#### 5920307163

## INTERNATIONAL CORE VERBAL AUTOPSY FORM 2: DEATH OF CHILD AGED 29 DAYS TO UNDER 5 YEARS

|   | 011120710202007   | WO TO GIVE EN O  |   |                                  |
|---|---|--|---|----------------------------------|
| Interviewer Date of interview   | V date_inter  | /  | File number   |                                  |
| Instructions to interviewer: Introduce yours other who was present during the illness the when the caretaker will be home. Before in voluntary; he/she can refuse to answer and the information provided is only for research | hat led to death. If thi<br>nterviewing the person<br>y question and he/she | s is not possible, an<br>n, explain to him or<br>e can stop the interv | range a time to revisit<br>her that participation i                 | the household n the interview is |
| Instructions to the respondent:" I would like possible symptoms the diseased had/show directly related to his or her death. Please  | ved when she /he wa   | s ill. Some of these   | questions may not ap  |                                  |
| Section 1. Informant identification   | on and backgrou   | und information  | <u> </u>  |                                  |
| 1.1 Names of the informant Firstname rfname   | Juokname  | rjname   | Lastname ri   | <i>Inam</i> e                    |
|   |   |  |   |                                  |
| 1.2 Age in years (>14)  |   |  | 00000   | rage<br>rage1                    |
| 1.3 Sex of <name></name>  |   | ○ M ○ F  |   | intsex                           |
| 1.4 What is the Relationship of the responto the deceased?  | dent  | -  | <ul><li>○ Father ○ GrandPare</li><li>○ Sibling ○ Adoptive</li></ul> |                                  |
|   |   | Other  |   |                                  |
| 1.5 Availability?   |   | O Present at the time of   | f visit   | intav                            |
|   |   | Absent at the time of  | visit, but can be contacted   | & visited                        |
|   |   | O Unavailable,imposs   | ibletocontact   |                                  |
| 1.6 Participation   |   | <ul> <li>Primaryinformant</li> </ul>                                   |   | intpar                           |
|   |   | <ul> <li>Secondary informan</li> </ul>                                 | t who participated in the inter                                     | view                             |
|   |   | O Present but did not p  | articipate O Did not p  | participate                      |
| SECTION 2: BACKGROUND INFORMA   |   | <u> </u>   |   |                                  |
| <b>2.1</b> Before death was the deceased living or more in Asembo, Gem or Karemo?   |   | <ul><li>○ Yes</li><li>○ No</li><li>○ Don'tknow</li></ul>               | <name> aged less than</name>  | n 4months<br>dss                 |
| <b>2.2</b> If deceased was less than 4months as mother living for 4 months or more in A or Karemo?  | ·   |  | ○ Don'tknow ○ NA  | mdss                             |
| <b>2.3</b> If NO, did the deceased return to Ase or Karemo just for burial?   | mbo, Gem  | ○ Yes ○ No   | ○ Don'tknow   | burial                           |
| 2.3 Names of head of compound   |   |  |   |                                  |
| Firstname fnamec  | Secondname jnamed   |  | Lastname Iname  |                                  |
| 2.4 Village, Compound, House  | 2.5 Po  | ermanent ID of the   | deceased child  | permidseq                        |
| 0 000 000 0 000 1 000 000 000 000 000 0   | ① 0 C<br>② 1 C  |  | A & U 0<br>B U 0 1<br>armidvc1  W W 2                               | O O O permidseq                  |
| 3 0 0 0 0 0 N   | ⊗ 3 ⊂   | 00000  |   |                                  |
| 5   | Y     4       2     5   |  | <b>₽ ② ② 3 5</b>  | 000                              |
| 6 000 000 © 0<br>7 000 000 © 8  | 6 0   |  | © © 6<br>⊕ ® 7  | 000                              |
| 8 000 000 0 0<br>9 000 000 0 0  |   | 00000  | ① ⑤ 8<br>② ① 9  | 000                              |
| 2.7 Name of the deceased Child  | , ,   |  |   |                                  |
| Firstname dfname  | Juokname djnar  | me   | Lastname dina   | me                               |
|   |   |  |   |                                  |
|   |   | 1 1 1  |   |                                  |

| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1             | L AUTOPSY FO    | KWI 2: DEATH O | F CHILD AGED 29 DAY         | S TO UNDER 5     | YEARS          |
|---|-----------------|----------------|-----------------------------|------------------|----------------|
| 2.8 Names of mother                               | <b>2.9</b> Perm | anent ID of th | e decease <u>d's</u> mothe  | er               |                |
| fnamem  |                 |                | mpidvc mpid                 | th               | mpidsq         |
| Middlename(Juokname)                              |                 | 0000           | A R U                       | 0 00             |                |
| jnamem  |                 | 0000           | B □ ♥  mpidvc1 ⓒ M W mpic   | 1 00             |                |
|   |                 | 0000           |                             | 1h1 2 OC<br>3 OC |                |
| Lastname  |                 | 0000           |                             | 4 OC             | $\circ$        |
| Inamem  |                 | 0000           | F P Z<br>G O                | 5 OC<br>6 OC     |                |
|   | 7 00            | 0000           | H R                         | 7 OC             |                |
|   |                 | 0000           | 0<br>0<br>7                 | 8 00             |                |
| <b>2.10</b> Child's sex                           |                 |                |                             | 9 OC             | 00             |
| 2.11 Child's date of birth (dd/mm/yyy)            |                 |                | /                           | / 🗌              | vedob          |
|   |                 |                | day (dd) month (            | mm) year (y      | ууу)           |
| 2.12 Date of death                                |                 |                | /                           | /                | vedod          |
|   |                 |                | years Months                | Days             | veyears        |
| 2.13 Child's age at death (years/months[days]) -  |                 |                |                             |                  | veyears1       |
| If child <30 days old, record # days              |                 |                | 0 00 0 00                   |                  |                |
|   |                 |                | 1 0 0 1 0 0                 |                  |                |
|   |                 |                | 3 00 3 00                   | 3 🔾              | vedavs         |
|   |                 |                | 4 0 0 4 0 0                 |                  |                |
|   |                 |                | 6 00 6 00                   |                  |                |
|   |                 |                | 7 00 7 00                   | 7 00             |                |
|   |                 |                | 8 0 8 0 0                   |                  |                |
| SECTION 3 . PLACE AND CAUSE OF DEATH              |                 |                |                             |                  |                |
| 3.1 Where did <name> die?</name>                  | acd Athome      | ○ At a health  | facility On the way         | to/from a health | facility       |
|   | Other(sp        |                |                             |                  | placdoth       |
| If answered "At a health facility" in Q.3.1 al    | _               | _              | -                           |                  |                |
| 3.2 Which health facility did <name>hfname</name> |                 | ○ Njejra       | O Ng'iyamission             | ○ Wagai          | ○ Ting'-Wang'i |
|   | ○ Ndori         | ○ Rera         | <ul><li>Nyathengo</li></ul> | ○ Aluor          |                |
|   | O Nyawara       | O Bar-olengo   | ○ Siaya                     | ○ Bondo          | hfnameoth      |
|   | Other           |                |                             |                  | maneour        |
|   |                 |                |                             |                  |                |
| 3.3 What do you think was the cause of death?     | (write exactly  | as the respo   | ndent tells you)            |                  |                |
|   |                 |                |                             |                  |                |
|   |                 |                |                             |                  |                |
|   |                 |                |                             |                  |                |
|   |                 |                |                             |                  |                |
|   |                 |                |                             |                  |                |
|   |                 |                |                             |                  |                |
|   |                 |                |                             |                  |                |
|   |                 |                |                             |                  |                |
|   |                 |                |                             |                  |                |
|   |                 |                |                             |                  |                |
| DSC Verbal Autorous abild SO down to 5 years      |                 |                |                             |                  |                |
| DSS Verbal Autopsy -child 29 days to 5 yrs        | 1 1 1 1         | 1 1 1          |                             | P                | age 2 of 13    |

