**USER ACCEPTANCE TESTING (UAT) Plan**

**Project/System Name: ­\_\_\_\_\_EDEN STUDY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCC/LEO Number (if applicable): \_\_22989\_\_\_\_\_\_\_** ❒ N/A

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| --- | --- | --- | --- | --- | --- |
| **No** | **Description** | **Expected Result** | **Pass/Fail** | **Proof/Reference** | **Action Required** |
| **1** | Q5. If consent not obtained, why not?  **CRF NAME: Consent** | Options should be dropdown |  |  |  |
| **2** | Q4**.** Participant is aged from 18 to 39?  **CRF NAME: Recruitment** | If “No”, an alert message should appear |  |  |  |
| **3** | Q5. Participant is a resident of West Kiang or Central Kiang and plans to remain residing there for the foreseeable future  **CRF NAME: Recruitment** | If “No”, an alert message should appear |  |  |  |
| **4.** | Q6. The participant is currently pregnant  **CRF NAME: Recruitment** | If “Yes”, an alert message should appear |  |  |  |
| **5.** | Q7. The participant is currently on contraception, either Depo (injectible), Jadelle (subdermal implants) or oral contraceptive pill.  **CRF NAME: Recruitment** | If “Yes”, an alert message should appear |  |  |  |
| **6.** | Q8. The participant has already reached the menopause.  **CRF NAME: Recruitment** | If “Yes”, an alert message should appear |  |  |  |
| **7.** | Q9. The participant has a history of HIV, TB or non-pregnancy-induced hypertension or diabetes.  **CRF NAME: Recruitment** | If “Yes”, an alert message should appear |  |  |  |
| **8.** | Q10. The participant has an infant aged 12 months or less.  **CRF NAME: Recruitment** | If “Yes”, an alert message should appear |  |  |  |
| **9.** | Q1. Are you currently on contraception, either Depo (injectible), Jadelle (subdermal implants) or oral contraceptive pill.  **CRF Name:**  **Contraception\_Medical\_Smoking\_History** | If “Yes”, an alert message “**Exclude this participant**” should appear |  |  |  |
| **10.** | Q1. Are you currently on contraception, either Depo (injectible), Jadelle (subdermal implants) or oral contraceptive pill  **CRF Name:**  **Contraception\_Medical\_Smoking\_History** | If “No”, questions 2 to 10 should appear. Else they should be hidden. |  |  |  |
| **11.** | Q7. Have you ever been diagnosed with any other medical condition?  **CRF Name:**  **Contraception\_Medical\_Smoking\_History** | If yes, question 7b should appear. Else 7b should be hidden. |  |  |  |
| **12.** | Q8. Does anyone in your immediate family suffer from diabetes and/or hypertension?  **CRF Name:** **Contraception\_Medical\_Smoking\_History** | If “Yes”, question 8b and 8C should appear. Else 8b and 8C should be hidden. |  |  |  |
| **13.** | Q12. Signature  **CRF Name:** **Contraception\_Medical\_Smoking\_History** | The field should accept a signature file |  |  |  |
| **14.** | Verified by ( Signature)  **CRF Name:** **Contraception\_Medical\_Smoking\_History** | The field should accept a signature file |  |  |  |
| **15.** | Q6. What is the main source of drinking water used by members of your household?  **CRF Name: Socioeconomic\_Demographic** | If option is “Other”, 6b should appear.  Else it should be hidden |  |  |  |
| **16.** | Q7. What is the main source of water used by members of your household for other purposes such as cooking and handwashing?  **CRF Name: Socioeconomic\_Demographic** | If option is “Other”, 7b should appear.  Else it should be hidden |  |  |  |
| **17.** | Q8. How long does it take for members of your household to go there, get water and come back?  **CRF Name: Socioeconomic\_Demographic** | Hint “Provide time in minutes” to be shown below the field to guide data collector of data type to be entered. |  |  |  |
| **18.** | Q9. What kind of toilet facility do members of your household usually use?  **CRF Name: Socioeconomic\_Demographic** | If “Other”, a field should be available to specify. |  |  |  |
| **19.** | Q13. Where do you or other members of your household most often wash your hands?  **CRF Name: Socioeconomic\_Demographic** | If “Other”, a field should be available to specify. |  |  |  |
| **20.** | Q28. Is the participant currently in paid employment.  **CRF Name: Socioeconomic\_Demographic** | If “Yes”, question 28b should show. Else it should be hidden. |  |  |  |
| **21.** | **Q30.** Indicate the current nature of husband 's work.  **CRF Name: Socioeconomic\_Demographic** | This filed should be hidden unless question 29 is ticked “Yes”. |  |  |  |
