Row Labels	Count of Gender
Female	15
Male	35
(blank)	
Grand Total	**50**

Row Labels
99 DOTS
99 DOTS, Health workers' visit
99 DOTS, Health workers' visit, Phone call or text message reminders
99 DOTS, Phone call or text message reminders
99 DOTS, Regular DOTS
99 DOTS, Regular DOTS, Health workers' visit
99 DOTS, Regular DOTS, Health workers' visit, Phone call or text message reminders
99 DOTS, Regular DOTS, Health workers' visit, Phone call or text message reminders, Other electronic adherence syste
99 DOTS, Regular DOTS, Pill on hand
Health workers' visit
Health workers' visit, Phone call or text message reminders
Health workers' visit, Regular follow up with op visits
Regular DOTS
Regular DOTS, Health workers' visit
Regular DOTS, Health workers' visit, Phone call or text message reminders
Regular DOTS, Phone call or text message reminders
(blank)
Grand Total

Count of What adherence strategies for ATT have you used in your patients? (Select all that apply)
7
4
1
1
2
2
6
2
1
3
4
1
4
7
4
1
50

Consent form	Age	Gender	Designation
Yes, I consent	40	Male	Pulmonologist
Yes, I consent	25	Male	NTEP MO
Yes, I consent	36	Male	General physician
Yes, I consent	39	Male	General practitioner
Yes, I consent	36	Male	NTEP nodal officer
Yes, I consent	30	Male	General practitioner
Yes, I consent	31	Male	Pulmonologist
Yes, I consent	33	Female	Pulmonologist
Yes, I consent	33	Female	Pulmonologist
Yes, I consent	29	Female	Pulmonologist
Yes, I consent	32	Male	General physician
Yes, I consent	34	Male	General physician
Yes, I consent	35	Male	Pulmonologist
Yes, I consent	33	Male	General physician
Yes, I consent	30	Male	General physician
Yes, I consent	28	Female	General physician
Yes, I consent	33	Male	General physician
Yes, I consent	30	Female	General physician
Yes, I consent	29	Male	General physician
Yes, I consent	31	Male	Pulmonologist
Yes, I consent	32	Male	General practitioner
Yes, I consent	36	Male	Senior treatment superv
Yes, I consent	34	Male	General physician
Yes, I consent	26	Female	General practitioner
Yes, I consent	28	Female	General physician
Yes, I consent	28	Male	NTEP MO
Yes, I consent	40	Female	NTEP nodal officer
Yes, I consent	33	Male	Pulmonologist
Yes, I consent	31	Male	NTEP MO
Yes, I consent	36	Female	Pulmonologist
Yes, I consent	35	Male	General physician
Yes, I consent	30	Female	General practitioner
Yes, I consent	31	Male	General practitioner
Yes, I consent	30	Female	General practitioner
Yes, I consent	43	Male	NTEP MO
Yes, I consent	49	Male	Pulmonologist
Yes, I consent	51	Female	Pulmonologist
Yes, I consent	52	Female	WHO consultant
Yes, I consent	33	Male	Faculty at medical Colle
Yes, I consent	36	Male	Pulmonologist
Yes, I consent	27	Female	General practitioner
Yes, I consent	33	Male	General practitioner
Yes, I consent	46	Male	General physician
Yes, I consent	36	Male	Pulmonologist

Yes, I consent	52	Female	General physician
Yes, I consent	34	Male	Pulmonologist
Yes, I consent	60	Male	General physician
Yes, I consent	33	Male	NTEP MO
Yes, I consent	36	Male	General practitioner
Yes, I consent	33	Male	Pulmonologist

