



12832

Ministry of Health & Child Welfare
Antenatal Clinic Surveillance 2012

1. Survey Number Sticker (big sticker on top)

INSTRUCTIONS

Please fill in circles like this: ●

NOT like this: ○ ⊗ ✓



2. Age

- 0 ○ ○
1 ○ ○
2 ○ ○
3 ○ ○
4 ○ ○
5 ○ ○
6 ○ ○
7 ○ ○
8 ○ ○
9 ○ ○

3. Place of Usual Residence

- Rural ○ Mine
○ Growth Point ○ Farm
○ Town or City ○ Resettlement

6. Partner's Place of Usual Residence

- Rural ○ Farm
○ Growth Point ○ Resettlement
○ Town or City ○ Not known
○ Mine ○ N/A

4. Type of Occupation

- Student
○ Housewife
○ Unemployed
○ Employed (Formal)
○ Employed (Informal)

5. Partner's Type of Occupation

- Student
○ Unemployed
○ Employed (Formal)
○ Employed (Informal)
○ N/A

8. Partner's Educational Level

- None
○ Primary
○ Secondary (Junior)
○ Secondary (O' Level)
○ Secondary (A' Level)
○ Tertiary
○ N/A

9. Educational Level

- None
○ Primary
○ Secondary (Junior Certificate)
○ Secondary (O' Level)
○ Secondary (A' Level)
○ Tertiary

7. Marital Status

- Married ○ Separated
○ Single ○ Widowed
○ Divorced

10. Genital Ulcer History

- | | | |
|---|---|---|
| | Y | N |
| a) History of GUD within the past year? | ○ | ○ |
| b) Presence of GUD on examination | ○ | ○ |

11. HIV Test History

- a) Prior to this visit, have you ever been offered an HIV test? ○ Yes ○ No
b) Was this HIV test accepted? ○ Yes ○ No ○ N/A
c) Did you receive results during post test counseling? ○ Yes ○ No ○ N/A
d) Prior to this visit did you ever take ARVs? ○ Yes ○ No ○ N/A

12. Currently on ARV

- | | | |
|--|---|---|
| | Y | N |
| | ○ | ○ |

13. PMTCT HIV Test - Current Visit

- a) Was an HIV test offered? ○ Yes ○ No
b) Was this test accepted? ○ Yes ○ No ○ N/A
c) What was the HIV test result? ○ Positive ○ Negative ○ N/A



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14. Obstetric Information

0 1 2 3 4 5 6 7 8 9

a) Gravida 0 1 2 3 4 5 6 7 8 9

b) No. of Children Alive 0 1 2 3 4 5 6 7 8 9

c) Still Births 0 1 2 3 4 5 6 7 8 9

d) Abortions 0 1 2 3 4 5 6 7 8 9

e) No. of Children dead before 1st birthday 0 1 2 3 4 5 6 7 8 9

f) No. of children dead between 1st and 5th birthday 0 1 2 3 4 5 6 7 8 9

g) Parity 0 1 2 3 4 5 6 7 8 9

15. Lab Results

 D D M M Y Y

Collected / /

Tested / /

	+	-
HIV	<input type="radio"/>	<input type="radio"/>
RPR	<input type="radio"/>	<input type="radio"/>
TPHA	<input type="radio"/>	<input type="radio"/>