On approval of the Rules for conducting sanitary-epidemiological monitoring

Invalidated Unofficial translation

Order of the Minister of National Economy of the Republic of Kazakhstan dated July 19, 2016 № 326. Registered in the Ministry of Justice of the Republic of Kazakhstan on August 19, 2016 № 14128. Abolished by Order of the Minister of Health of the Republic of Kazakhstan dated November 13, 2020 No. KR DSM-193/2020.

Unofficial translation

Footnote. Abolished by Order of the Minister of Health of the Republic of Kazakhstan dated November 13, 2020 No. KR DSM-193/2020 (effective ten calendar days after the date of its first official publication).

In accordance with paragraph 2 of Article 147 of the Code of the Republic of Kazakhstan dated September 18, 2009 "On Public Health and Healthcare System", I ORDER

1. To approve the attached Rules for conducting sanitary-epidemiological monitoring.

2. The Committee for protection the rights of consumers of the Ministry of National Economy of the Republic of Kazakhstan in the manner established by the legislation shall ensure:

1) state registration of this order in the Ministry of Justice of the Republic of Kazakhstan;

2) sending a copy of this order in print and electronic form for official publication in periodicals and legal information system "Adilet" within ten calendar days after its state registration in the Ministry of Justice of the Republic of Kazakhstan, as well as to the Republican center for legal information within five working days from the date of receipt of the registered order for inclusion in the Standard control bank of regulatory legal acts of the Republic of Kazakhstan;

3) placement of this order on the Internet resource of the Ministry of National Economy of the Republic of Kazakhstan and on the intranet portal of state bodies;

4) submission of information on implementation of measures provided for in sub-paragraphs 1), 2) and 3) of this paragraph to the Legal department of the Ministry of National Economy of the Republic of Kazakhstan within ten working days after the state registration of this order in the Ministry of Justice of the Republic of Kazakhstan,.

3. Control over implementation of this order shall be assigned to the supervising Vice-Minister of National Economy of the Republic of Kazakhstan.

4. This order shall be enforced upon expiration of ten calendar days after its first official publication.

Minister of National Economy
of the Republic of Kazakhstan *K. Bishimbayev*

Approved
by the order of the
Minister of National Economy
of the Republic of Kazakhstan
dated July 19, 2016 № 326

Rules for conducting sanitary-epidemiological monitoring

Chapter 1. General provisions

1. These Rules for conducting sanitary-epidemiological monitoring are developed in accordance with paragraph 2 of Article 147 of the Code of the Republic of Kazakhstan dated September 18, 2009 "On Public Health and Healthcare system" (hereinafter – the Code) and shall determine the procedure for conducting sanitary-epidemiological monitoring by territorial subdivisions, state institutions, state enterprises on the right of economic management, state enterprises of the Committee for protection the rights of consumers of the Ministry of National Economy of the Republic of Kazakhstan (hereinafter – territorial subdivisions, subordinated organizations).

2. Sanitary-epidemiological monitoring is a state system of monitoring the state of health of the population and life environment, through collection, processing, systematization, analysis, evaluation and prediction, as well as determining cause-and-effect relationships between the state of health of the population and life environment of the human.

3. The purpose of conducting sanitary-epidemiological monitoring is to obtain reliable information about the impact of environmental factors (chemical, physical, biological, social) on human health, evaluate the effectiveness of taken measures on prevention the occurrence of poisoning and outbreaks of infectious diseases, occupational diseases, and the ability to predict their occurrence.

4. Sanitary-epidemiological monitoring and evaluation of effectiveness of taken measures is carried out for compliance with the requirements of documents of the state system of sanitary- epidemiological regulation (sanitary rules, hygienic standards, technical regulations, guidelines and recommendations) in the manner, established by paragraph 3 of Article 144 of the Code.

5. Management and coordination of organizational-methodological, regulatory-legal and software-hardware support for sanitary-epidemiological

monitoring is carried out by the Committee for protection the rights of consumers of the Ministry of National Economy of the Republic of Kazakhstan (hereinafter - the Committee).

6. Sanitary-epidemiological monitoring is conducted in relation to objects and products subject to sanitary-epidemiological supeRWision, laboratory and instrumental researches, indicators of infectious, non-infectious and occupational diseases, sanitary-epidemiological and preventive measures.

7. Conducting sanitary-epidemiological monitoring is carried out in stages and includes:

1) collection, processing, systematization of data (digital, analytical) on the state of health of the population and life environment of the human, based on the results of conducted sanitary-epidemiological suRWeys of objects subject to state sanitary-epidemiological supeRWision, in accordance with the List of products and epidemiologically significant objects subject to state sanitary- epidemiological control and supeRWision, approved by the order of the Minister of National Economy of the Republic of Kazakhstan dated May 30, 2015 № 414 (registered in the Register of state registration of regulatory legal acts № 11658) with the use of laboratory and instrumental research methods.

2) analysis and identification of cause-and-effect relationships between the state of health and life environment of the human, causes and conditions of changes in the sanitary-epidemiological wellfare of the population, based on the results of laboratory and instrumental researches of products and objects of sanitary-epidemiological supeRWision and control;

3) identification of environmental factors and selection of leading indicators of health disorders for optimization laboratory control in the system of sanitary-epidemiological monitoring;

4) in case of detection of infectious and mass non-infectious diseases (poisoning), establishing the causes and conditions of their occurrence and spread;

5) interdepartmental interaction on conducting sanitary-epidemiological monitoring , in order to ensure sanitary-epidemiological wellfare of the population;

5) evaluation and forecast of changes in the state of health of the population due to changes in the life environment of the human;

6) determination of urgent and long-term measures on prevention and elimination the impact of harmful factors on public health;

7) creation of information and analytical systems, networks, software materials and databases of sanitary-epidemiological monitoring of the district, city, region and republic, and storage of data of sanitary and epidemiological monitoring.

Chapter 2. Scope

8. Data of sanitary-epidemiological monitoring are used in the work of territorial subdivisions and subordinate organizations of the Committee.

9. According to the results of sanitary-epidemiological monitoring:

1) summaries, reports, recommendations, scientific forecasts, charts, tables describing the dynamics, direction and intensity of changes shall be compiled.

2) management decisions shall be made in order to eliminate violations of the legislation of the Republic of Kazakhstan in the field of ensuring sanitary-epidemiological welfare of the population on the territory of the Republic of Kazakhstan.

10. The results of sanitary-epidemiological monitoring shall be published on the official Internet resource of Committee on the results of six months, year, and heard at the meeting of the Committee based on the results of the year, in cases of exceeding morbidity indicators, deterioration of environmental indicators at the meetings of interested state bodies.

Chapter 3. Registration of sanitary-epidemiological monitoring data

11. Data on monitored parameters of sanitary-epidemiological monitoring shall be registered in the following reporting forms:

monitoring of infectious diseases in the form according to Appendix 1 to these Rules (hereinafter-Appendix 1);

monitoring of infectious diseases by age categories in the form according to Appendix 2 to these Rules (hereinafter- Appendix 2);

monitoring of sanitary and hygienic supeRWision in the form according to Appendix 3 to these Rules (hereinafter- Appendix 3);

monitoring of laboratory tests and instrumental measurements in the form according to Appendix 4 to these Rules (hereinafter- Appendix 4);

monitoring of occupational diseases and poisonings in the form according to Appendix 5 to these Rules (hereinafter- Appendix 5);

monitoring of researches on various infections in the form according to Appendix 6 to these Rules (hereinafter- Appendix 6).

12. Forms of reporting for sanitary-epidemiological monitoring shall be filled out in Excel format that allows computer processing.

13. Forms of reporting for sanitary-epidemiological monitoring shall be signed by the heads of territorial subdivisions and subordinate organizations of the Committee, providing the reports.

Chapter 4. Conducting sanitary-epidemiological monitoring

14. Sanitary-epidemiological monitoring shall be carried out at the republican, regional and district levels.

15. Responsible persons for the work, related to carrying out sanitary-epidemiological monitoring shall be assigned in the territorial subdivisions and subordinate organizations of the Committee by the orders of the first heads.

16. Regional departments of branches of republican state enterprise on the right of economic management "National center of expertise" (hereinafter – the NCE) of regions, branches of the NCE of regions, the cities of Astana and Almaty, state institutions of the Committee shall:

1) carry out laboratory and instrumental researches in accordance with the requirements of technical regulations of the Customs Union, collect and process data on the conducted researches;

2) transmit data to the territorial subdivisions of the Committee on the relevant territory at the district, regional levels, as well as the cities of Astana and Almaty, in terms of researches, conducted in accordance with Appendices 1-5 for 3 working days (except for subparagraph 1) before the terms, specified in paragraph 19 of these Rules.

17. Territorial subdivisions of the Committee shall:

1) carry out sanitary-epidemiological, preventive and anti-epidemic measures in the relevant territory in accordance with the current regulatory legal acts in the field of sanitary-epidemiological welfare of the population, including inspections of objects of control and supeRWision in accordance with the Entrepreneurial Code of the Republic of Kazakhstan;

2) collect and systematize information provided by district departments and branches of regions, cities of Astana and Almaty, supplement the information in terms of measures taken within their competence based on the results of inspections;

3) establish cause-and-effect relationships of the impact of environmental factors, by analyzing the information provided, in order to confirm the relationship of the occurrence (increase in indicators) of morbidity with the pollution of environmental objects (products, water, air, soil);

4) carry out selection of the leading risk factors for public health disorders, in order to timely evaluate the risks for these factors and prevent the occurrence of threats to the life and health of the population;

5) carry out prediction of the state of morbidity, health of the population and life environment of the human in the relevant territory, in order to timely preparation and effectiveness of the planned measures, aimed at preventing an increase in morbidity;

6) determine urgent and long-term measures on prevention and elimination the impact of harmful factors on the health of the population, by issuing acts in the field of sanitary- epidemiological supeRWision on elimination of violations of legislation in the field of sanitary-epidemiological welfare of the population, sending information to

the interested state bodies and bodies of local selfgovernment (if necessary), conducting communicative work;

7) at the district level send summary information to the territorial subdivisions of the Committee on the relevant territory at the regional level three working days (except for subparagraph 1) before the terms, specified in paragraph 19 of these Rules;

8) at regional level send analysis and summary information on the conducted sanitary-epidemiological monitoring to the Republican state enterprise on right of economic management "Scientific-practical center of sanitary-epidemiological expertise and monitoring" (hereinafter – RSE on REM "SPCSEEM") three working days (except for subparagraph 1), before the terms, specified in paragraph 20;

9) carry out formation of a database of sanitary-epidemiological monitoring in the relevant territory and storage of data.

