



DISTRICT HEALTH INFORMATION SYSTEM

evidence based decision making



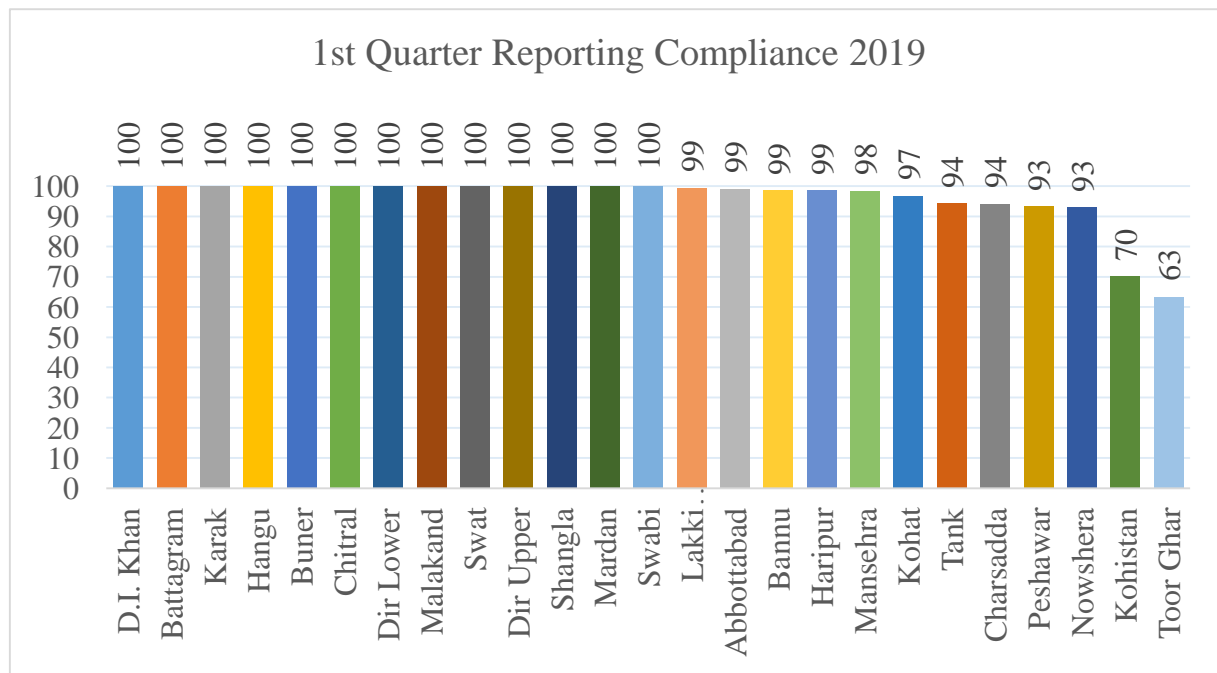
1st Quarter Report 2019

1. REPORTING COMPLIANCE

This indicator represents the percentage of public health facilities that have submitted monthly reports.

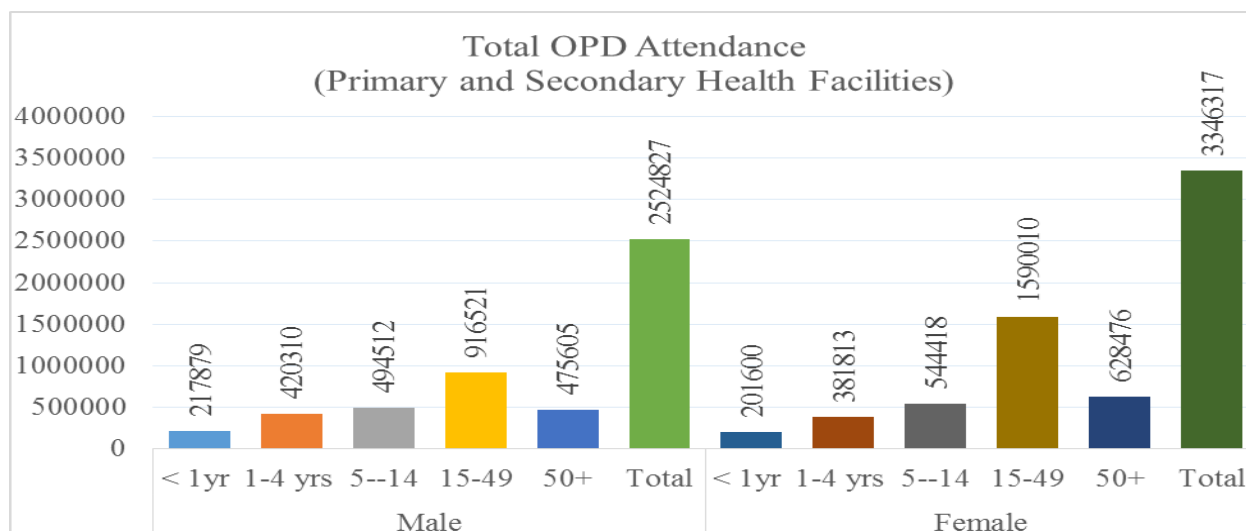
District Wise Percentage of Reporting Compliance.

Graph shows district-wise reporting compliance of all the districts of Khyber Pakhtunkhwa. Nineteen districts among 25 districts have achieved the target i-e reporting more than 95% facilities. Districts Tank, Charsadda, Peshawar and Nowshera reported (94%, 94%, 93% and 93%) and districts Kohistan and Tor Ghar achieved a compliance of 70% and 63% respectively in 1st quarter 2019.



2. General OPD Attendance (Primary Health Care Facilities & Secondary Health Care Facilities)

It refers to the number of people attending and receiving services at health facilities during illness. It assesses magnitude of health services provided in Province Khyber Pakhtunkhwa. It provides gender-wise and age-wise the number of people seeking health services and advice. Number of female patients are more than the males.

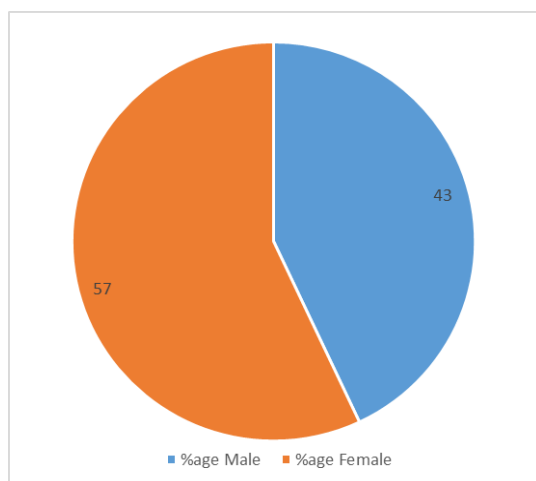


Graph shows the General OPD in primary and secondary care health facilities with gender wise breakup of male and female patients of the province.

Age wise breakup of patients visiting the OPDs is consistent in 1st quarter 2019, the figures shows that in the case of male OPD attendance of age group from 1 to 14 years is **(1132701)**, which is **44.86%** of the total of male OPD **(2524827)**.

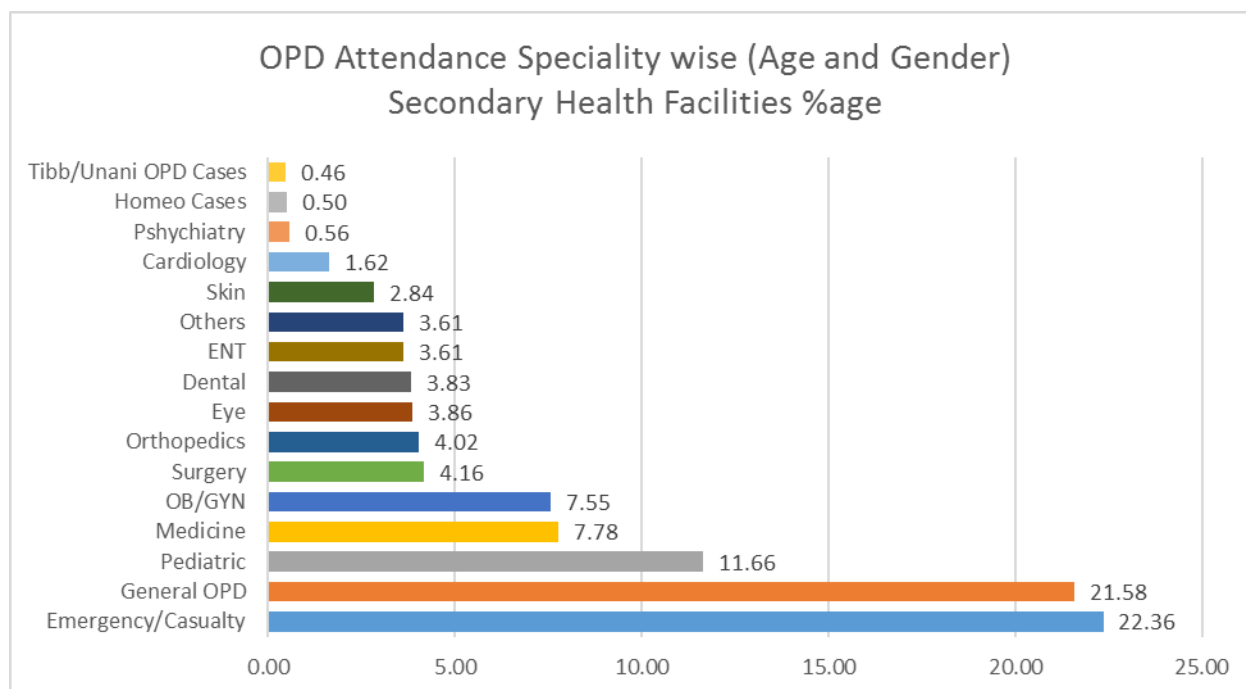
Similarly in case of female OPD attendance of age group from 1 to 14 is **(1127831)**, which is **36.51%** of the total female OPD attendance **(3346317)**.

In General OPD Attendance (Primary & Secondary Health Care Facilities) 56.54% female and 43.46% male patients visited.



3. Specialty Wise Break Up of Patients

The indicator gives us an idea about the distribution of patients to different specialties enabling the reader to broadly categorize and assess the flow of patients to different specialties available in the health facilities.



Graph and table of the indicator **OPD Attendance Specialty wise** shows the percentage of total new visits (Patients) of in the facility to different specialties (i.e General OPD, Medicine, Surgery, Pediatric etc).

Total Specialty wise OPD		3697318	
Sr.#	Specialty	New Visits	%age
1	Emergency/Casualty	826551	22.36
2	General OPD	797913	21.58
3	Pediatric	430965	11.66
4	Medicine	287532	7.78
5	OB/GYN	279065	7.55
6	Surgery	153789	4.16
7	Orthopedics	148692	4.02
8	Eye	142822	3.86
9	Dental	141726	3.83
10	ENT	133356	3.61
11	Others	133354	3.61
12	Skin	105160	2.84
13	Cardiology	59993	1.62
14	Pshychiatry	20683	0.56
15	Homeo Cases	18533	0.50
16	Tibb/Unani OPD Cases	17184	0.46

Under the specialty an emergency/casualty, the number and percentage of patients are on top and stands at **(826551)** with **22.36%**, General OPD on second number and is **(797913)** which is **21.58%**.

Number of patients in the specialty of Pediatric and Medicine are **430965** and **287532** which is **11.66%** and **7.78%**.

4. Diseases Pattern in Out Patient Department (of the total 43 priority diseases)

This indicator will help to understand which disease/cases were attended at the health facilities in a district.

The indicator can trigger a response in terms of additional resources allocation or redistribution of resources according to the disease pattern, or initiating specific preventive, promotive and or curative services at specific area/catchment population.

For the purpose of the DHIS 43 diseases have been selected as “Priority Diseases” in consultation with the other stakeholders, the Government of Khyber Pakhtunkhwa has adopted these enlisted priority diseases in consistency with the national decision.

These diseases are listed in below table, which present the numbers of patients provided care at Primary and Secondary Level Health Facilities.

