



New Delhi Tuberculosis Centre



**Annual Report
2014-2015**



NEW DELHI TUBERCULOSIS CENTRE

ANNUAL REPORT
2014 - 2015

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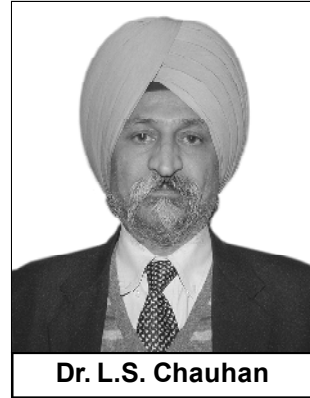
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Message from Chairman

It is a matter of immense pleasure and highly eye pleasing to see New Delhi Tuberculosis Centre growing since its establishment in 1940. The Centre today holds a place of pride amongst the National level institutes serving the patients with TB and other respiratory diseases.



The institute continues to be recognized for its expertise in the field of TB research and training for what it is recognized as State TB Training & Demonstration Centre and also as an IRL by the Central TB Division. It is the first STDC to start performing the base line DST of all MDR cases for second line DST and planning to do universal DST for all smear positive cases diagnosed in the state.

The institute is actively involved in the RNTCP activities along with State TB Cell. It is also actively involved in enhancing the notification of TB cases in Delhi State by public as well as private institutes. The members of the institute play significant role both scientifically and technically in strengthening TB control globally and nationally.

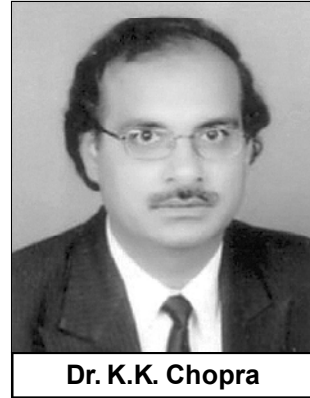
May the institute expand, diversify and flourish more and more to impart superior and quality health services to TB patients. I express my heartiest gratitude and appreciation to the learned faculty, technical staff and all employees for their constant cooperation towards achieving the goals of the Centre.

I would like to extend my full cooperation and support for achievement of greater heights in the goal of the institute.

Dr. L.S. Chauhan
Chairman

From Director's Desk

It gives me immense pleasure to present this edition of Annual report of the New Delhi Tuberculosis Centre. The report highlights the manifold activities and efforts undertaken to provide high quality patient care, research, teaching, training and support for TB control. The priority has been, as before, to evolve patient friendly and cost effective treatment of TB continued. This included the treatment of HIV/TB co-infection and management of MDR-TB cases.



With the prime objective of delivering patient care, the institute showed the OPD attendance of about 14,000 during the year. More than 31,000 laboratory examinations were carried out as a part of DOTS Plus programme.

The upgraded Bacteriology department provides expert services not only to TB cases but also in the field of MDR & XDR TB. The LPA facility for rapid diagnosis of MDR TB continues to serve the patients from all parts of North India. The upgraded laboratory of the institute also started performing base line DST of all MDR cases for second line DST and is planning universal DST for all smear positive cases diagnosed in the state. We, at NDTB Centre, won the honor of being first to start this in Delhi State. The Microbiologist, Technical Officers and Laboratory Technicians of the laboratory are recognized as National trainers of FIND training Programmes and are actively involved in imparting training to staff working all over the country. The epidemiology division is carrying out studies to identify risk factors such as use of tobacco in population where TB is endemic and also following the trends of TB control in the state.

The institute contributed to HRD programme through training of over 2,000 state level personnel. Sensitization training in RNTCP of post graduate DNB and MPH and MD students of medical colleges and various institutes in Delhi was started during the year. The institute also continued the successful functioning of revised TB Supervisory course during the year.

World TB Day was celebrated with an opportunity to mobilize political and social environment for further programme. Various activities like health talks, quiz competitions, were held during the weeklong celebration. The Centre also celebrated the 74th foundation day on November 20th, 2014. All the students and staff participated enthusiastically. The winners and participants were acknowledged with prizes and appreciation certificates.

I acknowledge and appreciate active participation of faculty and technical staff in various meetings, trainings, seminars, internal evaluation visits, conferences, workshop and CME. The role of administrative division in ensuring the efficient execution of technical activities is absolutely appreciable.

There are many challenges remaining that are to be looked for. By 2015, we aim at reducing the number of people dying from TB to less than one million, including those co-infected with HIV. We at NDTB Centre aim high for reducing the global burden of TB (Prevalence and death rates) by 50% relative to 1990 level.

I am pleased to place before this Annual report and invite your valuable suggestions to help in improving our efforts. The advent of every new year is an appropriate time for us to evaluate our performance in the past year, identify our performance and move with vigor in pursuing our future goals.

Dr.K.K.Chopra
Director

1. ABOUT THE INSTITUTE

From a modest beginning in 1940 as a Model TB Clinic, New Delhi Tuberculosis Centre has now grown into a fully functional National level institute for TB and Chest Diseases. The objectives of imparting health care, training and education are being met in an integrated form here. From the day of its inception, NDTB Centre nurtured a dream of becoming a National level institute for TB & chest Diseases. Today it has become a reality, as the Centre has gained due recognition nationwide for excellence in the treatment of TB and respiratory disease. The Centre became a referral Centre for TB patients from all parts of the country to avail diagnostic and treatment facilities. NDTB Centre was upgraded in 1951, to be the first Demonstration cum Training Centre with the assistance of WHO, UNICEF and Government of India. Being the oldest premier institute of the country, it has established itself both nationally and internationally in the field of TB and respiratory diseases. The Government has supported both technically and financially to make it an apex institute in the country.

With the objective of expansion of quality DOTS services to the entire country, the Centre continues to render the services in the field of TB and Respiratory diseases. The Centre aims at widening sources both in terms of activities and access, and to sustain the achievements for decades to come in order to achieve ultimate objectives of TB control in the country.

The Centre actively works in liaison with State TB cell on getting positive results for all components of a new Stop TB Strategy. As an IRL the institute assists RNTCP in maintaining the global standards through quality assurance for the lab in state. The Institute has been a guiding force in formulating policy in relation to involvement of Private sector and Medical Colleges in the programme for the management of pediatric TB and operational research.

2. MANAGING COMMITTEE

1. Dr. L.S. Chauhan Chairman
Vice- Chairman
Tuberculosis Association of India
2. Dr. V.K. Arora Member
Financial Adviser
New Delhi TB Centre/
Vice Chairman (Research and Publication)
Tuberculosis Association of India
3. Dr. A.K. Panda Member
The Additional Secretary & FA
Ministry of Health & Family welfare
4. Shri. Anshu Prakash Member
Joint Secretary (Health)
Ministry of Health & Family Welfare
5. Dr. Sunil Khaparde Member
Deputy Director General (TB)
Central TB Division
6. Dr. Rohit Sarin Member
Director
National Institute of TB and Respiratory Diseases
7. The Director Member
VP Chest Institute
8. Dr. S.K. Sharma Member
Director of Health Services
Delhi Administration

- | | | |
|-----|--|------------------|
| 9. | Dr. Alka Saxena
Director Medical Services
New Delhi Municipal Committee | Member |
| 10. | Dr. S.M. Govil
Honorary General Secretary
Delhi Tuberculosis Association | Member |
| 11. | Dr. Arun Gupta
Joint Director,
Indian Railways | Member |
| 12. | Shri T.S. Ahluwalia
Secretary General
Tuberculosis Association of India | Member |
| 13. | Dr.K.K.Chopra
Director
New Delhi TB Centre | Member Secretary |

3. SCIENTIFIC ADVISORY COMMITTEE

Dr. L.S.Chauhan Chairman New Delhi Tuberculosis Centre	Chairman
Dr. Niraj Kulshrestha Addl. Director General (TB) Central TB Division	Member
Dr.Ashwani Khanna State TB Officer Delhi State	Member
Prof S. N. Gaur Professor – Department of Respiratory Medicine V P Chest Institute	Member
Dr. Varinder Singh Professor – Pediatric, Kalawati Hospital Lady Harding Medical College	Member
Shri G.P. Mathur Ex-Statistician New Delhi Tuberculosis Centre	Member
Dr. M. Hanif, K.M. Bacteriologist New Delhi Tuberculosis Centre	Member
Dr. Nishi Aggarwal Statistician New Delhi Tuberculosis Centre	Member
Dr. K.K.Chopra Director New Delhi Tuberculosis Centre	Member Secretary

4. ETHICAL COMMITTEE

Dr (Prof.) S.N.Gaur Professor – Department of Respiratory Medicine VP Chest Institute	Chairman
Dr. Chinkholal Thangsing NGO – HIV Expert	Member
Shri T.S. Ahluwalia Secretary General Tuberculosis Association of India	Member
Prof. Mala Sinha Faculty of Medical Science Delhi University	Member
Mr. Swetaketu Mishra Advocate	Member
Dr. M. M.Singh Professor Maulana Azad Medical College	Member
Shri G.P. Mathur Ex-Statistician New Delhi Tuberculosis Centre	Member
Sh. Madan Mohan Delhi TB Association	Member
Sh. Sanjeev Gupta Community Person	Member
Dr. Sanjay Rajpal Chest Physician New Delhi Tuberculosis Centre	Member
Dr. M. Hanif ,K.M. Bacteriologist New Delhi Tuberculosis Centre	Member
Dr. Meera Dhuria Epidemiologist New Delhi Tuberculosis Centre	Member

5. SENIOR STAFF MEMBERS

Dr. K. K. Chopra M.B.B.S., M.D., D.T.C.E.	Director
Dr. Sanjay Rajpal M.B.B.S., D.T.C.D., F.N.C.C.P.	Chest Physician
Dr. Mahmud Hanif Ph.D.	Bacteriologist
Dr. Nishi Aggarwal Ph.D.	Statistician
Dr. Meera Dhuria M.B.B.S., M.D.	Epidemiologist
Dr. Shivani Pawar M.B.B.S., D.T.C.D.	Medical Officer
Mr. D.C. Uppadhyay B.Com.	Administrative Officer

6. RESEARCH AND PUBLICATIONS

(A) Research papers published.

During the year 2014-15, the following research papers have been published or submitted by faculty of the Centre:

- 1) **“Molecular diagnostics in tuberculosis revisited with clinician’s perspective”** – An editorial published in Indian Journal of Tuberculosis, 2014. Sanjay Rajpal and V.K.Arora.IJT; 2014:61:277-280.
- 2) **“Information and communication technology – application in Health sector”** article published in souvenir of Tuberculosis Association of India on the occasion of TB seal release.
- 3) **“Challenges in Tuberculosis Diagnosis and Management: Recommendations of Expert Panel”** – Editorial published in journal of Laboratory Physician/Jan-June2015/Vol 7/Issue1
- 4) **“Piloting upfront Xpert MTB/RIF testing on various specimens under programmatic conditions for diagnosis of TB & DR-TB in paediatric population”** article accepted for publication in PLOS ONE.

(B) Research paper presented in Conference

1. **Performance evaluation of Genotype MTBDR plus assay for rapid diagnosis of non tuberculosis mycobacterium in smear positive sputum specimens**

The incidence of detection of non tuberculosis mycobacterium (NTM) has increased worldwide not only in HIV-positive patients, but also in HIV-negative patients. The aim of this study was to assess, the effectiveness of Genotype MTBDR plus line probe assay (LPA) for rapid detection of NTM and, differentiation of Mycobacterium

tuberculosis complex (MTBC) from NTM in acid-fast bacilli (AFB) positive sputum specimens. Study was carried out among 1047 MDR suspects at IRL, New Delhi TB Centre, Delhi. The sputum specimens found AFB positive were subjected for LPA. The Sputum specimens showing absence of TUB band (i.e. absence of MTBC) on LPA strips were processed for liquid culture on MGIT960 (Becton Dickinson). The culture positive isolates showing absence of MPT64 antigen on rapid card Immuno-chromatographic lateral flow assay (SD Bioline) were considered as NTM. Study showed that the Genotype MTB DR plus line probe assay gave rapid, highly sensitive and specific results for the identification of NTM among AFB positive sputum specimens. The clinical and economic benefit of saving time can facilitate for accelerating management of TB patients.

2. Assess the diagnostic efficacy of Newer Tools for Diagnosis for Pediatric Tuberculosis

Children account for a major proportion of the global tuberculosis disease burden, especially in endemic areas. However, the accurate diagnosis of childhood tuberculosis remains a major challenge. The World Health Organization has estimated that there are 1 million cases of tuberculosis in children every year. Seventy-five percentages of these cases occur in the 22 high TB burden countries. TB in children is rarely confirmed due to the lack of effective diagnostic tools; only 10 to 15% of pediatric TB is smear positive due to paucibacillary samples and the difficulty of obtaining high-quality specimens from children. So, present study was carried out for diagnosis of Pediatric Tuberculosis by fluorescent microscopy and fluorescent based liquid culture methods; and to check the specificity and sensitivity between the induced sputum and gastric aspirate for better diagnosis of pediatric tuberculosis. The present study was carried out at New Delhi Tuberculosis Centre, New Delhi. A total of 150 clinically suspected pediatric pulmonary tuberculosis were considered for the present study. Direct smear fluorescent microscopy and MGIT rapid culture was performed in both clinical sample i.e. Induced sputum and Gastric aspirate. Our experimental results revealed that newer technique

i.e. liquid culture (MGIT 960) increased the sensitivity than smear microscopy. Our results revealed that the Induced sputum has increased sensitivity than the gastric aspirates. Specificity remains no change 99% in both cases. Selection of Induced sputum of the child patient may be a useful sample for diagnosis of pediatric tuberculosis.

3. Comparison between Molecular Line Probe Assay and Conventional Drug Susceptibility Test for Detection of Multi-Drug Resistant Tuberculosis (MDR-TB)

Newly developed molecular technique based drug susceptibility testing methods for detection of MDR-TB has advantages over conventional phenotypic methods in terms of reduced turnaround time. In the present study we attempted to compare the performance of Line Probe Assay (LPA) with that of conventional solid culture & drug susceptibility test (C&DST) on Lowenstein-Jensen (LJ) medium. A total of one thousand and twenty four (N=1024) MDR suspects under RNTCP PMDT criteria referred to New Delhi Tuberculosis Centre from February to April 2014 were enrolled in the study. Of them, 568 sputum specimens found acid-fast bacilli positive by Fluorescent Microscopy were processed for LPA (Genotype MTBDR *plus*, Hain Life science). Solid C&DST was processed on LJ medium using proportion method. LPA test results had a good concordance with conventional DST with an additional advantage of a shorter turnaround time. This test can also be useful for systematic surveillance of INH monoresistance in countries with high isoniazid resistance.

4. Resistance of Mycobacterium Tuberculosis to First and Second Line Anti-Tuberculosis among MDR suspects

MDR TB cases threaten the effectiveness of chemotherapy for both treatment and control of TB and require the use of second-line drugs that are more expensive, toxic, and less effective than first-line anti-TB drugs. The Green Light Committee has observed increasing drug resistance in MDR TB cases in resource-limited countries, leading to the emergence of extensively drug-resistant TB (XDR-TB). This study was aimed to determine the proportion and resistance pattern of

Mycobacterium tuberculosis isolates among MDR-TB suspects. A total of Eight Hundred and Seventy Seven (N=877) MDR-TB suspects under RNTCP PMDT criteria referred to New Delhi Tuberculosis Centre from April to June, 2014 were enrolled in the study and tested as per PMDT guidelines under RNTCP. The specimens found resistant to rifampicin and isoniazid (MDR-TB) or rifampicin monoresistant were processed for Liquid culture on MGIT960 and second-line drug susceptibility testing (DST) for ofloxacin and kanamycin. Though, XDR-TB was observed in less proportion of study population, this raise an alarm regarding optimal use of second line anti-TB drugs. DST services should be made available and accessible to all MDR-TB suspects in the country.

7. PARTICIPATION IN SCIENTIFIC EVENTS

A) PARTICIPATION IN NATCON 2015

The 69th National Conference on Tuberculosis and Chest Diseases was organized by Maharashtra Tuberculosis Association during 5th – 7th February, 2015 at Mumbai. Dr. K.K.Chopra, Director and Dr. M. Hanif, Bacteriologist along with Dr. Sanjeev Saini, Mr. Himanshu Vashist and Mr. Vasim Ahmad (FIND Staff) attended the conference.

On behalf of NDTBC, four posters were presented each of which illustrated the research methods, related information, outcomes etc. concisely and attractively. These were publicized well and were able to generate an ample amount of discussion.

The titles of the posters were as follows:-

- a. Performance evaluation of Genotype *MTB DR plus* assay for rapid diagnosis of non tuberculosis mycobacterium in smear positive sputum specimens.
 - b. Assess the diagnostic efficacy of newer tools for diagnosis of pediatric tuberculosis.
 - c. Comparison between molecular line probe assay and conventional drug susceptibility test for detection of multi-drug resistant tuberculosis (MDR-TB)
 - d. Resistance of mycobacterium tuberculosis to first and second line anti tuberculosis drugs among MDR suspects.
- Dr. K.K.Chopra, Director delivered Tuberculosis Association of India oration entitled 'Drug resistant TB' and its clinical implications.

