

# Ministerial Resolution

Number 2010

December 20, [Illegible year)

## WHEREAS AND CONSIDERING:

Whereas paragraph I of Article 35 of the Political Constitution of the State establishes that the State, at all its levels, shall protect the right to health, promoting public policies aimed at improving quality of life, collective well-being, and free access of the population to health services.

Whereas item 1 of paragraph I of Article 81 of Act number 031 of July 19, 2010, the *Framework Act on Autonomies and Decentralization Andrés Ibáñez*, provides that one of the competencies of the central level of the State is the formulation of the national health policy and national regulations governing the operation of all sectors, areas, and practices related to health.

Whereas Article 3 of the Health Code, approved by Decree Act Number 15629 of July 18, 1978, establishes that it is the responsibility of the Executive Branch, through the current Ministry of Health, which this Code refers to as the Health Authority, to define national health policy, regulation, planning, control, and coordination of all activities throughout the national territory, in public and private institutions without exception.

Whereas subsection f) of Article 90 of Supreme Decree Number 29894 of February 7, 2009, regarding the *Organizational Structure of the Executive Branch of the Plurinational State*, establishes that one of the powers of the Minister of Health is to formulate, develop, supervise, and evaluate the implementation of the health care model.

Whereas, by means of Technical Report MSD/DGP/SNIS-VE/II/0274/2013 of October 29, 2013, the National Officer for First-Level Service Production, through the National Coordinator of SNIS-VE (National Health Information System – Epidemiological Surveillance, by its acronym in Spanish) and the Director General of Planning, informed the Minister of Health and Sports that, once the process of review, updating, and validation of all instruments for data collection, systematization, and consolidation of information of the SNIS-VE (National Health Information System – Epidemiological Surveillance) had been concluded, with the participation of stakeholders at the national and departmental levels, including operational personnel from health networks and establishments, during the “Final Validation Workshop of the SNIS-VE (National Health Information System – Epidemiological Surveillance) Instruments” held in the city of Cochabamba on September 12 and 13, 2013, it was intended to formalize their application for the subsequent 2014–2018 period, for which purpose a ministerial resolution authorizing the application of the new SNIS-VE (National Health Information System – Epidemiological Surveillance) instruments was required.

Whereas, by means of Internal Memorandum MSD/DGP/SNIS-VE/NI/1650/2013 of October 29, 2013, the National Coordinator of SNIS-VE (National Health Information System – Epidemiological Surveillance), through the Director General of Planning, requested from the Minister of Health and Sports the corresponding authorization and instruction to the Directorate General of Legal Affairs for the drafting of the Ministerial Resolution approving these new instruments, which shall be implemented as of fiscal year 2014.

## THEREFORE:

The Minister of Health, in exercise of the powers conferred upon him by Supreme Decree Number 29894 of February 7, 2009, regarding the Organizational Structure of the Executive Branch of the Plurinational State;

## RESOLVES:

**ARTICLE ONE.-** To order the entry into force of the following SNIS-VE (National Health Information System – Epidemiological Surveillance) information collection, systematization, and consolidation instruments, duly adapted and updated for the 2014–2018 period, throughout the National Health System.

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Doctor Bustillo  
Director of Legal Affairs  
Minister of Health and  
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## DATA COLLECTION INSTRUMENTS:

- Basic Medical Record, RA-SALUD INE 101
- Perinatal Medical Record
- Maternal Health Card
- Child Health Card
- Certificado Médico de Defunción CEMED (Medical Death Certificate, CEMED), RA-SALUD INE 102
- Certificado Médico de Defunción Perinatal CEMEDEP (Perinatal Medical Death Certificate, CEMEDEP), RA-SALUD INE 104
- Certificado Médico del Nacido Vivo CEMENAVI (Medical Certificate of Live Birth, CEMENAVI), RA-SALUD INE 105

