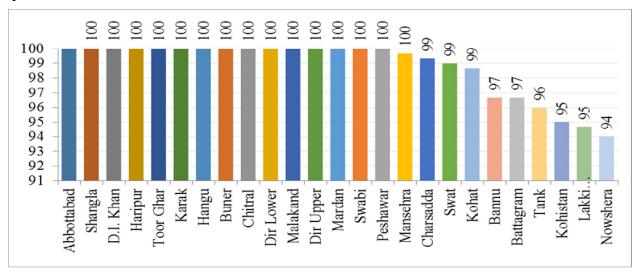
1st Quarter Report 2018

1. REPORTING COMPLIANCE

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

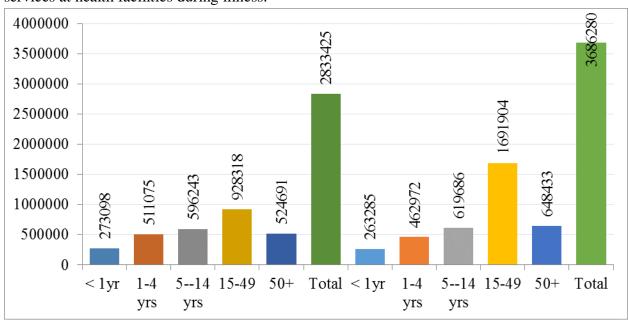
District Wise Percentage of Reporting Compliance.

Graph shows district-wise reporting compliance of all the districts of Khyber Pakhtunkhwa. 24 districts (Abbottabad to Lakki Marwat) among 25 districts achieved the target i-e reporting more than 95% facilities. Districts Nowshera reported (94%) and remained below the target in 1st quarter 2018.



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

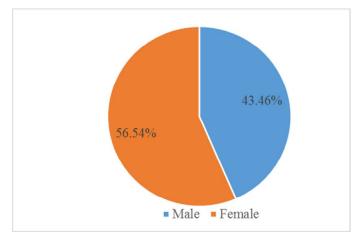
This is one of the key indicators to assess performance on the provision of health services in Province Khyber Pakhtunkhwa. It refers to the number of people attending and receiving services at health facilities during illness.



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 2018, the figures shows that in the case of male OPD attendance of age group from 1 to 14 years is (1,380,416), which is 48.72% of the total of male OPD (2,833,425).

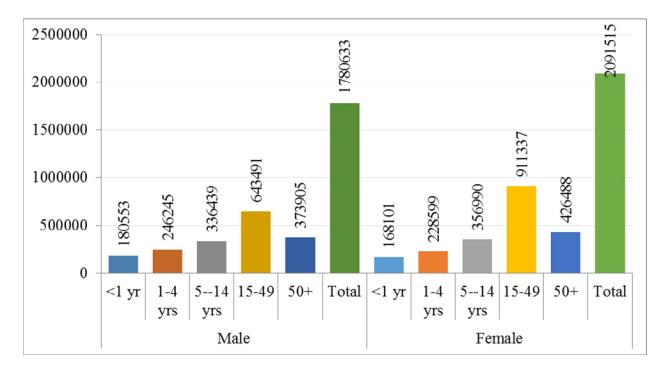
Similarly in case of female OPD attendance of age group from 1 to 14 is (1,345,943), which is 36.51% of the total female OPD attendance (3,686,280).



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 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	Total new visits (SHC) in 3rd quarter 2017				
Sr.#	Specialty	New Visits	%age		
1	Emergency/Casualty	907248	22.56		
2	General OPD	849091	21.12		
3	Pediatric	516359	12.84		
4	Medicine	283181	7.04		
5	OB/GYN	262902	6.54		
6	Eye	159134	3.96		
7	Surgery	145799	3.63		
8	Orthopedics	144407	3.59		
9	Dental	139924	3.48		
10	ENT	139875	3.48		
11	Skin	100446	2.50		
12	Others	90507	2.25		
13	Cardiology	76667	1.91		
14	Homeo Cases	23157	0.58		
15	Pshychiatry	22507	0.56		
16	Tibb/Unani Shifa Khana OPD Cases	10944	0.27		

Under the specialty an emergency/casualty, the number and percentage of patients are on top and stands at (907,248) with 22.56%, General OPD on second number and is (849,091) which is 21.12%.

Number of patients in the specialty of Pediatric and Medicine are 516,359 and 283,181 which is 12.84% and 7.04%.

The disorder of Dental caries and the specialty Skin Diseases stands at 139,924 with 3.48% and 100,446 with 2.50%.

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 the other stakeholders, the Government of Khyber Pakhtunkhwa has adopted these enlisted priority diseases in continuation to 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 in 1st Quarter 2018	6,519,705	
S. No	Disease	Total	%age
1	Acute (upper) Respiratory Infections (ARI)	1014556	15.56
2	Fever due to other causes	240966	3.70
3	Urinary Tract Infections	218730	3.35
4	Diarrhoea/Dysentery in >5 yrs	196385	3.01
5	Hypertension	179926	2.76
6	Diarrhoea/Dysentery in >5 yrs	164729	2.53
7	Dental Caries	148839	2.28