Total OPD 1st Quarter Report (Jan To March) 2019		5,871,755	
S.No	Disease	Total	%age
1	Acute (upper) Respiratory Infections (ARI)	873238	14.87
2	Fever due to other causes	223905	3.81
3	Urinary Tract Infections	194576	3.31
4	Hypertension	166086	2.83
5	Diarrhoea/Dysentery in under 5 yrs	155880	2.65
6	Dental Caries	146501	2.50
7	Diarrhoea/Dysentery in >5 yrs	128939	2.20
8	Peptic Ulcer Diseases	111144	1.89
9	Diabetes Mellitus	92764	1.58
10	Suspected Malaria	83042	1.41
11	Scabies	72996	1.24
12	Worm infestation	67719	1.15
13	Asthma	66254	1.13
14	Road traffic accidents	61669	1.05
15	Enteric / Typhoid Fever	50550	0.86
16	Depression	45740	0.78
17	Otitis Media	44870	0.76
18	Pneumonia under 5 years	41412	0.71
19	Dermatitis	40957	0.70
20	Pneumonia >5 years	27356	0.47
21	Suspected Viral Hepatitis	20590	0.35
22	Ischemic Heart Disease	16854	0.29
23	TB Suspects	16024	0.27
24	Fractures	15591	0.27
25	Cataract	14601	0.25
26	Dog bite	14180	0.24
27	Chronic Obstructive Pulmonary Diseases	13571	0.23
28	Benign Enlargement of Prostrate	5797	0.10
29	Burns	5694	0.10
30	Epilepsy	4481	0.08
31	Glaucoma	3642	0.06
32	Cutaneous Leishmaniasis	3509	0.06
33	Drug Dependence	3291	0.06

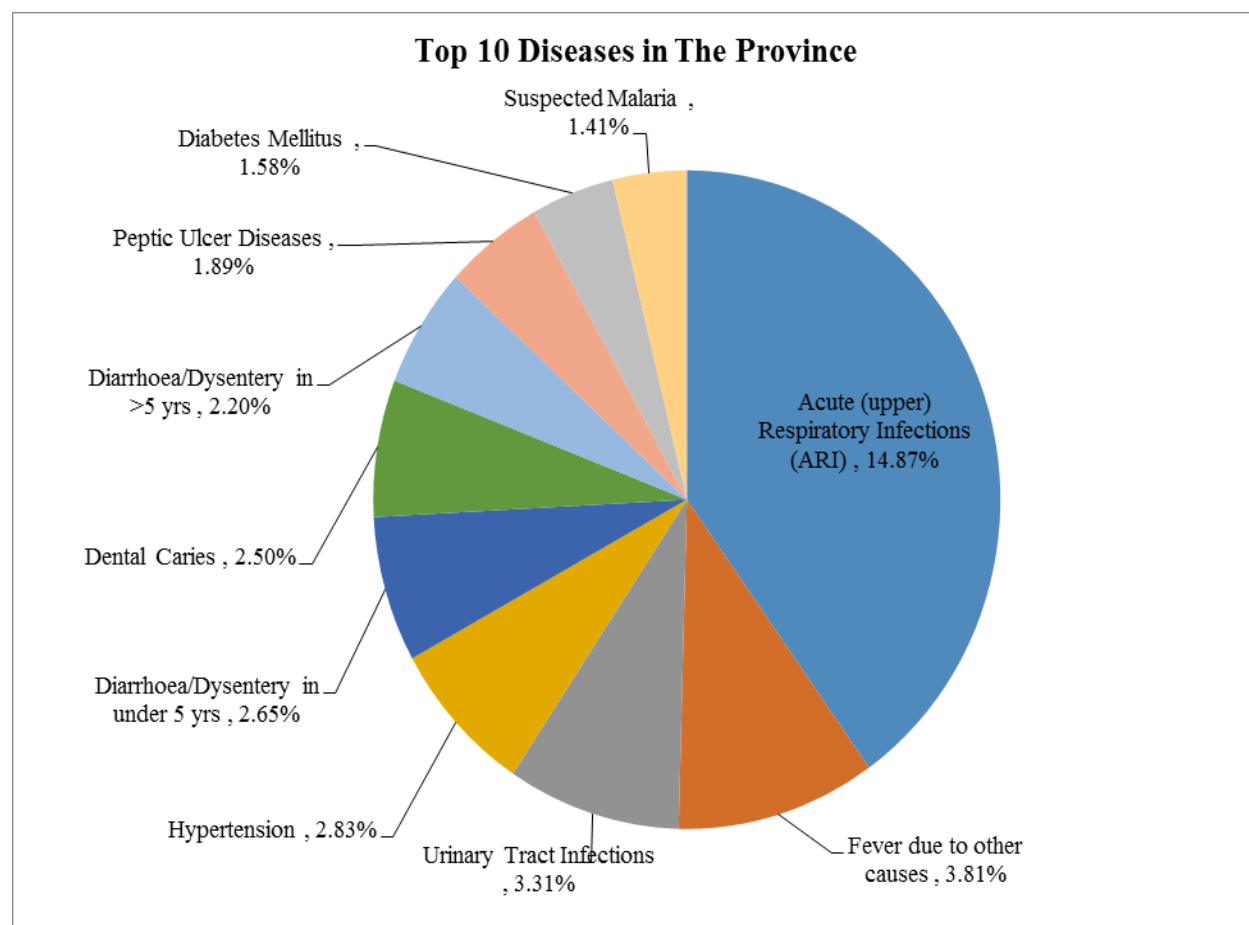
34	Cirrhosis of Liver	3177	0.05
35	Sexually Transmitted Infections	3151	0.05
36	Trachoma	3095	0.05
37	Suspected Measles	2619	0.04
38	Nephritis/Nephrosis	2125	0.04
39	Suspected Meningitis	1329	0.02
40	Acute Flaccid Paralysis	854	0.01
41	Snake bits (with signs/symptoms of poisoning)	202	0.003
42	Suspected Neonatal Tetanus	102	0.002
43	Suspected HIV/AIDS	2	0.00003
Total Priority Disease		2,850,079	48.54

Top Ten Diseases (of the total 43 priority diseases) Khyber Pakhtunkhwa Province

Acute Respiratory Infections stands **873,238** which is **14.87%** of these patients. Diarrhoea/Dysentery under and over 5 years stands 155,880 with **2.65%** and **128,939** with **(2.20%)** of the total in 1st quarter 2019. Fever due to other causes stands at **223,905 (3.81%)** patients.

Cases of Urinary Tract Infections and Hypertension disorders are **194,576** which are **3.31%** and **166,086 (2.83%)** of the total patients. Dental Caries and Peptic Ulcer Diseases are **146,501** with **2.50%** and **111,144** with **1.89%** in 1st quarter 2019.

Diabetes Mellitus patients' in 1st quarter 2018 stands **92,764** with **1.58%**. Suspected Malaria cases are reported **83,042** with **(1.41%)**.



5. COMMUNICABLE AND NON COMMUNICABLE DISEASE

Out of 43 priority diseases, 19 are communicable and 24 are non-communicable diseases. Subsequent analysis shows the most common diseases and disease-wise breakup.

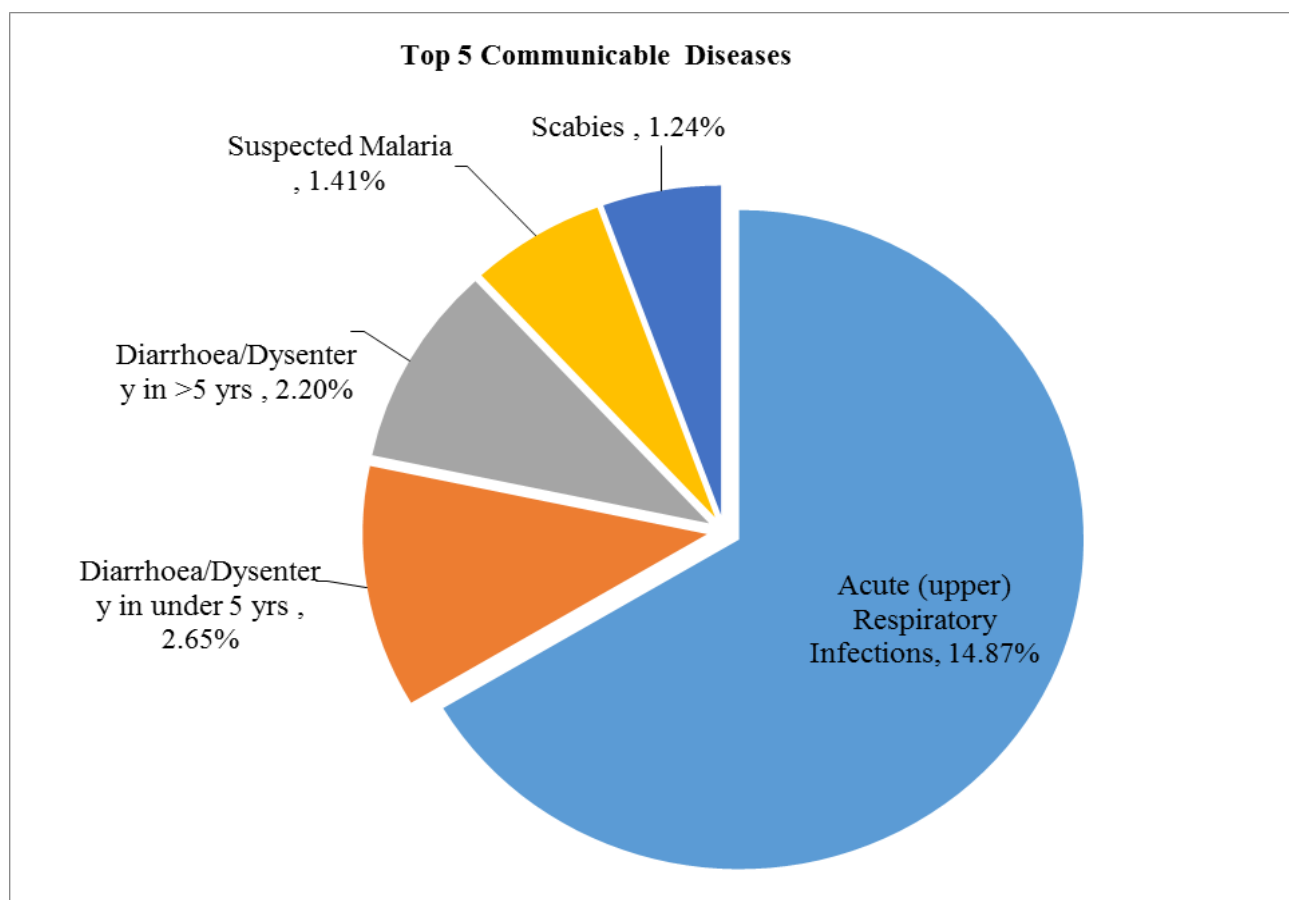
In 1st quarter 2019, total numbers of communicable diseases are **1,552,407 (26.44%)**, whereas non-communicable diseases are **1,835,823 (21.86%)**.

a. COMMUNICABLE DISEASES

Communicable disease is an infectious **disease** transmissible (as from person to person) by direct contact with an affected individual or the individual's discharges or by indirect **means** (such as by a vector eg mosquito).

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19	Suspected HIV/AIDS	2	0.00003
Total		1,552,407	26.44

Acute Respiratory Infections and diarrhea/dysentery under and over 5 years constitute **1,158,057** with **19.72%** of these patients. Suspected Malaria stands **83,042** with **1.41%** patients in 1st quarter 2019. Scabies cases are reported **72,996** in figures and **(1.24%)** in percentile in 1st quarter 2019. The department should take adopt programmatic approach to control the disease.



b. NON-COMMUNICABLE DISEASES

A **non-communicable disease** (NCD) is a medical condition or **disease** that is not caused by infectious agents (**non-infectious** or **non-transmissible**). NCDs can refer to chronic **diseases** which last for long periods of time and progress slowly.

