

Ministry of Health & Family Welfare Government of India



USER MANUAL

National Viral Hepatitis Control Program Management Information System – Hepatitis B (NVHCP – MIS)

Release 1.0



Acknowledgement

Monitoring and Evaluation framework is the backbone of any program and success of the program is dependent on its robustness. Under the National Viral Hepatitis Control Program (NVHCP), one of the key strategies is a web-based Management Information System (MIS). Based on the patient flow, a web and android application has been developed so that all stakeholders involved in managing the activities of NVHCP can fill in the information directly into the software. It is envisaged that the entire recording and reporting system is paperless through this computerised data management system for users to capture clinical records of patients in a systematic way, based on standardised formats.

This manual has been formulated to guide step by step use of the application. This will enable all users working for the program to understand how to begin and complete a patient record, access data captured under the program and share automated data dashboards and reports.

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This is a great reflection of the importance that is attached to the united commitment of all the stakeholders in the country to reduce the morbidity and mortality associated with hepatitis. The program is confident that this web and android based application will be hugely beneficial to the service providers, program implementers and provide meaningful data to the policy makers.

Acronyms

APRI	AST to Platelet Ratio Index
AST	Aspartate aminotransferase
AST (ULN)	Aspartate aminotransferase (Upper limit of normal)
CKD	Chronic Kidney Disease
DNA	Deoxyribonucleic acid
EGFR	Estimated Glomerular Filtration Rate
HBV (or Hep-B)	Hepatitis-B
HCV (or Hep-C)	Hepatitis-C
МТС	Model Treatment Centre
NVHCP	National Viral Hepatitis Control Program
NVHMU	National Viral Hepatitis Management Unit
OPD ID	Out Patient Department Identifier
РРР	Public-Private Partnership
SVHMU	State Viral Hepatitis Management Unit
SVR	Sustained Virologic Response
тс	Treatment Centre
UID (or NVHCP ID)	Unique Identifier
VL	Viral Load

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Index for various pages of application:

Sr No.	Screen	Screen name	Use	Page no.	
	1	Registration homepage	Add new record or edit existing records.	15	
Α	2.1 - 2.4	Patient registration	Enter patient registration information such as name, address, gender, etc.	19 – 21	
В	3.1 - 3.2	Screening	Enter screening information such as date of screening test, result, etc.	22 – 23	
С	4.1-4.4	Baseline Tests	Enter baseline testing such as ALT, AST, etc. and cirrhosis status.	24 – 25	
D	5.1 - 5.4	Known History	Enter known history information such as co- morbidities and referral information.	26 – 28	
E	6.1	Prescription	Enter prescription information such as regimen, duration, prescribing doctor, etc.	29	
F	7.1 – 7.3	Dispensation	Enter drug dispensation information such as date of dispensation, pills left, etc.	30 - 31	
G	8.1-8.4	HBV DNA	Enter HBV DNA test details such as sample collection and transport, DNA count, etc.	32 – 34	
Н	9.1	Interrupted Patient	Recording interruption status and reasons	35	
1	10.1	Patient Transfer	Transferring in/out patients from a facility	36	

Index for various pages of web portal:

Sr No.	Screen	Screen name	Use	Page no.	
	1	Registration homepage	Add new record or edit existing records.	50	
А	2.1 – 2.3	Patient registration Enter patient registration information such as name, address, gender, etc.		54 – 56	
В	3.1	Screening	Enter screening information such as date of screening test, result, etc.	57	
с	4.1 - 4.2	Baseline Tests	Enter baseline testing such as ALT, AST, etc. and cirrhosis status.	58 – 59	
D	5.1 – 5.3	Known History	Enter known history information such as co- morbidities and referral information.	60 - 61	
E	6.1	Prescription	Enter prescription information such as regimen, duration, prescribing doctor, etc.	62	
F	7.1 – 7.2	Dispensation	Enter drug dispensation information such as date of dispensation, pills left, etc.	63 – 64	
G	8.1 - 8.2	HBV DNA	Enter HBV DNA test details such as sample collection and transport, DNA count, etc.	65 – 66	
Н	9.1 - 9.2	Interrupted Patient	Recording interruption status and reasons	67 – 68	
I	10.1 – 10.4	Patient Transfer Transferring in/out patients from a facility		69 – 71	
J	11.1 – 11.2	LTFU module Contacting patients who missed treatment		72 – 73	

Data Entry Conventions

1. Data Entry Conventions

Field Type

The MIS uses the following field types

Field type	Data entry rules	Example
Alpha- numeric/Text	Both numbers and alphabets allowed	7,Lok Marg
Numeric	Only numbers allowed	7
Alphabetical	Only alphabetical text allowed	Lok Marg
Date	Only date entry allowed	20-05-2019
Toggle	Single selection among displayed options; selection of an option leads to further fields linked to selection made	Is Sample Transported Yes No
Drop-down	Single selection among multiple options in drop-down format	Dropdown Item 1 Item 2 Item 3
Check-box	Single selection among multiple options	☑ 12
Check-list	Multiple selection among displayed options	Renal impairment Active Tuberculosis HIV
<field></field>	A field with a $*$ mark has to be compulsorily filled with required information	Name [*] : i.e. the 'Name' of the person has to be mandatorily entered

Android Application

User Manual Guide

1. How to access the application and login?

1. Accessing the App

NVHCP - MIS App can be accessed using an android smart-phone or tablet with android version 6.0 and above. The android version of a smart-phone or tablet can be checked in the settings section.

The app can be downloaded by logging into http://nvhcp.gov.in/

2. First Page of the System/Log-in Page

The first page of the system can be accessed by downloading and installing the app. The page opens and looks like the following:



Steps for logging in:

- a) Enter "Username" provided by NVHCP (NVHMU/SVHMU) which will be unique for each user
- b) Enter "Password" provided by NVHCP (NVHMU/SVHMU); password should be changed by the user on first login on web
- c) Select checkbox "I accept terms and conditions"
 - a. To view terms and conditions (listed below), click on the hyperlinked text
 - b. Terms and conditions
 - i. I will make the entries myself

- ii. I will not intentionally enter incorrect data
- iii. I will ensure the data which I have access to is kept confidential at all times
- iv. I will not share the data I have access to with anyone in any format
- v. I will complete my work on time and diligently
- d) Click on "Login" to enter the App

3. Home Page

Following pages will appear after logging-in:



Homepage	Option	Description
<mark>ා පා ද</mark> ඊ: ⁴ 2/ 49% ◯ 14:20		
Patient Registration Register a patient for testing and treatment of Hepatitis.	Patient registration	• Use this option to register a new patient or edit registration information of existing patients
Test and Results Update the diagnostic information of registered patients.	Testing information	Use this option to edit testing information of existing patients
Update the treatment prescription and dispensation information of infected patients.	Treatment information	Use this option to edit treatment and drug dispensation information of existing patients
Sync data Upload or Download data.	Syncing data	• Use this option to download or upload data to and from the database
	J	

When initiating data entry, data downloading may be required by the user. Rules for data downloading are detailed in section 3 of this document – "How to download or upload data".

2.

How to create a new patient record or view/add information to an existing patient record?

1. Index for navigating various screens of the application:

Sr No.	Screen	Screen name	Use	Page no.	
	1	Registration homepage	Add new record or edit existing records.	15	
		After clicking on "Ac	dd new patient" on registration homepage		
		Patier	nt differentiation	18	
А	2.1 – 2.4	2.4 Patient registration Enter patient registration information such as name, address, gender, etc.		19 – 21	
В	3.1 - 3.2	Screening	Enter screening information such as date of screening test, result, etc.	22 – 23	
с	4.1 - 4.4	Baseline Tests	Enter baseline testing such as ALT, AST, etc. and cirrhosis status.	24 – 25	
D	5.1 – 5.4	Known History	nown History Enter known history information such as co- morbidities and referral information. 26		
E	6.1	Prescription	Enter prescription information such as regimen, duration, prescribing doctor, etc.	29	
F	7.1 – 7.3	Dispensation	Enter drug dispensation information such as date of dispensation, pills left, etc.	as 30 – 31	
G	8.1 - 8.4	HBV DNA	Enter HBV DNA test details such as sample collection and transport, DNA count, etc.	HBV DNA test details such as sample ction and transport, DNA count, etc.32 - 34	
Н	9.1	Interrupted Patient	Recording interruption status and reasons	35	
I	10.1	Transfer module	Transferring in/out patients from a facility	36	

2. Patient flow for understanding the above details:

The decision to identify the people who need treatment for HBV rely upon the presence of cirrhosis, fibrosis, levels of liver enzymes and platelet count. Please follow the below algorithm while registering patients for HBV treatment:



3. Information flow for entering the above details:



Above data flow may vary among facilities depending upon availability of HR and infrastructure

4. Creating a new record or view/add information to an existing record

After clicking on patient registration on the home page, you will be able to view the patient registration page, as shown below:



Steps for adding a new record or editing an existing record

- a) Click on "Add new patient" to initiate the data entry for a patient
- b) For editing existing records, following options can be used:
 - a. If you know the NVHCP ID or phone number of a particular patient, then enter the same in the space provided below "Update/Search record by UID/contact number"
 - b. If you want to list down the records for a facility based on the patient status, then select the "Patient status" from the drop-down below "Update/Search patient record by Status"
 - c. Shortlisted records will be displayed in the space highlighted in grey above
- c) Once a record is displayed, click on the record to view or add details

Test and Result page or *Treatment page, accessible by the homepage,* will only have the '*Search By*' option to find patient records for editing or viewing.

Patient Status' have been explained below:

Patient Status'

Patient's status bar, as shown below, is displayed at the end of every data entry page of the demoapp to guide the user.

Patient's status RNA Positive, Prescriptio	Patient	• Displayed at the end of every page in demo-app to show the stage of
Patient Interruption Status No	olaluo	patients

The following patient statuses appear in the 'Search by Patient Status' option:

Sr. No	Patient status	Situation	Change at				
	Patient Status' appearing in the Patient Registration Module						
1	Diagnosis Pending	HBsAg test yet to be done	Screening page				
2	Not infected	HBsAg test negative	Screening page				
3	HBsAg Positive, Baseline Testing Pending	HBsAg test is positive, baseline testing pending	Testing page				
4	Treatment Recommended, Prescription Pending	If testing shows cirrhotic nature or when the doctor recommends treatment on HBV DNA page	Known history page				
5	Treatment Prescribed, Initiation Pending	Treatment prescribed, 1st dispensation pending	1st dispensation page				
	Patient Status' appear	ing in the Test and Result Mo	dule				
1	Diagnosis Pending	HBsAg test yet to be done	Screening page				
2	Not infected	HBsAg test negative	Screening page				
3	HBsAg Positive, Baseline Testing Pending	HBsAg test is positive, baseline testing pending	Testing page				
4	Treatment Recommended, Prescription Pending	If testing shows cirrhotic nature or when the doctor recommends treatment on HBV DNA page	Known history page				
5	Treatment Prescribed, Initiation Pending	Treatment prescribed, 1st dispensation pending	1st dispensation page				
6	Patient on Follow-up Tests	If testing shows non- cirrhotic nature	Testing page				
7	Persistently elevated ALT levels, HBV DNA pending	'Yes' to 'Persistently elevated ALT levels?' on testing page	HBV DNA page				
8	Non-elevated ALT levels, HBV DNA pending	'No' to 'Persistently elevated ALT levels?' on testing page	HBV DNA page				
9	Treatment not Recommended, Follow-up Tests Advised	Treatment not recommended on HBV DNA page	HBV DNA page				

10	Indecisive ALT levels, follow-up tests advised	'Indecisive' to 'Persistently elevated ALT levels?' on testing page	Testing page		
Patient Status' appearing in the Treatment Module					
1	Treatment Prescribed, Initiation Pending	Treatment prescribed, 1st dispensation pending	Prescription page		
2	On Treatment Dispensation	Nth dispensation done, (N+1)th dispensation pending	(N+1)th dispensation page		

5. Exploring Page Controls

At the bottom of each patient record page, you will find the following five types of page controls:



There are 5 types of page controls on every page:

- a) Lock/Unlock Use this option to unlock a locked page (subject to login based permission)
 - a. To edit previously entered details of a patient, users are only allowed to edit the last saved page and the pages before that are locked
 - b. Details on a locked page can only be edited using the login credentials of the nodal officer of the facility who will have administrative rights
- b) Save Use this option to save the information on a particular page
- c) Refresh Use this option to refresh all information on a particular page
- d) Close Use this option to close the patient record
- e) Arrows Use front/back arrows to navigate between pages

6. Understanding the information provided in this manual

For each data field to be captured by the user, the following information is provided in the sections below to serve as a guide while doing data entry:

- a) Field use Information specifying the use of the field in context to patient specific information
- b) Field type Information specifying the field type as described in the "data entry convention" of this document
- c) Dependencies Information specifying special data entry rules associated with a particular field, for example – some fields need to be filled only if a particular selection has been made in the previous field
- d) Editable Information specifying whether a field can be edited by the user or a field is auto-filled

7. Registering a new patient

The decision to identify the people who need treatment for HBV rely upon the presence of cirrhosis, fibrosis, levels of liver enzymes and platelet count. The below mentioned diagram showcases the difference in the patient flow between cirrhotic and non-cirrhotic patients.