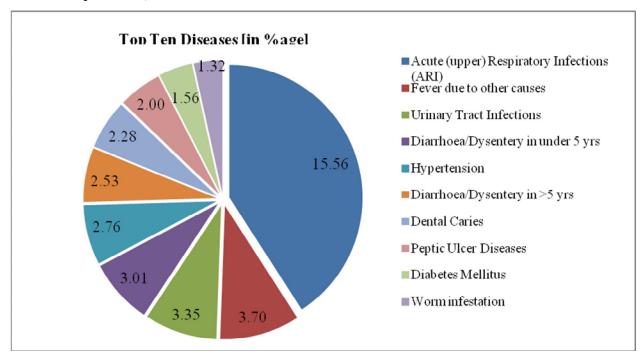
8	Peptic Ulcer Diseases	130708	2.00
9	Diabetes Mellitus	101992	1.56
10	Worm infestation	85931	1.32
11	Suspected Malaria	83754	1.28
12	Scabies	83172	1.28
13	Asthma	66121	1.01
14	Otitis Media	58312	0.89
15	Road traffic accidents	56412	0.87
16	Depression	55524	0.85
17	Enteric / Typhoid Fever	54605	0.84
18	Pneumonia under 5 years	52849	0.81
19	Dermatitis	48731	0.75
20	Pneumonia >5 years	41456	0.64
21	TB Suspects	21405	0.33
22	Ischemic Heart Disease	19508	0.30
23	Fractures	19244	0.30
24	Chronic Obstructive Pulmonary Diseases	17964	0.28
25	Cataract	15604	0.24
26	Suspected Viral Hepatitis	14887	0.23
27	Dog bite	13811	0.21
28	Suspected Measles	6697	0.10
29	Benign Enlargement of Prostrate	6467	0.10
30	Burns	6136	0.09
31	Sexually Transmitted Infections	5590	0.09
32	Trachoma	5256	0.08
33	Epilepsy	4975	0.08
34	Drug Dependence	4650	0.07
35	Cirrhosis of Liver	3889	0.06
36	Nephritis/Nephrosis	3392	0.05
37	Glaucoma	2803	0.04
38	Cutaneous Leishmaniasis	2517	0.04
39	Suspected Meningitis	1313	0.02
40	Suspected Neonatal Tetanus	544	0.01
41	Snake bits (with signs/symptoms of poisoning)	250	0.004
42	Acute Flaccid Paralysis	151	0.002
43	Suspected HIV/AIDS	26	0.0004
	Total Priority Disease	3,260,777	50.01

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

Acute Respiratory Infections stands **1,014,556** which is **15.56%** of these patients. Diarrhoea/Dysentery under and over 5 years stands **196,385** with **3.01%** and **164,729** with **(2.53%)** of the total in 1st quarter 2018. Fever due to other causes stands at **240,966** (**3.70%**) patients.

Cases of Urinary Tract Infections and Hypertension disorders are **218,730** which are **3.35%** and **179,926** (**2.76%**) of the total patients. Dental Caries and Peptic Ulcer Diseases are **130,708** with **2.00%** and **148,839** with **2.28%** in 1st quarter 2018.

Diabetes Mellitus patients' in 1st quarter 2018 stands **101,992** with **1.56%.** Worm infestation cases are reported **85,931** with (**1.32%**).



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.

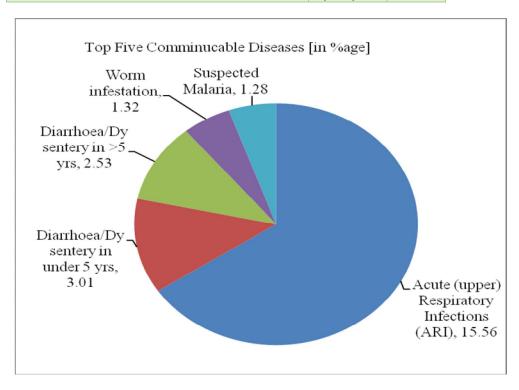
In 1st quarter 2018, total numbers of communicable diseases are **1,424,954** (**28.16**%), **whereas** non-communicable diseases are **1,835,823** (**21.86**%).

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** (as by a vector) compare contagious **disease**.

	Total OPD in 1st Quarter 2018	6,51	9,705
S#	Disease	Total	%age
1	Acute (upper) Respiratory Infections	1014556	15.56
2	Diarrhoea/Dysentery in under 5 yrs	196385	3.01
3	Diarrhoea/Dysentery in >5 yrs	164729	2.53
4	Worm infestation	85931	1.32
5	Suspected Malaria	83754	1.28
6	Scabies	83172	1.28
7	Enteric / Typhoid Fever	54605	0.84
8	Pneumonia under 5 years	52849	0.81
9	Pneumonia >5 years	41456	0.64
10	TB Suspects	21405	0.33
11	Suspected Viral Hepatitis	14887	0.23
12	Suspected Measles	6697	0.10
13	Sexually Transmitted Infections	5590	0.09
14	Trachoma	5256	0.08
15	Cutaneous Leishmaniasis	2517	0.04
16	Suspected Meningitis	1313	0.02
17	Suspected Neonatal Tetanus	544	0.01
18	Acute Flaccid Paralysis	151	0.002
19	Suspected HIV/AIDS	26	0.0004
	Total	1,835,823	28.16

Acute Respiratory Infections and diarrhea/dysentery under and over 5 years constitute 21.11% of these patients. Worm infestation stands 85,931 with 1.32% patients 1^{st} quarter 2018. Suspected Malaria cases are reported 83,754 in figures and (1.28%) in percentile in 1st quarter 2018. The department should take adopt programmatic approach to control the disease.



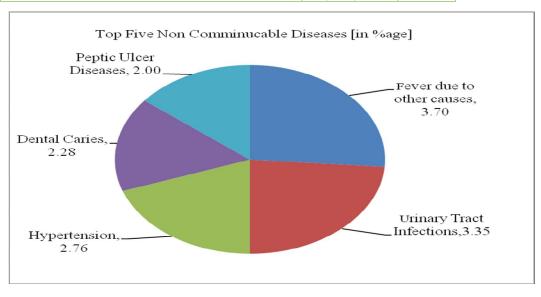
b. **NON-COMMUNICABLE DISEASES**

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.

