

# AEFI Core Variables (Revised Dec 2015)

	Suggested Heading	Description of the Basic core variable
Identity	Date AEFI report first received at National level	Date when information of the AEFI case first reached the National level
	Country where the AEFI occurred	Name of the country where the adverse event occurred
	<i>Location (address)</i>	Geographic location of the case (address)
	Unique identification of the report	Unique ID number used for communicating the details of the case
Case	<i>Patient identifier</i>	Name of the patient or initials as decided by the country
	<i>Date of birth (or)</i>	Date patient was born
	Age at time of onset (or)	Age at time of onset
	Age Group at onset	Age Group (<1 year, 1-5years, >5 years)
	Sex	Male or Female
	<i>Medical history</i>	Free text information (e.g. allergies, concomitant medication, etc.)
Vaccine	<i>Primary suspect vaccine name</i>	Vaccine suspected to have caused the AEFI
	Other vaccines given just prior to AEFI	Other vaccines given prior to the AEFI
	<i>Vaccine batch/lot number</i>	Batch/lot number of all vaccines mentioned above
	<i>Vaccine dose number for the vaccinee</i>	Dose number for this particular vaccinee
	<i>Diluent batch/lot number</i>	Batch/lot number of the diluent (if applicable)
Event	<i>Date and Time of vaccination</i>	Date and time the vaccine was administered
	<i>Date and Time of AEFI onset</i>	Date and time of the AEFI onset
	<i>Adverse event</i>	Case diagnosis + Signs & Symptoms
	<i>Outcome of AEFI</i>	Outcome of the reaction(s): Recovering/resolving; Recovered/resolved; Recovered/resolved with sequelae; Not recovered/not resolved; Fatal; Unknown
	<i>Serious case</i>	If the case is serious and resulted in death, threatened the patient's life, caused persistent or significant disability, hospitalization, congenital anomaly or any other medically relevant event that may jeopardize the patient or may require intervention to prevent one of the outcomes mentioned here
Reporter	Name of initial reporter of AEFI case	Name of the reporter of the AEFI case
	Institution/Location	Place (address) of the reporter (including the name of the country)
	Position/Department	Reporter's designation & section of work
	E-mail address	Reporter's e-mail address
	Telephone	Reporter's phone number
	Date of report	Date when the report was compiled by the reporter
Other	Comments (if any)	Additional details about the case in free text (including documents/ attachments)

**IMPORTANT:** Critical variables in italics