

Daily Tally Sheet: Vitamin A and Albendazole

INSTRUCTIONS

Use a separate tally sheet every day

DISTRIBUTION SITE/HEALTH CENTER/ORGANIZATION: _____

























DISTRICT or 2nd ADMINISTRATIVE: _____




DATE: _____

PERSON RESPONSIBLE: _____

Mark 1 box for each child for both VAS and deworming

REGION/PROVINCE: _____

Age group	Vitamin A Supplementation (VAS)						Deworming					
	Infants 6 - 11 Months		Children 12 - 59 Months		5 years and older		Children 12 - 23 Months		Children 24 - 59 Months		5 years and older	
Dose	100,000 IU 		200,000 IU 		Not a VA target population		200 mg, 1/2 tablet 		400 mg, 1 tablet 		Not a VA target population	
Sex												
1	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□
2	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□	□□□□□
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Total	□□□□□		□□□□□		□□□□□		□□□□□		□□□□□		□□□□□	
Total by age group	□□□□□		□□□□□		□□□□□		□□□□□		□□□□□		□□□□□	
Total by sex	Vitamin A:  □□□□□  □□□□□		Total Vitamin A  □□□□□  □□□□□		Deworming  □□□□□  □□□□□		Total Dewormed  □□□□□  □□□□□					

Supply	A. Total # doses received at distribution point	B. Total # doses used today	C. Total # Doses Lost (Not given, not in inventory)	D. Stock Remaining as of _____ (date) (=A - B - C)	Remarks
Vitamin A Capsules, 100,000 IU 					
Vitamin A Capsules, 200,000 IU 					
Whole Deworming Tablets, 400 mg 					
Adverse Effects	Action Taken				