Appendix

Assessment of Adverse Drug Reaction Reporting among Healthcare Professionals in Uganda					
Investigator:	District:				
doses normally used by patients.					
HEALTH FACILI	TY CHARACTERISTICS				
1. Type of health facility (Tick one only)	ype of health facility (Tick one only) 2. Level of health facility (Tick one only)				
[1] Public	[1] National Referral [5] Health Centre III				
[2] Private Not-for-Profit	[2] Regional Referral [6] Health Centre II				
[3] Private <u>For-Profit</u>	[3] District Hospital [7] Private Hospital				
	[4] Health Centre IV [8] Other				
SOCIO-DEMOGRAPHIC CHAR	ACTERISTICS OF PARTICIPANT				
3. Gender 4. How old are you (in complete years)?					
[1] Male					
[2] Female	District: It is any response to a drug which is harmful and unintended, and which occurs at HEALTH FACILITY CHARACTERISTICS 2. Level of health facility (Tick one only) [1] National Referral [5] Health Centre III [2] Regional Referral [6] Health Centre III [3] District Hospital [7] Private Hospital [4] Health Centre IV [8] Other				
PROFESSIONAL CHARA	CTERISTICS OF PARTICIPANT				
5. In which sector(s) do you practice? (Tick all that	you practice? (Tick all that 6. In which department are you? (Tick one only)				
apply)	[1] Medicine				
[1] Public health facility	[2] Surgery				
[2] Private Not-for-Profit health facility	[3] Paediatrics				
[3] Private For-Profit health facility	[4] Obstetrics & Gynaecology				
	[5] Dentistry				
	[6] Pharmacy				
	[7] Other (Specify)				
7. What is the approximate number of patients you see per day?	facility? Months (If less than 1 year)				
9. What is your highest academic qualification? (Tick one only)					
[1] Certificate	Months (If less than 1 year)				
[2] Diploma	Completed Years				
[3] First Degree					
[4] Masters Degree					
[5] PhD					
11. Do you teach medical students?					
[1] Yes [2] No (If no, go to 13)					