| 2178307165 INTERNATIONAL CORE VERBAL AUTOPSY FORM   | RM 2: D | DEATH  | OF     | CHIL     | D AGE     | D 29 DA     | YS TO UND                               | ER 5 YEA    | RS        |
|---|---------|--|--------|----------|-----------|-------------|---|-------------|-----------|
| 3.4 Ask: Please tell me the history of events leading to the deat   | ath of  | <nai< th=""><th>ME&gt;</th><th>&gt;</th><th></th><th></th><th></th><th></th><th></th></nai<> | ME>    | >        |           |             |   |             |           |
|   |         |  |        |          |           |             |   |             |           |
|   |         |  |        |          |           |             |   |             |           |
|   |         |  |        |          |           |             |   |             |           |
|   |         |  |        |          |           |             |   |             |           |
|   |         |  |        |          |           |             |   |             |           |
|   |         |  |        |          |           |             |   |             |           |
|   |         |  |        |          |           |             |   |             |           |
|   |         |  |        |          |           |             |   |             |           |
| "I would like to ask some questions concerning symptoms that these questions may not appear to be directly related to his/h questions. They will help us to get a clear picture of all possib | her de  | eath.  | Ple    | ase l    | bear w    | vith me     | and answe                               |             |           |
| SECTION 4. ACCIDENTS AND INJURIES   |         |  |        |          |           |             |   |             |           |
| 4.1. Did the child have an injury including animal  |         |  |        |          |           |             |   |             |           |
| or insect bite, or an accident that resulted in his/her death (be ne ohinyre e masira mar ndara,  | 0       | Injury   |        | ) Acc    | ident     | ○ Nei       | ther injury or a                        | accident    | inj       |
| kata lee, kute makecho mokelo thoo ne)?   |         | Don'tk   | know   | ,        |           |             |   |             |           |
| If the answer to 4.1 above is "Injury" or "Accident" go to question 4. If the answer 4.1 above is "Neither Injury or accident" or "Don't know concerning the mother                           |         | in NA  | A in 4 | 4.1.1 i  | to 4.4 8  | go to       | Section 5 for                           | symptoi     | ms        |
| 4.1.1 What kind of injury or accident?  |         |  | porta  | ccide    | nt(pede   |             | ○ Transpor                              |             | jer)      |
|   | 0       | Fall<br>Bite o   | r etin | <b>a</b> |           |             | <ul><li>Drowning</li><li>Burn</li></ul> | l           | tinj      |
|   | _       |  |        | _        | g. knife) |             | OPoisoning                              | 9           |           |
|   | _       | Assau  |        |          |           |             | ○ NA                                    |             | tinjot    |
|   | $\circ$ | Other  | (spe   | cify)    |           |             |   |             |           |
| 4.2 Was s/he injured intentionally by someone?  |         | Yes  | C      | ) No     | 0         | DK (        | ⊃ NA                                    |             | injty     |
| 4.3 Was s/he accidentally poisoned (including alcohol)?   | 🔿       | Yes  | 0      | No       | ○ D       | K           |   |             | аср       |
| 4.4 Did s/he commit suicide?  |         | Yes  | 0      | No       | () D      | K           |   |             | sui       |
| If injury or accident led to death go to other Evidence a   | and S   | Sumr   | nary   | of c     | details   | in Sec      | tion 11, pa                             | ge 12       |           |
| SECTION 5. EVENTS DURING THE BIRTH OF A CHILD   |         |  |        |          |           |             |   |             |           |
| 5.1 Did the child's mother suffer from any of the following   | $\circ$ | Diabe  | tes    |          |           |             |   |             | motcondit |
| conditions (read options)?  | $\circ$ | ТВ   |        | (If y    | es, go t  | o 5.2, else | e fill NA in 5.2                        | & go to Q5  | .3)       |
|   | $\circ$ | HIV/A  | IDS    | (If y    | es go to  | 5.3 and     | 5.4, else fill NA                       | A go to Q5. | 5)        |
| <i></i>   | $\circ$ | None   |        |          |           | n'tknow     |   |             |           |
| (If mother had TB,ask) 5.2 Was the mother of the child diagnosed with TB during the last 2 years?   | -       |  |        | 0,       | Yes       | ○ No        | ○ DK                                    | ○ NA        | mottb     |
| (If mother had HIV,ask Q.5.3 & 5.4) 5.3 If the mother had HIV, ask did the mother receive ARVs  |         |  |        | Ο,       | Vas       | ○ No        | ○ DK                                    | ○ NA        | motarv    |
| during her pregnancy?   | _       |  |        | O        | 162       | O NO        | O DK                                    | O INA       |           |
| 5.4 If the mother had HIV, ask did the <b>child</b> receive ARVs within 3 days of birth?  | -       |  |        | 0        | Yes       | ○ No        | ○ DK                                    | ○ NA        | childarv  |
| 5.5 Did the mother have any antenatal care during her pregnand  | ncy? -  |  |        | 0        | Yes       | ○ No        | ○ DK                                    |             | vepregc   |
| 5.6 Ask for children who are less than one Year only or else Did the mother receive SP or fansidar for malaria prevention during the antenatal visits?  |         | NA:  |        | 0,       | Yes       | ○ No        | ○ DK                                    | ○ NA        | vepregfs  |
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| SECTION 6. CHRONIC ILLNESS  |          |                    |         |                                |
|---|----------|--------------------|---------|--------------------------------|
| 6.0 Did <name> suffer from any of the following illnesses? (read all options):</name>   | Day      | Months             | Years   | Duration                       |
| 6.01 Heart disease ( <i>Tuo adundo</i> ) Yes ONO OK Ohea  | 0        | 0                  | 0       |                                |
| 6.02 Diabetes ( <i>Tuo mar sukari</i> ) Yes O No O K diab   | 0        | 0                  | 0       |                                |
| 6.03 Epilepsy ( <i>Ndulume</i> ) Yes ONO OK <sup>epil</sup>   | 0        | 0                  | 0       |                                |
| 6.04 TB (Ahonda mar kahera) O Yes O No O DKtb   | 0        | 0                  | 0       |                                |
| 6.05 HIV/AIDS ( <i>Ayaki</i> ) Yes O No O K <sup>hiv</sup>  | 0        | 0                  | 0       |                                |
| 6.06 Leprosy ( <i>Dhoho, nyinyo, mbiko</i> ) Yes ONO OK   | 0        | 0                  | 0       |                                |
| 6.07 Asthma ( <i>Athma, Tuo mar thung'</i> )  Yes  No  DK <sup>asth</sup>   | 0        | 0                  | 0       |                                |
| 6.08 Cancer (Adhola [manie ich, Yes No DK can manie thuno, mar del])  | 0        | 0                  | 0       |                                |
| 6.08.1 (If Yes to 6.08, ask:) What type of cancer? — Cervix — Breast — Prostate   | e 🔾 Liv  | er                 |         | cantyp                         |
| (adhola mar ang'o nee?) ○ Pancreas ○ Bone ○ D   | on'tknow |                    |         | cantypo                        |
| Other, specify  |          |                    |         |                                |
| 6.9 Did <name> suffer from any other chronic illness - O Yes O No O DK Odis - apart from those i have asked you about?</name> |          | Months  OK", go to | Section | odisDMY                        |
| (Tuo moro amora mong ere ni en ga godo e dende)   | 10 01 2  | ,, go to           | 7       | spodis                         |
| 6.9.1 (If Yes, ask:) Please specify:  |          |                    |         |                                |
| SECTION 7. SIGNS AND SYMPTOMS   |          |                    |         |                                |
| 7.01 At birth   |          |                    |         | smallsiz                       |
| 7.01.1 Was the child small at birth? O Yes ONO OK   |          |                    |         |                                |
| 7.01.2 Was the child born premature? Yes No DK  |          |                    |         | premature                      |
| 7.2.1 (If Yes ask:) How many months or weeks of pregnancy?  dmpr 0 1 2 3 4 5 6 7 8 9 dmpr1 mmpr 0 1 2 3                       | 4 5 6    | 7 8 9              |         |                                |
| O Days 00000000 O Months 0000   | 000      | 000                | ○ Do    | <sub>трг</sub> омок<br>nt Know |
| 7.02 Breastfeeding  | 000      | 000                |         |                                |
| 7.02 Was the child breast feeding? ————————————————————————————————————   |          |                    | b       | rstfd                          |
| 7.02.1 (If Yes ask:) Did the child stop just before death?  |          |                    |         |                                |
| 7.03 Fever  |          |                    |         |                                |
| 7.03 Did <name>have fever (<i>Del maore</i>) Yes ONO OK</name>  |          |                    |         | vesfev                         |
| 7.03.1 (If Yes, ask:) How long did <name> have fever?</name>  |          |                    |         |                                |
| dfev 0 1 2 3 4 5 6 7 8 9 dfev1 mfev 0 1 2 3   |          |                    |         |                                |
| O Days 00000000 O Months 0000   |          |                    | ○ Doi   | nt Know                        |
| 7.03.2 (If Yes, ask:) the fever was Continuous On and off   | O DK     |                    |         | tfe                            |

