



नेपाल सरकार  
स्वास्थ्य तथा जनसंख्या मन्त्रालय  
स्वास्थ्य सेवा विभाग  
स्वास्थ्य व्यवस्थापन सूचना प्रणाली

ओ.एस.टी. रजिष्टर  
OPOID SUBSTITUTION THERAPY (OST) REGISTER

स्वास्थ्य संस्थाको नाम

प्रदेश:

जिल्ला:

नगर/गाउँ पालिका:

वडा नं.:

प्रयोग मिति: आर्थिक वर्ष:

देखि

सम्म

[illegible]

# OPIOID SUBSTITUTION THERAPY (OST) REGISTER

SN	Registration			Name, Caste and Caste Code		Address		Age/Sex	Marital Status*	Client code	Date of Birth			Dual Risk Behaviour	Entry point	
	DD	MM	YYYY	Name		District	Others	Age	Code		Contact No					
	Master No		Service No								Mobile					
				Caste	Caste Code	RM/Municipality, Ward, Tole	Sex code	Mobile 2 (supporter)			Code	Code				
								SMS Consent					Y/N			
Educational Status**		Education Level***	Employment status****	Average Monthly Income (in NPR)	*Marital Status: 1=Unmarried, 2=Married, 3=Divorce, 4=Widow/Widower, 5=Living Together, 6=Separated NA=Not Applicable **Educational Status: 1=Illiterate, 2=Literate ***Education level: 1=Primary, 2=Secondary, 3=Higher secondary, 4=Bachelor or above ****Employment status: 1=Unemployed, 2=Employed											
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## OST History

OST Start Date			Type of OST started at first			Maximum Dose of OST	Switch in OST		Name of Switched OST		Switched Date		Maximum dose of Switched OST	From/To (Name of the site)		Date			OST		
DD	MM	YYYY	Methadone		Buprenorphine			Y	N			DD	MM	YYYY		Transfer In		DD	MM	YYYY	B/M
																		DD	MM	YYYY	B/M
																		DD	MM	YYYY	B/M
Status of Hepatitis B		Date of Identification		Status of Hepatitis C	Date of Identification		Status of HIV		Date of Identification		ART Start date and Current Regimen				Transfer Out		DD	MM	YYYY	B/M	
											Date		Regimen				DD	MM	YYYY	B/M	
P/N		DD	MM	YYYY	P/N	DD	MM	YYYY	P/N	DD	MM	YYYY					DD	MM	YYYY	B/M	
																	DD	MM	YYYY	B/M	

## OST Treatment Follow up

**1st row:** 1= On treatment on OST, 2= Drop Out, 3= Re-enrollment, 4= Discharge, 5= Death, 6= Transfer out

**2nd row:** Received dose of OST on that day

[illegible]

Day	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	
mm/yyyy																																										
Row 1																																										
Row 2																																										
Day	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	
mm/yyyy																																										
Row 1																																										
Row 2																																										
Day	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	
mm/yyyy																																										
Row 1																																										
Row 2																																										
Day	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	
mm/yyyy																																										
Row 1																																										
Row 2																																										
Day	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	
mm/yyyy																																										
Row 1																																										
Row 2																																										
Day	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	
mm/yyyy																																										
Row 1																																										
Row 2																																										
Day	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	
mm/yyyy																																										
Row 1																																										
Row 2																																										

Needle Syringe Programme (NSP)	
Out	In
1	2
यस जिल्लामा PWID कार्यक्रममा कार्यरत गैर सरकारी संस्था माफत प्राप्त प्रतिवेदनका आधारमा Out र In मा Data Entry गर्ने।	