

HIV SELF-TESTING

IM SITE

















Name of the site: District:						PuP_POC Name:		POC contact number:			Year:						
Address:																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
		Site details				Demonstration		Stock details				Kit details					
S.No	Date	City/Place	Name of the Site	Type of the Site	Contact person of the site	Contact number of the site in charge	#kits for demosntration (input)	#kits used for onsite demonstration	Opening stock (in number)	# Procured received	# Despatched/ distributed	# Cancelled kits	Dispatched/distributed to PuP or individuals (please mention the name of the PuP or order id)	Despatched/distributed Kit IDs	Cancelled kits	Closing stock (in numbers)	Remarks
				Private clinic=1 CBO=2 Community site=3 Integrated care center=4			<i>Kits given to PuP for demonstration</i>		Opening stock need to match with the closing stock of the previous day			Cancelled due to Broken/unsealed/ expired/pilferage		<i>Please write the ID as mentioned in the KIT</i>	Please write the ID as mentioned in the KIT for those that are cancelled	Please check the numbers using the column datat (10+11)-12-13	
								1	10	3	2	2	11002234	1119988766	1119988769	9	

Delhi Office

C-11 (2nd Floor), Green Park Extension, New Delhi - 110016 Phone - 0114 1750 180 | Online presence - https://linktr.ee/programACCELERATE







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National AIDS Control Organisation

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