Cirrhotic patients

Patients who are identified as cirrhotic during the first baseline test are to be initiated on treatment irrespective of ALT levels and HBV DNA is not required during the first diagnosis.

To register such patients, click on 'Add a new patient' on the Patient Registration page to land on the page described below and enter information in *fields #1 to #19*.

2.1

Patient Registration Page: Fields #1-#20

Registration homenage	Field use	Field type	Dependencies	Editable
Registration nonicpage	T ICIU USC	r loid type	Dependencies	Editable
E S National Viral Hepatitis Control				
	1 Record OPD ID	Alphanumeric	None	Yes
PB-AMT-GMC-1-20	2 Pre-filled UID prefix	Alphanumeric	None	No
3 000001	3 Pre-filled UID suffix	Numeric	One greater than the last UID	Yes
4 Patient type*				
O New O Experienced O	4 Record patient type	Toggle	None	Yes
Basic patient's information				
6 Name*	5 Record date of registration	Date	None	Yes
7 Is Age between 0 to 1 O Yes No	6 Record patient name	Alphabet	None	Yes
8 Age (in years)*	7 Age band selection	Toggle	None	Yes
Patient's status Select				
Patient Interruption Select	8 Record age	Numeric	Auto selection of "in years" or "in months" based on (7)	Yes

Patient Registration Page (1/4)

Steps for entering registration information

- a) Enter OPD ID assigned by the hospital in *field #1*. NVHCP Patient Serial Number in *field #3* will be auto-generated
- b) Select Patient Type 'New' or Experienced' in *field #4*
 - a. A patient is 'New' if he/she has never received treatment for Hepatitis B.
 - b. A patient is 'Experienced' if he/she has received treatment for Hepatitis B in the past either within the NVHCP programme or outside
- c) Enter date of registration in *field #5*
- d) Enter the person's first and last name in *field #6*, ensure that the name matches the name in a government ID, for e.g., Roop Kumari
- e) If age of person is between 0 to 1 years, select 'yes' in field #7, else skip to field #8
- f) Enter age of person in *field #8*
 - a. If person's age is between 0-1 years (i.e. less than 12 months), enter age in months in numbers, for e.g., 11

b. If person's age is greater than 1 year, enter age in years in numbers, for e.g., 25

	2.2	Patient Registration Page (2/4): Registering an experienced patient				
	Registratio	on homepage	Field use	Field type	Dependencies	Editable
		🖹 🖏 🕶 🖌 16% 🔍 14:42				
=(NVHCP					
Ľ	NVHCP ID	PB-ASR-DH-1-19				
Ľ		000101				
	Patient type					
4	O New	Experienced ()	4 Bel	ow fields will appear only if "Exp	perienced" is selected in patient type:	
4.1	NVHCP	Outside	4.1 Record past treatment source	Toggle	Only if "Experienced" in (4)	Yes
4.2	State	Select	4.2 Record past state	Drop-down	Only if "NVHCP" in (4.1)	Yes
4.3	Facility		4.3 Record past facility	Drop-down	Only if "NVHCP" in (4.1)	Yes
4.4	Treatment year		4.4 Record past treatment year	Drop-down	Only if "NVHCP" in (4.1)	Yes
4.5	UID	<u></u>	4.5 Record past UID suffix	Numeric	Only if "NVHCP" in (4.1)	Yes
Ŀ			Click *sync	" button to import patient data f	rom past NVHCP UID to expedite data	a entry
	Patient's status	Select				
	Patient Interruption Status		 Important points to note for "Experienced" patients: Those patients who have prior exposure to Viral Hepatitis-B treatment will fall under this category Past treatment information will be automatically filled if the sync option is used 			

g) If the patient is 'Experienced', enter past treatment details in *fields #4.1 - #4.5*, if available, else move to *field #5*

	Registration homepage		Field use	Field type	Dependencies	Editable
ľ	1438 문학교 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전					
9	Gender Male +	9	Record gender	Drop-down	None	Yes
10	Father's Name -	10	Record Guardian's name	Alphabet & Drop-down	Choose guardian type from drop-down	Yes
11	Home & Street *	11	Record street address	Alphanumeric	None	Yes
12	State* PUNJAB -	12	Pre-filled state	Drop-down	Auto-filled through facility login	Yes
13	District* AMRITSAR ~	[13]	Pre-filled district	Drop-down	Auto-filled through facility login	Yes
14	Block/Ward Select *	14	Record block/ward	Drop-down	Based on district selection	Yes
15	Village/Town/City	15	Record village/town/city	Alphabet	None	Yes
16	Pincode	16	Record Pin-code	Numeric	6 digits only	Yes
17	Contact Type Mobile •	17	Record contact type	Drop-down	None	Yes
18	Consent for	18	Record contact number	Numeric	10 digits only; based on (17)	Yes
	Patient's status Select					
	Patient Interruption Select					

- h) Select appropriate gender in *field #9*
- Enter a relative name (in the following format <First name> <space> <Last name>, for e.g. Manoj
 Kumar, in *field #10*

- j) Enter complete address in *fields #11 #15*
 - a. In field # 11, enter home and street address in the following format

<Home Name/Number, Street Name, Landmark, Area Name>

For e.g., A-32 Sukhda, 11th Road, Near Patwardhan Park, Santacruz

- k) Select contact type, mobile or landline, in field #17
 - a. Enter the contact number in *field #18;* you can add more than one by contact by clicking on "Add relative"
 - b. Contact number should only be 10 digits in length without preceding zero

Patient Registration Page (4/4)					
Registration homepage	Field use	Field type	Dependencies	Editable	
Patient's name	19 Record patient consent	Toggle	None	Yes	
Consent for Yes No	20 Record risk factor	Check-list – Select all that apply	None	Yes	
High risk sexual behaviour History of IDUs (intravenous drug use) Cocupational Exposure to Blood/Body Fluids Needlestick injury Child born to HGV-positive mother Patient received blood transfusion On chronic haemodialysis History of surgery					
Patient's status Select Patient Interruption Status Call 1800 11 6666 for any questions or complaints Call 1800 11 6666 for any questions or complaints					

- I) Record patient consent in field #19
 - a. User to record consent of the patient for receiving SMS or calls for appointment reminders and counselling related to Viral Hepatitis
- m) Select risk factor in *field #20*
- n) The user has the option to add up to 5 mobile number of relatives of the patient by clicking on the 'Add Relative' button.
 - a. The user should enter the name, relationship and mobile number for each of the relatives added
- o) Click on "save" button to go the next page

3.1

8. Entering Viral Hepatitis Screening Information for registered patients

Screening Page: Fields #21-22

Screening Page (1/2) Screening homepage Field use Field type Dependencies Editable ۲ 21 Record Screening tests conducted Check-list – HBsAg is automatically selected None Yes 21 🗹 HBsAg g Details - HBsAg Te Rapid Diagnostic Test ELISA Test Other Patient's status Patient Interruption Select 👌 🖪 C 🗵

a) Select the tests conducted in field #21 - Auto selected at HBsAg

3	.2	Screening Page (2/2)					
	Screening	g homepage	Field use	Field type	Dependencies	Editable	
E	National V Program	'iral Hepatitis Control					
s	creening Details - HI	BsAg Testing	Below fields	will appear for each "test" select	ed in field 20 – "Viral Hepatitis Screenin	g Test":	
2	Rapid Diagnostic	Test	22 Record screening test type – Rapid Diagnostic Test	Check-box	None	Yes	
.1	*	19-5-2019	22.1 Record screening date	Date	None	Yes	
2	Result	Positive *	22.2 Record screening result	Drop-down	None	Yes	
3	Result Date	19-3-2019					
4	Place of Testing*		22.3 Record result date	Date	None	Yes	
	Govt. lab	O Private Lab-PPP	22.4 Record place of testing	Toggle	None	Yes	
5	Lab Name	AMT-GMC-MTC1 *					
C	ELISA Test		Kecord Lab Name	Drop-down	Only if "Govt. lab" on (22.4)	Yes	
- + v	Patient's status Patient Interruption itatus	HBsAg Positive, Bas	Important points to note for Sc • At-least one of the 3 test types • Same information (22.1 to 22.5	reening page: –"Rapid Diagnostic Test / ELI:)) described above for Rapid D	SA Test / Others" has as to be filled f iagnostic Test will be asked for each	for HBsAg selected test type	

b) For each test conducted, select at-least one applicable test type – Rapid Diagnostic Test / ELISA

Test / Others

- c) For each test type, say "Rapid Diagnostic Test" in *field #22*, enter information from *#22.1 #22.5* which will remain same for all test types
 - a. For *field #22.4*, if "Govt. Lab" is selected, then *field #22.5* "Lab name" must be entered using drop-down options
- d) If "Other" test type is selected, additional field to record "test name" has to be filled
- e) Click on "save" button to go the next page

9. Entering Testing Information for Hepatitis B Patients

4.1

Testing Page: Fields #23-#46

Testing Page (1/4)

Testing homepage	Field use	Field type	Dependencies	Editable
1440 🖬 🛪 📾 👘 🛛 🔍 🔍 👘 👘 👘 👘 👘 👘 👘 👘 👘 👘 👘 👘 👘				
Testing ADD FOLLOW UP VISIT		Click "Add Follow up" button to	enter follow up DNA test details	
- Testing Details				
23 Date of prescribing tests	23 Record date of prescribing tests	Date	None	Yes
24 Date of issue of last investigation report	24 Record date of last test result	Date	None	Yes
25 Haemoglobin	25 Record Haemoglobin	Numeric	None	Yes
26 S. Albumin	26 Record S. Albumin	Numeric	None	Yes
27 Serum Bilirubin *	27 Record S. Bilirubin (Total)	Numeric	None	Yes
28 ALT	28 Record ALT	Numeric	None	Yes
29 AST	29 Record AST	Numeric	None	Yes
Patient's status HBsAg Positive, Bas				
Patient Interruption Select				
< 80 B C 8 >				

Steps for testing page

a) Enter Baseline tests details from field #23 - #34

Testing homepag	je Field use	Field type	Dependencies	Editable
E 🔊 National Viral Hepatitis C	lontrol			
30 AST ULN (Upper *				
31 Platelet count	30 Record AST ULN	Numeric	None	Yes
32 Weight (in Kgs) 56	31 Record Platelet Count	Numeric	None	Yes
33 S. Creatinine (in mg/dL)	32 Record Weight (in kgs)	Numeric	None	Yes
eGFR (estimated glomerular 0.0	33 Record S. Creatinine	Numeric	None	Yes
filtration rate) Criteria for evaluating cirrhosis	34 Record eGFR	Numeric	Auto-filled	No
35 Vitrasound	35 Record Ultrasound details	Check-box	None	Yes
35.1 Ultrasound Date	35.1 Record Ultrasound Date	Date	Only if (35) is selected	Yes
36 🗆 Fibroscan	36 Record Fibro-scan details	Check-box	None	Yes
Patient's status HBsAg Positi	ve, Bas			
Patient Interruption Select				
< 6 8 ℃ ⊗	>			

Testing Page (2/4)

b) *Field #34* will be auto calculated based on the details captured above such as age, weight, gender and S. Creatinine value

	Testing homepage	Field use	Field type	Dependencies	Editable
ſ	National Viral Hepatitis Control				
	La Fibroaudit	36.1 Record Fibroscan Date	Date	Only if (36) is selected	Yes
36.1	Fibroscan Date	36.2 Record LSM value	Numeric	Only if (36) is selected	Yes
37	S LSM value(in Kpa)	37 Record APRI details	Check-box	Auto-filled	No
38	APRI score	38 Record FIB 4 details	Check-box	Auto-filled	No
h	FIB 4 score	39 Record Complicated status	Toggle	None	Yes
39 40	Complicated Complicated Persistently elevated ALT Select	40 Record Persistently elevated ALT levels	Drop-down	Only if "Uncomplicated" in (39)	Yes
	levels? Patient's status HBsAg Positive, Bas.				
	Patient Interruption Select				

c) Enter Criteria for evaluating Cirrhosis from field #41 - #46

a. APRI and FIB-4 score in *field #37 and #38* will be auto-calculated using values inputted for AST, AST (ULN), ALT, age, platelet count

4.4		Те	esting Page (4/4)		
	Testing homepage	Field use	Field type	Dependencies	Editable
	National Viral Hepatitis Control Program				
() Uncomplicated				
— в	asis of Cirrhosis		Below details to be captured on	ly if complicated recorded in (39)	
41 V	ariceal bleed Select -	41 Record Variceal Bleed	Drop-down	None	Yes
42 ^	*	A2 Basard Assiltan	Dran dawn	Neza	Var
43 P		42 Record Ascites	Drop-down	None	Tes
44 E	ncephalopathy Select -	43 Record PT INR	Numeric	None	Yes
45 c	hild Pugh Score A	All Bread Street below the	Dura dava	Need	N
46 s	everity of Hep-B	44 Record Encephalopathy	Drop-down	None	Yes
	Compensated Cirrhosis Decompensated Cirrhosis	45 Record Child Pugh Score	Alphabet	Auto-filled	No
Pati	Non-elevated ALT lev	46 Record Complicated status	Toggle	None	Yes
Pati	ent Interruption Select				
<					

d) If "Complicated" is selected in *field #39*, then *fields #41 - #46* can be filled

- b. Above fields are mandatory for complicated cases and non-mandatory for uncomplicated cased; field #45 i.e. Child Pugh Score will be auto calculated
- e) Field #40 (refer to figure 4.3) must be filled if the ALT levels are or are not persistently elevated, i.e. ALT is above upper limit of normal at least twice 4 weeks apart

f) To add follow-up tests, click on the blue button on top right (*refer to figure 4.1*). Click save to move ahead

Fields #47 to #63 belong to HBV DNA page and have been shown separately in the non-cirrhotic section as it is not recommended as a criteria for evaluation in patients with cirrhosis for initiation of treatment.