18. RSE on REM "SPCSEEM" shall:

1) carry out collection, processing and systematization of data submitted by territorial subdivisions and subordinate organizations of the Committee;

2) carry out analysis of the received data, makes a prediction of sanitary-epidemiological situation on the territory of the Republic of Kazakhstan;

3) develop recommendations on the effectiveness of conducted measures for reducing and elimination the consequences of negative impact of activities of the subjects on the territory of the Republic;

4) carry out methodological support with the data of sanitary-epidemiological monitoring of organizations subordinated to the Committee and other organizations;

5) send the analysis and summary information on the conducted sanitary-epidemiological monitoring to the Committee within the terms accrding to paragraph 20 of these Rules;

6) carry out formation and maintaining the database of sanitary-epidemiological monitoring in the Republic;

7) compile information bulletins on the dynamics and changes in the state of health of the population, environmental pollution and risk to the health of the population as a whole throughout the republic by regions.

Chapter 5. Terms of providing information on sanitary-epidemiological monitoring

19. Territorial subdivisions of the Committee at the regional level shall send summary information on sanitary-epidemiological monitoring to the RSE on REM " SPCSEEM":

1) weekly until 17.00 on Fridays, according to Appendix 1;

2) monthly by the 1st day of the month following the reporting month, according to Appendices 1-2;

3) quarterly by the 5th day of the month following the reporting quarter, according to Appendices 1-3;

4) once a half-year by the 5th day of the month following the reporting half-year, according to Appendices 1-4;

5) once a year by the 5th day of the month following the reporting year increasingly, according to Appendices 1-5.

20. the RSE on REM "SPCSEEM" shall send information on sanitary-epidemiological monitoring to the Committee:

1) weekly until 10.00 on Mondays, according to Appendix 1;

2) monthly by the 1st day of the month following the reporting one, according to Appendices 1-2;

3) quarterly by the 1st day of the month following the reporting quarter, according to Appendices 1-3;

4) once a half-year by the 1st day of the month following the reporting half-year, according to Appendices 1-4;

5) once a year by the 10th day of the month following the reporting year, increasingly, according to Appendices 1-5.

21. If the last day of the term for submitting reporting forms on sanitary-epidemiological monitoring falls on a non-working day, the term for submission shall be the next working day.

22. If necessary, the Committee within a year requests a decoding (confirming documents) on the submitted forms of reporting for sanitary-epidemiological monitoring from the RSE on REM "SPCSEEM", which are submitted to the Committee within three working days from the date of receipt of the request.

23. Summing up and submitting information to the Committee for the current year shall be completed by January 10 of the year following the reporting calendar year.

Appendix 1
to the Rules for conducting
sanitary-epidemiological
monitoring

Monitoring of infectious diseases

1. Form of sanitary-epidemiological monitoring of the viral hepatitis "A" incidence among schoolchildren for the period from _____20____ year (weekly, with increase)

name of the	total cases of HAV (viral hepatit	numbe r of	numbe r of studen	numbe r of boardi	numbe r of studen	numbe r of school s , boardi n g school	numbe r of sick	specifi c weight o f studen ts from the	school s , boardi n g school s with				specifi c weight o f school s and

territory	is "A") in the population	schools	ts in schools	ng schools	ts in schools	s where HAV is registered	students in them	total number of patients	the number of cases 1-2	3-10 cases	11-20 cases	21 or more cases	boarding schools with HAV
1	2	3	4	5	6	7	8	9	10	11	12	13	14

2. Form of sanitary-epidemiological monitoring of the acute flaccid paralysis incidence in the population of the Republic of Kazakhstan for the period from _____ __ 20___year

(weekly, with increase)

name of the territory	number of children under 15 years old	registered		collected adequate samples (from the total number of cases)		index	re-examined after 60 days		non-poliomyelitic enteroviruses (NPEVS) were isolated) (in children under 15 years oild)		registered in the first 7 days		investigated in the first 48 hours	
		abs	per 100 thousand	abs	%		abs	% of the number to be examined	abs	%	abs	%	abs	%
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

Continuation of the table

not classified after 90 days or more		total classified for the reporting period		
abs	%	abs	%	per 100 thousand.
16	17	18	19	20

3. Form of sanitary-epidemiological monitoring of rubella incidence in the population of the Republic of Kazakhstan for the period from _____20____year (weekly, with increase)

table 1

name of the territory	number of registered cases for the reporting week	total cumulative cases	of them were hospitalized	Age range of patients							the vaccinated against rubella became ill	samples examined in the NCE of the region	number of confirmed cases in the NCE
				up to 1 year old	1-4 years old	5-9 years old	10-14 years old	15-19 years old	20-29 years old	over 30 years old			
1	2	3	4	5	6	7	8	9	10	11	12	13	14

Continuation of the table

received samples in the NRL SPCSEEM	number of confirmed in NRL SPCSEEM from among the negative in the NCE	% laboratory-confirmed (NCE+from the number of negative in the NCE, but the "pos" in the NRL KR SPCSEEM)	number of epid cases associated with a confirmed case
15	16	17	18

table 2

name of the territory	cases in the vaccinated person during the reporting week	total cases in the vaccinated with cumulative total from_____ year.	% of vaccinated from the total number of cases	age range of rubella cases in vaccinated patients						
				up to 1 year old	1-4 years old	5-9 years old	10-14 years oid	15-19 years old	20-29 years old	over 30 years old
1	2	3	4	5	6	7	8	9	10	11

4. Form of sanitary- epidemiological monitoring of the measles incidence in the population of the Republic of Kazakhstan for the period from _____20____ year

(weekly, with increase)

name of the territory	number of registered cases for the current week	number of cases for the entire period in total												
		total cumulative cases	of them hospitalized	age range of patients							the vaccinated against measles became ill	samples examined in the NCE of the region/city	number of confirmed cases in CSEE	received samples in the NRL SPCSEEM
				up to 1 year old	1-4 years old	5-9 years old	10-14 years old	15-19 years old	20-29 years old	over 30 years old				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

Continuation of the table

number of cases for the entire period in total		
number of confirmed in NRL SPCSEEM	number of cases of the epidemic. associated with confirm. measles case	mortality
16	17	18

5. Form of sanitary-epidemiological monitoring of the whooping cough incidence in the population of the Republic of Kazakhstan for the period from _____ 20___ year

(weekly, with increase)

	by primary diagnoses										final diagnosis of whooping cough
	number of primary	registered cases	including by vaccination				including by age			including by organization			
				with an									

name of the territory	registered cases per week	since ____ year. with a cumulative total	not vaccinated	incomplete course of vaccination	with a full course	of vaccination status is unknown	up to 1 year old	1-14 years old	older than 14 years old	unorganized	organized	others	(number of cases from ___ year.)
1	2	3	4	5	6	7	8	9	10	11	12	13	14

6. Form of sanitary-epidemiological monitoring of the AII incidence in the population of the Republic of Kazakhstan for the period from _____20____year (weekly, with increase)

table 1

name of the territory	AII (acute intestinal infections)									microbial landscape in AII foci (from patients and contact)			
	total cases per week	indicator per 100 thousand	including among children under 14 years old	specific weight of children under 14 years old, %	including among children under 1 year old, cases	specific weight of children under 1 year old, %	number of food poisoning outbreaks	including among children under 14 years old	number of victims	salmonella	shigella	rotaviruses	opportunistic bacteria, if present, indicate the type
1	2	3	4	5	6	7	8	9	10	11	12	13	14

Continuation of the table

microbial landscape in AII foci (external environment)			
salmonella	shigella	rotaviruses	opportunistic bacteria, if present, indicate the type
15	16	17	18

table 2

name of the territory	AII anti-epidemic measures in the foci											
	total cases per week	total number of foci	contact persons were examined	carriers were identified	food products were selected	including positive ones	water samples taken in the foci	including positive ones	swabs selected for coliforms bacteria	including positive ones	swabs selected for pathogenic flora	including positive ones
1	2	3	4	5	6	7	8		9	10	11	12

Continuation of the table

organizational and methodological work		sanitary and educational work		
information on health advice	information in the akimats	health bulletins	lectures	appearances on the TV and radio
13	14	15	16	17

7. Form of sanitary-epidemiological monitoring of the salmonellosis incidence in the population of the Republic of Kazakhstan for the period from _____20____ year (weekly, with increase)

name of the territory	salmonella infection									
	total cases per week	indicator per 100 thousand.	including among children under 14 years old, cases	specific weight of children under 14 years old, %	including among children under 1 year old, cases	specific weight of children under 1 year old, %	number of outbreaks and food poisonings	including		
								in organized groups		in populations of the population
								number of people involved in the epidemic process	number of victims	number of victims
1	2	3	4	5	6	7	8	9	10	11

8. Form of sanitary-epidemiological monitoring of the of meningococcal infection incidence in the population of the Republic of Kazakhstan for the period from _____ __ 20___year (weekly, with increase)

table 1

name of the territory	incidence of meningococcal infection and mortality												
	number of cases of MM of unspecified etiology by primary diagnoses	number of MM cases with confirmed diagnosis (clinically/ laboratory)	by nosological forms					including by ages					
			meningitis	meningococcemia	meningoencephalitis	mixed forms	nasopharyngitis	Total	up to 1 year old	including those who have been vaccinated against Hib	including those who have been vaccinated against pneumonia	including those who have been vaccinated against Hib	including those who have been vaccinated against pneumonia
1	2	3	4	5	6	7	8	9	10	11	12	13	14