State of residence	Years of experience in TB program	How many TB patients h
Kerala	14	11 - 50
Thrissur	1	51 – 100
Kerala	6	11 - 50
M. P	3	>100
Kerala	5	11 - 50
Kerala	2	11 - 50
Kerala	4	>100
Ongallur	6	>100
Kerala	4	0 – 10
Kerala	3	>100
India	7	0 – 10
Kerala	10	11 - 50
Kerala	9	>100
India	5	0 – 10
Kerala	4	11 - 50
Thrissur	3	51 – 100
India Kerala	6	11 - 50
Telangana	1	11 - 50
Kerala	2	0 – 10
Uttar Pradesh	5	>100
Kerala, India	3	0 – 10
Kerala	3	11 - 50
Kerala	2	0 – 10
Kerala	3	11 - 50
Trissur	3	11 - 50
kerala	2	11 - 50
Kerala, India	11	51 – 100
Kerala	4	0 – 10
Kerala	4	51 – 100
Kerala	6	11 - 50
Kerala	1	11 - 50
Kerala	3	51 – 100
Kerala	1	0 – 10
Kerala	1	0 – 10
Kerala	15	51 – 100
Kerala	15	11 - 50
Kerala	20	11 - 50
Kerala	15	11 - 50
Kerala india	1	0 – 10
Tamil Nadu	5	11 - 50
Kerala, India	2	11 - 50
Kerala	2	0 – 10
Kerala	17	11 - 50
Tamil Nadu	4	11 - 50

Kerala	Initiating the treatment of pediatric patients and follow		0 – 10
Kerala		4	>100
Kerala, India		20	51 – 100
Karnataka		3	51 – 100
Kerala		6	0 – 10
kerala		4	>100

What percentage of you	Do you ask about ATT a	What are some of the re	Would you want to use a
<10%	Yes	Lack of understanding c	Yes
<10%	Yes	Forgetfulness	Yes
26 - 50%	Yes	Cost of transport to DOT	Yes
10-25%	Yes	Lack of understanding c	Yes
<10%	Yes	Cost of transport to DOT	Yes
<10%	Yes	Improvement of symptor	Yes
10-25%	Yes	Lack of understanding c	Yes
76-100%	Yes	Improvement of symptor	Yes
<10%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	Yes
10-25%	Yes	Improvement of symptor	Yes
26 - 50%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	Yes
10-25%	Yes	Cost of transport to DOT	Yes
76-100%	Yes	Improvement of symptor	Yes
10-25%	Yes	Lack of understanding c	Yes
26 - 50%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	Yes
<10%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	Yes
<10%	Yes	Improvement of symptor	Yes
10-25%	Yes	Lack of understanding c	No
<10%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	Yes
26 - 50%	Yes	Adverse effects of the d	Yes
<10%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	Yes
<10%	Yes	Lack of understanding c	No
10-25%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	No
<10%	Yes	Lack of understanding c	Yes
<10%	Yes	Cost of transport to DOT	Yes
<10%	Yes	Lack of understanding c	No
<10%	Yes	Lack of understanding c	Yes
<10%	Yes	Lack of understanding c	Yes
<10%	Yes	Lack of understanding c	No
<10%	Yes	Lack of understanding c	Yes
<10%	Yes	Lack of understanding c	No
10-25%	No	Lack of understanding c	Yes
<10%	Yes	Cost of transport to DOT	Yes
<10%	Yes	Improvement of symptor	Yes
<10%	Yes	Lack of understanding c	Yes

<10%	Yes	Lack of understanding c	Yes
10-25%	Yes	Lack of understanding c	Yes
<10%	Yes	Lack of understanding c	No
10-25%	Yes	Lack of understanding c	Yes
<10%	Yes	Lack of understanding c	Yes
<10%	Yes	Stigma of TB	Yes

