

**Id10002:**

Question: Is this a region of high HIV/AIDS prevalence?

- *high*  
*low*  
*veryl*

**Id10003:**

Question: Is this a region of high malaria prevalence?

- *high*  
*low*  
*veryl*

**Id10004:**

Question: During which season did (s)he die?

- *wet*  
*dry*  
*DK*

**Id10007:**

Question: What is the name of VA respondent?

- *text*

**Id10008:**

Question: What is the respondent's relationship to the deceased?

- *parent*  
*child*  
*other*  
*family\_member*  
*friend*  
*health\_worker*  
*public\_official*  
*another\_relationship*

**Id10009:**

Question: Did the respondent live with the deceased in the period leading to her/his death?

- *yes*  
*no*  
*dk*  
*ref*

**Id10010:**

Question: Name of VA interviewer

- *text*

**Id10011:**

Question: Time at start of interview

- *time*

**Id10012:**

Question: Date of interview

- *date*

**Id10013:**

Question: Did the respondent give consent?

- *yes*  
*no*

**Id10017:**

Question: What was the first or given name(s) of the deceased?

- *text*

**Id10018:**

Question: What was the surname (or family name) of the deceased?

- *text*

**Id10019:**

Question: What was the sex of the deceased?

- *female*  
*male*

**Id10020:**

Question: Is the date of birth known?

- *yes*  
*no*

**Id10021: selected(\${Id10020}, 'yes')**

Question: When was the deceased born?

- *date*

**Id10022:**

Question: Is the date of death known?

- *yes*
- *no*

**Id10023: selected(\${Id10022}, 'yes')**

Question: When did (s)he die?

- *date*

**Id10024: selected(\${Id10022}, 'no') or selected(\${Id10022}, 'dk')**

Question: Please indicate the year of death.

- *integer*

**ageInDays:**

Question:

- *calculate*

**ageInYears:**

Question:

- *calculate*

**ageInYearsRemain:**

Question:

- *calculate*

**ageInMonths:**

Question:

- *calculate*

**ageInMonthsRemain:**

Question:

- *calculate*

**isNeonatal1:**

Question:

- *calculate*

**isChild1:**

Question:

- *calculate*

**isAdult1:**

Question:

- *calculate*

**displayAgeNeonate: \${isNeonatal1} = '1'**

Question: NEONATE was \${ageInDays} days old.

- *note*

**displayAgeChild: \${isChild1} = '1'**

Question: CHILD was \${ageInYears} years \${ageInMonths} months and \${ageInMonthsRemain} days old.

- *note*

**displayAgeAdult: \${isAdult1} = '1'**

Question: ADULT was \${ageInYears} years old.

- *note*

**age\_group: \${Id10020} != 'yes' or \${Id10022} != 'yes'**

Question: What age group corresponds to the deceased?

- *neonate*  
*child*  
*adult*

**age\_neonate\_days: \${age\_group} = 'neonate'**

Question: Enter neonate's age in days:

- *integer*

**age\_neonate\_hours: \${age\_group} = 'neonate'**

Question: Enter neonate's age in hours:

- *integer*

**age\_neonate\_minutes:**  $\{\text{age\_group}\} = \text{'neonate'}$

Question: Enter neonate's age in minutes:

- *integer*

**age\_child\_unit:**  $\{\text{age\_group}\} = \text{'child'}$

Question: Enter child's age in:

- *days*
- *months*
- *years*

**age\_child\_days:**  $\{\text{age\_child\_unit}\} = \text{'days'}$

Question: Enter child's age in days:

- *integer*

**age\_child\_months:**  $\{\text{age\_child\_unit}\} = \text{'months'}$

Question: Enter child's age in months:

- *integer*

**age\_child\_years:**  $\{\text{age\_child\_unit}\} = \text{'years'}$

Question: Enter child's age in years:

- *integer*

**age\_adult:**  $\{\text{age\_group}\} = \text{'adult'}$

Question: Enter adult's age in years:

- *integer*

**isNeonatal2:**

Question:

- *calculate*

**isChild2:**

Question:

- *calculate*

**isAdult2:**

Question:

- *calculate*

**isNeonatal:**

Question:

- *calculate*

**isChild:**

Question:

- *calculate*

**isAdult:**

Question:

- *calculate*

**Id10058:**

Question: Where did the deceased die?

- *hospital*  
*other\_health\_facility*  
*home*  
*on\_route\_to\_hospital\_or\_facility*  
*other*  
*DK*  
*Ref*

**Id10051:**

Question: Is there a need to collect civil registration data on the deceased?

- *yes*  
*no*

**Id10052: (selected(\${Id10051}, 'yes'))**

Question: What was her/his citizenship/nationality?

- *citizen\_at\_birth*  
*naturalized\_citizen*  
*foreign\_national*  
*dk*

**Id10053: (selected(\${Id10051}, 'yes'))**

Question: What was her/his ethnicity?

- *text*

**Id10054:** (selected(\${Id10051}, 'yes'))

Question: What was her/his place of birth?

- *text*

**Id10055:** (selected(\${Id10051}, 'yes'))

Question: What was her/his place of usual residence? (the place where the person lived most of the year)

- *text*

**Id10056:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and (selected(\${Id10051}, 'yes'))

Question: What was her/his place of normal residence 1 to 5 years before death?

- *text*

**Id10057:** (selected(\${Id10051}, 'yes'))

Question: Where did death occur? (specify country, province, district, village)

- *text*

**Id10059:** (selected(\${Id10051}, 'yes') and selected(\${isAdult}, '1'))

Question: What was her/his marital status?

- *single*  
*married*  
*partner*  
*divorced*  
*widowed*  
*too\_young\_to\_be\_married*  
*DK*  
*Ref*

**Id10060:** (selected(\${isAdult}, '1')) and (\${Id10059} = 'married' or \${Id10059} = 'divorced' or \${Id10059} = 'widowed')

Question: What was the date of marriage?

- *date*

**Id10061:** (selected(\${isChild}, '1') or selected(\${isNeonatal}, '1')) and (selected(\${Id10051}, 'yes'))

Question: What was the name of the father?

- *text*

**Id10062:** (selected(\${isChild}, '1') or selected(\${isNeonatal}, '1')) and (selected(\${Id10051}, 'yes'))

Question: What was the name of the mother?

- *text*

**Id10063:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and (selected(\${Id10051}, 'yes'))

Question: What was her/his highest level of schooling?

- *no\_formal\_education*  
*primary\_school*  
*secondary\_school*  
*higher\_than\_secondary\_school*  
*DK*  
*Ref*

**Id10064:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and (selected(\${Id10051}, 'yes'))

Question: Was (s)he able to read and write?

- *yes*  
*no*  
*dk*  
*ref*

**Id10065:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and (selected(\${Id10051}, 'yes'))

Question: What was her/his economic activity status in year prior to death?

- *mainly\_unemployed*  
*mainly\_employed*  
*home-maker*  
*pensioner*  
*student*  
*other*  
*DK*  
*Ref*

**Id10066:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and (selected(\${Id10051}, 'yes'))

Question: What was her/his occupation, that is, what kind of work did (s)he mainly do?

- *text*

**Id10069:**



Question: Is there a need to collect civil registration numbers on the deceased?

- *yes*  
*no*

**Id10070:** selected(\${Id10069}, 'yes')

Question: Death registration number/certificate

- *text*

**Id10071:** selected(\${Id10069}, 'yes')

Question: Date of registration

- *date*

**Id10072:** selected(\${Id10069}, 'yes')

Question: Place of registration

- *text*

**Id10073:** selected(\${Id10069}, 'yes')

Question: National identification number of deceased

- *text*

**Id10077:**

Question: Did (s)he suffer from any injury or accident that led to her/his death?

- *yes*  
*no*  
*dk*  
*ref*

**Id10079:**

Question: Was it a road traffic accident?

- *yes*  
*no*  
*dk*  
*ref*

**Id10080:** selected(\${Id10079}, 'yes')

Question: What was her/his role in the road traffic accident?

