**Questionnaire for other patients who were receiving dialysis at the same time of the event**

Patient chair #:\_\_\_\_ Shift:\_\_\_\_ on regular dialysis schedule

Patient chair #:\_\_\_\_ Shift:\_\_\_\_ on the event date (if different)

What do you remember occurred during the event?

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Did you notice anything unusual about patient X during several days before the event?

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Did you notice anything unusual about patient X on that day before the event?

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Did you notice any recent changes at the facility?

Ask the following:

-New medications?

-New equipment?

-New ways of doing things before or during dialysis?

-New staff (any staff, including service and house keeping)

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What did they do when the event happened?

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Did you have any symptoms on that day during dialysis, such as shortness of breath, faint, anxious, itching, rash…)? Yes/No

If Yes, what were they and when did they occur?

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