What adherence strateg	Have you heard of the c	What adherence strateg	If we are introducing a d
99 DOTS, Regular DOT	Yes	Health workers' visit	Both phases
Phone call or messa	No	99 DOTS, Health worke	Both phases
Regular DOTS, Health v	No	Regular DOTS, Health v	Intensive phase
Regular DOTS, Health v	No	Regular DOTS, Health v	Continuation phase
99 DOTS, Regular DOT	No	Regular DOTS, Health v	Both phases
99 DOTS, Regular DOT	Yes	Regular DOTS, Health v	Continuation phase
99 DOTS, Phone call or	No	99 DOTS, Phone call or	Both phases
99 DOTS	No	Health workers' visit	Both phases
99 DOTS, Regular DOT	No	99 DOTS, Regular DOT	Both phases
99 DOTS, Regular DOT	No	99 DOTS	Both phases
Regular DOTS, Health v	No	Regular DOTS, Health v	Both phases
Regular DOTS, Health v	No	Regular DOTS, Health v	Continuation phase
99 DOTS, Regular DOT	No	99 DOTS, Regular DOT	Both phases
Regular DOTS, Health v	No	Regular DOTS, Health v	Both phases
Health workers' visit, Ph	No	Regular DOTS	Continuation phase
99 DOTS, Health worke	Yes	99 DOTS, Health worke	Continuation phase
Phone call or messa	Yes	Health workers' visit, Ph	Continuation phase
Health workers' visit, Ph	No	Health workers' visit	Both phases
99 DOTS, Regular DOT	No	99 DOTS, Regular DOT	Both phases
99 DOTS, Regular DOT	No	Health workers' visit, Ph	Intensive phase
Regular DOTS	No	Regular DOTS	Continuation phase
99 DOTS, Regular DOT	No	Regular DOTS, Phone c	Intensive phase
99 DOTS, Health worke	No	99 DOTS, Health worke	Both phases
99 DOTS, Regular DOT	No	99 DOTS, Regular DOT	Intensive phase
99 DOTS, Health worke	Yes	99 DOTS, Regular DOT	Both phases
99 DOTS, Regular DOT	Yes	99 DOTS, Regular DOT	Intensive phase
99 DOTS, Regular DOT	No	99 DOTS, Regular DOT	Both phases
Regular DOTS, Health v	No	Health workers' visit, Ph	Continuation phase
99 DOTS, Regular DOT	No	99 DOTS, Regular DOT	Both phases
99 DOTS, Regular DOT	Yes	99 DOTS	Both phases
Health workers' visit, Ph	No	Health workers' visit, Ph	Intensive phase
99 DOTS, Regular DOT	Yes	Regular DOTS, Health v	Not useful for ATT
99 DOTS, Regular DOT	No	99 DOTS, Regular DOT	Not useful for ATT
99 DOTS, Regular DOT	Yes	99 DOTS, Regular DOT	Both phases
99 DOTS, Regular DOT	No	99 DOTS	Intensive phase
99 DOTS, Regular DOT	No	99 DOTS, Regular DOT	Both phases
99 DOTS, Health worke	No	99 DOTS	Both phases
99 DOTS, Regular DOT	No	99 DOTS, Health worke	Both phases
99 DOTS, Regular DOT	Yes	99 DOTS, Health worke	Both phases
99 DOTS, Regular DOT	No	99 DOTS	Both phases
99 DOTS, Regular DOT	No	Regular DOTS	Both phases
Regular DOTS, Health v	No	Regular DOTS	Both phases
Regular DOTS, Health v	No	Regular DOTS, Health v	Both phases
99 DOTS, Health worke	No	99 DOTS	Intensive phase

Health workers' visit, Ph	No	Health workers' visit, Re	Both phases
99 DOTS, Regular DOT	Yes	99 DOTS, Regular DOT	Both phases
Regular DOTS, Health v	No	Regular DOTS, Health v	Both phases
99 DOTS, Health worke	No	99 DOTS	Both phases
99 DOTS, Health worke	No	99 DOTS, Regular DOT	Both phases
Regular DOTS, Health v	No	Regular DOTS, Health v	Both phases