10. Entering Known History Information for Hepatitis B Patients

5.1 Known History (1/3): Field #64-68							
Known History (1/4)							
Known history page	Field use	Field type	Dependencies	Editable			
2231 월 이 아 아 지 않는							
Kasuus bistosy	64 Record if treatment experienced	Toggle	Auto-filled based on registration	No			
64 Treatment Experienced Yes No 65 Breastfeeding women Bone disease due to chronic steroid use or bone density No Renal impairment History of fragility fracture HIV Osteoprosis Active Tuberculosis	65 Record known co-morbidities (if any)	Check-list – Select all that apply	None	Yes			
 Thalassemia Hepato-cellular Carcinoma Patient on chemotherapy with deranged liver enzymes Pregnant Patient's status Treatment Recomm. Patient Interruption Select Select Select Select 							

- a) Select all known history in the check-list in *field #65*
 - a. If "HIV" is selected, then *field #65.1* HIV/ART regimen has to be filled
 - b. If "Renal Impairment" is selected, then *field #65.2* CKD stage have to be filled

	5.2		Known	History (2/4)		
	Kn	own history page	Field use	Field type	Dependencies	Editable
	Hist Pool	National Viral Hepatitis Control Program tory of alcohol consumption orly controlled cardiac failure ronic obstructive pulmonary disease				
	Pre Hae Cor	erroglobinopathies ronary artery disease				
64	i.1 HIV/AR	aemia <9 RT regimen Select +	65.1 Record ART regimen 65.2 Record Renal/CKD stage	Drop-down Drop-down	Only if "HIV" selected in (65) Only if "Renal" selected in (65)	Yes
6	.2 Renal/	CKD stage Select -	66 Record Last Menstrual Period	Date	Only if "Female" selected in (8)	Yes
6	Referre	ed O Yes No		Date	only in remain second in (b)	
	Observ	vations				
	Patient's Patient In Status	status Treatment Recomm. nterruption Select	Important points to note for Know • Multiple known co-morbidities car • If "HIV" and "Renal Impairment" s	vn History page: n be selected in field (65) elected in (65), then (65.1) an	d (65.2) have to be filled respecting	vely

5.3		Knowl	n History (3/4)		
E NVHCP	O (0 12 34% O 1545				
64 Treatment Experienced	Yes No	64 Record Treatment Experience Status	Toggle	Only if "Experienced" in (4) on registration page	No
64.1 Treating hospital/health facility	Select	64.1 Record treating hospital	Drop-down	If "Yes" in (64)	Yes
64.2 Previous regimen	Select	64.2 Record previous regimen	Drop-down	If "Yes" in (64)	Yes
64.3 Previous duration	Select	64.3 Record previous duration	Drop-down	If "Yes" in (64)	Yes
64.4 Previous Status	Completed	64.4 Record previous status	Toggle	lf "Yes" in (84)	Yes
64.4.1 No. of weeks completed	Select	64.4.1 Record weeks completed	Drop-down	If "Interrupted" in (84.4)	Yes
64.4.2 Last pill taken on		64.4.2 Record last pill date	Date	If "Interrupted" in (64.4)	Yes
Renal impairment Patient's status Patient Interruption Status	RNA Positive, Prescriptio. No C' (X)				

- b) *Field #64* (in *known history (2/4)*), treatment experienced, will be auto selected based on registration page
 - a. If *field #64* is Yes, then *field #64.1 #64.4* have to be filled
 - b. If field #64.4 is Interrupted, then field #64.4.1 #64.4.2 must be filled

5.4		Кпс	own History (4/4)		
	Known history page	Field use	Field type	Dependencies	Editable
	NVHCP Tepace Center Calculation Tepace Center Calculation Seizer/Eplepsy Diabetes				
67	Hypertension History of alcohol consumption Referred Ves No	67 Becaul Beform I details	Toople	Nege	Var
67.	Referring doctor Select	67.1 Record Referring doctor	Drop-down	Only if "Yes" in (67)	Yes
67.3	Referred to Select	67.2 Record "Referred to" facility	Drop-down	Only if "Yes" in (67)	Yes
67.3	3 Date of referral	67.3 Record Date of referral	Date	Only if "Yes" in (67)	Yes
68	Observations	Record Observations (if any)	Alphsbet	None	Yes
	Patient's status RNA Positive, Prescriptio. Patient interruption Status No				

- c) Field #67 "Referred" to be selected as "Yes" if patient has been referred to Model Treatment Centre (MTC)
 - c. If *field #67* is "Yes", then *field #67.1 #67.3* must be filled
 - d. If the patient can be referred to more than one MTC in *field #67.2*, the patient should be referred the facility of his/her preference and the preferred facility should be selected from the dropdown options
- d) Additional remarks can be added in *field #68* Observations
- e) Click on save to save the known history page and go to next page
11. Entering Prescription Information for Hepatitis B Patients

Steps for prescription page

6.1

Prescription page: Field #69-75

	Prescript	ion page		
Prescription page	Field use	Field type	Dependencies	Editable
E 🙆 National Viral Hepatitis Control Program				
Prescription details				
69 Prescribing facility AMT-GMC-MTC1 -	69 Record Prescribing facility	Drop-down	Auto-filled based on login	No
70 Prescribing doctor Test	70 Record Prescribing doctor	Drop-down	None	Yes
71 Regimen Prescribed TEntecavir	71 Record Regimen	Drop-down	None	Yes
72 Pills to be taken as Tablet	72 Record mode of dispensation	Drop-down	None	No
Drug dosages				
73 Entecavir * 0.5mg -	73 Record drug-wise strength	Drop-down	Based on regimen selection in (71)	Yes
74 Prescribing date 29-01-2019	74 Record Prescribing date	Date	None	Yes
75 Place of AMT-GMC-MTC1 ~	75 Record Place of dispensation	Drop-down	Auto-filled based on login	Yes
Patient's status Treatment Prescribe				
Patient Interruption Select	Important points to note for Pres • "Place of dispensation" will be "P • In case of "Referral" to other facil both	cription page: rescribing facility" by default ity, "Place of dispensation" ca	an be changed to referred facility (I	MTC), referring facility (TC) or

- a) Record fields from #69 #75 to capture prescription information of a patient
- b) Using field #73, capture strength of drugs based on selection in field #71
- c) Select "Place of dispensation" using field #75, which will be auto filled in case of Treatment Centre (TC)
 - a. In case of referral to MTC, Place of dispensation can be changed to MTC, TC or both
- d) Click on save to save the prescription page and go to next page

12. Entering Dispensation Information for Hepatitis B Patients



Dispensation Page: Field #76-95

1 st dispensation page	Field use	Field type	Dependencies	Editable
National Viral Hepatitis Control Program	E 🙆 National Viral Hepatiti Program	is Control		
Please enter dispensation details	🕂 Add new Visit	Cliv	ck "Add new visit" button to enter di	spensation visits
76 Date of treatment * 24-03-2019 initiation 77 Regimen Prescribed	Visit No Date			
Entecavir	76 Record treatment initiation	Date	None	Yes
78 Place of AMT-GMC-MTC1 ~		Auto-filled from p	prescription page	
79 Pills to be taken as Tablet	77 Record Regimen	Drop-down	Auto-filled based on (71)	No
80 Days of pills * O 30 ~	78 Record Prescribing facility	Drop-down	Auto-filled based on login	No
81 Pills to be 30	79 Record mode of dispensation	Drop-down	Auto-filled based on (72)	No
Advised next visit * 18-04-2019	80 Record Days of pills dispensed	Drop-down	None	Yes
83 Comments	81 Record Pills to be dispensed	Drop-down	Auto-filled	No
Patient's status On Treatment Dispe	82 Record Advised next visit date	Date	None	Yes
	83 Record Comments	Alphabet	None	Yes

1st Dispensation Page (1/1)

- a) Record fields from #76 #82 to capture first dispensation for a patient
 - a. Field #76 to be used to record the date of treatment initiation
 - b. *Field #81* to be used to record the number of pills dispensed; according to the guidelines pills can be dispensed for 30, 60 or 90 days
 - c. Field #82 advised next visit date, will be auto-calculated
- b) Click on save to save the first dispensation page and go to the next page

Steps for >1st Dispensation (e.g. 2nd Dispensation) page

2		>1 st Disper	nsation Page (1/	2)	
	n th dispensation page	Field use	Field type	Dependencies	Editable
6	National Viral Hepatitis Control				
	Please enter dispensation details				
84	Visit Date * 24-04-2019	84 Record n th dispensation date	Date	None	Yes
85	Regimen Prescribed*	85 Record Regimen	Drop-down	Auto-filled	No
86	Place of * Select ~	86 Record Prescribing facility	Drop-down	Auto-filled based on login	No
87	Pills to be taken as Tablet -	87 Record mode of dispensation	Drop-down	Auto-filled	No
88	Days of pills * O Select *				
89	Pills to be * dispensed	88 Record Days of pills dispensed	Drop-down	None	Yes
90	Advised next visit *	89 Record Pills to be dispensed	Drop-down	Auto-filled	No
91	Pills left	90 Record Advised next visit date	Date	Auto-filled	Yes
	Patient's status On Treatment Dispe.	91 Record Pills left	Numeric	None	Yes

7.3	n th dispensation page	Field use	Field type	Dependencies	Editable
C	National Viral Hepatitis Control Program Pills left				
92	Days of pills left 0				
93	Adherence(%)				
94	Comments				
95	Side effects	92 Record days of pills left	Numeric	Auto-filled	No
	No side effects		N		
	Fatigue	93 Record adherence	Numeric	Auto-filled	No
	Nausea	94			
	Insomnia	Record Comments	Alphabet	None	Yes
	Diarrhea Weakness	95 Record side-effects	Check-list	None	Yes
	🗆 Rash				
	Depression				
	Headache				
	Others				
	Patient's status On Treatment Dispe.				

>1st Dispensation Page (2/2)

- a) Record fields from #84 #95 to capture nth dispensation for a patient
- b) There is no limit to record the number of dispensations. All the dispensations will keep on adding in a table
- c) Field #93 adherence and #90 advised next visit date, will be auto-calculated
- d) Click on save to save the dispensation page
- e) Further entries will be made as and when patient comes for dispensation, follow-up tests, and/or HBV DNA tests

8.1

Non-cirrhotic patients

For non-cirrhotic patients HBV DNA test is suggested based on ALT levels. The persistently elevated ALT under the program is defined as at least 2 values four weeks apart in the last 6 months, which are above the upper limit of normal.

After that HBV DNA test, it can be decided whether the patient requires treatment.

For such patients, perform the steps in the screenshots 2.1 to 4.4 and follow it by the below HBV DNA page.

Entering Virologic Load Information for Hepatitis B 13.