Total	OPD in 1st Quarter 2018	6,519,7	05
S. #	Disease	Total	%age
1	Fever due to other causes	240966	3.70
2	Urinary Tract Infections	218730	3.35
3	Hypertension	179926	2.76
4	Dental Caries	148839	2.28
5	Peptic Ulcer Diseases	130708	2.00
6	Diabetes Mellitus	101992	1.56
7	Asthma	66121	1.01
8	Otitis Media	58312	0.89
9	Road traffic accidents	56412	0.87
10	Depression	55524	0.85
11	Dermatitis	48731	0.75
12	Ischemic Heart Disease	19508	0.30
13	Fractures	19244	0.30
14	Chronic Obstructive Pulmonary	17964	0.28
15	Cataract	15604	0.24
16	Dog bite	13811	0.21
17	Benign Enlargement of Prostrate	6467	0.10
18	Burns	6136	0.09
19	Epilepsy	4975	0.08
20	Drug Dependence	4650	0.07
21	Cirrhosis of Liver	3889	0.06
22	Nephritis/Nephrosis	3392	0.05
23	Glaucoma	2803	0.04
24	Snake bits (with signs/symptoms of	250	0.004
	poisoning)		
	Total	1,424,954	21.86

The fever due to other causes and Urinary Tract Infections in table are stands **240,966** (**3.70%**) and **218,730** (**3.35%**) in 1st quarter 2018.

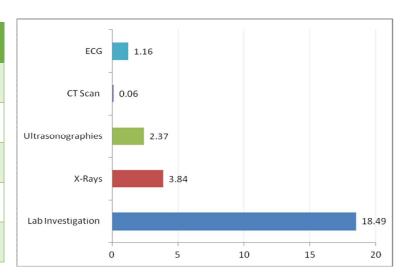
Table and Graph illustrates the trend of non-communicable diseases in Khyber Pakhtunkhwa province during 1st quarter 2017.



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.

# of OPD Patients	6,533,840
Lab Investigation	18.49%
X-Rays	3.84%
Ultrasonography	2.37%
CT Scan	0.06%
ECG	1.16%

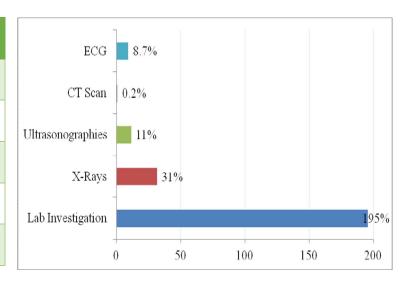


The graph reflects the figures and show quality of care in terms of utilization of investigation services.

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	150,291
Lab Investigation	195%
X-Rays	31%
Ultrasonography	11%
ECG	8.7%
CT Scan	0.2%



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
1	Swat	7980	7111	9292	8128
2	Peshawar	7495	5028	5062	5862
3	Haripur	4777	5481	5472	5243
4	Mardan	6082	4510	4907	5166
5	Mansehra	5194	4460	4643	4766
6	Charsadda	4311	3667	3680	3886
7	Malakand	4551	4140	2946	3879
8	Dir Lower	3591	3489	3876	3652
9	D.I. Khan	3450	2977	3243	3223
10	Swabi	3151	2862	3315	3109
11	Dir Upper	3428	2737	3011	3059
12	Kohat	3370	2369	2983	2907
13	Abbottabad	1768	3949	1973	2563
14	Nowshera	2338	2237	2877	2484
15	Battagram	1520	1988	3255	2254
16	Chitral	2797	1322	2519	2213
17	Karak	1856	1705	2169	1910
18	Buner	1979	1593	2082	1885
19	Lakki Marwat	2187	1264	1817	1756
20	Bannu	1537	1341	1718	1532
21	Shangla	1365	1456	1628	1483
22	Tank	1720	1154	1471	1448
23	Hangu	1850	625	1082	1186
24	Kohistan	416	331	335	361
25	Toor Ghar	282	193	123	199
Gra	and Total	78995	67989	75479	74154

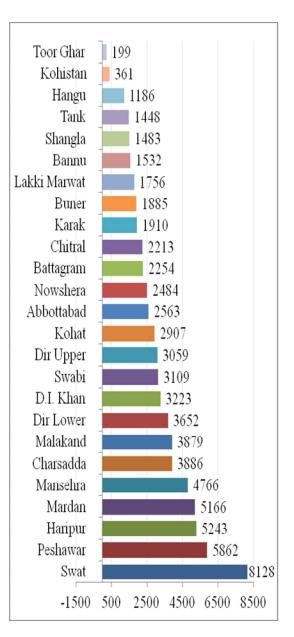


Table and Graph illustrates the statistical analysis about data regarding First Antenatal care services (ANC-1) in government health facilities. District Kohistan and Tor Ghar show worst performance with an **average 361** and **199** ANC-1 coverage in 1st quarter 2018. Swat, Peshawar, Haripur and Mardan are the top performer among 25 districts.

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

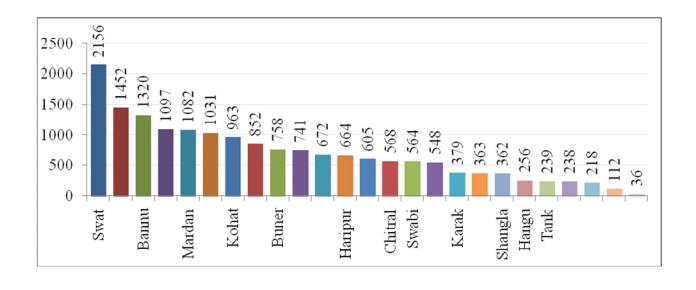
This indicator is reflective of the confidence shown by the general public in the government health facilities for carrying out normal deliveries.

S#	District	Jan	Feb	Mar	Avg No of Deliveries
1	Swat	2346	2418	1704	2156
2	Malakand	1526	1335	1496	1452
3	Bannu	1279	1172	1510	1320
4	Peshawar	1285	1006	999	1097
5	Mardan	1112	945	1189	1082
6	Dir Lower	1455	1308	331	1031
7	Kohat	1020	906	963	963
8	Charsadda	1005	578	972	852
9	Buner	817	717	741	758
10	Abbottabad	696	708	819	741
11	Dir Upper	652	650	715	672
12	Haripur	591	574	827	664
13	Mansehra	603	598	613	605
14	Chitral	568	505	632	568
15	Swabi	531	391	771	564
16	Battagram	505	561	577	548
17	Karak	328	348	462	379
18	Nowshera	375	336	377	363
19	Shangla	307	371	409	362
20	Hangu	248	233	287	256
21	Tank	225	220	272	239
22	D.I. Khan	193	224	296	238
23	Lakki Marwat	378	105	170	218
24	Kohistan	105	101	130	112
25	Toor Ghar	45	31	32	36
	Total	18195	16341	17294	17277

District Swat is on top position of all 25 districts with number of average deliveries 2156 in government health facilities in the quarter. Districts Malakand, Bannu, Peshawar, Mardan and Dir Lower reported 1452, 1320, 1097, 1082 and 1031 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.

