

REPUBLIC OF KENYA



MINISTRY OF HEALTH

TUBERCULOSIS LABORATORY REGISTER

NAME OF FACILITY:

The contents of this register are strictly confidential

Disclosure of information in this register to a third party is punishable by law



National Tuberculosis, Leprosy and Lung Disease Program

February 2023
MOH/DPPH/DNTLD/LABREG/001

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Instructions - AFB Microscopy & GeneXpert

-	Columns	What/ How to Fill
1	Lab Serial No	Enter Serial No. from 001 in 1st January to the last No. on 31st December
2	Date Sample Collected	Enter the date when the samples are collected
3	Date Sample received and time in	Enter the Date and time when the samples are Received
4	Patient's Name	Enter the three Names of the Patient
5	TB registration number for follow ups	This is the TB registration No. given to follow up patients at the chest clinic usually written on the request form if not a follow up patient use the OPD no.
6	Sex (M/F)	Enter either M for male or F for female
7	Age (Years)	Enter the actual age of the patient
8	Patients ID No./Nemis/Passport No	Enter the National ID number for adults and NEMIS for children above three years
9	Patients physical address	Enter the patients physical address
10	Patients/ guardian Phone number	Enter the patients/guardian phone number
11	Name of referring Facility/ Department	Enter the name of the facility or department as written on the request form
12	Type of patient	Enter N for new, F/up for follow up and O for others
13	HIV Status	Indicate either Pos, Neg, Not done(ND) and Decline (D)
14	Sample Appearance	For both spot and morning sample, enter S for Saliva and M for Muco purulent B for blood stain
15	Microscopy result (ZN/FM)	Enter the test results for both spot (Sp) and morning (Mng) samples)
16	Gene Xpert/Truenat results/TB LAMP/LF-LAM	Indicate as guided by the key provided
17	Date sample tested	Enter the date when the sample was tested
18	Time Out(results dispatched)	Enter time when results are dispatched
19	TAT	From date sample received from the lab minus date results dispatched
20	Laboratory Officer's Name	Enter the Name of the officer who performed the test
21	Remarks	Enter any other relevant comments e.g. place and date sample referred

Instructions- Culture (Last Five Pages)

Columns			What/ How to Fill
No. of Samples sent for culture			Enter the total no of samples referred for culture
No. of Culture Results Received			Enter the total no of culture results received for culture
No. of Samples Rejected by Testing Lab			Enter the total no of samples rejected
1st line LPA (MTBDRplus) R - Mutation detected S: Mutation NOT detected; I - Indeterminate	Rif	Rifampicin	Enter results for 1stline LPA for Rifampicin (rpoB), INH (katG) high level, (inhA) Low level as received
	INH	KatG	
		inhA	
2nd line LPA (MTBDRsl) R: Mutation detected S: Mutation NOT detected I - Indeterminate	Flouroquinolones	Lfx	Enter results for 2ndline LPA for Flouroquinolones Lfx/ Mfx (gyrA/ gyrB), Aminoglycosides Kan/ Amk/ Cap (rrs) as received
		Mfx	
	Aminoglycosides	Kan	
		Amk	
		Cap	

Phenotypic 1st line DST R: Resistant S: Sensitive I: Indeterminate	Inh	Enter results for individual 1stline drugs as per Drug pattern as received
	Rif	
	Emb	
	Pza	
Phenotypic 2nd line DST R: Resistant S: Sensitive I: Indeterminate	Lfx	Enter results for individual 2ndline drugs as per Drug pattern as received
	Mfx (CC, MB)	
	Bdq	
	Cfz	
	Lzd	
	Dlm	
	Pmd	
Sequencing	Enter the sequencing results	
MOTT	Enter the MOTT species isolated	

Testing laboratory S/ No.	Date sample collected	Date sample received and Time in	Name (full)	TB Registration No. for follow ups	Sex M/F	Age (years)	Patients ID No./ NEMIS	Patients Physical Address	Patients/guardian phone number	Name of referring facility / Department
Type of patient		HIV status				Sputum Appearance		Microscopy result		
N: New F/up: Follow up (Indicate F2, F3, F5, F6 etc.) O: Others specify		Pos: Positive Neg: Negative ND: Not done D: Declined				S: Saliva M: Muco purulent, B: Blood stain		No AFB seen: 0 Actual no. 1+ 2+ 3+		

Type of patient	HIV Status	Sample Appearance		Microscopy Result (ZN/FM)		TB-LAMP	LF-LAM	Gene Xpert/Truenat	Date tested	Time out (Results dispatch)	TAT	Laboratory officer's name	Remarks (Date and place sample referred etc)
		N, F/Up, O	(Pos, Neg, ND, D)	Spot	Morning			Spot					

GeneXpert/Truenat results								TB-LAMP/LF-LAM					
TS: MTB detected RIF resistance not detected RR: MTB detected Rifampicin resistance detected TI: MTB detected RIF resistance indeterminate N: MTB not detected I: Invalid NR: no results E: error Tr: MTB detected trace								Pos, Neg, I:Invalid		TAT-Turn-around time			

Culture Results



National Tuberculosis, Leprosy and Lung Disease Program

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