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# NOTIFICATION

No.J.11011/32/2002-HFW/L, the 13th February, 2004. The Governor of Mizoram is pleased to constitute a State Level Integrated Diseases Surveillance Committee with the following members :—

- 1. Commissioner & Secretary, Health & F.W.
  - 2. Director of Health Services.
  - 3. Director, Hospital & Medical Education
  - 4. Programme Officer, T.B.
  - 5. Programme Officer, Malaria
  - 6. Programme Officer, P.P.I.
  - 7. Programme Officer, HIV
  - 8. Asstt. Public Health Analyst, PHE
  - 9. President, Central YMA or his representative
- 10. Member Secretary, Mizoram Pollution Control Board
- 11. Programme Officer IDSP

— Chairman — Co-Chairman

- Member
  - Member-Secretary.

TERMS OF REFERENCE : (1) The State Surveillance Committee will meet at least once a month when there is no epidemic situation and meet at more frequent intervals during times of epidemic, its large outbreaks.

(2) The Committee is to oversee all the surveillance activities in the state and will be administratively responsible for programme activities in Mizoram.

(3) The Committee may co-ordinate with other Departments during large scale epidemics.

Vanhela Pachuau, Commr./Secretary to the Govt. of Mizoram, Health & Family Welfare Department. Ex-42/2004

## ANNEXURE – I

This Unit would be responsible for :

- \* The collection and analysis of all data being received from the districts and transmitting the same to Central Surveillance Unit.
- \* Coordinating the activities of the rapid response teams and despatching them to the field whenever the need arises.
- \* Monitoring and reviewing the activities of the district surveillance units including checks on validity of data, responsiveness of the system and functioning to the laboratories.
- \* Coordinating the activities of the state public health laboratories and other laboratories.
- \* Sending regular feedback to the district units on the trend analysis of data received from them.
- \* Coordinating all training activities under the project.
- \* Coordinating meetings of the state surveillance committee.

### ANNEXURE – II

### DISEASES TO BE INCLUDED IN IDSP :

- 3.1 Core Diseases :
- A. REGULAR SURVEILLANCE :

Vector Borne Disease Water Borne Disease

Respiratory Disease Vaccine Preventable Disease Diseases under eradication Other Conditions

Other International commitments Unusual clinical syndromes (Causing death/hospitalization)

- : 1 Malaria
- : 2 Acute Diarrhoeal Disease (Cholera)
- : 3 Typhoid
- : 4 Tuberculosis '
- -: 5 Measles
  - : 6 Polio
  - : 7 Road Traffic Accidents. (Linkup with police computers).
  - : 8 Plague
  - : 9 Menigoeneephalitis Respiratory Distress, Hemorragic fevers, other undiagnosed conditions.
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D. SENTINEL SURVEILLANCE	В.	SENTINEL	SURVEILLANCE	:
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Sexually transmitted diseases: 10HIV, HBV, HCVBlood borne: 11Water QualityOther Conditions: 12Outdoor Air Quality<br/>(Large Urban Centres)

C. REGULAR/PERIODIC SURVEYS :

NCD Risk Factors

: 13 Anthropametry, Physical Activity, Blood pressure, Tobacco, Nutrition.

3.2 State Specific Diseases for Mizoram The following 4 state specific diseases have been identified for which surveillance will be initiated -

- 1. Pneumonia
- 2. Acid Peptic Disease
- 3. Cancer
- 4. Substance abuse.

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