

UPHMIS reporting format					
Community Health centre/Block PHC					
State					Month
District					Year
Block			CHC/BPHC Name		
Category	Urban/Rural-		Public/Private-		Delivery Point-Yes/No-
FRU (Yes/No)			Delivery point(If Yes)- L1/L2/L3-		
Section A	Human Resource		Number reported for the month		
A1	HR (Regular/Contractual/Re-appointed) working at facility	Regular		Contractual	
A1.1	Doctors (Level 1 & above)				
A1.2	Physician				
A1.3	Paediatrician				
A1.4	Radiologist				
A1.5	Gynaecologist & Obstetrics				
A1.6	Anaesthetists				
A1.7	Pathologist				
A1.8	General surgeon				
A1.9	Dental surgeon				
A1.10	Other specialist				
A1.11	MBBS male MO				
A1.12	MBBS female MO				
A1.13	Medical officer AYUSH- (Male)				
A1.14	Medical officer AYUSH- (Female)				
A1.15	Staff nurse				
A1.16	X-ray technician				
A1.17	Optometrist				
A1.18	Lab tech. (LT/LA)				
A1.19	Pharmacist				
A1.20	ANMs				
A1.21	Ward boy				
A1.22	Class IV employees (Total)				
A1.23	Administrative staff (UDC & LDC)				
A1.24	ARO available (Y/N) (applicable for only BCHC/BPHC)				
A1.25	HEO available (Y/N) (applicable for only BCHC/BPHC)				
A1.26	BPM available (Y/N) (applicable for only BCHC/BPHC)				
A1.27	BCPM available (Y/N) (applicable for only BCHC/BPHC)				
A1.28	BAM available (Y/N) (applicable for only BCHC/BPHC)				
A1.29	Data entry op./MCTS operator available (Y/N) (applicable for only BCHC/BPHC)				
A1.30	FP counsellors				
A1.31	ARSH counsellors				
A2	ASHA (applicable for only BCHC/BPHC)	Number of ASHAs			
A2.1	ASHA sangini approved in block				
A2.2	ASHA sangini working in block				
A2.3	ASHA Sangini trained				
A2.4	Urban ASHA approved				
A2.5	Urban ASHA filled				
A2.6	ASHA approved as per PIP				
A2.7	ASHA filled against approved				
A2.8	ASHA training	Number of ASHA received training			
		Induction	Round 1	Round 2	Round 3
A2.8.1	ASHA trained in induction/Module 6&7				
Section B	HR training status	Number of trained staff			
		MO (MBBS)	MO(AYUSH)	Staff Nurse	ANMs
B.1	EmOC (Only at FRU)				
B.2	BEmOC				
B.3	LSAS (Only at FRU)				
B.4	SBA				
B.5	DAKSHATA				
B.6	NSSK				
B.7	F-IMNCI				
B.8	IUCD				
B.9	PPIUCD				

B.10	LAP			
B.11	Mini LAP			
B.12	DMPA (Inj. Antara)			
B.13	Comprehensive abotion care (CAC)			
B.14	FP/RMNCH counsellors trained and working at facility			
B.15	ARSH counsellors trained and working at facility			
Section C	Availability of RMNCH+A drugs, supplies and equipment as per 5x5 matrix			
C1	Reproductive health	Closing balance of reporting month		
C1.1	IUCD 375			
C1.2	IUCD 380A			
C1.3	DMPA			
C1.4	OCP			
C1.5	ECP			
C1.6	Condoms			
C1.7	Mifepristone + Misoprostol (MMA)			
C1.8	PTK (Pregnancey test kits)			
C2	Maternal health	Closing balance of reporting month		
C2.1	Inj. Oxytocin			
C2.2	Tab Misoprostol			
C2.3	Tab Alpha methyl dopa			
C2.4	Tab Labelatol			
C2.5	Tab Nifedipine			
C2.6	Inj. Magnesium sulfate			
C2.7	Inj. Tetanus toxoid			
C2.8	Sterile pads			
C2.9	Sanitary napkins			
C2.10	Tab Iron folic acid (IFA)			
C2.11	Haemoglobinometer			
C2.12	Urine albumin kit			
C2.13	IV fluid-ringer lactate			
C2.14	IV fluid-Dextrose (5%)			
C2.15	IV fluid-DNS (Dextroxe normal saline)			
C2.16	IV fluid- normal saline (500 ml)			
C2.17	IV fluid- normal saline (100 ml)			
C2.18	Corticosteroid (Inj Dexamethasone/Betamethasone)			
C2.19	Tab Calcium carbonate with D3			
C2.20	Inj. Labelatol			
