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APPENDIX A

Data collection form 1; new smear positive, 2; seriously ill new smear negative 3; seriously ill new extra pulmonary 4; relapse, 5; failure 6; pretreatment after default 7; others 8; non-seriously ill new smear negative 9; non-seriously ill new extra pulmonary H; health personnel F; family member S; self administration

Patient				is	nt initiation					Category Result of follow- up sputum test				Treatment Outcome					Type of DOTS			Remarks							
TB Number			-	gnos	atme		ıse		I			I	Ι		I)	II										Н	F	S	
rumoer	Age	Sex	Occupation	Date of diagnosis	Date of treatment	Side effect	Other disease	1	2	3	4	5	6	7	8	9	2 / 3	4 / 5	6 / 7	8 / 9	completion	Default	Die	fail	Trans out	11	r	3	
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APPENDIX B

Questionnaire

information of health care pro	vider
1. Age	
2. Sex ()1 Male () 2 Female
3. Education () 1 Bachelor () 2 Master () 3 others, please specify
3. Type of TB staff	
() 1 doctor () 2 nurse () lab. Officer
4. How long have you worked fo	r TB services years
Recording-reporting system,	
Are you using Treatment card	in your health center or hospital?
()1 Yes ()2 No	
Are you using TB register in yo	our health center or hospital?
()1 Yes ()2 No	
Do you have system to repo	rt TB related data to the upper level (program
management level)?	
() 1 Yes () 2 No	
Defaulter tracing system,	
Do you have defaulter tracing s	system?
() 1 Yes () 2 No	
If yes, If patient default from t	reatment, what action do you take?
Home visit	() 1 Yes () 0 No
letter	() 1 Yes () 0 No
call	() 1 Yes () 0 No
waiting patient to come back	() 1 Yes () 0 No

Availability of supervision activity		
Do upper level staff conduct supervision	visit to your health	center or hospital to

see DOTS is really being carried	out.										
() 1 Yes () 2 No											
If yes, how often do they do?											
() 1 Once a month () 2 every quarter, () 3 every half year, () 4 annually											
How often do you meet upper lev	vel staff when they visit your service?										
() 0 Never () 1 sometimes () 2 always										
Incentive system											
If health staff brings back defaul	ter patient, do they get incentives?										
() 1 Yes () 2 No											
If yes what type of incentives d	lo they get?										
Money	() 1 yes ()0 No										
Coupon (food coupon?)	() 1 Yes () 0 No										
increase of salary	() 1 Yes () 0 No										
Health education,											
When patient starts treatment, d	lo you provide them health education material?										
() 1 Yes () 2 No											
When patient comes to the clinic	for medical treatment, do you inform the patient										
of the importance of treatment co	ompletion .										
() 1 Yes () 2 No											
Training status											
Do you have regular training syst	tem for new staff on the DOTS strategy?										
() 1 Yes () 2 No											
Do you receive refreshment train	ing on TB program										
() 1 Yes () 2 No											
If yes how often?											
Have you received training on the	e DOTS program management before?										
() 1 Yes, () 2 No											

APPENDIX C

Work plan for the study

					2004						2005		
No	Activities	6	7	8	9	10	11	12	1	2	3	4	5
1	Literature review					>							
2	Topic presentation				X								-
5	Research proposal preparation							•					
6	Research proposal examination								•				
7	Data collection									-		-	
8	Data analysis										-		·
9	Thesis writing								_				
10	Thesis examination											-	

APPENDIX D

Research Expenditure

Activities	Cost (Baht)
1. Preparation phase	
1) Development of questionnaire	1000
2) TB form and Medical record review	4000
3) Transportation	1000
2. Data collection	
1) Data collection	20,000
2) Transportation	36,500
3. Thesis preparation	22,500
Total	67,000

Funded by WHO

CURRICULUM VITAE

Dr. Kwang II Rim was born on 9th of November, 1970, at the Pongsan county of North Hwanghae Province, Democratic People's Republic of Korea. He graduated from Pyongyang Medical University in 1995 after accomplishment of 7 years course and received the degree of Medical Doctor. He had completed post graduate course in Thoracic Surgery at the Pyongyang Medical University for 3 years and gained the degree of thoracic surgery specialist. Since then, he had worked in Korean Red Cross General Hospital for 3 years as an thoracic surgeon. In 2001, he was awarded WHO fellowship program on DOTS strategy in India. After that, he was working as a Medical Officer at the National TB Preventive Institute, Pyongyang, DPRK. Since June 2004, he has been admitted in the Master of Public Health course at the College of Public Health, Chulalongkorn University. He was awarded WHO fellowship program in this course.