

Ministry of Health, Community Development, Gender, Elderly and Children

NACS Record No.	[_][_	_][_	_][_	_]
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## **Monthly Summary Form for NACS Services**

Region					District Facility name										Facility code																				
Type of service (t	Type of service (tick one v): □RCH □PMTCT □CTC □Inpatient □OPD □TB/DOTS □MVC □Other																																		
	r of		Number of clients by nutritional and HIV status on entry															Number of clients receiving specialised food products, by product							Number of clients exiting, by reason										
Client category	diet	ΥCF			HIV s	status	<b>3</b>			HIV s	tatus			HIV status			ese		HIV	statu	5				뇬	SF		ıre <sup>5</sup>			7	}			
	Sex	Assessed	uo pa	- E	SAM	+1	_2	E <sup>3</sup>	U <sup>4</sup>	MAM	+1	_2	E <sup>3</sup>	U <sup>4</sup>	Normal	+1	_2	E <sup>3</sup>	U <sup>4</sup>	Overweight/ok	+1	_2	E <sup>3</sup>	U <sup>4</sup>	F-75	F-100	New RUTF	Continuing RUTF	New FBF or RUSF	Continuing	Treatment failure	Graduated <sup>6</sup>	Missed	Lost to follow-up <sup>7</sup>	Died
0–6 months																																			
	M																																		
7–11 months																																			
M	F																																		
12-23 months	M																																		
	F																																		
24–59 months	М																																		
5–14 years	F M																																		
	F																																		
15–17 years	М																																		
101	F																																		
18+ years	М																																		
Pregnant/≤ 6 mos. post-partum	F																																		
Total number of	F																																		
clients during the month	М																																		
Specialised food produ																																ns of I	RUTF (	1 cart	on
Name of person report			_	_		f FBF or 92 g packets of RUSF 6. Total no. of boxes of FBF (1 box contains 45 packets of 300 g each) or carton  Position Date Signature Telepl																packe narks		-											

¹HIV positive ²HIV negative ³HIV exposed ⁴Status unknown ⁵Client's condition deteriorated, requiring medical transfer ⁶Client reached target weight, WHZ, BMI or MUAC ⁷Client did not return for 3 consecutive visits