

**KEM Hospital Research Centre Pune, Vadu Rural Health Program (VRHP)
Vadu Health and Demographic Surveillance System (Vadu HDSS)
Eligible Women Form (Age 15-49 Years)**

Interview start time: <input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/> (24 hrs)		
PID		Current Status
Woman <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Woman <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Q0001	Household number <i>(Record number of the household to which the woman belongs to)</i>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Q0002	Name of head of the household	_____
Q0003	Name of the woman <i>(The respondent has to be the woman herself)</i>	_____
Q0004	Relationship with the head of the household?	01 Self 02 Spouse <i>(wife/husband)</i> 03 Son /daughter 04 Son-in-law/Daughter-in-law 05 Grandson /Grand-daughter 06 Father /Mother 07 Father-in-law /Mother-in-law 08 Brother /Sister 09 Step/Co wife 10 Grandfather /Grandmother 11 Other relationship <i>(Specify)</i> _____ 12 No relation, but friends/ servants/ paying guest 88 Don't know
Q 0005	What was the date of your last menstrual period (LMP)?	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 88 Don't know/Can't remember
Q 0006	If no menstruation for more than one month then specify reason. <i>(*If response is 01 i.e. pregnancy, switch to pregnancy form)</i>	01 Pregnancy 02 Natural menopause 03 Hysterectomy 04 Lactational amenorrhea 05 Other <i>(specify)</i> _____ 88 Don't Know

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Q 0007	Have you undergone family planning operation?	01 Yes 02 No (if no go to Q no 0010)
Q 0008	If yes to Q7, how many months and years ago?	_____ Years, _____ Months
Q 0009	If no to Q7, are you currently using any method of contraception?	01 Yes 02 No (if no go to Q no 0012)
Q 0010	If yes to Q7 which method of contraception are you using?	01 Pills 02 Condoms 03 Copper-T/Loop 04 Injection 05 Safe Period 06 Coitus interruptus 07 Others (<i>Specify</i>) _____
Q 0011	Have you ever/since last visit had one or more pregnancies that resulted in abortion?	1 Yes 2. No 3. Not sure
Q 0012	If yes to Q0011, then specify the number of pregnancies since last visit that resulted in abortion.	_____

Interview end time: : (24 hrs)

Interviewer name: _____ Signature: _____ Date: / /

Data entry by _____ Signature: _____ Date: / /