- *pedestrian*  
*in\_car\_or\_light\_vehicle*

*in\_bus\_or\_heavy\_vehicle*  
*on\_a\_motorcycle*  
*on\_a\_pedal\_cycle*  
*other*

**Id10081:** `selected(${Id10079}, 'yes')`

Question: What was the counterpart that was hit during the road traffic accident?

- *pedestrian*  
*stationary\_object*  
*car\_or\_light\_vehicle*  
*bus\_or\_heavy\_vehicle*  
*motorcycle*  
*pedal\_cycle*  
*other*

**Id10082:** `not(selected(${Id10079}, 'yes'))`

Question: Was (s)he injured in a non-road transport accident?

- *yes*  
*no*  
*dk*  
*ref*

**Id10083:**

Question: Was (s)he injured in a fall?

- *yes*  
*no*  
*dk*  
*ref*

**Id10084:**

Question: Was there any poisoning?

- *yes*  
*no*  
*dk*  
*ref*

**Id10085:**

Question: Did (s)he die of drowning?

- *yes*  
*no*  
*dk*  
*ref*

**Id10086:**

Question: Was (s)he injured by a bite or sting by venomous animal?

- *yes*
- no*
- dk*
- ref*

**Id10087: not(selected(\${Id10086}, 'yes'))**

Question: Was (s)he injured by an animal or insect (non-venomous)?

- *yes*
- no*
- dk*
- ref*

**Id10088: selected(\${Id10087}, 'yes') or selected(\${Id10086}, 'yes')**

Question: What was the animal/insect?

- *dog*
- snake*
- insect\_or\_scorpion*
- other*
- DK*

**Id10089:**

Question: Was (s)he injured by burns/fire?

- *yes*
- no*
- dk*
- ref*

**Id10090:**

Question: Was (s)he subject to violence (suicide, homicide, abuse)?

- *yes*
- no*
- dk*
- ref*

**Id10091:**

Question: Was (s)he injured by a fire arm?

- *yes*
- no*
- dk*

*ref*

**Id10092:**

Question: Was (s)he stabbed, cut or pierced?

- *yes*
- no*
- dk*
- ref*

**Id10093:**

Question: Was (s)he strangled?

- *yes*
- no*
- dk*
- ref*

**Id10094:**

Question: Was (s)he injured by a blunt force?

- *yes*
- no*
- dk*
- ref*

**Id10095:**

Question: Was (s)he injured by a force of nature?

- *yes*
- no*
- dk*
- ref*

**Id10096:**

Question: Was it electrocution?

- *yes*
- no*
- dk*
- ref*

**Id10097:**

Question: Did (s)he encounter any other injury?

- *yes*
- no*
- dk*

*ref*

**Id10098:**

Question: Was the injury accidental?

- *yes*
- no*
- dk*
- ref*

**Id10099: \${ageInYears} >= 10**

Question: Was the injury or accident self-inflicted?

- *yes*
- no*
- dk*
- ref*

**Id10100:**

Question: Was the injury or accident intentionally inflicted by someone else?

- *yes*
- no*
- dk*
- ref*

**Id10104:**

Question: Did the baby ever cry?

- *yes*
- no*
- dk*
- ref*

**Id10105: selected(\${Id10104}, 'yes') or selected(\${Id10104}, 'dk')**

Question: Did the baby cry immediately after birth, even if only a little bit?

- *yes*
- no*
- dk*
- ref*

**Id10106: selected(\${Id10105}, 'yes')**

Question: How many minutes after birth did the baby first cry? (use 999 for never)

- *integer*

**Id10107:** `selected(${Id10104}, 'yes')` or `selected(${Id10104}, 'dk')`

Question: Did the baby stop being able to cry?

- *yes*
- no*
- dk*
- ref*

**Id10108:** `selected(${Id10107}, 'yes')`

Question: How many hours before death did the baby stop crying?

- *integer*

**Id10109:**

Question: Did the baby ever move?

- *yes*
- no*
- dk*
- ref*

**Id10110:**

Question: Did the baby ever breathe?

- *yes*
- no*
- dk*
- ref*

**Id10111:** `not(selected(${Id10110}, 'no'))`

Question: Did the baby breathe immediately after birth, even a little?

- *yes*
- no*
- dk*
- ref*

**Id10112:** `not(selected(${Id10110}, 'no'))`

Question: Did the baby have a breating problem?

- *yes*
- no*
- dk*
- ref*

**Id10113:** `not(selected(${Id10110}, 'no'))`

Question: Was the baby given assistance to breathe at birth?

- *yes*
- no*
- dk*
- ref*

**Id10114:** (selected(\${Id10104}, 'no')) and (selected(\${Id10109}, 'no')) and (selected(\${Id10110}, 'no'))

Question: If the baby didn't show any sign of life, was it born dead?

- *yes*
- no*
- dk*
- ref*

**Id10115:**

Question: Were there any bruises or signs of injury on baby's body after the birth?

- *yes*
- no*
- dk*
- ref*

**Id10116:** selected(\${Id10114}, 'yes')

Question: Was the baby's body soft, pulpy and discoloured and the skin peeling away?

- *yes*
- no*
- dk*
- ref*

**Id10351:** (selected(\${Id10114}, 'no') and selected(\${isNeonatal}, '1'))

Question: How old was the baby when the fatal illness started?

- *integer*

**Id10408:** (selected(\${Id10114}, 'no') and selected(\${isNeonatal}, '1'))

Question: Before the illness that led to death, was the baby/the child growing normally?

- *yes*
- no*
- dk*
- ref*

**illdurnote:**

Question: For how long was (s)he ill before death?

- *note*

**Id10120:**

Question: Days

- *integer*

**Id10122:**

Question: Weeks

- *integer*

**Id10121:**

Question: Months

- *integer*

**Id10123: not(selected(\${Id10114}, 'yes'))**

Question: Did (s)he die suddenly?

- *yes*  
*no*  
*dk*  
*ref*

**Id10125:**

Question: Was there any diagnosis by a health professional of tuberculosis?

- *yes*  
*no*  
*dk*  
*ref*

**Id10126:**

Question: Was the HIV test ever positive?

- *yes*  
*no*  
*dk*  
*ref*

**Id10127:**

Question: Was there any diagnosis by a health professional of AIDS?

- *yes*  
*no*  
*dk*  
*ref*



**Id10128:**

Question: Did (s)he have a recent positive test by a health professional for malaria?

- *yes*
- no*
- dk*
- ref*

**Id10129: not(selected(\${Id10128}, 'yes'))**

Question: Did (s)he have a recent negative test by a health professional for malaria?

- *yes*
- no*
- dk*
- ref*

**Id10130:**

Question: Was there any diagnosis by a health professional of dengue fever?

- *yes*
- no*
- dk*
- ref*

**Id10131:**

Question: Was there any diagnosis by a health professional of measles?

- *yes*
- no*
- dk*
- ref*

**Id10132: not(selected(\${isChild}, '1'))**

Question: Was there any diagnosis by a health professional of high blood pressure?

- *yes*
- no*
- dk*
- ref*

**Id10133:**

Question: Was there any diagnosis by a health professional of heart disease?

- *yes*
- no*
- dk*
- ref*

**Id10134:**

Question: Was there any diagnosis by a health professional of diabetes?

- *yes*
- no*
- dk*
- ref*

**Id10135:**

Question: Was there any diagnosis by a health professional of asthma?

- *yes*
- no*
- dk*
- ref*

**Id10136:**

Question: Was there any diagnosis by a health professional of epilepsy?

- *yes*
- no*
- dk*
- ref*

**Id10137:**

Question: Was there any diagnosis by a health professional of cancer?

- *yes*
- no*
- dk*
- ref*

**Id10138: selected(\${isAdult}, '1')**

Question: Was there any diagnosis by a health professional of Chronic Obstructive Pulmonary Disease (COPD)?

- *yes*
- no*
- dk*
- ref*

**Id10139: selected(\${isAdult}, '1')**

Question: Was there any diagnosis by a health professional of dementia?

- *yes*
- no*
- dk*

*ref*

**Id10140:** `selected(${isAdult}, '1')`

Question: Was there any diagnosis by a health professional of depression?

- *yes*
- no*
- dk*
- ref*

**Id10141:** `selected(${isAdult}, '1')`

Question: Was there any diagnosis by a health professional of stroke?

