

NLEP Monthly Reporting Form District /State Report								
(* Delete the level District/State whichever not applicable)								
District		State/UT		Reporting Month/ Year				
Tehri Garhwal		UTTARAKHAND		December-2014				
Population of the District / State		Total	SC	ST				
		649723	93560	649				
1.	No of balance new cases at the beginning of the month	1.1 New cases			1.2 Other cases			
		PB			—			
		MB			—			
		Total			03			
2.	No. of New Leprosy Cases detected in the reporting month	During reporting month			Cumulative from 1 st April			
		PB	MB	Total	PB	MB	TOTAL	
		Adult	—	—	—	—	03	03
		Child	—	—	—	—	—	—
		Total	—	—	—	—	03	03
Among new cases – no. from other State	Total	—	—	—	—	01	01	
3.	Among new leprosy cases detected during the reporting month, number of	Female		—		—		
		Disability	Grade -I	—	—	—	01	01
			Grade - II	—	—	—	02	02
		SC	—	—	—	—	—	—
		ST	—	—	—	—	—	—
4.	Number of new leprosy cases deleted during the month	RFT -		—		—		
		Otherwise deleted		—		—		
		Total		—		01		
5.	Number of New leprosy cases under treatment at the end of the month (1.1+ 2 - 4)	—		03		03		
		—		—		—		
6.	Number of "Other cases" recorded and put under treatment	(I) Relapse		—		—		
		(II) Reentered for treatment		—		—		
		(iii) Referred		—		—		
		(IV) Reclassified		—		—		
		Total		—		—		
7.	No. of other cases' deleted from treatment	RFT		—		—		
		Otherwise deleted		—		—		
		Total		—		—		
8.	No. of 'other cases' under treatment at the end of reporting month (1.2 + 6 -7)	—		—		—		
9.	Total number of cases under MDT at the end of month (5+8)	—		03		03		
10.	Drug Stock at the end of the reporting month (if required use extra sheets):							
Blister Pack	Compiled PHC/ Distt. Stock		District /State Store Stock		Total in the District /State			
	Quantity	Expiry Date	Quantity	Expiry Date	Quantity	No. of UT patient (new & other)	Patient month BCP	
MB(A)	02BCP	12/2017	08BCP	4/2018	10BCP	03	3BCP	
MB(C)	—	—	—	—	—	—	—	
PB(A)	—	—	02BCP	8/2017	02BCP	—	—	
PB(C)	—	—	—	—	—	—	—	

NB: please calculate patient-t Month Blister packs for MB (A), MB (C), PB(A) and PB(C) Quarterly in the month of March, June September and December and indicate the same in that respective Monthly Report

REMARKS, (if any) --

Signature of DDO SLO

बिला कुश आंकारा/साधव