Group ANC: Women Survey - Nigeria Page 1 of 6

HMHB Data Extraction Form

| PARTICIPANT STUDY ID | | |
|------------------------------------|---|--|
| Date of data extraction | | |
| | Mother baby bookletChild health cardIndividual facility based recordsFacility register | |
| SECTION 1: VACCINES | | |
| Record total number doses of each: | | |
| 1. BCG | | |
| 2. Polio/OPV | | |
| 3. DPT | | |
| 4. HBV | | |
| 5. Measles | | |
| 6. Yellow Fever | | |
| 7. Vitamin A | | |
| 8. Deworming | | |
| 9. Maternal TT | | |
| 10. PENTA | | |

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| SECTION 2: GROWTH MONITORING | |
|---|---|
| 1. Total Number of clinic visits between birth and 1 year of age where the child's growth was monitored. (This includes weight, height/length, and/or MUAC) | |
| VISIT 1 | |
| Age of child | |
| | (Age in MONTHS) |
| Indicate what was measured at each visit | ☐ Weight☐ Length/Height☐ MUAC☐ No growth monitoring data available |
| Weight | |
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| Is there another growth monitoring visit to record? | ○ Yes ○ No |
| VISIT 2 | |
| Age of child | |
| | (Age in MONTHS) |
| Indicate what was measured at each visit | ☐ Weight☐ Length/Height☐ MUAC☐ No growth monitoring data available |
| Weight | |
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| Is there another growth monitoring visit to record? | ○ Yes ○ No |



| VISIT 3 | |
|---|---|
| Age of child | |
| | (Age in MONTHS) |
| Indicate what was measured at each visit | ☐ Weight☐ Length/Height☐ MUAC☐ No growth monitoring data available |
| Weight | |
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| Is there another growth monitoring visit to record? | |
| VISIT 4 | |
| Age of child | |
| | (Age in MONTHS) |
| Indicate what was measured at each visit | ☐ Weight☐ Length/Height☐ MUAC☐ No growth monitoring data available |
| Weight | |
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| Is there another growth monitoring visit to record? | ○ Yes ○ No |
| VICIT E | |

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13/09/2018 14:26

| Age of child | |
|---|---|
| | (Age in MONTHS) |
| Indicate what was measured at each visit | ☐ Weight☐ Length/Height☐ MUAC☐ No growth monitoring data available |
| Weight | |
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| Is there another growth monitoring visit to record? | YesNo |
| VISIT 6 | |
| Age of child | |
| | (Age in MONTHS) |
| Indicate what was measured at each visit | ☐ Weight☐ Length/Height☐ MUAC☐ No growth monitoring data available |
| Weight | |
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| Is there another growth monitoring visit to record? | YesNo |
| VISIT 7 | |
| Age of child | |
| | (Age in MONTHS) |

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| Indicate what was measured at each visit | ☐ Weight☐ Length/Height☐ MUAC☐ No growth monitoring data available |
|---|---|
| Weight | |
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| Is there another growth monitoring visit to record? | ○ Yes ○ No |
| VISIT 8 | |
| Age of child | |
| | (Age in MONTHS) |
| Indicate what was measured at each visit | ☐ Weight☐ Length/Height☐ MUAC☐ No growth monitoring data available |
| Weight | |
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| Is there another growth monitoring visit to record? | ○ Yes ○ No |
| VISIT 9 | |
| Age of child | |
| | (Age in MONTHS) |
| Indicate what was measured at each visit | Weight Length/Height MUAC No growth monitoring data available |

| Weight | |
|--|---|
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| Is there another growth monitoring visit to record? | ○ Yes ○ No |
| VISIT 10 | |
| Age of child | |
| | (Age in MONTHS) |
| Indicate what was measured at each visit | ☐ Weight☐ Length/Height☐ MUAC☐ No growth monitoring data available |
| Weight | |
| | (in KGs) |
| Length/Height | |
| | (Length/Height in CM) |
| MUAC | |
| | (MUAC in CM) |
| 3. Was malnutrition ever diagnosed or included in a clinical problem list during any visit?: | ○ Yes ○ No |

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