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DSS Verbal Autopsy -child 29 days to 5 yrs

| 7.04 Night sweat 7.04.1 Did <name>have night sweats (tuch luya gotieno)</name> | ○ Yes ○ No ○ DK                                  |
|--|--|
| 7.04.1 Did Sty Wile Phave Hight Swedie (tao/ laya golieno)                     | If "No" or "DK", go to 7.05                      |
| 7.04.2 (If Yes, ask:) How long did <name> have night sweat</name>              | , <b>3</b>                                       |
|  | nntswet () 1 2 3 4 5 6 7 8 9                     |
|  |  |
| O Days O O O O O O O O Months  | 00000000 O Dont Know                             |
| 7.05 Convulsions   |  |
| 7.05.1 Did <name> convulsions?</name>  | ○ Yes ○ No ○ DK con                              |
|  | If "No" or "DK", go to 7.06                      |
| 7.05.2 (If Yes, ask:) How long did <name> have convulsions</name>              | ?  |
| 0 1 2 3 4 5 6 7 8 9 dcon   | 0 1 2 3 4 5 6 7 8 9 mcon conDMDK                 |
| O Days O O O O O O O O O Months  | OOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO           |
| 000000000000000000000000000000000000000  |  |
|  |  |
| 7.06 Cough   |  |
| 7.06.1 Did <name> have a cough (Ahonda)?</name>                                |  |
| 7.06.2 (If Yes, ask:) For how long did <name> have a cough?</name>             | If "No" or "DK", fill DK & go to 6.07            |
|  | 0 1 2 3 4 5 6 7 8 9 mco coDMDK                   |
| 000000000  |  |
| O 1 2 3 4 5 6 7 8 9 dco  O Days O O O O O O O O O O Months                     | O O O O O O O O O O O O O O O O O O O            |
| 7.06.3 (If Yes), Was the cough   | Ory (Ahonda ma rewre) coughtype                  |
| (Ahonda mar okego; Ahonda mayom)?  | Productive(Ahondamarokego)                       |
|  | ○ With blood (Ahonda matimo remo)                |
|  | ○ None ○ Dontknow                                |
| 7.07 Due of him to   |  |
| 7.07 Breathing   |  |
| 7.07.1 Was <name> have breathing difficulties?</name>                          | •  |
| 7.07.2 (If Yes, ask:) For how long?  | If "No" or "DK", fill DK & go to 6.03.3          |
| · · · · · · · · · · · · · · · · · · ·  | sdbthm 0 1 2 3 4 5 6 7 8 9 vesdbthm1 vesdbthDMDK |
| O Days O O O O O O O O O Months  | O Dont Know                                      |
| 000000000000000000000000000000000000000  |  |
| 7.07.3 (If Yes ask:) Did <name> have fast breathing?</name>                    | ○ Yes ○ No ○ DK vesfbth                          |
| 7.07.4 (If Yes, ask:) For how long?  | If "No" or "DK", fill DK & go to 6.04.1          |
| vesfbthd 0 1 2 3 4 5 6 7 8 9 vesfbthd1 ves                                     | sfbthm 0 1 2 3 4 5 6 7 8 9 vesfbthm1 vesfbthDMDK |
| O Days 00000000 O Months   | 000000000 O Dont Know                            |
| , [] 000000000   |  |
| 7.07.5 Did <name> have in-drawing of the chest while</name>                    | ○ Yes ○ No ○ DK                                  |
| breathing?   | If "No" or "DK", fill DK & go to 6.03.3          |
| 7.07.6 (If Yes, ask:) For how long?  | •  |
|  | esinm 0 1 2 3 4 5 6 7 8 9 vesinm1 vesinDMDK      |
| O Days 00000000 O Months   | Dont Know  |
|  |  |

