EPID/EPI/1/2013

EPI QUARTERLY RETURN EXPANDED PROGRAMME ON IMMUNIZATION (EPI)

						Year	Quarter		
RDHS area-	F	MOH	area-	ea- For MOOH on					
MOH area-	For ir	nstitutions /GPP only	Institu	tion /GP-		For institutions /GPP only			
(I) CALCULATION	N OF PERCENTAGE CO N OF % COVERAGE OF I on for the year (from the N	NFANTS (Accord	ing to est	imated births) FOI	r Mooh	and RDDHS	ONLY		
CBR for the year pe	er 1000 population		=Say I	3					
∴ Estimated	No. of infants for the year		= <u>A x E</u> 1000	$\underline{B} = Say C$					
∴ Estimated	No. of infants for the quar	ter	=C/4	= Say D					
Total No. of infants	immunized during the qua	arter	=Say I	Ξ					
∴ % coverage	e of infants		=E/D >	< 100					
Registered births f	or previous Year (From B	irth & Immunizatio	n registe	rs of all PHMM)					
	l lab e e	Durral		Estata		Tatal			
Actual population	Urban	Rural		Estate		Total			
			I						
Estimated population	on (From the medical stati	istician) ((A)						
CBR(Crude Birth R	ate)for the year per 1000	(B)							
Estimated infants for	or the current Year	(C)							
Estimated infants for	or the current Quarter	(D)							

(ii) CALCULATION OF % COVERAGE OF PREGNANT WOMEN PROTECTED AGAINST TETANUS

Immunization with Tetanus Toxoid vaccine during pregnancy should be interpreted as follows.

(a) 1 st dose	=	During 1 st pregnancy
(b) 2 nd dose	=	During 1 st pregnancy
(c) 3 rd dose	=	During 2 nd pregnancy
(d) 4 th dose	I	During 3 rd pregnancy
(e) 5 th dose	I	During 4 th pregnancy
(f) One booster	=	During 1 st pregnancy with a written evidence of previously being immunized with six (6) doses of
dose (TTb)		Tetanus Toxoid according as per National EPI schedule (3 doses of DPT in infancy + DPT at 18
		months+ DT at 5 years+ aTd at 12 years) during childhood and adolescent and a gap of 10 years or
		more after last Tetanus vaccination
(g) Not	I	(i) Mothers who have received five doses of tetanus toxoid during previous pregnancies and
indicated		who are now protected and thus do not need a dose of TT for the present pregnancy
		(ii) Mothers who have received 6 doses of Tetanus Toxoid according to the National EPI
		schedule during childhood and adolescent and have received at least one booster dose
		of Tetanus Toxoid during pregnancy or due to trauma within last 10 years

(iii) ENUMERATION OF TETANUS TOXOID DOSES USED FOR OTHER (TRAUMA) CASES

Number of Tetanus Toxoid doses used in the medical institutions (OPD and inward patients), Central Dispensaries (CD) and by the General Practitioners for immunization other than the EPI schedule.

2. EPI QUARTERLY RETURN SHOULD BE SENT

- (i) By O/I.C of Med Institutions/ Estate and General Practitioners to the MOH of the area before the 10th of the month following the quarter.
- (ii) By MOH, two copies to the RDHS/Regional Epidemiologist before the 20th of the month following the quarter.
- (iii) By RDHS/Regional Epidemiologist one copy of corrected MOOH EPI quarterly returns to the Epidemiologist before the 10th of the second month following the quarter.
- (iv) By RDHS/Regional Epidemiologist consolidated district EPI quarterly return to the Epidemiologist before the 10th of the second month following the quarter.

MOH Area / RDHS Division / Institution / General Practitioner :....

ANTIGEN / DOSE No. of Immunization from the returns of Coverage Cove	Year 20	Quarter		Es	timated N	o. of	Infants for	the Quart	er (fron	n page 1, (I) (D)) =	
MOH Clinics Hospitals Estates GPP Total (Est. Births) 7 Infants 1 ⁴¹ dose	ANTIGEN / DOSE				No. of	f Imr	s of	% ** Coverage	% ** Coverage			
Infants 1 st dose Image	_			MO	H Clinics	ŀ	lospitals	Estates	GPP	Total		#
2 nd dose				T								
PENTAVALENT VACONE (PVV)	Infants											
1 ⁴¹ dose												
2 nd dose	PENTAVALEN		(PVV)	T				r	1			
3°ª dose												
DPT 4 th dose 0 0 0RAL POLIC VACCINE (OV) 0 0 0 0 1 th dose 0 0 0 0 0 0 2 th dose 0												
4 th dose		3 rd dose										
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1** dose (on completion of 3** year)												
2 nd dose(on completion of 3 nd year)					INES (M	NR)			1	,		
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Calculate the coverage according to the antigen (PVV1, PVV2, PVV3) which has reported the highest number of immunizations during the quarter