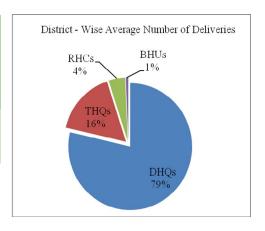


10. Health Facility-wise Number of Deliveries

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.

Deliveries	Deliveries	Deliveries	Deliveries
in DHQ	in THQ	in RHC	in BHU
19180	3995	1055	162

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

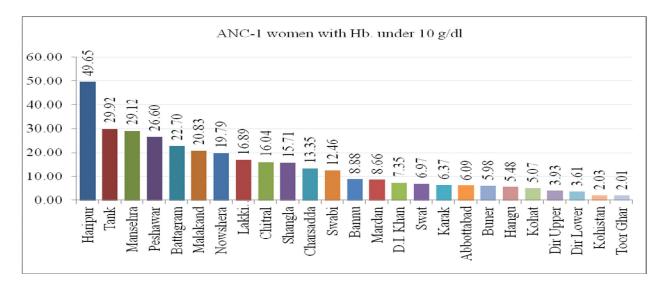


11. Anemia among Women Coming for ANC-1 in Govt: Health Facilities (in %age)

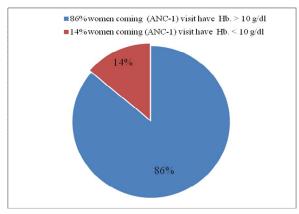
Pregnant women coming to the facility for antenatal care serve as a sample of women from the catchment population. The nutritional status among this sample of pregnant women is suggestive of the nutritional status of women in the catchment population.

S#	DISTRICT	(ANC-1) in the facility	ANC-1 women with Hb. under 10 g/dl	%age
1	Haripur	15730	7810	49.65
2	Tank	4345	1300	29.92
3	Mansehra	14297	4163	29.12
4	Peshawar	17585	4677	26.60
5	Battagram	6763	1535	22.70
6	Malakand	11637	2424	20.83
7	Nowshera	7452	1475	19.79
8	Lakki Marwat	5268	890	16.89
9	Chitral	6638	1065	16.04
10	Shangla	4449	699	15.71
11	Charsadda	11658	1556	13.35
12	Swabi	9328	1162	12.46
13	Bannu	4596	408	8.88
14	Mardan	15499	1342	8.66
15	D.I. Khan	9670	711	7.35
16	Swat	24383	1700	6.97
17	Karak	5730	365	6.37
18	Abbottabad	7690	468	6.09
19	Buner	5654	338	5.98
20	Hangu	3557	195	5.48
21	Kohat	8722	442	5.07
22	Dir Upper	9176	361	3.93
23	Dir Lower	10956	395	3.61
24	Kohistan	1082	22	2.03
25	Toor Ghar	598	12	2.01
	Total	222,463	35515	15.96

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.**



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% with greater than Hb and the women with Hb under 10g/dl are 14%.

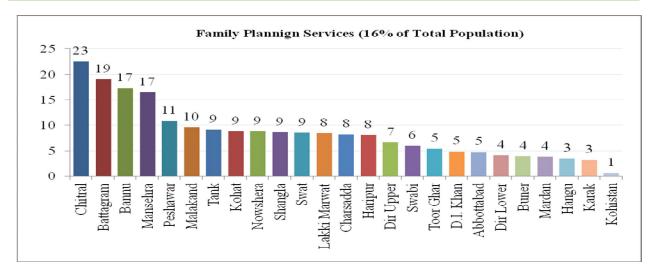


12. Family Planning Visits 16% of the Total Population

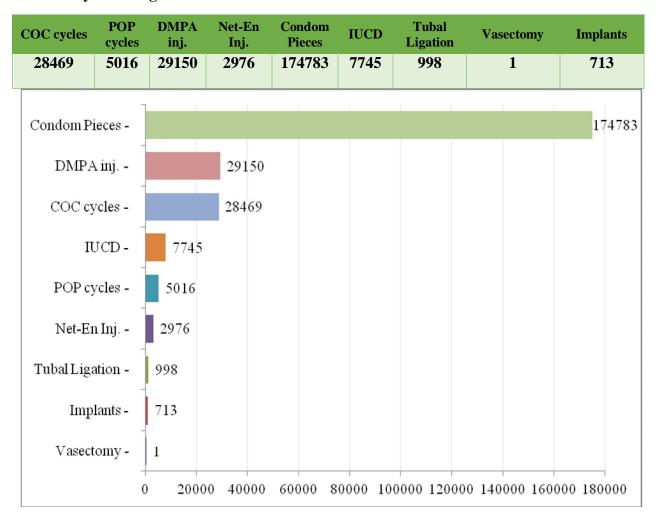
Family planning refers to the factors that may be considered by a couple in a committed relationship and each individual involved in deciding if and when to have children.