| **22.** | Q31. How many heads of small ruminants (goats and sheep) does the family head currently have?  **CRF Name: Socioeconomic\_Demographic** | Field should not accept less 0 value. |  |  |  |
| **23.** | Q32. How many heads of cattle does the family head currently have?  **CRF Name: Socioeconomic\_Demographic** | Field should not accept less 0 value. |  |  |  |
| **24.** | Q33. From all sources how much money (estimates in Dalasi) is spent on the upkeeping of the family monthly | Field should not accept less 0 value. |  |  |  |
| **25.** | Q34. Can you read and write?  **CRF Name: Socioeconomic\_Demographic** | Hint “Conventional School” should show below the field. |  |  |  |
| **26.** | Q36. Have you ever received formal education (with a structure syllabus and time frame)?  **CRF Name: Socioeconomic\_Demographic** | Stay hidden until question 35 is ticked “Yes” |  |  |  |
| **27.** | Q39a. If yes, choose all that applies  **CRF Name: Socioeconomic\_Demographic** | Stay hidden until question 39 is ticked “Yes” |  |  |  |
| **28.** | Q41. what was the language of instruction?  **CRF Name: Socioeconomic\_Demographic** | Stay hidden until question 40 is ticked “Yes” |  |  |  |
| **29.** | Q42. What is the highest level of education the participant's spouse has completed  **CRF Name: Socioeconomic\_Demographic** | Stay hidden until question 40 is ticked “Yes” |  |  |  |
| **30.** | Q43.In total how many years did the participant's spouse spend at school (starting from primary school to University)  **CRF Name: Socioeconomic\_Demographic** | Stay hidden until question 40 is ticked “Yes” |  |  |  |
| **31.** | Q46. Signature  **CRF Name: Socioeconomic\_Demographic** | Should accept a signature file |  |  |  |
| **32.** | Q49. Verified by (signature)  **CRF Name: Socioeconomic\_Demographic** | Should accept a signature file |  |  |  |
| **33.** | Q12. Which BP medication are you currently taking/did you take?  **CRF Name: Pregnancy\_Exposure** | Should not show until question 11 is marked “Yes”. |  |  |  |
| **34.** | Q14. If yes, which diabetes medication are you currently taking/did you take?  **CRF Name: Pregnancy\_Exposure** | Should not show until question 13 is marked “Yes”. |  |  |  |
| **35.** | Q17. If yes, why are you taking aspirin/why did you take aspirin?  **CRF Name: Pregnancy\_Exposure** | Should not show until question 16 is marked “Yes”. |  |  |  |
| **36.** | Q19. If yes, please specify  **CRF Name: Pregnancy\_Exposure** | Should not show until question 18 is marked “Yes”. |  |  |  |
| **37.** | Q20. If yes, what is/was the medication for?  **CRF Name: Pregnancy\_Exposure** | Stay hidden until question 18 is marked “Yes”. |  |  |  |
| **38.** | Questions 22 to 29  **CRF Name: Pregnancy\_Exposure** | Stay hidden until question 21 is either “Daily”, “Less than Daily” or “Don’t know”. |  |  |  |
| **39.** | Q23. Cigarettes bought from the shops  **CRF Name: Pregnancy\_Exposure** | Error message if value entered is less than 0 |  |  |  |
| **40.** | Q24. Hand-rolled cigarrette (Manish)?  **CRF Name: Pregnancy\_Exposure** | Error message if value entered is less than 0 |  |  |  |
| **41.** | Q25. Pipes full of tobacco?  **CRF Name: Pregnancy\_Exposure** | Error message if value entered is less than 0 |  |  |  |
| **42.** | Q26. Snuff /sniffing tobacco  **CRF Name: Pregnancy\_Exposure** | Error message if value entered is less than 0 |  |  |  |
| **43.** | Q27. Chewing/ locking or sucking tobacco in the mouth  **CRF Name: Pregnancy\_Exposure** | Error message if value entered is less than 0 |  |  |  |
| **44.** | Q28. Number of water pipe/ shisha sessions  **CRF Name: Pregnancy\_Exposure** | Error message if value entered is less than 0 |  |  |  |
| **45.** | Q1. Have you missed your last menses?  **CRF Name: LMP** | Pop up message “**The participants has missed her last menses!. You must collect her urine sample and the fill out the CRF !**” should appear if question 1 is marked “yes”. |  |  |  |
| **46** | Questions 2, 3 and 4 (Weight (kg))  **CRF Name: Anthrops** | Error message if value entered is no a decimal place number |  |  |  |
| **47** | Q2b. What time was LithHep sample Collected.  **CRF Name: Maternal\_Blood\_Sample\_Collection** | Stay hidden until question 2 is ticked “Yes”. |  |  |  |
| **48.** | Q2c. Why was the sample not collected | Stay hidden until question 2 is ticked “No”. |  |  |  |
| **49.** | Question 3b and 3c.  **CRF Name: Maternal\_Blood\_Sample\_Collection** | Stay hidden until question 3 is ticked “Yes”. |  |  |  |
| **50.** | Q2b.  Hb Result (g/dl)  **CRF Name: Sample\_Reception\_Processing** | Stay hidden until question 2 is ticked “Yes”. |  |  |  |