What other benefits mig	If we provide you digital	What are your concerns	Do you think the digital
Better drug adherence,	No	Acceptance, Cost effect	No
Improved insight into me	Yes	Acceptance, Cost effect	No
Better drug adherence,	Yes	Privacy, Acceptance	Yes
Improved insight into me	Yes	Safety	Yes
Better drug adherence,	Yes	Acceptance, Cost effect	No
Better drug adherence,	Yes	Privacy, Acceptance	Yes
Better drug adherence	Yes	Cost effectiveness	No
Better drug adherence	Yes	Privacy	No
Better drug adherence,	Yes	Safety, Acceptance, Co	No
Better drug adherence	Yes	Safety, Privacy, Accepta	No
Better drug adherence,	Yes	Safety, Privacy, Accepta	No
Improved insight into me	Yes	Acceptance, Cost effect	No
Better drug adherence,	Yes	Safety, Cost effectivene	No
Better drug adherence,	Yes	Acceptance, Cost effect	No
Better drug adherence,	Yes	Privacy, Cost effectivene	Yes
Better drug adherence,	Yes	Safety, Acceptance, Co	No
Better drug adherence	Yes	Cost effectiveness	Yes
Better drug adherence,	Yes	Acceptance, Cost effect	No
Better drug adherence,	Yes	Acceptance	No
Better drug adherence,	Yes	Safety, Acceptance, Co	No
Better drug adherence,	Yes	Privacy, Cost effectivene	Yes
Improved insight into me	No	Acceptance, Cost effect	No
Better drug adherence	Yes	Acceptance	No
Better drug adherence,	Yes	Safety, Acceptance, Co	Yes
Better drug adherence,	Yes	Privacy, Acceptance	No
Better drug adherence,	Yes	Safety, Acceptance, Co	No
Better drug adherence	Yes	Acceptance	No
Better drug adherence,	Yes	Safety, Privacy, Accepta	No
Improved insight into me	Yes	Acceptance, It will be di	No
Better drug adherence,	No	Safety, Acceptance, Co	No
Better drug adherence,	Yes	Privacy, Acceptance, Cc	Yes
This system will be usefu	No	Privacy, Acceptance	Yes
Better drug adherence	No	Safety, Acceptance, Co	Yes
Better drug adherence,	Yes	Safety, Acceptance, Co	No
Improved insight into me	No	Safety, Privacy	Yes
Improved insight into me	No	Acceptance	Yes
Better drug adherence,	No	Privacy, Acceptance	Yes
Improved insight into me	No	Privacy, Acceptance	Yes
Better drug adherence,	Yes	Privacy, Acceptance, Cc	Yes
Improved insight into me	No	Safety, Privacy, Accepta	Yes
Better drug adherence,	Yes	Cost effectiveness	No
Better drug adherence,	Yes	Safety, Privacy, Accepta	Yes
Better drug adherence,	No	Safety, Privacy, Accepta	No
Better drug adherence	Yes	Acceptance, Cost effect	No

Better drug adherence,	Yes	Acceptance, Cost effect	No
Better drug adherence,	Yes	Safety, Privacy, Accepta	No
Better drug adherence	Yes	Acceptance, Cost effect	Yes
Improved insight into me	No	Acceptance, Cost effect	Yes
Better drug adherence,	Yes	Safety, Privacy, Accepta	No
Better drug adherence,	Yes	Safety, Privacy, Accepta	No

If the digital pill system i	In your opinion do you t	Looking at adherence d	Looking at adherence d
No	No	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Partially/suboptimal adh	Fully adherent
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	No	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	No	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Partially/suboptimal adh	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
No	Yes	Partially/suboptimal adh	Fully adherent
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Partially/suboptimal adh	Nonadherent
Yes	Yes	Fully adherent	Partially/suboptimal adh
No	No	Partially/suboptimal adh	Partially/suboptimal adh
No	No	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Nonadherent
No	No	Partially/suboptimal adh	Partially/suboptimal adh
No	No	Fully adherent	Partially/suboptimal adh
No	No	Partially/suboptimal adh	Partially/suboptimal adh
No	No	Partially/suboptimal adh	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
No	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Partially/suboptimal adh	Partially/suboptimal adh

Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Nonadherent
No	Yes	Fully adherent	Partially/suboptimal adh
No	Yes	Partially/suboptimal adh	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh
Yes	Yes	Fully adherent	Partially/suboptimal adh