S#	DISTRICT	Population	16% of Total Polulation	FP Visits	%age
1	Chitral	447362	17894	4039	23
2	Battagram	476612	19064	3632	19
3	Bannu	1167892	46716	8113	17
4	Mansehra	1556460	62258	10294	17
5	Peshawar	4269079	170763	18487	11
6	Malakand	720295	28812	2775	10
7	Tank	391885	15675	1432	9
8	Kohat	993874	39755	3483	9
9	Nowshera	1518540	60742	5310	9
10	Shangla	757810	30312	2603	9
11	Swat	2309570	92383	7880	9
12	Lakki Marwat	876182	35047	2953	8
13	Charsadda	1616198	64648	5293	8
14	Haripur	1003031	40121	3215	8
15	Dir Upper	946421	37857	2509	7
16	Swabi	1624616	64985	3872	6
17	Toor Ghar	171395	6856	373	5
18	D.I. Khan	1627132	65085	3169	5
19	Abbottabad	1332912	53316	2544	5

20	Dir Lower	1435917	57437	2366	4
21	Buner	897319	35893	1412	4
22	Mardan	2373061	94922	3698	4
23	Hangu	518798	20752	724	3
24	Karak	706299	28252	912	3
25	Kohistan	784711	31388	210	1
	Total	30,523,371	1,220,935	101,298	8



13. Family Planning Services & Commodities Provided



DISTRICT	COC cycles	POP cycles	DMPA inj.	Net- En Inj.	Condom Pieces	IUCD	Tubal Ligation	Vasectomy	Implants
Bannu	1578	379	1382	27	8539	229	0	0	0
D.I. Khan	1009	128	1255	41	6243	299	23	0	0
Lakki Marwat	874	208	821	70	4049	136	7	0	1
Tank	1370	85	570	0	1971	251	0	0	0
Abbottabad	1119	51	1125	78	2585	100	1	0	0
Haripur	1335	491	1096	37	7973	220	14	0	3
Kohistan	57	19	97	0	217	0	0	0	0
Mansehra	739	69	1219	15	4819	453	26	0	16
Battagram	1490	20	1196	13	10596	263	0	0	0
Toor Ghar	85	10	163	1	276	1	0	0	0
Karak	428	39	400	5	946	163	13	0	0
Kohat	1693	157	1381	1	12634	660	124	0	63
Hangu	406	796	162	6	2042	64	0	0	6
Buner	248	124	759	57	1881	200	5	0	1
Chitral	573	464	1286	488	3756	67	31	1	0
Dir Lower	303	153	591	0	2548	76	0	0	34
Malakand	910	220	1419	65	8458	138	15	0	10
Swat	2556	168	2852	19	22419	806	149	0	263
Dir Upper	1479	229	1047	67	1952	115	0	0	2
Shangla	768	263	1370	223	1678	265	4	0	5
Mardan	1988	140	1202	481	1851	94	35		4
Swabi	1703	148	823	367	43720	521	13	0	34
Charsadda	1470	105	2345	25	4728	443	109	0	52
Nowshera	2045	113	1715	20	1673	1762	25	0	213
Peshawar	2243	437	2874	870	17229	419	404	0	6
Total	28469	5016	29150	2976	174783	7745	998	1	713

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

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.

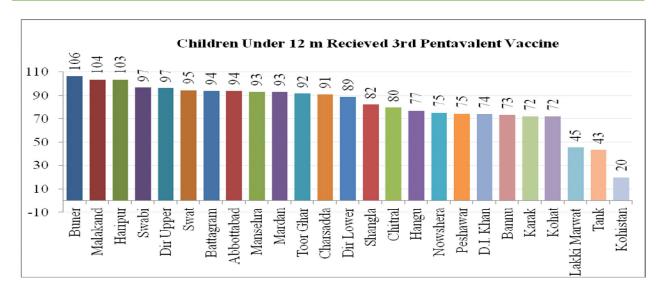
Immunization is a proven tool for controlling and eliminating life-threatening infectious diseases. It is one of the most cost-effective health investments, with proven strategies that make it accessible to even the most hard-to-reach and vulnerable populations. It has clearly defined target groups; 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#	DISTRICT	Population Population	Expected	Children under 12 m received	%age
Sii		•	Children	3rd Pentavalent vaccine	
1	Buner	897319	6506	6926	106
2	Malakand	720295	5222	5410	104
3	Haripur	1003031	7272	7524	103
4	Swabi	1624616	11778	11429	97
5	Dir Upper	946421	6862	6642	97
6	Swat	2309570	16744	15873	95
7	Battagram	476612	3455	3252	94
8	Abbottabad	1332912	9664	9085	94
9	Mansehra	1556460	11284	10534	93
10	Mardan	2373061	17205	16047	93
11	Toor Ghar	171395	1243	1141	92
12	Charsadda	1616198	11717	10678	91
13	Dir Lower	1435917	10410	9268	89
14	Shangla	757810	5494	4515	82
15	Chitral	447362	3243	2588	80
16	Hangu	518798	3761	2901	77
17	Nowshera	1518540	11009	8297	75
18	Peshawar	4269079	30951	23101	75
19	D.I. Khan	1627132	11797	8717	74
20	Bannu	1167892	8467	6210	73
21	Karak	706299	5121	3692	72
22	Kohat	993874	7206	5182	72
23	Lakki	876182	6352	2887	45
	Marwat				

	Total	30,523,371	221,294	184,259	83
25	Kohistan	784711	5689	1135	20
24	Tank	391885	2841	1225	43



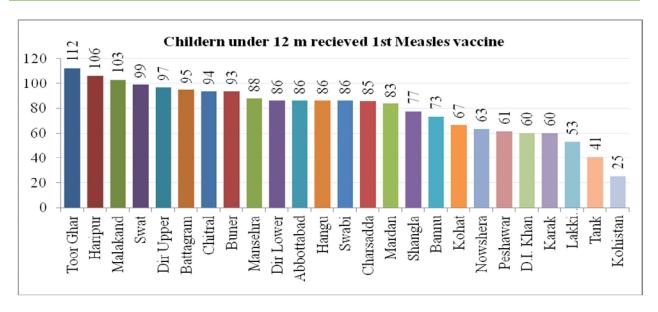
b. Children under 12 Months received 1st Measles vaccine

