

# UNITED REPUBLIC OF TANZANIA



## Ministry of Health

### HEALTH FACILITY REGISTRY-FACILITY DETAILS

|                                 |  |
|---------------------------------|--|
| <b>Facility Name:</b>           | MKUNYA   |
| <b>Common name:</b>             | Mkunya   |
| <b>Status:</b>                  | Operating  |
| <b>Facility Code:</b>           | 110412-4   |
| <b>Date Opened:</b>             | 2019-10-06   |
| <b>Facility Type:</b>           | Health Center  |
| <b>Ownership:</b>               | Public, LGA : GOVERNMENT   |
| <b>Address:</b>                 | Southern Zone-Mtwara Region - Newala District - Newala TC - Mkunya - Rahaleo |
| <b>Official Phone:</b>          | 0628265445   |
| <b>Website:</b>                 | <a href="http://www.newalatc.go.tz">www.newalatc.go.tz</a>                   |
| <b>In-charge Qualification:</b> |  |
| <b>Nearest Facility:</b>        | 100794-7 - CHIHANGA Dispensary   |
| <b>CTC ID:</b>                  |  |
| <b>MSD ID:</b>                  | MT520203   |
| <b>MTUHA ID:</b>                |  |

**FACILITY SERVICES - MKUNYA**

| <b>Service Category</b>                     | <b>Service Description</b>                        |
|---|---|
| General Clinical Services                   | OPD - Outpatient Services                         |
| General Clinical Services                   | IMCI - Integrated Management of Childhood Illness |
| Malaria Diagnosis and Treatment             | Slide Microscopy                                  |
| Malaria Diagnosis and Treatment             | mRDT - Rapid Diagnostic Tests                     |
| Malaria Diagnosis and Treatment             | First Line Treatment                              |
| Malaria Diagnosis and Treatment             | Treatment of Complicated Malaria                  |
| HIV/AIDS Prevention                         | STI - Management of Sexually Transmitted Illness  |
| HIV/AIDS Prevention                         | VCT - Voluntary Counseling and Testing            |
| HIV/AIDS Prevention                         | PITC - Provider Initiated Testing And Counseling  |
| HIV/AIDS Prevention                         | EID - Early Infant Diagnosis                      |
| HIV/AIDS Prevention                         | PMTCT - ANC (ANC PMTCT)                           |
| HIV/AIDS Prevention                         | PMTCT - Maternity (MAT PMTCT)                     |
| HIV/AIDS Prevention                         | PEP - Post Exposure Prophylaxis                   |
| HIV/AIDS Care and Treatment                 | HIV/AIDS Care and Treatment                       |
| HIV/AIDS Care and Treatment                 | Ped ART - Pediatric ART Only                      |
| HIV/AIDS Care and Treatment                 | Adult ART - Adult ART Only                        |
| HIV/AIDS Care and Treatment                 | Both Adult and Pediatric                          |
| HIV/AIDS Care and Treatment                 | HBC - Home and Community Based Care               |
| Therapeutics                                | Dispensing Room                                   |
| Health Promotion and Disease Prevention     | Community Mobilization                            |
| Diagnostic Services                         | Laboratory  |
| Reproductive and Child Health Care Services | Family Planning                                   |
| Reproductive and Child Health Care Services | Antenatal Care                                    |

| <b>Service Category</b>                     | <b>Service Description</b>                     |
|---|--|
| Reproductive and Child Health Care Services | Postnatal Care                                 |
| Growth Monitoring / Nutrition Surveillance  | Vaccination                                    |
| Growth Monitoring / Nutrition Surveillance  | IMM-BASIC - Basic Immunization                 |
| Growth Monitoring / Nutrition Surveillance  | IMM-ADD - With Addition Vaccine                |
| Reproductive and Child Health Care Services | CEmOC - Comprehensive Emergency Obstetric Care |

FACILITY EQUIPMENT - MKUNYA

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