Continuation of the table

incidence of meningococcal infection and mortality													
including by ages						including by organization							
5-7 years old inclusive	including those who have been vaccin	including those who have been vaccinated	8-14 years old	15-19 years old	20 years old and older	total	inorganized	organized PSO (pre-school	school children	students	medical workers	teachers	others

	ated against Hib	against pneumonia						organizations)					
15	16	17	18	19	20	21	22	23	24	25	26	27	28

table 2

										laboratory confirmation of samples from patients, abs.		
additional epidemiological data on cases of MM (meningococcal meningitis)				mortality (among the cases recorded during this period)		group morbidity in organized groups						
visitors from the total number of registered cases of MM (meningococcal meningitis)	if there is data, indicate how many patients and where they came from	did the patient leave the country during the incubation period, if so where?	did the person/s come to the focus from other regions / countries	total cases with a fatal outcome	specific weight	number of group diseases	from 2-3 cases	from 3 cases or more	number of organizations where restrictive measures have been introduced	number of cases examined laboratory	confirmed total cases	including by bacteriological method
1	2	3	4	5	6	7	8	9	10	11	12	13

Continuation of the table

laboratory confirmation of samples from patients, abs.				
characteristics of isolated/established pathogens in samples (serotyping)				
A	B	C	Others	untypable
14	15	16	17	18

9. Form of sanitary-epidemiological monitoring of the serous meningitis incidence in the population of the Republic of Kazakhstan for the period from _____ 20___ year

(weekly, with increase)

table 1

name of the territory	incidence of serous meningitis											
	number of cases of SM of unspecified etiology by	number of cases of SM based on confirmed diagnosis (clinically/ laboratory)			including by ages							
		total			total	up to 1 year old	including those who have been vaccin	including those who have been vaccin	1-4 years old	including those who have been vaccin	including those who have been vaccin	5-7 years old	including those who have been vaccin

	primary diagnoses		laboratory	clinically			ated against Hib	ated against pneumonia		ated against Hib	ated against pneumonia		ated against Hib
1	2	3	4	5	6	7	8	9	10	11	12	13	14

Continuation of the table

incidence of serous meningitis											
including by ages				including by organization							
including those who have been vaccinated against pneumonia	8-14 years old	15-19 years old	20 years old and older	total	inorganized	organized by the PSO	school children	students	medical workers	teachers	others
15	16	17	18	19	20	21	22	23	24	25	26

table 2

additional epidemiological data on cases of SM				mortality (among the cases recorded during this period)		group morbidity in organized groups				laboratory confirmation in samples from patients (fecal matters, liquor, smear from the pharynx and nose), abs.			
visitors from the total number of registered cases of SM (serous meningitis)	if there is data, indicate how many patients and where they came from	did the patient leave the country during the incubation period, if so where?	did the person / s come to the focus from other regions / countries	total cases with a fatal outcome	specific weight	number of group diseases	from 2 - 3 cases	from 3 cases or more	number of organizations where restrictive measures have been introduced	number of cases examined laboratory	confirmed total cases	including PCR (polymerase chain reaction)	including by virological method
1	2	3	4	5	6	7	8	9	10	11	12	13	14

10. Form of sanitary-epidemiological monitoring of the serous meningitis incidence in the population of the Republic of Kazakhstan for the period from _____ 20___ year

(weekly, with increase)

organization of preventive measures in foci							epidemiological factors of transmission						
						name of the				use of water from open reserv			

total number of contacts was established	laboratory contacts were examined	number of carriers were identified	уд вес носителей specific weight of carriers	was subject to sanitation	scanned	used antibiotics for sanitation of the contacts	swimming in open reservoirs	swimming in pools	swimming in the fountains	oirs for drinking and washing vegetables and fruits	contact with the patient	contact with the carrier	use of raw water	other (specify)
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

Continuation of the table

laboratory monitoring						organizational-methodological work				
waste water samples	result (research method)	samples from open reservoirs	result (research method)	samples from swimming pools, fountains	result (research method)	seminars for medical professionals	seminars / meetings for employees of other departments	round tables	medical advice	information in the akimats
16	17	18	19	20	21	22	23	24	25	26

Continuation of the table

sanitary and educational work							
distributed visual materials (pieces)	dictations	performances on the TV, radio,	information placed on official websites	articles in newspaper	conversations with teachers	conversations with parents	hotline
27	28	29	30	31	32	33	34

Appendix 2
to the Rules for conducting
sanitary-epidemiological
monitoring

Monitoring of infectious morbidity by age categories 1. Form of sanitary-epidemiological monitoring of infectious morbidity in the population of the Republic of Kazakhstan for the period _____ 20 ___year (monthly, with increase)

name of the territory	name of the disease													
	_____year						_____year						_____ to ___ (+,-)	
	absolute			indicator			absolute			indicator				
	total	children under 14	teenagers 15 - 17	total	children under 14	teenagers 15 - 17	total	children under 14	teenagers 15 - 17	total	children under 14	teenagers 15 - 17	total	children under 14	teenagers 15 - 17

		years old	years old		years old	years old		years old	years old		years old	years old		years old	years old
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

2. Form of sanitary-epidemiological monitoring of the measles incidence in the population of the Republic of Kazakhstan for the period _____ 20___year (monthly, with increase)

1	identification data				reporting				monthly	
2	name of the region				year of report submission					
3	S.N.P. of the responsible person				month of report submission					
4	e-mail address				number of registered suspicious cases during the reporting period					
5	number of registered suspicious cases of measles with samples collected for laboratory testing for measles (including in the regions)									
6	phone number	number of districts providing reports								
7	date									
8	final classification of measles cases									
9		age groups								
10		<1 year old	1-4 years old	5-9 years old	10-14 years old	15-19 years old	20-29 years old	30+	age unknown	total
11	0 doses									
12	1 dose									
13	2 doses									
14	unknown number									
15	total									
16	number of laboratory confirmed cases									

17	number o f epidemic . related cases with a laborator y confirme d case									
18	number o f hospitali zed									
19	number of dead									

3. Form of sanitary-epidemiological monitoring of the rubella incidence in the population of the Republic of Kazakhstan for the period _____ 20___year (monthly, with increase)

1	identifica tion data				reporting		monthly	
2	name of t h e region				year of report submission			
3	S.N.P. of t h e responsi b l e person				month of report submission			
4	e-mail address				number of registered suspicious cases during the reporting period			
5	number of registered suspicious cases of rubella with samples collected for laboratory testing for rubella (including in the regions)							
6	phone number			number of districts providing reports				
7	date							
8	final classification of rubella cases							
9		age groups						a g e unknown	total
10		<1 year old	1-4 years old	5-9 years old	10-14 years old	15-19 years old	20-29 years old	30+		
11	0 doses									
12	1 dose									
13	2 doses									

14	unknown number									
15	total									
16	number of laboratory confirmed cases									
17	number of epidemic. related cases with a laboratory confirmed case									
18	number of hospitalized									
19	number of dead									

4. Form of sanitary-epidemiological monitoring of the incidence of epidparotitis in the population of the Republic of Kazakhstan for the period _____ 20___year (monthly, with increase)

identification data		reporting		Monthly	
name of the region		year of report submission			
S.N.P. of the responsible person		month of report submission			
e-mail address		number of registered suspicious cases during the reporting period			
number of registered suspicious cases of parotitis with samples collected for laboratory testing for parotitis (including in the regions)					
phone number	number of districts providing reports				
date					

final classification of cases of epidparotitis									
	age groups							a g e unknown	total
	<1 year old	1-4 years old	5-9 years old	10-14 years old	15-19 years old	20-29 years old	30+		
0 doses									
1 dose									
2 doses									
unknown number									
total									
number o f laboratory confirmed cases									
number o f epidemic. related cases with a laboratory confirmed case									
number o f hospitalized									
number of dead									
1	2	3	4	5	6	7	8	9	10

5. Form of sanitary-epidemiological monitoring of immunization against HBV of the population of the Republic of Kazakhstan._____ 20___ year (monthly, with increase)

name of the territory	allocated funds from the local budget	purchased	total subject	total vaccinated	number of childre	vaccinated childre	school childre n subject t o	school childre	contact subject t o	contact vaccinated in foci	subject t o immunization childre n under 1 4 years old, patients with CVHB	vaccinated childre n under 1 4 years old,	vaccinated, others

	for the HBV vaccine	vaccines, doses	to immunization		n of 2 years old	n of 2 years old	immunization	n vaccinated	immunization in foci		and CHBC (chronic hepatitis "B" and "C".	patients with CVHB and CHBC	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

6. Form of sanitary-epidemiological monitoring of immunization against HBV (viral hepatitis "B") of the population of the Republic of Kazakhstan for the period _____ _____ 20___year (monthly, with increase)

table 1

HBV-1							HBV-2					HBV- 3				
total vaccinated	including		from vaccinated children				total vaccinated	including		from vaccinated children		total vaccinated	including		from vaccinated children	
	adults	children	up to 1 year old	from children under one year old		older than 1 year old		adults	children	up to 1 year old	older than 1 year old		adults	children	up to 1 year old	older than 1 year old
				in the maternity hospital	in the polyclinic site											
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17

table 2

HBV-1								HBV-2							
adults	including							adults	including						
	medical workers	recipients	students medical profile	Контактные contact	HIV-infected people	subject to hemodialysis and transplantation	oncohematological patients		medical workers	recipients	students medical profile	Контактные contact	HIV-infected people	subject to hemodialysis and transplantation	oncohematological patients
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

table 3

HBV- 3							
adults	including						
	medical workers	recipients	students medical profile	Контактные contact	HIV-infected people	subject to hemodialysis and transplantation	oncohematological patients

