Attachment 4. Follow-up questionnaire for individuals calling poison control centers (PCCs) regarding exposures to harmful algal blooms (HABs) – parent about child

GenIC Name: Identifying Sources of and Risk Factors for Harmful Algal Bloom Exposures through Poison Control Center Follow-up Questionnaires – United States, 2019

PARENT QUESTIONNAIRE ABOUT CHILD

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Date of the interview: ____/___/____

Name of interviewer: ______ Poison control center: ______ State call originated from: ______ Title of the investigation: ______ NPDS Case ID No. ______

I. Exposure and Health Effects Information

I am going to ask you a few questions about your child's exposure and the circumstances surrounding his or her exposure.

1. What was your	2. Location-	3. Appearance-	4. Symptom-	5. Symptom
child exposed to	related question	related question	related question	timing-related
that prompted the				question
call to the poison				
control center?				
(Choose all that				
apply; ask follow up				
questions along the				
same row as				
reported exposure				

below)				
Shellfish contaminated with toxins	Where was your child when your child was exposed? Home Restaurant Other (describe) Don't know Refused	Did the shellfish look normal? Yes No (describe) Don't know Refused	What symptoms did your child experience as a result of eating contaminated shellfish? (choose all that apply) Nausea Vomiting Nausea 	How long was it between exposure to shellfish and onset of symptoms? Immediately to less than 6 hours 6 to 24 hours More than 24 hours
Bathing or swimming in waters contaminated with toxins	Where was your child when your child was exposed? Ocean Fresh water body Other (describe)	Did the water look unusually colored? Yes (describe) No Don't know Refused	What symptoms did your child experience as a result of exposure to the contaminated water? (choose all that apply) Nausea Vomiting Diarrhea Rash Itchiness Burning sensation on the skin Blisters on skin Watery eyes	How long was it between exposure to contaminated water and onset of symptoms? Immediately to less than 6 hours 6 to 24 hours More than 24 hours

			Burning	
			sensation in eyes	
			Trouble	
			breathing	
			U U	
			Asthma attack	
			Respiratory	
			irritation	
			Other	
			(describe)	
Being near waters	Where was your	Did the water look	What symptoms	How long was it
contaminated with	child when your	unusually colored?	did your child	between
toxins	child was exposed?	Yes	experience as a	exposure to
	Ocean	(describe)	result of exposure	contaminated
	Fresh water	No	to the	water and onset
	body	Don't know	contaminated	of symptoms?
	Other (describe)	Refused	water? (choose all	Immediately
			that apply)	to less than 6
			Nausea	hours
			Vomiting	6 to 24 hours
			Diarrhea	More than
			Rash	24 hours
			Itchiness	
			Burning	
			sensation on the	
			skin	
			Blisters on skin	
			Watery eyes	
			Burning	
			sensation in eyes	
			Trouble	
			breathing	
			Asthma attack	
			Respiratory irritation	
			Other	
Drinking - rater	What was the	Did the system leal-	(describe)	Howlong
Drinking water	source of the	Did the water look	What symptoms	How long was it
contaminated with		unusually colored?	did your child	between
toxins	drinking water?	_Yes	experience as a	exposure to
	Outside body of	(describe)	result of exposure	contaminated
	water (i.e., ocean,		to the	drinking water
	lake)	Don't know	contaminated	and onset of
	Water from an	Refused	drinking water?	symptoms?
	indoor or outdoor		(choose all that	Immediately
	faucet		apply)	to less than 6
	Other (describe)		Nausea	hours

		Vomiting	6 to 24 hours
		Diarrhea	More than
		Rash	24 hours
		Itchiness	
		Burning	
		sensation on the	
		skin	
		Other	
		(describe)	
Other (describe)			
Do not know			

II. Medical Treatment

Now I am going to ask you a few questions about the medical treatment received.

- 6. What was the reason for the call to the poison control center during or immediately after the exposure? (*check all that apply*)
 - Wanted information about the exposure
 - Worried about being exposed/Worried about child being exposed
 - Was feeling ill/Child was feeling ill

Smelled something

- Other (*describe*):
- Refuse to answer
- 7. What action did the poison control center recommend? (please describe in detail)

Refuse to answer

- 8. Did your child go to any kind of healthcare facility such as a doctor's office, emergency room or urgent care center after your child's exposure? *(choose one)*
 - Yes Go to part b
 - No **Go to next section (Health Messaging)**
 - Do not know
 - Refuse to answer
 - b. What type of healthcare facility did your child go to? (choose the initial facility visited)
 - ____ Hospital emergency room
 - Doctor's office
 - Urgent care center
 - Other (*describe*)
 - Do not know

DATE

Refuse to answer

- 9. What kind of treatment did your child receive while in the healthcare facility? (choose one)
 - Describe
 - Do not know

None

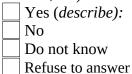
- Refuse to answer
- 10. Did a doctor place you/your child on any medications as a result of this incident? (choose one)
 - Yes Go to part b No
 - ___ Do not know
 - ____ Refuse to answer
 - b. If yes, which medications? (choose one)
 - DescribeDo not knowRefuse to answer
- 11. What happened after the visit at the health care facility was completed?
 - Discharged
 Admitted
 Transferred/transported to other healthcare facility (*specify*)
 Other (*describe*)
 Do not know
 Refuse to answer

III. Health Messaging

We are almost finished. The last few questions are about what you have heard regarding the exposure.

- 12. Just before or during the exposure, did you hear or read warnings about the danger of harmful algal blooms?
 - Yes **Go to part b**No
 Do not know
 Refuse to answer
 - b. If so, where did you hear or read these warnings? (read all choices and check all that apply)
 - Newspapers/magazines
 Pamphlet/fact sheet
 Fire Department
 Radio

- Television
 Friends or family
 Salesman or store employee
 Law enforcement
 Utility workers
 Signs posted near waterbodies
 Information on recreational water or utility website
 Other
 Do not know
 Refuse to answer
- 13. Did you hear any communication messages prior to exposure? (Health alerts, evacuation orders, radio alerts, etc)



Go to part b

b. Did you act upon those communication messages?

you	i uci upon mose c
	Yes
	No
	Do not know
	Refuse to answer

14. What exposure prevention methods were in place prior to the exposure? (e.g., warning signs posted near water bodies)

Signs posted near waterbodies

Information on recreational water or utility website

Other (describe):

Do not know

Refuse to answer