Epidemiology and Molecular Characterization of some Viruses Implicated in Maternal and Infant Morbidity in Nigeria

RESEARCH QUESTIONNAIRE

Dear Sir/Madam,

This study seeks to provide prompt diagnosis of rubella virus infection and survey cases of congenital rubella syndromes (CRS) among pregnant women and infants to facilitate intervention. Thus, we implore you to examine each of your patients for the following clinical features and document accordingly:

1. Clinical Review:

1. Observable rubella-like rash (Yes/No)

2. Fever (Yes/No)

3. Lymphadenopathy (Yes/No)

N.B: If a patient has clinical features 1 and 2 + 3, then proceed to section B for enrolment and collection of relevant information:

B. Demographic Information:

Name:.....................................................................................Age: ....... Gender:.............

Serial Number:.............. Hospital Number:..................... Ante-natal Number:..................... Telephone Number:......................................... Consultant:...............................................

LMP:........................ Parity:........................

C. Risk Assessment:

1. Age of patient at first marriage ....................................
2. Occupation of her partner ....................................
3. What is the highest level of education completed? Primary Secondary Tertiary
4. Is there record of skin rash in the last two week? Yes No
5. If yes, specify date
6. Any record of recent infection with malaria? Yes No
7. If yes, specify date
8. Is there any record of jaundice in the last one year? Yes No
9. Is there history of blood transfusion? Yes No
10. Specify her most recent PCV (%) result.………..
11. What is her HBV status? Positive Negative Not Done
12. What is her HIV status? Positive Negative Not Done
13. Is there any record of vaccination? Yes No
14. If yes, specify

N.B: At the completion of section C, the patient should be directed to the designated laboratory for appropriate sample collection for laboratory confirmation.

D. Laboratory Confirmation:

Specimens required:

1. Five (5) millilitres of blood
2. Oral swab
3. Urine

Thank you very much for your cooperation.