HBV DNA page (1/2): Sample collection details - fields #47-63

Field use Editable Viral Load homepage Dependencies Field type ۲ 47 Click "Add Follow up" button to enter follow up DNA test details HBV DNA Te 48 🗹 Нер-В 48 Record Hepatitis type for entering HBV DNA info Check-box None Yes Hep-B HBV Collection Click "Re-enter VL data" button to re-enter VL sample collection information if the previous sample was rejected 49 Record sample drawn date 49 Sample Drawn Date 10-4-2018 Date None Yes 50 Is Sample Stored Yes O No 50 Record sample storage Toggle None Yes 50.1 Record sample storage temp. 50.1 Sample Storage Temperature(*C) Numeric Only if "Yes" in (50) Yes Less than More than 1 50.2 Sample storage duration 50.2 Record sample storage Toggle Only if "Yes" in (50) Yes 50.3 Record sample storage duration 50.3 Duration(in days) Numeric Only if "Yes" in (50) Yes Yes () No Is Sample Transported RNA Positive, Prescriptio. Important points to note for VL page: Recording time duration of sample storage in "50.3" will depend upon the input in "50.2 – Record sample storage" • If 50.2 is "less than 1 day", then "50.3" will reach as "Duration – in hours" • If 50.2 is "more than 1 day", then *50.3" will reach as "Duration – in days" muption Status No < 👌 🖪 C 🗵

Viral Load Page (1/4)

Steps for HBV DNA page

- a) Select viral hepatitis type to enter viral load details in field #48
- b) Enter sample collection information from field #49 #50 for the HBV DNA test selected
 - a. If field #50, "Is sample stored", is selected as "Yes", then fields from #50.1 #50.3 have to be filled

8.2		Viral Loa	d Page (2/4)		
	Viral Load homepage	Field use	Field type	Dependencies	Editable
	■				
51 ^{is}	Sample Transported 🔹 Yes 🔿 No	51 Record sample transport	Toggle	None	Yes
51.1 Se	ample Transport emperature(*C)	51.1 Record sample transport temp.	Numeric	Only if "Yes" in (51)	Yes
51.2 s	ample Transport Date	51.2 Record sample transport date	Date	Only if "Yes" in (51)	Yes
51.3 s	Imple Transported to Select	51.3 Record facility where sample is transported	Drop-down	Only if "Yes" in (51)	Yes
Si	ample Transported By				
51.4 [№]	ame	51.4 Record name of sample transporter	Alphabet	Only if "Yes" in (51)	Yes
51.5 De	signation Select	51.5 Record desig. of sample transporter	Drop-down	Only if "Yes" in (51)	Yes
52 Pe	emarks	52 Record remarks (if any)	Alphabet	None	Yes
F	Patient's status Antibody Positive, Confir.				
F	Patient Interruption Status No				
<	🕻 🔂 🖻 C 😣 📏				

- c) If *field #51*, "Is sample transported", is selected as "Yes", then fields from *#51.1 #51.5* must be filled
 - a. Click on "save" to partially save the viral load page till sample collection information

8.3	Viral Load homepage		Field use	Field type	Dependencies	Editable
	53	1505 🖬 🕆 📾 👓 🛛 🔍 🔍 🔍 🗐 🖉 🗐 1505 🖬 🕆 🕼 🖉 National Viral Hepatitis Control Program	53 Record sample receipt date	Date	None	Yes
		Sample Received By*				
	54	- Name	54 Record name for sample receipt	Alphabet	None	Yes
	55	Designation Select	55 Record desig. for sample receipt	Drop-down	None	Yes
	56	Is sample accepted	56 Record sample acceptance	Toggle	None	Yes
	56.1	Reason for Rejection* Select	56.1 Record reason for rejection	Drop-down	Only if "No" in (56)	Yes
		Remarks				
		Patient's status Antibody Positive, Confir.				
		Patient Interruption Status No	Important points to note for VL p If sample is not accepted in (56), If sample is accepted, subseque	age: , only then will a reason for rej nt details will have to be enter	ection be asked in (56.1) ed as detailed on the next page	

Viral Load Page (3/4)

- d) Enter HBV DNA results information from field #53 #61
 - a. If field #56, "Is sample accepted", is selected as "No" then field #56.1 has to be filled
 - b. Click on "save" to save the viral load page and go to the next page
- e) If sample is rejected via *field #56*, then repeat sample collection may take place; in such a case, click on the blue button "Re-enter VL data" (*refer to figure 8.1*) to re-enter the details of new sample collection

- f) Fill *field #63* from the guidelines suggested by a pop-up or otherwise medical officers may use their own discretion
- g) Click save to move ahead

.4	Viral Load homepage	Field use	Field type	Dependencies	Editable
	15:05 또 * @ ···· 적 ····· 적 ····· 적 ······				
57	Result Is sample accepted (Yes) O No				
58	* Test Result Date	57	Below details to be captured of	only if sample accepted is "Yes"	
59	Result Select -	58 Record HBV DNA test result date	Date	Only if "Yes" in (57)	Yes
60	HBV DNA(IU/mL)	59 Record HBV DNA test result	Drop-down	Only if "Yes" in (57)	Yes
61	Re-enter HBV DNA(IU/ mL)	60 Record HBV DNA count	Numeric	Only if "Yes" in (57)	Yes
62	Remarks	61 Record HBV DNA count again	Numeric	Only if "Yes" in (57)	Yes
		62 Record Remark (if any)	Alphabet	None	Yes
63	recommended Select •	63 Record Treatment recommendation	Drop-down	Only if "Yes" in (57)	Yes
	Patient's status Treatment Recomm]			
	Patient Interruption Select]			
-	< ऄ⊟⊂⊗ >	•			
	III 0 <				

Viral Load Page (4/4)

If treatment is recommended in field #63, repeat the steps in snapshot 5.1 to 7.3 above.

14. Entering Information for an Interrupted Patient

A patient is categorized as "Interrupted" if the patient discontinues the course of Hepatitis diagnosis or treatment due to some reason. In order to capture the information of such patients, the following steps have to be taken:



Steps for reporting an interrupted patient:

- a) Interrupted patient has been defined as one who has discontinued the course of Hepatitis diagnosis or treatment due to some reason
- b) To record information of such patients, on every page there is an option to record the "Patient interrupted status" at the bottom of every page
- c) After selecting "Yes" to the above option, choose reason for interruption and patient referral (if applicable) and click on save

15. Patient transfer module

During his/her treatment, a patient may be needed to get transferred to another facility in the country for various reasons. The patient transfer module captures the details of a transfer which could be:

- a. A transfer out: where your facility transfers a patient to another outside facility
- **b.** A transfer in: where a patient is transferred to your facility from another outside facility Please follow the below steps to transfer out a patient:
 - a) On the registration page, click on the patient transfer icon against the patient you want to transfer out
 - b) Fill the details of the facility you want the patient to transfer to, i.e. state, district, facility name, and reasons for transfer and save
 - c) To check the status of your transfer out, click on 'Transfer-in/Transfer-out' and go to patient transfer-out requests

Please follow the below steps to transfer-in a patient:

- a) Whenever your facility gets a request to transfer-in a patient, a notification will show up on the 'Transfer-in/Transfer-out' module
- b) Click on 'Transfer-in/Transfer-out' and go to 'Transfer-ins' to take action on the patient requests

10.1					
				NVHCP	
=0	NVHCP			Transfer details	Retirect Registration
		dd arwy Bartland		Patient's name Test	Patient Registration
	+ A	ldd new Patient		State Select -	Register a patient for testing and treatment of Hepatitis.
	Update/Search I Number	Record by UID/Cont	act	District	
	Patient UID/Cont	lact number	Q	Eacility	
	Update/Search I	Record by St Use	patient transfer module on the		Update the diagnostic information of registered patients.
	Antibody Positiv	ve. Confirmat	epage by clicking on this icon to fer/refer any patient	Transfer Reason Select *	
				Select state, district, facility, to which the patient is to be	Treatment
Ľ	UID Name	Status	4	transfer ed, and transfer reason	Update the treatment prescription and dispensation information of
0	00002 Test	Confirmatory RNA Pending		and Save	intected patients.
					Transfer-In/
			_		Update the treatment prescription
				After sa	aving your transfer, you can click on the
				Patient	Transfer' module to check the status of
				parent	s cansion ou moor non the facility

3. How to download or upload data?

Uploading and downloading data

Users can make data entries even without internet, however, in case of online / offline data entry, data must be manually uploaded from the "Sync Data" section on the home page, as shown in Section 1, Part 3 – "Home-page".



Rules for downloading and uploading data

- a) When using the application for the first time or when re-installing the application, always
 "Download patient data" to ensure that data recorded in the past or data recorded by other users from the same facility is synced to your device
- b) If multiple users from the same facility are using the app, then "Download patient data" option must be selected every-time the app is used by any user
- c) "Download master" option to be used if directed by the SVHMU or NVHCP; this option is used when updating the master information such as list of doctors, facilities, side effects, etc.
- d) "Upload data" option to be used to manually upload patient data, already entered in the app in the offline mode
 - a. Upon clicking "Upload data", a pop-up will appear listing the number of patient records uploaded to the server

Web Portal

User Manual Guide

1. How to access the websystem and login?

1. Accessing the System

The system can be accessed by the link: <u>http://nvhcp.gov.in/login</u>

MIS can be accessed using any standard web browser like Internet Explorer, Firefox, Chrome, etc.

The session time-out, i.e. the automatic logout due to inactivity is 15 minutes. This means that if the system is left idle for more than 15 minutes, it logs you out of the system, and you have re-login to continue working on the system.

2. First Page of the System/Log-in Page

The first page of the system can be accessed by the link given in the previous section.

The page opens and looks like the following.

Steps for logging in:

- a) Enter "Username" provided by the NVHCP (NVHMU/SVHMU) which will be unique to each user
- b) Enter "Password" provided by the NVHCP (NVHMU/SVHMU); password has be changed by the user on the first login (on the web only)

MEALT Lefis asses fitted	Ministry of Health & Family Welfare Government of India		And the patities Control program
	Program Management System for NVHCP		
Use	rname		
ту	pe your username		
Pas	sword		
	rpe your password	۲	
8	C WW C		
Type the captcha			
lick on the checkbox 🛶 🛛 I	accept the terms and conditions		
Click to e	enter 📥 Login		

- c) Select checkbox "I accept terms and condition"
 - i. To view terms and conditions (listed below), click on the hyperlinked text

- ii. Terms and conditions
 - a.I will make the entries myself
 - b.I will not intentionally enter incorrect data
 - c. I will ensure the data which I have access to is kept confidential at all times
 - d.I will not share the data I have access to with anyone in any format
 - e.I will complete my work on time and diligently
- d) Fill the numeric captcha
- e) Click on "Login" to enter the web portal

3. Home Page

Use this option to cre patient record or edit/ patient information for	ate a new view existing r Hepatitis- B	Use this option to view facility/State/National level Dashboard	Use this option to Us view reports ed	se this option to Use this it Masters downloar application	option to d android on apk	Use this option to access the inventory module
		Na	ational Viral Hepa	titis Control Program		8 Use this option to acces the patient transfer mod
Patient Information +	Dashboard +	Reports Masters + Download	Android App Helpdesk	Invelitory Patient Transfer		ADMINN
			+ ADD NEW PATIENT	HEP-C		
			OR			
			Patient List H	EP-C		
Search By Select		SEARCH				
					1-30 Of 109	records.
UID	Name			Status	Patient Transfer	Print
000620	asdas			Diagnosis Pending	Ø	A

After logging in, you will land on the Home Page below. The Home Page is also the 'Patient Registration' page.

There are 6 options on the top of the Home Page. Choose from one of the following options:-

- a) Patient Information To register a new patient or add records of registered patients or view records of a registered patient
- b) Dashboard To view and download data analysis
- c) Reports To view and download monthly report, HBV vaccination report, LTFU report, etc.
- d) Masters to manage users, enter names of doctors and sample transporter designations
- e) Download Android App to download the android application
- f) Helpdesk option to contact helpdesk
- g) Inventory access to inventory management system
- h) Patient transfer access to patient transfer module to transfer in/out a patient

2.

How to create a new patient record or view/add information to an existing patient record?

1. Index for navigating various screens of the web portal:

Sr No.	Screen	Screen name	Use	Page no.						
	1	Registration homepage	Add new record or edit existing records.	50						
		After clicking on "Add new patient" on registration homepage								
		nt differentiation	53							
А	2.1 – 2.3 Patient registration		Enter patient registration information such as name, address, gender, etc.	54 – 56						
В	3.1 Screening		Enter screening information such as date of screening test, result, etc.	57						
С	4.1 - 4.2	Baseline Tests	Enter baseline testing such as ALT, AST, etc. and cirrhosis status.	58 – 59						
D	5.1 - 5.3	Known History	Enter known history information such as co- morbidities and referral information.	60-61						
E	6.1	Prescription	Enter prescription information such as regimen, duration, prescribing doctor, etc.	62						
F	7.1 – 7.2 Dispensation		Enter drug dispensation information such as date of dispensation, pills left, etc.	63 – 64						
G	8.1 – 8.2 HBV DNA		Enter HBV DNA test details such as sample collection and transport, DNA count, etc.	65 – 66						
Н	9.1 - 9.2	Interrupted Patient	Recording interruption status and reasons	67 – 68						
I	10.1 - 10.4	Patient Transfer	Transferring in/out patients from a facility	69 - 71						
J	11.1 – 11.2	LTFU module	Contacting patients who missed treatment	72 – 73						

2. Patient flow for understanding the above details:

The decision to identify the people who need treatment for HBV rely upon the presence of cirrhosis, fibrosis, levels of liver enzymes and platelet count. Please follow the below algorithm while registering patients for HBV treatment:



3. Information flow for entering the above details:



Above data flow may vary among facilities depending upon availability of HR and infrastructure

4. Creating a new record or view/add information to an existing record

On the Home Page, select the *Patient Information* option and select Hep-B to register patients for Hep-B treatment and choose which stage is the patient at viz.

