

Category	0-4 years		5 years and above	
	Male	Female	Male	Female
New attendance	358	388	561	1,113

Re attendance	0	0	0	0
Total attendance	358	388	561	1,113
Referral to unit (all ages)	0	0	0	0
Referrals from units (all ages)	10	5	3	7

Outpatient Diagnoses

Diagnosis	0-4 years		5 years and above		Diagnosis	0-4 years		5 years and above	
	Male	Female	Male	Female		Male	Female	Male	Female
Epidemic – Prone Diseases					34 Death in OPD	0	0	0	0
01 Acute Flaccid Paralysis	0	0	0	0	Maternal and Perinatal Diseases				
02 Cholera	0	0	0	0	35 Abortions	0	0	0	0
03 Dysentery	4	1	3	3	36 Malaria in Pregnancy	0	0	0	13
04 Guinea Worms	0	0	0	0	37 High Blood Pressure in Pregnancy	0	0	0	0
05 Meningitis (meningococcal)	0	0	0	0	38 Obstructed Labor	0	0	0	0
06 Measles	1	1	1	0	39 Hemorrhage related to Pregnancy (APH and/or PPH)	0	0	0	0
07 Newborn Tetanus (0-28 days age)	0	0	0	0	40 Perinatal Conditions (in Newborns (0-28 days))	0	0	0	0
08 Plague	0	0	0	0	Non-Communicable Diseases				
09 Rabies	0	0	0	0	41 Anemia	4	2	2	4
10 Yellow Fever	0	0	0	0	42 Asthma	0	0	0	3
11 Other Viral Hemorrhagic Fevers	0	0	0	0	43 Periodontal Disease	0	0	5	6
12 Other Emerging Infectious Diseases (specify)	0	0	0	0	44 Diabetes Mellitus	0	0	0	0
Other Infectious/Communicable Diseases					45 Gastrointestinal Disorders (non-infectious)	0	0	0	0
13 HIV/AIDS	0	0	0	0	46 Hypertension	0	0	0	2
14 Acute Diarrhea	8	4	2	0	47 Anxiety Disorders	0	0	0	0
15 Persistent Diarrhea	0	0	0	0	48 Mania	0	0	0	0
16 ENT Conditions	4	6	3	5	49 Depression	0	0	0	0
17 Eye Conditions	10	7	7	20	50 Schizophrenia	0	0	0	0
18 Sexually Transmitted Infections (STI)	0	0	0	0	51 Alcohol & Drug Abuse	0	0	0	0
19 Urinary Tract Infections (UTI)	0	2	6	24	52 Childhood Mental Disorders	0	0	0	0
20 Intestinal Worms	0	0	0	0	More Non-Communicable Diseases				
21 Leprosy	0	0	0	0	53 Epilepsy	0	0	8	2
22 Malaria	244	254	437	762	54 Other forms of Mental Illnesses	0	0	0	0
23 Other types of Meningitis	0	0	0	0	55 Other Cardiovascular Diseases	0	0	0	0
24 No Pneumonia-Cough or Cold	99	93	83	151	56 Severe Malnutrition	11	17	0	11

					(Kwashiorkor & Marasmus)				
25 Pneumonia	9	6	1	3	57 Low Weight for Age	0	0	0	0
26 Schocerciasis	0	0	0	0	58 Injuries (Road Traffic Accidents)	0	0	0	0
27 Onchocerciasis	0	0	0	0	59 Injuries (Trauma due to other causes)	3	5	12	8
28 Skin Diseases	30	58	34	69	60 Animal/Snake Bites	0	0	0	0
29 Tuberculosis (New Cases)	0	0	0	0	61 Other Diagnoses (Priority Diseases for District)	0	0	0	0
30 Typhoid Fever	0	0	0	0	All Others	18	31	15	105
31 Tetanus (over 28 days of age)	0	0	0	0		0	0	0	0
32 Sleeping Sickness	0	0	0	0	Total Diagnoses	445	487	619	1,200
33 Pelvic Inflammatory Disease (PID)	0	0	0	9					

Morbidity Summary - Number of Patients

Age	Male	Female	Subtotal
0-4 Years	358	388	746
5 Years and above	561	1,113	1,674
Total	919	1,501	2,420

Mortality

S. No.	Section	Number of Deaths	Cause of Death
1	Medical	0	0
2	Maternity	0	0
3	Pediatric	0	0
4	Therapeutic Feeding Center	0	0
5	Surgical	0	0
	Total	0	0

Most Prevalent Diseases in June 2019

S. No.	Name of Disease	Number of Patients Treated
1	Malaria	1,697
2	Respiratory Tract Infections	426
3	Skin Diseases	191
4	Eye Conditions	44
5	Acute Malnutrition	39

Immunization Data – June 2019

Total number of children immunized at Nyakadot Health Centre II:

- Male 304
- Female 301