Looking at adherence d	For each of the patients	For each of the patients	For each of the patients
Nonadherent	No action	Transition to DOTS	Transition to DOTS
Nonadherent	No action	Reinforce adherence thı	Phone call to patient, H
Nonadherent	No action	Health worker visit	Reinforce adherence thı
Partially/suboptimal adh	Phone call to patient	Phone call to patient	Phone call to patient
Nonadherent	No action, Test for drug	Reinforce adherence thı	Health worker visit, Tran
Nonadherent	No action	Reinforce adherence thı	Reinforce adherence thı
Partially/suboptimal adh	Phone call to patient	Reinforce adherence thı	Phone call to patient
Nonadherent	No action	Health worker visit	Reinforce adherence thı
Nonadherent	Reinforce adherence thı	Health worker visit	Transition to DOTS, Tes
Partially/suboptimal adh	Reinforce adherence thı	Phone call to patient, H	Others
Nonadherent	Reinforce adherence thı	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	No action	Phone call to patient, H	Health worker visit, Tran
Nonadherent	Reinforce adherence thı	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	Reinforce adherence thı	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	No action	Health worker visit, Test	Test for drug resistant T
Nonadherent	No action	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	No action	Phone call to patient	Health worker visit
Nonadherent	Reinforce adherence thı	Health worker visit	Reinforce adherence thı
Nonadherent	No action	Reinforce adherence thı	Reinforce adherence thı
Partially/suboptimal adh	Reinforce adherence thı	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	Health worker visit	Reinforce adherence thı	Reinforce adherence thı
Partially/suboptimal adh	Health worker visit	Health worker visit	Health worker visit
Nonadherent	Health worker visit	Transition to DOTS	Transition to DOTS
Nonadherent	Reinforce adherence thı	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	Reinforce adherence thı	Transition to DOTS, Tes	Transition to DOTS, Tes
Nonadherent	No action	Reinforce adherence thı	Transition to DOTS, Tes
Partially/suboptimal adh	No action	Health worker visit	Transition to DOTS
Nonadherent	Reinforce adherence thı	Phone call to patient	Reinforce adherence thı
Nonadherent	No action	Reinforce adherence thı	Transition to DOTS
Nonadherent	Reinforce adherence thı	Phone call to patient	Transition to DOTS
Nonadherent	Phone call to patient, H	Reinforce adherence thı	Reinforce adherence thı
Partially/suboptimal adh	Reinforce adherence thı	Reinforce adherence thı	Reinforce adherence thı
Partially/suboptimal adh	No action	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	Phone call to patient, H	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	Reinforce adherence thı	Reinforce adherence thı	Health worker visit
Nonadherent	No action	Reinforce adherence thı	Transition to DOTS
Nonadherent	Reinforce adherence thı	Transition to DOTS	Phone call to patient, Tr
Nonadherent	No action	Reinforce adherence thı	Health worker visit
Nonadherent	No action	Reinforce adherence thı	Transition to DOTS, Tes
Nonadherent	No action	Reinforce adherence thı	Transition to DOTS
Nonadherent	Reinforce adherence thı	Phone call to patient	Phone call to patient, H
Nonadherent	Reinforce adherence thı	Phone call to patient	Health worker visit, Tran
Nonadherent	No action	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	No action	Phone call to patient	Health worker visit

Nonadherent	No action	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	No action	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	No action	Reinforce adherence thı	Transition to DOTS
Nonadherent	No action	Reinforce adherence thı	Transition to DOTS
Nonadherent	No action	Reinforce adherence thı	Reinforce adherence thı
Nonadherent	No action	Phone call to patient, Hı	Reinforce adherence thı

Who should be the prim	Who should have acces	Which type of patients c	If you had such a syster
Senior treatment superv	District TB office, TB Me	Individuals with risk of n	Yes, I would like to see
District TB office	District TB office, TB hea	Individuals who have mu	No, I would like to see th
TB health visitor	Senior treatment superv	Individuals with risk of n	No, I would like to see th
TB health visitor	Treating Physician	Individuals with risk of n	Yes, I would like to see
Senior treatment superv	TB Medical officer, Seni	All patients, Individuals	Yes, I would like to see
TB health visitor	District TB office, TB Me	Individuals with risk of n	Yes, I would like to see
Senior treatment superv	TB Medical officer	All patients	Yes, I would like to see
TB health visitor	District TB office, TB Me	Individuals with risk of n	No, I would like to see th
Senior treatment superv	District TB office, TB Me	Individuals with risk of n	Yes, I would like to see
Patient	TB Medical officer, Treat	All patients	Yes, I would like to see
District TB office	District TB office, TB Me	All patients	Yes, I would like to see
Treating Physician	District TB office, TB Me	Individuals with risk of n	No, I would like to see th
TB health visitor	District TB office, TB Me	Individuals with risk of n	Yes, I would like to see
Treating Physician	Treating Physician	Individuals with risk of n	Yes, I would like to see
Treating Physician	Treating Physician	Individuals with risk of n	No, I would like to see th
Senior treatment superv	TB Medical officer	Individuals with risk of n	Yes, I would like to see
TB health visitor	TB health visitor	Individuals with risk of n	Yes, I would like to see
District TB office	TB Medical officer, Treat	Individuals with risk of n	Yes, I would like to see
TB medical officer	District TB office, TB Me	All patients	Yes, I would like to see
Senior treatment superv	District TB office, Treatir	Individuals with risk of n	Yes, I would like to see
TB medical officer	District TB office	Individuals with risk of n	No, I would like to see th
Treating Physician	Treating Physician	Individuals with risk of n	Yes, I would like to see
Treating Physician	Treating Physician, Pati	Individuals with risk of n	Yes, I would like to see
TB health visitor	District TB office, TB Me	Individuals with risk of n	Yes, I would like to see
Treating Physician	District TB office, TB Me	All patients	Yes, I would like to see
Treating Physician	District TB office, TB Me	Individuals with risk of n	Yes, I would like to see
TB medical officer	TB Medical officer, Treat	Individuals who have mu	No, I would like to see th
TB health visitor	District TB office, TB Me	Individuals who have mu	No, I would like to see th
TB medical officer	District TB office, TB Me	Individuals who have mu	Yes, I would like to see
Treating Physician	TB Medical officer, Treat	Individuals who have de	No, I would like to see th
Senior treatment superv	District TB office, TB Me	Individuals with risk of n	Yes, I would like to see
Treating Physician	District TB office, TB Me	Individuals who have de	No, I would like to see th
Patient's family member	District TB office, TB Me	Individuals with risk of n	Yes, I would like to see
TB health visitor	District TB office, TB Me	All patients, Individuals	Yes, I would like to see
Treating Physician	TB Medical officer, Treat	Individuals who have de	No, I would like to see th
Treating Physician	Treating Physician, TB h	Individuals who have de	No, I would like to see th
TB health visitor	Treating Physician, TB h	Individuals with risk of n	No, I would like to see th
TB health visitor	TB Medical officer, Treat	Individuals with risk of n	No, I would like to see th
Treating Physician	TB Medical officer	All patients, Individuals	Yes, I would like to see
TB health visitor	TB Medical officer, Treat	Individuals who have de	No, I would like to see th
TB medical officer	TB health visitor	All patients	Yes, I would like to see
Treating Physician	Treating Physician	All patients	Yes, I would like to see
TB health visitor	Treating Physician, Sen	Individuals with risk of n	Yes, I would like to see
TB medical officer	TB Medical officer, Treat	Individuals with risk of n	No, I would like to see th