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| 7.08 Vomiting   |
|---|
| 7.08.1 Did <name> vomit (<i>Ng'ok</i>)? OYes ONO ODK <i>vom</i></name>  |
| If "No" or "DK", fill Don't know in 7.08.2 & go to 7.08.3   |
| 7.08.2(If Yes, ask:) How long days did <name> have vomiting?</name>   |
| 0 1 2 3 4 5 6 7 8 9 <sup>dvom</sup>   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| 7.08.3 (If Yes, ask:) Did <name> vomit blood (ng'ogo remo)? O Yes ONO ODK bvom</name>   |
| If "No" or "DK", fill Don't know in 7.08.4 & go to 7.09   |
| 7.08.4 (If Yes, ask) How long did <name> vomit blood?</name>  |
| 0 1 2 3 4 5 6 7 8 9 <sup>dbvom</sup> 0 1 2 3 4 5 6 7 8 9 <sup>mbvom</sup>   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| 7.09 Mass   |
| 7.09.1 Did <name> have any mass in the abdomen (Yamb ich madongo)? O Yes ONO ODK abm</name>   |
| If "No" or "DK", fill Don't know in 7.09.2 & go to 7.10   |
| 7.09.2 ( <i>If Yes, ask)</i> How long did <name> have mass in the abdomen?  0 1 2 3 4 5 6 7 8 9 dabm  0 1 2 3 4 5 6 7 8 9 mabm</name> |
|   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| 7.10 Abdominal distension   |
| 7.10.1 Did <name> have distension of the abdomen (Ich mokuot; Ich mochielore)? O Yes ONO ODK abd</name>                               |
| If "No" or "DK", fill Don't Know in 7.10.2 & go to 7.11   |
| 7.10.2 (If Yes, ask:) How long did <name> have abdominal distension?</name>   |
| 0 1 2 3 4 5 6 7 8 9 <sup>dabd</sup> 0 1 2 3 4 5 6 7 8 9 <sup>mabd</sup>   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| 7.10.3 (If Yes, ask:) the distension started O Suddenly within a few days O Gradually overtheweeks O DKtad                            |
| 7.11 Diarrhea   |
| 7.11.1 Did <name> have diarrhea (diep/be ne odieo?) OYes ONO OKdiar</name>  |
| If "No" or "DK", fill Don't Know & go to 6.08.4<br>7.11.2 (If Yes, ask:) For how long did <name> have diarrhea?</name>                |
| ddia 0 1 2 3 4 5 6 7 8 9 ddia1 mdia 0 1 2 3 4 5 6 7 8 9 mdia1   |
|   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| 7.11.3 Did <name> pass blood in stool (Okone be neotimo remo)? OYes ONO OK bts</name>   |
| 7.12 Abdominal pains  |
| 7.12.1 Did <name> have abdominal pain? (ich makecho, kata malit) OYes ONO ODK abp</name>  |
| If "No" or "DK", fill Don't Know & go to 6.15.  |
| 7.11.2 (If Yes, ask:) For how long did <name> have abdominal pain?</name>   |
| dabp 0 1 2 3 4 5 6 7 8 9   dabp1   mabp 0 1 2 3 4 5 6 7 8 9   mabp1   |
| O Days O O O O O O O O O O O O O O O O O O O  |

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| 7.13 Weight loss  |
|---|
| 7.13.1 Had <name> lost weight before death (Dhero; Del mogore)? 🔾 Yes 💢 No 💢 DK 16W</name>                                    |
| If "No" or "DK", fill Don't Know in 7.13.2 & to 7.14  |
| 7.13.2 (If Yes, ask:) How long before death?  |
| 0 1 2 3 4 5 6 7 8 9 dlow 0 1 2 3 4 5 6 7 8 9 mlow   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| 7.14 Mouth sore   |
| 7.14.1 Did <name> have mouth sores (Dhok mopudhore malit)? O Yes ONO ODK msr</name>   |
| If "No" or "DK", fill Don't Know in 7.14.2 & to 7.15  |
| 7.14.2 (If Yes, ask:) How long did <name>have mouth sores?</name>   |
| 0 1 2 3 4 5 6 7 8 9 <sup>dmsr</sup> 0 1 2 3 4 5 6 7 8 9 <sup>mmsr</sup>   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| <u>7.15 Pallor</u>  |
| 7.15.1 Did <name> look pale (on fingers or feet)  (Bende nene kata lwetene kata lewe olokore marachar? Yes ONO ODK pal</name> |
| If "No" or "DK", fill Don't Know in 7.15.2 & go to 7.16   |
| 7.15.2 (If Yes, ask:) How long did <name> look pale?</name>   |
| 0 1 2 3 4 5 6 7 8 9 <sup>dpal</sup> 0 1 2 3 4 5 6 7 8 9 <sup>mpal</sup>   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| 7.16 Face puffiness   |
| 7.16.1 Did <name> have puffiness of the face (Wang' mayienyo)?</name>   |
| If "No" or "DK", fill Don't Know in 7.16.2 & go to 7.17   |
| 7.16.2 (If Yes, ask:) How many days did the swelling last?  |
| 0 1 2 3 4 5 6 7 8 9 <b>dpuf</b> 0 1 2 3 4 5 6 7 8 9 <sup>mpuf</sup>   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| 7.17 Body Swelling  |
| 7.17.1 Did <name> have swelling of the whole body?</name>   |
| If "No" or "DK", fill Don't Know in 7.17.2 & go to 7.18   |
| 7.17.2 (If Yes, ask:) How many days did the swelling last? (98 if > 3 years for all the periods)                              |
| 0 1 2 3 4 5 6 7 8 9 dwelb 0 1 2 3 4 5 6 7 8 9 mswelb swelbDMD   |
| Поососос Поососос   |
| O Days O O O O O O O O O O O O O O O O O O O  |
| 7.18 Jaundice   |
| 7.18.1 Did <name>'s eye color change to yellow, jaundice, (Wang' maratong')? O Yes ONO ODK jau</name>                         |
| If "No" or "DK", fill Don't Know in 7.18.2 & go to 7.19   |
| 7.18.2 If Yes, for how long? (kane olokore maratong', kuom ndalo marom nadi?  |
| 0 1 2 3 4 5 6 7 8 9 <sup>djau</sup> 0 1 2 3 4 5 6 7 8 9 <sup>mjau</sup>   |
| O Days O O O O O O O O O O O O O O O O O O O  |