1	2	3	4	5	6	7	8

Appendix 2
to the Rules for conducting
sanitary-epidemiological
monitoring

Monitoring of sanitary-hygienic supeRWision 1. Form of sanitary-epidemiological monitoring of the state of water bodies for_____20___year (quarterly, with increase)

open reservoirs (1 category)							open reservoirs (2 category)				
Total	does not meet sanitary and epidemiological requirements	laboratory control				total	does not meet sanitary and epidemiological requirements	laboratory control			
		microbiological indicators		sanitary-chemical indicators				microbiological indicators		sanitary-chemical indicators	
		tested samples	do not meet the standards	tested samples	do not meet the standards			tested samples	do not meet the standards	tested samples	do not meet the standards
1	2	3	4	5	6	7	8	9	10	11	12

2. Form of sanitary-epidemiological monitoring of the state of atmospheric air for_ _____20___year (quarterly, with increase)

name of the territory	number of objects having organized emissions to the atmosphere, units	number of objects having sanitary protection zones of standard sizes, units	number of sampling control points	number of ingredients contained in the emissions, units		of them the CSEE determines, units		tested samples for sanitary-chemical indicators				
				total units	including class I-II	total units	including class I-II	total samples, units	of them exceeding the MPC (maximum permissible concentration)	name of ingredients in excess of the MPC	for each ingredient	including those with excess of the MPC
1	2	3	4	5	6	7	8	9	10	11	12	13

3. Form sanitary-epidemiological monitoring of the soil state for_____ 20___year (quarterly, with increase)

name of the territory	soil samples tested at:					
	sanitary-chemical indicators, units		bacteriological indicators, units		eggs of helminth, units	
	tested samples	do not meet the standards	tested samples	do not meet the standards	tested samples	helminth eggs found
1	2	3	4	5	6	7

4. Form of sanitary-epidemiological monitoring of secondary schools, including boarding schools for_____20___year (quarterly, with increase)

table 1

		number of secondary schools, including boarding schools

s/n	name of the region	total	of urban type	of rural type
1	2	3	4	5

table 2

food samples were tested for microbiological indicators, units	of them do not meet the standards, units	tested dishes on calorific value, units	of them do not meet the standards, units	water samples were tested for microbiological indicators, units	of them do not meet the standards, units	washouts were tested, units	of them positive, units	measurements of the microclimate made, units	of them do not meet the standards, units	number of measurements for lighting	of them do not meet the standards, units	school furniture measurements
1	2	3	4	5	6	7	8	9	10	11	12	13

Continuation of the table

of them do not meet the standards, units	number of measurements for EMF (electromagnetic fields)	with excess of MPL (maximum permissible level)
14	15	16

5. Form of sanitary-epidemiological monitoring of boarding schools for_____ _____20___year (quarterly, with increase)

table 1

s/n	name of the region	number of boarding schools		
		total	of urban type	of rural type
1	2	3	4	5

table 2

food samples were tested for microbiological indicators, units	of them do not meet the standards, units	tested dishes on calorific value, units	of them do not meet the standards, units	water samples were tested for microbiological indicators, units	of them do not meet the standards, units	washouts were tested, units	of them positive, units	measurements of the microclimate made, units	of them do not meet the standards, units	number of measurements for lighting	of them do not meet the standards, units	school furniture measurements
1	2	3	4	5	6	7	8	9	10	11	12	13

Continuation of the table

of them do not meet the standards, units	number of measurements for EMF (electromagnetic fields)	with excess of MPL (maximum permissible level)
14	15	16

6. Form of sanitary-epidemiological monitoring of objects of preschool education and training of children for_____20___year (quarterly, with increase)

table 1

		number of objects of preschool education and training of children		

s/n	name of the region	total		
1	2	3	4	5

table 2

food samples were tested for microbiological indicators, units	of them do not meet the standards, units	tested dishes on calorific value, units	of them do not meet the standards, units	water samples were tested for microbiological indicators, units	of them do not meet the standards, units	washouts were tested, units	of them positive, units	measurements of the microclimate made, units	of them do not meet the standards, units	number of measurements for lighting	of them do not meet the standards, units	school furniture measurements
1	2	3	4	5	6	7	8	9	10	11	12	13

Continuation of the table

of them do not meet the standards, units	number of measurements for EMF (electromagnetic fields)	with excess of MPL (maximum permissible level)
14	15	16

7. Form of sanitary-epidemiological monitoring of food products for_____ __20___years (quarterly, with increase)

№	types of objects	for microbiological analysis. indicators	of them do not meet	including pathlore	of them do not meet	for san. chemical indicators	of them do not meet	washouts total	of them are positive.
1	milk processing								
2	meat processing								
3	poultry processing								
4	fish processing								
5	bakeries								
6	fruit processing								
7	on production of fat and oil products								

8	on production of alcoholic beverages								
9	on non-alcoholic drinks, drinking water								
10	cream confectionery objects								
11	children's dairy kitchens								
12	catering facilities with more than 50 seats								
13	flour milling objects								
14	salt production objects								
15	sugar production objects								
16	on production and sale of specialized food products and other groups of food products								
17	food trading objects with a trading area of								

	more than 50 square meters								
18	food markets;								
19	wholesale food storage objects								
20	public catering objects on the transport								
21	on-board catering facilities								
22	others								
23	total								

Appendix 4
to the Rules for conducting
sanitary-epidemiological
monitoring

Monitoring of laboratory tests and instrumental measurements

1. Form of sanitary-epidemiological monitoring of the state of water supply for___ _____20___year (semi-annual, with increase)

table 1

name of the territory	number of settlements, provided with centralized water supply	number of people living in them	%	number of settlements with decentralized water supply (from wells, drillholes, springs)	number of people living in them	%	number of settlements, using water from open reservoirs for drinking (without water treatment)	number of people living in them	%	number of settlements on imported water	number of people living in them	%	total number of population
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 2

centralized water supply	

water pipelines			including rural ones			
of them does not work	covered by the suRWey	does not meet sanitary-epidemiological requirements from the number of working	total	of them does not work	covered by the suRWey	does not meet sanitary-epidemiological requirements from the number of working
2	3	4	5	6	7	8

table 3

Total						including rural ones					
according to sanitary-chemical indicators			according to microbiological indicators			according to sanitary-chemical indicators			according to microbiological indicators		
tested samples	of them does not meet	%	tested samples	of them does not meet	%	tested samples	of them does not meet	%	tested samples	of them does not meet	%
1	2	3	4	5	6	7	8	9	10	11	12

table 4

accidents at centralized water supply objects			disinfection of drinking-household water supply objects			number of water supply objects, covered by disinfection				number of motor vehicles for the transport of drinking water
total registered	number of timely eliminated cases (in the first day)	subsequent disinfection	reagents used (list)	need (q-ty)	provision (quantity)	water pipelines		decentralized water supply		
						total	including at the initiative of territorial bodies	total	including at the initiative of territorial bodies	
1	2	3	4	5	6	7	8	9	10	11

table 5

decentralized water supply (wells, springs, artesian wells without a distribution network)				specific weight of non-centralized water samples that do not meet sanitary-epidemiological requirements											
				total						including rural ones					
				according to sanitary-chemical indicators			according to sanitary-microbiological indicators			according to sanitary-chemical indicators			according to sanitary-microbiological indicators		
total objects	of them do		do not meet sanitary-epidemiological requir												

under control	not work	total examined	ements from the number of working	tested samples	of them not meeting	%	tested samples	of them not meeting	%	tested samples	of them not meeting	%	tested samples	of them not meeting	%
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

2. Form of sanitary-epidemiological monitoring of the air state of the working area for _____ 20 ___ year (semi-annual, with increase)

	name of enterprises by industries	total objects, units	of them examined	including with the use of laboratory methods of research	number of examinations, units	number of objects with excess of MPC MPL	issued prescriptions, units	of them completed on time, units	tested samples, units:			
									vapors and gases			
									total	of them with excess of MPC	including substances of hazard class 1-2	
											total	of them with excess of MPC
	A	1	2	3	4	5	6	7	8	9	10	11
1	industrial and other enterprises total,											
	including:											
2	non-ferrous metallurgy											
3	ferrous metallurgy											
4	chemical											
5	mechanical engineering and metalworking											

6	coal industry											
7	electric power industry											
8	oil and gas production											
9	oil refining											
10	production of building materials											
11	glass and porcelain											
12	light industry											
13	woodworking industry											
14	polygraphic											
15	medical											
16	food industry											
17	agriculture											
18	chemical objects											
19	transport											
20	communication											

21	gas station, seRWic e station, car wash											
22	buildin g											
23	others											

Continuation of the table

tested samples, units:			
dust and aerosols			
total	of them with excess MPC	including for substances of hazard class 1-2	
		total	of them with excess MPC
12	13	14	15

3. Form of sanitary-epidemiological monitoring of physical factors in the workplaces for_____20___year (semi-annual, with increase)

name of enterprises by industries	microclimate		illumination		noise		vibration		electromagnetic fields	
	number of examined workplaces	of them does not meet the hygienic requirements	number of examined workplaces	of them does not meet the hygienic requirements	number of examined workplaces	of them does not meet the hygienic requirements	number of examined workplaces	of them does not meet the hygienic requirements	number of examined workplaces	of them does not meet the hygienic requirements
industrial and other enterprises total,										
including:										
non-ferrous metallurgy										
ferrous metallurgy										
chemical										
mechanical engineeri										

ng and metalworking										
coal industry										
electric power industry										
oil and gas production										
oil refining										
Production of building materials										
glass and porcelain										
light industry										
woodworking industry										
polygraphic										
medical										
food industry										
agriculture										
chemical objects										
transport										
communication										
gas station, seRWice station, car wash										
building										
1	2	3	4	5	6	7	8	9	10	11

