MC Centre:

Date:

SUPERVISORY VISITS TO MICROSCOPY CENTERS

MC Staff						
	Name		Designation			
1						
2						
3						
4						
5						
6						
Gei	neral Observation					
Acc	essibility from Road/ OPD: Satisfactor	y Not satisfactory				
Spa	ce: Adequate Not adequate					
-	anliness: Satisfactory Not satisfa	ectory				
	astructure facilities:	-				
Displayed materials						
Standard Operation Procedures (SOP): Yes No						
Staining Procedure: Yes No						
Grading chart: Yes No						
EQA protocoal: Yes \(\subseteq \text{No} \subseteq \)						
Availability of items/ Consumables/ reagents/ equipment's						
		Availability				
Con	sumables	Yes No				
Stai	ining reagents with expire dates Yes No					
Equ	uipment's- Microscopes Yes No					
EQ	Yes No					

Documentation						
	Lab Register	Lab request form				
Availability	Yes No No	Yes No No				
Completeness	Yes No	Yes No				
Accuracy	Yes No	Yes No No				
Up to date	Yes No					
TB Register number entered for positives (if not, check in the DTB Register)	Yes No					
Infection Control						
Ventilation: Adequate Not ac	dequate					
PPE: Satisfactory Not satisfactory						
Waste Disposal - Liquid waste						
Solid waste						
Infectious waste:						
Training						
		Date				
EQA training	Yes No					
PHLT in-service training	Yes No No					
Other training						
Patient instructions						
Given by whom	_					
Collection of sputum	Adequate Not adequate	e 📙				
Staining procedures	Adequate Not adequate	е 🗌				

W	or	ΚI	na	າດ

Month	SLIDES EXAMINED IN THE LABORATORY DURING THE MONTH				PATIENTS EXAMINED					
	DIAGNOSIS FOLLOW UP		OW UP	DIAGNOSIS FOLLOW		W UP				
	Positive	Total	Slide	Positive	Total	Slide	Positive	Total	Positive	Total
			Positivity Rate			Positivity Rate				

Recommendations:	