DSS Verbal Autopsy -child 29 days to 5 yrs

| 7.19 Oedema/swelling   |                           |                     |                      |
|--|---------------------------|---------------------|----------------------|
| 7.19.1. Did <name> have ankle swelling Show that part of the body (Tielo Mayienyo)?</name>   |                           | ○ Yes ○ N           | No  OK saa           |
| Show that part of the body (Tielo Mayleriyo)!  | If "No" or "DIZ" fill Do  |                     |                      |
| 7400 (1) (1) (1) (1) (1)   | If "No" or "DK", fill Do  | TITENIOW III 7.19.2 | 2 & 90 to 7.20.1     |
| 7.19.2 (If Yes, ask:) How long did <name> have t</name>  | ne swelling ?             |                     |                      |
| 0 1 2 3 4 5 6 7 8 9 dsaa   | 0 1 2 3 4 5 6 7 8 9       | msaa                | saaDMDK              |
| O Days O O O O O O O O O Month   | ns                        | O Dont Know         | ○ More than 3 yrs    |
|  |                           |                     |                      |
| 7.20.1 Did <name> have swelling of the joints (Fuond</name>  | le nokuot\?               | ○ Yes ○ N           | No () DK swj         |
| The second of th | If "No" or "DK", fill Do  |                     |                      |
| 7.20.2 (If Yes, ask:) How long did <name> have</name>  |                           |                     | - o. go .o           |
| 0 1 2 3 4 5 6 7 8 9 dswj   | 0 1 2 3 4 5 6 7 8 9       | msaa                |                      |
| Пооооооо   | Пооооооо                  |                     | swjDMDK              |
| O Days O O O O O O O O Month   | 00000000                  | O Dont Know         | ○ More than 3 yrs    |
| 7.21 Swelling armpits  |                           |                     |                      |
| 7.21.1 Did <name> have swelling in the armpit (Awai</name>   | na' mach\?                | ○ Yes ○ N           | o OK swa             |
| 7.21.1 Bid (17 twice mave swelling in the diffipit (7 twell  | If "No" or "DK", fill Doi |                     | O DIC                |
| 7.21.2 (If Yes, ask:) How many days did the swelling   | •                         |                     | . g. t               |
| 0 1 2 3 4 5 6 7 8 9 dswa   | 0 1 2 3 4 5 6 7 8 9       | mswa                | swaDMDK              |
| O Davis 000000000000000000000000000000000000   |                           | O Dont Know         | ○ Mara than 2 ma     |
| O Days O O O O O O O O Months  |                           | O Dont Know         | ○ More than 3yrs     |
|  |                           |                     |                      |
| 7.22 Measles   |                           |                     |                      |
| 7.22.1 Did <name> have measles?</name>   |                           | ○ Yes ○ N           | o OK meas            |
|  | If "No" or "DK", fill Do  | n't Know in 7.22.   | 2 & go to 7.23       |
| 7.22.2 (If Yes, ask:) How many days did s/he have  |                           | mmeas               |                      |
| T00000000  | 0 1 2 3 4 5 6 7 8 9       | nmeas               | measDMDK             |
| O Days O O O O O O O Months  | 5 10000000000             | O Dont Know         | O More than 3yrs     |
|  |                           |                     |                      |
| 7.23 Skin diseases   |                           |                     |                      |
| 7.23.1 Did <name> have any skin disease (Bende pi dende ne nigi tuo moro amora)?</name>  | en                        | ○ Yes ○ N           | o OK skind           |
| dende he higi tao moro amora):   | If "No" or "DK", fill Do  | _                   | _                    |
| 7.23.2 (If Yes, ask:) How long did <name>'s skin</name>  | disease?                  |                     |                      |
| 0 1 2 3 4 5 6 7 8 9 dskind   | 0 1 2 3 4 5 6 7 8 9       | mskind              |                      |
| $\Box$ 000000000   |                           | O Dont Know         | skindDMDK            |
| O Days O O O O O O O Months  |                           | O Dont Know         | SKIIUDIIIDK          |
| 7.24 Chest Infections  |                           |                     |                      |
| 7.24.1 Did <name> have repeated chest infections?</name>   |                           | ○ Yes ○ N           | o OK <sup>chst</sup> |
| '  | If "No" or "DK", fill Doi | n't Know in 7242    |                      |
| 7010 /// 1011 1011   |                           |                     | g                    |
| 7.24.2 (If Yes, ask:) How long did <name>'s ches</name>  | st intections?            |                     |                      |
| 0 1 2 3 4 5 6 7 8 9 dchst  | 0 1 2 3 4 5 6 7 8 9       | mchst               |                      |
| O Days O O O O O O O O O O Months  | 000000000                 | O Dont Know         | chstDMDK             |
|  |                           |                     |                      |