13. Are you actively involved in medical research?	14. Professional Cadre (Tick one only)					
[1] Yes [2] No	[1] Doctor (go to 15)					
	[2] Pharmacist (go to 22)					
	[3] Nurse (go to 19)					
	[4] Clinical officer (go to 23)					
	[5] Pharmacy Technician (go to 22)					
	[6] Other (Specify)					
15. Position/Level of Doctor (Tick one only)	16. For how long have you been prescribing?					
[1] Senior Consultant	Months (If less than 1 year) Completed Years					
[2] Consultant						
[3] Medical Officer Special Grade						
[4] Medical Officer						
[5] Senior House Officer						
[6] Intern Doctor						
[7] Other (specify)						
17. What is the approximate number of prescriptions you write per day?						
	[1] Yes [2] No (Skip to 23)					
19. Which of the following cadre category describes your qualification? (<i>Tick one only</i>)	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients'					
	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your					
your qualification? (Tick one only)	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you					
your qualification? (Tick one only) [1] Enrolled Midwife	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your					
your qualification? (Tick one only) [1] Enrolled Midwife [2] Enrolled Nurse	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility?					
your qualification? (Tick one only) [1] Enrolled Midwife [2] Enrolled Nurse [3] Enrolled Mental Health Nurse	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility?					
your qualification? (<i>Tick one only</i>) [1] Enrolled Midwife [2] Enrolled Nurse [3] Enrolled Mental Health Nurse [4] Enrolled Comprehensive Nurse	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility?					
your qualification? (Tick one only) [1] Enrolled Midwife [2] Enrolled Nurse [3] Enrolled Mental Health Nurse [4] Enrolled Comprehensive Nurse [5] Registered Midwife	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility?					
your qualification? (Tick one only) [1] Enrolled Midwife [2] Enrolled Nurse [3] Enrolled Mental Health Nurse [4] Enrolled Comprehensive Nurse [5] Registered Midwife [6] Registered Nurse [7] Registered Nurse/Midwife [8] Registered Mental Health Nurse	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility?					
your qualification? (Tick one only) [1] Enrolled Midwife [2] Enrolled Nurse [3] Enrolled Mental Health Nurse [4] Enrolled Comprehensive Nurse [5] Registered Midwife [6] Registered Nurse [7] Registered Nurse/Midwife [8] Registered Mental Health Nurse [9] Registered Comprehensive Nurse	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility?					
your qualification? (Tick one only) [1] Enrolled Midwife [2] Enrolled Nurse [3] Enrolled Mental Health Nurse [4] Enrolled Comprehensive Nurse [5] Registered Midwife [6] Registered Nurse [7] Registered Nurse/Midwife [8] Registered Mental Health Nurse [9] Registered Comprehensive Nurse [10] Other (specify)	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility? [1] Yes [2] No					
your qualification? (Tick one only) [1] Enrolled Midwife [2] Enrolled Nurse [3] Enrolled Mental Health Nurse [4] Enrolled Comprehensive Nurse [5] Registered Midwife [6] Registered Nurse [7] Registered Nurse/Midwife [8] Registered Mental Health Nurse [9] Registered Comprehensive Nurse	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility?					
your qualification? (Tick one only) [1] Enrolled Midwife [2] Enrolled Nurse [3] Enrolled Mental Health Nurse [4] Enrolled Comprehensive Nurse [5] Registered Midwife [6] Registered Nurse [7] Registered Nurse/Midwife [8] Registered Mental Health Nurse [9] Registered Comprehensive Nurse [10] Other (specify)	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility? [1] Yes [2] No					
your qualification? (Tick one only) [1] Enrolled Midwife [2] Enrolled Nurse [3] Enrolled Mental Health Nurse [4] Enrolled Comprehensive Nurse [5] Registered Midwife [6] Registered Nurse [7] Registered Nurse/Midwife [8] Registered Mental Health Nurse [9] Registered Comprehensive Nurse [10] Other (specify)	(Skip to 23) 20. In some health facilities, nurses usually write out (transcribe) drug prescriptions from patients' medical records to medication charts. Are you required to transcribe prescriptions in your health facility? [1] Yes [2] No 22. If pharmacist or pharmacy technician, area of practice (Tick all that apply)					

23.	Have you received any complaint of adverse drug reactions (ADRs) from patients in the last 4 weeks?	24. If yes, how many complaints of ADRs have you received in the last 4 weeks?				
	[1] Yes [2] No (If no, go to 25)					
25.	Have you suspected an ADR in the last 4 weeks?	26. If yes, how many ADRs have you suspected in the last 4 weeks?				
	[1] Yes [2] No (If no, go to 28)	the last 4 weeks.				
27.		ou encountered providing information on patient age, of ADR & its severity (mild, moderate, severe); e.t.c.				
28.	Have you ever encountered a fatal ADR that might have led to a patient's death?	29. Have you reported any suspected ADR in the last 12 months?				
	[1] Yes [2] No	[1] Yes [2] No (If No, go to 35)				
30.	If yes, please indicate the period within which you reported the most recent suspected ADR	31. To which authorities did you report the most recent of these ADRs? (Tick all that apply)				
[1] [2] [3] [4] [5]	[1] National Drug Authority (NDA)				
4 v	veeks 5-8 weeks 9-12 weeks 4-6 mo 7-12 mo	[2] AIDS Treatment Information Centre (ATIC)				
		[1] National Drug Authority (NDA)				
		[4] Medical Superintendent				
		[5] District Director of Health Services (DDHS)				
		[6] Institutional Review Board (IRB)				
		[7] Other (specify)				
32.	What motivated you to report the suspected ADR?	33. Did you get any feedback about the ADR report(s) you submitted?				
		[1] Yes [2] No				
34.	Have you reported an ADR to the National Drug Authority in the past 12 months?	35. Have you wanted to report an ADR in the past 12 months but did not have the ADR report form?				
	[1] Yes [2] No	[1] Yes [2] No				
36.	Have you had an ADR suspicion in the past 12	37. Did you ever fill the ADR report form but failed				
	months but did not fill the ADR report form even when you had it?	to send it for any reason? [1] Yes [2] No (If no, go to 39)				
	[1] Yes [2] No	, , ,				