- *yes*
- no*
- dk*
- ref*

**Id10142:**

Question: Was there any diagnosis by a health professional of sickle cell disease?

- *yes*
- no*
- dk*
- ref*

**Id10143:**

Question: Was there any diagnosis by a health professional of kidney disease?

- *yes*
- no*
- dk*
- ref*

**Id10144:**

Question: Was there any diagnosis by a health professional of liver disease?

- *yes*
- no*
- dk*
- ref*

**Id10147:**

Question: Did (s)he have a fever?

- *yes*
- no*
- dk*

*ref*

**Id10148:** selected(\${Id10147}, 'yes')

Question: How many days did the fever last?

- *integer*

**Id10149:** selected(\${Id10147}, 'yes')

Question: Did the fever continue until death?

- *yes*  
*no*  
*dk*  
*ref*

**Id10150:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10147}, 'yes')

Question: How severe was the fever?

- *mild*  
*moderate*  
*severe*

**Id10151:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10147}, 'yes')

Question: What was the pattern of the fever?

- *continuous*  
*on\_and\_off*  
*nightly*  
*DK*  
*Ref*

**Id10152:**

Question: Did (s)he have night sweats?

- *yes*  
*no*  
*dk*  
*ref*

**Id10153:**

Question: Did (s)he have a cough?

- *yes*  
*no*  
*dk*  
*ref*

**Id10154:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10153}, 'yes')  
Question: For how many days did (s)he have a cough?

- *integer*

**Id10155:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10153}, 'yes')  
Question: Was the cough productive, with sputum?

- *yes*  
*no*  
*dk*  
*ref*

**Id10156:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10153}, 'yes')  
Question: Was the cough very severe?

- *yes*  
*no*  
*dk*  
*ref*

**Id10157:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10153}, 'yes')  
Question: Did (s)he cough up blood?

- *yes*  
*no*  
*dk*  
*ref*

**Id10158:** ((selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10153}, 'yes')) or (selected(\${isNeonatal}, '1') and selected(\${Id10114}, 'no'))  
Question: Did (s)he make a whooping sound when coughing?

- *yes*  
*no*  
*dk*  
*ref*

**Id10159:**  
Question: Did (s)he have any difficulty breathing?

- *yes*  
*no*  
*dk*  
*ref*

**Id10161:**  
Question: For how many days did the difficulty breathing last?

- *integer*

**Id10162:** `selected(${isAdult}, '1')`

Question: For how many months did the difficulty breathing last?

- *integer*

**Id10163:** `selected(${isAdult}, '1')`

Question: For how many years did the difficulty breathing last?

- *integer*

**Id10165:** `(selected(${isChild}, '1') or selected(${isAdult}, '1')) and selected(${Id10159}, 'yes')`

Question: Was the difficulty continuous or on and off?

- *continuous*  
*on\_and\_off*  
*DK*  
*Ref*

**Id10166:**

Question: During the illness that led to death, did (s)he have fast breathing?

- *yes*  
*no*  
*dk*  
*ref*

**Id10167:** `selected(${Id10166}, 'yes')`

Question: For how many days did the fast breathing last?

- *integer*

**Id10168:**

Question: Did (s)he have breathlessness?

- *yes*  
*no*  
*dk*  
*ref*

**Id10169:** `selected(${Id10168}, 'yes')`

Question: For how many days did (s)he have breathlessness?

- *integer*

**Id10170:** selected(\${isAdult}, '1') and selected(\${Id10168}, 'yes')

Question: Was (s)he unable to carry out daily routines due to breathlessness?

- *yes*  
*no*  
*dk*  
*ref*

**Id10171:** selected(\${isAdult}, '1') and selected(\${Id10168}, 'yes')

Question: Was (s)he breathless while lying flat?

- *yes*  
*no*  
*dk*  
*ref*

**Id10172:** (selected(\${isNeonatal}, '1') or selected(\${isChild}, '1'))

Question: Did you see the lower chest wall/ribs being pulled in as the child breathed in?

- *yes*  
*no*  
*dk*  
*ref*

**Id10173:**

Question: During the illness that led to death did his/her breathing sound like any of the following:

- *stridor*  
*grunting*  
*wheezing*  
*no*  
*dk*  
*ref*

**Id10174:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have chest pain?

- *yes*  
*no*  
*dk*  
*ref*

**Id10175:** (selected(\${isAdult}, '1')) and selected(\${Id10174}, 'yes')

Question: Was the chest pain severe?

- *yes*
- *no*
- *dk*
- *ref*

**Id10176:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10174}, 'yes')

Question: How many days before death did (s)he have chest pain?

- *integer*

**Id10178:**

Question: How many minutes did the pain last?

- *integer*

**Id10179:**

Question: How many hours did the pain last?

- *integer*

**Id10181:**

Question: Did (s)he have more frequent loose or liquid stools than usual?

- *yes*
- *no*
- *dk*
- *ref*

**Id10182:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10181}, 'yes')

Question: For how many days did (s)he have frequent loose or liquid stools?

- *integer*

**Id10183:** (selected(\${isChild}, '1') or selected(\${isNeonatal}, '1')) and selected(\${Id10181}, 'yes')

Question: How many stools did the baby or child have on the day that loose liquid stools were most frequent?

- *integer*

**Id10184:** (selected(\${isChild}, '1') or selected(\${isNeonatal}, '1')) and selected(\${Id10181}, 'yes')

Question: How many days before death did the frequent loose or liquid stools start?

- *integer*



**Id10185:** (selected(\${isChild}, '1')) and selected(\${Id10181}, 'yes')

Question: Did the frequent loose or liquid stools continue until death?

- *yes*
- no*
- dk*
- ref*

**Id10186:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) or (selected(\${Id10181}, 'yes') and selected(\${isNeonatal}, '1'))

Question: At any time during the final illness was there blood in the stools?

- *yes*
- no*
- dk*
- ref*

**Id10187:** ((selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10186}, 'yes'))

Question: Was there blood in the stool up until death?

- *yes*
- no*
- dk*
- ref*

**Id10188:**

Question: Did (s)he vomit?

- *yes*
- no*
- dk*
- ref*

**Id10189:**

Question: Did (s)he vomit in the week preceding the death?

- *yes*
- no*
- dk*
- ref*

**Id10190:** selected(\${Id10189}, 'yes') and selected(\${isAdult}, '1')

Question: For how many days before death did (s)he vomit?

- *integer*

**Id10191:** (selected(\${Id10189}, 'yes') and \${isNeonatal} !='1')

Question: Was there blood in the vomit?

- *yes*
- no*
- dk*
- ref*

**Id10192:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10189}, 'yes')

Question: Was the vomit black?

- *yes*
- no*
- dk*
- ref*

**Id10193:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have any belly (abdominal) problem?

- *yes*
- no*
- dk*
- ref*

**Id10194:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have belly (abdominal) pain?

- *yes*
- no*
- dk*
- ref*

**Id10195:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10194}, 'yes')

Question: Was the belly (abdominal) pain severe?

- *yes*
- no*
- dk*
- ref*

**a\_pain\_how\_long:**

Question: For how long before death did (s)he have belly (abdominal) pain?

- *note*

**Id10196:** ((selected(\${isChild}, '1')and selected(\${Id10195}, 'yes')) or (selected(\${isAdult}, '1') and selected(\${Id10194}, 'yes')))

Question: Hours

- *integer*

**Id10197:** ((selected(*{isChild}*), '1')and selected(*{Id10195}*), 'yes')) or (selected(*{isAdult}*), '1') and selected(*{Id10194}*), 'yes'))

Question: Days

- *integer*

**Id10197b:** ((selected(*{isChild}*), '1')and selected(*{Id10195}*), 'yes')) or (selected(*{isAdult}*), '1') and selected(*{Id10194}*), 'yes'))

Question: Weeks

- *integer*

**Id10198:** ((selected(*{isChild}*), '1')and selected(*{Id10195}*), 'yes')) or (selected(*{isAdult}*), '1') and selected(*{Id10194}*), 'yes'))

Question: Months

- *integer*

**Id10199:** ((selected(*{isChild}*), '1')and selected(*{Id10195}*), 'yes')) or (selected(*{isAdult}*), '1') and selected(*{Id10194}*), 'yes'))

Question: Was the pain in the upper or lower belly (abdomen)?