4. Form of sanitary-epidemiological monitoring of the objects of nuclear energy use for_____20___year (semi-annual, with increase)

table 1

name of the territory	number of objects using SIR	number of radioactive sources (RW)									
		total pieces	including RW in closed form								
			total activity, GBq	total		of them used in					
				number of pieces	total activity, GBq	gamma-flaw detectors		powerful gamma installations			
						number of pieces	total activity, GBq	Медицинские medical		промышленные industrial	
								number of pieces	total activity, GBq	number of pieces	total activity, GBq
1	2	3	4	5	6	7	8	9	10	11	12

Continuation of the table

number of radioactive sources (RW)							
including RW in closed form						including RW in open form	
of them used in						number of pieces	total activity, GBq
RID-x (radioisotope device)		smoke detectors		other RS (radiation source)			
number of pieces	total activity, GBq	number of pieces	total activity, GBq	number of pieces	total activity, GBq		
13	14	15	16	17	18	19	20

table 2

x-ray installations, total			radioactive wastes (sources of ionizing radiation)											
industrial		medical	number of sources subject to burial of the reporting year				number of sources buried in the past year				number of sources to be buried in the past year			
r/ of spectral structural analysis, pieces	r/flaw detectors, pieces	total, pieces	total, pieces	total activity, GBq	including smoke detectors	total activity, GBq	total, pieces	total activity, GBq	including smoke detectors	total activity, GBq	total, pieces	total activity, GBq	including smoke detectors	total activity, GBq
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

table 3

radioactive waste (solid (SRW), liquid (LRW)											
the amount of radioactive waste (SRW) was to be disposed as of 01.01. of the reporting year (quarter)		the amount of radioactive waste (LRW) was to be disposed as of 01.01. of the reporting year (quarter)		the amount of radioactive waste (SRW) buried in the past year (quarter)		the amount of radioactive waste (LRW) buried in the past year (quarter)		the amount of radioactive waste (SRW) buried in the past year (quarter)		the amount of radioactive waste (LRW) buried in the past year (quarter)		the amount of radioactive waste (SRW) to be disposed as of 31.12. of the past year (quarter)	
	total activit		total activity,		total activit		total activit		total activit		total activit		total activit

total (t)	y , GBq	total liters (m3)	GBq	total (t)	y , GBq	total liters (m3)	y , GBq	total (t)	y , GBq	total liters (m3)	y , GBq	total (pieces)	y , GBq
1	2	3	4	5	6	7	8	9	10	11	12	13	14

Continuation of the table

radioactive waste (solid (SRW), liquid (LRW)	
the amount of radioactive waste (LRW) to be disposed as of 31.12. of the past year (quarter)	
total liters (m3)	total activity, GBq
15	16

table 4

number of personnel of category "A"								the number of objects, not meeting the requirements of the regulatory legal acts		administrative measures			
										the resolution on imposition of a fine		resolution on suspension of operation of an object	
total	industrial enterprises	medical organization	mines, quarries, landfills	scientific-research organizations	secondary and higher education organizations	railway, air, sea (river) transport	other objects	total	including in medical organizations	наложено	withheld	issued	executed
1	2	3	4	5	6	7	8	9	10	11	12	13	14

Continuation of the table

number of radiation accidents, including in medical organizations	number of persons (people) affected by radiation accidents
15	16

table 5

dust-radiation factor					concentration of radon, thoron and SPR in the air of the working area				
total number of objects	total number of dimensions	specific activity of industrial dust (range of contents)		number of measurements with excess of the PL	total number of objects	total number of dimensions	EEVA (equivalent equilibrium volume activity) of radon isotopes in the air, Bq /m cubic (range of values)		number of measurements with excess of PL (permissible level)
		max	min				max	min	

table- 6

concentration of radon, thoron and SPR (a subsidiary product of radon) from the ground during allocation of land plots for construction of industrial facilities (ND - 250 mBq / (sq.m. xs))				concentration of radon, thoron and SPR in the grounf during allocation of land plots for construction of residential buildings and buildings for social purposes (ND- 80 mBq / (sq.m. xs))			

total number of objects	total number of dimensions	radon flux density, mBq / (m.sq.hs) range of values		number of measurements with excess of PL	total number of objects	total number of dimensions	radon flux density, mBq / (sq.m. xs) (range of values)		number of measurements with excess of PL
		max	min				max	min	
1	2	3	4	5	6	7	8	9	10

table-7

concentration of radon, thoron and SPR in residential and public buildings upon acceptance of the object into operation (100Bq / m3)					concentration of radon, thoron and SPR in existing residential and public buildings (200Bq / m3)				
total number of objects	total number of dimensions	equivalent equilibrium volumetric activity, Bq / m cube (range of values)		number of measurements with excess of PL	total number of objects	total number of dimensions	equivalent equilibrium volumetric activity, Bq / m cube (range of values)		number of measurements with excess of PL
		max	min				max	min	
1	2	3	4	5	6	7	8	9	10

table 8

EDR on the territory of land plots during allocation for construction, reconstruction, on the territory of residential areas (settlements)					EDR (equivalent dose rate) in residential, public, industrial, reconstructed buildings				
total number of objects	total number of dimensions	EDR of gamma radiation, mSv/h (range of values)		number of measurements with excess of PL	total number of objects	total number of dimensions	EDR of gamma radiation, mSv/h (range of values)		number of measurements with excess of PL
		max	min				max	min	
1	2	3	4	5	6	7	8	9	10

table 9

radiation monitoring of scrap metal								number of measurements with excess of PL							
total number of objects	total number of dimensions	range of values													
		alpha-particles flow, cm2 /min		beta-particles flow, cm2/ min		gamma-radiation mSv/h									
		max	min	max	min	max	min								
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

table 10

industrial facilities using IRS										
total number of objects	total number of dimensions	gamma-radiation mSv/h		beta radiation, cm2/ min		alpha radiation, cm2/min		neutron radiation		number of measurements with excess of PL
		max	min	max	min	max	min	max	min	max
1	2	3	4	5	6	7	8	9	10	11

table 11

rooms for radiation diagnostics and therapy							
total number of objects	total number of x-ray measurements	total number of workplaces	x-ray radiation, mR/hour			number of measurements with excess of PL	completeness of workplaces, PPE
			max	min	average		
1	2	3	4	5	6	7	8

table 12

others (core rock, tableware, waste, sludge, etc.)					oil and refined products				
total samples	specific effective activity, Bq/kg			number of samples with excess of PL	total samples	specific total activity of natural radionuclides, Bq/kg			number of samples with excess of PL
	max	min	average			max	min	average	
1	2	3	4	5	6	7	8	9	10

table 13

mineral fertilizers						fertile material		
total samples	specific activity, Bq/kg			number of samples with excess of PL	total samples	of them 1 class of radiation hazard	of them 2 class of radiation hazard	of them 3 class of radiation hazard
	max	min	average					
1	2	3	4	5	6	7	8	9

table 14

building materials					wood raw materials							
total samples	of them 1 class of radiation hazard	of them 2 class of radiation hazard	of them 3 class of radiation hazard	total samples	strontium-90			cesium-137			number of samples with excess of PL	specific weight of samples with excess of PL
					max	min	average	max	min	average		
1	2	3	4	5	6	7	8	9	10	11	12	13

table 15

vegetation													number of samples with excess of PL
thorium-232				radium-226			strontium-90			caesium-137			
total samples	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 16

soil, ground, bottom sediments												
total samples	thorium-232			radium-226			potassium 40			caesium-137		
	max	min	average	max	min	average	max	min	average	max	min	average
1	2	3	4	5	6	7	8	9	10	11	12	13

table 17

tobacco and tobacco products										number of samples with excess of PL
total samples	total betta activity (Bq / kg)			strontium-90 (Bq/kg)			cesium-137 (Bq / kg)			
	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11

table 18

food products tested by the express method - medicinal plants (plant-based dietary supplements, dry teas and liquid balms, tinctures)							
total samples	express method (Bq/kg)						number of samples with excess of PL
	strontium-90			cesium-137			
	max	min	average	max	min	average	
1	2	3	4	5	6	7	8

table 19

food products studied by radiochemical method-Tea													number of samples with excess of HC
total samples	radiochemical studies (Bq/kg)												
	strontium-90			cesium-137			lead-210			radium-226			
	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 20

food products studied by radiochemical method-aromatic greens													number of samples with excess of HC
total samples	radiochemical studies (Bq/kg)												
	strontium-90			cesium-137			lead-210			radium-226			
	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 21

food products studied by radiochemical method-legumes													number of samples with excess of HC
total samples	radiochemical studies (Bq/kg)												
	strontium-90			cesium-137			lead-210			radium-226			
	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 22

food products studied by radiochemical method-vegetables, melons													number of samples with excess of HC
total samples	radiochemical studies (Bq/kg)												
	strontium-90			cesium-137			lead-210			radium-226			
	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 23

food products studied by radiochemical method-fish													number of samples with excess of HC
total samples	radiochemical studies (Bq/kg)												
	strontium-90			cesium-137			lead-210			radium-226			
	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 24

food products studied by radiochemical method-grain and cereals													number of samples with excess of HC
	radiochemical studies (Bq/kg)												
	strontium-90			cesium-137			lead-210			radium-226			
	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 25

food products studied by radiochemical method-bread													number of samples with excess of HC
total samples	radiochemical studies (Bq/kg)												
	strontium-90			cesium-137			lead-210			radium-226			
	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 26

food products studied by radiochemical method-milk													number of samples with excess of HC
total samples	radiochemical studies (Bq/kg)												
	strontium-90			cesium-137			lead-210			radium-226			
	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 27

food products studied by radiochemical method-meat													number of samples with excess of HC
total samples	radiochemical studies (Bq/kg)												
	strontium-90			cesium-137			lead-210			radium-226			
	max	min	average	max	min	average	max	min	average	max	min	average	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 28

