

AFRICAN POPULATION AND HEALTH RESEARCH CENTER (APHRC)  
 NAIROBI URBAN HEALTH AND DEMOGRAPHIC SURVEILLANCE SYSTEM (NUHDSS)  
**VACCINATION REGISTRATION FORM FOR CHILDREN (ALIVE OR DEAD) UNDER FIVE YEARS OF AGE**

**1.0 BACKGROUND**

1.1. START TIME 

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 1.2. FIELD WORKER'S CODE 

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 1.3. DATE OF INTERVIEW (DD/MM/YYYY) 

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 1.4 NAME OF THE CHILD .....

1.5 CHILD'S ID 

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 1.6 DATE OF BIRTH OF CHILD (DD/MM/YYYY) 

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 1.7 SEX OF CHILD (F=FEMALE; M=MALE) 

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 1.8 Is the child alive or dead? (A=ALIVE; D=DEAD) 

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 1.9 ID OF ROOM WHERE CHILD SLEEPS/USED TO SLEEP 

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 1.10 RESULT OF INTERVIEW (**CODE SHEET A<sup>7</sup>**) .....

**2.0 RESPONDENT PARTICULARS**

2.1. What is your **full** name?.....  
 2.2 RECORD ROOM ID OF RESPONDENT 

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 2.3 What is your relationship to (NAME)? (**CODE SHEET A<sup>2</sup>**) 

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**3.0 VACCINATION DETAILS (For children under five and those who died before age of five)**

3.1 Has/had (NAME) ever received any vaccinations from clinics to prevent him/her from getting diseases?  
 (N=NO; Y=YES; D=DON'T KNOW) **[IF "N" OR "D" SKIP TO 3.3]** 

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 3.2 Does (NAME) have a vaccination record? (0=NO; 1=YES, CARD SEEN; 2=YES, CARD NOT SEEN;  
 3=YES, OTHER WRITTEN RECORDS SEEN; 4=YES, OTHER WRITTEN RECORDS NOT SEEN;  
 8=DON'T KNOW) 

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**INSTRUCTIONS TO FW:**

- \*\* If a vaccination card/record is available for the child, copy the dates for each immunization recorded on the card in the Date/Status column in questions 3.3-3.8.
- \*\* If the card shows that the vaccine was given but there is no date or the date is not legible, write **44** in the first two cells of the corresponding Date/Status column in questions 3.3-3.8.
- \*\* If the specific vaccine or dose is not recorded on the card/record or the respondent does not have a vaccination card/record, ask the respondent the corresponding question (3.3-3.8) for each vaccine. If the Respondent says the child received the vaccine, write **66** in the corresponding first two cells of the Date/Status column.
- \*\* If the vaccine/dose that should have been given by the date of interview was not given, write **77** in the corresponding first two cells of the Date/Status column, **and Ask: What was the main Reason why (name of Vaccine/Dose) was not given to the Child?** (Record the reason and the code<sup>2</sup> for the reason in the space provided.
- \*\* If the respondent **Does not Know** whether the vaccine was given or not, record **98** in the first two cells of the Date/Status column for each vaccine. If the child for whom this form is being filled is around and the respondent does not know whether BCG was given or not, you should ask for permission to perform a physical check to determine whether the vaccine was indeed given or not.
- \*\* If the child has not yet reached the age to receive a specific vaccine/dose, record **99=Not Applicable** in the first two cells of the Date/Status column for the vaccine/dose.