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| 7.25 Sleepyness   |  |   |
|---|--|---|
| 7.25.1 Was <name> unusually sleepy?</name>  |  | - Yes No DK sipy  |
|   | If "No" or "DK", fill Do   | n't Know in 7.25.2 & go to 7.26   |
| 7.25.2 (If Yes, ask:) How long was <name> unusua</name>   | ally sleepy?   |   |
| 0 1 2 3 4 5 6 7 8 9 dchst   | 0 1 2 3 4 5 6 7 8 9  | mchst   |
| O Days O O O O O O O O O Months   |  | O Dont Know chstDMDK  |
| 7.26 Neck pain  |  |   |
| 7.26.1Did <name> have neck pain (ng'ut malit/remo)?</name>  |  | - ○ Yes ○ No ○ DK <i>npa</i>  |
|   | ·  | n't Know & go to 7.27   |
| 7.26.2 (If Yes, ask:) For how long did <name> have</name>   | e neck pain?   |   |
| 0 1 2 3 4 5 6 7 8 9  npad   | 0 1 2 3 4 5 6 7 8 9  | npam  |
| O Days 00000000 O Months  |  | O Dont Know npaDMDK   |
| 7.27 Headache   |  |   |
| 7.27.1 Did <name> have headache (Wich bar)?</name>  |  | - Yes No DK head  |
| 7.27.2 (If Yes, ask:) For how long?   | If "No" or "DK", fill Do   | n't Know & go to 7.28   |
| 0 1 2 3 4 5 6 7 8 9 dhea  | 0 1 2 3 4 5 6 7 8 9  | mhea  |
| O Days O O O O O O O O O O Months   |  | O Dont Know heaDMDK   |
|   |  | O BOIL MIOW   |
| 7.28 Body stiffness   |  |   |
|   |  |   |
| 7.28.1 Did <name> develop stiffness of the whole bod</name>   | y, before death  | - O Yes O No O DK stiffb  |
|   |  |   |
| 7.28.1 Did <name> develop stiffness of the whole bod</name>   | If "No" or "DK", fill Do   | n't Know & go to 7.29   |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?</name>  | If "No" or "DK", fill Do   | n't Know & go to 7.29   |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> deve</name></name>   | If "No" or "DK", fill Do elop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9   | n't Know & go to 7.29<br>body?<br>mstiffb   |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> deve</name></name>   | If "No" or "DK", fill Doelop this stiffness of the whole   | n't Know & go to 7.29<br>body?<br>mstiffb   |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> deve</name></name>   | If "No" or "DK", fill Do elop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9   | n't Know & go to 7.29<br>body?<br>mstiffb   |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  O 1 2 3 4 5 6 7 8 9</name></name>   | If "No" or "DK", fill Do   | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?</name></name></name></name></name></name>  | If "No" or "DK", fill Do elop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  e ne pache lal)?  | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?</name></name></name></name></name></name>  | If "No" or "DK", fill Doelop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0  ene pache lal)?  If "No" or "DK", fill Do  | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  - O Yes O No O DK Icsn  |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop detiff bod (astiff bod (astiff</name></name></name> | If "No" or "DK", fill Doelop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0  e ne pache lal)?  If "No" or "DK", fill Does of consciousness?   | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  - O Yes O No O DK Icsn  |
| 7.28.1 Did <name> develop stiffness of the whole bodd (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bodd (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop destiff (del motal, kapok otho)?  One of the whole bodd (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> have loss of the whole bodd (del motal, kapok otho)?  7.29.2 (If Yes, ask:) How long did <name> have loss of the whole bodd (del motal, kapok otho)?</name></name></name></name></name>   | If "No" or "DK", fill Doelop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0  ene pache lal)?  If "No" or "DK", fill Does of consciousness?  | n't Know & go to 7.29 body?  mstiffb  O Dont Know stiffbDMDK  - O Yes O No O DK Icsn n't Know & NA and go to 7.30.  |
| 7.28.1 Did <name> develop stiffness of the whole bodd (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bodd (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop detiff bodd (stiff bodd)  One of the whole bodd (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop detiff bodd (stiff bodd)  7.29 Level of consciousness  7.29.1 Did <name> have loss of consciousness (Bender of the whole bodd)  7.29.2 (If Yes, ask) How long did <name> have loss of the whole bodd (del motal, kapok otho)?  One of the whole bodd (del motal, kapok otho)?</name></name></name></name></name></name>   | If "No" or "DK", fill Doelop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  ene pache lal)?  If "No" or "DK", fill Does of consciousness?  | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  - Yes No DK lcsn n't Know & NA and go to 7.30.  |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop destiff to the long destification of the long destification destified to the long destification destified to the long destination to the long destified to the long</name></name></name>  | If "No" or "DK", fill Doelop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  ene pache lal)?  If "No" or "DK", fill Does of consciousness?  | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  - Yes No DK lcsn n't Know & NA and go to 7.30.  |
| 7.28.1 Did <name> develop stiffness of the whole bodd (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bodd (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop detiff bodd (del motal, kapok otho)?  7.29.2 (level of consciousness)  7.29.2 (level of consciousness)  7.29.2 (level of consciousness)  7.29.2 (level of consciousness)  7.29.3 (level of consciousness)  7.29.5 (level of consciousness)  7.29.6 (level of consciousness)  7.29.7 (level of consciousness)  7.29.8 (level of consciousness)  7.29.9 (level of consciousness)  7.29.1 Did <name> have loss of consciousness (Bender)  7.29.2 (level of consciousness)  7.29.3 (level of consciousness)  7.29.5 (level of consciousness)  7.29.6 (level of consciousness)  7.29.7 (level of consciousness)  7.29.8 (level of consciousness)  7.29.9 (level of consciousness)  7.29.1 Did <name> have loss of consciousness (Bender)  7.29.2 (level of consciousness)  7.29.3 (level of consciousness)  7.29.5 (level of consciousness)  7.29.6 (level of consciousness)  7.29.7 (level of consciousness)  7.29.8 (level of consciousness)  7.29.9 (level of consciousness)  7.29.1 Did <name> have loss of consciousness (Bender)  7.29.2 (level of consciousness)  9.1</name></name></name></name></name></name>   | If "No" or "DK", fill Doe elop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  e ne pache lal)?  If "No" or "DK", fill Does of consciousness?  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  If "No" or "DK", fill Does of consciousness?   | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  - Yes No DK Icsn n't Know & NA and go to 7.30.  mIcsn Dont Know IcsnDMDK  - Yes No DK fit   |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop detiff to the lost of the whole bod (del motal, kapok otho)?  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.29 Level of consciousness  7.29.1 Did <name> have lost of the whole bod (del motal, kapok otho)?  7.29 Level of consciousness  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.30 Fits  7.30.1 Did <name> have fits (Talarieya)?  7.30.2 (If Yes, ask:) For how long did <name> have of the whole bod (del motal, kapok otho)?</name></name></name></name></name></name></name></name></name></name>  | If "No" or "DK", fill Does elop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  ene pache lal)?  If "No" or "DK", fill Does of consciousness?  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  fits?  If "No" or "DK", fill Does of the whole w | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  - Yes No DK Icsn n't Know & NA and go to 7.30.  mIcsn Dont Know IcsnDMDK  - Yes No DK fit   |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop detiff to the lost of the whole bod (del motal, kapok otho)?  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.29 Level of consciousness  7.29.1 Did <name> have lost of the whole bod (del motal, kapok otho)?  7.29 Level of consciousness  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.30 Fits  7.30.1 Did <name> have fits (Talarieya)?  7.30.2 (If Yes, ask:) For how long did <name> have of the whole bod (del motal, kapok otho)?</name></name></name></name></name></name></name></name></name></name>  | If "No" or "DK", fill Doe elop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  ene pache lal)?  If "No" or "DK", fill Does of consciousness?  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  fits?   | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  - Yes No DK Icsn n't Know & NA and go to 7.30.  mIcsn Dont Know IcsnDMDK  - Yes No DK fit n't Know & go to 7.31                           |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop destiff because the compact of the c</name></name></name> | If "No" or "DK", fill Doe elop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  ene pache lal)?  If "No" or "DK", fill Does of consciousness?  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  fits?  If "No" or "DK", fill Does of the whole of | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  - Yes No DK Icsn n't Know & NA and go to 7.30.  mIcsn Dont Know IcsnDMDK  - Yes No DK fit n't Know & go to 7.31  mfits                    |
| 7.28.1 Did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop stiffness of the whole bod (del motal, kapok otho)?  7.28.2 (If Yes, ask:) For how long did <name> develop detiff to the lost of the whole bod (del motal, kapok otho)?  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.29 Level of consciousness  7.29.1 Did <name> have lost of the whole bod (del motal, kapok otho)?  7.29 Level of consciousness  7.29.2 (If Yes, ask) How long did <name> have lost of the whole bod (del motal, kapok otho)?  7.30 Fits  7.30.1 Did <name> have fits (Talarieya)?  7.30.2 (If Yes, ask:) For how long did <name> have of the whole bod (del motal, kapok otho)?</name></name></name></name></name></name></name></name></name></name>  | If "No" or "DK", fill Doe elop this stiffness of the whole  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  e ne pache lal)?  If "No" or "DK", fill Does of consciousness?  0 1 2 3 4 5 6 7 8 9  0 0 0 0 0 0 0 0 0  fits?  If "No" or "DK", fill Does of the whole o | n't Know & go to 7.29 body?  mstiffb  Dont Know stiffbDMDK  - Yes No DK Icsn n't Know & NA and go to 7.30.  mIcsn Dont Know IcsnDMDK  - Yes No DK fit n't Know & go to 7.31  mfits Dont Know fitsDMDK |

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#### 5353307163 INTERNATIONAL CORE VERBAL AUTOPSY FORM 2: DEATH OF CHILD AGED 29 DAYS TO UNDER 5 YEARS

