

Adjudication
Report #
95000 - 99900Subject ID:
Centre # Community # Household # Member #Subject Initials
F M LBaseline ID:
Centre # Community/ Household # Subject ID #

DEATH DETAILS:

1. Reported Date of Death:
year month day OR ☐ Unk

2. Reported Cause of Death: _____

ADJUDICATION DECISION:

Adjudicator: [_____]
User First and Last NameAdjudication Start Date:
year month day HH MM SS1. Diagnosis was (Check **ALL** that apply):

- ☐ Medical record derived
☐ Verbal autopsy derived
☐ Other, *specify*: _____

2. Final Date of Death:
year month day ☐ Unknown

(Important: Please enter the final event date based on your review of source documentation.)

3. Indicate Adjudication Decision below:

Immediate Cause of Death:

3ai. PURE Adjudication Category → [_____]
Search Lookup 13b1. PURE Code and Certainty → [____ . ____]
(certainty where applicable) Search Lookup 23ci. ICD-10 Code → [____]
Search ICD-10 Lookup

Intermediate Cause of Death:

3aii. PURE Adjudication Category → [_____]
Search Lookup 13bii. PURE Code and Certainty → [____ . ____]
(certainty where applicable) Search Lookup 23cii. ICD-10 Code → [____]
Search ICD-10 Lookup

Underlying Cause of Death:

3aiii. PURE Adjudication Category → [_____]
Search Lookup 1

3bii. PURE Code and Certainty → [_ _ . _ _]
(certainty where applicable) Search Lookup 2

3ciii. ICD-10 Code → [_ _ _]
Search ICD-10 Lookup

4. Contributing Factors: _____

5. Additional comments: _____

ROME E-Signature _____