# TABLE 12: STOP

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| **CONCEPT ID** | **VARIABLE NAME****(in output database)** | **DESCRIPTION/****LABEL** **(as seen by the user)** | **TYPE/****LENGTH** | **DATA RANGE** | **FORMAT/****CODE****(as seen by the user and in the database)** | **REQUIRED DATA** | **SINGLE/****MULT****ENTRY** | **CONSTRAINTS** |
|  | NACPNO | NACP-No | Char 20 |  |  | YES | text | Table : patient\_identifierColumn : identifierIdentifier type = 3 which is NACP |
|  | DATE | Date | Date 10  |  | dd/mm/yyyy | YES | date | Only on database level. Table : encounter, Column: encounter\_datetimeAnd form\_id = 12 (Stop Form) |
| 161133 | STOP\_DATE | Date patient stopped participation  | Date 10  |  | dd/mm/yyyy | YES | Date |  |
| 161165 | STOPPEDDB: STOP\_REASON | Reason participation of patient was stopped | Char 20 | See Format/Code | Died Withdrew consentTransferred Lost to follow-upHIV seronegative child >18  months (HIV seronegative >18 months)UnknownFalse positive patient <18 months (Concept\_ID 161903) | YES | SINGLE | Reason participation of patient was stopped: change answer choice ‘HIV seronegative >18 months’ |
| 161142 | TRANSFER\_WHERE | If transferred, indicate where | Char 100 |  |  | YES | text | If STOPPED=TRANSFERRED |
| 161143 | DEATH\_DATE | Date of death | Date 10  | dd/mm/yyyy |  | YES | date | If STOPPED=DIED |
| 161149 | DEATH\_CAUSE | Primary cause of death: ICD10 Code | Char 5 |  |   | YES | text | If STOPPED=DIED |
| Parent concept161154 | DEATH\_SOURCE | Source of information about death | Char 25  | See Format/Code | Verbal autopsyMedical recordsRelativeHealth Care Worker | YES | SINGLE | If STOPPED=DIEDSource of information about death: Add answer choice ‘Health Care Worker’ |
| Parent Concept161158 | DEATH\_PLACE | Place of death | Char 10 | See Format/Code | HospitalHome | YES | SINGLE | If STOPPED=DIED |
| 161161 | PER\_COMP | Name of person filling out the form | Char 30 |  |  | YES | SINGLE |  |