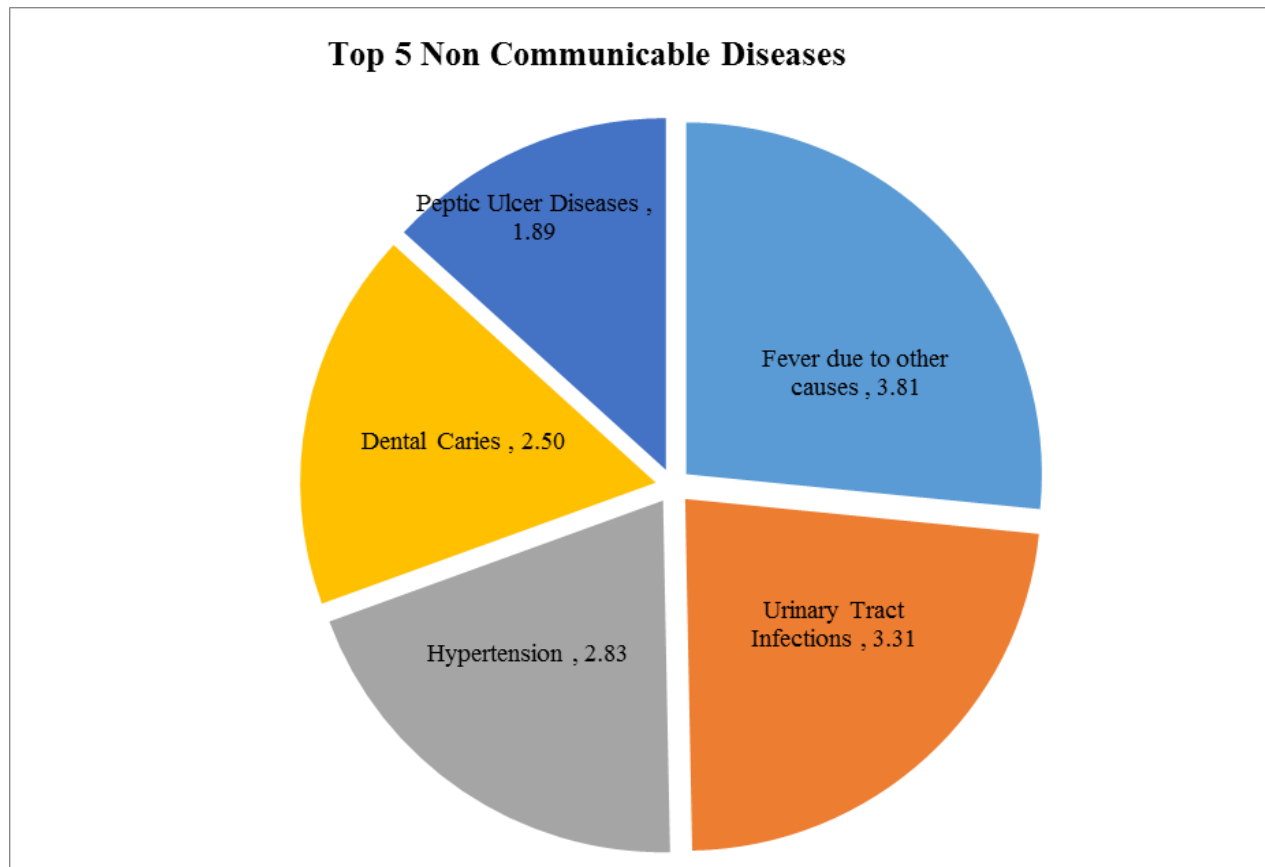
NCDs are the leading cause of death globally.

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22	Cirrhosis of Liver	3177	0.05
23	Nephritis/Nephrosis	2125	0.04
24	Snake bits (with signs/symptoms of poisoning)	202	0.003
Total		1,297,672	22.10

The fever due to other causes and Urinary Tract Infections in table are stands **223,905 (3.81%)** and **194576 (3.31%)** in 1st quarter 2019.

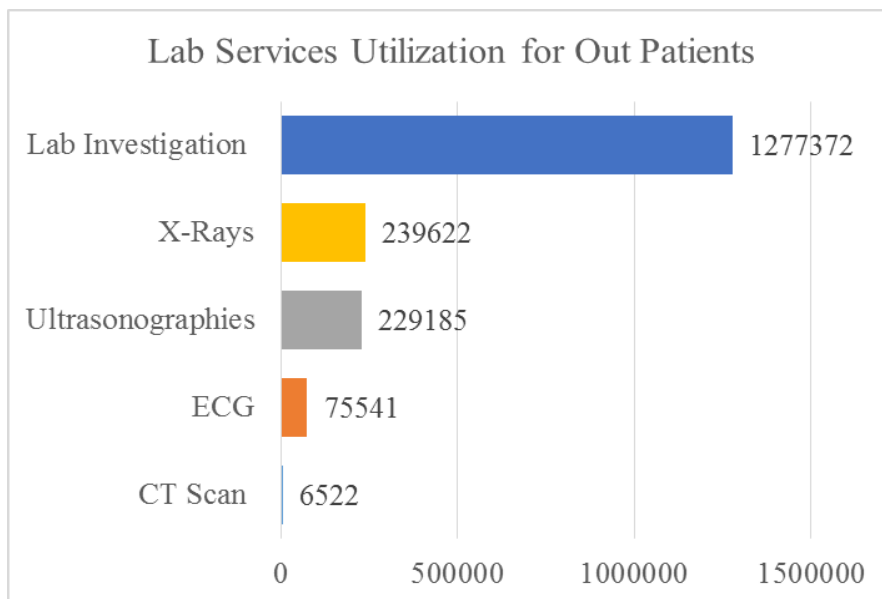
Table and Graph illustrates the trend of non-communicable diseases in Khyber Pakhtunkhwa province during 1st quarter 2019.



6. Lab Services Utilization for Out Door Patients

This indicator indicates the utilization of laboratory services at the facility and also gives a measure of the proportion of outdoor patients receiving diagnostic services from health facility.

No. of OPD Patients	5,885,092
CT Scan	6522
ECG	75541
Ultrasonographies	229185
X-Rays	239622
Lab Investigation	1277372

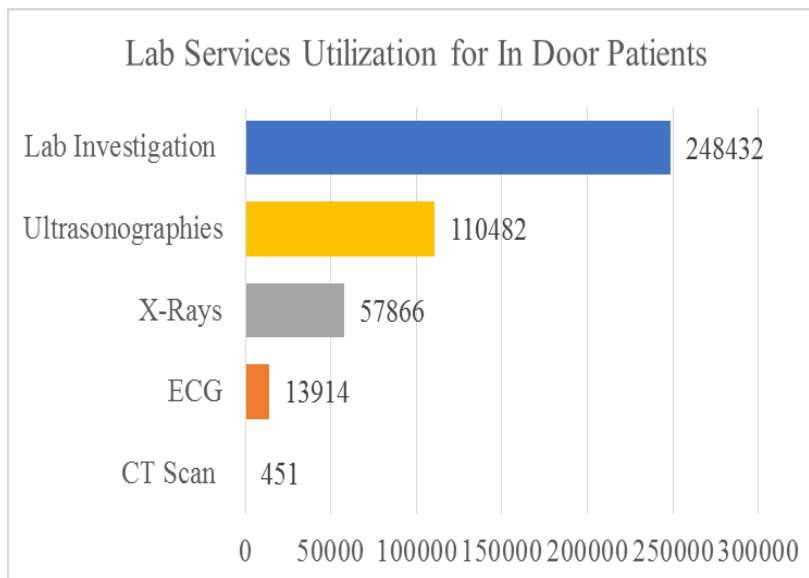


The graph reflects the figures and show quality of care in terms of utilization of investigation services.

7. Lab Services Utilization for In Door Patients

This indicator indicates the utilization of laboratory services at the facility and also gives a measure of the proportion of indoor patients receiving lab services from the laboratory of the health facility. In addition statistics are gathered for other diagnostic investigations.

No. of Admissions	149682
CT Scan	451
ECG	13914
X-Rays	57866
Ultrasonographies	110482
Lab Investigation	248432



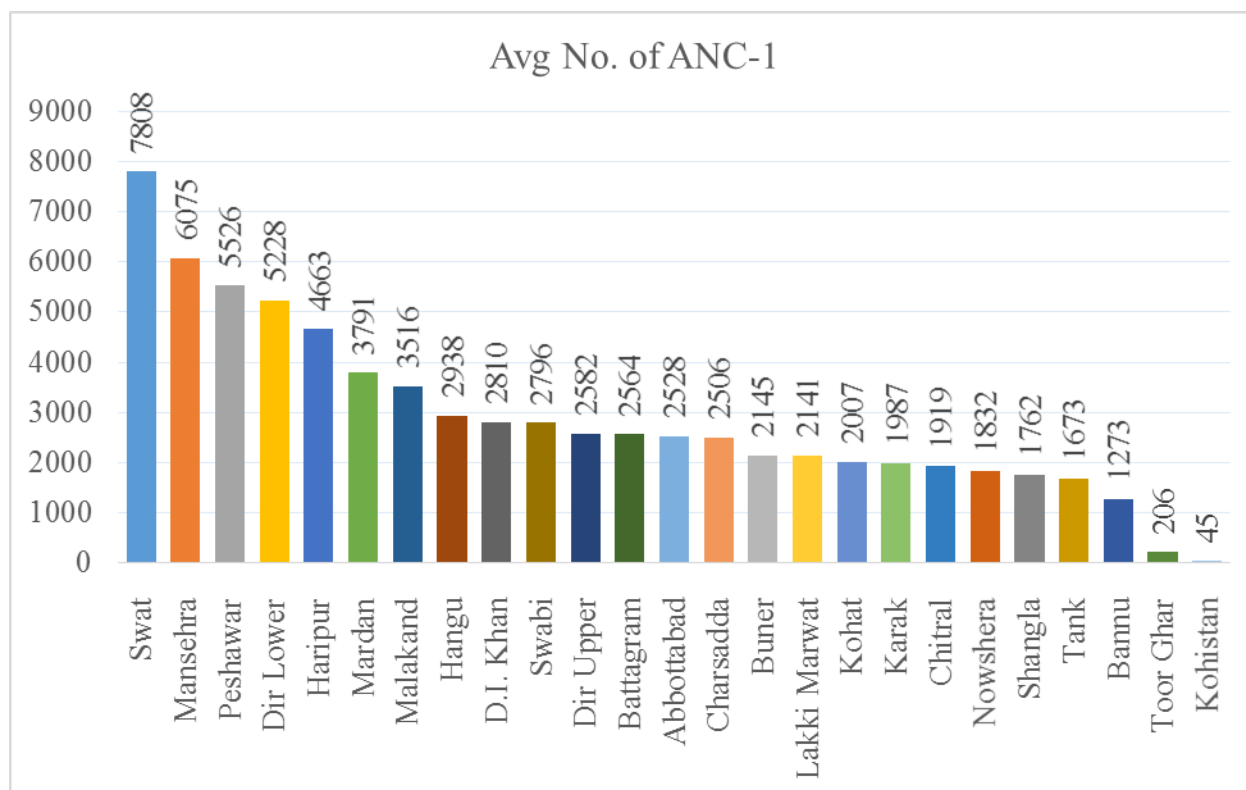
8. Average number of Antenatal Care Services in the Facility

Antenatal care is an indicator of access and utilization of health care services during pregnancy. It is a measure of the percent of pregnant women who utilize antenatal care services provided at the government health facility at least once during their current pregnancy.

This indicator indicates that how many pregnant women in the catchment area population are covered through the facility for antenatal care services. It reflects the integrity of referral linkages between LHW and the facility based health care providers, the extent of mobilization of pregnant women or their families to utilize maternal health services from the government health facilities and or the trust of the community on the public health facilities/providers. It will also provide information about the registration of pregnant women in health facilities for availing the ANC-1 services.

S. No	District	Jan	Feb	Mar	Avg. No. of ANC-1
1	Swat	7386	7365	8674	7808
2	Mansehra	4835	7020	6370	6075
3	Peshawar	5429	5434	5714	5526
4	Dir Lower	5295	5352	5037	5228
5	Haripur	4319	4655	5015	4663
6	Mardan	3219	3484	4671	3791
7	Malakand	3709	3083	3755	3516
8	Hangu	3183	2603	3027	2938
9	D.I. Khan	2694	2717	3019	2810
10	Swabi	3083	2380	2926	2796
11	Dir Upper	2377	2356	3014	2582
12	Battagram	2343	2509	2839	2564
13	Abbottabad	1915	2066	3603	2528
14	Charsadda	3097	1452	2968	2506
15	Buner	2135	2083	2218	2145
16	Lakki Marwat	1321	2715	2386	2141
17	Kohat	2631	2485	905	2007
18	Karak	2123	1934	1903	1987
19	Chitral	2542	1680	1536	1919
20	Nowshera	2113	1962	1421	1832
21	Shangla	1659	1506	2122	1762
22	Tank	1769	1599	1652	1673
23	Bannu	1391	1144	1284	1273
24	Tor Ghar	290	242	86	206
25	Kohistan	66	0	68	45
Total		70924	69826	76213	72321

Table and Graph illustrates the statistical analysis about data regarding first Antenatal care services (ANC-1) in government health facilities. District Kohistan and Tor Ghar show worst performance with an average 45 and 206 ANC-1 coverage in 1st quarter 2019.