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#	DISTRICT	Population	Expected Children	Children under 12 m received 1st Measles vaccine	%age
1	Toor Ghar	171395	1242	1396	112
2	Haripur	1003031	7271	7728	106
3	Malakand	720295	5222	5371	103
4	Swat	2309570	16744	16584	99
5	Dir Upper	946421	6861	6645	97
6	Battagram	476612	3455	3275	95
7	Chitral	447362	3243	3034	94
8	Buner	897319	6505	6082	93
9	Mansehra	1556460	11284	9923	88
10	Dir Lower	1435917	10410	8964	86
11	Abbottabad	1332912	9663	8312	86
12	Hangu	518798	3761	3231	86
13	Swabi	1624616	11778	10110	86
14	Charsadda	1616198	11717	10015	85
15	Mardan	2373061	17204	14361	83
16	Shangla	757810	5494	4247	77
17	Bannu	1167892	8467	6207	73
18	Kohat	993874	7205	4797	67
19	Nowshera	1518540	11009	6987	63
20	Peshawar	4269079	30950	19021	61
21	D.I. Khan	1627132	11796	7110	60

22	Karak	706299	5120	3082	60
23	Lakki Marwat	876182	6352	3369	53
24	Tank	391885	2841	1157	41
25	Kohistan	784711	5689	1441	25
	Total	30,523,371	221,294	172,449	78

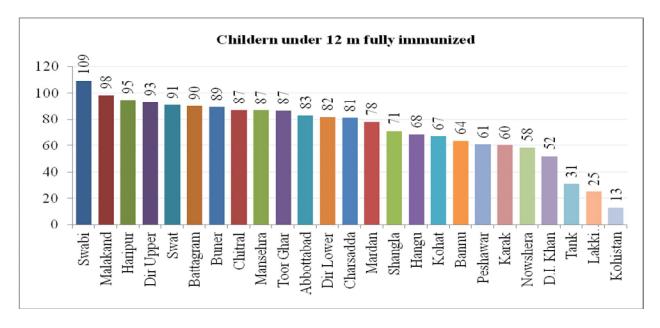


c. Children Under 12 Months Fully Immunized

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#	DISTRICT	Population	Expected Children	Children fully immunized	%Age
1	Swabi	1624616	11778	12854	109
2	Malakand	720295	5222	5129	98
3	Haripur	1003031	7272	6882	95
4	Dir Upper	946421	6862	6379	93
5	Swat	2309570	16744	15255	91
6	Battagram	476612	3455	3115	90
7	Buner	897319	6506	5821	89
8	Chitral	447362	3243	2822	87
9	Mansehra	1556460	11284	9789	87
10	Toor Ghar	171395	1243	1077	87
11	Abbottabad	1332912	9664	8011	83
12	Dir Lower	1435917	10410	8513	82
13	Charsadda	1616198	11717	9497	81
14	Mardan	2373061	17205	13405	78
15	Shangla	757810	5494	3892	71
16	Hangu	518798	3761	2569	68
17	Kohat	993874	7206	4832	67
18	Bannu	1167892	8467	5386	64
19	Peshawar	4269079	30951	18767	61
20	Karak	706299	5121	3082	60

21	Nowshera	1518540	11009	6429	58
22	D.I. Khan	1627132	11797	6103	52
23	Tank	391885	2841	881	31
24	Lakki Marwat	876182	6352	1590	25
25	Kohistan	784711	5689	723	13
	Total	30,523,371	221,294	162,803	74

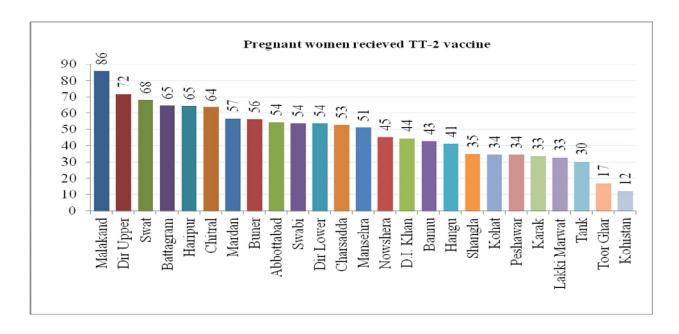


d. Pregnant Women Received TT-2 Vaccine

During 1st quarter 2018, out of **259,449** expected pregnant women, **126,981** (49%) women received **TT-2** vaccination. Among districts there is a variation that ranges from **86% to 12%**. Most of the districts fall under **70% to 30%**.

S#	DISTRICT	Population	Expected Pregnancy	Pregnant women received TT-2 vaccine	%Age
1	Malakand	720295	6123	5253	86
2	Dir Upper	946421	8045	5760	72
3	Swat	2309570	19631	13381	68
4	Battagram	476612	4051	2633	65
5	Haripur	1003031	8526	5502	65
6	Chitral	447362	3803	2418	64
7	Mardan	2373061	20171	11437	57
8	Buner	897319	7627	4300	56
9	Abbottabad	1332912	11330	6160	54
10	Swabi	1624616	13809	7446	54
11	Dir Lower	1435917	12205	6556	54
12	Charsadda	1616198	13738	7277	53
13	Mansehra	1556460	13230	6748	51
14	Nowshera	1518540	12908	5844	45
15	D.I. Khan	1627132	13831	6141	44
16	Bannu	1167892	9927	4238	43
17	Hangu	518798	4410	1811	41
18	Shangla	757810	6441	2244	35
19	Kohat	993874	8448	2912	34

20	Peshawar	4269079	36287	12438	34
21	Karak	706299	6004	2007	33
22	Lakki Marwat	876182	7448	2434	33
23	Tank	391885	3331	1007	30
24	Toor Ghar	171395	1457	246	17
25	Kohistan	784711	6670	788	12
Tota	1	30523371	259449	126981	49



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

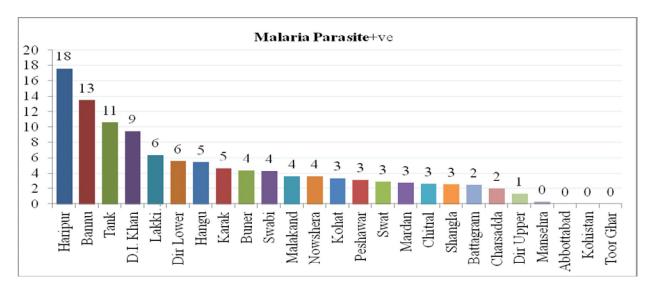
This indicator measure the proportion of blood slides tested positive for Malaria.