- Dr.K.K.Chopra, Director and Dr. M. Hanif, Bacteriologist were panelist of the two panel discussion ‘Pediatric TB’ and ‘Challenges of Laboratory Services under RNTCP’ held during NATCON.

B) PARTICIPATION IN OTHER SCIENTIFIC EVENTS

- Facilities of diagnosis by CBNAAT were initiated in laboratory of New Delhi TB Centre from 1st April 2014 as a project “Accelerating access to quality TB diagnosis for pediatric cases in 4 major cities of India” and New Delhi TB Centre is the nodal laboratory for two districts of Delhi under the project.
- PMDT review of Delhi state was held along with South India states in Hyderabad on 11th April 2014. Dr. K.K. Chopra, Director and Dr. M. Hanif, Bacteriologist attended the review meeting along with RNTCP Delhi team. Activities of PMDT in Delhi state were presented by Dr. K.K.Chopra. Director, NDTB Centre.
- Chief Executive Officer of TB Alert Organization, Mr. Mike Mandelbaun visited New Delhi TB Centre on 17th April 2014. During his visit he had discussion with STO Delhi, Dr. Ashwani Khanna and Chairman-TB Alert Dr. J.N. Banvaliker regarding expansion of services by the NGO in Burari area.
- Central TB Division organized a one day workshop to discuss Individualized Treatment Regimen for mono or poly drug resistant TB cases on 2nd June 2014. Representatives from WHO, CTD and DR-TB Centre’s participated in the meeting. Faculty members of NDTB Centre also attended the meeting.
- First meeting of notification committee constituted by Delhi State RNTCP under the chairmanship of Dr K.K Chopra, Director was held on 9th June 2014 in New Delhi TB Centre. Terms of reference of the committee and future activities for monitoring of notification of TB cases were discussed in the meeting.
- ‘RNTCP Review of Delhi state’ was held on 13th June 2014 in the conference room of NDTBC-STDC. Dr. Chopra (Director) presented

the analysis of quarterly reports of 1st Quarter 2014 of 25 chest clinics of Delhi state.

- The meeting of Ethical Committee of NIRTD was held on 24th June, 2014 and 8th July, 2014 under the chairmanship of Dr. K.K. Chopra, Director. During the meeting, 13 thesis proposals of DNB students of respiratory diseases were discussed.
- Delhi State PMDT review meeting was held on 14th July 2014 in New Delhi TB Centre. Dr. K.S. Sachdeva, Addl. DDG (TB) reviewed the PMDT programme. Dr. K.K.Chopra, Director, STDC presented the analysis of quarterly reports received from chest clinics.
- Meeting of Delhi State Notification Committee was held on 28th July in NDTB Centre under the chairmanship of Dr. K.K. Chopra, Director. Representatives of Clinton Foundation also attended the meeting. It was decided to liaison with them through IPAQT for strengthening notification through laboratory network. Experience of in charges of chest clinics – R.K. Mission, GTB and Shastri Park chest clinics were also shared with members in order to improve notification rate.
- National level meeting of experts was conducted by CTD in NDTB Centre to discuss the Individualized Treatment Regimen (ITR) for TB cases. Findings of data collected from reference labs about resistance pattern among drug resistant cases were analyzed and their treatment outcome was assessed to formulate ITR.
- A meeting to decide the theme and pictures of TB seal for 2014 was organized by TB Association of India on 7th August 2014. Dr. K.K. Chopra, Director was member of the Committee in which the Theme ‘Environment and TB’ and pictures for seals were selected.
- RNTCP Core Committee meeting of PGI, RML Hospital was held on 12th August 2014 in Conference Room of RML Hospital. Members of core committee included representatives of various

departments of RML Hospital and State TB Department. Dr. K.K. Chopra, Director attended the meeting as STDC representative. Various activities for involvement of RML Hospital on medical college involvement pattern were discussed.

- An update on Management of MDR/XDR TB was organized on 23rd August 2014 in NITRD, New Delhi. Dr. K.K .Chopra, Director chaired a session on ‘What is new in Management of MDR/XDR TB’ during the update.
- Three days workshop on ‘DST guided treatment of drug resistant TB cases’ was organized by WHO in Mumbai from 26th to 28th August 2014. Representatives from CTD, WHO and TB experts from different institutes participated in the event. Dr. K.K. Chopra, Director attended the workshop as STDC Delhi representative. Prevalence of drug resistant pattern reported by national and state level laboratories was discussed along with treatment outcome results of such cases. Different individualized treatment schedules based on drug resistance pattern were discussed to make consensus to be recommended to TB control programme.
- Dr. Sanjay Rajpal, Chest Physician was invited as faculty by Association of Physicians of India, Delhi State Chapter for the mid-term CME in August 2014. He delivered a lecture on “Sleep Apnea-Physician Perspective”.
- A CME was organized on MDR TB in Kasturba Hospital on 3rd September 2014. Resident doctors and faculty of the hospital attended the programme. Dr. K.K. Chopra, Director, attended the programme and delivered a lecture on ‘MDR TB – its management’ which was followed by question-answer session.
- National Drug Resistance Survey was launched on 6th September 2014 by Hon’ble Health Minister of India. During the function, a stall depicting microscopy activities was put up by NDTB Centre laboratory staff, where visitors were briefed about various

microscopy methods. Faculty of NDTB Centre also participated in the launch function.

- Regional Green Light Committee mission to India visited New Delhi TB Centre on 10th September 2014. The members of the mission reviewed PMDT related activities of Intermediate Reference Laboratory of our Centre.
- Delhi State RNTCP Review meeting was held on 19th September 2014 in the Conference Room of NDTB Centre. Dr. K.K. Chopra, Director STDC presented the analysis of quarterly report of 25 chest clinics of Delhi state. Status of notification of TB patients and Nikshay entries were also discussed. D. Hanif, Microbiologist IRL presented the innovative ways to improve RBRC of slides. Various projects undertaken by NGOs in the state were reviewed by State TB Officer, Dr. Ashwani Khanna.
- Dr. Sanjay Rajpal conducted a workshop on Bronchial Asthma in Patliputra Medical College, Dhanbad on 20th September, 2014.
- Dr. Sanjay Rajpal attended 10th Prof, Avtar Singh Paintal Memorial Oration held on 24th September 2014 at V.P.Chest Institute, University of Delhi.
- National laboratory review under RNTCP was held from 24th to 26th September 2014 at Udaipur .This programme was conducted by Central TB Division and FIND Laboratory work of State and National Laboratories. The programme was reviewed and suggestions were given to expand the services at existing laboratory. There were discussions about augmenting the activities and supporting the nearby areas. Dr. K.K. Chopra (Director) and Dr. M. Hanif (Microbiologist) were participants from NDTB
- Two days workshop of National TB experts was held in Delhi from 8th to 9th October, 2014. The workshop was organized by Central TB Division and WHO India office to chalk out policy and its

implementation from active case finding and strategy formulation for New Strategic Plan to achieve 2020 targets. Dr. K.K. Chopra participated in the workshop.

- A meeting on TB Notification Committee of Delhi State RNTCP was held on 15th October, 2014 in Conference room of NDTB Centre. Steps taken to increase notification rate were discussed. DTO, NDMC Chest Clinic was invited to share his experience of notification from referral units of Medical Colleges in his area.
- Dr. K.K. Chopra, Director, NDTB Centre (STDC) attended the meeting regarding ongoing research projects in Delhi state. This meeting was held on 3rd November 2014 in State TB Office. It was decided in the meeting that care taker of homeless shelters in Delhi state would be trained about DOTS for their occupants jointly by STDC and St. Stephen's Hospital.
- Delhi State Task Force meeting was held on 8th November 2014 in conference room of NDTB Centre. Nodal officers of eight medical colleges participating in RNTCP presented their report. Dr. Bhardwaj (GMC, Tanda) was present in the meeting as North Zone Task Force Chairman. Dr. Rajendra Prasad, Chairman, National Task Force chaired the meeting and requested all faculty members of medical colleges to submit proposals for Zonal OR Committee. It was also decided to conduct state level workshop by STDC and Community medicine department of MAMC.
- Dr. Sanjay Rajpal delivered a talk on "Recent Advances in TB Diagnosis" for doctors in Gorakhpur on the invitation of General Practitioner's Association, Gorakhpur on 16th November, 2014.
- Dr. Sanjay Rajpal participated in 16th Joint National Conference of National College Chest Physician and The Indian Chest Society (NAPCON 2014) from 20th to 23rd November 2014 held in Agra, 2014.
- Dr. Sanjay Rajpal delivered a lecture on "Obstructive Sleep Apnea

- Physician’s perceptive” in a symposium organized by Indian Spinal Injuries Centre on 12th December, 2014.
- Dr. Sanjay Rajpal attended VPCI – Honour Lecture “Nanomaterials and Futuristic Medicine” at V.P.Chest Institute, University of Delhi on 16th December, 2014.
 - A meeting regarding implementation of project “SMS for Sure” was held in New Delhi TB Centre on 26th December 2014. Representatives from CTD, Delhi State Cell and Novartis Company attended the meeting. Discussion was held to finalize the working, time period and financial flow of the project.
 - Random blinded rechecking (RBRC) of selected slides from all the chest clinics started in IRL New Delhi TB Centre as a pilot project in the month of December. STLs of Chest clinics of were asked to examine the slides in presence of Microbiologist to know concordance in microscopy in the field.
 - Geo optical mapping of all the DOT Centers in Delhi state has been planned. All the DOT Centers will be mapped so as to put on website for referring a patient to the particular DOT Centre. To collect exact location of DOT Centre a meeting was held with Senior TB Supervisors of all the 25 chest clinics on 16th January 2015. Representatives from State TB Department, STDC and RNTCP Consultants coordinated the meeting. A decision was taken to retrain all the DOT Providers working in different DOT Centers in Delhi state. They are being trained in newer initiatives in MDR TB diagnosis, treatment, notification of TB cases, newer definitions in RNTCP etc. More than 200 DOT provides will be trained in eight batches.
 - Standards for TB Care in India have been developed by CTD after discussion with National TB Experts. Two days workshop for Master Trainers in “Standards for TB Care in India: was organized at NTI, Bangalore on 19th and 20th February 2015. Dr. K.K. Chopra, Director attended this training programme. The master

trainers will train RNTCP staff in their respective state.

- Dr. K.K. Chopra, Director attended an awareness programme for MDR patients which was organized in R.K. Mission TB Hospital on 23rd February 2015. Patients were given health education and their doubts regarding MDR TB treatment and prevention were cleared.
- To revise operational and technical guidelines of RNTCP, a three days workshop of national TB experts was organized in conference room of New Delhi TB Centre from 26th to 28th February 2015. Dr. K.K. Chopra, Director participated in the workshop. Representatives from Central TB Division, WHO, National TB Institutes, WHO Consultants and State TB Officer attended the workshop. After four group works, consensus was for the new guidelines and were submitted to Central TB Division for approval.
- An international clinical symposium on newer aspects of RNTCP was held on 28th February 2015 in Community Medicine department of MAMC in collaboration with State TB Cell. Faculty of NDTB Centre actively participated in the symposium.
- For planning of RNTCP sensitization of caretakers of night shelter homes in Delhi, a meeting and implementation was held with representatives of St. Stephen Hospital, Community Department on 6th March, 2015.
- Two days conference on “Sleep Disorders” was organized in Jaipur Golden Hospital, New Delhi by Sleep Forum of India on 7th and 8th March, 2015. Dr. K.K. Chopra, Director participated in the conference and chaired a session on “Economic Impact of Sleep Disorders”.
- A sensitization programme for field workers of Mothers NGO of St. Stephens Hospital was organized in New Delhi TB Centre on 11th March, 2015. Twelve workers attended the programme. They were briefed about TB, RNTCP and preventive measures for spread

of TB. This was planned for conducting sensitization of care takers of shelter homes in Delhi.

- A CME for doctors was organized in the BJRM Hospital on 12th March 2015 to celebrate World TB Day. Dr. K.K. Chopra, Director and Dr. M. Hanif, Bacteriologist delivered lectures on “Programmatic Management of MDR TB” and “Rapid Diagnostics”.
- A symposium on TB care was organized in AIIMS on 23rd March, 2015 in Microbiology Department. Dr. K.K. Chopra, Director chaired a session on ‘Update on RNTCP’ during the symposium.
- Anti TB week was celebrated from 19th to 25th March 2015 in the institution. New Delhi TB Centre organized the following programmes along with the patients and the community to educate and raise awareness about tuberculosis:

Programme Activities	Participants
TB Health Talk	All patients and their relatives who visits NDTB Centre
Painting Competition	Students of Bachhon ka Ghar and Butterflies
Slogan Competition	HV students and staff
Quiz Competition	Students and staff
Poem Competition	Students of Bachhon ka Ghar and Butterflies
Community Meeting	Hauzkhazi Community People

- A national level programme on the occasion of World TB Day was held on 24th March 2015 in National Institute of TB and Respiratory Diseases, New Delhi. Faculty of New Delhi TB Centre attended the programme.
- A brain storming symposium on challenges in TB Diagnosis and Management was held in AIIMS on 24th March, 2015 in

collaboration with Department of Biotechnology, Government of India. Dr. K.K. Chopra, Director delivered a lecture on “Drug resistant TB and its clinical implications”. He was also a panelist in panel discussion to formulate guidelines on research priorities in TB diagnosis and management.

- As part of World TB Day Celebrations a Seminar on TB Control and Prevention with special reference to Community Participation-Self Help Groups (SHGs) was held on 25th March 2015 in Delhi TB Association where more than 150 volunteers of NGOs participated. Dr. K.K. Chopra, Director briefed them about “Hazards of MDR TB”.
- Dr. K.K.Chopra, Director attended the meeting of Ethical Committee of NIRTD as its member which was held on 26th March, 2015 to discuss and review the Research Proposals.
- State TB Cell Delhi in collaboration with the International Union Against TB and Lung Diseases (The Union) organized a CME on ‘TB Diagnosis and Treatment – An Update’ on 26 March 2015 on TB care and control. Lectures were delivered on current aspects of TB Control and MDR TB followed by presentations by representatives of civil society. Faculty of the Centre actively participated in the event.
- RNTCP PMDT Review meeting of Delhi state was held on 30th March, 2015. The nodal officers of DRTB Centre and Microbiologists of the laboratories functioning under RNTCP presented their quarterly activities.
- One day sensitization programme on RNTCP was organised for the Private practitioners of old Delhi area on 31st March 2015. Faculty of NDTB Centre delivered lectures on “Rapid diagnosis of TB and Management of TB”. They were briefed about notification of TB cases and motivated to notify any TB case diagnosed or treated by them.

8. MEETINGS

- Dr. Sanjay Rajpal, Chest Physician attended the Executive Committee meeting of Delhi TB Association on 6th May, 2014.
- The meeting of Managing Committee of New Delhi TB centre was conducted in the conference room of the Centre on 23rd May 2014.
- A meeting with Medical Superintendent of LN Hospital and STO Delhi was held on 24th May, 2014, regarding an issue pertaining to the shifting of Chest Clinic of LN Hospital in NDTB Centre complex and creation of DR TB Centre in the ward of the Centre was discussed. It was decided that a proposal will be initiated from LN Chest Clinic to Management Committee of NDTB Centre.
- Dr. Sanjay Rajpal, Chest Physician, NDTB Centre was invited as an expert by Union Public Service Commission to interview candidates for the post of Senior Lecturer (TB & Resp. Diseases) in June, 2014.
- Delhi State PMDT coordination committee meeting was held on 14th July 2014 in New Delhi TB Centre. Dr. K.S. Sachdeva, Addl. DDG (TB), State TB Officer, WHO Consultants, Dr. Rupak Singla, in charges of culture and DST lab and Dr. Narender Saini, Secretary, IMA attended the meeting. The meeting was regarding involvement of private practitioners and private laboratories . It was decided that availability of facilities and location of free diagnostic centres will be shared with zonal IMA branches to make the partnership successful.
- Bi-annual meeting of Management Committee of New Delhi TB Centre was held on 21st October, 2014 in conference room of NDTB Centre. Annual report of the year 2013-14 and annual budget for the year 2014-15 were approved by the Committee. Other issues discussed included, better health scheme for staff,

temporary shifting of chest clinic of OPD block of LN Hospital to NDTB Centre.

- The Award committee meeting of TB Association of India was held on 12th December 2014 for the selection of names of awardees for oration and guest lectures and honors for NATCON 2014. Dr. K.K. Chopra, Director attended the meeting as its member.
- A meeting to divide work between IRL, NDTB Centre and IRL, AIIMS was held on 23rd February 2015. Dr. K.K. Chopra, Director and Dr. Hanif participated in the meeting. It was decided that the districts attached to AIIMS DOT plus site would be monitored by AIIMS IRL for EQA activities.
- Meeting of Central Committee of TB Association of India was held on 27th March 2015. Dr. K.K. Chopra, Director participated in the meeting as its member.

9. CLINICAL SECTION

OPD Services

The Centre caters to patients of TB and Respiratory diseases referred for diagnosis and opinion from different departments of LNJP Hospital, GB Pant Hospital and Guru Nanak Eye Centre. Many private practitioners and doctors of various hospitals of Delhi and neighboring states also refer patients for expert opinion on diagnosis and treatment. In addition, cases for medical fitness from different embassies are also referred for opinion and treatment. During the year 2014-15, the total OPD attendance at the Centre was 13,987.