Treating Physician	Treating Physician	All patients, Individuals	Yes, I would like to see
TB health visitor	District TB office, TB Me	Individuals with risk of n	No, I would like to see th
TB health visitor	TB Medical officer, Treat	Individuals with risk of n	Yes, I would like to see
TB health visitor	Treating Physician, TB h	Individuals with risk of n	No, I would like to see th
Treating Physician	District TB office, TB Me	All patients	Yes, I would like to see
Treating Physician	District TB office, TB Me	Individuals with risk of n	Yes, I would like to see

What do you think are some of the challenges that we may face in the implementation of such a s
Cost, Willingness of patients to accept the system, Willingness of providers to use the system, Infr
Cost, Willingness of patients to accept the system, Willingness of providers to use the system
Willingness of patients to accept the system, Willingness of providers to use the system, Increasec
Cost, Willingness of providers to use the system
Cost, Willingness of patients to accept the system, Willingness of providers to use the system
Cost, Willingness of patients to accept the system, Willingness of providers to use the system, Infr
Cost
Cost
Cost, Willingness of patients to accept the system, Willingness of providers to use the system, Infr
Cost, Willingness of patients to accept the system, Willingness of providers to use the system, Infr
Cost, Willingness of patients to accept the system
Cost, Willingness of patients to accept the system, Infrastructure to support digital pills (pharmacy
Cost, Willingness of patients to accept the system, Willingness of providers to use the system, Infr
Cost, Willingness of patients to accept the system, Infrastructure to support digital pills (pharmacy
Cost, Willingness of providers to use the system, Infrastructure to support digital pills (pharmacy et
Cost, Willingness of patients to accept the system, Infrastructure to support digital pills (pharmacy
Cost, Willingness of patients to accept the system, Infrastructure to support digital pills (pharmacy
Cost, Willingness of patients to accept the system, Infrastructure to support digital pills (pharmacy
Cost, Willingness of patients to accept the system, Willingness of providers to use the system
Cost, Willingness of patients to accept the system, Willingness of providers to use the system, Infr
Cost, Willingness of patients to accept the system, Infrastructure to support digital pills (pharmacy
Cost, Willingness of patients to accept the system, Willingness of providers to use the system
Willingness of patients to accept the system, Willingness of providers to use the system
Cost, Willingness of patients to accept the system, Willingness of providers to use the system, Infr
Cost, Willingness of patients to accept the system
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