food products by entrance control (express method)							number of samples with excess of PL
total samples	strontium-90 (Bq/kg)			caesium-137 (Bq/kg)			
	max	min	average	max	min	average	
1	2	3	4	5	6	7	8

table 29

	technical water, household water (irrigation, swimming pools, etc. not suitable for drinking)

total samples	radiochemical and spectrometric studies (BC / l)														
	uranium-238			thorium-232			radium-226			radium-228			strontium-90		
	max	min	average	max	min	average	max	min	average	max	min	average	max	min	average
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

table 30

technical water, household water (irrigation, swimming pools, etc. not suitable for drinking)												number of samples with excess HC by radionuclide composition	specific weight of samples with excess
caesium-137			lead -210			polonium -210			radon-222				
max	min	average	max	min	average	max	min	average	max	min	average		
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table 31

total samples	total samples studied for total alpha-beta activity	industrial spill water						number of samples with an excess of PL in total alpha-beta activity	total samples for radiochemical studies
		radiometric studies (total alpha and beta activity (Bq/l)							
		beta-activity			alpha-activity				
		max	min	average	max	min	average		
1	2	3	4	5	6	7	8	9	10

table 32

water for industrial spill, radiochemical studies (Bq/l)														
uranium-238			uranium-234			thorium-232			radium-226			radium-228		
max	min	average	max	min	average	max	min	average	max	min	average	max	min	average
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

table 33

industrial spill water														
strontium-90			cesium-137			lead-210			radon-222			polonium-210		
max	min	average	max	min	average	max	min	average	max	min	average	max	min	average
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

Continuation of the table

number of samples with excess HC by radionuclide composition	
min	average
16	17

table 34

		drinking water underground sources (wells, bottled)		number of samples	
		radiometric studies total alpha and beta activity (Bq/l)			

total samples	total samples tested for total alpha beta activity	beta-activity			alpha-activity			with an excess of PL in total alpha beta activity	total samples for radiochemical studies
		max	min	average	max	min	average		
1	2	3	4	5	6	7	8	9	10

table 35

drinking water underground sources (wells, bottled)														
radiochemical studies (Bq/kg)														
uranium-238			uranium-234			thorium-232			radium-226			radium-228		
max	min	average	max	min	average	max	min	average	max	min	average	max	min	average
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

table-36

drinking water underground sources (wells, bottled)														
radiochemical studies (Bq/kg)														
strontium-90			cesium-137			lead-210			radon-222			polonium-210		
max	min	average	max	min	average	max	min	average	max	min	average	max	min	average
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

table-37

total samples	total samples tested for total alpha-beta activity	open sources water (reservoirs)						number of samples with an excess of PL in total alpha-beta activity	total samples for radiochemical studies
		radiometric studies total alpha and beta activity (Bq/l)							
		beta-activity			alpha-activity				
		max	min	average	max	min	average		
1	2	3	4	5	6	7	8	9	10

table-38

open sources water (reservoirs)														
radiochemical, spectrometric studies (Bq/l)														
uranium-238			thorium-234			thorium-232			radium-226			strontium-90		
max	min	average	max	min	average	max	min	average	max	min	average	max	min	average
2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

table-39

technical water, household water (irrigation, swimming pools, etc. not suitable for drinking)											number of samples with excess of HC by	specific weight of sample
cesium-137			lead-210			polonium-210			radon-222			
max	min		max	min		max	min		max	min		

		averag e			averag e			averag e			averag e	radion uclide compo sition	s with excess
1	2	3	4	5	6	7	8	9	10	11	12	13	14

table-40

Total sample s	rainfall											
	radiometric studies (total alpha and beta activity) (Bq/l)						radiochemical studies					
	beta-activity			alpha-activity			strontium-90 (Bq/kg)			cesium-137		
	max	min	average	max	min	average	max	min	average	max	min	average
1	2	3	4	5	6	7	8	9	10	11	12	13

Continuation of the table

rainfall					
radiochemical studies					
lead -210 (Bq/kg)			Radium		
max	min	average	max	min	average
14	15	16	17	18	19

table-41

Total sample s	air											
	radiometric studies (total alpha and beta activity) (Bq/l)						radiochemical studies					
	beta-activity			alpha-activity			strontium-90 (Bq/kg)			cesium-137		
	max	min	average	max	min	average	max	min	average	max	min	average
1	2	3	4	5	6	7	8	9	10	11	12	13

Continuation of the table

air					
radiochemical studies					
lead -210 (Bq/kg)			radium		
max	min	average	max	min	average
14	15	16	17	18	19

table 42

								radiation monitoring equipment			
spectrometers						gamma-spectro-radiometer			small background radiometer		
Beta activity			“Progress-Alpha”			"RUG" satellite			"UMF-2000"		
quantity availabl e	of them unused	reason f o r non-use	quantity availabl e	of them unused	reason f o r non-use	quantity availabl e	of them unused	reason f o r non-use	quantity availabl e	of them unused	reason f o r non-use
1	2	3	4	5	6	7	8	9	10	11	12

Continuation of the table

radiation monitoring equipment	dosimeters of x-ray radiation

search dosimeters											
"RRP-01"			"DKS-96"			"DRG-01T1"			"DRK-01"		
quantity available	of them unused	reason for non-use	quantity available	of them unused	reason for non-use	quantity available	of them unused	reason for non-use	quantity available	of them unused	reason for non-use
13	14	15	16	17	18	19	20	21	22	23	24

table 43

radiation monitoring equipment											
radon measurement radiometers											
ramon-01			ramon-radon-01			ramon-radon-02			RRA-01		
quantity available	of them unused	reason for non-use	quantity available	of them unused	reason for non-use	quantity available	of them unused	reason for non-use	quantity available	of them unused	reason for non-use
1	2	3	4	5	6	7	8	9	10	11	12

Continuation of the table

				auxiliary equipment		
				quantity		
aspiration sampling device		photocolometer				
quantity available	reason for non-use	of them unused	reason for non-use	quantity available	of them unused	reason for non-use
13	14	15	16	17	18	19

Note ***: Lack of research objects - 1; Lack of load on equipment - 2; Lack of specialists - 3; Lack of methodology - 4; Lack of consumables - 5

Appendix 5
to the Rules
for conducting
sanitary-epidemiological
monitoring

Monitoring of occupational diseases and poisonings

1. Form of sanitary-epidemiological monitoring of occupational morbidity and poisonings in the Republic of Kazakhstan for_____20___year (annual report)

№	name of the territory	total cases		including (abs. number)							
				by type				by action			
				occupational diseases		occupational poisonings		acute		chronic	
		reporting period of the current year	the same period of last year	reporting period of the current year	the same period of last year	reporting period of the current year	the same period of last year	reporting period of the current year	the same period of last year	reporting period of the current year	the same period of last year

	1	2	3	4	5	6	7	8	9	10	11
	Total										

Continuation of the table

including (abs. number)				occupational morbidity rate per 10 thousand employees (%)		note
according to severity						
without disability		with disability				
reporting period of the current year	the same period of last year	reporting period of the current year	the same period of last year	reporting period of the current year	the same period of last year	
12	13	14	15	16	17	18

Note:

1) at the district and city levels - in the context of settlements, by name and object;

2) at the regional level - in the context of districts and cities of regional significance , Almaty and Astana;

3) at the republican level - in the context of oblasts, cities of Almaty and Astana, central transport;

4) additionally, in the text part after the table, information on nosological forms is presented.

Appendix 6
to the Rules
for conducting
sanitary-epidemiological
monitoring

Monitoring of researches on various infections 1. The procedure for researches on bacterial infections

nosology	object of research	material for research	types of researches	method of research	material sampling (indications, time, multiplicity)
typhoid fever, paratyphoid fever	patient, contact in the focus of infection	blood	isolation of bacteria, antibodies	bacteriological, serological (Vidal reaction, direct hemagglutination reaction)	by epidemiological evidence, when registering a case
		bile	isolation of bacteria	bacteriological, genetic-molecular , automated	by epidemiological evidence, when registering a case
		urine	isolation of bacteria	bacteriological, genetic-molecular , automated	by epidemiological evidence, when registering a case
					by epidemiological

		sectional material	isolation of bacteria	bacteriological, genetic-molecular, automated	evidence, when registering a case followed by death
	environmental objects (focus of infection, water supply, food, trade, etc.)	water, flushings	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case
salmonellosis	patient, contact in the focus of infection	blood	isolation of bacteria, antibodies	bacteriological, serological (Vidal reaction, direct hemagglutination reaction)	(a patient with a suspected disease with the aim of etiological decoding of group diseases/ poisonings)
		bile	isolation of bacteria	bacteriological, genetic-molecular	
		urine	isolation of bacteria	bacteriological, genetic-molecular, automated	
		sectional material	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case followed by death
	environmental objects (focus of infection, water supply, food, trade, etc.)	(water, food remains, flushings)	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case
dysentery and other intestinal infections	patient, contact in the focus of infection	blood, paired sera	isolation of bacteria, antibodies	bacteriological, serological (Vidal reaction, direct hemagglutination reaction)	by epidemiological evidence, when registering a case (a patient with a suspected disease with the aim of etiological decoding of group diseases)
		wash water	isolation of bacteria	bacteriological, genetic-molecular, automated	
		vomit	isolation of bacteria	bacteriological, genetic-molecular, automated	
		fecal matters	isolation of bacteria	bacteriological, genetic-molecular, automated	
		sectional material	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case followed by death
	persons entering boarding schools, orphanages and				when applying for boarding schools,

	children's homes, as well as boarding houses for the elderly and disabled	fecal matters	isolation of bacteria	bacteriological, genetic-molecular, automated	children's homes and orphanages, boarding houses for the elderly and disabled
	environmental objects (focus of infection, water supply, food, trade, etc.)	water, food remains, flushings	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case
other bacterial food poisoning (including botulism)	patient, contact in the focus of infection	vomit	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case (a patient with a suspected disease with the aim of etiological decoding of group diseases)
		wash water	isolation of bacteria	bacteriological, genetic-molecular, automated	
		urine	isolation of bacteria	bacteriological, genetic-molecular, automated	
		fecal matters	isolation of bacteria	bacteriological, genetic-molecular, automated	
		blood, paired sera	isolation of bacteria, antibodies	бактериологический	
		sectional material	isolation of bacteria	bacteriological, genetic-molecular, automated	
	environmental objects (food, trade, etc.)	flushings	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case
		food remains	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case
meningococcal infection, purulent meningitis	patient	a swab from the nasopharynx, cerebrospinal fluid	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case (a patient with a suspected disease with the aim of etiological decoding of diseases)
	contact in the focus of infection	a swab from the nasopharynx	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case