TB and Diabetes Clinic

The presence of diabetes is a predisposing factor for Pulmonary TB, and their co-existence is on the rise. Hence all TB patients put on DOTS at NDTB Centre are routinely screened for DM. During the year, 64 patients were put on DOTS. Out of them 4 were found to have diabetes. They were further investigated and put on treatment for DM. Subsequently, they were closely monitored for their progress on ATT and control of blood sugar levels.

TB and HIV Clinic

As per policy laid down by CTD and NACO, an intensified TB / HIV package of services is being provided to TB patients under DOTS. All TB patients are offered voluntary HIV counseling and testing. During the year, 64 patients were put on DOTS. Out of them, 2 were found to be HIV positive. They were further evaluated and initiated on ART. Subsequently, they were closely followed-up in OPD for their treatment progress.

Tobacco Cessation Clinic

A tobacco cessation clinic was started in New Delhi TB Centre in the month of January 2013. Till the end of this year, 85 patients have registered themselves and are attending the clinic regularly. They have been briefed about the harmful effects of tobacco and repeatedly motivated to quit tobacco use. 26 of them have completely given up smoking habit and are feeling better and healthy and 41 have reduced the habit of smoking. This effort of New Delhi TB Centre is very small but we are trying our level best to help those who have really understood the harmful effect of the said products and want to get rid of it.

Clinical Section of New Delhi TB Centre organized the following teaching and training activities with the help of all the doctors and Para medical staff of the Centre:

a) Case discussion	-	72
b) Clinical Reviews	-	48
c) Lectures/Talks	-	48
d) Seminars/Journal reviews	-	48

10. EPIDEMIOLOGICAL SECTION

Staff of many organizations like National Zoological Park, Hotels, British High Commission and other embassies visit the Centre for their annual Tuberculosis screening. During the year 2014-15, 99 persons of National Zoological Park were screened and out of these 17 persons were further investigated as their X-ray chest was abnormal and were treated accordingly.

11. MYCOBACTERIAL LABORATORY

The Laboratory at New Delhi TB Centre functions as reference laboratory to perform culture and drug sensitivity for *M. tuberculosis* routinely for samples referred from different Institutions as well as from private practitioners of Delhi. Patients from all parts of northern India come here to avail the laboratory facilities because of its good reputation gained over the years. Now, the laboratory is upgraded to BSL 3 facility and is functioning well with the introduction of newer diagnostic tests like liquid culture (MGIT 960) and molecular test (Line Probe Assay).

District – wise summary of Microscopic activities carried out in the year 2014

Name of DMC	Nos. of TB suspects examined for diagnosis	Nos. of TB suspects found to be positive	Nos. of TB suspects undergoing repeat diagnostic examination	Nos. of TB suspects found to be positive on repeat diagnostic examination	Nos. of follow-up patients examined	Nos. of follow-up patients found to be positive	Total nos. of slides examined	Total nos. of negative slides examined	Total nos. of positive slides examined
BJRM	6700	746	197	28	2723	92	18799	1701	17098
BSA	7061	1021	91	10	3560	323	20751	2612	18139
Ch Desraj	5658	620	23	1	2152	83	14031	2459	11572
DDUH	10377	1178	149	28	4482	220	28861	2679	26182
GTBH	10773	1572	28	2	2908	341	26943	3747	23196
Gulabi Bagh	3477	328	72	14	1106	82	9010	850	8160
Hedgewar	3415	483	74	1	966	78	8930	1118	7812
Jhandewalan	3619	563	99	5	2046	201	11053	1467	9586
Karawal nagar	6408	1051	16	3	3692	284	19162	2568	16594
Kingsway	11991	618	108	7	2456	149	16335	1589	14746
LNH	7181	609	75	6	1230	112	16807	1334	15473
LRSI	6226	682	18	0	2890	230	17728	1706	16022
Malviya Nagar	3224	457	9	1	3186	324	12045	1452	10593
Moti Nagar	10443	932	148	34	4305	180	30208	2867	27341

Narela	7152	916	25	5	3104	218	20003	2190	17813
NDMC	18621	2006	78	8	2869	103	43648	4272	39376
Nehru Nagar	12759	1643	70	4	6858	550	39406	4285	35121
Patparganj	14086	1703	558	15	5665	352	38033	4646	33387
RK Mission	2764	349	178	29	1299	75	8236	837	7399
RTRMH	6833	816	104	5	2570	196	18413	1973	16440
Shastry Park	7617	964	176	47	3144	287	22386	2360	20026
SGMH	7315	935	63	6	2864	138	19653	2028	17625
Shahdara	4978	895	85	3	2854	230	15408	2133	13275
SPM	3962	459	47	15	1265	77	10124	1096	9028
Bijwasan	5131	495	57	6	1956	719	10503	4184	6319
Total	187771	22041	2548	283	72150	5644	496476	58153	438323

During the year, a total of 1, 87,771 TB suspects were examined for diagnosis in all 25 chest clinics of Delhi state out of which 22,041 were found positive.4,96,476 slides were examined as per data received from TB laboratory abstract. Out of these 58,153 slides were found positive. A total of 4,38,323 slides were found negative.

On-site Evaluation visit and Panel Testing

An IRL team comprising of Microbiologist, one Medical officer and one Laboratory Technician visits each chest clinic at least once a year to DTCs for on-site evaluation. During the visit, randomly selected DMCs are also covered for evaluation.

Recommendations of the annual supervisory visits to the districts by the IRL have focused on operational and technical problems of the laboratories including availability of staff, infrastructure, regular supply of consumables and training. During the visit, panel testing for STLs was conducted. DMCs reporting false positive or negative errors in RBRC were also visited by the IRL team.

List of DTCs visited by IRL Team for OSE

Sr. No.	Chest Clinic	Date of visit
1	BJRM Hospital	25.03.2014
2	Hedgewar Chest Clinic	27.03.2014
3	Guru Teg Bahadur Hospital	28.03.2014
4	RK Mission Hospital	31.03.2014
5	Karawal Nagar Chest Clinic	02.05.2014
6	Nehru Nagar Chest Clinic	08.05.2014
7	Moti Nagar Chest Clinic	15.05.2014
8	Kingsway Chest Clinic	27.05.2014
9	SPM Marg	04.06.2014
10	Patparganj Chest Clinic	20.06.2014
11	Gulabi Bagh Chest Clinic	25.06.2014
12	Ch Desraj Poly Clinic	10.07.2014
13	Shastri Park Chest Clinic	31.07.2014
14	Narela Chest Clinic	17.09.2014

15	Deen Dayal Uppadhyay Hosp.	14.11.2014
16	NDMC Poly Clinic	25.11.2014
17	Malviya Nagar Chest Clinic	27.11.2014
18	National Institute of TB and Respiratory Diseases (NITRD)	28.11.2014
19	Lok Nayak Hospital	02.12.2014
20	Shahadara Chest Clinic	05.12.2014
21	Bijwasan Chest Clinic	08.12.2014
22	Jhandewalan Chest Clinic	15.12.2014
23	Sanjay Gandhi Memorial Hosp	20.12.2014
24	Rao Tula Ram Memorial Hosp.	24.12.2014
25	Baba Sahib Ambedkar Hosp.	26.12.2014

Programmatic Management of Drug Resistant Tuberculosis (PMDT) Activities

The laboratory got certification by CTD for Line Probe Assay, solid and liquid culture and DST. Currently sputum samples are received from 08 chest clinics for diagnosis and 17 chest clinics for follow-up under PMDT activities in Delhi.

The table below gives the details of PMDT activities during the calendar year 2014. A total of 9570 diagnostic sputum specimens from MDR-TB suspects were processed. Sputum specimens found AFB smear positive were processed for LPA and specimens found AFB smear negative were processed for liquid culture. If found culture positive, then the sample is processed for LPA. A total of 3610 specimens were processed for LPA and 563 cases were detected as MDR-TB/ Rif's mono-resistance. A total of 5679 follow up sputum specimens from MDR patients were processed for culture.

**PMDT activities carried out during the year 2014
(Specimens processed on culture or DST)**

Month	Diagnostic Sputum Specimens inoculated	Follow-up Specimens inoculated	LPA DST Done	H+R Sens	H+R Res	Only H Res	Only R Res
Jan	1094	333	376	269	57	44	6
Feb	962	399	373	282	52	35	4
March	1060	474	429	324	60	39	6
April	728	474	300	245	33	20	2
May	740	518	338	246	59	29	4
June	626	469	239	159	30	43	7
July	748	506	273	207	36	28	2
August	790	500	285	204	45	34	2
September	1096	529	391	284	56	46	5
October	532	445	173	122	30	19	2
November	718	529	185	142	29	12	2
December	476	503	248	189	31	25	3
TOTAL	9570	5679	3610	2673	518	374	45

**Laboratory examinations carried out for cases referred by
Private Practitioners during the year 2014**

Month	Laboratory examinations		
	Smear examination	Culture (Solid)	Drug Susceptibility testing by solid culture
January	341	341	28
February	312	311	24
March	380	380	60
April	290	289	40

May	256	257	40
June	216	215	20
July	200	200	30
August	240	240	00
September	265	265	20
October	169	169	20
November	202	202	00
December	214	213	14
TOTAL	3085	3081	296

Table depicts month-wise laboratory examinations carried out during the year 2014. A total of 3085 smears were examined, 3081 cultures inoculated and 296 drug susceptibility testing were performed in the year.

MD/MS Thesis being conducted in collaboration at Laboratory in NDTB Centre

1. To compare Mycobacterial Growth Indicator Tube (MGIT) and Cartridge Based Nucleic Acid Amplification Test (CBNAAT) in the diagnosis of tuberculosis meningitis in children.

(MD thesis of PG student of Department of Microbiology, Maulana Azad Medical College)

Diagnosis of tuberculosis is a challenging task, especially in extra pulmonary cases. In pediatric population, the major limiting factor is difficulty in sample collection. Thus, there is a need for rapid, sensitive and specific test for diagnosis of extra pulmonary conditions like Tubercular meningitis. There is paucity on comparative data between conventional methods, Mycobacterial Growth Indicator Tube (MGIT) and Cartridge Based Nucleic Acid Amplification Test (CBNAAT) for the diagnosis of Tubercular meningitis from India. So, the present study is being carried out

to diagnose *Mycobacterium tuberculosis* from CSF samples of pediatric patients by conventional methods, MGIT and CBNAAT, to compare their results and perform the drug susceptibility testing of isolates by solid and liquid culture DST and CBNAAT. Result generated will through light on the better testing modality for early and accurate diagnosis of Tubercular meningitis in children along with drug susceptibility/ resistance pattern of the anti-tubercular drugs.

2. The occurrence of drug resistance in retreatment cases of pulmonary tuberculosis treated under RNTCP.

(MD thesis of PG student of Department of Medicine, Maulana Azad Medical College)

Tuberculosis is one of the oldest disease known to affect mankind and is a major health problem in India. RNTCP utilizes DOTS for effective treatment of these patients. Due to various systemic comorbidities and patient related factors, problem of resistance has risen. Many studies have been done in case of drug resistance and treatment failure subjects. But there is paucity of studies regarding resistance in category of retreatment cases. The present study is being carried out to find out resistance in retreatment cases of both sputum positive and negative patients and study of socioeconomic factors along with co morbidities responsible for emergence of resistance. Sputum samples will be collected and subjected to microscopy, Xpert M.TB/RIF and Liquid Culture DST (MGIT 960)

3. To compare Mycobacterial Growth Indicator Tube (MGIT) and Cartridge Based Nucleic Acid Amplification Test (CBNAAT) in the diagnosis of osteoarticular tuberculosis.

(MD thesis of PG student of Department of Microbiology, Maulana Azad Medical College)

About 20% patients with active TB have extra pulmonary cases. Of total tuberculosis (TB) cases, osteoarticular TB accounts for 1

– 5% and 10 - 18% of extra pulmonary cases. Osteoarticular TB usually presents as chronic monoarticular arthritis in joints supporting the weight of the body. The diagnosis of osteoarticular TB is often challenging and can be delayed. If diagnosed and treated at early stages, majority of patients are expected to achieve healing with normal function. No single diagnostic modalities are capable of ascertaining the diagnosis and the role of molecular method like Cartridge Based Nucleic Acid Amplification Test (CBNAAT) is still not well defined in management of osteoarticular TB. So, the present study is being carried out to diagnose Osteoarticular Tuberculosis by conventional methods, MGIT and CBNAAT and to compare their results and perform the drug susceptibility testing of isolates by Solid Culture and DST, Mycobacterial Growth Indicator Tube (MGIT) and CBNAAT.

Project: Accelerating access to quality TB diagnosis for pediatric cases

Conventional methods for the diagnosis of TB in pediatric population have low sensitivity and specificity due to difficulty in getting good quality sputum from children. If they failed to produce sputum, facilities for obtaining alternative specimen are often not available. This results in delay in diagnosis or loss of pediatric TB suspects from the public health system. With the introduction of upfront Xpert testing, this loss would be greatly reduced and early confirmation of diagnosis of TB could be established. Therefore, this project has been started with the objective to test samples from all the suspected pediatric cases by Xpert, thereby increasing the proportion of pediatric TB cases diagnosed based on bacteriological evidence.

The aim of this project work is to increase the notification of pediatric TB to RNTCP from public and private sector institutions by (i) improving the quality of diagnostic services for TB in pediatric suspects (ii) Building capacity of existing RNTCP labs for processing of pediatric specimens.

The project work was started from April 2014 and is still underway. Initially seven chest clinics of Delhi namely LNH, Pilli Kothi, Patparganj, Hedgewar, GTB, BJRM and NDMC were included for this study but from January 2015 onwards all the 25 chest clinics of Delhi were included to cover the entire pediatric population. Majority of the tertiary care hospitals are covered in this project. The number of specimens received from different health facilities are given in Table 1:

Table: 1. Samples received from various health facilities from April 2014 to March 2015

Name of Referring Health Facilities	No. of Suspects
LNH	1350
CNBC	989
KALAWATI	633
KH	310
RML	299
Aruna Asaf Ali Hospital	97
BJRM	97
Des Raj Chest Clinic	47
GTB	29
NDMC	25
Hedgewar	24
JPCH	18
Swami Dayanand Hospital	16
Hindu Rao Hospital	7
Karawal Nagar	5
RBTB	5
SGMH	3
Jhandewalan	2

Pilli Kothi	2
Safdarjung Hospital	2
St. Stephens Hospital	2
BSA	1
ESI Hospital	1
Northern Railway	1
R.K.Mission	1
S.D.Hospital	1
Total	3967

Variety of specimens were subjected to Xpert testing and the results are being communicated to the concerned officials on the same day by SMS and also by e-mail. The table below shows the different types of specimens received and tested.

Table: Type of specimen received from April 2014 to March 2015

Type of Specimen	No. of Specimen
Abscess	16
Ascitec Fluid	63
BAL	209
Bone Marrow	0
Cervical Aspirate	6
CSF	484
Cystic Fluid	1
ET secretion	6
FNAB	2
Gastric Aspirate	2755
Gastric Lavage	5
Induced Sputum	92
Lymph Node	49

Nasal Aspirate	1
Pericardial Fluid	12
Pleural Biopsy	2
Pleural Fluid	214
Pus	82
Sputum	684
Synovial Fluid	6
Tissue	3
Urine	4
Grand Total	4696

Below mentioned table indicates CBNAAT performance for the period from April 2014 to December 2014 out of 2725 tests performed, 10.1 % of the samples were found to be MTB positive and RIF sensitive and 1.4% were found to be RIF resistant.

CBNAAT Performance
Project: Accelerating access to quality TB diagnosis
for Pediatric Cases
(For the period from April 2014 to December 2014)

Total number of tests performed	2725
Total number of MTB not detected	2374 (87.4%)
Total number of MTB detected and RIF sensitive	275(10.1%)
Total number of MTB detected and RIF resistant	38(1.4%)
Number of Invalid Test	38(1.4%)
Total number of EP-TB sample processed	607
Total number of MTB detected and RIF sensitive	86(14.2%)
Total number of MTB detected and RIF resistant	12(1.9%)

12. SUPERVISORY ACTIVITIES

Faculty of the Centre is actively involved in monitoring and supervision of the TB control programme at national and state level.

State Internal Evaluation

The internal evaluation of all the chest clinics is an important activity under the RNTCP where in all aspects of the clinic records, staff, drug stores, microscopic activities, facilities and financial aspects are evaluated in detail. Internal evaluation is organized by State TB Control Department. Director of STDC or his nominee is the member of internal evaluation team for all the chest clinics of Delhi. The internal evaluation is carried out in two chest clinics of the state in every quarter. During the year 2014-15, faculty from NDTB Centre participated in evaluation of two chest clinics as per the following schedule:

Faculty	Date of Visits	Chest Clinic
Dr. Meera Dhuria	21/4/2014 to 23/4/2014	Nehru Nagar Chest Clinic
Dr. Shivani Pawar	28/4/2014 to 30/5/2014	Patparganj Chest Clinic
Dr. Meera Dhuria	20/8/2014 to 22/8/2014	Bijwasan Chest Clinic
Dr. Meera Dhuria	16/12/2014 to 18/12/2014	RTRM Chest Clinic
Dr. Shivani Pawar	24/2/2015 to 26/2/2015	Moti Nagar Chest Clinic

Intensified Supervisory Activity

As per Central TB Division, Government of India guidelines, the Intensified supervisory activity is conducted to improve performance of underperforming districts. State team visits the concerned district for conducting Intensified supervisory activity based on the following objectives:-

1. Additional administrative and technical support for the improvement of the programme in the districts.
2. Sensitization of the district administration and the community.
3. Development of time-bound activity plan, with intensified activities.

