

LAKANA trial

Data collection form 03: Immunization history

Version 2.0, 22 December 2020

Section Header	Num.	Question Text	Question Responses	Required
Visit information	[0]	Instructions: Complete this form for each enrolled child.		
	[1]	Date of visit:		
Immunization record	[2]	For each vaccine listed below, indicate if <name> has received the vaccine and if so, on what date.		
(Birth)	[3]	BCG:	1, Yes 0, No 9, Unknown	Yes
	[4]	Date of BCG:	date	Yes (if [3] = 1)
	[5]	Polio 0:	1, Yes 0, No 9, Unknown	Yes
	[6]	Date of Polio 0:	date	Yes (if [5] = 1)
(EPI 1 – 6 weeks)	[7]	Polio 1:	1, Yes 0, No 9, Unknown	Yes
	[8]	Date of Polio 1:	date	Yes (if [7] = 1)
(EPI 2 – 10 weeks)	[9]	Polio 2:	1, Yes 0, No 9, Unknown	Yes
	[10]	Date of Polio 2:	date	Yes (if [9] = 1)
(EPI 3 – 14 weeks)	[11]	Polio 3:	1, Yes 0, No 9, Unknown	Yes
	[12]	Date of Polio 3:	date	Yes (if [11] = 1)
(EPI 1 – 6 weeks)	[13]	Pentavalent 1 (DPT-HiB-HBV):	1, Yes 0, No 9, Unknown	Yes
	[14]	Date of Pentavalent 1 (DPT-HiB-HBV):	date	Yes (if [13] = 1)
(EPI 2 – 10 weeks)	[15]	Pentavalent 2 (DPT-HiB-HBV):	1, Yes 0, No 9, Unknown	Yes
	[16]	Date of Pentavalent 2 (DPT-HiB-HBV):	date	Yes (if [15] = 1)
(EPI 3 – 14 weeks)	[17]	Pentavalent 3 (DPT-HiB-HBV):	1, Yes 0, No 9, Unknown	Yes
	[18]	Date of Pentavalent 3 (DPT-HiB-HBV):	date	Yes (if [17] = 1)
(EPI 1 – 6 weeks)	[19]	S. pneumococcus (PCV13) 1 vaccine dose:	1, Yes 0, No 9, Unknown	Yes
	[20]	Date of S. pneumococcus (PCV13) 1:	date	Yes (if [19] = 1)

(EPI 2 – 10 weeks)	[21]	S. pneumococcus (PCV13) 2 vaccine dose:	1, Yes 0, No 9, Unknown	Yes
	[22]	Date of S. pneumococcus (PCV13) 2:	date	Yes (if [21] = 1)
(EPI 3 – 14 weeks)	[23]	S. pneumococcus (PCV13) 3 vaccine dose:	1, Yes 0, No 9, Unknown	Yes
	[24]	Date of S. pneumococcus (PCV13) 3:	date	Yes (if [23] = 1)
(EPI 1 – 6 weeks)	[25]	Rotavirus (Rotateq) 1:	1, Yes 0, No 9, Unknown	Yes
	[26]	Date of Rotavirus (Rotateq) 1:	date	Yes (if [25] = 1)
(EPI 2 – 10 weeks)	[27]	Rotavirus (Rotateq) 2:	1, Yes 0, No 9, Unknown	Yes
	[28]	Date of Rotavirus (Rotateq) 2:	date	Yes (if [27] = 1)
(EPI 3 – 14 weeks)	[29]	Rotavirus (Rotateq) 3:	1, Yes 0, No 9, Unknown	Yes
	[30]	Date of Rotavirus (Rotateq) 3:	date	Yes (if [29] = 1)
(Other vaccines – 9 months)	[31]	Measles (VAR - vaccin anti-rougeole):	1, Yes 0, No 9, Unknown	Yes
	[32]	Date of Measles (VAR - vaccin anti-rougeole):	date	Yes (if [31] = 1)
	[33]	Yellow Fever (VAA - vaccin anti-amarile):	1, Yes 0, No 9, Unknown	Yes
	[34]	Date of Yellow Fever (VAA - vaccin anti-amarile):	date	Yes (if [33] = 1)
	[35]	Meningococcal A (Men Afrivac):	1, Yes 0, No 9, Unknown	Yes
	[36]	Date of Meningococcal A (Men Afrivac):	date	Yes (if [35] = 1)
(Other health interventions)	[37]	Seasonal Malaria Chemoprevention (SMC)	1, Yes 0, No 9, Unknown	Yes
	[38]	How many doses of SMC has the infant received since the previous LAKANA visit or in the three months prior to MDA1? :		Yes if ([37] = 1)
	[39]	Date of latest SMC dose:	date	
	[40]	Vitamin A (received since previous LAKANA visit):	1, Yes 0, No 9, Unknown	Yes
	[41]	Date of Vitamin A:	date	Yes (if [40] = 1)