| **51.** | Q19 Comments  **CRF Name: Sample\_Reception\_Processing** | Hint message shown in the text field. |  |  |  |
| **52.** | Questions 1 to 4  **CRF Name: Pregnancy\_Urine\_Collection** | Hidden until question 1 in the LMP CRF is ticked “Yes”. |  |  |  |
| **53.** | Q2b. Date of stool collection by the women  **CRF Name: Pregnancy\_Stool\_Collection** | Hidden until question 2 is ticked “Yes”. |  |  |  |
| **54.** | 2c. What was the reason?  **CRF Name: Pregnancy\_Stool\_Collection** | To be hidden until question 2 is ticked “No”. |  |  |  |
| **55.** | Questions 3, 5, 7  **CRF Name: Dietary** | Hidden until question 2 is ticked “Yes”. |  |  |  |
| **56.** | Q4. Did you eat pumpkin(Njengo) yesterday?  **CRF Name: Dietary** | Show only if question 3 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **57.** | Q6. Did you eat carrot (caroto) yesterday?  **CRF Name: Dietary** | Show only if question 5 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **58.** | Q8. Did you eat squash or orange sweet potatoes (pataato) yesterday?  **CRF Name: Dietary** | Show only if question 7 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **59** | Questions 10, 12, 14 16 and 18  **CRF Name: Dietary** | Show only if question 9 is ticked “Yes”. |  |  |  |
| **60.** | Q11. Did you eat white irish potatoes (pompitero) yesterday?  **CRF Name: Dietary** | Show only if question 10 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **61.** | Q13. Did you eat white yam (wulakono nyambo) yesterday?  **CRF Name: Dietary** | Show only if question 12 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **62.** | Q15. Did you eat cassava (nyambo) yesterday?  **CRF Name: Dietary** | Show only if question 14 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **63.** | Q17. Did you eat radish yesterday?  **CRF Name: Dietary** | Show only if question 16 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **64.** | Q19. Did you eat any other food made from white-fleshed roots or tubers yesterday?  **CRF Name: Dietary** | Show only if question 18 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **65.** | Questions 21, 23, 25, 27, 29, 31, 33, 35, 37  **CRF Name: Dietary** | Show only if question 20 is ticked “Yes”. |  |  |  |
| **66.** | Q22. Did you eat baobab leaf (naa/lalo) yesterday?  **CRF Name: Dietary** | Show only if question 21 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **67** | Q24. Did you eat sorrel (kucha) yesterday?  **CRF Name: Dietary** | Show only if question 23 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **68.** | Q26.  Did you eat amaranth (morongo) yesterday?  **CRF Name: Dietary** | Show only if question 25 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **69.** | Q28. Did you eat spinach water leaf (bologe/bologo) yesterday?  **CRF Name: Dietary** | Show only if question 27 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **70.** | Q30. Did you eat cassava leaf (nyambi jambo) yesterday?  **CRF Name: Dietary** | Show only if question 29 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **71.** | Q32. Did you eat okra (kanjo) yesterday?  **CRF Name: Dietary** | Show only if question 31 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **72.** | Q34. Did you eat moringa leaf (nebadayo) yesterday?  **CRF Name: Dietary** | Show only if question 33 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **73.** | Q36. Did you eat sweet potato leaf (pataati jambo) yesterday?  **CRF Name: Dietary** | Show only if question 35 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **74.** | Q38. Did you eat jute leaf (keren keren) yesterday?  **CRF Name: Dietary** | Show only if question 35 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **75.** | Questions 40, 42, 44, 46, 48, 50, 52  **CRF Name: Dietary** | Show only if question 39 is ticked “Yes”. |  |  |  |
| **76.** | Q41. Did you eat bitter tomato (jaato) yesterday?  **CRF Name: Dietary** | Show only if question 40 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **77.** | Q43. Did you eat tomato (menteng dingo) yesterday?  **CRF Name: Dietary** | Show only if question 42 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **78.** | Q45. Did you eat onion (jabo) yesterday?  **CRF Name: Dietary** | Show only if question 44 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **79.** | Q47. Did you eat eggplant (patenseo) yesterday?  **CRF Name: Dietary** | Show only if question 46 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **80.** | Q49. Did you eat cabbage (supermeo) yesterday?  **CRF Name: Dietary** | Show only if question 48 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **81.** | Q51. Did you eat green pepper (kani salato) yesterday?  **CRF Name: Dietary** | Show only if question 50 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **82.** | Q53. Did you eat chilli (kani mesheng) yesterday?  **CRF Name: Dietary** | Show only if question 52 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **83.** | Q55. How often did you eat oranges last week?  **CRF Name: Dietary** | Show only if question 54 is ticked “Yes”. |  |  |  |
