Immunization monitor chart: the Kenya Expanded Programme on Immunization. Colour lithograph by Ministry of Health, ca. 2000.

Publication/Creation

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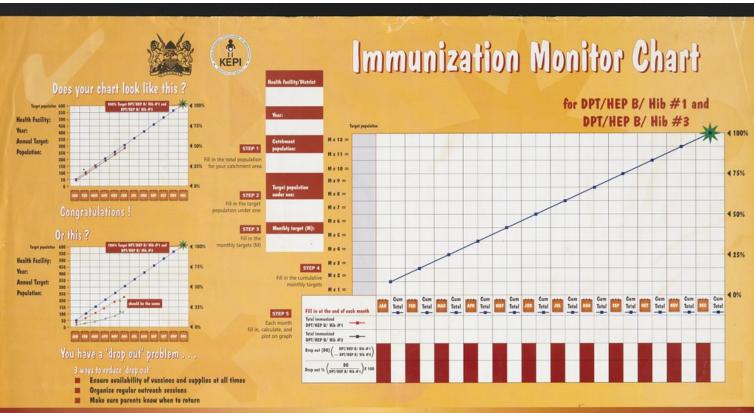
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AT THE END OF EACH MONTH.

- THE END OF EACH MONTH,

 Count all cases of the target diseases measles, neonatal tetanus and acute flaccid paralysis (AFP)

 Enter the number of cases into the appropriate section of the monitoring chart.

 Ensure that each reported case of the target disease is fully investigated using the Case-based Integrated Disease Surveillance and Response (IDSR) form and that filled forms are sent to KEPI.

 For each case of AFP, ensure that two stool samples are taken 24—36 hours apart and sent to KEMRI or KEPI.

 For NRT, work with the District Public Health Nurse (DPINI) to ensure that child bearing age women in the community where the case was detected are given 3 doses of tetanus toxoid (IT) at the following intervals.

 ** TIT: Immediately

 ** TIT: At least 4 weeks after TI1

 ** TIT: At least 4 weeks after TI1

 ** TIT: At least 12 months after TI2

 For AFP, wait for the results of the stool specimen. When there is need for an intervention, the District

- For AFP, with for the results of the stool specimen. When there is need for an intervention, the District Disease Surveillance Coordinator (DDSC) will provide specific guidance. For measles, if cases are coming from the a particular community, inform the DDSC immediately and you will be advised on what to do.

DISEASE SURVEILLANCE

													_	
	DISEASE SURVEILLANCE	J	F	м	A	м	J	J	А	5	0	N	D	TOTAL
	MEASLES													
	NEONATAL TETANUS													
	ACUTE FLACCID PARALYSIS (AFP)													



PLACE THIS CHART SO IT CAN BE SEEN BY STAFF EVERY DAY!