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FEDERAL MINISTRY OF HEALTH - NIGERIA  
NATIONAL PRIMARY HEALTH CARE DEVELOPMENT AGENCY  
Daily Implementation Work plan (DIP) for the Integrated Campaign Services



Integrated campaign \_\_\_\_\_

TICK ALL THAT APPLY

State: Kaduna

Name of Ward Focal Person: \_\_\_\_\_

Name of the Vaccinator 1/Team Supervisor: \_\_\_\_\_

Name of the Vaccinator 2: \_\_\_\_\_

Name of the Vaccinator 3: \_\_\_\_\_

Name of the Recorder 1: \_\_\_\_\_

Name of Crowd controller 1/Screeners: \_\_\_\_\_

Total Population \_\_\_\_\_

LGA: 0/70/5

Ward: D/Est

Name of Health Facility/ Take-off Point: Meaning for mass rd

GSM: \_\_\_\_\_

Team Code: \_\_\_\_\_

Name of the Recorder 2: \_\_\_\_\_ GSM: \_\_\_\_\_

Name of the Recorder 3: \_\_\_\_\_ GSM: \_\_\_\_\_

Town Announcer/House to House Mobilizer: \_\_\_\_\_ GSM: \_\_\_\_\_

Crowd controller 2: \_\_\_\_\_ GSM: \_\_\_\_\_

Target Population		3200	3733	2750	1867	1829	2988	4029	
		Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	
Vaccination Post Code/ Location		Sorka Kuyi	Sorka Kuyi	Katoge	Bamba Limung	SCance gro	~Jallac. 4/8	Shagari, Q. 1/2	
Name of the Settlement(s)		Rawa 4/8	Mitawo, Rawa 4/8	Katoge	Bambawu	Dihigwa Qtrs	~Jallac. 4/8	~Jallac. (Shagari) Qtrs	
Distance between take-off point (HF) and VP		21cm	21cm	21cm	4.51cm	21cm	31cm	21cm	
Distance/time between VPs		15 min	25 min	15 min	35 min	20 min	29 min	30 min	
*Type of Transport Required		motorcycle	-	-	-	-	-	-	
Settlement Profile - Indicate profile of the settlement from the type suggested below		Rural	Rural	Rural	Rural	Rural	Rural	Rural	
*List of schools/other places to be covered in a day and target population		Sorka Kuyi Primary	N	Water point	N	Nursery school	N	Water point	
Social Events		"	"	"	"	"	"	"	
Measles	Measles Target Population to be covered (17% Total Population 9 - 59 months)	544	634	465	387	311	508	685	
	Measles Vaccine Doses required	810	718	520	360	330	540	720	
	Measles Vials required	61	71	52	36	33	54	72	
	Measles Reconstitution syringes (5ml) required	62	73	53	38	35	56	75	
	Measle AD (0.5ml) syringes required	616	717	525	370	336	551	727	
Vitamin A Supplementation	Safety boxes (AD syringes + reconstitution required)	7	8	6	5	4	6	8	
	Vitamin A Target Population 6-59 months (18% of Total Population)	620	693	524	320	223	470	703	
	Blue capsule (100,000 IU)	137	154	116	71	50	104	156	
	Red capsule (200,000 IU)	483	539	408	249	173	366	547	
	Number of scissors	3	5	2	2	1	2	6	
Routine immunization	RI Target Population 6-23 months (7.5% of Total Population)	240	280	206	140	130	211	285	
	IPV Vaccine Doses Required	252	294	224	147	136	222	200	
	IPV Vaccine Vials required	26	30	22	15	14	23	30	
	Penta Vaccine Doses Required	252	294	220	147	136	222	200	
	Penta Vaccine Vials required	26	30	22	15	14	23	30	
	PCV Vaccine Doses Required	252	294	220	147	136	222	300	
	PCV Vaccine Vials required	26	30	22	15	14	23	30	
	RI Reconstitution syringes (5ml) required (X 3 RI vaccines)	882	882	650	441	408	667	899	
	AD (0.5ml) syringes required (X 3 RI vaccines)	9	9	7	5	4	7	9	
	Safety boxes (AD syringes + reconstitution required) (X 3 RI vaccines)	9	9	7	5	4	7	9	
	MenA Vaccine Vials required	9	9	7	5	4	7	9	
	RI Reconstitution syringes (5ml) required (X 5 RI vaccines)	103	103	103	103	103	103	103	
	AD (0.5ml) syringes required (X 5 RI vaccines)	103	103	103	103	103	103	103	
	Safety boxes (AD syringes + reconstitution required) (X 5 RI vaccines)	103	103	103	103	103	103	103	
Profile the settlements as urban, rural, scattered, Border Settlement, Nomadic, Fulani, Riverine/desert									
List of schools/other places to include Quarantine, Islamic, Nursery, Primary, market/Mosque/Church/Motor park/ Playground/Water Point/Private & Government Clinic/ Farms									
*Type of Transport Required - Walk, Motorcycle, Keke NAPEP, Jeep, Boat									





Integrated campaign  
TICK ALL THAT APPLY

State: Kano  
Name of Ward Focal Person: \_\_\_\_\_

Name of the Vaccinator 1/Team Supervisor: \_\_\_\_\_

Name of the Vaccinator 2: \_\_\_\_\_

Name of the Vaccinator 3: \_\_\_\_\_

Name of the Recorder 1: \_\_\_\_\_

Name of Crowd controller 1/Screeners: \_\_\_\_\_

Total Population: \_\_\_\_\_

Address: \_\_\_\_\_

GSM: \_\_\_\_\_

GSM: \_\_\_\_\_

GSM: \_\_\_\_\_

GSM: \_\_\_\_\_

FEDERAL MINISTRY OF HEALTH - NIGERIA  
NATIONAL PRIMARY HEALTH CARE DEVELOPMENT AGENCY  
Daily Implementation Work plan (DIP) for the Integrated Campaign Services

Measles	Vitamin A	RI
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

LGA: D/ Gals

Ward: D/ Galt

Name of Health Facility/ Take-off Point: Ministry for Mass relif

GSM: \_\_\_\_\_

Team Code: \_\_\_\_\_

Name of the Recorder 2: \_\_\_\_\_

Name of the Recorder 3: \_\_\_\_\_

Team Announcer/House to House Mobilizer: \_\_\_\_\_

GSM: \_\_\_\_\_

Crowd controller 2: \_\_\_\_\_

GSM: \_\_\_\_\_

Target Population

Vaccination Post Code Location  
Name of the Settlement(s)  
Distance between take-off point (H/F) and VP  
Distances between H/Fs  
Type of Transport Required

Settlement Profile - Indicate profile of the settlement from the type suggested below

\*List of schools/other places to be covered in a day and target population

Social Events

Measles Target Population to be covered (1% Total Population 8 - 5months)

Measles Vaccine Doses required

Measles Vaccine Doses required

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Day 1

Day 2

Day 3

Day 4

Day 5

Day 6

Day 7

Day 8

Day 9

Day 10

Day 11

Day 12

2228

2476

2776

3453

4388

2154

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