During the year 2014-15, faculty of NDTB Centre participated in Intensified Supervision of four chest clinics as per the following schedule.

Faculty	Date of Visits	Chest Clinic
Dr.Nishi Aggarwal	15/4/2014 to 17/4/2014	BJRM Chest Clinic
Dr.Nishi Aggarwal	21/5/2014 to 23/5/2014	GTB Chest Clinic
Dr. Meera Dhuria	16/7/2014 to 18/7/2014	JPC Chest Clinic
Dr. Nishi Aggarwal	16/9/2014 to 18/9/2014	LNH Hospital

The team comprised of one of the representative from STDC, STO, WHO consultant and two DTOs of good performing districts. The team visited the chest clinic, DOT Centers and DMC's. The activities observed were recorded and reports were submitted to Central TB Division.

Supervisory Visits to Chest Clinics

The monitoring and supervision activities are implemented to ensure that activities are conducted as planned, and that the data recorded and reported is accurate and valid. It provides a feedback system for remedial action to improve performance and in turn improve the programme indicators. It also serves as a tool for continuous "on the job sensitization" of the staff and to increase the involvement and commitment of the higher level authorities, both at the state and the district level.

During the year 2014-15, the following Supervisory visits were made by the doctors who gave their inputs to the improve programme performance under RNTCP:

Faculty	Date of Visits	Chest Clinic
Dr. Meera Dhuria	18/6/2014	Kingsway Camp Chest Clinic
Dr. Shivani Pawar	10/7/2014	DR Chest Clinic
Dr. Meera Dhuria	30/7/2014	NDMC Chest Clinic
Dr. Sanjay Rajpal	31/7/2014	Shastri Park Chest Clinic
Dr. Meera Dhuria	14/8/2014	DDU Chest Clinic
Dr. Sanjay Rajpal	22/8/2014	Sadar Bazar Poly Clinic
Dr. Sanjay Rajpal	22/8/2014	Jhandewalan Chest Clinic
Dr. Shivani Pawar	24/9/2014	Kingsway Camp Chest Clinic
Dr. Meera Dhuria	13/10/2014	Pili Kothi Chest Clinic

13. TRAINING AND MONITORING SECTION

The Centre has a Training and Monitoring section equipped with an auditorium, a conference room and a lecture hall and modern audio-visual facilities. New Delhi Tuberculosis Centre, as State TB Training and Demonstration Centre conducts training courses for medical and para-medical staff on various aspects of Revised National Tuberculosis Programme.

TRAINING ACTIVITIES

- Four newly recruited biomedical engineers in FIND were trained from 1st April to 5th April 2014 at New Delhi TB Centre. They were given orientation about RNTCP, TB diagnostics and therapeutics. They were exposed to actual procedures and working of laboratory, different equipments and TB diagnostic tests being done in the laboratory.
- Fourteen interns of MAMC were posted for 15 days elective posting in TB at NDTB Centre from 1st April to 15th April 2014 and 16th April to 30th April 2014. They were given orientation in clinical case management, TB diagnostics and RNTCP.
- One day hands on training for project coordinators and laboratory technicians was organized for the CBNAAT project for pediatric TB diagnosis at laboratory of New Delhi TB Centre on 7th April, 2014. Three coordinators and laboratory technicians attended the training.
- A sensitization session for faculty and resident doctors of Pediatrics Department of Lok Nayak Hospital was organized in seminar room of Pediatric Department on 9th April 2014. Dr. K.K. Chopra, Director and Dr. M. Hanif, Bacteriologist briefed them about CBNAAT project for pediatric TB diagnosis. Modalities for sample transport and reporting of results were finalized.

- A sensitization session for a batch of 30 nursing students from Jamia Hamdard College of Nursing was organized on 9th April 2014 on RNTCP.
- A batch of seven STLS were given initial training in RNTCP for five days i.e. from 20th April to 24th April, 2014.
- A 10 days Initial training in RNTCP was given to laboratory technicians working in Delhi with effect from 28th April, 2014. 14 laboratory technicians were trained.
- A ten days international training on TB Epidemiology and Scientific basis of TB Control was organized by International Union against TB and Lung Health and Central TB Division from 5th May to 16th May 2014 at National Institute of TB and Respiratory Disease. Dr. K.K Chopra, Director and Dr. Meera Dhuria, Epidemiologist attended in the training programme.
- One day state level training for Nikshay entries and patient tracking system was held in NDTB Centre on 20th May 2014. Data Entry Operators of Chest Clinics, STDC, Culture and DST labs and statistical assistants of DR TB Centres attended the training programme. The participants were given hand-on training in both systems by WHO consultants and facilitators from state and district TB centres.
- A batch of eight third year post graduate students of community medicine of Maulana Azad Medical College were posted for two days for RNTCP sensitization on 21st and 22nd May 2014. They were trained by faculty of NDTB Centre by lectures on epidemiology, diagnosis and treatment of TB, MDR TB and TB Control Strategies. Field visit to DST Centre TB laboratory was also undertaken.]
- One day RNTCP sensitization workshop was held in NDTB Centre on 4th June 2014. Ten doctors in charge of ART clinics in different hospitals of Delhi attended the workshop. Faculty of NDTB Centre

delivered lectures on epidemiology, diagnosis, treatment and monitoring of TB and MDR cases in addition to visit to DOT Centre and culture DST laboratory.

- One day workshop was organized in NDTB Centre on 15th July for drugs and logistics management for Sr. Treatment Supervisor and pharmacists of drug stores of chest clinics of Delhi state. The discrepancies in reporting of drugs and logistics in quarterly programme management reports of districts were reviewed and clarified.
- One day workshop on formulation of Individualized Treatment Regimen for mono and poly drug resistant TB was organized on 7th August 2014 in New Delhi TB Centre. Faculty of the Centre participated in the meeting.
- Four batches of one day training course were organized on 7th, 13th, 19th and 29th August 2014 for ICTC Counselors. They were trained on various aspects of TB-HIV co-infection and recording and reporting of TB-HIV coordination programme. Faculty of NDTB Centre delivered the lectures.
- One day CME was organized in VP Chest Institute auditorium on 13th August, 2014 for faculty and post graduate students of the institute. Dr. K.K. Chopra, Director delivered a talk on 'PMDT-Current Status' during the CME.
- Third batch of TB Supervisory course was started on 15th September 2014. Nineteen students from different states selected by TB Association of India had completed the course.
- Councillors and staff nurses posted at ART Centres of Delhi State were trained in two batches on 22nd and 29th September 2014. They were given lectures of TB diagnosis, treatment and control strategies as well as on TB-HIV collaborative activities and its reporting.

- A batch of 28 ANM's of Lady Reading School of Nursing were posted for one day sensitization programme in RNTCP on 20th October, 2014. Apart from visit to DOT Centre, they were given lectures on Diagnosis and Treatment under RNTCP and Role of Nursing in RNTCP.
- One day retraining of DOT Plus and TB-HIV supervisors was held in STDC on 12th November 2014. 20 supervisors working in different chest clinics of Delhi state attended the training programme. They were briefed about the recent changes in diagnosis and management of MDR TB. Attachment of chest clinics to different laboratories for rapid diagnosis of MDR TB was also explained to them.
- TB Sensitization programme was held on 14th November 2014 in Sarvodya Kanya Vidhyala, Daryaganj. Ms. Gurpreet Kaur, Public Health Nurse delivered a lecture to the students on prevention, spread and treatment facilities available for TB in the nearby areas.
- Two days training of trainers for conducting nation wide Drug Resistance survey was held in NTI, Bangalore on 17th and 18th November 2014. Dr. K.K. Chopra, Director and Dr. M. Hanif, Bacteriologist attended the training. The procedure of sample collection, sample transportation and method of drug susceptibility testing was discussed. Basis and methodology of conducting the survey was also discussed.
- Training of medical officers of Delhi government dispensaries was held in three batches i.e. on 20th, 25th, and 28th November 2014. They were trained in diagnosis, treatment and control of TB as per RNTCP programme guidelines.
- One day training of MOTC, STLS and LT of selected three TB units under the National level drug resistance survey scheduled for December, 2014. The participating staff was trained in

identification of cases to be included in the survey, sample collection and transportation of samples and formats to NTI.

- Training of medical officers of Delhi government dispensaries was held on 2nd December 2014. They were trained in diagnosis, treatment and control of TB.
- Two days training of laboratory technicians of Delhi state was planned for November and December 2014 in collaboration with DSAC (Delhi State AIDS Control Society). They were trained in conducting whole blood testing for HIV. The two days trainings were held on 3-4th December, 8-9th December, 11-12th December, 15-16th December and 18-19th December, 2014.
- Two batches of (3 days each) training of laboratory technicians in LED Fluorescent Microscopy was held in IRL, NDTB Centre from 22nd to 24th December and 29th to 31st December 2014. 12 laboratory technicians attended the training. They were briefed about basis of fluorescent microscopy and given practical training in fluorescent microscopy.
- 10 days hands on training in liquid culture and DST was held from 5th to 16th January 2015 in laboratory of New Delhi TB Centre. A batch of seven microbiologists, technical officers and laboratory technicians of AIIMS and NDTBC attended the training which was co-ordinated by FIND India office and facilitators were from NDTB Centre and B.D.Company.
- A total of 30 students of GNM 1st year from Holy Family Hospital attended sensitization programme regarding RNTCP and role of nurses under RNTCP on 27th January 2015.
- One day retraining of DOT Providers was held in STDC on 9th, 11th, 13th and 17th February 2015. Total 238 DOT providers working in different chest clinics of Delhi state attended the training programme. They were briefed about the recent changes in diagnosis and management of TB.

- BJRM Chest Clinic in collaboration with NGO TB Alert planned sensitization of chemists and local medical practitioners about TB on 11th and 13th February 2015 respectively. They were sensitized about identification and referral of chest symptomatic for diagnosis and treatment of TB. They were briefed about the free facilities available for management of TB in their area.
- Training of Sr. DOTS Plus Supervisors was held in NDTB Centre on 12th February 2015. They were trained in use of newly introduced boxes for treatment of MDR cases. They were also sensitized about early identification of side effects to second line anti-TB drugs and report preparation.
- Fourth batch of TB Supervisory course started on 2nd March 2015. Fifteen students from different states selected by TB Association of India joined the course.
- Two batches of five days EQA Training under RNTCP was organized in NDTB Centre for Microbiologists and Laboratory Technicians of AIIMS and IRL-NDTBC from 16th to 20th March, 2015 and 23rd to 27th March, 2015.
- A batch of 44 students from School of Nursing, Sharda University, Noida attended the RNTCP sensitization programme and role of nurses under RNTCP on 25th March 2015.

PHOTO GALLERY

WORLD TB DAY CELEBRATION



VISITORS AT NDTB CENTRE



VISITORS AT NDTB CENTRE



WORLD TB DAY CELEBRATION



**New Delhi Tuberculosis Centre- State TB Training & Demonstration Centre - (STDC)
Training programmes conducted from 01 April 2014 to 31 March 2015**

S. No.	Trainings	Period		Days	No. of Participants
1	Training on CBNAAT for consultants of FIND and Lab.Technicians of NDTB Centre	01.04.2014	05.04.2014	5	6
2	Workshop for staff working under CBNAAT pediatric project	07.04.2014	07.04.2014	1	7
3	Workshop of NGO Consortium meet of TB Alert India	09.04.2014	09.04.2014	1	15
4	RNTCP Sensitization Programme for Nursing Students of Diploma in General Nursing & Midwifery (Lady Reading College of Nursing)	09.04.2014	09.04.2014	1	15
5	RNTCP workshop for Interns from Maulana Azad Medical College	11.04.2014	11.04.2014	1	7
6	RNTCP Sensitization Programme for Nursing Students of Diploma in General Nursing & Midwifery (Lady Reading College of Nursing)	12.04.2014	12.04.2014	1	15
7	RNTCP Sensitization Programme for MBBS Students of 4th Semester from Maulana Azad Medical College	12.04.2014	12.04.2014	1	31
8	RNTCP Sensitization Programme for MBBS Students of 4th Semester from Maulana Azad Medical College	15.04.2014	15.04.2014	1	25
9	RNTCP workshop for Interns from Maulana Azad Medical College	21.04.2014	21.04.2014	1	7
10	Initial modular training for STLS working under RNTCP in Delhi state	21.04.2014	25.04.2014	5	16
11	Initial training of lab. Technicians under RNTCP in Delhi state	28.04.2014	08.05.2014	10	20
12	RNTCP Sensitization Programme for Nursing Students of Diploma in General Nursing & Midwifery (Lady Reading College of Nursing)	02.05.2014	02.05.2014	1	15
13	RNTCP Sensitization Programme for Nursing Students of Diploma in General Nursing & Midwifery (Lady Reading College of Nursing)	03.05.2014	03.05.2014	1	36

14	RNTCP workshop for Interns of Maulana Azad Medical College	05.05.2014	05.05.2014	1	7
15	RNTCP workshop for Interns from Maulana Azad Medical College	19.05.2014	19.05.2014	1	6
16	State Level Training of Data Entry Operators regarding Nikshay and patients tracking system	20.05.2014	20.05.2014	1	36
17	RNTCP workshop for 3rd Year community medicine residents from Maulana Azad Medical College	21.05.2014	22.05.2014	2	10
18	RNTCP workshop for Interns from Maulana Azad Medical College	02.06.2014	02.06.2014	1	7
19	RNTCP Modular Training for medical officers of ART clinics of Delhi	04.06.2014	04.06.2014	1	35
20	RNTCP Sensitization Programme for of 4th Semester from Maulana Azad Medical College	05.06.2014	05.06.2014	1	24
21	RNTCP Sensitization Programme for MBBS Students of 4th Semester from Maulana Azad Medical College	12.06.2014	12.06.2014	1	24
22	Sensitization on TB notification and Nikshay for DTOs and quarterly review meet	13.06.2014	13.06.2014	1	35
23	RNTCP workshop for Interns from Maulana Azad Medical College	23.06.2014	23.06.2014	1	6
24	RNTCP orientation programme for DNB students from Apollo Hospital, New Delhi	08.07.2014	10.07.2014	3	2
25	Workshop of Medical officers on drug logistics and PMDT review meeting of Delhi State	14.07.2014	14.07.2014	1	29
26	Workshop on drug management and logistics of Senior TB supervisors, Pharmacists and store Keepers	15.07.2014	15.07.2014	1	49
27	RNTCP orientation programme for DNB students from Apollo Hospital New Delhi	22.07.2014	24.07.2014	3	2
28	Workshop of Medical officers on Newer initiatives for notification of TB cases in Delhi State	28.07.2014	28.07.2014	1	11
29	National level workshop of Medical officers on individual treatment regimen for drug resistant TB cases	31.07.2014	31.07.2014	1	14

30	RNTCP orientation programme for DNB students from Apollo Hospital New Delhi	05.08.2014	07.08.2014	3	1
31	Workshop on individualized treatment regimen discussion for drug resistant TB cases	07.08.2014	07.08.2014	1	27
32	Modular training of ICTC/PPTCT Counsellors on TB-HIV under RNTCP programme	08.08.2014	08.08.2014	1	27
33	Modular training of ICTC/PPTCT Counsellors on TB-HIV under RNTCP programme	13.08.2014	13.08.2014	1	39
34	Workshop of Medical officers on individualized treatment regimen for mono and poly drug resistant TB cases	19.08.2014	19.08.2014	1	15
35	Modular training of ICTC counsellors on TB-HIV under RNTCP programme	20.08.2014	20.08.2014	1	30
36	RNTCP orientation programme for DNB students of Apollo Hospital New Delhi	20.08.2014	22.08.2014	3	1
37	RNTCP orientation programme for DNB students from Apollo Hospital New Delhi	26.08.2014	28.08.2014	3	1
38	Modular training of ICTC Counsellors on TB-HIV under RNTCP programme	29.08.2014	29.08.2014	1	21
39	Modular RNTCP training for Medical officers of Delhi Govt. dispensaries	02.09.2014	02.09.2014	1	14
40	RNTCP orientation programme for DNB students from Apollo Hospital New Delhi	02.09.2014	04.09.2014	3	1
41	Modular RNTCP training for Medical officers of Delhi Govt. dispensaries	04.09.2014	04.09.2014	1	16
42	Modular RNTCP training for Medical officers of Delhi Govt. dispensaries	09.09.2014	09.09.2014	1	15
43	RNTCP orientation programme for DNB students of Apollo Hospital New Delhi	09.09.2014	11.09.2014	3	2
44	Modular RNTCP training for Medical officers of Delhi Govt. dispensaries	11.09.2014	11.09.2014	1	11
45	Training programme cum review meeting workshop of Medical officers in Health information management system	16.09.2014	16.09.2014	1	26
46	Workshop cum review meeting of Medical officers along with quarterly feedback of all the chest clinics of Delhi State	19.09.2014	19.09.2014	1	44