- a) Patient Registration To register a new patient (this is also the home page, so no selection is required)
- b) Test and Result To add information or view records of patients who have been registered
- c) Treatment To add information or view records of patients who have undergone treatment

Se	elect Pa	tient Info	rmation Op	otion on the Hor	me Page			
			a Deer	Nationa	I Viral Hepatitis	Control Program		
Patient In	formation +	Dashboard -	Reports Maste	ers - Download Android A	pp Helpdesk Inve	ntory Patient Transfer		ADMINN
HEP-A,0 HEP-B 2. Test and Result	HEP-A,C,E Patient Registration			ent Registration Info + A	e this option to regist prmation of registered DD NEW PATIENT HEP-	er a new patient or add d patients c		
Use this option to	s option to			OR				
update the diagnostic information of	3. Ti	reatment		Pa	tient List HEP-(C		
registered patients	red s treatment prescription and dispensation information of infection patient		ate and on of	SEARCH			1-30 Of 109	records.
	UID	Name				Status	Patient Transfer	Print
	000689	asdas				Diagnosis Pending	Ø	A

Once the appropriate selection has been made, follow the steps below to add new record or editing an existing record (see picture below):

- a) Click on "+ Add new patient" to initiate the data entry for a patient
- b) For editing existing records, following options can be used
 - a. If you know the NVHCP UID or phone number of a particular patient, then enter the same in the space provided below "Update/Search record by UID/contact number"
 - b. If you want to list down the records for a facility based on the patient status, then select the "Patient status" from the drop-down below "Update/Search patient record by Status". (Patient Status' have been explained below.)
- c) Shortlisted records will be displayed in the space below the grey tab "Patient List HEP-B"

d) Once a record is displayed, click on the record to view or add new details

1

Creating a new patient record

Remain on the Home pa registered patient To edit or view records o	ge to add/register a new patient or view/edit the for the formation of the formation of the formation of the second s	records of a newly r 'Patient Information' to
	National Viral Hepatitis Control Program	?
Patient Information - Dashboard - Reports	Masters - Download Android App Helpdesk Inventory Patient Transfer	ADMINN This option is only available on
Use this option to add a new patient record	+ ADD NEW PATIENT HEP-B	the 'Patient Information > Patient Registration' or 'Home Page'
	OR	
	Patient List HEP-B	
Search By Select Select UID/Contact No.	SEARCH Use this option to search for a patier contact number	nt record by UID or ords. Patient search result to edit/view existing records
Name	Use this option to search for a patien	it record by Name
Use this option to search for all patient records having a particular status	HBsAg Positive, Baseline Testing Pen	dng 🔁

Patient Status'

The following patient status' appear in the 'Search by Patient Status' option

Sr. No	Patient status	Situation	Change at							
	Patient Status' appearing in the Patient Registration Module									
1	Diagnosis Pending	HBsAg test yet to be done	Screening page							
2	Not infected	HBsAg test negative	Screening page							
3	HBsAg Positive, Baseline Testing Pending	HBsAg test is positive, baseline testing pending	Testing page							
4	Treatment Recommended, Prescription Pending	If testing shows cirrhotic nature or when the doctor recommends treatment on HBV DNA page	Known history page							
5	Treatment Prescribed, Initiation Pending	Treatment prescribed, 1st dispensation pending	1st dispensation page							
	Patient Status' appear	ing in the Test and Result Mo	dule							
1	Diagnosis Pending	HBsAg test yet to be done	Screening page							
2	Not infected	HBsAg test negative	Screening page							
3	HBsAg Positive, Baseline Testing Pending	HBsAg test is positive, baseline testing pending	Testing page							
4	Treatment Recommended, Prescription Pending	If testing shows cirrhotic nature or when the doctor recommends treatment on HBV DNA page	Known history page							
5	Treatment Prescribed, Initiation Pending	Treatment prescribed, 1st dispensation pending	1st dispensation page							

			-				
6	Patient on Follow-up Tests	If testing shows non- cirrhotic nature	Testing page				
7	Persistently elevated ALT levels.	'Yes' to 'Persistently					
	HBV DNA pending	elevated ALT levels?' on	HBV DNA page				
		testing page					
8	Non-elevated ALT levels HBV DNA	'No' to 'Persistently					
	nending	elevated ALT levels?' on	HBV DNA page				
	pending	testing page					
9	Treatment not Recommended	Treatment not					
	Follow up Tosts Advised	recommended on HBV	HBV DNA page				
	Follow-up Tests Advised	DNA page					
10	Indecisive ALT levels follow up tests	'Indecisive' to 'Persistently					
	advised	elevated ALT levels?' on	Testing page				
	auviseu	testing page					
Patient Status' appearing in the Treatment Module							
1	Treatment Prescribed, Initiation	Treatment prescribed, 1st	Prescription page				
	Pending	dispensation pending					
2		Nth dispensation done,	(N+1)th dispensation				
	On Treatment Dispensation	(N+1)th dispensation					
		pending	hage				

5. Exploring Page Controls

Once a record has been opened, at the bottom of each patient record page, you will find the following four options. The meaning of these options is explained below:-

2. Lock/Unlock - Use this option to unlock a locked page (subject to login based permission)



- a. To edit previously entered details of a patient, users are only allowed to edit the last saved page and the pages before that are locked
- Details on a locked page can only be edited using the login credentials of the nodal officer of the facility who will have administrative rights
- 3. Save Use this option to save the information on a particular page
- 4. **Refresh** Use this option to refresh all information on a particular page

5. Close - Use this option to close the patient record

6. Registering a new patient

The decision to identify the people who need treatment for HBV rely upon the presence of cirrhosis, fibrosis, levels of liver enzymes and platelet count. The below mentioned diagram showcases the difference in the patient flow between cirrhotic and non-cirrhotic patients.

Difference in patient flow with respect to cirrhosis



Cirrhotic patients

Patients who are identified as cirrhotic during the first baseline test are to be initiated on treatment irrespective of ALT levels and HBV DNA, which is not required during the first diagnosis.

To register such patients click on 'Add a new patient' on the Patient Registration page to land on the page described below and enter information in *fields #1 to #20*.

nformation • Dashboard • Reports	Masters • Download Android App Helpdesk In 1. Registration 2. Screening 3. Baseline T	ests 4. HBV DNA 5. Known Histor	y 6. Prescription 7. Dispensation	patient record may have up to 7 modules
	Patient R	egistration Module (HEF	Р-В)	
1 OPDIPD* 5 Patient Type* New Experienced	PB-AMT-GMC-01-20	3 000275	Date of patient registration *	
6 Name * Select Relative * 10 Father	Age between 0 and 1 Year? N0 v 11	Age (in years) * Home & Street Address *	9 Select	۲
State *	District *	BlockWard	16 Village/Town/Cit	e e e e e e e e e e e e e e e e e e e

Steps for Registration Page

- a) Enter OPD/IPD ID assigned by the hospital in field #1
- b) NVHCP ID in *field #2* is auto-generated and cannot be edited. NVHCP 6 digit Patient Serial Number,
 for e.g. 000453, in *field #3* will be auto-generated but can be edited
 - a. If it needs to be edited, type only non-zero beginning digits, for e.g., 453 and not 000453
- c) Enter Date of patient registration in *field #4*
- d) Select Patient Type 'New' or Experienced' in field #5
 - a. A patient is 'New' if he/she has never received treatment for Hepatitis B
 - b. A patient is 'Experienced' if he/she has received treatment for Hepatitis B in the past either within the NVHCP program or outside

e) If the patient is 'Experienced', enter past treatment details in *fields #5.1 - #5.5* shown below, if available, else move to *field #6*

2.2 Pa	tient Registration Page (2/3): Reg	gistering an experienc	ed patient in Field #5	
Patient Information - Dashboard Reports -	Masters - Download Android App Helpd I. Registration 2. Screening 3. Testing 4	4. HBV DNA 5. Known History	6. Prescription 7. Dispensation	
OPDJPD *	Patient	Registration Module	Date of patient registration *	
	PB-AMT-GMC-01-20	000117	dd-mm-yy	
Patient Type * New Experienced	S.1 Outside	5.2 State * Punjab Facility * Amrilsar 5.4 Treatment Year Select 5.5 Past Treatment UID	¥ 	
		SYNC	Click "sync from past N	" button to import patient data IVHCP UID to expedite data entry

- f) Enter the person's first and last name in *field #6* in the following format <First name> <space> <Last name>, for e.g., Roop Kumari, ensure that the name matches the name in a government ID
- g) If age of person is between 0 to 1 years, select 'yes' in field #7, else skip to field #8
- h) Enter age of person in *field #8*
 - a. If person's age is between 0-1 years (i.e. less than 12 months), enter age in months in numbers, for e.g., 11
 - b. If person's age is greater than 1 year, enter age in years in numbers, for e.g., 25
- i) Select appropriate gender in *field #9*, by observation
- j) Enter a relative name in the following format <First name> <space> <Last name>, for e.g. Manoj
 Kumar, in *field #11* and select relation to the relative in *field #10*
- k) Enter complete address in fields #12 #17
 - a. In field # 12, enter home and street address in the following format

<Home Name/Number, Street Name, Landmark, Area Name>

For e.g., A-32 Sukhda, 11th Road, Near Patwardhan Park, Santacruz

- I) Select contact type, mobile or landline, in *field #18*
 - a. Enter the contact number in *field #19;* you can add more than one contact numbers by clicking on '+Add More' (up to 5 mobile numbers). The user should enter the name, relationship and mobile number for additional number
 - b. Contact number should only be 10 digits in length without preceding zeroes
- m) Record consent for communication in *field #20*
- n) Select risk factor in *field #21*, more than one risk factor can be selected

State *	District *	Block/Ward	Village/Town/City
PUNJAB	 Amritsar 	Select Block	•
Pincode *	Contact Type	Mobile No.	Consent for Receiving Communication *
	Mobile	Ŧ	Select Consent 🔹
		Risk Factors	
High risk Occupation Child born On chron Patient re Thalasser Tattooing	sexual behaviour nal Exposure to Blood/Body Fluids n to HBV-positive mother c haemodialysis ceived organ transplant nic/Haemophilic	History of II Needlestick Patient rece History of s Patient rece History of ro Other (spec	DUS (intravenous drug use) : Injury vived blood transfusion urgery vived invasive dental treatment eceiving injection for Therapeutic purposes ifly)
CLOSE	REFRESH	LOCK	Save

o) Click on "Save" button to go the next page

7. Entering Viral Hepatitis Screening Information for registered patients

3.1	Screening P	age (1/1): Selection of si	creening Test Typ	e in field #22	
Pat	tient Information + Dashboard Reports + Masters +	Download Android App Helpdesk			
	1. Registration	2. Screening 3. Testing 4. HBV	DNA 5. Known History	6. Prescription 7. Dispensatio	n
		Patient Name - Fdgdfgd Patient Sc	reening Module	.000115)	
	22) TEST TYPES 🕑 HBsAg				
	Screening Details - HBsAg Testing				
	23 🖉 Rapid Diagnostic Test	23.1 Collection Date *	23.2 Date of result * 01-01-2020	23.3 Result • Select	23.4 Place Of Testing * * Select *
	24 📄 ELISA Test	Collection Date 01-01-2020	Date of result	Result Select	Place Of Testing V Select V
	25 Other Test	25.1 Test Name	Collection Date *	Date of result	Result
		Place Of Testing Select	*		

Steps for Screening Page

- a) Field #22 can be selected for HBsAg test
- b) For each test conducted, select *at-least one* applicable test type Rapid Diagnostic Test / ELISA Test / Others
- c) For each test type, say "Rapid Diagnostic Test" in *field #23*, enter information from *field #23.1* #23.4
 - a. If "Govt. Lab" is selected in *field #23.4* Lab name must be entered using drop-down options
- d) If "Other" test type (*field #25*) is selected, additional field to record "test name" (*field #25.1*) has to be filled
- e) Click on "Save" button to go to the next page

