

Death Registration (English)

Variable Name	Question Text	Saved Value																						
deviceId	Hidden from user	Device ID (IMEI, Wi-Fi MAC, Android ID)																						
meta	Hidden from user																							
instanceId	Hidden from user																							
start	Hidden from user																							
processedByMirth	Hidden from user																							
individualId	Individual Id	User entered text																						
fieldWorkerId	Field Worker Id	User entered text																						
gender	Gender	<table><tr><td>M</td><td>Male</td></tr><tr><td>F</td><td>Female</td></tr></table>	M	Male	F	Female																		
M	Male																							
F	Female																							
wasPregnant	Was she pregnant?	<table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr></table>	1	Yes	2	No																		
1	Yes																							
2	No																							
possiblyPregnant	Is it possible that she was pregnant?	<table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr></table>	1	Yes	2	No																		
1	Yes																							
2	No																							
deathWithinDSS	Where did the death occur	<table><tr><td>1</td><td>Within the DSS</td></tr><tr><td>2</td><td>Out of the DSS</td></tr></table>	1	Within the DSS	2	Out of the DSS																		
1	Within the DSS																							
2	Out of the DSS																							
deathVillage	In which village did the death occur?	<table><tr><td>MLA</td><td>MLA</td></tr><tr><td>VIS</td><td>VIS</td></tr><tr><td>KAT</td><td>KAT</td></tr><tr><td>IFA</td><td>IFA</td></tr><tr><td>VIS</td><td>VIS</td></tr><tr><td>IDE</td><td>IDE</td></tr><tr><td>MIW</td><td>MIW</td></tr><tr><td>NAM</td><td>NAM</td></tr><tr><td>KIS</td><td>KIS</td></tr><tr><td>MBI</td><td>MBI</td></tr><tr><td></td><td></td></tr></table>	MLA	MLA	VIS	VIS	KAT	KAT	IFA	IFA	VIS	VIS	IDE	IDE	MIW	MIW	NAM	NAM	KIS	KIS	MBI	MBI		
MLA	MLA																							
VIS	VIS																							
KAT	KAT																							
IFA	IFA																							
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		MPO	MPO
		IGI	IGI
		NJA	NJA
		LUK	LUK
		MCH	MCH
		MNG	MNG
		MKA	MKA
		IKU	IKU
		KIV	KIV
		MIN	MIN
		MAV	MAV
		MIL	MIL
		IGU	IGU
		LUP	LUP
		NAK	NAK
		KID	KID
		IRA	IRA
		IGO	IGO
		KIC	KIC
		IDU	IDU
placeOfDeathOutOfDSS	Where did the death occur?	User entered text	
haveDeathCertificate	Have you recieved a death certificate?	1	Yes
		2	No
visitId	Visit Id	User entered text	
causeOfDeath	Hidden from user		
dateOfDeath	Date of Death	User selected date	
placeOfDeath	Place of Death	HOME	Home
		HOSPITAL	Hospital
		OTHER	Other
placeOfDeathOther	Place of Death	User entered text	

end	Hidden from user	Timestamp of form save
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