47	Modular training of ICTC Counsellors / Nurses on TB-HIV under RNTCP programme	22.09.2014	22.09.2014	1	18
48	Modular training of ICTC Counsellors / Nurses on TB-HIV under RNTCP programme	29.09.2014	29.09.2014	1	12
49	RNTCP Sensitization Programme for Nursing Students of Diploma in General Nursing & Midwifery (Lady Reading College of Nursing)	20.10.2014	20.10.2014	1	28
50	RNTCP Sensitization Programme for Nursing Students of Diploma in General Nursing & Midwifery (Lady Reading College of Nursing)	10.11.2014	10.11.2014	1	37
51	Re-training of DOTS Plus HIV Supervisors of Delhi State.	12.11.2014	12.11.2014	1	23
52	Training programme on RNTCP for medical officers of Delhi Govt. Dispensaries	20.11.2014	20.11.2014	1	15
53	Training programme of Lab. Technicians on DRS under RNTCP	24.11.2014	24.11.2014	1	22
54	Training programme on RNTCP for medical officers of Delhi Govt. Dispensaries	25.11.2014	25.11.2014	1	18
55	Training on HIV Screening of Lab. Technicians working under RNTCP	26.11.2014	26.11.2014	1	29
56	Re-training of Lab. Technicians working under RNTCP	27.11.2014	27.11.2014	1	30
57	RNTCP training for Medical officers of Delhi government dispensary	26.11.2014	26.11.2014	1	22
58	Modular training of medical officers of Delhi Government dispensaries of Delhi State under RNTCP	02.12.2014	02.12.2014	1	18
59	Training on HIV Screening for Lab. Technicians working under RNTCP	03.12.2014	03.12.2014	1	32
60	Re-training of Lab. Technicians working under RNTCP	04.12.2014	04.12.2014	1	32
61	Training on HIV Screening for Lab. Technicians working under RNTCP	08.12.2014	08.12.2014	1	31
62	Re-training of Lab. Technicians working under RNTCP	09.12.2014	09.12.2014	1	31

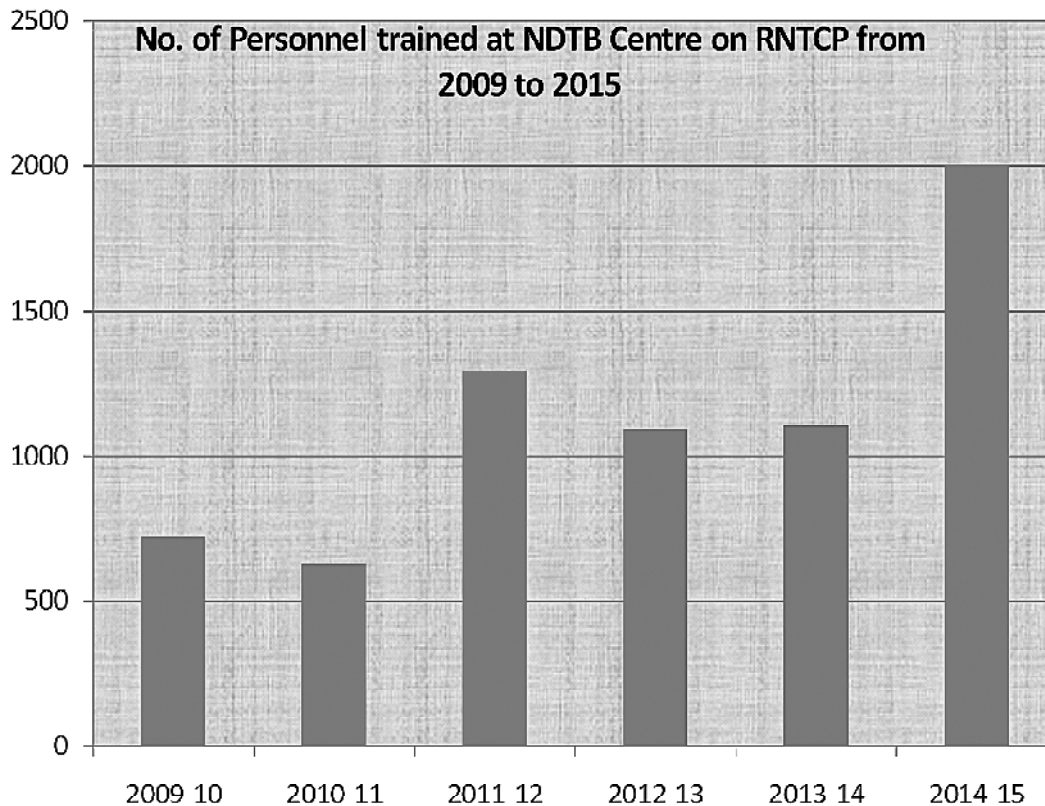
63	Training on HIV Screening of Lab. Technicians working under RNTCP	11.12.2014	11.12.2014	1	30
64	Re-training of Lab. Technicians working under RNTCP	12.12.2014	12.12.2014	1	30
65	Training on HIV Screening for Lab. Technicians working under RNTCP	15.12.2014	15.12.2014	1	30
66	Re-training of Lab. Technicians working under RNTCP	16.12.2014	16.12.2014	1	30
67	Training on HIV Screening for Lab. Technicians working under RNTCP	18.12.2014	18.12.2014	1	31
68	Re-training of Lab. Technicians working under RNTCP	19.12.2014	19.12.2014	1	31
69	Fluorescent Microscopy Training programme for Lab. Technicians under RNTCP	22.12.2014	24.12.2014	3	6
70	RNTCP Sensitization Programme for BSc 2nd year Nursing Students of (Holy Family Hospital)	23.12.2014	23.12.2014	1	54
71	Fluorescent Microscopy Training programme for Lab. Technicians under RNTCP	29.12.2014	31.12.2014	3	7
72	Training of Lab. Technicians on Fluorescent Microscopy under RNTCP	05.01.2015	07.01.2015	3	10
73	Training on Liquid Culture for technical officers and lab technicians	05.01.2015	16.01.2015	10	7
74	Re-training of TB HIV under RNTCP	20.01.2015	20.01.2015	1	29
75	Re-training of TB HIV under RNTCP	22.01.2015	22.01.2015	1	27
76	Re-training of TB HIV under RNTCP	27.01.2015	27.01.2015	1	28
77	RNTCP Sensitization programme for General Nursing & Midwifery (1st Year) Holy family students	27.01.2015	27.01.2015	1	30
78	Re-training of TB HIV under RNTCP	29.01.2015	29.01.2015	1	32
79	Workshop cum review meet of District TB Officers of Delhi state	02.02.2015	02.02.2015	1	32
80	OR Review meet of Delhi state	03.02.2015	03.02.2015	1	12
81	RNTCP Sensitization programme for GNM 1st Year Holy family students	05.02.2015	05.02.2015	1	52
82	Meeting for Area consolidation under Nikshay programme for DEOs of Delhi Chest Clinic on 5th February 2015	05.02.2015	05.02.2015	1	19

83	Re-training of DOT Providers under RNTCP	09.02.2015	09.02.2015	1	30
84	Re-training of DOT Providers under RNTCP	11.02.2015	11.02.2015	1	33
85	Training of District PMDT and TB-HIV Co-coordinator under RNTCP	12.02.2015	12.02.2015	1	25
86	Re-training of DOT Providers under RNTCP	13.02.2015	13.02.2015	1	24
87	Re-training of DOT Providers under RNTCP	17.02.2015	17.02.2015	1	23
88	Workshop of Medical officers of Central TB Division on Revised norms under RNTCP	26.02.2015	28.02.2015	3	38
89	RNTCP sensitization of field worker from St. Stephen mother NGOs	11.03.2015	11.03.2015	1	11
90	Training regarding EQA under RNTCP for microbiologist and Lab. Technicians of IRL, AIIMS and NDTB Centre	16.03.2015	20.03.2015	5	6
91	Xpert MTB/Rif training (FIND) for IRL of Delhi and neighboring states	18.03.2015	18.03.2015	1	20
92	Training regarding EQA under RNTCP for microbiologist and Lab. Technicians of IRL, AIIMS and NDTB Centre	23.03.2015	27.03.2015	5	7
93	RNTCP Sensitization programme for 2nd Year Sharda University students	25.03.2015	25.03.2015	1	44
94	RNTCP Sensitization programme for Medical officers of walled city of Old Delhi	31.03.2015	31.03.2015	1	11
	Total			151	2000

Training for various Personnel trained/ Sensitized under RNTCP during 2014-15

S. No.	Trainings for various Personnel	No. of Trainings	No. of Days	No. of Participants
1	Medical officer	44	59	637
2	STS	1	1	49
3	STLS	1	14	16
4	Laboratory Technician	24	47	485
5	Dot Provider	5	5	237
6	Nursing Students	10	10	298
7	Other Para Medical Staff	1	1	28
8	DEO	2	2	55
9	DRTB Supervisors	12	12	195
	Total	99	151	2000

99 training sessions were conducted at New Delhi TB Centre-STDC in 151 days and 2000 personnel, which included programme managers, Medical officers, ground level RNTCP staff (STS/STLS, lab technician, Data entry operator), Nurses, Para-medicals, PG-Students and interns from various government as well as private institutions were trained / sensitized on various aspects of RNTCP.



As seen in the bar chart, number of personnel trained has increased four times as compared to 2009-10 levels. The trainings were imparted to medical officers, STS, STLS, LTs, Private practitioners and students from various medical and nursing colleges. This is an achievement for NDTB as more and more people are being trained /sensitized about tuberculosis and its various aspects under RNTCP.

Analysis of Quarterly Cohort Reports

Compilation and preparation of quarterly reports (Sputum Conversion, Treatment Outcome and Programme management) of all chest clinics under RNTCP of Delhi state and their feedback is one of the major activities of STDC. The analysis of the quarterly report for each chest clinic in Delhi is carried out and the feedback, which includes necessary instructions for improvement is prepared and are discussed at the quarterly review meetings with the District TB

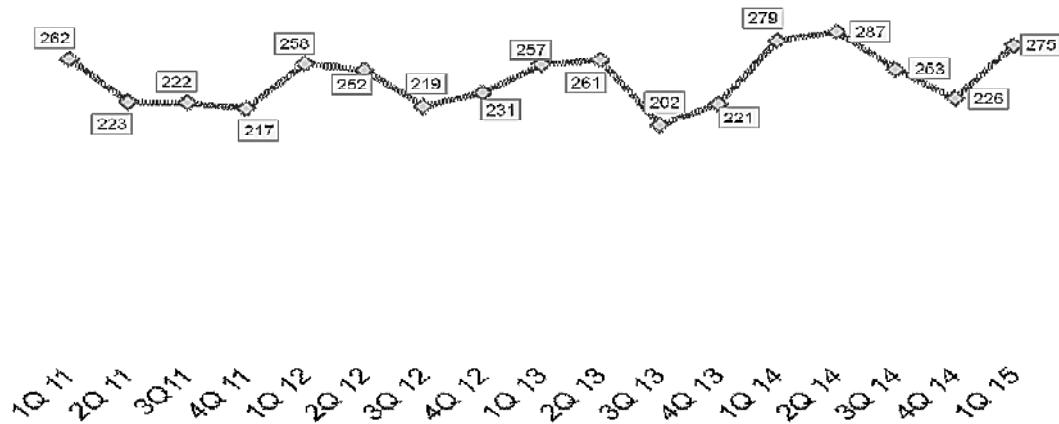
Officers. All these feedbacks and complied reports of the state are sent to the DTOs and copies of these are also submitted to State TB Control Officer and to Central TB Division, Ministry of Health & Family Welfare.

Chest Clinic wise performance of RNTCP in Delhi State: CASE DETECTION IN 2014.

S. No.	Chest clinic	Population (in lakhs) covered	No.of suspects examined	Suspects examined/ lakh population /Yr.	Suspects examined/ lac papulation /Previous Yrs.	Rate of Change in suspects examined/lac population (Compared Previous Yrs.)	No. of smear positive patients diagnosed	Suspects examined per smear positive case diagnosed
1	BJRM	6.0	6438	1073	1052	2.04	737	8.74
2	Bijwasan	6.0	5171	862	803	7.38	501	10.32
3	BSA Rohini	7.0	6942	992	611	62.23	983	7.06
4	Ch Desraj Rohini	8.0	5490	686	784	-12.45	593	9.26
5	DDU	12.0	10874	906	993	-8.71	1321	8.23
6	Gulabi Bagh	3.5	3503	1001	866	15.51	381	9.19
7	GTBH	6.0	10703	1784	1871	-4.63	1570	6.82
8	Hedgewar	4.0	3430	858	711	20.53	471	7.28
9	Jhandewalan	5.0	3488	698	592	17.89	587	5.94
10	KCC	7.5	6162	822	1102	-25.46	726	8.49
11	Karawal Nagar	7.0	5984	855	698	22.44	1081	5.54
12	LNH	4.0	7232	1808	969	86.50	694	10.42
13	LRS	7.0	6544	935	1097	-14.81	1003	6.52
14	Malviya nagar	6.0	4135	689	600	14.81	583	7.09
15	Moti Nagar	11.0	10157	923	514	79.48	1278	7.95
16	NDCM	11.0	20012	1819	1421	27.99	2222	9.01
17	Narela	6.0	7311	1219	1116	9.15	935	7.82
18	Nehru Nagar	15.0	13067	871	1604	-45.70	2063	6.33
19	Patparganj	11.0	13020	1184	1001	18.27	1693	7.69
20	R.K.Mission	3.0	2526	842	1680	-49.87	359	7.04
21	RTRM	7.0	6723	960	998	-3.74	783	8.59
22	SGM	6.0	7497	1250	786	58.99	956	7.84
23	Shahdara	5.0	5103	1021	982	3.90	930	5.49
24	JPC Hospital	7.0	7580	1083	705	53.66	1054	7.19
25	SPM	5.0	4137	827	665	24.50	534	7.75
	TOTAL	176.0	183229	1041	939	10.84	24038	7.62

A total of 176 lakh population was covered by 25 chest clinics operating in Delhi and 183229 suspects were examined . Suspects examined per lakh population were 1041 (as compared to 939/lakh population in the previous year). Of them 24038 smear +ve patients were diagnosed. Suspects examined per lakh population has increased from 939 (last year) to 1041 this year

Trends in TB Suspects Examined/ Lakh quarter-wise in Delhi State



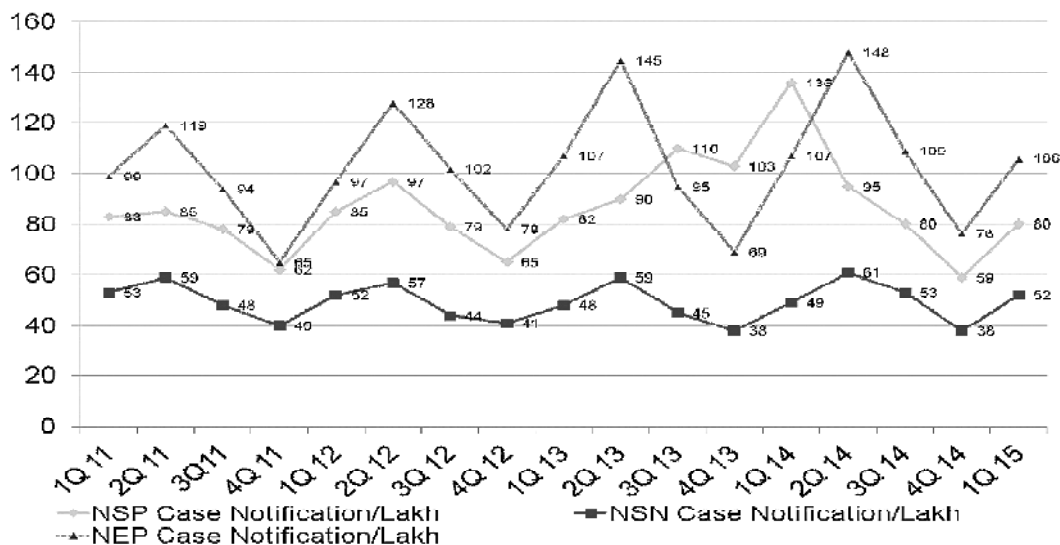
TB suspects/ lakh population (275) shows an increasing trend as compared to last two quarters. On comparing with 1st quarter 2011, it has increased substantially. It also touched to the lowest level of 217 in 4th quarter 2011. However, it has been continuously improving since 2014 onwards. The upward and downward trend can be attributed to seasonal variation and other factors

**Chest Clinic wise annual performance of RNTCP in Delhi State:
CASE NOTIFICATION IN 2014**

S. No.	Chest clinic	Annual smear positive case detection rate(%) (from PMR)	Annual smear positive case notification rate [from CFR:sm+ cases (NSP+ Rel+TAD) per population	Annual smear positive case notification rate [from CFR:sm+ cases (NSP) per population	Total patients registered for treatment	Annual total case notification rate	Annual NSP case notification rate	Annual NSN case notification rate	Annual New EP case notification rate
1	BJRM	164	127	88	1748	291	88	44	93
2	Bijwasan	111	98	72	1537	256	72	173	91
3	BSA Rohini	187	131	95	2537	362	95	267	130
4	Ch Desraj Rohini	99	57	39	1703	213	39	176	83
5	DDU	147	100	71	3384	282	71	194	105
6	Gulabi Bagh	145	76	56	720	206	56	157	75
7	GTBH	349	134	102	2033	339	102	173	126
8	Hedgewar	157	62	45	679	170	45	105	67
9	Jhandewalan	157	113	73	1370	274	73	140	83
10	KCC	129	92	68	1659	221	68	135	73
11	Karawal Nagar	206	164	117	3490	499	117	337	202
12	LNH	231	73	50	839	210	50	136	77
13	LRS	191	111	78	1933	276	78	154	98
14	Malviya nagar	130	153	107	2470	412	107	299	138
15	Moti Nagar	155	105	74	3686	335	74	250	129
16	NDMC	269	88	60	2672	243	60	175	87
17	Narela	208	129	89	1963	327	89	243	93
18	Nehru Nagar	183	123	85	5029	335	85	224	118
19	Patparganj	205	140	94	4019	365	94	234	129
20	R.K.Mission	160	91	63	639	213	63	173	57
21	RTRM	149	98	70	1506	215	70	118	69
22	SGM	212	126	82	2410	402	82	394	138
23	Shahdara	248	150	104	2086	417	104	283	147
24	JPC Hospital	201	144	101	2985	426	101	155	183
25	SPM	142	78	53	842	168	53	77	53
	TOTAL	182	112	79	53939	306	79	204	110

In all 53939 patients were registered for treatment in the year 2014-15 from 25 chest clinics of Delhi. Annual smear positive case detection and case notification rate was 182 and 112 respectively. Total notification rate (NSP) was 306 and New Smear Positive case notification was 79. Annual NSN and EP case notification rate was 204 and 110 respectively.

