| PRISM BORDER COHORT STUD | OY House | hold ID _ | | | | _ | Da | ate of | collection | _ / day mont | / h year | |
|---|------------------------------|--------------------------------|--|-----------------------------|---------|----------------------------|-------------------|------------|-------------------------|-------------------------|----------------------|--|
| MOSQUITO CO HHID and cohort participant ID no entomology techs should include all o coordinator should be immediatel | umbers shoul cohort ID nu | ld be filled ou mbers below | t in advance. Be that are still act | efore going ively in the | e study | . The study | | F | Place Bai | rcode H | ere | |
| Cohort participant ID | | | | | ı | 1 1 1 1 | | 1 1 | | | | |
| Did they sleep in the house last night? If no, skip remaining questions and make sure they are still a household resident. | | □ Yes □ No | □ Yes □ No | | No | □ Yes □ No | □ Yes | i □ No | □ Yes □ No | □ Yes □ No | □ Yes □ No | |
| If yes, make sure to enter ID in correct room be | elow | | | | | | | | | | | |
| Did they or someone else report them sleeping under an LLIN last night? If no, skip next question | | □ Yes □ No □ Unknown | □ Yes □ No □ Unknown | □ Yes □ ☐ □ Unkno | | □ Yes □ No □ Unknown | □ Yes | | □ Yes □ No □ Unknown | □ Yes □ No □ Unknown | □ Yes □ No □ Unknown | |
| Approximate time went to bed (skip if unknow | n) | : | : | : | | : | : | : | : | : | : | |
| Approximate time got out of bed (skip if unknown) | own) | : | : | : | | : | : | : | : | : | : | |
| | | | • | | | | | | | | | |
| Room number (as previously assigned) | | 1 | 2 | | | 3 | | | 4 | | 5 | |
| Did any study participants sleep in this room? If no, skip the remained of this column | □ Yes □ No | | □ Yes □ No | | | □ Yes □ No | | □ Yes □ No | | □ Y | □ Yes □ No | |
| List the cohort participant ID's of all members who slept in this room last night and place the sleep area (letter) in the parentheses after their ID number | | | | | | () | () . () . | | |) _ (|) (| |
| Whether LT working? If no, skip below | □ Yes | s □ No | | No | | \square Yes \square No | | | □ Yes □ No | □ Y | es 🗆 No | |
| Total blood fed An. gambiae sl | | | | | | | | | | | | |
| Total unfed An. gambiae sl | | | | | | | | | | | | |
| Total gravid/semigravid An. gambiae sl | | | | | | | | | | | | |
| Total An. gambiae sl unable to assess | | | | | | | | | | | | |
| Total blood fed An. funestus | | | | | | | | | | | | |
| Total unfed An. funestus | | | | | | | | | | | | |
| Total gravid/semigravid An. funestus | | | | | | | | | | | | |
| Total An. funestus unable to assess | | | | | | | | | | | | |
| Total blood fed other Anopheles sp. | | | | | | | | | | | | |
| Total unfed other Anopheles sp. | | | | | | | | | | | | |
| Total gravid/semigravid other Anopheles sp. | | | | | | | | | | | | |
| Total other Anopheles sp. unable to assess | | | | | | | | | | | | |
| Total number dissected for parity | | | | | | | | | | | | |
| Total number parous | | | | | | | | | | | | |
| Total number nulliparous | | | | | | | | | | | | |
| Total Culex | | | | | | | | | | | | |
| | | | | | | | | | | | | |

Version 2 dated 15 January 2020

| Entered | _Date | / | _/ |
|---------|-------|---|----|
|---------|-------|---|----|

| VerifiedDate/_ | _/ |
|----------------|----|
|----------------|----|