



# MEDICALLY ASSISTED THERAPY (METHADONE) MONTHLY CONSUMPTION REPORT AND REQUEST FORM

FORM P7

County..... Nairobi Sub-County..... Starehe Site/ Facility..... Mathari National TRH  
 Date (dd/mm/yyyy)..... 02/12/2016 Time..... 2.15pm MFL Code..... 13076  
 Implementing partner..... MoH/UMB

Facility Name	County
Mathari National TRH	Nairobi

**Report Period:**

Beginning: ..... 01/11/2016 ..... (Day/month/year) Ending: ..... 30/11/2016 ..... (Day/month/year)

Clients on methadone Totals: ..... 427

Males						Females			
New			Revisit			New		Revisit	
0			362			0		65	
Drug Product	Basic Pack Size	Beginning Balance	Quantity Received this period	Total Quantity dispensed in the month	Losses	Adjustments	Physical Count at store	Days out of stock at the store	Quantity required for RESUPPLY (Continuing patients)
Methadone	Bottle	330,000	0.00	294451		29,351	64,900	0	310,000
5mg/ml									

Comments(Including explanation of losses and adjustments): The Methadone requested for supply in November was received on 2nd December 2016. 310 bottlesx1000ml  
 The methadone dispensing software calibration problem is getting worse. University of Maryland aware waiting from a way forward. This explains the excess stocks

**Report submitted by:**

Dr Charles Waweru	cwm	0715238386	2/12/2016
MAT Pharmacist	Signature	Mobile phone number	Date

**Report Reviewed by:**

Dr Tracy Njonjo	tw	0722719780	5/12/2016
Pharmacist in charge	Signature	Mobile phone number	Date