| **84.** | Q56. Did you eat oranges yesterday?  **CRF Name: Dietary** | Show only if question 55 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **85.** | Questions 58, 60, 62, 64, 66  **CRF Name: Dietary** | Show only if question 57 is ticked “Yes”. |  |  |  |
| **86.** | Q59. Did you eat ripe mango (duto moring) yesterday?  **CRF Name: Dietary** | Show only if question 58 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **87.** | Q61. Did you eat ripe papaya (pakaia moring) yesterday?  **CRF Name: Dietary** | Show only if question 60 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **88.** | Q63. Did you eat ripe guava (guyabo moring) yesterday?  **CRF Name: Dietary** | Show only if question 62 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **89.** | Q65. Did you eat ripe cashew fruits (cashew dingo) yesterday?  **CRF Name: Dietary** | Show only if question 64 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **90.** | Q67. Did you eat ripe pine apple (pine appulo) yesterday?  **CRF Name: Dietary** | Show only if question 66 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **91.** | Questions 69, 71, 73, 75, 77, 79, 81, 83, 85, 87, 89, 91, 93  **CRF Name: Dietary** | Show only if question 68 is ticked “Yes”. |  |  |  |
| **92** | Q70. Did you eat jujube red date (Tomborongo) yesterday?  **CRF Name: Dietary** | Show only if question 69 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **93.** | Q72. Did you eat sweet detar (tallow) yesterday?  **CRF Name: Dietary** | Show only if question 71 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **94.** | Q74. Did you eat baobab fruits (sito dingo) yesterday?  **CRF Name: Dietary** | Show only if question 73 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **95.** | Q76. Did you eat saba senegalensis (kaba) yesterday?  **CRF Name: Dietary** | Show only if question 75 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **96.** | Q78.  Did you eat tabo yesterday?  **CRF Name: Dietary** | Show only if question 77 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **97.** | Q80. Did you eat wild mango fruit (wulakono duto) yesterday?  **CRF Name: Dietary** | Show only if question 79 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **98.** | Q82. Did you eat tamarind (timbungo) yesterday?  **CRF Name: Dietary** | Show only if question 81 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **99.** | Q84. Did you eat gingerbread (tamba) yesterday?  **CRF Name: Dietary** | Show only if question 83 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **100.** | Q86. Did you eat velevet tamarind (kosito) yesterday?  **CRF Name: Dietary** | Show only if question 85 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **101.** | Q88. Did you eat African locust bean (neto) yesterday?  **CRF Name: Dietary** | Show only if question 87 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **102.** | Q90. Did you eat wild custard\_apple (wulakono sunkungo) yesterday?  **CRF Name: Dietary** | Show only if question 89 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **103.** | Q92. Did you eat sycamore fig (sotokoyo) yesterday?  **CRF Name: Dietary** | Show only if question 91 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **104.** | Q94. Did you eat marula (kuntang jawo) yesterday?  **CRF Name: Dietary** | Show only if question 93 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **105.** | Question 96, 98, 100, 102, 104, 106, 108, 110, 112, 114, 116  **CRF Name: Dietary** | Show only if question 95 is ticked yes. |  |  |  |