- *upper\_abdomen*  
*lower\_abdomen*  
*upper\_lower\_abdomen*  
*DK*

**Id10200:** (selected(*{isChild}*), '1') or selected(*{isAdult}*), '1'))

Question: Did (s)he have a more than usually protruding belly (abdomen)?

- *yes*  
*no*  
*dk*  
*ref*

**Id10201:** (selected(*{isChild}*), '1') or selected(*{isAdult}*), '1')) and selected(*{Id10200}*), 'yes')

Question: For how many days did (s)he have a more than usually protruding belly (abdomen)?

- *integer*

**Id10202:** (selected(*{isChild}*), '1') or selected(*{isAdult}*), '1')) and selected(*{Id10200}*), 'yes')

Question: For how many months did (s)he have a more than usually protruding belly (abdomen)?

- *integer*

**Id10203:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10200}, 'yes')

Question: How rapidly did (s)he develop the protruding belly (abdomen)?

- *rapidly*  
*slowly*

**Id10204:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have any mass in the belly (abdomen)?

- *yes*  
*no*  
*dk*  
*ref*

**Id10205:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10204}, 'yes')

Question: For how many days before death did (s)he have a mass in the belly (abdomen)?

- *integer*

**Id10206:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10204}, 'yes')

Question: For how many months before death did (s)he have a mass in the belly (abdomen)?

- *integer*

**Id10207:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have a severe headache?

- *yes*  
*no*  
*dk*  
*ref*

**Id10208:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have a stiff neck during illness that led to death?

- *yes*  
*no*  
*dk*  
*ref*

**Id10209:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10208}, 'yes')

Question: For how many days before death did (s)he have stiff neck?

- *integer*

**Id10210:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have a painful neck during the illness that led to death?

- *yes*
- no*
- dk*
- ref*

**Id10211:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10210}, 'yes')

Question: For how many days before death did (s)he have a painful neck?

- *integer*

**Id10212:** selected(\${isAdult}, '1')

Question: Did (s)he have mental confusion?

- *yes*
- no*
- dk*
- ref*

**Id10213:** (selected(\${isAdult}, '1')) and selected(\${Id10212}, 'yes')

Question: For how many months did (s)he have mental confusion?

- *integer*

**Id10214:**

Question: Was (s)he unconscious during the illness that lead to death?

- *yes*
- no*
- dk*
- ref*

**Id10215:** (selected(\${Id10214}, 'yes') or selected(\${isAdult}, '1'))

Question: Was (s)he unconscious for more than 24 hours before death?

- *yes*
- no*
- dk*
- ref*

**Id10216:** (selected(\${isChild}, '1') and \${Id10215} != 'yes')

Question: How many hours before death did unconsciousness start?

- *integer*

**Id10217:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10215}, 'yes')  
Question: Did the unconsciousness start suddenly, quickly (at least within a single day)?

- *yes*
- no*
- dk*
- ref*

**Id10218:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10215}, 'yes')  
Question: Did the unconsciousness continue until death?

- *yes*
- no*
- dk*
- ref*

**Id10219:**  
Question: Did (s)he have convulsions?

- *yes*
- no*
- dk*
- ref*

**Id10220:** (selected(\${isChild}, '1')) and selected(\${Id10219}, 'yes')  
Question: Did (s)he experience any generalized convulsions or fits during the illness that led to death?

- *yes*
- no*
- dk*
- ref*

**Id10221:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10219}, 'yes')  
Question: For how many minutes did the convulsions last?

- *integer*

**Id10222:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10219}, 'yes')  
Question: Did (s)he become unconscious immediately after the convulsion?

- *yes*
- no*
- dk*
- ref*

**Id10223:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))  
Question: Did (s)he have any urine problems?

- *yes*
- no*
- dk*
- ref*

**Id10224:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10223}, 'yes')

Question: Did (s)he stop urinating?

- *yes*
- no*
- dk*
- ref*

**Id10225:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10223}, 'yes')

Question: Did (s)he go to urinate more often than usual?

- *yes*
- no*
- dk*
- ref*

**Id10226:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10223}, 'yes')

Question: During the final illness did (s)he ever pass blood in the urine?

- *yes*
- no*
- dk*
- ref*

**Id10227:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have sores or ulcers anywhere on the body?

- *yes*
- no*
- dk*
- ref*

**Id10228:** selected(\${isAdult}, '1')

Question: Did (s)he have sores?

- *yes*
- no*
- dk*
- ref*

**Id10229:** ((selected(\${isAdult}, '1') and selected(\${Id10228}, 'yes')) or (selected(\${isChild}, '1') and selected(\${Id10227}, 'yes')))

Question: Did the sores have clear fluid or pus?

- *yes*
- *no*
- *dk*
- *ref*

**Id10230:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have an ulcer (pit) on the foot?

- *yes*
- *no*
- *dk*
- *ref*

**Id10231:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10230}, 'yes')

Question: Did the ulcer on the foot ooze pus?

- *yes*
- *no*
- *dk*
- *ref*

**Id10232:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10231}, 'yes')

Question: For how many days did the ulcer on the foot ooze pus?

- *integer*

**Id10233:**

Question: During the illness that led to death, did (s)he have any skin rash?

- *yes*
- *no*
- *dk*
- *ref*

**Id10234:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10233}, 'yes')

Question: For how many days did (s)he have the skin rash?

- *integer*

**Id10235:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10233}, 'yes')

Question: Where was the rash?

- *face*
- *trunk*
- *extremities*



*everywhere*

**Id10236:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10233}, 'yes')

Question: Did (s)he have measles rash (use local term)?

- *yes*
- no*
- dk*
- ref*

**Id10237:** selected(\${isAdult}, '1')

Question: Did (s)he ever have shingles or herpes zoster?

- *yes*
- no*
- dk*
- ref*

**Id10238:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: During the illness that led to death, did her/his skin flake off in patches?

- *yes*
- no*
- dk*
- ref*

**Id10239:** (selected(\${isNeonatal}, '1') or selected(\${isChild}, '1'))

Question: During the illness that led to death, did he/she have areas of the skin that turned black?

- *yes*
- no*
- dk*
- ref*

**Id10240:** (selected(\${isNeonatal}, '1') or selected(\${isChild}, '1'))

Question: During the illness that led to death, did he/she have areas of the skin with redness and swelling?

- *yes*
- no*
- dk*
- ref*

**Id10241:**

Question: During the illness that led to death, did (s)he bleed from anywhere?

- *yes*
- no*
- dk*

*ref*

**Id10242:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10241}, 'yes')

Question: Did (s)he bleed from the nose, mouth or anus?

- *yes*
- no*
- dk*
- ref*

**Id10243:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have noticeable weight loss?

- *yes*
- no*
- dk*
- ref*

**Id10244:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Was (s)he severely thin or wasted?

- *yes*
- no*
- dk*
- ref*

**Id10245:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: During the illness that led to death, did s/he have a whitish rash inside the mouth or on the tongue?

- *yes*
- no*
- dk*
- ref*

**Id10246:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have stiffness of the whole body or was unable to open the mouth?

- *yes*
- no*
- dk*
- ref*

**Id10247:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have puffiness of the face?

- *yes*
- no*
- dk*

*ref*

**Id10248:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10247}, 'yes')

Question: For how many days did (s)he have puffiness of the face?

- *integer*

**Id10249:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: During the illness that led to death, did (s)he have swollen legs or feet?

- *yes*  
*no*  
*dk*  
*ref*

**Id10250:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10249}, 'yes')

Question: How many days did the swelling last?

- *integer*

**Id10251:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10249}, 'yes')

Question: Did (s)he have both feet swollen?

- *yes*  
*no*  
*dk*  
*ref*

**Id10252:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have general puffiness all over hi(s)her body?

- *yes*  
*no*  
*dk*  
*ref*

**Id10253:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have any lumps?

- *yes*  
*no*  
*dk*  
*ref*

**Id10254:** (selected(\${isAdult}, '1')) and selected(\${Id10253}, 'yes')

Question: Did (s)he have any lumps or lesions in the mouth?

