

**MUHIMBILI UNIVERSITY OF HEALTH
AND ALLIED SCIENCES
(MUHAS)**



**INSTITUTE OF ALLIED HEALTH
SCIENCES
SCHOOL OF HYGIENE**

**SHORT COURSE ON HEPATITIS B AND C
PREVENTION, CONTROL, AND SCREENING OF
PEOPLE IN HIGH-RISK AREAS.**

COURSE AIM AND OBJECTIVES

Participants in healthcare facilities are vulnerable to Hepatitis B and C infection, due to frequent patient interactions, exposure to body fluids, and handling of sharp objects. A recent study in Tanzania at MMRH revealed a high prevalence of occupational exposure to blood and body fluids among healthcare workers. Notably, 78% of participants reported exposure to particular diseases at some point in their careers, and 71% had been exposed in the past 12 months. Sharp objects, injuries, droplets, and splashes were the primary causes of these exposures. (<https://journal.muhas.ac.tz/index.php/eiph/article/view/35>).

Regarding the above situation of the great danger of infection of the above diseases, the School of Hygiene under the IAHS department in Muhimbili University of Health intends to provide education on the prevention and control of hepatitis B and C diseases stated above, with a special focus to healthcare personnel and other working at High-Risk

At the end of this training, participants will be able to;

- ✦ Understand the epidemiology and transmission dynamics of hepatitis B and C.
- ✦ Learn effective screening methods for early detection of hepatitis B and C infections.
- ✦ Gain knowledge of treatment options and management approaches for hepatitis B and C.
- ✦ Enhance professional skills to improve performance and efficiency in high-risk environments.
- ✦ To understand prevention and control measures

FACILITATORS

Expert trainers from Muhimbili University will guide participants through hepatitis screening, prevention, and control, covering epidemiology, diagnosis, and treatment to Learning Objectives.

INTENDED PARTICIPANTS (ToTs AND OTHER INTERESTED PARTIES)

Join us for a specialized one-week course on Hepatitis B & C Screening, Prevention, and Control tailored for Healthcare Workers (HCWs), Traffic Police Officers, University Students, Health Attendants/Orderlies, and others in high-risk roles.

All health care professionals (Nurses, HO, MD, CO, BME, Lab. Technicians, Radiologists, etc. (ToTs), and others such as Form IV & VI leavers, University students, Police officers, fire rescue attendants, assistant Health workers, Cemetery workers, Community health workers, health and mortuary attendants, and other related groups are welcoming.

COURSE METHODOLOGY

- The course will use participatory learning techniques.
- The dynamic sessions include short introductory presentations, discussions, group work, case studies, and practical exercises
- Training materials will be in English and Swahili.
- Both English and Swahili will ensure that everyone (participants) meets our goal.

VENUE: MUHAS, DAR ES SALAAM

- Traveling and Accommodation costs
- Per-diem, Travel, and Accommodation costs will have to be borne by the participants.
- **MUHAS will only cover lunch and breakfast for the course.**

COURSE DURATION

The course will run for one week (**6 days**) from **21/10/2024 to 26/10/2024 (ToTs and others separately)**. A certificate of completion with CPD points will be provided at the end of the course. Participants are encouraged to attend the course in full. **at MUHAS, DAR ES SALAAM**

COURSE FEES

The fees for this phase are **Tsh. 400,000/=** Tsh, per participant for the course while Foreigners is **USD 300**. The fees for the locals should be deposited at the MUHAS NMB account, Muhimbili Branch, Account number 20901100002 after being given a control number for the payment while for Foreigners be via **MUHAS NBC** account, Samora Branch, Account number **012105003582**. The applicant should scan and submit payment in a slip at least one week before the commencement of the course.

APPLICATION PROCEDURES

The prospective applicants must fill in the application form on www.muhas.ac.tz (attached here to be downloaded). The duly filled **application form, CV, and other accompanying information/attachments i.e., Form IV/VI Certificate, Diploma, Advanced diploma, and degree certificates or equivalent in health-related fields** should be submitted to the course director via contact details indicated below; -The closing date for receiving applications is **15th October 2024**.

All application letters/forms should be addressed to;
Ms. Maryam A. Khamis
Course Director School of Hygiene –Muhimbili
P.O. Box 65005 DSM.

Please send your application electronically using the following
E-mails: maryam.khamis@muhimbilicohas.ac.tz,
khamismaryam80@gmail.com, nuru.nkona@muhimbilicohas.ac.tz

For further information and verification, please use the contact (direct call or WhatsApp) via **Tel. 255 654 525 179 or 0625879354 or 0685225275.**



INSERT YOUR
PASSPORT SIZE
PHOTOGRAPH

HERE

**MUHIMBILI UNIVERSITY OF HEALTH AND ALLIED SCIENCES
SCHOOL OF PUBLIC HEALTH
INSTITUTE OF ALLIED HEALTH SCIENCES**

**APPLICATION FORM FOR THE SHORT COURSE TRAINING ON SCREENING, PREVENTION,
AND CONTROL OF HEPATITIS B AND C IN HIGH-RISK AREAS
FROM 21ST TO 26TH October 2024**

*(Please read carefully the advertisement and instructions before filling this form.
The deadline for receiving the application is 14th October 2024)*

1.0 PERSONAL PARTICULARS

- 1.1 FULL NAME
- 1.2 SEX: MALE [] FEMALE []
- 1.3 DATE OF BIRTH.....
- 1.4 PLACE OF BIRTH:
COUNTRY..... REGION DISTRICT.....
- 1.5 PLACE OF RESIDENCE:
COUNTRY REGION DISTRICT.....
- 1.6 RELIGION:
- 1.7 MARITAL STATUS (Tick appropriately):
1.7.1 Married
1.7.2 Not Married
- 1.8 POSTAL ADDRESS:
- 1.9 PHONE NUMBER:
- 1.10 EMAIL ADDRESS.....

2.0 EDUCATION (Tick):

- Diploma in Environmental Health [] Diploma in Radiology [] Diploma in Laboratory
Science [] Diploma in Clinical Officer [] Diploma in Pharmacy [] Diploma in Biomedical
Engineering [] Degree of Doctor of Medicine [] B.Sc. Environmental Health Sciences []
Degree of Pharmacy [] Degree in Radiology [] Degree in Laboratory Science [] Degree
in Nursing/Midwifery [] Degree in Biomedical Engineering [] Form VI leaver [] Form IV
Leaver [] Other []

3.0 OCCUPATION (Tick Appropriately)

- 3.1 Nurses []
- 3.2 Clinical Officers []
- 3.3 Medical Doctors []
- 3.4 Health Officers []
- 3.5 Pharmacy tech/assistants []
- 3.6 Lab-technician/scientist []
- 3.7 Biomedical engineer []
- 3.8 Radiologist []
- 3.9 Health Attendant/ Orderly []
- 3.10 Other (Mention []

4.0 COURSE FEE: WHO WILL PAY FOR THE FEES OF THIS COURSE?

- 4.1 Self-sponsored []
- 4.2 Relative []
- 4.3 Employer []
- 4.4 Other (Mention) []

Details about the sponsorship

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5.0 DECLARATION

I hereby declare that the above information provided is true and correct to the best of my knowledge.

Signature..... **Date**