8. Entering Testing Information for Hepatitis B patients

Steps for Testing page

1		Te	esting Page (1/2): Fi	elds #26-#38	
	1. Regi	tration 2. Screening Patient	3. Testing 4. HBV DNA Name - Fdgdfgdf (PB-A	5. Known History 6. Prescription MT-GMC-01-20-000115)	7. Dispensation
		Patie	ent Testing Module		Add FollowUp Visit
BASELINE T	EST DETAILS	27 Date	t of issue of last investigation repo	rt *	Use this option record testing details the patient comes for follow up visits
dd-mm-yy		da	d-mm-yy		
28 Haemoglobin *		29 S. Albumin *	30 s	erum Bilirubin Total(mgidL) *	
31 ALT -	[32 AST *	33 •	ST ULN (Upper Limit of Normal) *	34 Platelet Count *
35 Weight (in Kgs)	3	5.1 PGFR (estimated glome	erular filtration rate)		
Criteria for E	valuating Cirronosis				
Criteria for E	valuating Cirronosis				
Criteria for E	38.1 APRI Score				
Criteria for E 36 Ultrasound 37 Fibroscan 38 APRI 2 39 FIB 4	33.1 APRI Score	Te	esting Page (2/2): Fi	elds #39-#47	
Criteria for E 36 Ultrasound 37 Fibroscan 38 APRI 2 39 Fib 4	39.1 FIB 4 Score 0.02 Patient/Non-c	e a non-complicated Hepal rrhotic	esting Page (2/2): Fi	elds #39-#47	
Criteria for E 36 Ultrasound 37 Fibroscan 38 APRI 2 39 FIB 4 Complicate	APRI Score APRI Score O 02 Patient may t patient/Non-c	e a non-complicated Hepar rrhotic	esting Page (2/2): Fi	elds #39-#47	
Criteria for E 36 Ultrasound 37 Fibroscan 38 APRI 39 FIB 4 Complicated 40 Complicated Complicated Complicated	APRI Score APRI Score S3.1 FIB 4 Score 0.02 Patient may t patient/Non-c d/Uncomplicated mplicated * v	e a non-complicated Hepar rrhotic	esting Page (2/2): Fi	elds #39-#47	
Criteria for E 36 Ultrasound 37 Fibroscan 38 APRI 2 39 FIB 4 Complicated 40 Complicated 41 Variceal Bieed	APRI Score APRI Score	e a non-complicated Hepar rrhotic	esting Page (2/2): Fi esting C	elds #39-#47	Child Pugh Score
Criteria for E 36 Ultrasound 37 Fibroscan 38 APRI 39 FIB 4 Complicated 40 Complicated 41 Complicated 41 Variceal Bleed Select	APRI Score APRI Score	e a non-complicated Heparrhotic	ephalopathy	elds #39-#47	Child Pugh Score
Criteria for E 36 Ultrasound 37 Fibroscan 38 APRI 39 FIB 4 Complicated 40 Complicated 40 Complicated 40 Complicated 40 Complicated 40 Select 45 Severity of Hep-B Select	APRI Score APRI Score	e a non-complicated Heparrhotic	esting Page (2/2): Fi	elds #39-#47 1NR* 0.00	Child Pugh Score
Criteria for E 36 Ultrasound 37 Fibroscan 38 APRI 2 39 FIB 4 Complicated 40 Complicated 40 Complicated 41 Variceal Bleed Select 45 Severity of Hep-B Select 47 Persistenty eleva Yes	APRI Score	e a non-complicated Hepai rrhotic	esting Page (2/2): Fi ents C ephalopathy	elds #39-#47	Child Pugh Score

a) Enter Baseline tests details from *field #26 - #35*

- a. *Field #35.1* will be auto calculated based on the details captured above such as age, weight, gender and S. Creatinine value
- b. Select "Complicated Status" in *field #40;* If "Complicated" is selected, then severity of Hep-B has to be selected in *field #46* as either compensated or decompensated
- b) Enter criteria for evaluating Cirrhosis from field #41 #44
 - a. APRI and FIB-4 score in *field #38.1 and #39.1* will be auto-calculated using values inputted for AST, AST (ULN), ALT, age, platelet count
- c) If "Complicated" is selected in *field #40*, then *fields #41 #44* can be filled
 - a. *Fields #41-#44* are mandatory if decompensated cirrhosis is selected and non-mandatory if compensated cirrhosis is selected
- d) Field #45 i.e. Child Pugh Score will be auto calculated
- e) Field #47 must be filled if the ALT levels are or are not persistently elevated, i.e. ALT is above upper limit of normal at least twice 4 weeks apart this field will be asked only if "Uncomplicated" in #40
- f) To add follow-up tests, click on the red bar on top right
- g) Click on 'Save' to save the testing page and go to the next page

Fields #48 to #55 belong to HBV DNA page and have been shown separately in the non-cirrhotic section.

9. Entering Known History Information for Hepatitis B Patients

Steps for Known History page

1. Registration 2. Screening 3. Testing 4. HBV DNA 5 Known Hilstory 6. Prescription 7. Dispensation Patient Name - Fdgdfgdf (PB-AMT-GMC-01-20-000115) Patient Known History Module Select Yes Select Yes No Select Yes Select Select Interrupted These fields are only shown if Previous Begimen Select Select Select Select Interrupted These fields are only shown if Previous Status Yes Treatment Experienced is selected as 'ves' Treatment Experienced is select Select Select These fields are only shown if 'Previous Status' is celected as 'ves' Yes' Treatment Experienced is selected as 'ves' Yes' Treating Hospitalihealth facility Previous Regimen Previous Duration Previous Status' is celected as 'ves' Yes' Select Select Completed Select	5.1			Кпом	n History (1/3): F	ield #56				
Patient Known History Module Use this option to view test option test optiop			1. Registration	2. Screening 3. Testing Patient Name - F	4. HBV DNA 5. Kn dgdfgdf (PB-AMT-(own History 6. Pres GMC-01-20-00011	5)	nsation		
These fields are only shown if 'Treatment treating Hospital/health facility 56.2 Previous Regimen 56.3 Previous Duration 56.4 Previous Status 56.1 Treating Hospital/health facility 56.2 Previous Regimen 56.3 Previous Duration 56.4 Previous Status 56.1 Treating Hospital/health facility Select Select Select Generating Hospital/health facility Previous Regimen Previous Duration Previous Status Select Select		56	Treatment Experience	Patien	t Known Histo	ry Module			•	Use this option to view testing results dashboard
Treating Hospital/health facility Previous Regimen Previous Duration Previous Status Select Select Select Completed	These fields are only shown if 'Treatment Experienced' is selected as 'Yes'	56.1 Treating Hospit Select 56.4.1 No. of Weeks C Select	al/health facility (* ompleted 56	A.2 Area of the second secon	56.3 ₽n	vious Duration Select	(56.4) *	Interrupted	* These fields are only shown if 'Previous Status' is selected as 'Interrupted']
50.4.3) Past Treatment Outcome Inits field are only shown if 'Previous		Treating Hospita Select 56.4.3 Past Treatment	nl/health facility • Outcome	Previous Regimen Select	•	revious Duration Select	•	Previous State Complete	ns nd • This field are only shown if 'Previous	

- a) *Field #56*, treatment experienced, will be auto-selected based on information capture on registration page
 - a. If field #56 is Yes, then fields #56.1 #56.4 have to be filled
 - b. If field #56.4 is Interrupted, then fields #56.4.1 #56.4.2 have to be filled

	Patient K	Known History Module	
57 Breat	Yes No ent Experienced *		Use this option to view testi results dashboard
Bonworse	e disease due to chronic steroid use or use of other media n bone density	cations that	Renal impairment History of fragility fracture
HIV			Osteoporosis
Activ	ve Tuberculosis		HCV
That	assemia		Hepato-cellular Carcinoma
Patie	int on chemotherapy with deranged liver enzymes		Pregnant
Diab	etes		Hypertension
Hist	ory of alcohol consumption		Poorty controlled cardiac failure
Chro	nic obstructive pulmonary disease		Previous ribavarin hypersensitivity
Haer	noglobinopathies		Coronary artery disease
Ana	emia <9		
57.1	57.2 Renal/CKD Stage		
Select	* Select		
(70)			

- c. If field #56.4 is Completed, then *field #56.4.3* has to be filled
- b) Select all known history in the check-list in field #57
 - a. If "HIV" is selected, then *field #57.1* HIV/ART regimen have to be filled
 - b. If "Renal Impairment" is selected, then *field #57.2* CKD stage have to be filled
 - c. If the patient is a female, options are available for recording pregnancy status and last menstrual period date

3	Кла	own History (3/3): Field #59-	#60	
FQ Referred				
Yes	T D Determine	[0 3] beta		
Select	* Select	v dd-mm-yyyy		
60 Observations				
CLOSE	REFRESH	LOCK	SAVE	

- c) Field #59 "Referred" to be selected as "Yes" if patient has been referred to MTC
 - a. If field #59 is "Yes", then field #59.1 #59.3 has to be filled
 - b. If the patient can be referred to more than one MTC in *field #59.2*, the patient should be referred the facility of his/her preference and the preferred facility should be selected from the dropdown options
- d) Additional remarks can be added in *field #60* Observations
- e) Click on 'Save' to save the known history page and go to next page

10. Entering Prescription Information for Hepatitis B Patients

6.1		Patie	nt Prescription Pa	ge: Field #61-#66		
ſ	1	1. Registration 2. Screening 3 Patient N	Testing 4. HBV DNA	5. Known History 6. Presc AMT-GMC-00-20-00011	ription 7. Dispensation 5)	
61	Prescribing Facility * AMT-GMC-MTC1	62 Prescribing Doctor * * Select	Patient Prescrip	otion Module		Use this option to view
64	Regimen prescribed * Tenofovir disoproxil fumarate (TDI Drugs dosages (Tenofovir disoproxil fuma (TDF)) *	(F) v Tabi arate 65 Prescribing Date *	et 666 P	lace Of Dispensation AMT-GMC-MTC1	e and their coses in adults 🔮 🕳	recommended regimens
	CLOSE	REFRI	ESH	LOCK		SAVE
	Patient's Status - Trea	stment Recommended, Prescription Per	ding	Patient's Interruption Status	No 🔻	

Steps for Prescription Page

- a) Record *fields* from #61 #66 to capture prescription information of a patient
- b) Using *field #64,* capture strength of drugs based on selection in *field #63*
- c) Select "Place of dispensation" using *field #66*, which will be auto-filled in case of TC
 - a. In case of referral to MTC, Place of dispensation can be changed to MTC, TC or both
- d) Click on 'Save' to save the prescription page and go to next page

11. Entering Dispensation Information for Hepatitis B

		Patient Disp	ensation	Page: Field	∃ #67-#74 (I°	^t Dispensation)		
	1. Registration	2. Screening Patient M	3. Testing Name - Fdg	4. HBV DNA gdfgdf (PB-	5. Known History AMT-GMC-00-2	6. Prescription 7. D 20-000115)	ispensation	
Patient	Dispensa	tion Module	e			Treatment In	itiation Date -	
Dispensation Number	١	fisit Date	Pills 0	ispensed		Advised Next visit Date		Action
				No Data Fo	ound			
Dispensation number*	68 Date	e Of Treatment Initiat d-mm-yy	ion *					
'		- Of Discounting			Of Bills Diseases			
Regimen prescribed Tenofovir disoproxil fumarate (TC	70 Plac	e Of Dispensation		71	Days Of Pills Dispens	ed *		
Pegimen prescribed Tenofovir disoproxil fumarate (Tf Pills to be taken as * Tablet	70 Plat (F) V A 73 Pills V 3	To Be Dispensed *		71 *	Days Of Pills Dispens	ed *		

- a) Record fields from #67- #74 to capture first dispensation for a patient
- b) Field #68 to be used to record the date of treatment initiation
- c) *Field #71* to be used to record the days of pills dispensed; according to the guidelines pills can be dispensed for 30, 60 or 90 days
- d) Field #74 Advised Next Visit Date will be auto-generated and does not need to be filled
- e) Click on save to save the first dispensation page and go to the next page

7.2

Patient Dispensation Page: Field #75-#87 (>1st Dispensation)

Dispensation Number	Visit Date	Pills Dispensed	Advised Next visit Date	Action
1	09-01-2020	30	03-02-2020	1
Add New Visit				
Dispensation number*	77 Visit date *			
2	dd-mm-yy	2		
Regimen prescribed	79 Place Of Dispensation	80 Days Of Pills Disper	nsed *	
Tenofovir disoproxil fumarate (TE	DF) * AMT-GMC-MTC1	* 30	٠	
Dille to be taken as t	Dille To Re Discoursed 1			
Pills to be taken as "	82 Prins To be Unspensed *			
Tablet	* 30			
Tablet	* 30			
Tablet	- 30	(95)	30	
Tablet	84 Days of Pills Left	85 Adherence(%)	86 Advised Next	Visit Date *
Tablet Pills left* 0	84 Days of Pills Left	85 Adherence(%)	86 Advised Next	Visit Date *
Tablet Pills left* 0 Presence of Side Effects	B4 Days of Pills Left	85 Adherence(%)	86 Advised Next	Visit Date *

Steps for >1st dispensation (i.e. 2nd dispensation onwards) page

- a) Record fields from #76 #87 to capture nth dispensation for a patient
- b) There's no limit to the number of dispensations that can be entered. All the dispensations will be recorded in a table at the top of this page
- c) Record *field #77* to capture date of the visit, *field #79* to capture the place of dispensation, *field #80* to capture the days of pills dispensed and *field #83* to capture pills left from previous visit
- d) Field #85 adherence and #86 advised next visit date, will be auto-calculated
- e) Click on save to save the dispensation page and go to the next page
Non-cirrhotic patients

For **non-cirrhotic** patients HBV DNA test is suggested based on ALT levels. The persistently elevated ALT under the program is defined as at least 2 values four weeks apart in the last 6 months, which are above the upper limit of normal.

After that HBV DNA test, it can be decided whether the patient requires treatment.