| **106.** | Q97. Did you eat banana yesterday?  **CRF Name: Dietary** | Show only if question 96 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **107.** | Q99. Did you eat apple yesterday?  **CRF Name: Dietary** | Show only if question 98 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **108.** | Q101. Did you eat jack fruit yesterday?  **CRF Name: Dietary** | Show only if question 100 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **109.** | Q103. Did you eat lemon yesterday?  **CRF Name: Dietary** | Show only if question 102 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **110.** | Q105. Did you eat plum (kutufingo/mampatto) yesterday?  **CRF Name: Dietary** | Show only if question 104 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **111.** | Q107. Did you eat hog plum (ningkong) yesterday?  **CRF Name: Dietary** | Show only if question 106 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **112.** | Q109. Did you eat coconut (coco) yesterday?  **CRF Name: Dietary** | Show only if question 108 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **113.** | Q111. Did you eat dates (koroso/tamareo) yesterday?  **CRF Name: Dietary** | Show only if question 110 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **114.** | Q113. Did you eat African fan palm (sibo) yesterday?  **CRF Name: Dietary** | Show only if question 112 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **115.** | Q115. Did you eat sour-sop (sunkungo) yesterday?  **CRF Name: Dietary** | Show only if question 114 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **116.** | Q117. Did you eat Avocado (pear) yesterday?  **CRF Name: Dietary** | Show only if question 116 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **117.** | Questions 119, 121, 123, 125, 127, 129, 131  **CRF Name: Dietary** | Show only if question 118 is ticked “Yes”. |  |  |  |
| **118.** | Q120. Did you eat beef (Ninsi subo) yesterday?  **CRF Name: Dietary** | Show only if question 119 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **119.** | Q122. Did you eat lamb (Saaji Subo) yesterday?  **CRF Name: Dietary** | Show only if question 121 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **120.** | Q124. Did you eat goat (Ba Subo) yesterday?  **CRF Name: Dietary** | Show only if question 123 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **121.** | Q126. Did you eat rabbit (Sang Subo) yesterday?  **CRF Name: Dietary** | Show only if question 125 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **122.** | Q128. Did you eat wild game meat (e.g., antelope, squirrel (duma/santo kereng)) yesterday?  **CRF Name: Dietary** | Show only if question 127 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **123.** | Q130. Did you eat chicken (Sisewo), duck (buroo) or guinea fowl (kamo) yesterday?  **CRF Name: Dietary** | Show only if question 129 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **124.** | Q132. Did you eat canned meat (Corned beef, spam from ham), other birds yesterday?  **CRF Name: Dietary** | Show only if question 131 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **125.** | Q134. How often did you eat meat made from animal organs, such as: liver (Juso), kidney (Ko kilo), heart, gut (kono nuwo), other meats or blood-based foods last week?  **CRF Name: Dietary** | Show only if question 33 is ticked “Yes”. |  |  |  |
| **126.** | Q135. Did you eat meat made from animal organs, such as: liver (juso), kidney (ko kilo), heart, gut (kono nuwo) other meats or blood-based foods including those from wild game yesterday?  **CRF Name: Dietary** | Show only if question 134 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **127.** | Q137. How often did you eat eggs last week?  **CRF Name: Dietary** | Show only if question 134 is ticked “Yes”. |  |  |  |
| **128.** | Q138. Did you eat any eggs yesterday?  **CRF Name: Dietary** | Show only if question 137 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **129.** | Question 140, 142, 144, 146  **CRF Name: Dietary** | Show only if question 139 is answered “Yes”. |  |  |  |
| **130.** | Q141. Did you eat fresh fish yesterday?  **CRF Name: Dietary** | Show only if question 140 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **131.** | Q143. Did you eat dry or smoked fish yesterday?  **CRF Name: Dietary** | Show only if question 142 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **132.** | Q145. Did you eat small fish (Furunding bukunangwo, tambajang etc.) yesterday?  **CRF Name: Dietary** | Show only if question 144 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **133.** | Q147.  Did you eat shell fish (shrimps, prawns, crabs etc.) yesterday?  **CRF Name: Dietary** | Show only if question 146 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **134.** | Questions 149 and 151  **CRF Name: Dietary** | Show only if question 148 is ticked “Yes”. |  |  |  |