- *yes*
- no*
- dk*
- ref*

**Id10255:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10253}, 'yes')

Question: Did (s)he have any lumps on the neck?

- *yes*
- no*
- dk*
- ref*

**Id10256:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10253}, 'yes')

Question: Did (s)he have any lumps on the armpit?

- *yes*
- no*
- dk*
- ref*

**Id10257:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10253}, 'yes')

Question: Did (s)he have any lumps on the groin?

- *yes*
- no*
- dk*
- ref*

**Id10258:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Was (s)he in any way paralysed?

- *yes*
- no*
- dk*
- ref*

**Id10259:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10258}, 'yes')

Question: Did s(he have paralysis of only one side of the body?

- *yes*
- no*
- dk*
- ref*

**Id10260:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10258}, 'yes')

Question: Which were the limbs or body parts paralysed?

- *right\_side*  
*left\_side*  
*lower\_part\_of\_body*  
*upper\_part\_of\_body*  
*one\_leg\_only*  
*one\_arm\_only*  
*whole\_body*  
*other*

**Id10261:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have difficulty swallowing?

- *yes*  
*no*  
*dk*  
*ref*

**Id10262:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10261}, 'yes')

Question: For how many days before death did (s)he have difficulty swallowing?

- *integer*

**Id10263:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10261}, 'yes')

Question: Was the difficulty with swallowing with solids, liquids, or both?

- *solids*  
*liquids*  
*both*

**Id10264:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he have pain upon swallowing?

- *yes*  
*no*  
*dk*  
*ref*

**Id10265:**

Question: Did (s)he have yellow discoloration of the eyes?

- *yes*  
*no*  
*dk*  
*ref*

**Id10266:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1')) and selected(\${Id10265}, 'yes')

Question: For how many days did (s)he have the yellow discoloration?

- *integer*

**Id10267:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did her/his hair change in color to a reddish or yellowish color?

- *yes*  
*no*  
*dk*  
*ref*

**Id10268:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he look pale (thinning/lack of blood) or have pale palms, eyes or nail beds?

- *yes*  
*no*  
*dk*  
*ref*

**Id10269:** (selected(\${isChild}, '1'))

Question: Did (s)he have sunken eyes?

- *yes*  
*no*  
*dk*  
*ref*

**Id10270:** (selected(\${isChild}, '1') or selected(\${isAdult}, '1'))

Question: Did (s)he drink a lot more water than usual?

- *yes*  
*no*  
*dk*  
*ref*

**Id10271:** (selected(\${isNeonatal}, '1') and \${Id10114}!= 'yes') or selected(\${isChild}, '1')

Question: Was the baby able to suckle or bottle-feed within the first 24 hours after birth?

- *yes*  
*no*  
*dk*  
*ref*

**Id10272:** (selected(\${isNeonatal}, '1') and \${Id10114}!= 'yes') or selected(\${isChild}, '1')

Question: Did the baby ever suckle in a normal way?

- *yes*  
*no*  
*dk*

*ref*

**Id10273:** (selected(\${isNeonatal}, '1') and \${Id10114}!= 'yes')or selected(\${isChild}, '1')

Question: Did the baby stop suckling?

- *yes*
- no*
- dk*
- ref*

**Id10274:** selected(\${Id10273}, 'yes')

Question: How many days after birth did the baby stop suckling?

- *integer*

**Id10275:** (selected(\${isNeonatal}, '1') and \${Id10114}!= 'yes')or selected(\${isChild}, '1')

Question: Did the baby have convulsions starting within the first 24 hours of life?

- *yes*
- no*
- dk*
- ref*

**Id10276:** (selected(\${isNeonatal}, '1') and \${Id10275}!= 'yes')

Question: Did the baby have convulsions starting more than 24 hours after birth?

- *yes*
- no*
- dk*
- ref*

**Id10277:** (selected(\${isNeonatal}, '1') and \${Id10114}!= 'yes')or selected(\${isChild}, '1')

Question: Did the baby's body become stiff, with the back arched backwards?

- *yes*
- no*
- dk*
- ref*

**Id10278:** (selected(\${isNeonatal}, '1') and \${Id10114}!= 'yes')or selected(\${isChild}, '1')

Question: During the illness that led to death, did the baby have a bulging or raised fontanelle? (ask only up to 18 months)

- *yes*
- no*
- dk*
- ref*

**Id10279:** ((selected(\${isNeonatal}, '1') or selected(\${isChild}, '1')) and \${Id10278} !='yes' )  
Question: During the illness that led to death, did the baby have a sunken fontanelle? (ask only up to 18 months)

- *yes*
- no*
- dk*
- ref*

**Id10281:** ((not(selected(\${Id10278}, 'yes')) and (selected(\${isNeonatal}, '1')) and \${Id10114} !='yes') or selected(\${isChild}, '1'))

Question: During the illness that led to death, did the baby become unresponsive or unconscious?

- *yes*
- no*
- dk*
- ref*

**Id10282:** ((selected(\${Id10281}, 'yes') and (selected(\${isNeonatal}, '1')) and \${Id10114} !='yes') or selected(\${isChild}, '1'))

Question: Did the baby become unresponsive or unconscious soon after birth, within less than 24 hours?

- *yes*
- no*
- dk*
- ref*

**Id10283:** ((selected(\${Id10281}, 'yes') and not(selected(\${Id10282}, 'yes')) and (selected(\${isNeonatal}, '1')) and \${Id10114} !='yes') or selected(\${isChild}, '1'))

Question: Did the baby become unresponsive or unconscious more than 24 hours after birth?

- *yes*
- no*
- dk*
- ref*

**Id10284:**

Question: During the illness that led to death, did the baby become cold to touch?

- *yes*
- no*
- dk*
- ref*

**Id10285:** selected(\${Id10284}, 'yes')

Question: How many days old was the baby when it started feeling cold to touch?



- *integer*

**Id10286:**

Question: During the illness that led to death, did the baby become lethargic, after a period of normal activity?

- *yes*  
*no*  
*dk*  
*ref*

**Id10287:**

Question: Did the baby have redness or pus drainage from the umbilical cord stump?

- *yes*  
*no*  
*dk*  
*ref*

**Id10288:**

Question: During the illness that led to death, did the baby have skin ulcer(s) or pits?

- *yes*  
*no*  
*dk*  
*ref*

**Id10289:**

Question: During the illness that led to death, did the baby have yellow skin, palms (hand) or soles (foot)?

- *yes*  
*no*  
*dk*  
*ref*

**Id10290:**

Question: Did the baby or infant appear to be healthy and then just die suddenly?

- *yes*  
*no*  
*dk*  
*ref*

**Id10294:**

Question: Did she have any swelling or lump in the breast?

- *yes*  
*no*

*dk*  
*ref*

**Id10295:**

Question: Did she have any ulcers (pits) in the breast?

- *yes*  
*no*  
*dk*  
*ref*

**Id10296:**

Question: Did she ever have a period or menstruate?

- *yes*  
*no*  
*dk*  
*ref*

**Id10297: selected(\${Id10296}, 'yes')**

Question: Did she have vaginal bleeding in between menstrual periods?

- *yes*  
*no*  
*dk*  
*ref*

**Id10298: selected(\${Id10297}, 'yes')**

Question: Was the bleeding excessive?

- *yes*  
*no*  
*dk*  
*ref*

**Id10299: selected(\${Id10296}, 'yes')**

Question: Did her menstrual period stop naturally because of menopause?

- *yes*  
*no*  
*dk*  
*ref*

**Id10300: selected(\${Id10296}, 'yes')**

Question: Did she have vaginal bleeding after cessation of menstruation?

- *yes*  
*no*

*dk*  
*ref*

**Id10301:** selected(\${Id10296}, 'yes')

Question: Was there excessive vaginal bleeding in the week prior to death?

- *yes*  
*no*  
*dk*  
*ref*

**Id10302:** selected(\${Id10296}, 'yes')

Question: At the time of death was her period overdue?

- *yes*  
*no*  
*dk*  
*ref*

**Id10303:** selected(\${Id10302}, 'yes')

Question: For how many weeks had her period been overdue?