Trends of Case notification of Annualized-NSP,NSN and NEP/Lakh Population Quarter-wise



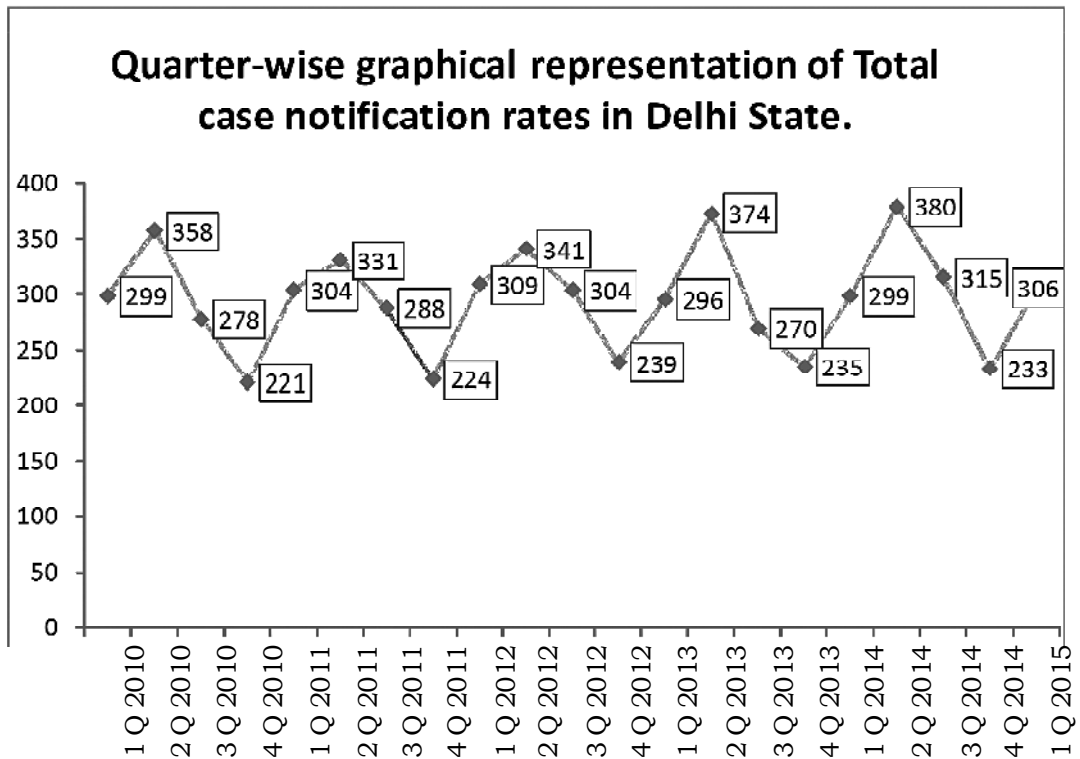
There is an increasing trend for NSP (80) NSN (52) as well as EP (106) cases specially in the last two quarters (Graph). If all the three indicators are seen from 1Q2011 onwards, they have been showing a “Rise and fall trend”. A prominent point in the graph is that all the three indicators touched their highest level in 1Q2014 /2Q2014 with NSP case notification rate of 136, NSN case notification rate per lakh of 61 and EP case notification per lakh rate of 148 respectively. This phenomena may be attributed to season trend or other factors.

Chest Clinic wise annual performance of RNTCP in Delhi State: NEW AND RELAPSE CASES IN 2014

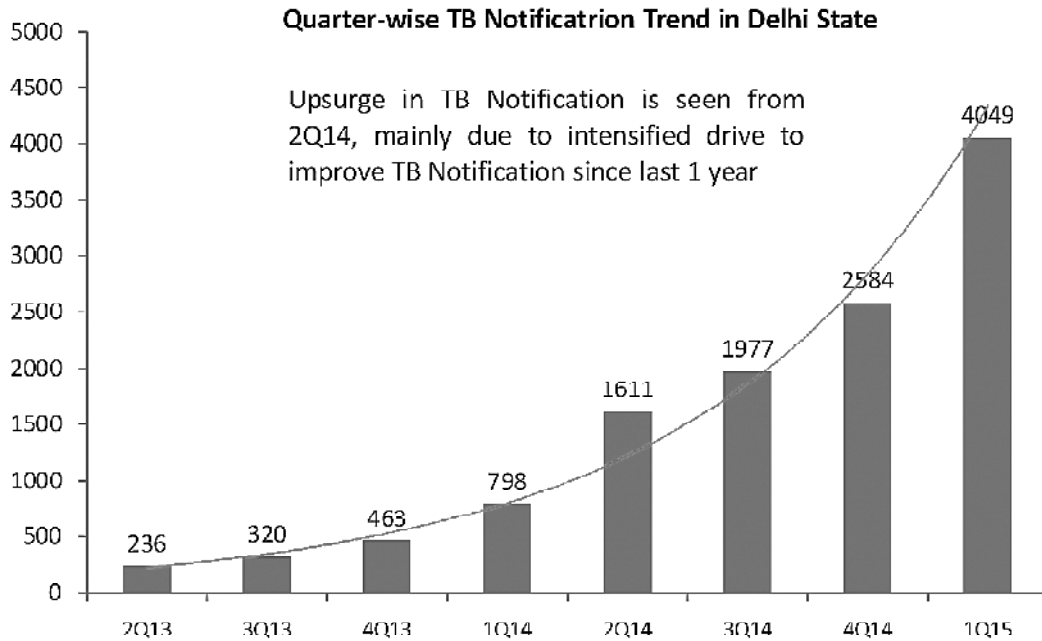
S. No.	Chest clinic	NSN % among total pulmonary cases	EP % among total cases	NSP % among total pulmonary cases	Total Pulmonary Cases	NSP	Total Cases	Relapse +TAD	Other (New+ Relapse)	Repeat Sputum examination	% Rept Spt	Failure
1	BJRM	33	32	67	789	528	1748	234	164	32	0	1
2	Bijwasan	38	36	62	691	431	1537	158	139	11	0	2
3	BSA Rohini	41	36	59	1132	664	2537	255	235	30	0	2
4	Ch Desraj Rohini	53	39	47	659	308	1703	149	231	18	0	1
5	DDU	41	37	59	1432	849	3384	355	336	43	0	5
6	Gulabi Bagh	41	37	59	333	196	720	71	52	20	1	0
7	GTBH	30	37	70	871	612	2033	193	206	10	0	5
8	Hedgewar	37	39	63	284	179	679	69	57	16	0	1
9	Jhandewalan	32	30	68	540	365	1370	200	211	11	0	3
10	KCC	33	33	67	761	507	1659	184	165	91	1	5
11	Karawal Nagar	42	40	58	1406	817	3490	330	338	10	0	5
12	LNH	41	37	59	334	198	839	92	102	17	0	3
13	LRS	33	35	67	818	548	1933	227	199	0	0	5
14	Malviya ngr	41	34	59	1088	639	2470	280	270	2	0	3
15	Moti Nagar	46	39	54	1507	819	3686	340	413	47	0	4
16	NDMC	42	36	58	1145	665	2672	302	269	9	0	2
17	Narela	40	28	60	899	535	1963	238	267	26	0	2
18	Nehru Nagar	40	35	60	2113	1272	5029	575	556	26	0	12
19	Patparganj	38	35	62	1683	1039	4019	500	413	90	1	2

20	R.K.Mission	41	27	59	319	189	639	83	65	43	2	2
21	RTRM	30	32	70	696	489	1506	197	127	27	0	3
22	SGM	55	34	45	1084	493	2410	265	231	17	0	1
23	Shahdara	41	35	59	873	519	2086	230	246	11	0	4
24	JPC Hospital	28	43	72	981	710	2985	296	419	63	1	10
25	SPM	27	32	73	359	263	842	125	89	19	0	3
	TOTAL	39	36	61	22797	13834	53939	5948	5800	689	0	86

Of the total 53,939 cases, 22,797 were pulmonary TB cases .5948 cases were relapse +TAD and 5800 were other (New +Relapse) cases. Percentage of NSP, NSN & EP cases was 61%, 39% and 36% respectively among total pulmonary cases.



The graph shows the quarter-wise performance of the total case notification rates in Delhi State. The upward and downward trend in Case notification from first Quarter, 2010 to first Quarter, 2015 may be attributed to seasonal variation.



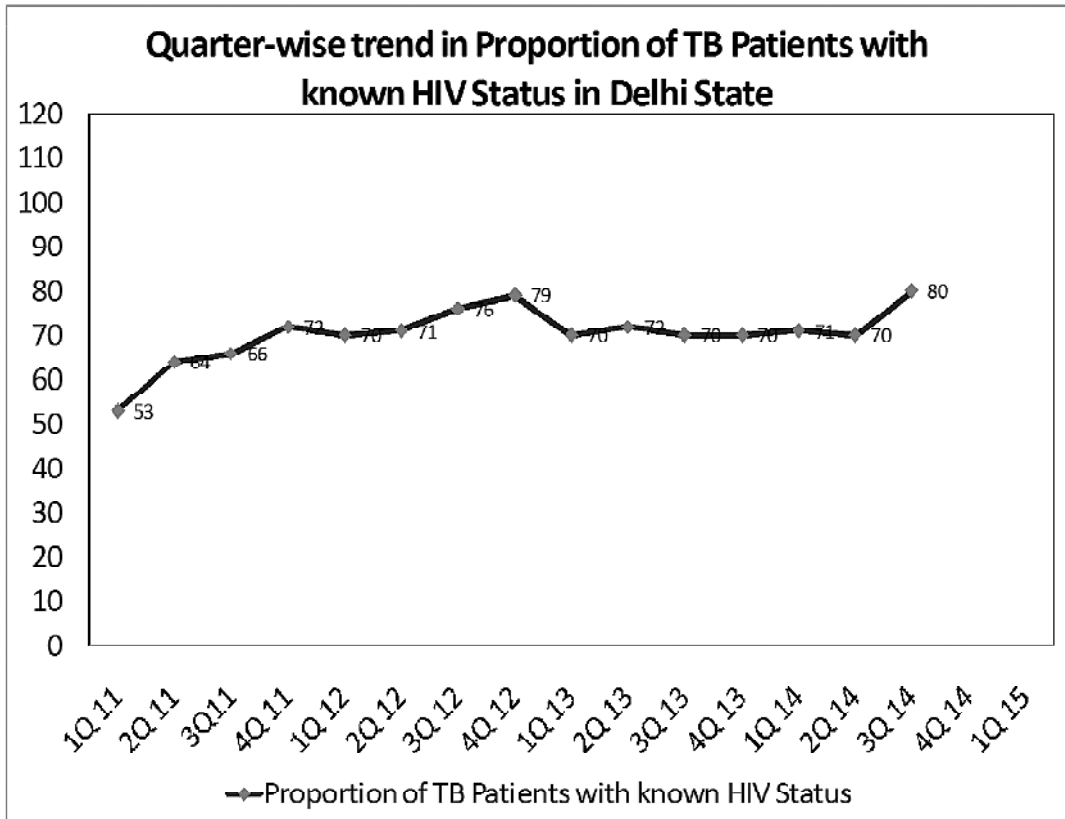
TB continues to be a major public health problem accounting for substantial morbidity and mortality in the country. Since May 2012, Tb has been declared as a notifiable disease. All healthcare providers involved in diagnosis and treatment of TB cases should notify information about these cases to the local health authorities. As seen in the graph, more and more practioners are getting involved in reporting of TB cases and this is a very encouraging trend.

Chest Clinic wise annual performance of Delhi State: Programme Management-2014

Chest clinic	Population (in lakhs) covered	Annual previously treated case notification rate	Annual previously treated smear positive case notification rate	No (%) of pediatric cases out of all New cases	3 month conversion rate of smear positive patients	3 month conversion rate of new smear positive patients	3 month conversion rate of retreatment patients	No (%) of all Smear Positive cases started RNTCP DOTS within 7 days of diagnosis	No (%) of all Smear Positive cases registered within one month of starting RNTCP DOTS treatment	No (%) of cases (all forms of TB) registered receiving DOT through a community volunteer
BJRM	6.0	66	39	186	14	93	78	90	100	24
Bijwasan	6.0	50	26	128	10	86	62	89	100	6
BSA Rohini	7.0	70	36	258	13	86	75	96	100	0
Ch Desraj Rohini	8.0	48	19	180	14	90	74	91	100	0
DDU	12.0	58	30	365	14	91	79	92	100	10
Gulabi Bagh	3.5	35	20	68	11	90	88	90	100	0
GTBH	6.0	67	32	252	15	83	67	93	100	10
Hedgewar	4.0	32	17	99	18	88	67	95	100	0
Jhandewalan	5.0	82	40	142	15	88	63	91	100	0
KCC	7.5	47	25	137	10	91	79	98	99	2
Karawal Nagar	7.0	95	47	371	13	88	75	93	100	8
LNH	4.0	49	23	107	17	89	73	97	100	2
LRS	7.0	61	32	195	13	93	73	91	100	0
Malviya ngr	6.0	92	47	270	14	89	74	59	100	0
Moti Nagar	11.0	68	31	374	13	91	80	87	100	10
NDMC	11.0	52	27	243	12	92	83	93	97	0
Narela	6.0	84	40	173	12	84	78	92	100	19

Nehru Nagar	15.0	75	38	510	13	88	70	92	100	0
Patparganj	11.0	83	45	444	14	92	78	83	100	0
R.K.Mission	3.0	49	28	53	11	93	80	100	100	5
RTRM	7.0	46	28	134	11	89	76	90	100	16
SGM	6.0	83	44	298	16	94	84	92	100	3
Shahdara	5.0	95	46	268	17	88	71	91	100	0
JPC Hospital	7.0	102	42	483	21	89	70	90	100	12
SPM	5.0	43	25	75	12	91	86	97	100	0
TOTAL	176.0	67	34	5813	14	89	75	90	100	5

For a population of 176 lakhs, Annual previously treated case notification rate was 67/lakh/year and annual previously treated smear positive case notification rate was 34. Out of these 14% were pediatric cases. Three month conversion rate of new smear Positive (NSP) and Retreatment cases were 89% and 75% respectively. Out of total number of cases, 90% patients were put on treatment within 7 days of diagnosis and 100% smear positive cases were registered within one month of starting RNTCP DOTS programme. .5% patients were receiving DOTS through community volunteers.



For TB patients on treatment where HIV status is known, if we compare the trend from 1Q2011 onwards this indicator has improved drastically. A lot can also be attributed to the inclusion of newer initiatives like TB/HIV cross referral initiative in the RNTCP programme. This indicator reflects the strength of TB-HIV cross referral as well as general awareness about the disease in the community.

14. PUBLIC HEALTH SECTION

Public Health Section works with the aim to improve health of public having personnel like Public Health Nurse, Medical Social Worker and Multi Purpose Health Worker to accomplish the said goals. They are involved in planning of various intensified programmes on tuberculosis with the specific objective to improve public health through different community based programmes.

Health talk

Different tools are used to create awareness amongst masses; one of them is health talk. Health talk is about talking to individual on different issues, focusing on certain points to make them aware that how important it is for an individual to maintain good health. Keeping this thought in mind health talk on TB on regular basis is delivered in the OPD hall. The patients are made aware about basic information on TB by using flip charts which they can see and read.