| 7.31 Paralysis  |                                      |  |  |                                     |
|---|--------------------------------------|--|--|-------------------------------------|
| 7.31.1 Did <name> have paralysis ? O Yes,b</name>   | bothlegsonly                         |  |  | par                                 |
| ◯ Yes,o   | one leg or arm                       |  |  |                                     |
| ◯ Yes,to  | totalparalysis                       |  |  | paryo                               |
| ○ Yes, c  | other, specify                       |  |  |                                     |
| ○ No  |                                      |  |  |                                     |
| ○ DK  |                                      |  |  |                                     |
|   | If "No" or "DK", fill D              | on't Know                                      | / in 7.31.2 & go t   | o 7.32                              |
| 7.31.2 (If Yes, ask:) For how long did <name> have paralysis?</name>  | ?                                    |  |  |                                     |
| 0 1 2 3 4 5 6 7 8 9   | 1 2 3 4 5 6 7 8                      | g <i>mpar</i>                                  |  |                                     |
|   | 0000000                              |  | ont Know   | parDMDK                             |
| 7.32 Urination  |                                      |  |  |                                     |
| 7.32.1 Was <name> unable to pass urine? (ok nyal layo)?</name>  |                                      | ○ Yes  | ○ No ○ DK  | upuri                               |
|   | If "No" or "DK", fill D              | on't Know                                      | / in 7.32.2 & go t   | o 7.32.3                            |
| 7.32.2 (If Yes, ask:) For how long was <name> unable to pass</name>   | urine?                               |  |  |                                     |
| 0 1 2 3 4 5 6 7 8 9 dupuri 0  | 1 2 3 4 5 6 7 8                      | g mupuri                                       |  |                                     |
|   | 00000000                             |  | ont Know   | upuriDMDK                           |
| 7.32.3 Did <name> pass blood in urine (layo remo)?</name>   |                                      | ○ Yes  | ○ No ○ DK  | blurin                              |
|   |                                      |  |  |                                     |
|   | If "No" or "DK", fill D              | on't Know                                      | in 7.32.4 & go t   | o 7.33                              |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in u</name>  |                                      | on't Know                                      | / in 7.32.4 & go t   | o 7.33                              |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in u</name>  |                                      |  | / in 7.32.4 & go t   | o 7.33                              |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to 0 1 2 3 4 5 6 7 8 9 dblurin 0  O Days O O O O O O O O Months</name>  | urine?                               | 9 mbi  | -  | O 7.33                              |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to 0 1 2 3 4 5 6 7 8 9 dblurin 0</name>   | urine? 1 2 3 4 5 6 7 8               | 9 mbi  | lurin  |                                     |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to 0 1 2 3 4 5 6 7 8 9</name>   | urine? 1 2 3 4 5 6 7 8               | 9 mbi  | lurin  |                                     |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to a second control of the s</name> | urine? 1 2 3 4 5 6 7 8               | g mbi  | ont Know   | blurinDMDK<br>grow                  |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to a second control of the s</name> | urine? 1 2 3 4 5 6 7 8               | 9 mbl  | ont Know   | grow NA                             |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to a second control of the s</name> | urine? 1 2 3 4 5 6 7 8               | 9 mbl  | ont Know  No DK  / tested and positive   | grow NA                             |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to a second control of the s</name> | urine? 1 2 3 4 5 6 7 8               | 9 mbl  | ont Know  No DK  / tested and positive   | grow NA                             |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to a person  O 1 2 3 4 5 6 7 8 9  O Days  O Days</name>   | urine? 1 2 3 4 5 6 7 8 0 0 0 0 0 0 0 | 9 mbl O Do O Yes O Yes, HIV O Assume O Not HIV | ont Know  No DK  / tested and positive   | grow NA                             |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to a pass blood in the p</name> | urine? 1 2 3 4 5 6 7 8 0 0 0 0 0 0 0 | 9 mb/ O Do O Yes O Yes, HIV O Assume O Not HIV | ont Know  No OK  / tested and positive ad HIV positive but now                 | blurinDMDK  grow  NA  chiv  ttested |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to Days  O 1 2 3 4 5 6 7 8 9  Months  7.33-5 Growth, HIV &amp; TB  7.33 Was <name> growing normally for her/his age?  7.34 Was the child HIV infected?  7.35 Has any member of this household or a person caring for the child been diagosed with TB during the last 2 years?  SECTION 8. TREATMENT</name></name>   | urine? 1 2 3 4 5 6 7 8 0 0 0 0 0 0 0 | 9 mb/ O Do O Yes O Yes, HIV O Assume O Not HIV | ont Know  No OK  / tested and positive ad HIV positive but now                 | blurinDMDK  grow  NA  chiv  ttested |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to Days  O 1 2 3 4 5 6 7 8 9  O Months  7.33-5 Growth, HIV &amp; TB  7.33 Was <name> growing normally for her/his age?  7.34 Was the child HIV infected?  7.35 Has any member of this household or a person caring for the child been diagosed with TB during the last 2 years?</name></name>   | urine? 1 2 3 4 5 6 7 8               | 9 mb/ O Do O Yes O Yes, HIV O Assume O Not HIV | ont Know  No OK  / tested and positive ad HIV positive but now                 | blurinDMDK  grow  NA  chiv  ttested |
| 7.32.4 (If Yes, ask:) For how long did <name> pass blood in to Days  O 1 2 3 4 5 6 7 8 9  O Months  7.33-5 Growth, HIV &amp; TB  7.33 Was <name> growing normally for her/his age?  7.34 Was the child HIV infected?  7.35 Has any member of this household or a person caring for the child been diagosed with TB during the last 2 years?  SECTION 8. TREATMENT  All Questions refer to the child's last illness  8.1.1 Was care sought outside the home while <name> had this</name></name></name>   | urine? 1 2 3 4 5 6 7 8               | 9 mbl O Do O Yes O Yes, HIV O DK O Yes O Yes   | ont Know  No DK  / tested and positive ad HIV positive but now infected  No DK | grow NA chiv ttested  tbcont NA     |