дифтерия diphtheria	patient	swabs from the nose and pharynx, affected parts of the skin	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case
	contact in the focus of infection	swabs from the nose and pharynx, affected parts of the skin	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case
	persons entering children's homes (orphanages)	swabs from the nose and pharynx	isolation of bacteria	bacteriological, genetic-molecular, automated	upon admission to children's homes (orphanages)
pertussis	contact in the focus of infection who had a history of coughing or has a cough	mucus from the upper respiratory tract	isolation of bacteria	bacteriological, genetic-molecular, automated	by epidemiological evidence, when registering a case, 2 times with an inteRWal of 1 day
		cough plates	isolation of bacteria	bacteriological, genetic-molecular, automated	
		blood, paired sera	isolation of antibodies	serological	

2. The procedure for researches on HAI

nosology	object of research	material for research	types of researches	method of research	material sampling (indications, time, multiplicity)
		flushings from environmental objects	isolation of bacteria	bacteriological	according to epidemiological indications, during scheduled inspections
		flushings from environmental objects	isolation of helminths	Parasite bacteriological	according to epidemiological indications, during scheduled inspections
		sterile suture, dressing and other materials	isolation of bacteria	bacteriological	according to epidemiological indications, during scheduled inspections
		sterile medical instruments	isolation of bacteria	bacteriological	according to epidemiological indications, during scheduled inspections
		sterile underwear			according to epidemiological

			isolation of bacteria	bacteriological	indications, during scheduled inspections
	environmental objects in a healthcare organization	sterile wipes for drying the hands of medical personnel	isolation of bacteria	bacteriological	according to epidemiological indications, during scheduled inspections
		medicinal products	isolation of bacteria	bacteriological	according to epidemiological indications, during scheduled inspections
		newborn care items	isolation of bacteria	bacteriological	according to epidemiological indications, during scheduled inspections
		breast milk, liquid for drinking a newborn	isolation of bacteria	bacteriological	according to epidemiological indications, during scheduled inspections
		disinfection and sterilization equipment - bactests and biotests	isolation of bacteria	bacteriological	according to epidemiological indications, during scheduled inspections
		indoor air	isolation of bacteria, total microbial contamination	bacteriological	according to epidemiological indications, during scheduled inspections
HAI	a sick/ a patient with wound infection	wound discharge	isolation of bacteria	bacteriological, genetic-molecular, automated	according to epidemiological indications
		swabs from the nose, pharynx	isolation of bacteria, вирусов viruses	bacteriological, virological	according to epidemiological indications
		infectious agent (microorganism)	setting the sensitivity to antibiotics	bacteriological, automated	according to epidemiological indications
	staff of a healthcare organization	swabs from the nose, pharynx	isolation of bacteria	bacteriological	according to epidemiological indications
		hands after treatment	isolation of bacteria	bacteriological	according to epidemiological indications

		biological fluids and excretions (blood, sputum, urine, fecal matters, etc.)	isolation of bacteria, вирусов	bacteriological, virological	according to epidemiological indications
	a sick/a patient in a healthcare organization	swabs from the nose, pharynx	isolation of bacteria	bacteriological, genetic-molecular , automated	according to epidemiological indications
		biological fluids and excretions (blood, sputum, urine, fecal matters, etc.)	isolation of bacteria, вирусов	bacteriological, genetic-molecular , automated	according to epidemiological indications
		operating field of the patient after treatment	isolation of bacteria	bacteriological	according to epidemiological indications, during scheduled inspections
		infectious agent (microorganism)	setting the sensitivity to antibiotics	bacteriological, automated	according to epidemiological indications

3. Procedure for researches on viral infections

nosology	object of research	material for research	types of researches	method of research	material sampling (indications, time, multiplicity)
flu and other acute respiratory viral infections	patient	swabs from the pharynx and nose , sectional material	isolation of the flu virus	virological	when when registering the disease in at least 10 patients with ARWI, flu from October 1 to May 1 annually
			detection of antigens	fluorescence microscopy	
			detection of RNA and DNA virus	molecular genetic (polymerase chain reaction)	
	patient	fecal matter, liquor*, sectional material	isolation of the virus	virological	when registering the disease 2 times with an inteRWal of 24-48 hours
		blood serum	detection of antigens	serological	when registering the disease 2 times with an inteRWal of 3-5 days
	contact from the focus of infection	fecal matters	isolation of the virus	virological	when registering the disease 2 times with an

poliomyelitis					inteRWal of 24-48 hours
AFP (acute flaccid paralysis)	patient	fecal matters	isolation of the virus	virological	when registering the disease 2 times with an inteRWal of 24-48 hours
	contact from the focus of infection	fecal matters	isolation of the virus	virological	when registering the disease 1 time
enteroviruses	patient	fecal matters, liquor	isolation of the virus	virological	when registering cases
			detection of RNA virus	molecular genetic (polymerase chain reaction)	when registering cases
	drains, sewage system	sewage water	isolation of the virus	virological	according to epid indications, once a month during the epidemic season
			detection of RNA virus	molecular genetic (polymerase chain reaction)	according to epid indications, once a month during the epidemic season
	water supply system	drinking water	isolation of the virus	virological	according to epid indications, once a month during the epidemic season
			detection of RNA virus	molecular genetic (polymerase chain reaction)	according to epid indications, once a month during the epidemic season
	open reservoirs (designated water use areas, including bathing), swimming pools	water of open reservoirs, swimming pools	isolation of the virus	virological	according to epid indications, once a month during the epidemic season
			detection of RNA virus	molecular genetic (polymerase chain reaction)	according to epid indications, once a month during the epidemic season
	water supply system	drinking water	isolation of the virus	virological	according to epid indications, when registering cases
			detection of RNA virus	molecular genetic (polymerase chain reaction)	according to epid indications, when registering cases

viral hepatitis A	open reservoirs (recreation area, designated water use areas, including bathing)	water of open reservoirs	isolation of the virus	virological	according to epidemiological indications, planned once a month from June to September
			detection of RNA virus	molecular genetic (polymerase chain reaction)	according to epidemiological indications, planned once a month from June to September
	swimming pools	water of swimming pools	isolation of the virus	virological	according to epidemiological indications, during scheduled inspections
			detection of RNA virus	molecular genetic (polymerase chain reaction)	according to epidemiological indications, during scheduled inspections
viral hepatitis B, D, C	contact from the focus of infection	blood components (blood serum, plasma)	detection of antigen/ antibodies to hepatitis virus B, C, D	serological (enzyme-linked immunosorbent assay)	according to epidemiological indication, when registering a case
			detection of DNA of hepatitis virus B, C, D (qualitative analysis)	molecular genetic (polymerase chain reaction)	according to epidemiological indication, when registering a case
			identification and differentiation of hepatitis B and C virus genotypes	molecular genetic (polymerase chain reaction)	according to epidemiological indication, when registering a case
	object-focus when the disease is associated with the object	medical, cosmetology tools	presence of blood residues	chemical - asupernova sample	according to epidemiological indication, when registering a case
			sterility	bacteriological	according to epidemiological indication, when registering a case
viral hepatitis E	contact from the focus of infection	blood components (blood serum, plasma)	IgM class immunoglobulins for hepatitis E virus	serological (enzyme-linked immunosorbent assay)	according to epidemiological indication, when registering a case
				antigenic method (enzyme-linked	according to epidemiological

Rota, Noro, astroviruses	patient	fecal matters	detection of rotavirus antigen	immunosorbent assay)	indication, when registering a case
			detection of RNA of rotavirus, noravirus, astrovirus (qualitative analysis)	molecular genetic (polymerase chain reaction)	according to epidemiological indication, when registering a case
	drains, sewage system	wastewater	detection of rotavirus antigen	antigenic method (enzyme-linked immunosorbent assay)	once a month during the epidemic season
			detection of RNA of rotavirus, noravirus, astrovirus (qualitative analysis)	molecular genetic (polymerase chain reaction)	once a month during the epidemic season
	water supply system	drinking water	detection of rotavirus antigen	antigenic method (enzyme-linked immunosorbent assay)	according to epidemiological indications, planned – once a month during the epidemic season
			detection of RNA of rotavirus, noravirus, astrovirus (qualitative analysis)	molecular genetic (polymerase chain reaction)	according to epidemiological indications, planned – once a month during the epidemic season
	open reseRWoir	water of open reservoirs	detection of rotavirus antigen	antigenic method (enzyme-linked immunosorbent assay)	according to epidemiological indications, planned – once a month during the epidemic season
			detection of RNA of rotavirus, noravirus, astrovirus (qualitative analysis)	molecular genetic (polymerase chain reaction)	according to epidemiological indications, planned – once a month during the epidemic season
	swimming pool	water of swimming pools	detection of rotavirus antigen	antigenic method (enzyme-linked immunosorbent assay)	according to epidemiological indications, during scheduled inspections
			detection of RNA of rotavirus, noravirus, astrovirus (		according to epidemiological

			qualitative analysis)	molecular genetic (polymerase chain reaction)	indications, during scheduled inspections
measles	patient	blood components (blood serum, plasma)	IgM class immunoglobulin antibodies	serological (enzyme-linked immunosorbent assay)	when registering a case
			IgG class immunoglobulin antibodies		
		urine	isolation of measles virus	virological, sequencing	when registering a case
rubella	patient	blood components (blood serum, plasma)	IgM class immunoglobulin antibodies	serological (enzyme-linked immunosorbent assay)	when registering a case
			IgG class immunoglobulin antibodies		
			antibodies of immunoglobulin class IgG-avidity		
		urine	isolation of rubella virus	virological, sequencing	when registering a case