TB and Film Show (Documentary on TB)

Another method of generating awareness is use of short documentaries. On regular basis, different documentaries are played on TB for the patients and their relatives, who visits TB Centre on regular basis.

TB Supervisor Course

The new modified TB Supervisor Course was started in July 2013. During the year 2014-15, three batches with a total of 27 students from different states completed the course. Broadly the focus is on following topics:

- Tuberculosis in general
- RNTCP
- Modules used in RNTCP
- General aspects of health care

Mantoux test

Mantoux test is done at the NDTB chest clinic. Apart from being referred from the chest clinic of NDTB, the patients are also referred from various government hospitals as well as by private practitioners for Mantoux Screening.

In the period from April 2014 to March 2015, 5837 mantoux test were done at the NDTB chest clinic. Out of these, results of 5207 patients were available. Month-wise Mantoux screening undertaken is as follows:

Month	No. of Mantoux tests undertaken	Read	Reactive	Non reactive
April 2014	370	344	189	155
May	389	354	165	189
June	633	558	333	225
July	523	455	279	176
August	513	448	263	185
September	589	509	232	277
October	360	311	164	147
November	458	399	187	212
December	423	423	185	238
January 2015	446	394	209	185
February	529	472	252	220
March	604	540	328	212
Total	5837	5207	2786	2421

As shown in the table, 53.5 % (2786) patients screened were reactive to tuberculin.

Anti TB Week Celebrated from 17.3.2015 to 23.3.2015

The anti TB week celebration is the one of the major in house activity of the Centre. This year from 17th March, 2015 to 23rd March, 2015 it was celebrated to mark the occasion. Various events were conducted in the community (NGO Bachhon ka Ghar, Butterflies) including patients of DOTS Centre as per schedule given below. The winners were given prizes to boost their participating as well as moral.

Anti TB Week Celebration from 17th March 2015 to 23rd March 2015

Date & Time	Venue	Programme	Methodology	Participants	Participants
17.3.2015 9.00 AM	NDTBC OPD Hall	Inauguration of Anti TB Week Health talk	Lecture followed with group discussion and experts interaction	All patients and relatives who visits NDTB Centre	Dr.Chopra, Dr. Rajpal, Dr. Shiwani, Dr.Shanker Matta, Ms. Shadab, Ms. Vanisha, Mr. Hariom, Mr. Suresh and students
17.3.2015 2.00 PM	Hauz Quazi Community	Health talk	Lecture on TB by using flip charts	Community resident	
18.3.2015 9.00 AM	Bachon Ka Ghar Darya Ganj	Health talk	Lecture on TB by using flip charts	Bachon ka ghar inmates (25)	Ms. Vanisha and students
2.00 PM	Butterflies	Health talk	Lecture on TB by using flip charts	Butterflies inmates (25)	Ms. Shadab and students
19.3.2015 10.00 AM to 12.00 Noon	NDTB Lawns	Painting competition	Inmates of Bachoon Ka Ghar and Butter flies will visit NDTB and will draw paintings	Bachoon Ka Ghar (10) Butterflies (15)	Ms. Shadab Mr. Yadav Mr. Suresh and students
20.3.2015 10.00 AM to 11.00 AM	NDTB Hall in front of Male OPD	Poem competition	Inmates of Bachoon Ka Ghar and Butter flies will visit NDTB and will write Poem	Inmates of Bachoon Ka Ghar (15) and Butterflies (NGO) 10	Ms. Shadab, Mr. Yadav, Mr. Suresh and students

20.3.2015 11.00 AM to 12.00 Noon	NDTB Hall in front of Male OPD	Slogan Competition	Inmates of Bachoon Ka Ghar and Butterflies will visit NDTB Centre and will write slogan	Inmates of Bachoon Ka Ghar (15) and Butterflies (NGO) 10	Ms. Shadab, Mr. Yadav, Mr. Suresh and students
21.3.2015 10.00 AM	NDTB Centre Lecture Hall	Quiz Competition	Bachoon Ka Ghar inmates and Butter flies inmates	Inmates of Bachoon Ka Ghar (10) and Butterflies (NGO) 10	Ms. Shadab, (Dr. Shanker Matta / Sushil Kumar as judge), Mr. Yadav, Mr Suresh and students
23.3.2015	Valedictory function	Prize Distribution	Winner and other participants of events	Winners and other participants of events	Director and other staff.

24th March 2015 the day to change gear and spread global efforts to end TB altogether.

World Tuberculosis Day is celebrated on March 24th every year to create awareness and to urge people to be cautious and protect themselves from the lethal disease. The theme this year is “Reach the 3 million: Reach, Treat, Care Everyone.”

Every year on 24th March, the World marks World TB Day, one of the world’s top health challenges with 9 million new TB cases and the deaths of nearly 1.5 million people each year. The day is an occasion to mobilize political and social commitment to further progress towards eliminating TB as in public health burden.

This year campaign provides platforms to highlight the urgent need to fill the current funding gap. TB needs to be everyone’s concern and urgent need to therefore involve everyone in the fight against the disease.

Community Meetings & Health Talks:

31 st May 2014	A health talk was delivered on TB associated with smoking and tobacco. Emphasis was laid on the fact” how the use of tobacco and smoking aggregate the disease”.	OPD visitors	Main OPD Hall
5 th June 2014	A small group discussion was organized amongst DOT Centre patients situated at NDTBC, on how to create good and healthy environment and to protect the current one	Patients in DOTS Centre	NDTBC
1 st July 2014	Different documentaries were played for the patients and relatives who visited that day. A brief interaction session was organized to clear their doubts and problems faced as far as TB is concerned.	Staff and patients	Main OPD Hall
11 th July 2014	A community women group was addressed that day at Yamuna Pushta where general discussion took place regarding the diseases prevalent in the local community and other major health problems and they request if free check- ups can be arranged for them.	Yamuna pushta community participants	Yamuna pushta
12 th August 2014	A health talk was organized for Hauz Qazi youth and made them aware what are the current youth problems and how they can save themselves from these life threatening habits e.g. drugs, alcohol etc.	Youth of Hauz Qazi Community	Old Delhi
20 th November 2014	Nukkar Natak on TB alongwith other cultural events were the main attraction of annual day celebration to mark the occasion. A staff lunch was also organized by the institute which provides a formal platform to all employees to interact and share their joy with each other.	Students and staff of TB Centre	Main OPD hall

1 st December 2014	A Nukkar Natak which was written and enacted by our TB Supervisor students was held at Nabi Karim Community Resident following long discussion to mark the day	Community	Nabi Kasim Area
24 th March 2015	Anti TB Week Celebration and World TB day		

Training in Public Health Section

RNTCP trainings and workshops are regularly conducted at NDTB for the staff involved in RNTCP activities. This year also, various training activities were undertaken especially targeting the nursing and Para-Medical staff. A Sensitization programme was conducted for nursing students of various colleges regarding RNTCP, TB signs and symptoms, diagnosis, treatment modalities, DOTS, adoption of new techniques for MDRTB diagnosis and its treatment. Topics like infection control for health workers, roles and responsibilities of nursing personnel for care of TB patients and prevention against Tuberculosis were also included in the trainings.

Apart from trainings, another major activity undertaken round the year is sensitization of school children. Schools are regularly visited by NDTB staff to sensitize students and teachers about Tuberculosis as a disease, its signs and symptoms and its prevention. Students and teachers are also distributed pamphlets to further propagate about Tuberculosis. The session ranges from 45 minutes to 1 hour. This year 90 students of Sarvodaya Kanya vidyalaya, Bulbuli Khana Asaf Ali road, New Delhi from Class !0A, and B and class 12 D, were sensitized on 14th November and 16th December 2014 respectively.

15. LIBRARY AND INFORMATION SERVICES

The Centre maintains a library which has 659 books on various aspects related to tuberculosis and chest diseases. In addition, it has various National and International journals. The library renders its services to the students of MAMC and V.P.Chest Institute as well as the faculty of the Centre. The website of New Delhi TB Centre (www.ndtbc.com) has information about various facilities and activities undertaken by the Centre along with list of publications from the institute.

16. ADMINISTRATION

(A) Details of the staff members retired/joined during the year.

1. Dr. Meera Dhuria, who was working as Epidemiologist since 14th September, 2011 resigned from her services on 23rd December 2014.
2. Mr. S.N. Mishra, who was working as ward orderly since 15th October 1979, retired from the services of the Centre on reaching the age of superannuation on 31st January, 2015 after 35 years of service.
3. Dr. Shanker Matta has joined as Epidemiologist on 5th March, 2015.

(B) VISITORS TO NDTB CENTRE

1. Mike Mandelbaum, CEO, TB Alert visited New Delhi TB Centre on 17th April, 2014 along with office bearers of the NGO to explore the possibility of conducting field research in their work area with technical assistance from faculty of NDTB Centre.
2. Dr. Maria Paloa Lia, Programme Manager of Global Health Programme, (Eli Lilly) group visited NDTB Centre on 24th June 2014 and exchanged her experiences about TB programme in Russia and China. She also visited laboratory and clinic of NDTB Centre.
3. Thomas Shinnick, from CDC, Atlanta (USA) AND Soren Thybo from Denmark visited New Delhi TB Centre on 15th Sept. 2014. They interacted with faculty of New Delhi TB Centre regarding diagnosis management and case holding of MDR Cases in Delhi State. They also visited laboratory of the Centre.

(C) GRANTS

- i. During the year 2014-15, the Government of India, Ministry of Health & Family Welfare released the annual recurring

grant-in-aid (Salaries) of Rs. 267.5 Lacs and grant-in-aid (General) of Rs. 27.60 Lacs.

- ii. Rs. 10,000/- was provided by Tuberculosis Association of India as annual grant.

(D) DONATIONS

Donations received (through TAI) for medicines

(Anar Singh Chanchal Singh

Memorial Fund

Rs. 10,195/-

Smt. Ram Piyari Dutt Memorial Fund Rs. 3,664/- Rs.13,859/-

Donation, Interest on FDR and saving Bank Account Rs.23, 243/-

Donation from Shri Ajay Rs. 1,000/-

Total

Rs. 38,102/-

(E) RIGHT TO INFORMATION ACT 2005

During 2014-15, 6 applications have been received under RTI Act, 2005. The table gives the details of applications received and disposed.

Table: Details of yearly Receipts & Disposal of RTI applications for 2014-15

S. No.	Month & Year	RTI Applications			Appeal			Amount of Fee Paid
		No. of RTI applications received	No. of RTI applications disposal	In Process	No. of Appeals received	No. of Appeals disposal	In Process	
1	May, 2014	1	1	NIL	NIL	NIL	NIL	NIL
2	June, 2014	1	1	NIL	NIL	NIL	NIL	NIL
3	July, 2014	1	1	NIL	NIL	NIL	NIL	Rs.10/-
4	Nov, 2014	1	1	NIL	NIL	NIL	NIL	Rs.10/-
5	March,2015	2	2	NIL	NIL	NIL	NIL	NIL
Total	2014-2015	6	6	NIL	NIL	NIL	NIL	Rs.20/-

17. SUMMARY OF ACTIVITIES OF NEW DELHI TB CENTRE

The details of annual statistics are as follows:

Outpatient Attendance

New outpatients attendance	7843
Revisits	6144
Total outpatients attendance	13987

DOT Centre Attendance

New Patient put on DOTS at NDTB DOT Centre	64
Total Patients (2014-15) put on DOTS at NDTB DOT Centre	600

Special Clinics Attendance

Special clinics (TB and Diabetes, HIV and TB, COAD and Tobacco Cessation Clinic- Total New+old cases)	277
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Laboratory Examinations

Total laboratory examinations	34415
Total Smear Examination	18334
Culture examination	
(a) Solid Culture	6488
(b) Liquid Culture	5664
Drug susceptibility test	
(a) by solid culture method	296
(b) by Liquid Culture Method	23
(c) by LPA	3610

Tuberculin skin tests

Total Tuberculin skin tests done	5837
Tests read	5207
Reactors (>10mm)	2786
Non-reactors (<10mm)	2421

Radiological Examinations

Radiological Examinations	980
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Trainings/IRL Visits/Publications

Personnel trained	2000
Supervision and Monitoring /Internal Evaluation of Chest Clinics	18
IRL Visits to chest clinics for EQA	25
Presentations of papers in conference	04
Research and Publications	03

Independent Auditor's Report

To the Members of

New Delhi Tuberculosis Center,

We have audited the accompanying financial statements of **New Delhi Tuberculosis Center** which comprise the Balance Sheet as at March 31, 2015, the Statement of Income and Expenditure for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation of these financial statements that give a true and fair view of the financial position and financial performance of the Centre in accordance with the Accounting Standards, to the extent applicable, issued by the Institute of Chartered Accountants of India. This responsibility includes the design, implementation and maintenance of internal control relevant to the preparation and presentations of the financial statements that gives a true and fair view and are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with the Standards on Auditing issued by the Institute of Chartered Accountants of India. Those Standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial

statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate, in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of the accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion and to the best of our information and according to the explanations given to us, subject to Note No-5 of Notes to Accounts for prepaid amount shown as expenditure for the year, the financial statements read together with other accounting policies and Notes given in Schedule 18 give the information required by the Act in the manner so required and give a true and fair view in conformity with the accounting principles generally accepted in India:

- a) in the case of the Balance Sheet, of the state of affairs of the Centre as at March 31, 2015 and
- b) in the case of the Statement of Income and Expenditure, of the Surplus for the year ended on that date;

Report on Other Legal and Regulatory Requirements

- a) We have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purpose of our audit;
- b) In our opinion, proper books of account as required by law have been kept by the Centre so far as appears from our examination of those books;

- c) The Balance Sheet , Statement of Income and Expenditure dealt with by this Report are in agreement with the books of account;
- d) In our opinion, the Balance Sheet, Statement of Income and Expenditure comply with the Accounting Standards, to the extant applicable, issued by the Institute of Chartered Accountants of India.

For Thakur, Vaidyanath Aiyar & Co.
Chartered Accountants
FRN: 000038N

(Anil K. Thakur)
Partner
M. No. : 088722

Place: New Delhi
Date : 12 Oct 2015

NEW DELHI TUBERCULOSIS CENTRE
BALANCE SHEET AS AT 31ST MARCH, 2015

	Schedule	As at 31.03.2015	As at 31.03.2014
		(Rs.)	(Rs.)
SOURCES OF FUNDS:			
Assets Fund	1	4,666,162	4,369,749
Earmarked Funds	2	1,395,348	1,433,150
Current Liabilities and Provisions	3	5,307,193	4,344,949
Accumulated Deficit / Surplus		(30,735)	861,281
Total		11,337,968	11,009,129
APPLICATION OF FUNDS:			
Fixed Assets	4	4,666,162	4,369,749
Current Assets, Loans & Advances	5	6,557,349	6,575,820
TDS recoverable		114,457	63,560
Total		11,337,968	11,009,129
Accounting Policies and Notes to the accounts	17		

Schedule Nos.1 to 17 form an integral part of the Accounts

As per our report of even date attached
For Thakur Vaidyanath Aiyer & Co.
Chartered Accountants

Accountant
(S.K. Saini)

(Anil K. Thakur)
Partner
M. No. 088722

Director
(Dr.K.K.Chopra)

Chairman
(Dr. L.S. Chauhan)

Place : New Delhi
Date : 12.10.2015

NEW DELHI TUBERCULOSIS CENTRE
STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR
ENDED 31ST MARCH 2015

		Schedule	For the year 2014-15	For the year 2013-14
			(Rs.)	(Rs.)
<u>INCOME</u>				
Recurring Grant from Govt.of India :				
Grant-in-aid Salaries			26,715,000	29,400,000
Grant-in-aid General			2,760,000	2,600,000
Maintenance Grants from TAI			10,000	10,000
Fees from Patients	6		474,275	762,010
Misc. Receipts:				
- Interest income			226,869	120,203
- Other receipts			1,020	770
Total			30,187,164	32,892,983
<u>EXPENDITURE</u>				
Salary & Other Staff expenditure	7		27,596,074	27,262,436
Administrative Expenses	8		2,282,136	2,602,177
Expenses on X-Ray Films, Drugs & Medicines and Lab. Consumable	9		269,904	311,161
Total			30,148,114	30,175,774
Surplus for the year			39,050	2,717,209
Less / (Add) : Balance as per last account			861,281	(1,855,928)
			900,331	861,281
Transferred to Assets Fund			931,066	-
Transferred to Balance Sheet			(30,735)	861,281
Accounting Policies and Notes to the Accounts	17			

Schedule Nos.1 to 17 form an integral part of the Accounts

As per our report of even date attached
For Thakur Vaidyanath Aiyer & Co.
Chartered Accountants

Accountant
(S.K. Saini)

(Anil K. Thakur)
Partner
M. No. 088722

Director
(Dr.K.K.Chopra)

Chairman
(Dr. L.S. Chauhan)

