



THE REPUBLIC OF UGANDA

## Patient Summary Sheet

Facility:

HSD:

Gender: Age:

Address:

LAST VISIT SUMMARY	
<b>TB Status:</b>	<b>Medications:</b>
<b>WHO Stage:</b>	
<b>OIs &amp; Side Effects:</b>	
<i>Last seen by: on</i>	

RELEVANT CONDITIONS
<b>Relevant Medical Conditions:</b>
<b>Allergies/Toxicities:</b>

ART HISTORY
<b>Current Regimen</b> <i>Start Date</i>
<b>Previous Regimen(s)</b> <i>Start Date</i>

VITALS				
	<b>Weight</b>	<b>WHO Stage</b>	<b>Pregnancy</b>	<b>CD4</b>
Enrollment:				
Art Start:				

WEIGHT GRAPH

LABORATORY RESULTS		
<b>CD4</b>	<b>HB</b>	<b>Viral Load</b>

CD4 GRAPH