C2.21	Inj. Calcium gluconate			
C2.22	Glucose (75 gram) sachet/packets			
C2.23	Cord clamp			
C2.24	Labour table			
C2.25	Kelly's pad			
C2.26	Inj. Insulin			
C2.27	Inj. Anti D for Rh (-) ve PW			
C2.28	Inj. Benzathine penicillin			
C2.29	Blood grouping typing (Yes/No)			
C2.30	HIV screening (Yes/No)			
C2.31	Hepatitis B screening (Yes/No)			
C2.32	Partograph (Yes/No)			
C2.33	Standard 16 protocols displayed at facility (Yes/No)			
C2.34	Availability of five/seven trays as per protocol (Yes/No)			
C2.35	Facility following seven signals of FRU functionality (Yes/No) (applicable for only FRU)			
C3	New born health	Closing balance of reporting month		
C3.1	Inj. Vit K1 (1 mg/ml)			
C3.2	Mucus extractor			
C3.3	Bag and mask (240 ml) with both pre & term mask (size 0,1)			
C3.4	Clean linen/towels for receiving new born			
C3.5	Sterile cord cutting equipment			
C3.6	Designated newborn care corner (Yes/No)			
C3.7	Functional radiant warmer (Yes/No)			
C3.8	Designated space available for KMC (Yes/NO)			

C4	Child health	Closing balance of reporting month
C4.1	ORS	
C4.2	Zinc DT (20mg)	
C4.3	Inj. Adrenaline	
C4.4	Syrup Salbutamol	
C4.5	Salbutamol nebulizing solution	
C4.6	Syrup Albendazole	
C4.7	Inj. Gentamicin	
C4.8	Tab Amoxicillin DT (125 mg)	
C4.9	Tab Amoxicillin DT (250 mg)	
C4.10	Syrup Amoxicillin	
C4.11	Inj. Ceftriaxone or Cefotaxime	
C4.12	Tab Doxycycline	
C4.13	Cap Ampicillin	
C4.14	Inj. Ampicillin	
C4.15	Inj. Amikacin	
C4.16	Tab Metronidazole	
C4.17	Inj. Metronidazole	
C4.18	Syrup Bi-weekly IFA supplementation	
C5	Adolescent health	Closing balance of reporting month
C5.1	Tab Dicyclomine	
C5.2	Tab Albendazole	
C6	Vaccines	Closing balance of reporting month
C6.1	BCG	
C6.2	OPV	
C6.3	Hep B	
C6.4	DPT	
C6.5	Measles	
C6.6	Syrup Vit. A	
C6.7	JE vaccine (where applicable)	
C6.8	IPV	
C6.9	Pentavalent	
C6.10	Cold box	
C6.11	ILR	
C6.12	Deep freezer	
C6.13	Vaccine carrier	
C7	Functional apparatus and logistics	(Yes/No)
C7.1	Weighing machine (Adult)	
C7.2	Weighing machine (Infant)	
C7.3	Height scale	
C7.4	Hub cutter with needle destroyer	
C7.5	Refrigerator	
C7.6	RTI/STI kit	
C7.7	Bleaching powder	
C7.8	Oxygen cylinder functional	
C7.9	BP apparatus with stethoscope	
C7.10	MVA kit/EVA	
C7.11	IUCD kit	
C7.12	NSV kit	
C7.13	Laparoscopic sterilization kit	
C7.14	MiniLap kit	
C7.15	Syphilis testing kit	
C7.16	PPIUCD/ Kelly's forceps	
C7.17	Thermometer	
C7.18	Wall mount thermometer	
C7.19	Fetoscope/Doppler	
C7.20	Autoclave/Boiler	
C7.21	Running water	
C7.22	Soap	
C7.23	Colour coded bins and bags (red/black) in sufficient quantity	
C7.24	Electricity power back-up and generator	
C7.25	Electricity power back-up and invertors	

C7.26	Labor room with attached toilet	
C7.27	MCP cards available in sufficient quantity	
C7.28	Case sheet in sufficient quantity	
C7.29	Functional safety pits available	
C7.30	Supervisory visit format for RI (applicable for only BCHC)	
C8	Other functional equipment at facility	(Yes/No)
C8.1	X-ray machines	
C8.2	USG machines	
C8.3	Boyles trolleys	
C8.4	Pulse oximeter	
C8.5	Semi auto analyser	
C8.6	Computers	
C8.7	Generator	
C8.8	Functional blood storage unit	
C8.9	Refrigerator for blood storage unit	
Section D	Performance indicator	Number reported for the month
D1	Hospital	
D1.1	Beds available	
D1.2	OPD new cases only	
D1.3	X-ray investigations	
D1.4	USG investigations	
