

# UNITED REPUBLIC OF TANZANIA



## Ministry of Health

### HEALTH FACILITY REGISTRY-FACILITY DETAILS

|                          |                                                                                              |
|--------------------------|----------------------------------------------------------------------------------------------|
| Facility Name:           | IKANDO                                                                                       |
| Common name:             | null                                                                                         |
| Status:                  | Operating                                                                                    |
| Facility Code:           | 121296-8                                                                                     |
| Date Opened:             | 2021-09-28                                                                                   |
| Facility Type:           | Dispensary                                                                                   |
| Ownership:               | Public, LGA : Tanzania                                                                       |
| Address:                 | Southern Highlands Zone-Njombe Region<br>- Njombe District - Njombe DC - Kichiwa -<br>Ikando |
| Official Phone:          |                                                                                              |
| Website:                 |                                                                                              |
| In-charge Qualification: |                                                                                              |
| Nearest Facility:        |                                                                                              |
| CTC ID:                  |                                                                                              |
| MSD ID:                  |                                                                                              |
| MTUHA ID:                |                                                                                              |

**FACILITY SERVICES - IKANDO**

| <b>Service Category</b>                     | <b>Service Description</b>                             |
|---------------------------------------------|--------------------------------------------------------|
| General Clinical Services                   | OPD - Outpatient Services                              |
| HIV/AIDS Prevention                         | EID - Early Infant Diagnosis                           |
| HIV/AIDS Prevention                         | PEP - Post Exposure Prophylaxis                        |
| HIV/AIDS Prevention                         | PITC - Provider Initiated Testing And Counseling       |
| HIV/AIDS Prevention                         | STI - Management of Sexually Transmitted Illness       |
| HIV/AIDS Prevention                         | VCT - Voluntary Counseling and Testing                 |
| HIV/AIDS Prevention                         | VMMC - Voluntary Medical Male Circumcision Services    |
| Reproductive and Child Health Care Services | Adolescent Reproductive Health Services                |
| Reproductive and Child Health Care Services | Antenatal Care                                         |
| Reproductive and Child Health Care Services | Breast Cancer                                          |
| Reproductive and Child Health Care Services | Cervical Cancer                                        |
| Reproductive and Child Health Care Services | Counselling                                            |
| Reproductive and Child Health Care Services | Family Planning                                        |
| Reproductive and Child Health Care Services | Management of Hypertensive Pregnancies (Pre-eclampsia) |
| Reproductive and Child Health Care Services | Maternal and Newborn Care                              |
| Reproductive and Child Health Care Services | Post-Abortion Care                                     |
| Vaccination                                 | Nutritional Counseling                                 |

FACILITY EQUIPMENT - IKANDO

| Equipment Name: | Functional | Not Functional | Under<br>Maintenance |
|-----------------|------------|----------------|----------------------|
|-----------------|------------|----------------|----------------------|