38.	If yes, what was the reason(s) that you did not	39. Which of the following health workers are			
	send the form on the most recent occasion?	qualified to report adverse drug reactions?			
		(Tick all that apply)			
		[1] Medical doctors [4] Pharmacists [2] Dentists [5] Clinical Officers [3] Nurses			
40.	Pharmacovigilance relates to a reporting system for adverse effects of medicines. Have you ever heard about Pharmacovigilance? [1] Yes [2] No (If no, go to 42)	41. If yes, please state the source(s) of your information (Tick all that apply) [1] Books/Journals [2] Internet/e-communication [3] Trainings/Seminars/courses attended			
		[4] Television			
		[5] Outdoor adverts			
		[6] Professional colleague			
		[7] Others (Specify)			
42.	Are you aware of the existence of a National	43. If yes, do you know where the NPC office is			
	Pharmacovigilance Centre (NPC) in Uganda?	located?			
	[1] Yes [2] No (If no, go to 44)	[1] Yes [2] No			
44.	Have you ever seen the ADR form used for reporting ADRs to the NPC?	45. If yes, have you ever filled out the NPC ADR form?			
	[1] Yes [2] No (If no, go to 48)	[1] Yes [2] No (If no, go to 47)			
46.	Was the information on the NPC ADR form clear to you about what to report?	47. Have you ever filled out any ADR form different from that of the NPC? [1] Yes [2] No			
	[1] Yes [2] No				
48.	Have you ever submitted an ADR report to the NPC?	49. Do you know where to obtain the NPC ADR forms in this health facility?			
	[1] Yes [2] No	[1] Yes [2] No			
50.	Do you know to whom to report ADRs in your health facility?	51. If yes, please specify in your health facility to whom you would report an ADR if you had to?			
	[1] Yes [2] No (If no, go to 52)				
52.	An ADR reporting system should; (Tick all that apply)	53. Have you ever been trained on how to report ADRs with the ADR form?			
[1]	be compulsory	[1] Yes [2] No			
[2]	be voluntary				
[3]	provide financial incentives to the reporter				
[4]	hide the identity of the prescriber				
[5]	hide the identity of the reporter				

[6] hide the identity of the patient	
54. Please suggest possible ways of improving ADR rep	orting

Instructions

In the left column are questions that will be the subject of your evaluation and in the right column is a gradual scale where you should mark with **X** the place along the scale where, according to your opinion, represents your degree of agreement with the text comment. The **extreme left** side indicates **total disagreement** while the **extreme right** indicates **total agreement**. Agreement increases as you move across from left to right Please indicate whether you agree or disagree with the following statements

(1 = Strongly disagree; 2 = Slightly disagree; 3 = Neutral; 4 = Slightly agree; 5 = Strongly agree)



	Statement	1	2	3	4	5
55	Serious ADRs are well documented by the time a drug is marketed					
56	It is nearly impossible to determine whether a drug is responsible for a particular adverse reaction					
57	I would only report an ADR if I was sure that it was related to the use of a particular drug					
58	The one case of an ADR that an individual health worker might see makes no significant contribution to medical knowledge					
59	I read articles about adverse drug reactions with interest					
60	I have a professional obligation to report ADRs					
61	Reporting ADRs puts my career at risk					
62	It is only necessary to report serious or unexpected ADRs					
63	I do not have time to complete an ADR report form					
64	I do not have the time to actively look for ADRs while at work					
65	I do not know how information reported in ADR form is used					
66	I talk with pharmaceutical companies about possible ADRs with their drugs					
67	I think that the best way to report ADRs is by publishing in medical literature					
68	I should be financially reimbursed for providing the ADR service					
69	I would be more likely to report ADRs if there were an easier method					