- *integer*

**Id10304:**

Question: Did she have a sharp pain in her belly (abdomen) shortly before death?

- *yes*  
*no*  
*dk*  
*ref*

**Id10305:**

Question: Was she pregnant at the time of death?

- *yes*  
*no*  
*dk*  
*ref*

**Id10306:** not(selected(\${Id10305}, 'yes'))

Question: Did she die within 6 weeks of delivery, abortion or miscarriage?

- *yes*  
*no*  
*dk*  
*ref*

**Id10307:** `${Id10306}!=‘yes’ and ${Id10305}!=‘yes’`

Question: Did this woman die more than 42 days after being pregnant or delivering a baby?

- *yes*
- no*
- dk*
- ref*

**Id10308:** `${Id10306}!=‘yes’ and ${Id10305}!=‘yes’`

Question: Was this a woman who died less than 1 year after being pregnant or delivering a baby?

- *yes*
- no*
- dk*
- ref*

**Id10309:** `(selected(${Id10305}, ‘yes’) and ${Id10306} !=‘yes’)`

Question: For how many months was she pregnant?

- *integer*

**Id10310:** `not(selected(${Id10306}, ‘yes’))`

Question: Please confirm: When she died, she was NEITHER pregnant NOR had recently been pregnant NOR had recently delivered when she died - is that right?

- *yes*
- no*
- dk*
- ref*

**Id10312:**

Question: Did she die during labour or delivery?

- *yes*
- no*
- dk*
- ref*

**Id10313:** `not(selected(${Id10312}, ‘yes’))`

Question: Did she die after delivering a baby?

- *yes*
- no*
- dk*
- ref*

**Id10314:** `selected(${Id10313}, ‘yes’)`

Question: Did she die within 24 hours after delivery?

- *yes*
- no*
- dk*
- ref*

**Id10315:**  $\text{\${Id10312}} \neq \text{'yes'}$  and  $\text{\${Id10314}} \neq \text{'yes'}$

Question: Did she die within 6 weeks of childbirth?

- *yes*
- no*
- dk*
- ref*

**Id10316:**

Question: Did she give birth to a live baby (within 6 weeks of her death)?

- *yes*
- no*
- dk*
- ref*

**Id10317:**

Question: Did she die during or after a multiple pregnancy?

- *yes*
- no*
- dk*
- ref*

**Id10318:**

Question: Was she breastfeeding the child in the days before death?

- *yes*
- no*
- dk*
- ref*

**Id10319:**

Question: How many births, including stillbirths, did she/the mother have before this baby?

- *integer*

**Id10320:**  $\text{\${Id10319}} \neq \text{'0'}$

Question: Had she had any previous Caesarean section?

- *yes*
- no*
- dk*
- ref*

**Id10321:**

Question: During pregnancy, did she suffer from high blood pressure?

- *yes*
- no*
- dk*
- ref*

**Id10322:**

Question: Did she have foul smelling vaginal discharge during pregnancy or after delivery?

- *yes*
- no*
- dk*
- ref*

**Id10323:**

Question: During the last 3 months of pregnancy, did she suffer from convulsions?

- *yes*
- no*
- dk*
- ref*

**Id10324:**

Question: During the last 3 months of pregnancy did she suffer from blurred vision?

- *yes*
- no*
- dk*
- ref*

**Id10325:**

Question: Did bleeding occur while she was pregnant

- *yes*
- no*
- dk*
- ref*

**Id10326: selected({Id10325}, 'yes')**

Question: Was there vaginal bleeding during the first 6 months of pregnancy?

- *yes*
- no*
- dk*
- ref*

**Id10327:** selected(\${Id10325}, 'yes')

Question: Was there vaginal bleeding during the last 3 months of pregnancy but before labour started?

- *yes*
- no*
- dk*
- ref*

**Id10328:**

Question: Did she have excessive bleeding during labour or delivery?

- *yes*
- no*
- dk*
- ref*

**Id10329:**

Question: Did she have excessive bleeding after delivery or abortion?

- *yes*
- no*
- dk*
- ref*

**Id10330:**

Question: Was the placenta completely delivered?

- *yes*
- no*
- dk*
- ref*

**Id10331:**

Question: Did she deliver or try to deliver an abnormally positioned baby?

- *yes*
- no*
- dk*
- ref*

**Id10332:**

Question: For how many hours was she in labour?

- *integer*

**Id10333:**

Question: Did she attempt to terminate the pregnancy?

- *yes*  
*no*  
*dk*  
*ref*

**Id10334: not(selected(\${Id10316}, 'yes'))**

Question: Did she recently have a pregnancy that ended in an abortion (spontaneous or induced)?

- *yes*  
*no*  
*dk*  
*ref*

**Id10335: selected(\${Id10334}, 'yes')**

Question: Did she die during an abortion?

- *yes*  
*no*  
*dk*  
*ref*

**Id10336: selected(\${Id10334}, 'yes')**

Question: Did she die within 6 weeks of having an abortion?

- *yes*  
*no*  
*dk*  
*ref*

**Id10337:**

Question: Where did she give birth?

- *hospital*  
*other\_health\_facility*  
*home*  
*on\_route\_to\_hospital\_or\_facility*  
*other*

**Id10338:**

Question: Did she receive professional assistance during the delivery?

- *yes*  
*no*



*dk*  
*ref*

**Id10339:**

Question: Who delivered the baby?

- *Doctor*  
*Midwife*  
*Nurse*  
*Relative*  
*Self\_mother*  
*Traditional\_birth\_attendant*  
*Other*  
*DK*  
*ref*

**Id10340:**

Question: Did she have an operation to remove her uterus shortly before death?

- *yes*  
*no*  
*dk*  
*ref*

**Id10342:**

Question: Was the delivery normal vaginal, without forceps or vacuum?

- *yes*  
*no*  
*dk*  
*ref*

**Id10343: not(selected(\${Id10342}, 'yes'))**

Question: Was the delivery vaginal, with forceps or vacuum?

- *yes*  
*no*  
*dk*  
*ref*

**Id10344: not(selected(\${Id10342}, 'yes')) and not(selected(\${Id10343}, 'yes'))**

Question: Was the delivery a Caesarean section?

- *yes*  
*no*  
*dk*  
*ref*

**Id10347:** ((selected(\${isNeonatal}, '1')) or (selected(\${Id10114}, 'yes')) or (selected(\${isAdult}, '1') and \${Id10310} = 'no') and \${Id10019} = 'female')

Question: Was the baby born more than one month early?

- *yes*
- *no*
- *dk*
- *ref*

**Id10352:** (selected(\${isChild}, '1'))

Question: How many years old was the child when the fatal illness started?

- *integer*

**Id10354:**

Question: Was the child part of a multiple birth?

- *yes*
- *no*
- *dk*
- *ref*

**Id10355:** selected(\${Id10354}, 'yes')

Question: Was the child the first, second, or later in the birth order?

- *first*
- *second\_or\_later*

**Id10356:**

Question: Is the mother still alive?

- *yes*
- *no*
- *dk*
- *ref*

**Id10357:** selected(\${Id10356}, 'no')

Question: Did the mother die during or after the delivery?

- *during\_delivery*
- *after\_delivery*

**Id10358:**

Question: How many months after the delivery did the mother die?

- *integer*

**Id10359:**

Question: How many days after the delivery did the mother die?

- *integer*

**Id10360:**

Question: Where was the deceased born?

- *hospital*  
*other\_health\_facility*  
*home*  
*on\_route\_to\_hospital\_or\_facility*  
*other*  
*DK*  
*Ref*

**Id10361:**

Question: Did the mother receive professional assistance during the delivery? (ask only up to 1 year)

- *yes*  
*no*  
*dk*  
*ref*

**Id10362:**

Question: At birth, was the baby of usual size?

- *yes*  
*no*  
*dk*  
*ref*

**Id10363: not(selected(\${Id10362}, 'yes'))**

Question: At birth, was the baby smaller than usual, (weighing under 2.5 kg)?

- *yes*  
*no*  
*dk*  
*ref*

**Id10364: selected(\${Id10363}, 'yes')**

Question: At birth, was the baby very much smaller than usual, (weighing under 1 kg)?