4. External quality assessment of researches on bacterial infections

nosology	material for confirmation	types of researches	research method for confirmation	transportation of cultures from CSEE of regions, Astana, Almaty to the reference laboratory
typhoid fever, paratyphoids	salmonella typhi, Salmonella paratyphi A,B		bacteriological, molecular genetic, serological	all cultures from the sick, and the environment
salmonellosis	salmonella spp.	bacteriological	bacteriological, molecular genetic, serological	5 cultures from the environment, and patients
dysentery and other intestinal infections	shigella spp.		bacteriological, molecular genetic, serological	5 cultures from the environment, and patients
	listeria monocytogenes	bacteriological	bacteriological, molecular genetic	all cultures from the sick, and the environment
	campylobacter spp.		bacteriological, molecular genetic	all cultures from the sick, and the environment
	yersinia spp.	bacteriological	bacteriological, molecular genetic	all cultures from the sick, and the environment

	vibriospp.		bacteriological, molecular genetic	all cultures from the sick, and the environment
airborne infections	clinical sample, environmental samples positive for neisseria meningitidis	bacteriological	molecular genetic	5 samples from the environment, and patients
	bordetella spp., (clinical sample)		bacteriological, molecular genetic	5 samples from patients
	corynebacterium diphtheriae	bacteriological	bacteriological, molecular genetic	5 samples from patients
	haemophilus influenza		bacteriological, molecular genetic	5 samples from patients
	streptococcus pneumoniae	bacteriological	bacteriological, molecular genetic	5 samples from patients
causative agents of nosocomial infections (nosocomial infection)	antibiotic-resistant strain of the microorganism isolated from the patient (s) with suspected nosocomial infections		bacteriological, disco-diffusion, semi-quantitative, automated	all cultures from the sick
causative agents of various localization	antibiotic-resistant strain of the microorganism	bacteriological	bacteriological, disco-diffusion, semi-quantitative, automated	5 samples from patients

5. External quality assessment of researches on viral infections

nosology	material for confirmation	types of researches	research method for confirmation	transportation of cultures from CSEE (center of sanitary and epidemiological expertise) of regions, Astana, Almaty to the reference laboratory
flu and other ARWI	swabs from pharynx and nose	isolation of the flu virus	virological	all samples with positive results/ isolates from patients during the year
		detection of RNA virus	molecular genetic (polymerase chain reaction)	all samples with positive and 5 samples with negative results for influenza from patients during the year
				professional testing is conducted once a year

enteroviruses	fecal matters, liquor	isolation of the virus	virological	all samples with positive poliovirus results from patients during the year
				2 samples with positive results/ isolates for viruses: Coxsackie, adenoviruses and Echo from patients, once a year
	sewage water	isolation of the virus	virological	all samples with positive poliovirus results during the year
				2 samples with positive results/ isolates for viruses: Coxsackie and Echo from patients, once a year
	suspensions	isolation of the virus	virological	professional testing is conducted once a year
viral hepatitis B and C	blood serum	detection of antigen/ antibodies to hepatitis B, C virus	serological (enzyme-linked immunosorbent assay)	5 samples with positive results and 5 samples with negative results for HBsAg antigen from patients during the year
				5 samples with positive results and 5 samples with negative results for anti - HCV total from patients during the year
measles	blood serum	immunoglobulin antibodies of IgM class	serological (enzyme-linked immunosorbent assay)	all samples with positive results and 10% of samples with negative results for measles IgM IgM, monthly
				professional testing is conducted once a year
				5 samples with positive results and 10 samples with negative results for

rubella	blood serum	immunoglobulin antibodies of IgM class	serological (enzyme-linked immunosorbent assay)	rubella virus IgM during the year
				professional testing is conducted once a year
rotavirus infection	fecal matters	detection of antigens	serological (enzyme-linked immunosorbent assay)	5 samples of native material from patients and environmental objects positive for Rota-antigen, 5 samples of native material from patients and environmental objects negative for Rota-antigen, during the year
	environmental samples			

6. Procedure for researches on EDI

nosology	object of research	material for research	types of researches	method of research	material sampling (indications, time, multiplicity)
	patient, contact in the focus of infection	fecal matters	isolation of bacteria, antibodies	bacteriological	by epidemiological indication, when registering a case
		sectional material	isolation of bacteria	bacteriological	by epidemiological indication, when registering a case followed by death
					depending on the classification of territories * during the epidemiol

	patients with severe forms of acute intestinal infections	fecal matters	isolation of bacteria	bacteriological	ogical season (three times), during the rest of the year by epidemiological indications (once) (PES, branches of the NCE)
cholera	patients with mild and moderate acute intestinal infections	fecal matters	isolation of bacteria	bacteriological	depending on the classification of territories * during the epidemiological season (once), during the rest of the year according to epidemiological indications (PSP, branches of the NCE)
	died from acute intestinal infections of unknown etiology	cadaveric material	isolation of bacteria	bacteriological	During the year (PSP, branches of NCE)
	persons entering institutions of special treatment, social rehabilitation,				upon admission, according to epidemiological indications (once) depending

	psychoneurological dispensaries, and persons without a specific place of residence and work	fecal matters	isolation of bacteria	bacteriological	on the classification of territories * (medical organizations, branches of NCE)
	open water reseRWoir (sanitary protection zone of water intake for centralized drinking water supply, places of water use for drinking), recreation area (places of mass recreational water use)	water	isolation of bacteria	bacteriological	at a water temperature of at least 16 ° C once every 10 days (PES, branches of NCE)
	swimming pools, fountains	water	isolation of bacteria	bacteriological	according to epidemiological indications
	drains	waste water	isolation of bacteria	bacteriological	depending on the classification of territories * May - October once in 10 days, according to epidemiological indications (PES, affiliates of NCE
anthrax	material from the foci of anthrax	farm animal feed, bedding, water	farm animal feed, bedding, water	bacteriological, serological, genetic, bioassay	by epidemiological evidence, when registering a case
	samples from environmental		bacteriological,	by epidemiological indication	

	objects (from SPS)	soil, water	bacteriological, serological, genetic, bioassay	serological, genetic, bioassay	, when registering a case
	material from people suspected of anthrax	blood, detachable ulcers, pathological material	bacteriological, serological, genetic, bioassay	bacteriological, serological, genetic, bioassay	by epidemiological indication, when registering a case
brucellosis	contact persons with sick cattle	blood	serological reactions	serological	by epidemiological indication, when registering a case
	material from brucellosis foci (animal products, samples from places where livestock are kept)	livestock products, livestock feed, litter, water, manure	bacteriological, serological, genetic, ring test	bacteriological, serological, genetic, ring test	by epidemiological indication, when registering a case
pasteurellosis	material from foci of pasteurellosis	livestock products, vegetables	serological, bacteriological, bioassay	serological, bacteriological, bioassay	by epidemiological indication, when registering a case
	material from people	blood, detachable wounds, pathological material	serological, bacteriological, bioassay	serological, bacteriological, bioassay	by epidemiological indication, when registering a case
	rodents	rodents	serological, bacteriological, bioassay	serological, bacteriological, bioassay	by epidemiological indication, when registering a case
	territory of natural				by epidemiol

	foci (environmental objects)	excrements, pellets, mites, rodents, water, other objects of external environment	serological, bacteriological, bioassay	serological, bacteriological, bioassay	ogical indication, when registering a case
tularemia	material from the epidemic foci of tularemia	excrements, pellets, mites, rodents, water, other objects of external environment	serological, bacteriological, bioassay	serological, bacteriological, bioassay	by epidemiological indication, when registering a case
	material from people	blood, pathological material	serological, bacteriological, bioassay	serological, bacteriological, bioassay	by epidemiological indication, when registering a case
listeriosis	material from the epidemic foci of listeriosis (environmental objects)	meat and dairy products, vegetables	serological, bacteriological	serological, bacteriological	by epidemiological indication, when registering a case
	material from people, including for preventive purposes	blood, urine, pathological material	serological, bacteriological	serological, bacteriological	by epidemiological indication, when registering a case
yersiniosis	material from foci of yersiniosis (environmental objects)	vegetables, flushings	serological, bacteriological	serological, bacteriological	by epidemiological indication, when registering a case
	territory of natural foci (	ticks, water, and other environmental objects	serological	serological	by epidemiological indication

leptospirosis	environmental objects)				, when registering a case
	material from the epidemic foci of leptospirosis (environmental objects)	ticks, water, and other environmental objects	serological	serological	by epidemiological indication, when registering a case
rickettsioses (Q fever, tick-borne typhus, rat typhus, Brill's disease)	territory of natural foci (source of infection, carriers)	rodents, ticks, lice	serological	serological	by epidemiological indication, when registering a case
	material from epidemic foci of rickettsiosis (source of infection, carriers)	rodents, ticks, lice	serological	serological	by epidemiological indication, when registering a case
viral hemorrhagic fevers (CCHF), tick-borne encephalitis	material from people	blood, pathological material, excreta	serological, genetic	serological, genetic	by epidemiological indication, when registering a case
	material from the epidemic focus of CVHL (carriers)	ticks	serological, genetic	serological, genetic	by epidemiological indication, when registering a case
	material from the epidemic focus of legionellosis (	water for swimming pools, cooling systems	genetic	genetic	by epidemiological indication

	environmental objects)				, when registering a case