| **135.** | Q150. Did you eat beans (soso) yesterday?  **CRF Name: Dietary** | Show only if question 149 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **136.** | Q152. Did you eat lentils or bean/pea products including hummus, tofu and tempeh yesterday?  **CRF Name: Dietary** | Show only if question 151 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **137.** | Questions 154, 156, 158, 160, 162, 164  **CRF Name: Dietary** | Show only if question 153 is answered “Yes”. |  |  |  |
| **138.** | Q155. Did you eat cashew nuts (cashew kulo) yesterday?  **CRF Name: Dietary** | Show only if question 154 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **139.** | Q157. Did you eat Groundnut/Peanut (tiyo) yesterday?  **CRF Name: Dietary** | Show only if question 156 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **140.** | Q159. Did you eat kolanuts (kuruwo) yesterday?  **CRF Name: Dietary** | Show only if question 158 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **141.** | Q161. Did you eat bitter nuts (bitter cola, bitter sesame, bitter groundnuts, bitter peanuts) yesterday?  **CRF Name: Dietary** | Show only if question 160 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **142.** | Q163. Did you eat sesame (beno) yesterday?  **CRF Name: Dietary** | Show only if question 162 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **143.** | Questions 165, 167, 169, 171  **CRF Name: Dietary** | Show only if question 164 is ticked “Yes”. |  |  |  |
| **144.** | Q166. How often did you eat fresh milk (keke) / sour (nono) last week?  **CRF Name: Dietary** | Show only if question 165 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **145.** | Q168.  Did you eat yogurt yesterday?  **CRF Name: Dietary** | Show only if question 167 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **146.** | Q170. Did you eat cheese yesterday?  **CRF Name: Dietary** | Show only if question 169 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **147.** | Q172. Did you eat other dairy product like chakiri or small amount of milk for tea and coffee yesterday?  **CRF Name: Dietary** | Show only if question 171 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **148.** | Questions 174, 176  **CRF Name: Dietary** | Show only if question 173 is ticked “Yes”. |  |  |  |
| **149.** | Q175. Did you eat palm oil yesterday?  **CRF Name: Dietary** | Show only if question 174 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **150.** | Q177. Did you eat other oils (vegetable oil, groundnut oil, palm kernel oil) yesterday?  **CRF Name: Dietary** | Show only if question 176 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **151.** | Questions 179, 181, 183  **CRF Name: Dietary** | Show only if question 178 is ticked “Yes”. |  |  |  |
| **152.** | Q180. Did you eat rice yesterday?  **CRF Name: Dietary** | Show only if question 179 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **153.** | Q182. Did you eat millet yesterday?  **CRF Name: Dietary** | Show only if question 181 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **154.** | Q184. Did you eat other cereals (maize, findi, sorghum etc.) yesterday?  **CRF Name: Dietary** | Show only if question 183 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **155.** | Questions 186, 188, 190, 192, 194, 196  **CRF Name: Dietary** | Show only if question 185 is ticked “Yes”. |  |  |  |
| **156.** | Q187. Did you eat dry chilli yesterday?  **CRF Name: Dietary** | Show only if question 186 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **157.** | Q189. Did you eat spices yesterday?  **CRF Name: Dietary** | Show only if question 188 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **158.** | Q191. Did you eat herbs (loriya leaf, jabbajambo, naana) yesterday?  **CRF Name: Dietary** | Show only if question 190 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **159.** | Q193. Did you eat fish powder (nyemunko) yesterday?  **CRF Name: Dietary** | Show only if question 192 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **160.** | Q195. Did you eat tomato paste (tamate lokati) yesterday?  **CRF Name: Dietary** | Show only if question 194 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **161.** | Q197. Did you eat flavor cubes (maggi) yesterday?  **CRF Name: Dietary** | Show only if question 196 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **162.** | Q199. How often did you eat pancakes (panketo, chopoti) last week?  **CRF Name: Dietary** | Show only if question 198 is ticked “Yes”. |  |  |  |
| **163.** | Q200. Did you eat pancakes (panketo, chopoti) yesterday?  **CRF Name: Dietary** | Show only if question 199 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **164.** | Q202. How often did you eat savoury snacks like pop corn, caracas, chips last week?  **CRF Name: Dietary** | Show only if question 201 is ticked “Yes”. |  |  |  |