9. District Wise Average Number of Deliveries in the government health facilities

This indicator is reflective of the confidence shown by the general public in the government health facilities for carrying out normal deliveries.

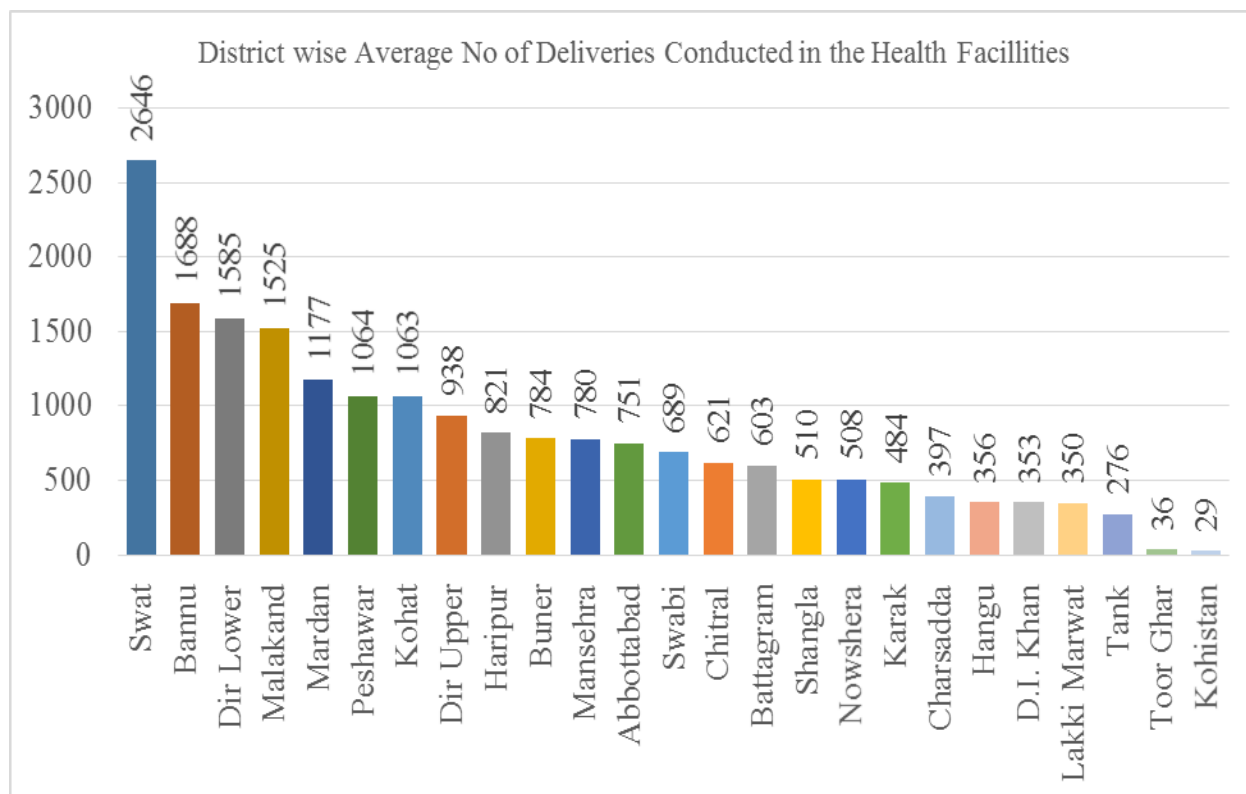
S. No	District	Jan	Feb	Mar	Avg No. of Deliveries
1	Swat	2783	2489	2666	2646
2	Bannu	1832	1474	1757	1688
3	Dir Lower	1547	1612	1597	1585
4	Malakand	1654	1423	1497	1525
5	Mardan	1176	1139	1217	1177
6	Peshawar	1289	1023	879	1064
7	Kohat	1113	953	1124	1063
8	Dir Upper	830	841	1144	938
9	Haripur	939	724	800	821
10	Buner	833	698	822	784
11	Mansehra	801	673	865	780
12	Abbottabad	732	662	859	751
13	Swabi	746	519	802	689
14	Chitral	616	578	669	621
15	Battagram	593	593	623	603
16	Shangla	464	507	559	510
17	Nowshera	474	364	685	508

18	Karak	547	418	487	484
19	Charsadda	119	133	938	397
20	Hangu	333	318	417	356
21	D.I. Khan	348	330	380	353
22	Lakki Marwat	199	399	452	350
23	Tank	274	275	280	276
24	Tor Ghar	43	42	23	36
25	Kohistan	58	0	30	29
Total		20343	18187	21572	20034

District Swat is on top position of all 25 districts with number of average deliveries **2646** in government health facilities in the quarter. Districts Bannu, Dir Lower, Malakand, Mardan, Peshawar and Kohat reported in 1st quarter 2019 i.e **1688, 1585, 1525, 1177, 1064 and 1063** average numbers of deliveries conducted in the government health facilities thereby giving best performance.

The poor arrangement in primary and secondary health facilities in government sector and tertiary care hospitals needs to be improved. Figures from tertiary hospitals are not added to these figures; if added these figures will change significantly.

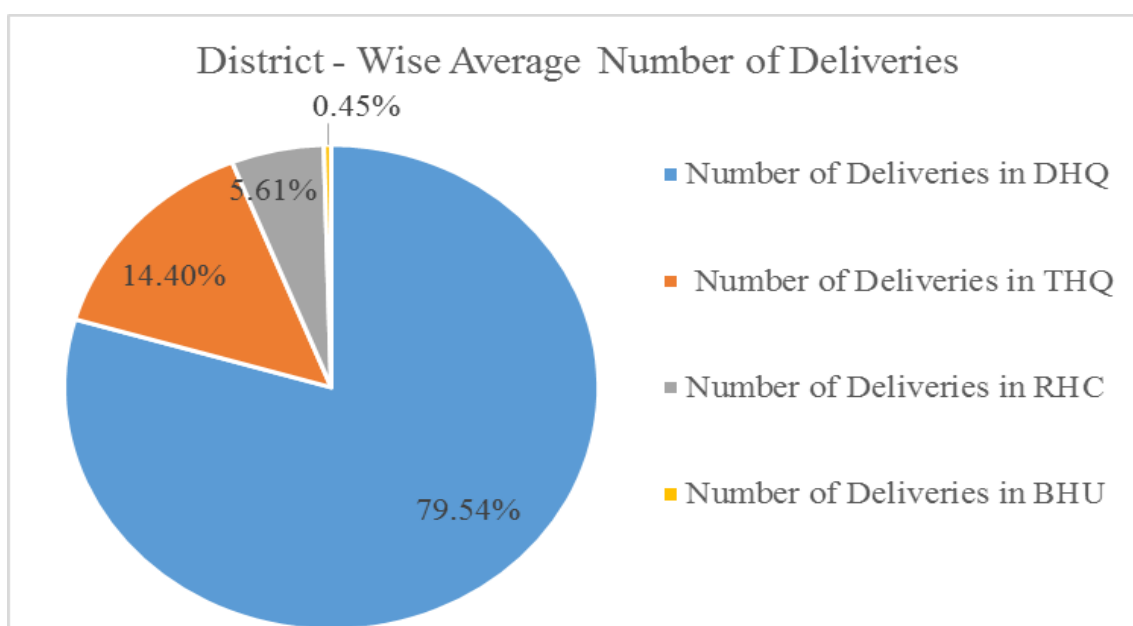
MTI Hospitals are not included in this list.



10. Health Facility-wise Number of Deliveries

This indicator reflects health facilities wise number of deliveries and the DHQ hospital stand **19,180**, which is **79%** of the total, THQ **3,995** (**16%**), RHC reports **1055** (**4%**), and BHUs reports only **162** (**1%**) deliveries.

Number of Deliveries in DHQ	Number of Deliveries in THQ	Number of Deliveries in RHC	Number of Deliveries in BHU
22744	4119	1605	128
79.54	14.40	5.61	0.45



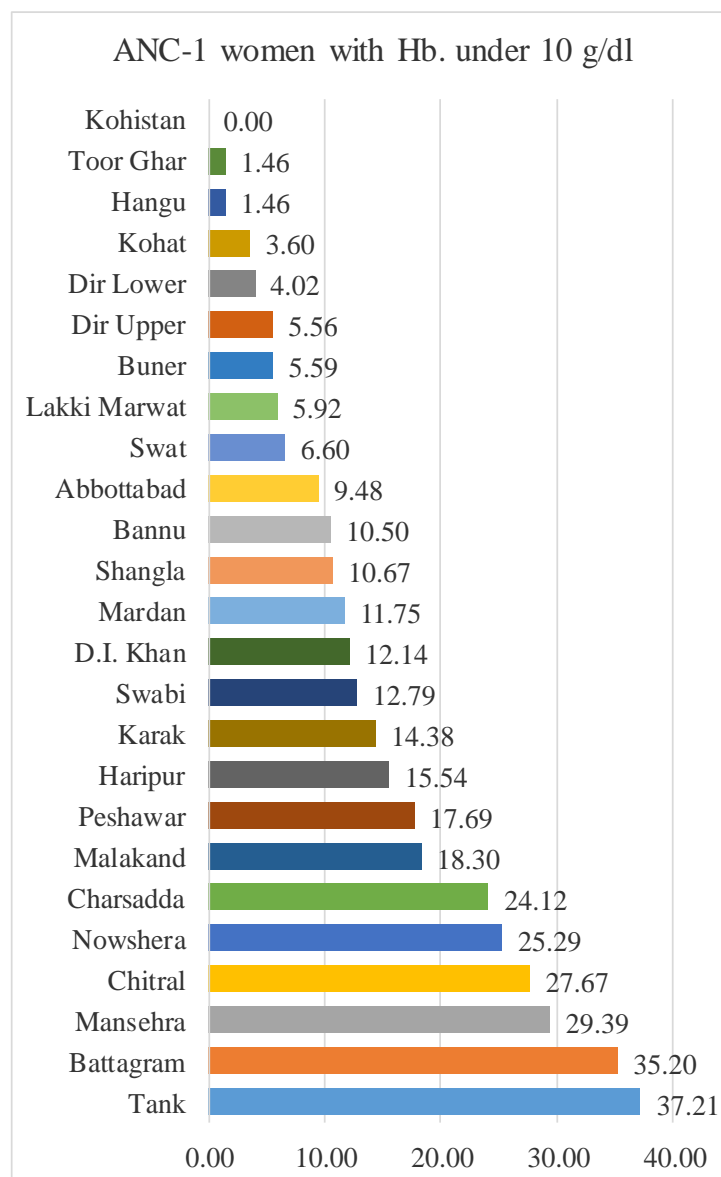
W&C Hospital and DHQ Hospital (MTI) Bannu did not report data.

11. Anemia among Women Coming for ANC-1 in Govt: Health Facilities (in %age)

Pregnant women coming to the facility for antenatal care serve as a sample of women from the catchment population; the nutritional status among this sample of pregnant women is suggestive of the nutritional status of women in the catchment population.

Percent of pregnant women screened for hemoglobin levels at their first antenatal care visit to the facility with hemoglobin levels less than 10g/dl are reflected in **table and graph**.