- *yes*  
*no*  
*dk*  
*ref*

**Id10365:** (not(selected(\${Id10363}, 'yes')) or not(selected(\${Id10362}, 'yes')))

Question: At birth, was the baby larger than usual, (weighing over 4.5 kg)?

- *yes*
- *no*
- *dk*
- *ref*

**Id10366:**

Question: What was the weight (in grammes) of the deceased at birth?

- *integer*

**Id10367:**

Question: How many months long was the pregnancy before the child was born? (ask only up to 1 year)

- *integer*

**Id10368:**

Question: Were there any complications in the late part of the pregnancy (defined as the last 3 months, before labour)? (ask only up to 1 year)

- *yes*
- *no*
- *dk*
- *ref*

**Id10369:**

Question: Were there any complications during labour or delivery? (ask only up to 1 year)

- *yes*
- *no*
- *dk*
- *ref*

**Id10370:**

Question: Was any part of the baby physically abnormal at time of delivery? (for example: body part too large or too small, additional growth on body)?

- *yes*
- *no*
- *dk*
- *ref*

**Id10371:** not(selected(\${Id10370}, 'no'))

Question: Did the baby/ child have a swelling or defect on the back at time of birth?

- *yes*
- no*
- dk*
- ref*

**Id10372:** `not(selected(${Id10370}, 'no'))`

Question: Did the baby/ child have a very large head at time of birth?

- *yes*
- no*
- dk*
- ref*

**Id10373:** `not(selected(${Id10372}, 'yes') or selected(${Id10370}, 'no'))`

Question: Did the baby/ child have a very small head at time of birth?

- *yes*
- no*
- dk*
- ref*

**Id10376:**

Question: Was the baby moving in the last few days before the birth?

- *yes*
- no*
- dk*
- ref*

**Id10377:**

Question: Did the baby stop moving in the womb before labour started?

- *yes*
- no*
- dk*
- ref*

**Id10379:**

Question: How many days before labour did you or the mother last feel the baby move? (maybe the respondent or health worker had examined the mother)

- *integer*

**Id10380:**

Question: How many hours before labour did you or the mother last feel the baby move? (maybe the respondent or health worker had examined the mother)

- *integer*

**Id10382:**

Question: How many hours did labour and delivery take?

- *integer*

**Id10383:**

Question: Was the baby born 24 hours or more after the water broke?

- *yes*  
*no*  
*dk*  
*ref*

**Id10384:**

Question: Was the liquor foul smelling?

- *yes*  
*no*  
*dk*  
*ref*

**Id10385:**

Question: What was the colour of the liquor when the water broke?

- *green\_or\_brown*  
*clear*  
*other*  
*dk*  
*ref*

**Id10387:**

Question: Was the delivery normal vaginal, without forceps or vacuum?

- *yes*  
*no*  
*dk*  
*ref*

**Id10388: not(selected(\${Id10387}, 'yes'))**

Question: Was the delivery vaginal, with forceps or vacuum?

- *yes*  
*no*  
*dk*  
*ref*

**Id10389:** `not(selected(${Id10387}, 'yes')) and not(selected(${Id10388}, 'yes'))`

Question: Was the delivery a Caesarean section?

- *yes*
- no*
- dk*
- ref*

**Id10391:**

Question: Did you/the mother receive any vaccinations since reaching adulthood including during this pregnancy?

- *yes*
- no*
- dk*
- ref*

**Id10392:** `selected(${Id10391}, 'yes')`

Question: How many doses?

- *integer*

**Id10393:** `selected(${Id10391}, 'yes')`

Question: Did the mother receive tetanus toxoid (TT) vaccine?

- *yes*
- no*
- dk*
- ref*

**Id10394:**

Question: How many births, including stillbirths, did the baby's mother have before this baby?

- *integer*

**Id10395:** `1`

Question: During labour, did the baby's mother suffer from fever?

- *yes*
- no*
- dk*
- ref*

**Id10396:**

Question: During the last 3 months of pregnancy, labour or delivery, did the baby's mother suffer from high blood pressure?

- *yes*
- no*
- dk*
- ref*

**Id10397:**

Question: Did the baby's mother have diabetes mellitus?

- *yes*
- no*
- dk*
- ref*

**Id10398:**

Question: Did the baby's mother have foul smelling vaginal discharge during pregnancy or after delivery?

- *yes*
- no*
- dk*
- ref*

**Id10399:**

Question: During the last 3 months of pregnancy, labour or delivery, did the baby's mother suffer from convulsions?

- *yes*
- no*
- dk*
- ref*

**Id10400:**

Question: During the last 3 months of pregnancy did the baby's mother suffer from blurred vision?

- *yes*
- no*
- dk*
- ref*

**Id10401:**

Question: Did the baby's mother have severe anemia?

- *yes*
- no*
- dk*
- ref*

**Id10402:**

Question: Did the baby's mother have vaginal bleeding during the last 3 months of pregnancy but before



labour started?

- *yes*  
*no*  
*dk*  
*ref*

**Id10403:**

Question: Did the baby's bottom, feet, arm or hand come out of the vagina before its head?

- *yes*  
*no*  
*dk*  
*ref*

**Id10404:**

Question: Was the umbilical cord wrapped more than once around the neck of the child at birth?

- *yes*  
*no*  
*dk*  
*ref*

**Id10405:**

Question: Was the umbilical cord delivered first?

- *yes*  
*no*  
*dk*  
*ref*

**Id10406:**

Question: Was the baby blue in colour at birth?

- *yes*  
*no*  
*dk*  
*ref*

**Id10411:**

Question: Did (s)he drink alcohol?

- *yes*  
*no*  
*dk*  
*ref*

**Id10412:**

Question: Did (s)he use tobacco?

- *yes*  
*no*  
*dk*  
*ref*

**Id10413:**

Question: Did (s)he smoke tobacco (cigarette, cigar, pipe, etc.)?

- *yes*  
*no*  
*dk*  
*ref*

**Id10414: selected(\${Id10413}, 'yes')**

Question: What kind of tobacco did (s)he use ?

- *cigarettes*  
*pipe*  
*chewing\_tobacco*  
*local\_form\_of\_tobacco*  
*other*

**Id10415: selected(\${Id10413}, 'yes')**

Question: How many cigarettes did (s)he smoke daily?

- *integer*

**Id10418:**

Question: Did (s)he receive any treatment for the illness that led to death?

- *yes*  
*no*  
*dk*  
*ref*

**Id10419: selected(\${Id10418}, 'yes')**

Question: Did (s)he receive oral rehydration salts?

- *yes*  
*no*  
*dk*  
*ref*

**Id10420: selected(\${Id10418}, 'yes')**

Question: Did (s)he receive (or need) intravenous fluids (drip) treatment?

- *yes*
- no*
- dk*
- ref*

**Id10421:** selected(\${Id10418}, 'yes')

Question: Did (s)he receive (or need) a blood transfusion?

- *yes*
- no*
- dk*
- ref*

**Id10422:** selected(\${Id10418}, 'yes')

Question: Did (s)he receive (or need) treatment/food through a tube passed through the nose?

- *yes*
- no*
- dk*
- ref*

**Id10423:** selected(\${Id10418}, 'yes')

Question: Did (s)he receive (or need) injectable antibiotics?

- *yes*
- no*
- dk*
- ref*

**Id10424:** selected(\${Id10418}, 'yes')

Question: Did (s)he receive (or need) antiretroviral therapy (ART)?

- *yes*
- no*
- dk*
- ref*

**Id10425:** selected(\${Id10418}, 'yes')

Question: Did (s)he have (or need) an operation for the illness?

- *yes*
- no*
- dk*
- ref*

**Id10426:** (selected(\${Id10418}, 'yes') and \${isNeonatal} !='1') and selected(\${Id10425}, 'yes')

Question: Did (s)he have the operation within 1 month before death?

- *yes*
- *no*
- *dk*
- *ref*

**Id10427:** (selected(\${isAdult}, '1') or selected(\${isChild}, '1'))

Question: Was (s)he discharged from hospital very ill?