Vaccine and AD Syringes STOCK POSITION & WASTAGE at MOH / RDHS level (Please specify the quantity of syringes in numbers & quantity of vaccines in doses)

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Antigen	Physical	No	No distributed (DIS)		Physical	Total used in	Number of	% Wastage	
	balance at	received	to other institutions		balance	clinics during the	immunizations	70 Wastage	
	the	during	/discarded due to		at the	quarter	performed		
	beginning	the		(EXP)		end of		during the	
	of the	quarter		failure		the		quarter	
	quarter		durin	ig the qu	arter	quarter			(G)
	(A)	(B)		(C)		(D)	(E)	(F)	= 100 – usage
							= (A + B) – (C+D)		= 100 - (F/E)× 100
			DIS	EXP	CCF				= 100 (172)× 100
BCG									
PVV									
DPT									
OPV									
MMR									
JE (Live)									
DT									
TT									
aTd									
Other									
Syringes									
0.05 ml								*1	
(BCG)									
0.5 ml								2	
2 ml								3	
5 ml								4	

*1 - Total BCG immunizations 2 - Total immunizations performed except BCG and OPV 3 - Total BCG vials used 4 – Total MMR, LJE vaccine vials used

Instructions to calculate vaccine wastage and wastage of AD syringes

- a. Data for the number of doses of vaccine and AD syringes used in all clinics (E) for each vaccine/ AD syringes can be obtained by subtracting the number distributed (DIS) to other institutions /discarded due to expiry (EXP) or cold chain failure (CCF) + physical balance at the end of the quarter (C+D) from the physical balance at the beginning of the quarter + doses of vaccine / number of AD syringes received during the quarter (A+B)
- b. Number of Immunizations performed during quarter (F) should be extracted from the total column in the **Quarterly EPI Return** <u>minus</u> number of immunizations performed in institutions/estates where vaccines/AD syringes were not obtained from MOH office.
- c. Please calculate the vaccine wastage as indicated below.

Wastage (G) = 100 - Usage (F/E)*100

Instruction on correct collection & transmission of EPI data from MCH clinics

- a. All immunizations carried out at immunization, antenatal and other clinics should be accurately entered in the **Clinic Immunization Register**.
- b. Entries in the Clinic Immunization Register should be added correctly at the clinic session and totals should be recorded in the **Clinic Summary**.
- c. At the end of every month, entries in the clinic summary should be totaled and immunizations performed during the month should be recorded in the **MCH Quarterly Clinic Return**.
- d. At the end of every quarter the totals in the MCH Quarterly Clinic Return should be sent to the MOH office before the 5th of the following month.
- e. At the MOH office, entries in all Quarterly MCH clinic Returns received from all immunization clinics in the division and data on all immunizations done in schools should be summarized on a ruled master summary sheet and totaled to get the total immunizations performed during the quarter by the health unit staff.
- f. All institutions receiving vaccines direct from the RMSD, should complete a Quarterly EPI Return adhering to the above procedure and send it to the MOH/DDHS of the area before the 10th of the month following the quarter.
- g. MOH/DDHS should make separately total the data receives Quarterly EPI Returns from all institutions, General Practitioners, who receive vaccines from the MOH/DDHS and all the estates in his/her division in time.

- h. MOH/DDHS should make separately total the data received from the above sectors using separate master sheets and the total should be entered in the EPI Quarterly Return under the columns of the respective sector.
- i. Immunizations carried out by different sectors in the MOH/DDHS division for each antigen should be totaled and entered in the "Total" column of the Quarterly Immunization Return.
- J. Immunization coverage for each antigen should be calculated using both estimated births for the quarter and the number of PVV1/PVV2/PVV3, which has reported the highest number of immunizations during the quarter as the denominator and should be entered in the relevant % coverage column.

Name of

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•

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No

Institution

MOH Area

Estate

General Practitioner

k. Immunization coverage for aTd should be calculated using both estimated births for the quarter and the total number of students in grade 7 as the denominator and should be entered in the relevant % coverage column.

Comments & reasons for low/high coverage, high vaccine wastage and issues in use of AD syringes

Whether Return

Received or Not

Yes

Prepared by (MOH/RDHS level)

Name of

•

Institution

MOH Area

Estate

General Practitioner

Name	 	
Designation	 	
Signature	 	
Date	 	

Checked & Signed by (RDHS level)

Name	
Designation	
Signature	
Date	

Checked & Signed by (MOH level)

Whether Return

Received or Not

No

Yes

Name	
Designation	
Signature	
Date	

For office use only

- Completeness checked
 - Timeliness checked
 - Data entry completed