Place : New Delhi
Date : 12.10.2015

**NEW DELHI TUBERCULOSIS CENTRE
RECEIPTS & PAYMENTS ACCOUNT FOR THE YEAR
ENDED MARCH 31, 2015**

		Schedule For the Year 2014-15	For the Year 2013-14
RECEIPTS		Rs.	
Opening Cash & Bank Balances	5	6,464,426	3,024,120
Grants :			
Recurring Grant-in Aid from Govt. of India			
- Grant-in-aid Salaries		26,715,000	29,400,000
- Grant-in-aid General		2,760,000	2,600,000
Maintenance Grants from TAI		10,000	10,000
Project-SMS for sure		2,000,000	-
Fee from Patients	6	474,175	761,710
Receipts from TAI	10	7,637,716	5,482,303
Other Receipts	11	296,335	214,241
Total		46,357,652	41,492,374
PAYMENTS			
Staff Expenditure	12	28,338,694	26,982,904
Administrative expenses	13	3,557,150	2,115,338
X-Ray films, Drugs and Med. & Lab. Consumables	14	238,903	305,041
Payments from TAI Fund	15	7,637,716	5,482,303
Other Payments	16	165,144	142,362
Closing Cash & Bank Balances	5	6,420,045	6,464,426
Total		46,357,652	41,492,374

Policies and Notes to the Accounts **17**

Schedule Nos.1 to 17 form an integral part of the Accounts

As per our report of even date attached
For Thakur Vaidyanath Aiyer & Co.
Chartered Accountants

Accountant
(S.K. Saini)

(Anil K. Thakur)
Partner
M. No. 088722

Director
(Dr.K.K.Chopra)

Chairman
(Dr. L.S. Chauhan)

Place : New Delhi
Date : 12.10.2015

NEW DELHI TUBERCULOSIS CENTRE

Schedule- 1

ASSETS FUND

	As at 31.03.15	As at 31.03.14
	(Rs.)	(Rs.)
Balance as Per last A/c	4,369,749	5,080,890
Add : Additions during the year for Cost of Assets Acquired (refer Schedule-4)	- 973,366	- 43,763
	5,343,115	5,124,653
Less:		
Disposals during the year	-	-
Depreciation for the year (refer Schedule-4)	676,953	754,904
Total	4,666,162	4,369,749

NEW DELHI TUBERCULOSIS CENTRE

Unutilised Balance as on 01.04.14 (Rs.)	Received / Transferred during the year (Rs.)	Interest (Rs.)	Total (Rs.)	Utilised during the year (Rs.)	Unutilised Balance as on 31.03.15 (Rs.)
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Schedule - 2

EARMARKED FUND

General Donations	292,128	1,000	28,815	321,943	42,300	279,643
Auditorium fund	154,100	-	-	154,100	-	154,100
For Poor Patients	56,566	-	-	56,566	-	56,566
For Medicines	352,595	13,859	-	366,454	39,845	326,609
Staff Welfare Fund	79,161	-	3,169	82,330	2,500	79,830
Research Fund	498,600	-	-	498,600	-	498,600
Total	1,433,150	14,859	31,984	1,479,993	84,645	1,395,348

Note : Interest on general donation includes TDS for Rs. 5,572 deducted by Bank to be recovered.

NEW DELHI TUBERCULOSIS CENTRE

	As at 31.03.15	As at 31.03.14
	(Rs.)	(Rs.)
<u>Schedule- 3</u>		
<u>Current Liabilities & Provisions</u>		
Advance Fee & Lab Charges (refer Schedule-6)	10,710	10,810
Salary & Allowances	2,123,117	2,221,891
Bonus	93,094	93,940
Other Payable	116,345	483,952
Wages to temp. staff	22,746	22,945
Sundry Creditors	155,916	111,213
Provision for Contribution to Gratuity Fund	695,000	1,338,000
Security Deposit	49,199	49,199
Earnest Money	10,000	12,999
Payable to PWD for Electrical Installetion	31,066	-
Unspent Project Fund-SMS for sure	2,000,000	-
	<hr/>	<hr/>
Total	5,307,193	4,344,949
	<hr/>	<hr/>

NEW DELHI TUBERCULOSIS CENTRE

Schedule - 4

Fixed Assets

	WDV	Additions	Disposals	Balance	Depreciation	Net
	as on 01.04.14	during the year		as on 31.03.15	for the year	balance on 31.03.15
	(Rs.)	(Rs.)	(Rs.)	(Rs.)	(Rs.)	(Rs.)
Building	303,662	-	-	303,662	30,366	273,296
Electrical Installations and Sanitary Fittings	66,723	931,066	-	997,789	53,225	944,564
Furniture & Fittings	790,072	-	-	790,072	79,007	711,065
Lab. Equipments	2,067,365	-	-	2,067,365	310,105	1,757,260
X-ray Equipments	774,234	-	-	774,234	116,135	658,099
Other Equipments	25,948	-	-	25,948	3,892	22,056
Computer	44,260	42,300	-	86,560	39,246	47,314
Books	786	-	-	786	472	314
Vehicle	296,699	-	-	296,699	44,505	252,194
Total	4,369,749	973,366	-	5,343,115	676,953	4,666,162

NEW DELHI TUBERCULOSIS CENTRE

		As at 31.03.15		As at 31.03.14
		<u>(Rs.)</u>		<u>(Rs.)</u>
<u>Schedule- 5</u>				
<u>Current Assets & Loans and Advances</u>				
Stocks and Stores at cost :				
(as valued and certified by the Management)				
-X-Ray films and chemicals	16,091		15,075	
-Laboratory stains, chemicals	79,813	95,904	59,919	74,994
glassware				
Festival Advance	<u> </u>	41,400	<u> </u>	36,400
<u>Cash and Bank Balances:</u>				
Cash in hand		2,410		4,452
(as certified by the Management)				
In Current A/c with BOI	5,041,100		5,751,992	
In Saving Bank				
- with BOI (Earmarked donation fund)	1,296,705		629,113	
- with BOI (Staff Welfare Fund)	79,830	6,417,635	78,869	6,459,974
	<u> </u>		<u> </u>	
Total		<u>6,557,349</u>		<u>6,575,820</u>

NEW DELHI TUBERCULOSIS CENTRE

	Advance Fee as on 01.04.14	Fee Received During the year	Add: Advance fee adjusted During the year	Fee for the year 2014-15	Advance as on 31.03.2015
	<u>(Rs.)</u>	<u>(Rs.)</u>	<u>(Rs.)</u>	<u>(Rs.)</u>	<u>(Rs.)</u>
<u>Schedule-6</u>					
<u>Advance Fees for patients</u>					
Laboratory charges	10,810	468,400	100	468,500	10,710
X-ray charges	-	5,775	-	5,775	
Total	<u>10,810</u>	<u>474,175</u>	<u>100</u>	<u>474,275</u>	<u>10,710</u>

NEW DELHI TUBERCULOSIS CENTRE

	For the year 2014-15	For the year 2013-14
	(Rs.)	(Rs.)
<u>Schedule- 7</u>		
<u>Salary & Other Staff Expenditure :</u>		
Salaries	9,742,691	9,504,918
Dearness Allowance	9,422,355	8,170,853
House Rent Allowance	2,685,035	2,664,232
Transport Allowance	1,628,041	1,576,349
Other Allowances	649,643	1,784,414
Children's Education Allowances	364,630	313,431
Contribution to Provident Fund	1,874,728	1,725,504
Contribution to Gratuity Fund	695,000	1,338,000
Bonus	93,094	93,940
Travel Concession	440,857	90,795
Total	27,596,074	27,262,436

NEW DELHI TUBERCULOSIS CENTRE

	For the year 2014-15	For the year 2013-14
	<u>(Rs.)</u>	<u>(Rs.)</u>
<u>Schedule- 8</u>		
<u>Administrative Expenses :</u>		
Wages to Contractual staff	630,785	552,365
Wages to Temporary staff	270,483	245,010
Security Charges	492,786	441,084
Staff Uniform	17,536	10,353
Medical Aid to staff	221,723	233,753
Travelling Expenses & Conveyance	47,571	12,916
Repairs to Furniture and equipment	58,346	53,692
Repairs to X-ray equipments	32,517	33,897
Repairs to Laboratory equipment	16,240	48,223
Telephone Expenses	124,588	119,433
Printing & Stationery	87,607	80,425
Postage	3,340	4,027
Laundry Charges	3,821	9,121
Books & Journals	530	2,750
Maintenance of car	26,711	51,505
Audit Fee	23940	22472
Miscellaneous expenses	88,357	58,519
Advertisement	18,340	12,236
Building maintenance expenses -civil	16,223	610,396
Annual day expenses	21,492	-
Legal expense	79,200	-
	<hr/>	<hr/>
Total	2,282,136	2,602,177
	<hr/>	<hr/>

NEW DELHI TUBERCULOSIS CENTRE

		For the year 2014-15	For the year 2013-14
		<u>(Rs.)</u>	<u>(Rs.)</u>
<u>Schedule- 9</u>			
<u>X-Ray Films ,Drugs and Medicines & Lab. Consumable</u>			
Drugs and Medicines			
Balance as on 1.4.2014	-		
Add : Purchased during the year	35,233		
	<hr/>		
Less : Closing Stock	-	35,233	16,193
	<hr/>		
X-Ray Films and Chemicals			
Balance as on 1.4.2014	15,075		
Add : Purchased during the year	57,573		
	<hr/>		
	72,648		
Less : Closing Stock	16,091	56,557	55,309
	<hr/>		
Lab. Stains, Chemicals & Glassware			
Balance as on 1.4.2014	59,919		
Add : Purchased during the year	198,008		
	<hr/>		
	257,927		
Less : Closing Stock	79,813	178,114	239,659
	<hr/>		
Materials Consumed	Total	<hr/> 269,904 <hr/>	<hr/> 311,161 <hr/>

NEW DELHI TUBERCULOSIS CENTRE

	For the year 2014-15	For the year 2013-14
	(Rs.)	(Rs.)
<u>Schedule- 10</u>		
<u>Receipts from TAI</u>		
For PF Advances	6,232,000	1,214,000
For Gratuity Payments	529,500	676,598
For PF Payments	876,216	3,591,705
Total	7,637,716	5,482,303
<u>Schedule - 11</u>		
<u>Other Receipts</u>		
Recovery of Festival Advance	62,500	62,650
Donations for Medicines	13,859	13,990
Staff Welfare Fund	3,169	3,241
Stipend of Health Visitor students	-	2,250
Interest on FFD A/c	181,544	96,053
Interest on Saving A/c (Earmarked Fund)	23,243	21,788
General Donation	1,000	500
Miscellaneous Receipts	1,020	770
Earnest money	10,000	12,999
Total	296,335	214,241

NEW DELHI TUBERCULOSIS CENTRE

	For the year 2014-15	For the year 2013-14
	(Rs.)	(Rs.)
<u>Schedule- 12</u>		
<u>Staff Expenditure</u>		
Salaries	9,734,289	9,503,144
Dearness Allowance	9,510,445	7,812,603
House Rent Allowance	2,682,890	2,662,189
Transport Allowance	1,643,269	1,546,394
Other Allowances	647,497	1,766,678
Children's Education allowance	364,630	313,431
Contribution to Provident Fund	1,882,877	1,690,398
Contribution to Gratuity Fund	1,338,000	1,497,000
Bonus	93,940	100,272
Travel Concession	440,857	90,795
Total	28,338,694	26,982,904

NEW DELHI TUBERCULOSIS CENTRE

<u>Schedule- 13</u>	<u>For the year 2014-15</u>	<u>For the year 2013-14</u>
	(Rs.)	(Rs.)
<u>Administrative Expenses</u>		
Wages to Contractual staff	637,321	528,846
Wages to Temporary staff	270,682	239,381
Security Charges	489,468	436,068
Staff Uniform	17,536	10,353
Medical Aid to staff	221,723	233,753
Travelling Expenses & Conveyance	47,571	12,916
Repairs to Furniture and equipment	58,346	53,692
Repairs to X- Ray equipment	32,517	33,897
Repairs to Laboratory equipment	15,223	50,123
Telephone Expenses	123,000	118,791
Printing & Stationery	91,307	76,725
Postage	3,340	4,027
Laundry Charges	4,969	7,973
Books & Journals	530	2,750
Maintenance of car	28,082	51,071
Audit Fee	22,472	22,472
Miscellaneous expenses	88,357	58,519
Advertisement	18,340	12,236
Building maintenance -civil	464,874	161,745
Building maintenance -Electrical	900,000	-
Annual day expenses	21,492	-
Total	<u>3,557,150</u>	<u>2,115,338</u>

NEW DELHI TUBERCULOSIS CENTRE

	For the year 2014-15	For the year 2013-14
	(Rs.)	(Rs.)
<u>Schedule- 14</u>		
<u>X-Ray Films, Drugs and Medicines & Lab. Consumable</u>		
X-Ray Films and Chemicals	44,476	67,786
Drugs and Medicines	35,233	16,193
Laboratory Stains and Chemicals	159,194	221,062
Total	238,903	305,041
<u>Schedule- 15</u>		
<u>Payments from TAI Fund</u>		
PF Advances	6,232,000	1,214,000
Gratuity Payments	529,500	676,598
PF Payments	876,216	3,591,705
Total	7,637,716	5,482,303
<u>Schedule- 16</u>		
<u>Other Payments</u>		
Stipend to H.V. Students	-	2,250
Festival advance	67,500	59,500
Earnest money	12,999	-
General donation	42,300	43,763
Staff Welfare Fund	2,500	5,670
Donation fo medicines	39,845	31,179
Total	165,144	142,362

NEW DELHI TUBERCULOSIS CENTRE
Annexure 1 (for the year ended 31st March 2015)

	Grant-in-aid Salaries	Grant-in-aid General
	(Rs.)	(Rs.)
INCOME		
Opening Deficit (01.04.14)	794,151	67,130
Grant-in-aid from Govt.of India	26,715,000	2,760,000
Maintenance Grants from TAI		10,000
Fees from Patients	-	474,275
Interest income	-	226,869
Other receipts	-	1,020
Total	27,509,151	3,539,294
EXPENDITURE		
Salary & Other Staff expenditure	27,596,074	-
Administrative Expenses		2,282,136
Expenses on X-Ray Films, Drugs & Medicines and Lab. Consumable		269,904
Expenditure on Major Renovation of the Assets	-	931,066
Total	27,596,074	3,483,106
Surplus/(Deficit)	(86,923)	56,188
Total (Deficit) as on 31.03.3015		(30,735)

NEW DELHI TUBERCULOSIS CENTRE

Schedule - 17

Significant Accounting Policies and Notes to Accounts

A. Significant Accounting Policies :

1. Accounting Convention :

The Financial Statements have been prepared on accrual basis (except as specifically stated) and under the historical cost convention, and in accordance with the generally accepted accounting principles in India.

2. Use of Estimates:

The preparation of the Financial Statements in conformity with GAAP in India requires management to make estimates and assumptions, wherever necessary, that affect the reported amount of assets and liabilities and contingent liabilities as at the date of financial statements and the amount of revenue and expenses during the year. Actual results could differ from those estimates. Any revision to such estimates is recognized in the year in which the results are known / materialized.

3. Revenue Recognition :

Income & Expenditures have been accounted for on accrual basis except for leave encashment.

4. Fixed Assets & Depreciation

- a) Fixed Assets are stated at cost, Assets received as donation from various organisations are stated at estimated market value on the date of donation.

- b) Centre has started charging Depreciation from the Financial Year 2011-12 on its Fixed Assets as per rate prescribed under Income Tax Act, 1961. Further, Depreciation has been debited to the Assets Fund created at the time of purchases of Assets.
- c) Purchase of capital items less than Rupees five thousand are not capitalized.

5. Inventories :

Laboratory stains, chemicals and glassware and x-ray films & chemicals are valued at purchase price following FIFO method (Refer Note No. 3).

6. Gratuity :

Liability for future payments of Gratuity has been provided for as per the rules of Tuberculosis Association of India (TAI) and said Gratuity Fund is also maintained by TAI.

7. Provident Fund :

As per rules of Tuberculosis Association of India (TAI), accounts relating to Provident Fund of the staff of the Centre have been maintained by the Tuberculosis Association of India (TAI).

8. Interest Incomes :

Interests earned on the Investments of Earmarked Funds have been credited directly to such Fund instead of Income & expenditure Account.

B. Notes to Accounts

1. Electricity and water expenses have not been charged in the Income & Expenditure Account as the electricity and water supply is through Lok Nayak Hospital for which demand has not yet been raised. Further, in absence of any demand/s, provision has also not been made for the same.

2. Title deed of the land on which Buildings are situated is not available.
3. Cost / Value of stock are as valued and verified by the Management.
4. In absence of PAN, Bank is deducting TDS on interest at higher rate than the normal rate of TDS i.e. @ 20%. However, the Centre is in the process of obtaining the PAN so that refund of TDS can be claimed.
5. Repairs to X-Ray Equipment A/c include an advance payment of Rs. 25,670/- against Expenditure to be incurred during next Financial Year- 2015-16.
6. Previous year's figures have been regrouped / rearranged wherever considered necessary.

Accountant
(S.K. Saini)

Director
(Dr. K.K. Chopra)

Chairman
(Dr. L.S. Chauhan)

Place: New Delhi

Date:12.10.2015



PARTICIPATION IN NATCON 2014



WORLD TB DAY CELEBRATION AT AIIMS



NEW DELHI TUBERCULOSIS CENTRE

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