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. Mosquirix a recombinant protein-based malaria vaccine) relies on a single protein from the malaria parasite to induce immunity.

S.No	DISTRICT	Slides examined	Slides MP +ve	%age
1	Haripur	233	41	18
2	Bannu	10626	1433	13
3	Tank	4073	432	11
4	D.I. Khan	13182	1242	9
5	Lakki Marwat	4234	270	6
6	Dir Lower	2736	151	6
7	Hangu	2097	114	5
8	Karak	4606	211	5
9	Buner	3781	163	4
10	Swabi	2155	92	4
11	Malakand	4486	162	4

12	Nowshera	3609	129	4
13	Kohat	5201	174	3
14	Peshawar	5621	177	3
15	Swat	4948	141	3
16	Mardan	7861	213	3
17	Chitral	1840	48	3
18	Shangla	1181	30	3
19	Battagram	41	1	2
20	Charsadda	12873	254	2
21	Dir Upper	3389	44	1
22	Mansehra	429	1	0
23	Abbottabad	59	0	0
24	Kohistan	30	0	0
25	Toor Ghar	0	0	0
	Total	99291	5523	6



b. Plasmodium Falciparum Rate

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

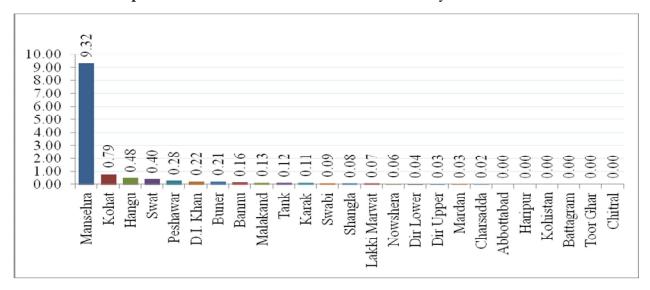
District Mansehra is on top of the list in table and reflects the figures i.e 429 slides have been examined and reported 40 with 9.32% positive patients of Malaria Plasmodium Falciparum.

S.No	DISTRICT	Slides examined	Slides P. Falciparum +ve	%age
1	Mansehra	429	40	9.32
2	Kohat	5201	41	0.79
3	Hangu	2097	10	0.48
4	Swat	4948	20	0.40
5	Peshawar	5621	16	0.28
6	D.I. Khan	13182	29	0.22
7	Buner	3781	8	0.21
8	Bannu	10626	17	0.16
9	Malakand	4486	6	0.13
10	Tank	4073	5	0.12
11	Karak	4606	5	0.11

12	Swabi	2155	2	0.09
13	Shangla	1181	1	0.08
14	Lakki Marwat	4234	3	0.07
15	Nowshera	3609	2	0.06
16	Dir Lower	2736	1	0.04
17	Dir Upper	3389	1	0.03
18	Mardan	7861	2	0.03
19	Charsadda	12873	3	0.02
20	Abbottabad	59	0	0.00
21	Haripur	233	0	0.00
22	Kohistan	30	0	0.00
23	Battagram	41	0	0.00
24	Toor Ghar	0	0	0.00
25	Chitral	1840	0	0.00
	Total	99291	212	0.21

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.

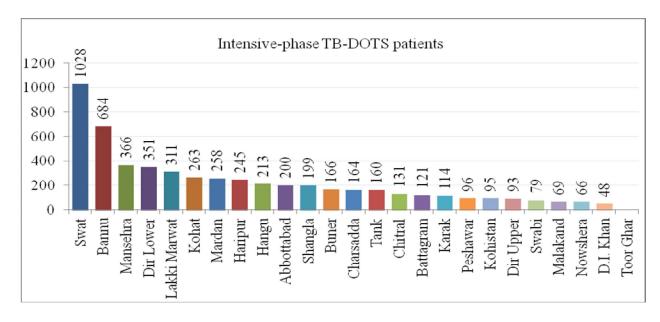


16. Intensive-Phase TB-DOTS Patients

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	ISTRICT Intensive-phase TB-DOTS patients		
1	Swat	1028		
2	Bannu	684		
3	Mansehra	366		
4	Dir Lower	351		
5	Lakki Marwat	311		
6	Kohat	263		
7	Mardan	258		
8	Haripur	245		

9	Hangu	213
10	Abbottabad	200
11	Shangla	199
12	Buner	166
13	Charsadda	164
14	Tank	160
15	Chitral	131
16	Battagram	121
17	Karak	114
18	Peshawar	96
19	Kohistan	95
20	Dir Upper	93
21	Swabi	79
22	Malakand	69
23	Nowshera	66
24	D.I. Khan	48
25	Toor Ghar	
	Total	5520



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

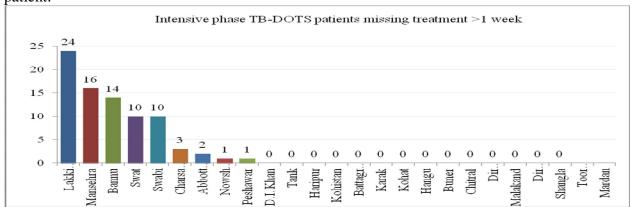
This indicator measures the proportion of TB-DOTS intensive phase patients missing treatment more than one week. This is the suggestive of the performance of the TB-DOTS treatment center and the associated treatment supporters.

and th	and the associated treatment supporters.				
S.No	DISTRICT	Intensive phase TB-DOTS patients missing treatment >1 week			
1	Lakki Marwat	24			
2	Mansehra	16			
3	Bannu	14			
4	Swat	10			
5	Swabi	10			
6	Charsadda	3			
7	Abbottabad	2			
8	Nowshera	1			
9	Peshawar	1			

10	D.I. Khan	0
11	Tank	0
12	Haripur	0
13	Kohistan	0
14	Battagram	0
15	Karak	0
16	Kohat	0
17	Hangu	0
18	Buner	0
19	Chitral	0
20	Dir Lower	0
21	Malakand	0
22	Dir Upper	0
23	Shangla	0
24	Toor Ghar	0
25	Mardan	0
	Total	81

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.