DISTRICT	(ANC-1) in the facility	ANC-1 women with Hb. under 10 g/dl	%age
Tank	5020	1868	37.21
Battagram	7691	2707	35.20
Mansehra	18225	5356	29.39
Chitral	5758	1593	27.67
Nowshera	5496	1390	25.29
Charsadda	7517	1813	24.12
Malakand	10547	1930	18.30
Peshawar	16577	2932	17.69
Haripur	13989	2174	15.54
Karak	5960	857	14.38
Swabi	8389	1073	12.79
D.I. Khan	8430	1023	12.14
Mardan	11374	1336	11.75
Shangla	5287	564	10.67
Bannu	3819	401	10.50
Abbottabad	7584	719	9.48
Swat	23425	1547	6.60
Lakki Marwat	6422	380	5.92
Buner	6436	360	5.59
Dir Upper	7747	431	5.56
Dir Lower	15684	630	4.02
Kohat	6021	217	3.60
Hangu	8813	129	1.46
Tor Ghar	618	9	1.46
Kohistan	134	0	0.00
Total	216963	31439	14.49

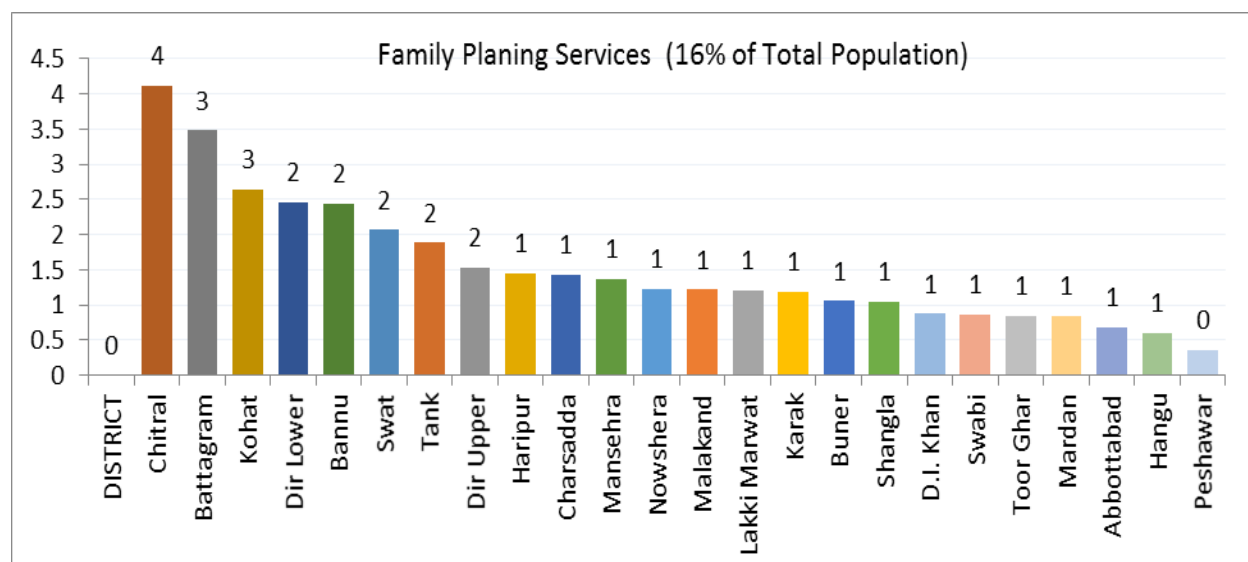


This indicator shows the frequency of Anemia among women coming for ANC-1 in the government health facilities. First ANC in the facilities is 86% for greater-than 10 gm/dl Hb and the women with Hb under 10g/dl are 14%.

12. Family Planning Visits 16% of the Total Population

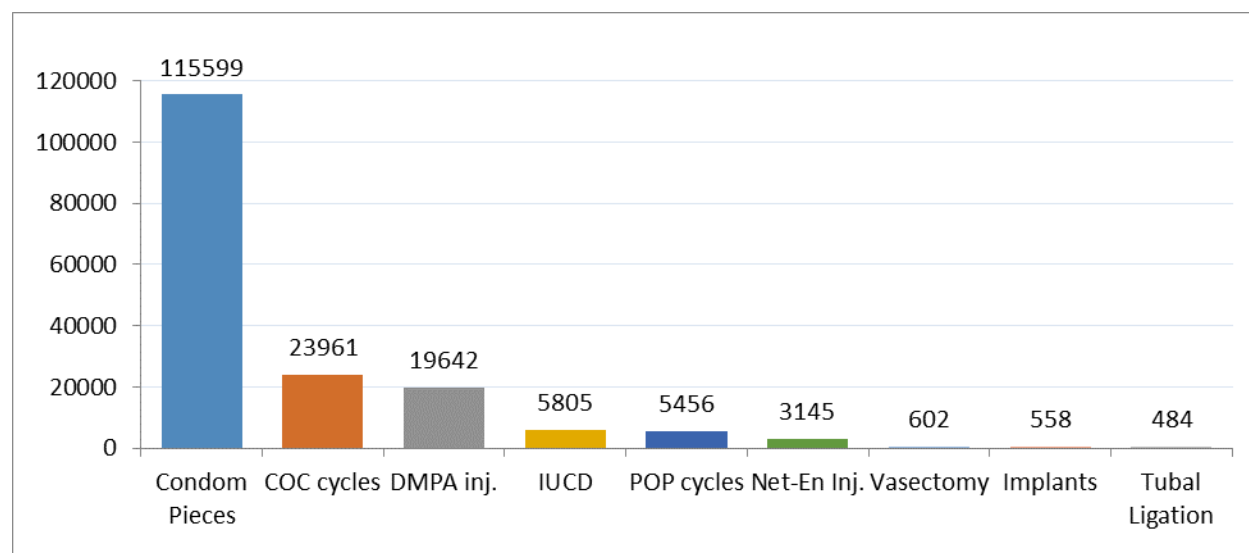
Family planning refers to the factors that may be considered by a couple in a committed relationship and each individual involved in deciding if and when to have children.

S.No	DISTRICT	Total Population	16% of Population	Total FP Visits	%age
1	Chitral	447362	71578	2944	4
2	Battagram	476612	76258	2653	3
3	Kohat	993874	159020	4209	3
4	Dir Lower	1435917	229747	5645	2
5	Bannu	1167892	186863	4549	2
6	Swat	2309570	369531	7630	2
7	Tank	391885	62702	1181	2
8	Dir Upper	946421	151427	2328	2
9	Haripur	1003031	160485	2326	1
10	Charsadda	1616198	258592	3676	1
11	Mansehra	1556460	249034	3394	1
12	Nowshera	1518540	242966	2974	1
13	Malakand	720295	115247	1403	1
14	Lakki Marwat	876182	140189	1683	1
15	Karak	706299	113008	1337	1
16	Buner	897319	143571	1514	1
17	Shangla	757810	121250	1272	1
18	D.I. Khan	1627132	260341	2276	1
19	Swabi	1624616	259939	2250	1
20	Tor Ghar	171395	27423	233	1
21	Mardan	2373061	379690	3182	1
22	Abbottabad	1332912	213266	1460	1
23	Hangu	518798	83008	498	1
24	Peshawar	4269079	683053	2474	0
25	Kohistan	784711	125554	2	0
Total		30523371	4883739	63093	1



13. Family Planning Services & Commodities Provided

COC cycles	POP cycles	DMPA inj.	Net-En Inj.	Condom Pieces	IUCD	Tubal Ligation	Vasectomy	Implants
23961	5456	19642	3145	115599	5805	484	602	558



DISTRICT	COC cycles	POP cycles	DMPA inj.	Net-En Inj.	Condom Pieces	IUCD	Tubal Ligation	Vasectomy	Implants
Bannu	1424	430	1534	118	5845	79	0	0	0
D.I. Khan	1048	160	531	20	8077	365	12	0	13
Lakki Marwat	747	150	521	378	1437	82	1	0	0
Tank	1001	0	360	98	1419	189	0	0	0
Abbottabad	241	11	319	0	303	50	0	0	3
Haripur	1098	245	741	17	5355	168	14	0	4
Kohistan	2	0	0	0	0	0	0	0	0
Mansehra	1229	40	1455	123	8047	293	25	0	53
Battagram	1314	601	591	87	5416	290	0	0	0
Tor Ghar	118	0	154	0	40	1	0	0	0
Karak	387	480	323	0	10589	278	2	0	35
Kohat	1585	617	1488	0	14599	682	131	0	136
Hangu	299	769	192	0	2313	40	0	0	0
Buner	946	162	452	59	6131	120	15	0	15
Chitral	806	102	914	554	5399	61	0	0	0
Dir Lower	152	258	527	422	533	69	1	0	0
Malakand	302	110	484	48	5091	193	23	0	5
Swat	2364	225	2789	67	13072	747	15	0	92
Dir Upper	957	198	627	43	352	87	2	0	2
Shangla	884	301	432	701	1822	121	94	0	0
Mardan	2319	123	824	25	4624	177	96	1	23

Swabi	1305	102	868	195	6492	233	3	0	4
Charsadda	1454	27	1648	40	1026	598	9	601	70
Nowshera	817	136	990	1	3116	693	35	0	95
Peshawar	1162	209	878	149	4501	189	6	0	8
Total	23961	5456	19642	3145	115599	5805	484	602	558

This reflects the results of all of the districts and show that which family planning services has been adopted by the couple. The indicator District-wise Family Planning Services & Commodities Provided is one of the most important indicator in health services.

In the modern method of the family planning services, the condom is one of the most effective and simple method and couple preferred to take this services from health institutions.

Some of the couple preferred to take other family planning services i.e. COC cycles, POP Cycles or DPMA injections etc.

14. Immunization Status

Immunization is the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. Vaccines stimulate the body's own immune system to protect the person against subsequent infection or disease.

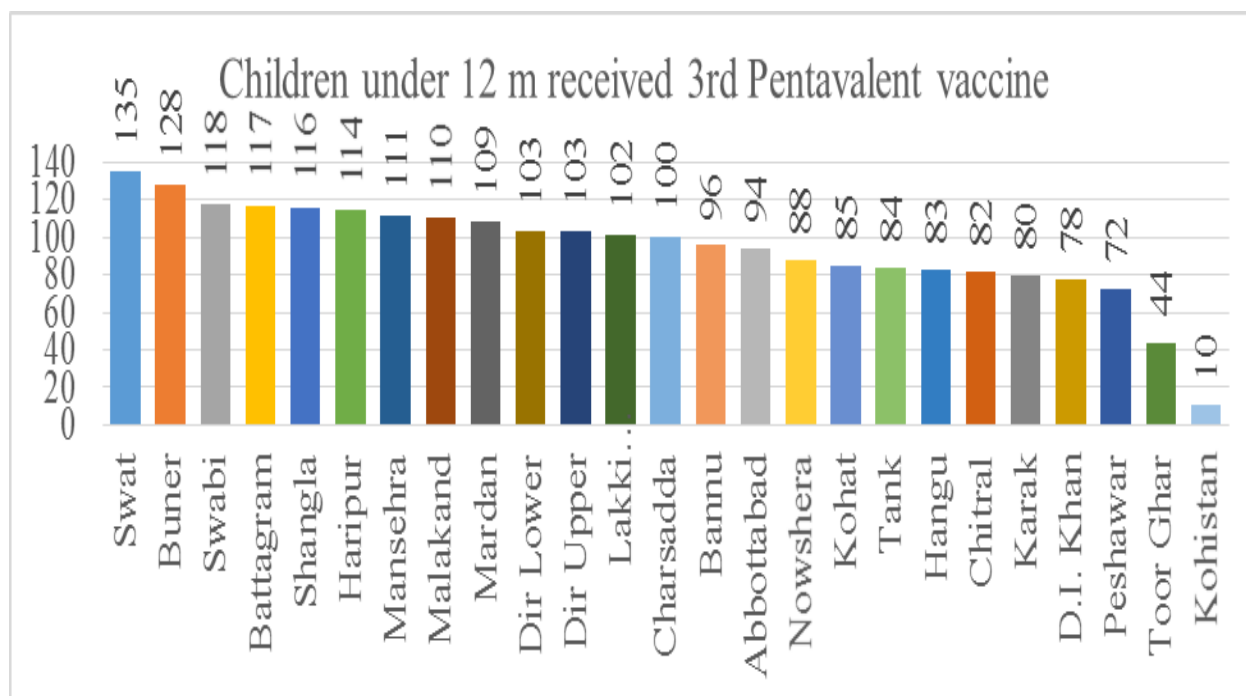
Immunization is a proven tool for controlling and eliminating life-threatening infectious diseases. It is one of the most cost-effective health investments, with proven strategies that make it accessible to even the most hard-to-reach and vulnerable populations. It has clearly defined target groups; it can be delivered effectively through outreach activities; and vaccination does not require any major lifestyle change.

a. Children under 12 m received 3rd Pentavalent vaccine

Pentavalent vaccine is five individual vaccines conjugated in one intended to actively protect infant children from 5 potentially deadly diseases: Haemophilus Influenza type B (a bacteria that causes meningitis, pneumonia and otitis), whooping cough, tetanus, hepatitis B and diphtheria.