D1.5	Plasters	
D1.6	Death due to JE	
D1.7	Death due to AES	
D1.8	Surgeons not conducted any surgeries during the month	
D2	Maternal & new born health	Number of pregnant women
D2.1	Pregnant women visited for ANC check up	
D2.2	PW ANC examination	Weight BP Per abdomen HB Blood group Urine albumin
D2.2.1	Pregnant women examined	
D2.3	High Risk Pregnancy	Number of pregnant women
		Hb<7 gm Hypertension (>140/90) Age 35+ Diabetics Previous history of any complication* Any other
D2.3.1	New pregnant women identified as HRP	
D2.4	Pregnant women Hb<7 gm received iron sucrose	
D2.5	Pregnant women given 180 IFA tablets	
D2.6	Pregnant women given 360 Calcium carbonate with D3 tablet	
D2.7	Rh (-) ve pregnant women received inj. Anti D	
D2.8	Pregnant women delivered before 37 weeks of pregnancy	
D2.9	Pregnant women with true labour pain before 34 weeks of pregnancy	
D2.10	Of which received corticosteroid before 34 week of delivery	
D2.11	Case sheet filled for deliveries conducted at the facility	
D2.12	Pregnant women status	In labour Not in labour
D2.12.1	Arrived in the facility	
D2.12.2	(If referred) referred from :	
D2.12.2.1	SC	
D2.12.2.2	PHC	
D2.12.2.3	Private	
D2.12.2.4	Others (other public hospitals, AWW, ASHA etc.)	
D2.12.3	Admitted in the facility	
D2.12.4	Outcome among arrival	Women Newborn
D2.12.4.1	Referred to higher facility	
D2.12.4.2	Sent home healthy	
D2.12.4.3	Deaths at facility	
D2.12.4.4	Facility based death review conducted	
D2.13	Newborn	
D2.13.1	Still birth : Fresh	

D2.13.2	Still birth : Macerated						
D2.13.3	Newborn where delayed cord cutting procedure followed						
D2.13.4	Newborn received skin to skin care immediately after delivery						
D2.13.5	Newborn received vitamin K1 after delivery						
D2.13.6	Newborn weighted at birth less than 1800 gram						
D2.13.7	LBW received KMC as per the guideline						
D3	Maternal complication	Sent home healthy after discharge	LAMA	Died at facility	In case of out-referral		
					Survive	Died	Status unknown
D3.1	Prolonged labour						
D3.2	Obstructed labour						
D3.3	Rupture of membrane>12 hours without labour						
D3.4	Rupture of membrane >18 hours in labour						
D3.5	Pregnancy induced hypertension						
D3.6	Mild / severe pre-Eclampsia						
D3.7	Eclampsia						
D3.8	Antepartum hemorrhage (APH)						
D3.9	Infection / sepsis						
D3.10	Preterm labour						
D3.11	Premature rupture of membrane						
D3.12	Post-partum hemorrhage (PPH)						
D3.13	Anemia						
D3.14	Others						
D4	Newborn complication	Sent home healthy after discharge	LAMA	Died at facility	In case of out-referral		
					Survive	Died	Status unknown
D4.1	Preterm birth (<37 weeks gestation)						
D4.2	Low birth weight (<2500 grams)						
D4.3	Asphyxia						
D4.4	Infection / sepsis						
D4.5	Birth anomalies						
D4.6	Others						
D5	Child Health	Number of children (upto 5 years)					
		Children (upto 5 Years)		Diarrhoea (2 month - 5 years)		Pneumonia (2 month - 5 years)	
D5.1	OPD						
D5.2	IPD						
D5.3	Received Inj.Gentamycin						
D5.4	Received Tab/Sy. Amoxicillin						
D5.5	Only ORS						
D5.6	Only Zinc						
D5.7	ORS and Zinc						
D5.8	Referred out						
D5.9	Child death	0-28 days (Neonatal death)		29 days -1year (Post natal death)		1-5 years (child death)	
D5.9.1	Number of Children died						
D5.10	Number of children given weekly IFA supplementation (small IFA tab/syrup)						
