
MRC/UVRI ROUND 9 MEDICAL SURVEY QUESTIONNAIRE

VNO HNO STM

NAMES:

 IDNOSEX: DOB: -->

1=m/2=f

dd

mm

yy

If Year of Birth unknown:

Ask or Estimate AGE (yrs)

 AGE**EDUCATION: 1. Wayigirizibwako musomero?** Ever attended school? (1=Yes/ 2=No) SCH**2. Okyayiga musomero?** Currently schooling? (1=Yes/ 2=No) PSCH**3. Obuyigirizebwo bwakomawa?** The highest level of schooling? LEV

1-7 = P1 - P7; 8-10= J1 - J3; 11-16 = SENIOR 1-6; 17= COLLEGE/UNIVERSITY

MARITAL STATUS:**4. Wali owasizaako/ofumbiddwako k'obe nga wamalanaye ebbanga ttono?** EVMHave you ever been married or lived with a wo/man? (1=Yes, 2=No) *If No GO TO MEDICAL HISTORY.***5. Walina emyaka emeka lwe wasookera ddala okuwasa/okufumbirwa?** AGEMGHow old were you when you first got married or lived with wo/man? **Not sure=88****6. Kati okyali mufumbo oba olin omukazi/musajja gwo beera naye?** MNAre you currently married or living with a wo/man? (1=Yes, 2=No) *If No ---> Qu.9***7. Oba Yee, mukyala/mwami wo yani?** If Yes, to whom are you currently married?

Names and IDNO:

 IDN1**8. Olinayo abakyala/baami ababeera mu maka gano oba amalala?** WHS

Do you have any other wives/husbands living in the same/another house? (1=Yes, 2=No)

If yes, names: i)

 IDN2

VHNO if in study area:

 VNO2 HNO2

ii)

 IDN3

VHNO if in study area:

 VNO3 HNO3

iii)

 IDN4

VHNO if in study area:

 VNO4 HNO4

9. Lwaki kati toli mufumbo? Why are you not currently married?
[3=Widower/Widow 4=Separated/divorced]

☐ MST

INFORMATION FOR CENSUS CLERK and STATISTICIAN

a. If person listed on Census List: indicate differences in **Age** (more than +/- 5 years), **Names**, any other:

b. If not listed, explore:

- When did s/he join HH? DATE: .../.../19... Where did s/he come from?
- Censused previously/ in other HH/ other Study Village?

REMARKS:

MEDICAL HISTORY

CODES: 1= YES 2= NO 9= NO INFORMATION/REFUSAL

1. **Wewulira otya kakati? Waliwo obulwadde bwonna obukuluma kakati?** ☐ ILL

How do you feel today? Do you have any complaints about your health? (1=ill 2=Not ill)

If ill:

.....
.....

Kati emyaka jiwelako ng'ekitongole kitandise mu Ggombolola muno office z'abalungamya, ebibuuzo bino ebiddirila bigenda kuyamba ekitongole okumanya engeri abantu jebeyambisamu office zinno n'emirimu gyabwe. It is now several years since the Programme established Counselling offices in this subcounty. The following questions are to help the Programme know how often people use these offices and their services.

2. **Wali okyalidde ko ku ofisi yonna eya balungamya mu gombolola eno oba awantu awalala wonna?** ☐ COUN

Have you ever visited any of the Counselling offices either in this subcounty or elsewhere? (1=Yes, 2=No)

3. **Wali ofunyeko kubyava mu musayi gwo? Have you ever had blood test results given to you?** ☐ TEST
We do not want you to tell us what the results were.

4. **Oba Yee, ebyava mumusayi wabifunira wa? If Yes, from where was this obtained? 1=Yes, 2=No** ☐ SITE

1=MRC OFFICES 2= KITOVU HOSPITAL 3= TASO MASAKA 4= OTHER (specify

Now I will ask a few questions about your health during the last 12 months.