S. No	DISTRICT	Population	Expected Children	Children received 3rd Pentavalent vaccine	%age
1	Swat	2309570	16744	22675	135
2	Buner	897319	6506	8344	128
3	Swabi	1624616	11778	13848	118
4	Battagram	476612	3455	4046	117
5	Shangla	757810	5494	6389	116
6	Haripur	1003031	7272	8318	114
7	Mansehra	1556460	11284	12576	111
8	Malakand	720295	5222	5752	110
9	Mardan	2373061	17205	18712	109
10	Dir Lower	1435917	10410	10765	103
11	Dir Upper	946421	6862	7091	103
12	Lakki Marwat	876182	6352	6452	102
13	Charsadda	1616198	11717	11761	100
14	Bannu	1167892	8467	8107	96
15	Abbottabad	1332912	9664	9084	94

16	Nowshera	1518540	11009	9717	88
17	Kohat	993874	7206	6123	85
18	Tank	391885	2841	2381	84
19	Hangu	518798	3761	3116	83
20	Chitral	447362	3243	2658	82
21	Karak	706299	5121	4090	80
22	D.I. Khan	1627132	11797	9224	78
23	Peshawar	4269079	30951	22439	72
24	Toor Ghar	171395	1243	547	44
25	Kohistan	784711	5689	597	10
	Total	30523371	221294	214812	97



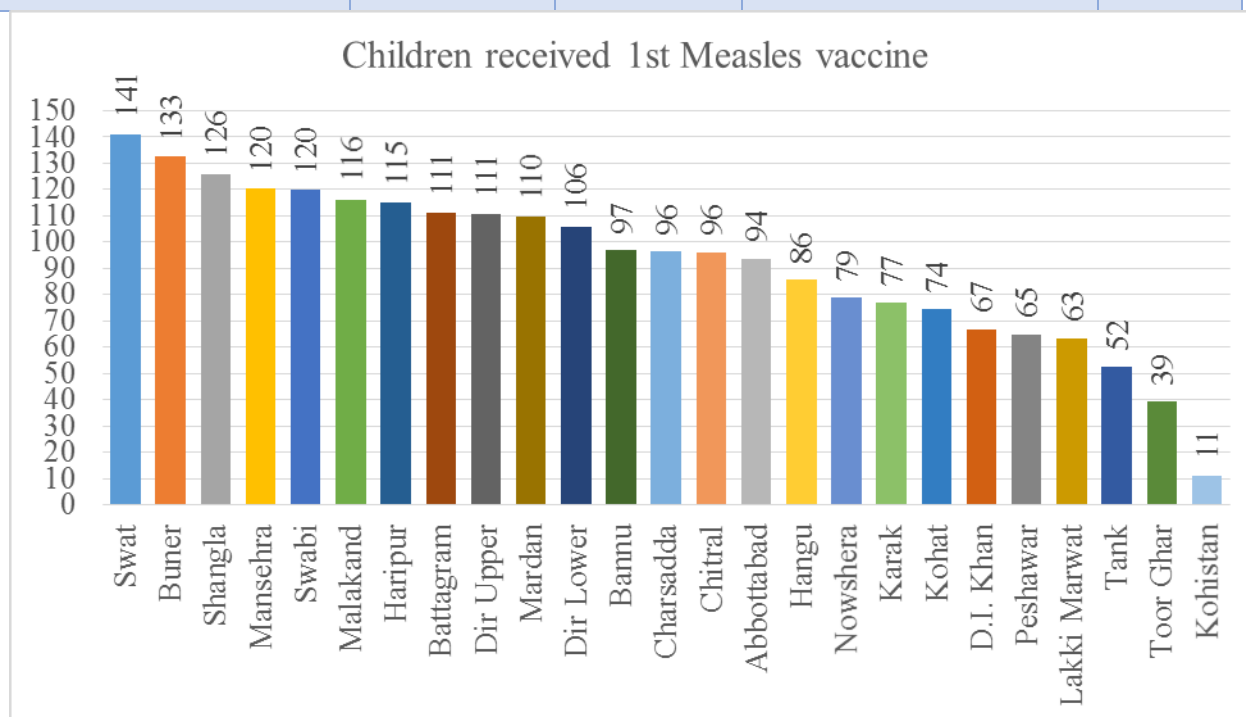
b. Children under 12 Months received 1st Measles vaccine

Measles, also known as morbilli, rubeola or red measles, is a highly contagious infection caused by the measles virus. Measles is an airborne disease which spreads easily through the coughs and sneezes of those infected. Testing for the virus in suspected cases is important for public health efforts.

Following data reflects children under 12 Months of age getting 1st Measles Vaccine. Percentage is also computed to rank the performance of districts.

S. No	DISTRICT	Population	Expected Children	Children received 1st Measles vaccine	%age
1	Swat	2309570	16744	23628	141
2	Buner	897319	6506	8621	133
3	Shangla	757810	5494	6917	126
4	Mansehra	1556460	11284	13567	120
5	Swabi	1624616	11778	14104	120

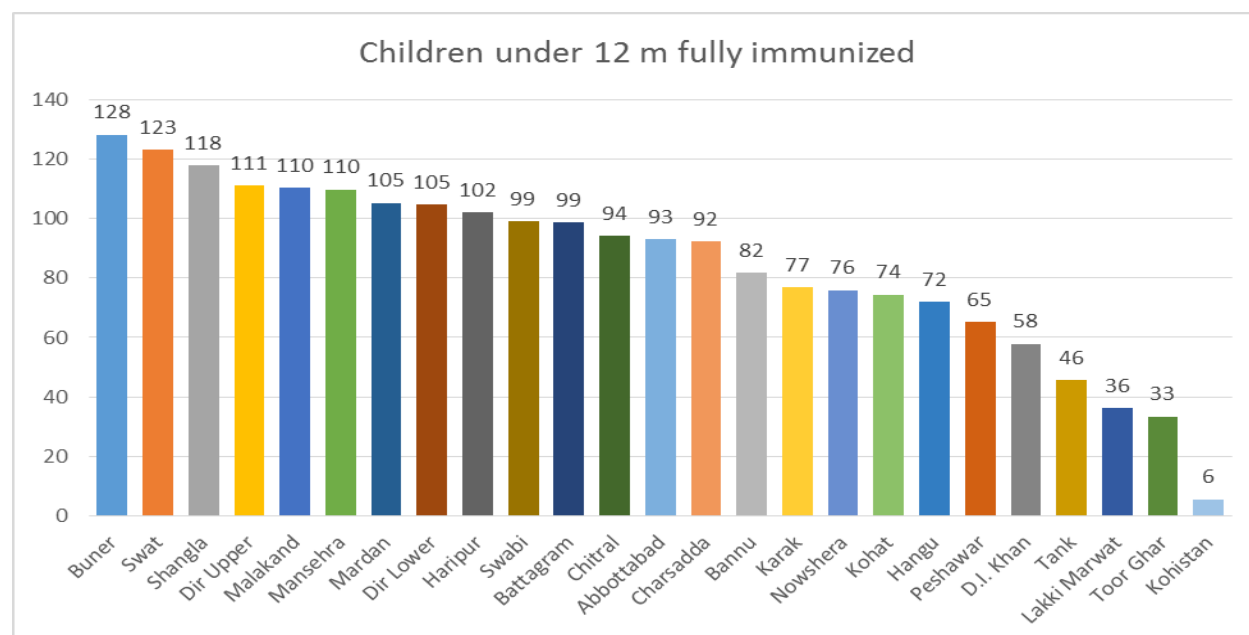
6	Malakand	720295	5222	6071	116
7	Haripur	1003031	7272	8357	115
8	Battagram	476612	3455	3849	111
9	Dir Upper	946421	6862	7597	111
10	Mardan	2373061	17205	18844	110
11	Dir Lower	1435917	10410	11034	106
12	Bannu	1167892	8467	8198	97
13	Charsadda	1616198	11717	11307	96
14	Chitral	447362	3243	3118	96
15	Abbottabad	1332912	9664	9055	94
16	Hangu	518798	3761	3225	86
17	Nowshera	1518540	11009	8688	79
18	Karak	706299	5121	3934	77
19	Kohat	993874	7206	5361	74
20	D.I. Khan	1627132	11797	7902	67
21	Peshawar	4269079	30951	20095	65
22	Lakki Marwat	876182	6352	4030	63
23	Tank	391885	2841	1489	52
24	Tor Ghar	171395	1243	489	39
25	Kohistan	784711	5689	633	11
Total		30523371	221294	210113	95



c. Children Under 12 Months Fully Immunized

Fully Immunization Coverage is the measure of the percentage of children under two year age who have received all doses of BCG vaccine, three doses of polio and pentavalent vaccines and 2 doses of measles vaccine in a given year.

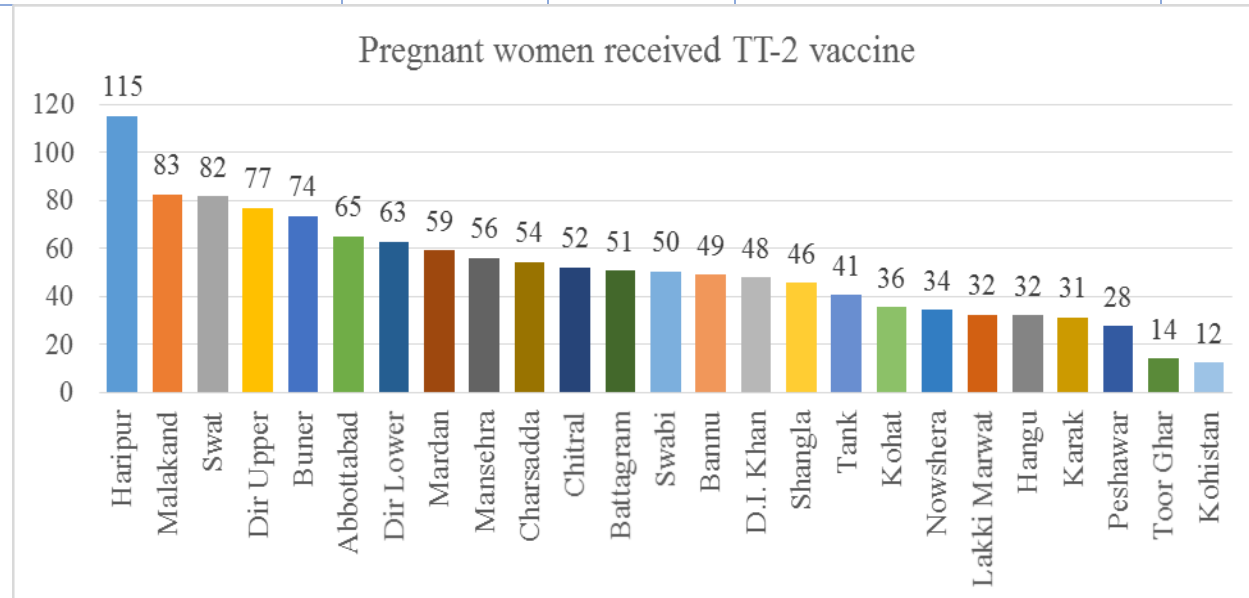
S. No	DISTRICT	Population	Expected Children	Children under 12 m fully immunized	%age
1	Buner	897319	6506	8340	128
2	Swat	2309570	16744	20627	123
3	Shangla	757810	5494	6472	118
4	Dir Upper	946421	6862	7615	111
5	Malakand	720295	5222	5761	110
6	Mansehra	1556460	11284	12390	110
7	Mardan	2373061	17205	18114	105
8	Dir Lower	1435917	10410	10899	105
9	Haripur	1003031	7272	7432	102
10	Swabi	1624616	11778	11655	99
11	Battagram	476612	3455	3411	99
12	Chitral	447362	3243	3050	94
13	Abbottabad	1332912	9664	8982	93
14	Charsadda	1616198	11717	10807	92
15	Bannu	1167892	8467	6932	82
16	Karak	706299	5121	3934	77
17	Nowshera	1518540	11009	8361	76
18	Kohat	993874	7206	5361	74
19	Hangu	518798	3761	2710	72
20	Peshawar	4269079	30951	20186	65
21	D.I. Khan	1627132	11797	6831	58
22	Tank	391885	2841	1298	46
23	Lakki Marwat	876182	6352	2296	36
24	Toor Ghar	171395	1243	416	33
25	Kohistan	784711	5689	317	6
Total		30523371	221294	194197	88



d. Pregnant Women Received TT-2 Vaccine

During 1st quarter 2019, out of **259,449** expected pregnant women, **135,579 (52%)** women received **TT-2** vaccination. Among districts there is a variation that ranges from **115% to 12%**. Most of the districts fall under **80% to 30%**.