For such patients, perform the steps in the screenshots **2.1 to 4.2** and follow it by the below HBV DNA page

12. Entering HBV DNA test Information for Hepatitis B patients

8.	1	HBV DNA pag	ge (1/2): Sample collectio	n details – fields #48-#	51	
		1. Registration 2. Screening Patient	3. Testing 4. HBV DNA 5. K t Name - Fdgdfgdf (PB-AMT	GMC-01-20-000115)	7. Dispensation	
	HBV DNA TEST DETAILS	Patier Z	nt HBV DNA Module		Use thi	Add FollowUp Visit
	Re-enter HBV DNA (lata HEP-8 in case of sample rejection	Use this option collection info previous sam	n re-enter VL sample rmation if the ple was rejected	the pat	ent comes for follow up visits
48	HEP-B HBV DNA - Sampl Sample Drawn On Date* dd-mm-yy	e Collection				
49	Is Sample Stored 49.1 Yes v	Temperature Sample Storage (°C) Select Temperature	49.2 Sample Storage Duratio	n 49.3 Duration (in hours)		
50	Is Sample Transported 50.1 Yes *	Sample Transport Temperature (°C) Select Temperature	50.2 Sample Transport Date • dd-mm-yy	50.3Sample Transported To Select	•	
50.4	Sample Transported By : Name	50.5 Designation Select				
51	Viral Load Sample	e Collection Section				_

- a) Enter sample collection information from *field #48 -#50*
 - a. If *field #49, "*Is sample stored", is selected as "Yes", then fields from *#49.1 #49.3* have to be filled
 - b. If *field #50*, "Is sample transported", is selected as "Yes", then fields from #50.1 #50.5 have to be filled
- b) Enter any remarks in *field #51*

c) Click on "Save" to partially save the viral load page till sample collection information is available

8.2

HBV DNA page (2/2): Sample collection details -fields #52-#55

HEP-B Confirma	atory HBV DNA Details 52.1 Sample Received	- Result By : Name 52.2	Designation		
dd-mm-yy Is Sample Accepted *	×	53.2 Result *	53.3 HBV DNA*	53.4 _{Re4}	nter HBV DNA* These fields are shown o
Treatment recommende Select	d, d	A M Select			sample is accepted
Remarks					
CL	OSE	REFRESH		LOCK	SAVE

Viral Load Sample Result Section

- a) Enter HBV DNA results information from field #52 #53.4
 - a. If *field #53, "*Is sample accepted", is selected as "Yes" then *fields #53.1 #53.4* have to be filled
 - b. If field #53, "Is sample accepted", is selected as "No" then field #53.5 has to be filled
- b) If sample is rejected via *field #53*, then repeat sample collection may take place; in such a case, click on the red button "Re-enter VL data" to re-enter the details of new sample collection
- c) Fill *field #54* from the guidelines suggested by a pop-up or otherwise medical officers may use their own discretion
- d) To add follow-up HBV DNA test, click on the red bar at top right in figure 8.1
- e) Enter any remarks in *field #55*, for e.g., Viral Load value is below 1000 but has been detected
- f) Click on "Save" to save the viral load page and go to the next page

If treatment is recommended in field #54, the module will repeat from screenshots 5.1 to 7.2 above.

13. Entering Information for an Interrupted Patient

A patient is categorized as "Interrupted" if the patient discontinues the course of Hepatitis diagnosis or treatment due to some reason. In order to capture the information of such patients, the following steps have to be taken.

Steps for reporting an interrupted patient:

a) Interrupted patient has been defined as one who has discontinued the course of Hepatitis diagnosis or treatment due to some reason

.1	Interrupted Patient (1/2)): Recording Interruption Status
Adherence(%)*		
100.00		
Advised SVR Date	Doctor	Side Effects
22-02-2019	Dr. Amandeep	Meadache Fatigue Anemia Nausea Insomnia Diarrhea Weakness
Commonte		Rash 🔲 Depression 🛄 Others 🛄 No side effects 🗹
CLOSE		SAVE
		Select
Patient's Status	SVR Achieved	Patient's Interruption Status Yes No

- b) To record information of such patients, on every page there is an option to record the "Patient interrupted status" at the bottom of every page
- c) After selecting "Yes" to the above option, choose reason for interruption and patient referral (if applicable) and click on save (see picture below)

9.2

Interrupted Patient (2/2): Recording Reasons for Interruption



14. Patient transfer module

During his/her treatment, a patient may be needed to get transferred to another facility in the country for various reasons. The patient transfer module captures the details of a transfer which could be:

- a. A transfer out: where your facility transfers a patient to another outside facility
- b. A transfer in: where a patient is transferred to your facility from another outside facility

Please follow the below steps to transfer out a patient:

- d) On the registration page, click on the patient transfer icon against the patient you want to transfer out
- e) Fill the details of the facility you want the patient to transfer to, i.e. state, district, facility name, and reasons for transfer and save
- f) To check the status of your transfer out, click on 'Patient Transfer' and go to patient transfer-out requests

10.1		Patient transfer (1/4): Transferring out a patient							
	National Viral Hepatitis Control Program								
	Patient Information +	Dashboard - Reports	Masters + Download Android App	Helpdesk Inventory Patient Tran	nsfer	_			
			+ ADD NE	W PATIENT HEP-C					
				OR					
			Patien	t List HEP-C					
	Search By Select		SEARCH		Use patient transfer module clicking on this icon to transf	on the homepage by er/refer any patient			
					1 70 gE-1	09 records.			
	UID	Name		Status	Patient Transfe	r Print			
	000689	asdas		Diagnosis Pending	=	⊖			
	000300	asdasd		Diagnosis Pending	≓	⊖			
	000301	wqeqe		Diagnosis Pending	0	⊖			

Please follow the below steps to transfer-in a patient:

- c) Whenever your facility gets a request to transfer-in a patient, a notification will show up on the 'Patient Transfer' module
- d) Click on 'Patient Transfer' and go to 'Patient transfer-in requests' to take action on the patient requests

10.3	2		Patient 1	ransfer (2/4): Tra	nsferring	out a pati	ent	
				National V	ïral Hepa	atitis Cor	trol Program	
	Patient Information +	Dashboard - Rep	rts Masters -	Download Android App	Helpdesk	Inventory	Patient Transfer	

		Patient *	Fransfer out Module	Select State where the
	Patient Name - Asc	asd	NVHCP ID - PB-AMT-GMC-01-20-000300	o patient is transferred to
2	State:	All States		• 3 Select the facility in
Select District where the patient is transferred to	District	Select Dist	rict	*
0	Facility	All Facilitie	S	•
Select Reason for transfer from dropdown and click	Reason for transfer	Select Rea	ison	•
'Save"				_
			s	Save

0.3			Patient transfe	er (3/4): Checking status			
			Natior	nal Viral Hepatitis Con	trol Program	(?)	ł
Patient Inf	formation +	Dashboard + Report	s Masters + Download Androi	id App Helpdesk Inventory	Patient Transfer		
		1			After saving your tr 'Patient Transfer' m	ansfer, you can click of the st	on the atus of
			10		patients transferred	i in/out from the facilit	y
				OR	patients transferred	i in/out from the facilit	y
			F	OR Patient List HEP-C	patients transferred	i in/out from the facilit	У
	Search By		F	OR Patient List HEP-C	patients transferred	in/out from the facilit	у
	Search By Select		F	OR Patient List HEP-C	patients transferred	i in/out from the facilit	У
	Search By Select		F SEARCH	OR Patient List HEP-C	patients transferred	1-30 Of 109	y records
	Search By Select	Name	SEARCH	OR Patient List HEP-C	patients transferred	1-30 Of 109 Patient Transfer	records Print
	Search By Select UID 000689	Name	* SEARCH	OR Patient List HEP-C Status Diegnosis	patients transferred	1-30 Of 109 Patient Transfer	records Print
	Search By Select UID 000689 000300	Name asdas asdasd	• SEARCH	OR Patient List HEP-C Status Diagnosis	Pending	1-30 Of 109 Patient Transfer ☑ 	Print

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10.4 Patient transfer (4/4): Transferring in a patient to your facility

	agin an			Nationa	a vital nep	auus co	nuor Program		$(\underline{\mathbf{N}})$
Patient Information +	Dashboard +	Reports	Masters +	Download Android Ap	op Helpdesk	Inventory	Patient Transfer		
				Patient transfer-i	in requests ratio	ent transfer-out	requests		
				 Antipation of the second se	and the second second second	and the second se			
				Patien	t transfer-i	n reques	ts To transfer-in a	patient, go to 'Patie	ent transfer-in
Search By Select			×	Patien	t transfer-i	n reques	ts To transfer-in a requests' to tak transfer to your	patient, go to 'Patie e an action on the p facility	ent transfer-in patient asked to
Search By Select			*	Patien	t transfer-i	n reques	ts To transfer-in a requests' to tak transfer to your	patient, go to 'Patie e an action on the p facility	ent transfer-in patient asked to 0 Of 0 reco
Search By Select UID	Name	State	V	Patien SEARCH Facility	t transfer-i	n reques	ts To transfer-in a requests' to tak transfer to your Status HCV	patient, go to 'Patie e an action on the p facility Status HBV	ont transfer-in patient asked to 0 Of 0 reco Action
Search By Select UID	Name	State	V District	Patien SEARCH Facility No patien	t transfer-i Date(DD-MM-YY) ts have been transfer	n reques	ts To transfer-in a requests' to tak transfer to your Status HCV	patient, go to 'Patie e an action on the p facility Status HBV	ont transfer-in patient asked to 0 Of 0 reco Action

15. Loss to follow-up (LTFU) module

The LTFU module can be used to follow up with the patients who did not show up for next dispensation 7 days after the advised visit date. The module reminds you to contact the patients and save any remarks which may further assist in patient management.

Please follow the below steps for the LTFU module:

- a) To view the LTFU patients list, click on the LTFU module at the top bar
- b) Select the disease area (Hep-B or Hep-C) for which you want to view the patients
- c) You can also search the patients by name, UID, contact number, etc.
- d) Once you contact the patient for LTFU, click on "Yes" and add remarks, if any, and save
- e) If for some reason, the contact wasn't established with the patient, click on "No" and add remarks and save

11.1				LTFU module (1/2	?): Checking	the LTFU	list		
				National Viral Hepatitis Control Program					
Patient Inform	ation +	Dashboard - Reports	Masters -	Download Android App	Helpdesk Ir	iventory L	TFU Patient Transfer		ADMINN
				+ ADD I	NEW PATIENT HE	iP-C			
					OR		Click on the 'LTFU' module to follow-up with the patients who missed a dispensation		
				Patie	nt List HEF	P-C	during treatment		- L
S	Search By Select		~	SEARCH					
								1-30 Of 109	records.
	UID	Name				Status		Patient Transfer	Print

11.2			LTFU	module	(2/2): Ta	king an ai	ction			
		AN DEF	Nat	ional Vi	ral Hep	atitis Co	ntrol Pro	ogram	(
Patient Inform	nation - Dashboard -	Reports Mast	ers - Download An	idroid App	Helpdesk	Inventory	LTFU	Patient Tra	nsfer	ADMINN
contact r	Search By Select Select UIDContact No. Contacted	tact status	L'	TFU Pa	tient Lis	st HEP-0	C Selec LTFU	t the dis patient	ease for which you s	1-8 Of 8 records.
	Name	Harris Coma	District of the patient	Last Visit Date	Next Visit Date	Last Status	Contacted?	Contact date	Remarks	Action
	PB-AMT-GMC-01-20- 000268	Asdasd	AMRITSAR	01-01- 2020	26-01- 2020	On Treatment 1/3	●Yes ○No	15-06- 2020	Fsdfasf	B
	PB-AMT-GMC-01-20- 000269	Toat	AMRITSAR	01-01- 2020	22-03- 2020	On Treatment 3/6	€Yes ONo	12-06- 2020	Switched-off	2

Troubleshooting

Application and Web Portal

Instructions for App and Web:

a) Patient Registration should always be done only on one platform i.e. either on the MIS web portal or on the MIS Android application. Since the Android application can work in the offline mode, allowing Patient Registration on multiple platforms runs the risk of creating multiple patient records with the same UID.

b) Facilities should identify a dedicated hardware for the Patient Registration module, either a desktop *(for MIS web portal)* or tablet/mobile *(for MIS Android App)* that will be used at all times for registering a new patient

Instructions for App:

- a) Do not update tablet or mobile android version unless informed by SVHMU
- b) Ensure the application version, while logging in, is correct
- c) While entering from two sources/devices, make sure that data is uploaded post data-entry on one device and data is downloaded before making any new entries on another device
- d) Tablet or mobile must have free space of at-least 1 GB
 - a. Keep deleting cached data periodically to ensure availability of free space
- e) While uploading or downloading data on NVHCP app, don't open any other app during this process and retry if interrupted due to any reason

Frequently asked questions for App:

Q1 - Data uploaded but showing more entries than entered in the tablet or mobile.

A1 - Several fields such as advised visit dates, End of Treatment date, etc. are auto-calculated and, hence, the #records uploaded may be more than the #records manually entered by the user.

Q2 - Data not getting uploaded and showing error.