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| SECTION 8. TREATMENT continued  |                       |                            |                      |                 |  |
|---|-----------------------|----------------------------|----------------------|-----------------|--|
| 8.1.2 (If Yes, ask) Where or from whom di   | d you seek ca         | re?                        |                      |                 |  |
| [i] Traditional healer Yes No   | ODK tha               | [vi] Nyamrerwa (TBA        | ) O Yes              | ○ No            | ◯ DK tba                                 |
| [ii] Government/mission health center/clinic ○ Yes ○ No   | ○ DK hce              | [vii] Private physiciar    | ) () Yes             | ○ No            | ◯ DK <sup>prp</sup>                      |
| [iii] Pharmacy/drug seller Yes No   | ODK pds               | [viii] Bush doctor         |                      |                 | ◯ DK <sup>bus</sup>                      |
| [iv] Government/mission/  |                       | First Oth are              | _                    | _               | otca                                     |
| private hospital Yes No   |                       | [ix] Others                | Yes                  | ○ No (          | OK otcasp                                |
| [v] Religious leader Yes No   | O DK rel              | [x] If others, specify     |                      |                 |  |
| 8.1.3 If answer is hospital,ask:Which Hospit  | al(s)?                |                            | KisumuProvincial     | O Nyawar        | a  |
|   |                       | ○ Bondo District ○         | SiayaDistrict        | O Yala          |  |
|   |                       | ○ Kisumu District ○        | Aluor                | ○ Ngiya         | otvechosp                                |
|   |                       | Other                      |                      |                 |  |
| 8.1.4 How many nights in total did <name:< td=""><td>&gt; spend in the</td><td>hospital(s)? days</td><td>0003</td><td></td><td></td></name:<> | > spend in the        | hospital(s)? days          | 0003                 |                 |  |
| 8.2 Was <name> given any herbal remedies</name>   | s at home?            |                            | ○ Yes ○ No           | ○ DK            | ○ NA                                     |
| 8.3 Did <name> receive any western drug d</name>  | uring the illnes      | ss?                        | ○ Yes ○ No           | ○ DK            | wesd                                     |
| OO 4 KV   |                       |                            | If "No" or "DK", g   |                 |  |
| 8.3.1 If Yes, ask:Did <name> receive any<br/>(read options and mark all that apply)</name>  |                       | g medications during t     | he iliness preced    | ing his/her     | death                                    |
|   |                       | Yes O No                   | ◯ DK <i>mal</i>      |                 |  |
| [ii] Antibiotics  |                       |                            | O DK bio             |                 |  |
| [iii] Anti TB   |                       |                            | ◯ DK atb             |                 |  |
| [iv] ARV's  |                       |                            | ○ DK arv             |                 |  |
| [v] Blood transfusion   |                       | Yes O No                   | ○ DK btr             |                 | vetbna                                   |
| 8.3.2 If Anti TB, ASK: at which health facility   | did <name></name>     | collect TB drugs? (if n    | ot received in 8.3.1 | 1[iii] shade in | NA) O NA                                 |
| Health facility Response?   |                       | Health facility            | Respons              | se?             |  |
| [i] Akala Yes O No  | ◯ DK <sub>tbhf1</sub> | [viii] Bar-Olengo          | ····· O Yes          | ○ No            | ◯ DK tbhf8                               |
| [ii] Ndori Yes O No   | ◯ DK <sub>tbhf2</sub> | [ix] Ting'-Wang'i          | O Yes                | ○ No            | OK tbhf9                                 |
| [iii] Nyawara Yes O No  | ○ DK <sub>tbhf3</sub> | [x] K'Otieno               | O Yes                | ○ No            | OK tbhf10                                |
| [iv] Wagai Yes O No   | ◯ DK <sub>tbhf4</sub> | [xi] Ng'iya mission        | ····· O Yes          | ○ No            | OK tbhf11                                |
| [v] Aluor Yes No  | ◯ DK <sub>tbhf5</sub> | [xii] Nyathengo            | O Yes                | ○ No            | ◯ DK tbhf12                              |
| [vi] Njejra Yes No  | ◯ DK <sub>tbhf6</sub> | [xiii] SDH Lwak            | O Yes                | ○ No            | OK tbhf13                                |
| [vii] Rera Yes O No   | OK tbhf7              | [xiv] Bondo DH             | O Yes                | ○ No            | OK tbhf14                                |
| 8.3.3 (If anti-malarial drugs, ask:) Which a in NA) (Use drug equivalence list: ANTI-MALN   |                       | ug did <name> recei</name> | ive ?(if not receive | d in 8.3.1[i] s | hade <sup>antimna</sup><br>- O <b>NA</b> |
| [i] Coartem O Yes O No  | ODK coart             | [iv]. Fansidar/SP/Fal      | cidin O Yes          | ○ No            | ○ DK <sup>sp</sup>                       |
| [ii] Quinine Yes No   | ◯ DK <sup>qui</sup>   | [v] Amodiaquine/Car        | naquine O Yes        | ○ No            | ⊃ DK aq                                  |
| [iii] Artusenate/ artemether/ other artemisinin  Yes  No  | ○ DK arts             | [vi] Chloroquine/mala      | araquin- ○ Yes       | ○ No            | ⊃ DK ¢q                                  |
| [vii] Others, specify   |                       |                            | othan                | timal           |  |

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### 0017307165 INTERNATIONAL CORE VERBAL AUTOPSY FORM 2: DEATH OF CHILD AGED 29 DAYS TO UNDER 5 YEARS

| Section 11.0: Other Evidence and summary of Details   |                    |
|---|--------------------|
| Death certificate   |                    |
| THE OTHER PERMITS AND ADDRESS OF | cer                |
| If No or DK, fill NA & go to 11.1.1 (If Yes, ask:) Can I see the death certificate?   | ) 11.2             |
| 11.1.2 (If Available, write down the cause of death stated on the death certificate)  Cause of Death  | ca                 |
| 0 1 2 3 4 5 6 7 8 9   |                    |
| To be coded: Use PERCEIVEDVA-ADULT VI   | ccod c             |
| To be coded; Use PERCEIVEDVA-ADULT v1   | 0004               |
|   |                    |
| Burial permit  11.2 Was a burial permit issued?   | eburpm             |
| 11.2 Was a burial permit issued?  | 11.3               |
| 11.2.1 (If Yes, ask:) Can I see the burial permit? O Yes, available O Burial permit not available NA v  | ebursee            |
| 11.2.2. Is the cause of death written on the burial permit? Yes ONO NA  | ebpcdth            |
| 11.2.3 If Yes, write what is the cause of death on the burial permit?   |                    |
| Cause of Death  |                    |
| M00000000   |                    |
|   | pcod               |
|   |                    |
| Post mortem result  |                    |
| 11.3 Was a Post mortem done? O Yes O No O DK  | m                  |
| If No or DK, fill NA & go to  |                    |
| 11.3.1 Was the cause of death revealed to you or written on O Yes O No O NA Fithe PM report?  | mcd                |
| 11.3.2 If Yes, write what is the cause of death on the PM report?   |                    |
| Cause of Death  | mcod               |
| 0123456789  | meou               |
| To be coded; Use PERCEIVEDVA-ADULT v1   |                    |
| 00000000  |                    |
| MCH / ANC Cord  |                    |
| MCH / ANC Card  11.4 Is MCH / ANC card available?   | nch                |
| │ 11.4 Is MCH / ANC card available? ---------- Yes ○ No ○ DK ○ NA   | icii               |
| Hospital prescription forms   |                    |
| 11.5 Hospital prescription forms available? O Yes O NO O DK O NA  | pr                 |
| Transport cords   |                    |
| <u>Treament cards</u>   |                    |
|   | cd                 |
|   | cd                 |
| 11.6 Treatment cards available?   | df                 |
| 11.6 Treatment cards available?   | df                 |
| 11.6 Treatment cards available?  Hospital discharge forms  11.7 Hospital discharge forms available?  11.8 Treatment cards available?  Yes No DK NA M  | df                 |
| 11.6 Treatment cards available? ————————————————————————————————————  | df                 |
| 11.6 Treatment cards available?  Hospital discharge forms  11.7 Hospital discharge forms available?  11.7.1 If Yes, write what is the Diagnosis on the hospital forms  Diagnosis  0 1 2 3 4 5 6 7 8 9   | odf<br>0 11.5<br>— |
| 11.6 Treatment cards available?  Hospital discharge forms  11.7 Hospital discharge forms available?  11.7.1 If Yes, write what is the Diagnosis on the hospital forms  Diagnosis  0 1 2 3 4 5 6 7 8 9   | df                 |

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# 1271307168 INTERNATIONAL CORE VERBAL AUTOPSY FORM 2: DEATH OF CHILD AGED 29 DAYS TO UNDER 5 YEARS ----- O Yes 11.8 Other hospital documents available? ○ No ohd $\bigcirc$ DK 11.9 Laboratory/cytology results available? ----- O Yes ○ No $\bigcirc$ DK lab 11.20 Did a health care worker tell you the cause of death? ---- O Yes ○ No $\bigcirc$ DK 11.20.1 If Yes, What did s/he say? 12.0 Date form checked by VA Village Reporter Supervisor: ----vrsupsign 12.1 Signature (please keep the signature within the box provided)-----<u>Interviewer:</u> please add your comments & observation at the back of this last page and thank the respondent(s) for their cooperation Safer, healthier people. Research for health solutions

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