S. No	DISTRICT	Population	Expected Children	Pregnant women received TT-2 vaccine	%age
1	Haripur	1003031	8526	9813	115
2	Malakand	720295	6123	5063	83
3	Swat	2309570	19631	16064	82
4	Dir Upper	946421	8045	6186	77
5	Buner	897319	7627	5618	74
6	Abbottabad	1332912	11330	7377	65
7	Dir Lower	1435917	12205	7690	63
8	Mardan	2373061	20171	11933	59
9	Mansehra	1556460	13230	7427	56
10	Charsadda	1616198	13738	7454	54
11	Chitral	447362	3803	1976	52
12	Battagram	476612	4051	2059	51
13	Swabi	1624616	13809	6944	50
14	Bannu	1167892	9927	4864	49
15	D.I. Khan	1627132	13831	6622	48
16	Shangla	757810	6441	2937	46
17	Tank	391885	3331	1353	41
18	Kohat	993874	8448	3000	36
19	Nowshera	1518540	12908	4448	34
20	Lakki Marwat	876182	7448	2404	32
21	Hangu	518798	4410	1421	32
22	Karak	706299	6004	1869	31
23	Peshawar	4269079	36287	10022	28
24	Toor Ghar	171395	1457	206	14
25	Kohistan	784711	6670	829	12
Total		30523371	259449	135579	52



15. Malaria Cases Slide Positivity Rate

As malaria control efforts intensify, it is critical to monitor trends in disease burden and measure the impact of interventions. A key surveillance indicator is the incidence of malaria. The slide positivity rate (SPR) has been used as a surrogate measure of malaria incidence, but limited data exist on the relationship between SPR and the incidence of malaria.

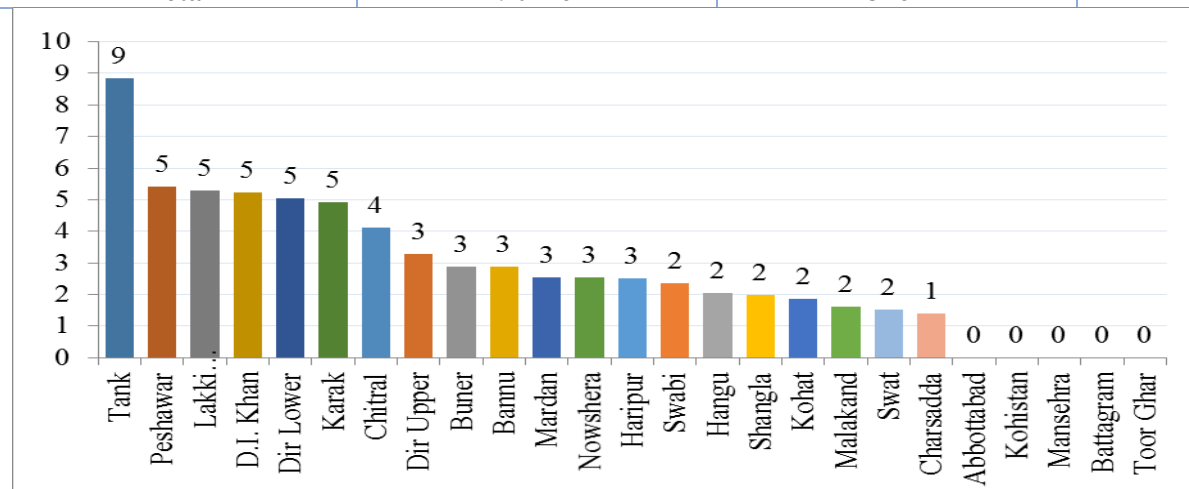
a. Malaria Parasite

This indicator measure the proportion of blood slides tested positive for Malaria.

The **malaria parasite** produces a molecule that affects red blood cells, luring mosquitoes to bite infected people, and may enhance the parasite's spread.

Malaria parasites are spread by bites from infected mosquitoes.

S. No	DISTRICT	Slides examined	Slides MP +ve	%age
1	Tank	3701	327	9
2	Peshawar	3588	194	5
3	Lakki Marwat	6500	344	5
4	D.I. Khan	10980	574	5
5	Dir Lower	4084	206	5
6	Karak	3358	165	5
7	Chitral	1996	82	4
8	Dir Upper	4522	148	3
9	Buner	3629	105	3
10	Bannu	8364	241	3
11	Mardan	9589	245	3
12	Nowshera	3032	77	3
13	Haripur	119	3	3
14	Swabi	1740	41	2
15	Hangu	2946	60	2
16	Shangla	858	17	2
17	Kohat	5713	106	2
18	Malakand	3720	60	2
19	Swat	4496	69	2
20	Charsadda	6949	98	1
21	Abbottabad	78	0	0
22	Kohistan	5	0	0
23	Mansehra	174	0	0
24	Battagram	5	0	0
25	Toor Ghar	0	0	0
Total		90146	3162	4



b. Plasmodium Falciparum Rate

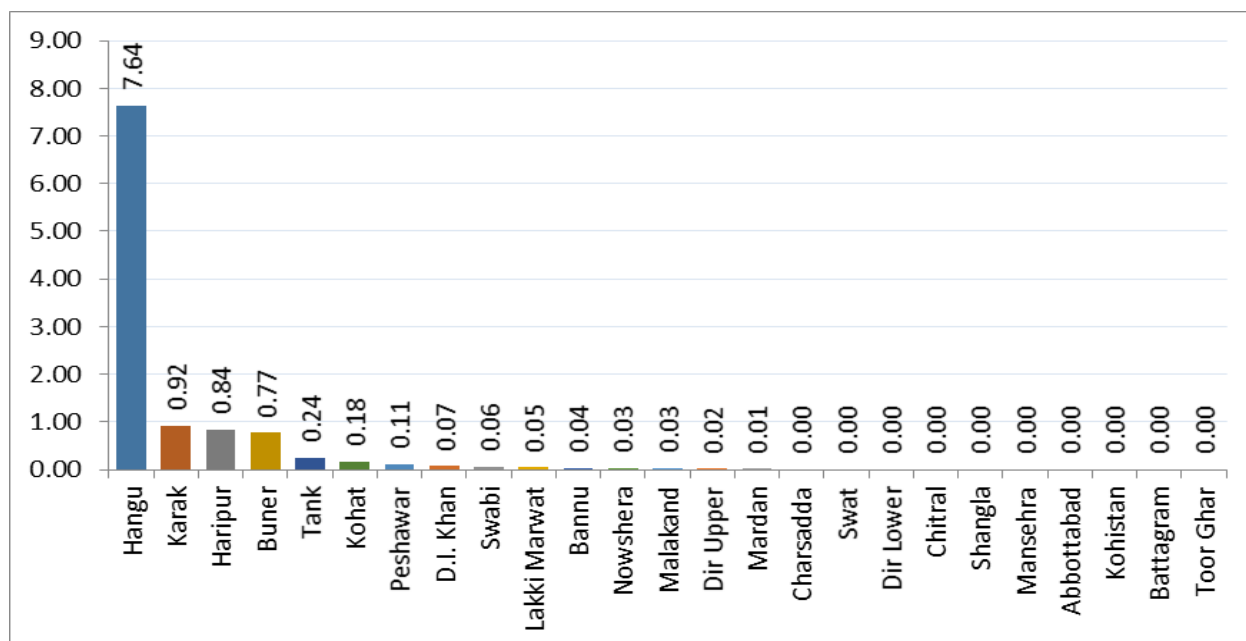
This indicator measure the proportion of Plasmodium Falciparum among blood slides tested positive for malaria.

District Mansehra is on top of the list in table and reflects the figures i.e **429** slides have been examined and reported **40** with **9.32%** positive patients of **Malaria Plasmodium Falciparum**.

S.No	DISTRICT	Slides examined	Slides P. Falciparum +ve	%age
1	Hangu	2946	225	7.64
2	Karak	3358	31	0.92
3	Haripur	119	1	0.84
4	Buner	3629	28	0.77
5	Tank	3701	9	0.24
6	Kohat	5713	10	0.18
7	Peshawar	3588	4	0.11
8	D.I. Khan	10980	8	0.07
9	Swabi	1740	1	0.06
10	Lakki Marwat	6500	3	0.05
11	Bannu	8364	3	0.04
12	Nowshera	3032	1	0.03
13	Malakand	3720	1	0.03
14	Dir Upper	4522	1	0.02
15	Mardan	9589	1	0.01
16	Charsadda	6949	0	0.00
17	Swat	4496	0	0.00
18	Dir Lower	4084	0	0.00
19	Chitral	1996	0	0.00
20	Shangla	858	0	0.00
21	Mansehra	174	0	0.00
22	Abbottabad	78	0	0.00
23	Kohistan	5	0	0.00
24	Battagram	5	0	0.00
25	Tor Ghar	0	0	0.00
Total		90146	327	0.36

Plasmodium falciparum is a protozoan parasite, one of the species of **Plasmodium** that cause **malaria** in humans. It is transmitted by the female Anopheles mosquito of the six malarial parasites.

Plasmodium falciparum causes the most-often fatal and medically severe form of disease.

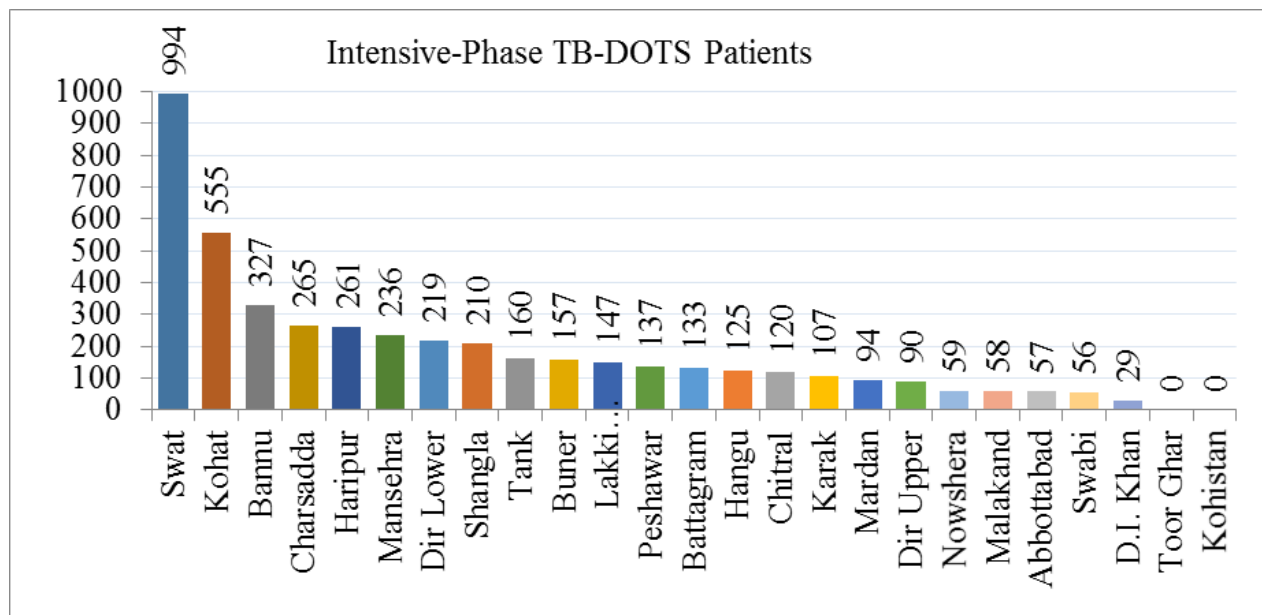


16. Intensive-Phase TB-DOTS Patients

Tuberculosis requires regular and uninterrupted treatment for a cure and a person missing the treatment poses a great threat for developing a resistant form of the disease; so the number of patients missing their treatment for more than a week needs to be actively traced and convinced to continue the treatment.