Districts D.I Khan to Mardan report patients missing treatment >1 week, while rest report zero patient.



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.

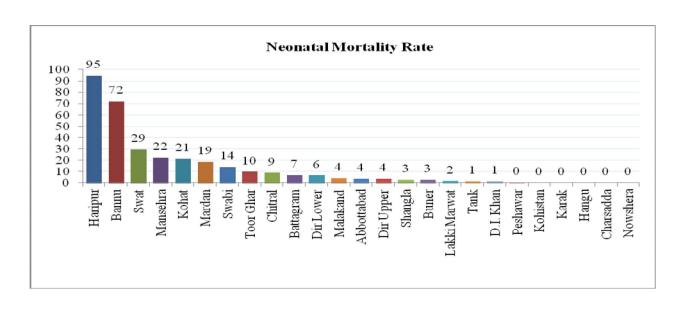
Through mortality rates there is an opportunity to get a clear picture of the preventable and the non-preventable causes, enabling the department to concentrate on the prevention of death due to avoidable causes.

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 Birth in the Facility	Neonatal Death in the Facility	Neonatal Mortality Rate
1	Haripur	1966	186	95
2	Bannu	3769	271	72
3	Swat	6375	188	29
4	Mansehra	1798	40	22
5	Kohat	2818	60	21
6	Mardan	3209	60	19
7	Swabi	1656	23	14
8	Toor Ghar	103	1	10
9	Chitral	1702	15	9
10	Battagram	1643	11	7
11	Dir Lower	3082	20	6
12	Malakand	4283	17	4
13	Abbottabad	2207	8	4
14	Dir Upper	1989	7	4
15	Shangla	1049	3	3
16	Buner	2225	6	3
17	Lakki Marwat	649	1	2
18	Tank	703	1	1
19	D.I. Khan	706	1	1
20	Peshawar	3266	1	0
21	Kohistan	334	0	0
22	Karak	1133	0	0
23	Hangu	758	0	0
24	Charsadda	2501	0	0
25	Nowshera	1084	0	0
	Total	51008	920	18



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

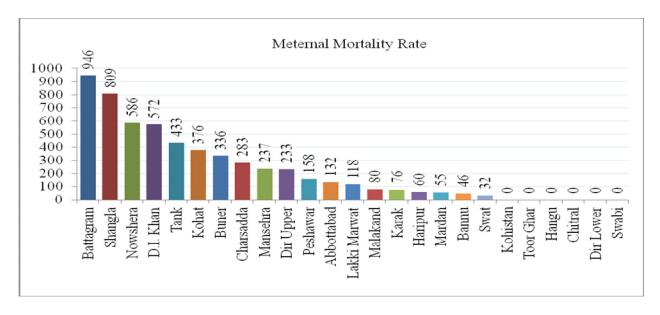
The indicator Maternal Mortality Rate (Maternal Deaths Reported by LHW) illustrates the death rates of the mother during pregnancy or deliveries.

[Over Maternal Mortality Rate is 188 of the province]

S.No	DISTRICT	Delivery by skilled persons reported	Maternal deaths reported	Maternal Mortilaty Rate
1	Battagram	317	3	946
2	Shangla	742	6	809
3	Nowshera	3073	18	586
4	D.I. Khan	2623	15	572
5	Tank	1385	6	433
6	Kohat	798	3	376
7	Buner	1192	4	336
8	Charsadda	4237	12	283
9	Mansehra	3799	9	237
10	Dir Upper	429	1	233
11	Peshawar	7611	12	158
12	Abbottabad	3779	5	132
13	Lakki Marwat	844	1	118
14	Malakand	2513	2	80
15	Karak	1323	1	76
16	Haripur	3340	2	60
17	Mardan	5478	3	55
18	Bannu	2168	1	46
19	Swat	6193	2	32
20	Kohistan	16	0	0
21	Toor Ghar	0	0	0
22	Hangu	289	0	0
23	Chitral	1162	0	0
24	Dir Lower	504	0	0
25	Swabi	2531	0	0
	Total	56346	106	188

District **Dir Upper** is on top of the list and report **317** numbers of deliveries and **3** maternal deaths with **946** maternal mortality rate and District **Shangla** reported **6** maternal deaths among **742** deliveries and the maternal mortality rate is **809**. This needs to be verified by district administration.

Districts Kohistan to Swabi 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 25 of the province]

LOVEI	[Over all Infant Mortanty Kate is 23 of the province]					
S.No	DISTRICT	Delivery by skilled persons reported	Infant deaths reported	Infant Mortilaty Rate		
1	Tank	1385	69	50		
2	Swabi	2531	124	49		
3	Kohat	798	35	44		
4	Nowshera	3073	130	42		
5	Buner	1192	48	40		
6	Mansehra	3799	144	38		
7	Abbottabad	3779	142	38		
8	Karak	1323	41	31		
9	Dir Upper	429	13	30		
10	Shangla	742	17	23		
11	Lakki Marwat	844	19	23		
12	Peshawar	7611	161	21		
13	D.I. Khan	2623	55	21		
14	Chitral	1162	23	20		
15	Haripur	3340	66	20		
16	Battagram	317	6	19		
17	Swat	6193	115	19		
18	Charsadda	4237	73	17		
19	Malakand	2513	42	17		
20	Bannu	2168	31	14		

21	Mardan	5478	35	6
22	Kohistan	16	0	0
23	Toor Ghar	0	0	0
24	Hangu	289	0	0
25	Dir Lower	504	0	0
	Total	56346	1389	25