A2 - Check your internet connection; if the problem persists, then re-start the tablet.

Q3 - Getting error related to Application permission.

A3 - Go to app permissions and allow all Permissions for the app.

Q4 - Not able to download data.

A4 - Check your internet connection; in case problem persists, then restart tablet. If problem persists after re-starting tablet, then reinstall the application.

Q5 - App crashing or working slow.

A5 - Clear cached data from phone storage; If problem persists, restart the tablet and reinstall the application

Frequently asked questions for App and Web:

Q1 - How to edit previously filled data in a patient record?

A1 - All users can edit information of the last saved page. For pages before that, data can only be edited by the nodal officer of treatment facility (NOTR) via unlocking the page. Rights to unlock previous pages can only be accessed through the login details of the nodal officer of treatment facility (NOTR).

Q2 – Not able to login – forgot password or username.

A2 – In such a situation, the user should contact the nodal officer for retrieving the login details and changing password

Q3 - Internet got disconnected during data entry, what should I do?

A3 – If using the app, you can continue making data entry and sync data online when internet is available. If using the web, unsaved data will have to be re-entered.

Case Studies

(You may assume information that is not provided)

Person named Ram Kumar who is 26-year-old man (weighing 65 kgs) visits your model treatment centre (MTC) on 15 February 2018 with an OPD Registration Number as 1923562. For the purpose of the case study, please assume the address of your facility as the address of the patient. (Kindly note that it is always recommended to use the national ID of the patient for filling in the patient address.)

After initial discussions, he has confirmed history of IV drug use from age 17 to 23. He is now complaining of fatigue, affecting his work as a painter. Otherwise he is doing well, is not on any regular medications.

He was screened using **ELISA test (HBsAg) on 15 February 2018** and found to be **positive**. He was advised to get his baseline test done at the State Lab on **16 February 2018**. He reached the state lab on **16 February 2018** and the Lab Technician drew his sample on the same day.

Test	Result
AST	49
AST (Normal)	40
ALT	39
Albumin	4
Bilirubin	1
INR	1
Baseline Haemoglobin	12
S. Creatinine	0.8
Platelet Count	50000

On 18 February 2018, he visited the MTC to collect his results which were as follows:

The patient came back on 20 February 2018 and met the Treating Physician.

- Q1. Is the patient complicated/non-complicated?
- Q2. What should be next step after the first baseline test?
- Q3. Should the patient be treated? If yes, what is the duration of prescription for the patient?

Q4. How often is he recommended to come up for follow-up baseline and HBV DNA tests?

Hint: Fibroscan test date was done on 22 March 2018 and Encephalopathy was "Severe"; Ascites was 'Severe' and Variceal Bleed was 'Yes'

Make a schedule for first **4 dispensations** (assuming 100% adherence), **2 follow-up tests and 2 HBV DNA** tests for this patient.

(You may assume information that is not provided)

Person named Kishen Kumar who is 40 year-old man (who is 70 kgs in weight) visits your treatment centre (TC) on 30 January 2018 with an OPD Registration Number as 1028759. For the purpose of the case study, please assume the address of your facility as the address of the patient. (Kindly note that it is always recommended to use the national ID of the patient for filling in the patient address.)

After initial discussions, he has confirmed of getting injections from local medical practitioner (unauthorised) 7 months ago and has experienced syringe use when he was 20 years old. He is having abdomen pain and is not on any other regular medications.

He was screened using **Rapid diagnostic test (HBsAg) on** 30 January 2018 and found to be **positive**. He was advised to get his baseline test done at the State Lab on 30 January 2018. He reached the state lab on 2 February 2018 and the Lab Technician drew his sample on the same day.

Test	Result
AST	45
AST (Normal)	40
ALT	42
Albumin	4
Bilirubin	1
INR	1
Baseline Haemoglobin	13
S. Creatinine	1
Platelet Count	193000

The results came on the 9 February 2018 as follows:

Q1. Is the patient complicated/non-complicated?

Q2. What should be next step after the first baseline test?

The patient was advised for follow-up tests for which his sample was drawn on 1st April, 2018 and the results came on 3rd April, 2018 as follows:

Test	Result
AST	45
AST (Normal)	40
ALT	42
Albumin	3
Bilirubin	1
INR	1
Baseline Haemoglobin	12
S. Creatinine	0.9
Platelet Count	160000

Q3. What is the next step to be taken after the above results?

He was advised to get his **HBV DNA** test done at the State Lab on **5**th **April 2018**. He reached the state lab and the Lab Technician drew his sample on the same day. Since, the facility had the DNA platform the sample was not stored and no transportation was required.

The DNA result came on 8th April 2018 and the result mentioned 'Detected' with DNA count of 21,000.

Q4. Is the treatment recommended? If yes, what is the regimen prescribed?

Q5. If treatment is recommended, what is the duration of prescription?

Make a schedule for first **4 dispensations** (assuming 100% adherence), **2 follow-up tests and 2 HBV DNA** tests for this patient.

(You may assume information that is not provided)

Person named Mohan who is 29 year-old man (weighing 67 kgs) visits your treatment centre (TC) on 15 March, 2018 with an OPD Registration Number as 1023562. For the purpose of the case study, please assume the address of your facility as the address of the patient. (Kindly note that it is always recommended to use the national ID of the patient for filling in the patient address.)

After initial discussions, he has confirmed history of IV drug use. He is now complaining of fatigue, affecting his work as a driver.

He was screened using **ELISA test (HBsAg) on 15 March 2018** and found to be **positive**. He was advised to get his baseline test done at the State Lab on **16 March 2018**. He reached the state lab on **16 March 2018** and the Lab Technician drew his sample on the same day.

Test	Result
AST	39
AST (Normal)	40
ALT	38
Albumin	4
Bilirubin	1
INR	1
Baseline Haemoglobin	12
Platelet Count	150000
Creatinine	0.8

On 17 March 2018, he visited the TC and collected the results as follows:

Q1. Is the patient complicated/non-complicated?

Q2. What should be next step after the first baseline test?

The patient was advised for follow-up tests for which his sample was drawn on 30th April, 2018 and the results came on 1st May, 2018 as follows:

Test	Result
AST	36
AST (Normal)	40
ALT	35
Albumin	3
Bilirubin	1
INR	1
Baseline Haemoglobin	12
S. Creatinine	0.9
Platelet Count	160000

Q3. What is the next step to be taken after the above results?

He was advised to get his **HBV DNA** test done at the State Lab on **5**th **May 2018**. He reached the state lab and the Lab Technician drew his sample on the same day. Since, the facility had the DNA platform the sample was not stored and no transportation was required.

The DNA result came on 8th May 2018 and the result mentioned 'Detected' with DNA count of 1,000.

Q4. Is the treatment recommended? If yes, what is the regimen prescribed?

Make a schedule for **2 follow-up tests and 2 HBV DNA** tests for this patient.

(You may assume information that is not provided)

Person named Krishna Kumari who is 40 year-old woman (who is 52 kgs in weight) visits your treatment centre (TC) on 28 February 2018 with an OPD Registration Number as 1024759. For the purpose of the case study, please assume the address of your facility as the address of the patient. (Kindly note that it is always recommended to use the national ID of the patient for filling in the patient address.)

After initial discussions, she has confirmed of dental treatment from unauthorised dentist 9 months ago. She is having abdomen pain and not pregnant.

She was screened using **ELISA test (HBsAg) on 15 March 2018** and found to be **positive**. She was advised to get his baseline test done at the State Lab on **16 March 2018**. She reached the state lab on 16 March 2018 and the Lab Technician drew her sample on the same day. The results came on 18 March 2018:

Test	Result
AST	42
AST (Normal)	40
ALT	45
Albumin	2
Bilirubin	1.2
INR	1
Baseline Haemoglobin	12
Platelet Count	130000
Creatinine	1

Q1. Is the patient complicated/non-complicated?

Q2. What should be next step after the first baseline test?

The patient was advised for follow-up tests for which his sample was drawn on 30th April, 2018 and the results came on 1st May, 2018 as follows:

Test	Result
AST	50
AST (Normal)	40
ALT	65
Albumin	2
Bilirubin	1
INR	1
Baseline Haemoglobin	12
S. Creatinine	0.9
Platelet Count	50000

Hint: Fibroscan test date was done on 30th April 2018 and Encephalopathy was "None"; Ascites was 'Mild to Moderate' and Variceal Bleed was 'Yes'

Q3. What is the next step to be taken after the above results?

He was advised to get his **HBV DNA** test done at the State Lab on **5**th **May 2018**. He reached the state lab and the Lab Technician drew his sample on the same day. Since, the facility had the DNA platform the sample was not stored and no transportation was required.

The DNA result came on 8th May 2018 and the result mentioned 'Detected' with DNA count of 6,000.

Q4. Is the treatment recommended? If yes, what is the regimen prescribed?

Q5. If treatment is recommended, what is the duration of prescription?

Make a schedule for first **4 dispensations** (assuming 100% adherence), **2 follow-up tests and 2 HBV DNA** tests for this patient.

(You may assume information that is not provided)

Person named Hema Kumari who is 50-year-old woman (who is 62 kgs in weight) visits your treatment centre (TC) on 28 February 2018 with an OPD Registration Number as 1024849. For the purpose of the case study, please assume the address of your facility as the address of the patient. (Kindly note that it is always recommended to use the national ID of the patient for filling in the patient address.)

She was screened using **Rapid diagnostic test (both Anti-HCV and HBsAg)** on 28 February 2018 and found to be **positive in both**. She was advised to get his **confirmatory Viral Load (VL)** test done at the State Lab on 28 February 2018. She reached the state lab on 2 March 2018 and the Lab Technician drew her sample on the same day. Since, the facility had the VL platform the sample was not stored and no transportation was required.

Her confirmatory VL test was done on 2 March 2018, the VL was 567200, and the report mentioned '*Detected*'. She collected her reports on 5 March 2018 from the state lab. On 7 March 2018, she visited the TC and was then advised for the base line tests whose results came on the 9 March 2018 as follows:

Test	Result
AST	100
AST (Normal)	40
ALT	62
Albumin	3
Bilirubin	1.7
INR	1
Baseline Haemoglobin	10.2
Platelet Count	70000
Creatinine	0.9

The patient came back on 11 March 2018 and met the Treating Physician.

Q1. Is the patient complicated/non-complicated?

Q2. What is the regimen prescribed for Hepatitis C?

Q3. What is the duration of prescription for the patient?

Q4. Should the patient be referred to MTC? If yes, kindly elaborate the reasons.

Hint: Fibroscan test date was done on 12 March 2018 and Encephalopathy was "None"; Ascites was 'Mild to Moderate' and Variceal Bleed was 'Yes'

Take an assumption that the patient was 100% adherent and came on all the desired follow-up visits to complete the rest of the data entry.

Her SVR was done on the suggested date (12 weeks after the last pill was taken) and the result came as 'Non-detected'.

Q5. After the SVR is achieved, what is the next step to be followed?

Q6. What regimen will you prescribe for Hepatitis B treatment?

Medical Formulas and Logic

g) What is the logic to be followed for treating Hepatitis-B?

The following chart gives an idea on how the treatment has to flow according to the guidelines:

Chronic Hepatitis B Infection : Whom To Treat



h) Using the APRI and FIB-4 scores, how is a patient diagnosed as being an uncomplicated case of Hepatitis-B or a complicated case of Hepatitis-B?

Diagnosis	Criteria
Uncomplicated (non-cirrhotic)	APRI=<2 AND FIB-4=<3.25
Complicated (cirrhotic)	APRI>2 OR FIB-4>3.25

APRI = (AST/ASTN*100)/(Platelet Count/1000)

FIB-4 = Age*AST/(ALT)^(1/2)/(Platelet Count/1000)

i) How many types of Complicated Hepatitis-B cases are there?

Broadly, a complicated Hepatitis-B case can either be a case of compensated cirrhosis or decompensated cirrhosis.

- j) How can we identify whether a patient has compensated cirrhosis or decompensated cirrhosis?
- Decompensated Cirrhosis: A patient presenting with ANY ONE of the following can be a case of *decompensated cirrhosis*:-
 - Ascites (mild or moderate) OR,
 - Hepatic encephalopathy (mild or moderate) OR,
 - Total bilirubin >2.5 x ULN + prolonged prothrombin time
 (>3 second prolongation or INR >1.5) OR,
 - Variceal bleed
- Compensated Cirrhosis: A patient who is considered as a complicated case and does not present with any of the above four conditions can be considered a case of *compensated cirrhosis*
- k) How is Child Pugh score calculated?

Measure	1 point	2 points	3 points
Bilirubin	<2	2.0-3.0	>3
Albumin	>3.5	2.8-3.5	<2.8
INR	<1.7	1.71-2.3	> 2.3
Ascites	None	Mild to Moderate	Severe
Encephalopathy	None	Mild to Moderate	Severe
Child Score	Sum of points for above five factors		
Child–Pugh Class A:	5-6 points		
Child–Pugh Class B:	7-9 points		
Child–Pugh Class C:	10-15 points		