S.No	DISTRICT	Intensive-phase TB-DOTS patients
1	Swat	994
2	Kohat	555
3	Bannu	327
4	Charsadda	265
5	Haripur	261
6	Mansehra	236
7	Dir Lower	219
8	Shangla	210
9	Tank	160
10	Buner	157
11	Lakki Marwat	147
12	Peshawar	137
13	Battagram	133
14	Hangu	125
15	Chitral	120
16	Karak	107
17	Mardan	94
18	Dir Upper	90
19	Nowshera	59
20	Malakand	58

21	Abbottabad	57
22	Swabi	56
23	D.I. Khan	29
24	Tor Ghar	0
25	Kohistan	0
Total		4596



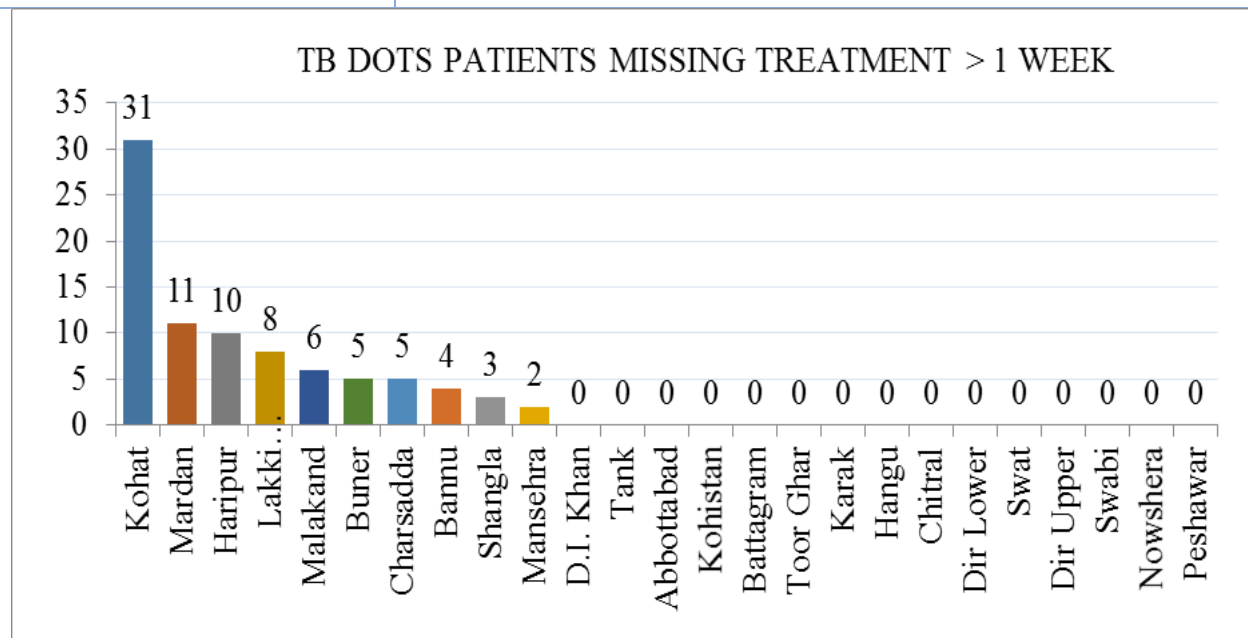
17. Proportion of Intensive phase TB-DOTS patients missing treatment >1 week

This indicator measures the proportion of TB-DOTS intensive phase patients missing treatment more than one week. This is the suggestive of the performance of the TB-DOTS treatment center and the associated treatment supporters.

Under TB-DOTS, if a patient misses his/her treatment for more than 2 consecutive days during the initial intensive phase, he must be traced by the health worker or by the treatment supporter. In the continuation phase of treatment, if patient fails to collect his drugs within one week of drug collection day she/he must be traced by health workers.

S.No	DISTRICT	Intensive phase TB-DOTS patients missing treatment >1 week
1	Kohat	31
2	Mardan	11
3	Haripur	10
4	Lakki Marwat	8
5	Malakand	6
6	Buner	5
7	Charsadda	5
8	Bannu	4
9	Shangla	3
10	Mansehra	2
11	D.I. Khan	0

12	Tank	0
13	Abbottabad	0
14	Kohistan	0
15	Battagram	0
16	Toor Ghar	0
17	Karak	0
18	Hangu	0
19	Chitral	0
20	Dir Lower	0
21	Swat	0
22	Dir Upper	0
23	Swabi	0
24	Nowshera	0
25	Peshawar	0
Total		85



18. Mortality Rate

Mortality rate or death rate is a measure of the number of deaths (in general, or due to a specific cause) in a particular population, scaled to the size of that population, per unit of time.

Through mortality rates there is an opportunity to get a clear picture of the preventable and the non-preventable causes, enabling the department to concentrate on the prevention of death due to avoidable causes.

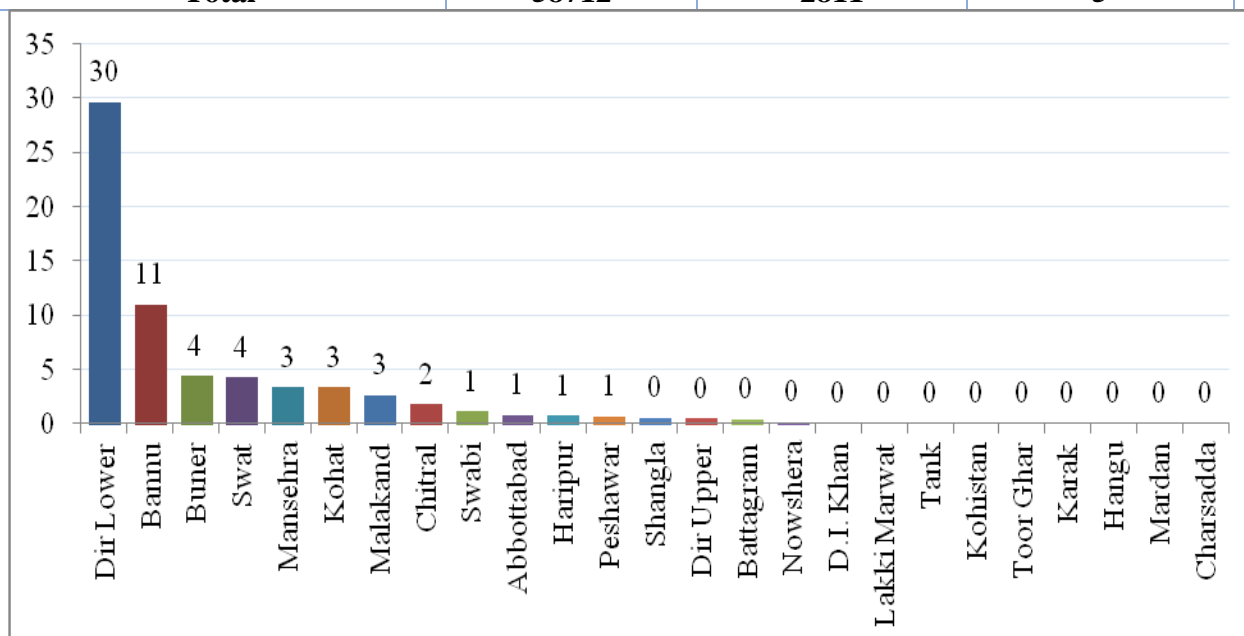
a. Neonatal Deaths in the Facilities

A neonatal death is the death of a baby within the first 4 weeks of life.

Number of Neonatal deaths due to various causes during the deliveries or immediately afterwards Two assumptions have to be made here, one is that this report includes deaths

occurring in government health facilities only and the second is the non-availability of data on predispositions in the mother resulting in these fatalities.

S. No	District	Live Births in the Facility	Neonatal Deaths in the Facility	Neonatal Mortality Rate
1	Dir Lower	4744	1403	30
2	Bannu	5060	554	11
3	Buner	2302	100	4
4	Swat	7720	325	4
5	Mansehra	2270	75	3
6	Kohat	3088	102	3
7	Malakand	4519	115	3
8	Chitral	1847	32	2
9	Swabi	2327	25	1
10	Abbottabad	2226	16	1
11	Haripur	2441	17	1
12	Peshawar	3193	21	1
13	Shangla	1486	7	0
14	Dir Upper	2778	12	0
15	Battagram	1750	6	0
16	Nowshera	856	1	0
17	D.I. Khan	1055	0	0
18	Lakki Marwat	1021	0	0
19	Tank	819	0	0
20	Kohistan	0	0	0
21	Toor Ghar	107	0	0
22	Karak	1445	0	0
23	Hangu	1049	0	0
24	Mardan	3493	0	0
25	Charsadda	1116	0	0
Total		58712	2811	5



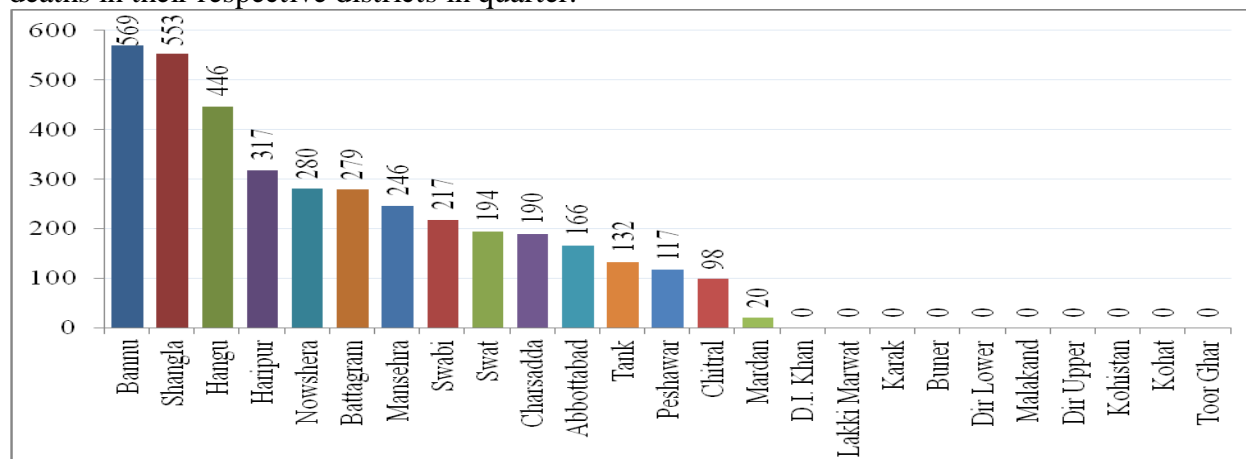
b. Maternal Mortality Rate per 100,000 Population (Reported by LHW)

The indicator Maternal Mortality Rate (Maternal Deaths Reported by LHW) illustrates the death rates of the mother during pregnancy or deliveries.

[Over Maternal Mortality Rate is 178 of the province]

S. No	DISTRICT	Delivery by skilled persons reported	Maternal deaths reported	Maternal Mortality Rate
1	Bannu	2459	14	569
2	Shangla	904	5	553
3	Hangu	224	1	446
4	Haripur	3151	10	317
5	Nowshera	2855	8	280
6	Battagram	359	1	279
7	Mansehra	5284	13	246
8	Swabi	3225	7	217
9	Swat	6689	13	194
10	Charsadda	4221	8	190
11	Abbottabad	4215	7	166
12	Tank	1513	2	132
13	Peshawar	6833	8	117
14	Chitral	2034	2	98
15	Mardan	5027	1	20
16	D.I. Khan	3085	0	0
17	Lakki Marwat	547	0	0
18	Karak	1192	0	0
19	Buner	1024	0	0
20	Dir Lower	727	0	0
21	Malakand	2889	0	0
22	Dir Upper	453	0	0
23	Kohistan	0	0	0
24	Kohat	1045	0	0
25	Toor Ghar	0	0	0
Total		59955	107	178

District **Bannu** is on top of the list and report **2459** numbers of deliveries and **14** maternal deaths with **569** maternal mortality rate. Districts DI Khan to Tor Ghar reported zero (0) Maternal deaths in their respective districts in quarter.



c. Infant Mortality Rate per 1000 Population (Reported by LHW)

Infant mortality refers to deaths of children, typically those less than one year of age. It is measured by the infant mortality rate (IMR), which is the number of deaths of children under one year of age per 1000 live births.

The leading causes of infant mortality are birth asphyxia, pneumonia, term birth complications, diarrhea, malaria, measles and malnutrition.

[Over all Infant Mortality Rate is 23 of the province]

S. No	DISTRICT	Delivery by skilled persons reported	Infant deaths reported	Infant Mortality Rate
1	Battagram	359	21	58
2	Haripur	3151	166	53
3	Mansehra	5284	236	45
4	Nowshera	2855	123	43
5	Abbottabad	4215	175	42
6	Swabi	3225	106	33
7	Kohat	1045	31	30
8	Dir Upper	453	13	29
9	Karak	1192	32	27
10	Tank	1513	39	26
11	Buner	1024	24	23
12	Charsadda	4221	81	19
13	Hangu	224	4	18
14	Peshawar	6833	117	17
15	Swat	6689	114	17
16	Shangla	904	13	14
17	Chitral	2034	24	12
18	Malakand	2889	31	11
19	Bannu	2459	20	8
20	Lakki Marwat	547	4	7
21	Mardan	5027	10	2
22	D.I. Khan	3085	3	1
23	Kohistan	0	0	0
24	Toor Ghar			0
25	Dir Lower	727	0	0
Total		59955	1387	23

