

REPUBLIC OF KENYA



MINISTRY OF HEALTH

Facility Consumption Data Report and Request (F-CDRR) for Condoms, Lubricants, Needles and Syringes, Overdose, STI, Hepatitis B&C & HIV ST

Facility Name: _____ Facility (MFL) Code: _____

County: _____ Sub-County: _____

Period of Reporting Beginning: _____ Ending: _____
(Day/Month/Year) (Day/Month/Year)

Commodity Name	Unit of Issue/ Pack Size	Beginning Balance	Total Quantity Received this month	Total Consumed this month	Losses & Wastage	Positive Adjustments	Negative Adjustments	End of Month Physical Stock Count	Commodities expiring in less than 6 months		Days Out of Stock this Month	Quantity Requested for RESTOCKING
									Quantity	Earliest Expiry date (mm/yyyy)		
		A	B	C	D	E	F	G			H	I
Condoms and Lubricants						Condoms and Lubricants						
Male Condoms	Pieces											
Female Condoms	Pieces											
Personal Lubricant Water Based 4ml	Sachets											
HIV Self Testing Kits						HIV Self Testing Kits						
HIV Self Testing Kits	Kit											
Needles and Syringes						Needles and Syringes						
NSP KIT 1	Kit											
NSP KIT 2	Kit											
Overdose and Hepatitis C						Overdose and Hepatitis C						
Naloxone 1mg/ml(prefilled)	Ampoule											
Naloxone 0.4 mg/ml(Ampoule)	Ampoule											
Ledispasvir/sofosbuvir 90mg/400mg	Tab											
STI						STI						
Cefixime 400mg tabs	Tab											
Metronidazole 400mg	Tab											
Azithromycin 500mg	Tab											
Ceftriaxone injection IM/ IV	Vial											
Clotrimazole pessaries 200mg Tabs	3s											
Fluconazole 150mg Tabs	Tab											
Gentamicin injection - 80mg- 40mg/ml 2ml amp	Ampoule											
Doxycycline 100 mg Caps	Caps											
Benzathine penicillin 2.4 mu	Vial											
Acyclovir 400mg Tabs	Tab											
Podophyline paint (physician application)	Tube											
HEPATITIS B						HEPATITIS B						
HEPATITIS B VACCINE (Single dose)	Vials											

KEY

- | | | |
|-----------------------|-------------------------------|---------------------------|
| # Diagnosis | # Diagnosis | # Diagnosis |
| 1 Urethral discharge | 6 Anorectal ulcer | 11 Opiod overdose managed |
| 2 Vaginal discharge | 7 Oropharyngeal non-ulcer STI | 12 HEP B Vaccinated |
| 3 PID | 8 Painful Inguinal swelling | 13 HEP C Treated |
| 4 GUD | 9 Anogenital growth | |
| 5 Anorectal discharge | 10 Painful Scrotal swelling | |

TOTAL CASES			
1	6		11
2	7		12
3	8		13
4	9		
5	10		

Comments (Explain ALL Losses and Adjustments)

Report Prepared By: _____ Contact Telephone: _____ Signature: _____

Designation: _____ Date: _____

Report Approved By: _____ Contact Telephone: _____ Signature: _____

Designation: _____ Date: _____