## SYSTEMATIZATION INSTRUMENTS:

- Modulo de Información Básica (Basic Information Module), RA-SNIS MIB 200
- Family File
- Cuaderno Número 1, Consulta Externa, Emergencias y Enfermería (Notebook Number 1, Outpatient Care, Emergencies and Nursing), RA-SALUD INE 201
- Cuaderno Número 2, Atención Integral al Menor de 5 años, (Notebook No. 2, Comprehensive Care for Children Under Five), RA-SALUD INE 202
- Cuaderno Número 3, Control Prenatal, Parto, Puerperio, Planificación Familiar y Prevención del Cáncer Uterino, (Notebook No. 3, Prenatal Care, Delivery, Postpartum, Family Planning and Cervical Cancer Prevention), RA-SALUD INE 203
- Cuaderno Número 4, Consulta Odontológica (Notebook No. 4, Dental Care), RA-SALUD INE 204
- Cuaderno Número 5, Internaciones (Notebook No. 5, Hospitalizations), RA-SALUD INE 205
- Cuaderno Número 6, Actividades con el Personal de Salud y la Comunidad (Notebook No. 6, Activities with Health Personnel and the Community), RA-SALUD INE 206
- Daily Hospital Registration Sheets: General Medicine or Internal Medicine Outpatient Care, Pediatrics Outpatient Care, Gynecology-Obstetrics Outpatient Care, Dental Outpatient Care, and Daily Emergency Log.
- Evaluation Instruments: Management and Biosafety of Solid Waste Generated in Health Facilities: Form H+35, Form H-35, Large Laboratory Form, Ambulatory Form, Small Laboratory Form.

## CONSOLIDATION INSTRUMENTS:

- Service Production Form, RA-SALUD 301a
- Service Production Form for Level II and III Health Facilities, RA-SALUD 301b
- Epidemiological Surveillance Form, RA-SALUD INE 302a and 302b
- Laboratory Production and Surveillance Form, RA-SALUD INE 303
- Cytopathology and Oncohematology Laboratory Form, RA-SALUD INE 307

**ARTICLE TWO.-** To provide that, should hospital facilities belonging to Short-Term Social Security Managing Entities and private institutions apply other instruments developed according to their level of complexity, such instruments must essentially contain the information required by the SNIS-VE (National Health Information System – Epidemiological Surveillance), in accordance with the Norma Técnica para el manejo del Expediente Clínico (Technical Standard for the Management of Clinical Records), approved by Ministerial Resolution Number 0090 of February 26, 2008.

**ARTICLE THREE.-** Autonomous Municipal Governments, within the framework of their competencies under Article 81 of Act Number 031 of July 19, 2010 (*Framework Act on Autonomies and Decentralization*), shall provide printed materials to health facilities within their jurisdiction that require them, as well as supervise and control their use.

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Director of Legal Affairs  
Minister of Health and  
Sports

**ARTICLE FOUR.-**To establish the mandatory application of the following Information Systems: SNIS (National Health Information System), Sistema de Información Perinatal (SIP) (Perinatal Information System, SIP), Módulo de Información Básica (MIB) (Basic Information Module, MIB), Software de Atención Primaria en Salud (SOAPS) (Primary Health Care Software, SOAPS), Sistema de Información Clínico Estadístico (SICE), (Clinical and Statistical Information System, SICE), Sistema Informático de Administración de Hechos Vitales (SIAHV) (Vital Events Management Information System, SIAHV), Software de la Carpeta Familiar (Family File Software), Software de Recursos Humanos (SOREH) (Human Resources Software, SOREH), Sistema de Gestión y Bioseguridad (EVARES) (Management and Biosafety System, EVARES).

**ARTICLE FIVE.-** To establish strict compliance by all entities comprising the National Health System with the development of the Information Cycle, including the collection, systematization, consolidation, processing, use, and analysis of information, applying an intercultural and gender-based approach, such information shall serve to strengthen the Comité de Análisis de la Información (CAI) (Information Analysis Committee , CAI), at the point where information is generated, in order to promote its effective use.

**ARTICLE SIX.-** To establish the mandatory obligation of all health personnel, particularly medical professionals, to complete certificates of live birth, general death, and perinatal death, as well as all statistical reporting instruments.

**ARTICLE SEVEN.-** To order the mandatory application of the Information Flow Regulation, as follows:

- a) Ensuring the availability of information from health facilities within the health Networks by the 5th day of each month.
- b) From the Health Networks to the SEDES (Departmental Health Services, by its acronym in Spanish) by the 10th day of each month.
- c) From the SEDES (Departmental Health Services) to the National Level by the 18th day of each month.
- d) The resulting information shall be published on the website of the Ministry of Health and Sports by the 22nd day of each month.

**ARTICLE EIGHT.-** The Sistema Nacional de Información en Salud y Vigilancia Epidemiológica SNIS – VE (National Health Information - Epidemiological Surveillance System, SNIS-VE) shall be responsible for the execution and compliance with this Ministerial Resolution.

Register, notify, and file.

[SIGNATURE]  
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