- *yes*
- *no*
- *dk*
- *ref*

**Id10428:** (selected(\${isNeonatal}, '1') or selected(\${isChild}, '1'))

Question: Had (s)he received immunization?

- *yes*
- *no*
- *dk*
- *ref*

**Id10429:** (selected(\${isNeonatal}, '1') or selected(\${isChild}, '1')) and selected(\${Id10428}, 'yes')

Question: Do you have the child's vaccination card?

- *yes*
- *no*
- *dk*
- *ref*

**Id10430:** (selected(\${isNeonatal}, '1') or selected(\${isChild}, '1')) and selected(\${Id10429}, 'yes')

Question: Can I see the vaccination card (note the vaccines the child received)?

- *yes*
- *no*
- *dk*
- *ref*

**Id10431:** (selected(\${isNeonatal}, '1') or selected(\${isChild}, '1')) and selected(\${Id10430}, 'yes')

Question: Note vaccines here

- *text*

**Id10432:**

Question: Was care sought outside the home while (s)he had this illness?

- *yes*
- no*
- dk*
- ref*

**Id10433:** selected(\${Id10432}, 'yes')

Question: Where or from whom did you seek care?

- *traditional\_healer*
- homeopath*
- religious\_leader*
- government\_hospital*
- government\_health\_center\_or\_clinic*
- private\_hospital*
- community\_based\_practitionerinsystem*
- trained\_birth\_attendant*
- private\_physician*
- relative\_friend*
- pharmacy*
- dk*
- ref*

**Id10434:** selected(\${Id10432}, 'yes')

Question: Record the name and address of any hospital, health center or clinic where care was sought

- *text*

**Id10435:** (selected(\${isNeonatal}, '1') or selected(\${isAdult}, '1') or (selected(\${isChild}, '1') and selected(\${Id10432}, 'yes')))

Question: Did a health care worker tell you the cause of death?

- *yes*
- no*
- dk*
- ref*

**Id10436:** selected(\${Id10435}, 'yes')

Question: What did the health care worker say?

- *text*

**Id10437:** (selected(\${isNeonatal}, '1') or selected(\${isAdult}, '1') or (selected(\${isChild}, '1') and selected(\${Id10432}, 'yes')))

Question: Do you have any health records that belonged to the deceased?

- *yes*
- no*

*dk*  
*ref*

**Id10438:** selected(*{Id10437}*, 'yes')

Question: Can I see the health records?

- *yes*
- *no*
- *dk*
- *ref*

**Id10439:** selected(*{Id10438}*, 'yes')

Question: Record the date of the most recent (last) visit

- *date*

**Id10440:** (selected(*{Id10438}*, 'yes') and selected(*{isAdult}*, '1'))

Question: Record the date of the last but one (second last) visit

- *date*

**Id10441:** (selected(*{Id10438}*, 'yes') and selected(*{isAdult}*, '1'))

Question: Record the date of the last note on the health records

- *date*

**Id10442:** (selected(*{Id10438}*, 'yes') and selected(*{isAdult}*, '1'))

Question: Record the weight (in kilogrammes) written at the most recent (last) visit

- 

**Id10443:** (selected(*{Id10438}*, 'yes') and selected(*{isAdult}*, '1'))

Question: Record the weight (in kilogrammes) written at the last but one (second last) visit

- 

**Id10444:** (selected(*{Id10438}*, 'yes') and selected(*{isAdult}*, '1'))

Question: Transcribe the last note on the health records

- *text*

**Id10445:** ((selected(*{isNeonatal}*, '1')) or (selected(*{isChild}*, '1') and selected(*{Id10432}*, 'yes')))

Question: Has the deceased's (biological) mother ever been tested for HIV?

- *yes*
- no*
- dk*
- ref*

**Id10446:** ((selected(\${isNeonatal}, '1')) or (selected(\${isChild}, '1') and selected(\${Id10432}, 'yes')))

Question: Has the deceased's (biological) mother ever been told she had HIV/AIDS by a health worker?

- *yes*
- no*
- dk*
- ref*

**Id10450:**

Question: In the final days before death, did s/he travel to a hospital or health facility?

- *yes*
- no*
- dk*
- ref*

**Id10451:** selected(\${Id10450}, 'yes')

Question: Did (s)he use motorised transport to get to the hospital or health facility?

- *yes*
- no*
- dk*
- ref*

**Id10452:** selected(\${Id10450}, 'yes')

Question: Were there any problems during admission to the hospital or health facility?

- *yes*
- no*
- dk*
- ref*

**Id10453:** selected(\${Id10450}, 'yes')

Question: Were there any problems with the way (s)he was treated (medical treatment, procedures, interpersonal attitudes, respect, dignity) in the hospital or health facility?

- *yes*
- no*
- dk*
- ref*

**Id10454:** selected(\${Id10450}, 'yes')

Question: Were there any problems getting medications, or diagnostic tests in the hospital or health facility?

- *yes*
- no*
- dk*
- ref*

**Id10455:**

Question: Does it take more than 2 hours to get to the nearest hospital or health facility from the deceased's household?

- *yes*
- no*
- dk*
- ref*

**Id10456:**

Question: In the final days before death, were there any doubts about whether medical care was needed?

- *yes*
- no*
- dk*
- ref*

**Id10457:**

Question: In the final days before death, was traditional medicine used?

- *yes*
- no*
- dk*
- ref*

**Id10458:**

Question: In the final days before death, did anyone use a telephone or cell phone to call for help?

- *yes*
- no*
- dk*
- ref*

**Id10459:**

Question: Over the course of illness, did the total costs of care and treatment prohibit other household payments?

- *yes*
- no*
- dk*



*ref*

**Id10462:**

Question: Was a death certificate issued?

- *yes*
- *no*
- *dk*
- *ref*

**Id10463: selected(\${Id10462}, 'yes')**

Question: Can I see the death certificate?

- *yes*
- *no*
- *dk*
- *ref*

**Id10464: selected(\${Id10463}, 'yes')**

Question: Record the immediate cause of death from the certificate (line 1a)

- *text*

**Id10465: selected(\${Id10463}, 'yes')**

Question: Duration (Ia):

- *text*

**Id10466: selected(\${Id10463}, 'yes')**

Question: Record the first antecedent cause of death from the certificate (line 1b)

- *text*

**Id10467: selected(\${Id10463}, 'yes')**

Question: Duration (Ib):

- *text*

**Id10468: selected(\${Id10463}, 'yes')**

Question: Record the second antecedent cause of death from the certificate (line 1c)

- *text*

**Id10469: selected(\${Id10463}, 'yes')**

Question: Duration (Ic):

- *text*

**Id10470: selected(\${Id10463}, 'yes')**

Question: Record the third antecedent cause of death from the certificate (line 1d)

- *text*

**Id10471: selected(\${Id10463}, 'yes')**

Question: Duration (Id):

- *text*

**Id10472: selected(\${Id10463}, 'yes')**

Question: Record the contributing cause(s) of death from the certificate (part 2)

- *text*

**Id10473: selected(\${Id10463}, 'yes')**

Question: Duration (part2):

- *text*

**Id10476:**

Question: NARRATIVE DESCRIPTION

- *text*

**Id10477: selected(\${isAdult}, '1')**

Question: Are there any of the following words of interest mentioned in the above narrative?

- *Chronic\_kidney\_disease*
- Dialysis*
- Fever*
- Heart\_attack*
- Heart\_problem*
- Jaundice*
- Liver\_failure*
- Malaria*
- Pneumonia*
- Renal\_kidney\_failure*
- Suicide*
- None*
- dk*

**Id10478: selected(\${isChild}, '1')**

Question: Are there any of the following words of interest mentioned in the above narrative?

- *abdomen*
- cancer*
- dehydration*
- dengue*
- diarrhea*
- fever*
- heart\_problem*
- jaundice*
- pneumonia*
- rash*
- None*
- dk*

**Id10479:** `selected(${isNeonatal}, '1')`

Question: Are there any of the following words of interest mentioned in the above narrative?

- *asphyxia*
- incubator*
- lung\_problem*
- pneumonia*
- preterm\_delivery*
- respiratory\_distress*
- None*
- dk*

**Id10481:**

Question: Time at end of interview

- *time*