

## **POST NATAL SERVICES**

DISTRICT: ST. JOHN/ST. MARK														
	POST-NATAL SERVICES	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
3.1	Home visits to PN Patients													0
	First visit	7	8	19	8	12	4	7	7	12	16	17	12	129
	Return Visits	5	13	13	10	8	3	7	4	9	8	16	10	106
	Total Home visits	12	21	32	18	20	7	14	11	21	24	33	22	235
3.2	First Clinic visit at or before 6 weeks after delivery	13	14	10	18	9	14	8	7	13	12	12	21	151
3.3	Return PN visit at clinic	0	0	0	0	1	4	1	4	0	1	0	0	11
	Total PN Clinic visits	13	14	10	18	10	18	9	11	13	13	12	21	162
3.4	Total PN visits at Home and clinic	25	35	42	36	30	25	23	22	34	37	45	43	397
3.5	PN Women tested for 1st time after this delivery													
	Pap Smear	3	0	6	3	6	6	4	5	8	0	9	11	61
	Haemoglobin	5	0	0	6	5	3	3	3	0	0	0	6	31
3.6	PN Women with 1st abnormal test result after this delivery													
	Pap positive	0	0	0	0	0	0	0	1	0	0	0	0	1
	HB 10 gms or less	0	0	0	0	1	0	0	1	0	0	0	1	3
3.7	Other principal illness or condition first diagnosed or reported after this delivery													
	Pospartum haemorrhage	0	0	0	0	0	0	0	0	0	0	0	0	0
	Puerperal sepsis	0	0	0	0	0	0	0	0	0	0	0	0	0
	Other	0	0	0	0	0	0	0	0	0	0	0	0	0

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3.8	PN Women requesting FP Services													
	Oral contraceptives	0	0	0	1	0	1	0	0	0	0	0	1	3
	IUD (including those referred)	0	0	0	0	0	0	0	0	0	0	0	0	0
	Injection	0	2	1	4	1	5	2	2	4	3	1	3	28
	Advice	15	11	9	13	8	11	7	4	9	9	10	17	123
	Sterilization referral	0	0	0	0	0	0	0	0	1	0	0	0	1
	Other	0	1	0	0	0	0	1	0	0	0	0	0	2
	<b>Total</b>	<b>15</b>	<b>14</b>	<b>10</b>	<b>18</b>	<b>9</b>	<b>17</b>	<b>10</b>	<b>6</b>	<b>14</b>	<b>12</b>	<b>11</b>	<b>21</b>	<b>157</b>
3.8	PN Women already sterilization (TL's)	0	0	0	0	0	0	0	0	0	0	0	0	0
3.9	PN Clinic Sessions	11	12	14	12	12	12	9	12	10	7	10	7	128