D5.11	Child Immunization	Number of children					
D5.11.1	Infants 0 to 11 months old who received f-IPV-1						
D5.11.2	Infants 0 to 11 months old who received f-IPV-2						
D5.11.3	Infants 0 to 11 months old who received IPV-im						
D6	Family Planning	Number of services					
D6.1	DMPA (Inj. Antara)	Dose 1	Dose 2	Dose 3	Dose 4	Dose 5	Dose 6
D6.1.1	Acceptors						
D6.2	1st Dose of DMPA	Post Abortion		Post Partum		Post Interval	
D6.2.1	Women						
D6.3	Fix days	Number of fix days					
		FDS			FDOS		
D6.3.1	Planned						
D6.3.2	Held						
D6.4	Services	Number of acceptors in fix days					
		FDS			FDOS		

D6.4.1	LAP					
D6.4.2	ML					
D6.4.3	NSV					
D6.4.4	IUCD					
D6.4.5	DMPA (Inj. Antara)					
D6.4.6	Centchroman					
	Follow-up/complications	Male Sterilization	Female Sterilization	PPIUCD	IUCD	DMPA
D6.4.7	Follow-up cases					
D6.4.8	Complications					
D6.4.9	Beneficiaries received counselling for FP					
D6.4.10	Beneficiaries presented with complete Basket of Choice					
D7	JSSK					
	Beneficiaries received free services under JSSK	PW			Newborn	
D7.1	Drugs and Consumables					
D7.2	Ultrasound test					
D7.3	Diet					
D7.4	Blood transfusion					
D7.5	Diagnostic services					
D7.6	Transported from lower to higher hospitals (IFT)					
D7.7	Transported from home to hospital					
D7.8	Drop back					
D7.9	Free treatment					
D.7.10	JSSK grievance redressal					
D7.10.1	Complain received					
D7.10.2	Complain resolved					
Section E	Process Indicator					(In number/Yes/No)
E1.1	Misbehaviour incidents by patients & relatives					
E1.2	Employees reported absent during inspections					
E1.3	Is the agency hired for bio medical waste management at facility? (Yes/No)					
E1.4	Contract rate per bed (in Rs.)					
E1.5	Bio medical waste lifted by agency during the month					
E1.6	Drugs expired during the month					
E1.7	Stock out including emergency medicine					
E1.8	Grievance redressal cell functional at facility (Yes/No)					
E1.9	Citizen charter available at facility (Yes/No)					
E2	Process Indicators (applicable for BCHC/BPHC)					Number
E2.1	Has the HMIS/MCTS validation committee constituted? (Yes/No)					
E2.2	HMIS/MCTS validation committee meeting held for the month (Yes/No)					
E2.3	Indents made as per rate contract at facility					
E2.4	Value (Rs.) of purchase orders placed as per rate contract					
E2.5	Indent made as per rate contract against which supply not received					
E2.6	Indents made for local purchase					
E2.7	Value (Rs.) of purchase orders placed as per local purchase					
E2.8	Purchase committee meeting held for the month (Yes/No)					
E2.9	Physical verification of stock held during the month (Yes/No)					
E2.10	ASHA Grievance redressal cell (AGRC)					Number of ASHA complaints
		Received	Resolved	Not resolved > 21 days	Referred to higher committee	
E2.10.1	ASHA complaints					
E2.11	ASHA sangini meeting held in Block (Yes/No)					
E2.12	No. of ASHA sangini attended review meeting					
E2.13	ASHA cluster meeting planned					
E2.14	ASHA cluster meeting held					
E2.15	ASHA participated in cluster meetings					
E2.16	ASHA submitted vouchers for the payment of incentives					
E2.17	ASHA received incentives against submitted vouchers					
E2.18	RI quarterly review meeting conducted (Yes/No)					
E2.19	Whether the funds for consolidation of micro plan utilized					