**Background Information For Tracking**

|  |  |  |
| --- | --- | --- |
|  | Study ID | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **No** | **Questions** | **Responses** |
| 1 | Has the consent been signed? (If no, STOP and finish consent)  | Yes No  |
| 2. | What is the first name of the mother? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 3. | What is the middle name of the mother? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 4 | What is the last name of the mother? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 5. | What zone does the mother live in?  | * West Gojjam
* South Gondar
* Other (specify)
 |
| 5.a. | If other, specify zone | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 6. | What woreda is the mother from?  | * Mecha
* Bahir Dar Zuira
* BahirDar City
* Libokemkem
* Farta
* Derbere Tabor Town
* Other (specify)
 |
| 6.a. | If other, specify woreda | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 7. | What kebele is the mother from? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 8. | Does the mother have a phone number?  | Yes No |
| 9. | What is the mother's phone number | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 10. | What is a phone number she can be reached at? (like her husband's) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 11. | What is the assigned woman's ID | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | **Completion of Visits** |  |
|  | Infant DOB [dob\_infant] |  |
| 12. | Which Forms Have Been Completed Baseline | KMC initiationDischarge7 Days after discharge28 days of life,GBV |
| 13. | If any forms cannot be completed, please explain why? |  |