| **165.** | Q203. Did you eat any savoury snacks like popcorn, caracas, chips yesterday?  **CRF Name: Dietary** | Show only if question 202 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **166.** | Questions 205, 207, 209,211, 213, 215, 217  **CRF Name: Dietary** | Show only if question 204 is ticked “Yes”. |  |  |  |
| **167.** | Q206. Did you eat bread yesterday?  **CRF Name: Dietary** | Show only if question 205 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **168.** | Q208. Did you eat cake yesterday?  **CRF Name: Dietary** | Show only if question 207 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **169.** | Q210. Did you eat biscuits yesterday?  **CRF Name: Dietary** | Show only if question 209 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **170.** | Q212. Did you eat puffs yesterday?  **CRF Name: Dietary** | Show only if question 211 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **171.** | Q214. Did you eat sandwich yesterday?  **CRF Name: Dietary** | Show only if question 213 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **172.** | Q216. Did you eat meatpies yesterday?  **CRF Name: Dietary** | Show only if question 215 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **173.** | Q218.  Did you eat donut (bombom) yesterday?  **CRF Name: Dietary** | Show only if question 217 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **174.** | Q220. How often did you eat fast food/street food/restaurant food last week?  **CRF Name: Dietary** | Show only if question 219 is answered “Yes”. |  |  |  |
| **175.** | Q221. Did you eat any fast food/street food/ restaurant food yesterday?  **CRF Name: Dietary** | Show only if question 220 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **176.** | Q223. How often did you consume any fizzy drinks like coca cola, fanta last week?  **CRF Name: Dietary** | Show only if question 222 is answered “Yes”. |  |  |  |
| **177.** | Q224. Did you consume any fizzy drinks such as coca cola, fanta yesterday?  **CRF Name: Dietary** | Show only if question 223 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **178.** | Questions 226, 228, 230  **CRF Name: Dietary** | Show only if question 225 is answered “Yes”. |  |  |  |
| **179.** | Q227.  Did you eat any sugar (sukuro) yesterday?  **CRF Name: Dietary** | Show only if question 226 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **180.** | Q229. Did you eat any honey (Leyo) yesterday?  **CRF Name: Dietary** | Show only if question 228 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **181.** | Q131. Did you eat any other sweet (jam, candy, lollipop, chewing gum, keba danpha, sugar sweetner for diabetes) yesterday?  **CRF Name: Dietary** | Show only if question 230 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **182.** | Questions 233, 235, 237  **CRF Name: Dietary** | show only if question 232 is answered “Yes”. |  |  |  |
| **183.** | Q234. Did you consume attaya / local tea yesterday?  **CRF Name: Dietary** | Show only if question 233 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **184.** | Q236. Did you consumed coffee / café touba yesterday?  **CRF Name: Dietary** | Show only if question 235 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |
| **185.** | Q238. Did you consume local juice (Wonjo juice, sito juice, talo juice, baobab juice, tamarind juice (Timbingo)) yesterday?  **CRF Name: Dietary** | Show only if question 237 is answered either “everyday”, “5-6 times per week”, “2-4 times per week”, or “Once a week”. |  |  |  |

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| --- | --- | --- | --- |
|  | **Name** | **Signature** | **Date (dd/mmm/yyyy)** |
| **Author:**  **(System Developer)** |  |  |  |
| **Approved By:**  **(Head of Data Mgmt. / Lead Developer)** |  |  |  |

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| **Conclusion of User Acceptance Testing – (*to be completed by the end-user, including for future releases, bug fixes, etc.)*** |
| The items specified on the attached test plan have tested in accordance with the URS. All items have been validated successfully (including retesting following any issues identified during a previous test).  The end-user is satisfied that the specified items (above) have passed testing and are fit for purpose as specified. |
| The end-user has tested successfully with deviations to the URS – *please list deviations below* |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Name** | **Signature** | **Date (dd/mmm/yyyy)** |
| **Tested By:**  **(End User)** |  |  |  |