NOTE: Questions 5 to 7 refer to the last 12 months

5. **Wali ofunye ku mabwa oba amayute mu bitundu byo eby'ekyama?** ☐ GU

Have you had any Ulcers or Sores on your private parts? (1=Yes, 2=No)

If YES:

a. **Amabwa gano ogalina kati? Do you have the ulcers presently? 1=Yes, 2=NO** ☐ GNOW

b. **Amabwa oba amayute ogafunye emirundi emeka mu bbanga eryl'emezi ekkumi n'ebiri egiyise?** |__|__| GUEP
How many separate episodes in last 12 months? Not Sure=88

c. **Obulwadde buno bwakumalako/bukumazeeko wiiki mmeka??** |__|__| GUD
How many wks did the last episode last?
Indicate number of weeks or use: 01= 1wk or less Not Sure=88

d. **Wakolawo ki ku bulwadde obwo?** What did you do to deal with this illness?
Probe for treatment actions until no further reponse.
Specify + code actions in the order of occurrence

1=No action	5=Injectionist	1.	__ ACTU1
2=Herbs self-administered	6=Gov't/Mission clinic	2.	__ ACTU2
3=Drugs self-administered	7=Private clinic	3.	__ ACTU3
4=Omusawo muganda	8=MRC		

Ask MEN only

6. **Wafunako okuvamu amasira mu kaseke?** Discharge from Urethra? |__| UDIS
If YES:

a. **Buno bulwadde obulina kati?** Do you have the discharge presently? 1=Yes, 2=N0 |__| DNOW

b. **Obulwadde buno bwakumalako/bukumazeeko wiiki mmeka?** How many weeks did it last? |__|__| UDD
Indicate number of weeks or use: 01= 1wk or less Not Sure=88

c. **Wakolawo ki ku bulwadde obwo?** What did you do to deal with this illness?
Probe for treatment actions until no further reponse.
Specify + code actions in the order of occurrence

1=No action	5=Injectionist	1.	__ ACTD1
2=Herbs self-administered	6=Gov't/Mission clinic	2.	__ ACTD2
3=Drugs self-administered	7=Private clinic	3.	__ ACTD3
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Ask Women only

7. **Wafunako okubundula amazzi?** Have you had discharge from vagina? |__| VAGD
Probe: unusually large amount, or yellow or white discharge from Vagina

a. **Buno bulwadde obulina kati?** Do you have the discharge presently? 1=Yes, 2=N0 |__| VNOW

b. **Obulwadde buno bwakumalako/bukumazeeko wiiki mmeka?** How many weeks did it last? |__|__| VDD
Indicate number of weeks or use: 01= 1wk or less Not Sure=88

c. **Wakolawo ki ku bulwadde obwo?** What did you do to deal with this illness?
Probe for treatment actions until no further reponse.
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Ask women 13 - 49 years:

8. Wali ofunyeko olubuto mubulamu bwo?

(kalubenga lwavamu oba wazaala omwana ng'afudde)

|__| PREGN

Have you ever been pregnant? (even if it resulted in miscarriages or still birth? (1=Yes, 2=No)

If No ---> Qu. 10

9. Wafunako olubuto mumyaka essatu egyiyise?

|__| PREYR

Have you got pregnant in the last 3 years? (1=Yes, 2=No)

If Yes ---> Qu. 13

10. Obadde ogezako okufuna olubuto mubbanga lino ely'emyaka esatu?

|__| TRYP

Have you been trying to get pregnant in the last 3 years? (1=Yes, 2=No)

If Yes----> Go to Q.13

11. Obadde okozesa engeri yonna oyokuziyiza okufuna olubuto?

|__| FPLAN

Have you been using any form of family planning during this period? (1=Yes, 2=No)

If Yes----> Go to Q.13

12. Wagezako okwebuza ku muntu yenna kunsonga eyo butafuna lubuto?

|__| CONS

If you have been trying to get pregnant in the last 3 years but failed have you ever consulted anyone about this problem? (1=Yes, 2=No)

Kakati njagala okukubuuza obubuuza obukwata kubulamu bwo obw'ekyama. Nkukakasa nti byonna bye tukungaanya mu kunoonyereza kuno bikumibwa nga bya kyama.

I will now ask you a few personal questions. Please be assured that all information collected in this study is treated confidentially.

13. Walina emyaka emeka lwe wasokera ddala okutabagana n'omuntu mu bikolwa eby'ekyama?

How old were you when you first played sex? *Can't remember=88*

|__|__| AGESX

If never had sex, record 99 ---> GO TO EYE EXAMINATION.

14. Wakatabagana n'abantu bameka muby'ekyama ngo twalidemu omwami/mukyala wo, muganzi wo nabo ab'ekiseera obuseera, okugeza nga kumbaga, nyimbe, disco oba ku kinyumu kyonna?

How many sexual partners (including spouses and casual partners) have you played sex with?

(casual partners are such persons you played sex with only once or twice for example at a party or disco or other social gathering?

(i) mu bbanga lya wiiki emu eyise?

in the last 1 week?

|__|__| SPWK

(ii) mu bbanga lya wiiki nnya eziyise?

in the last 4 weeks?

|__|__| SPMN

If ZERO ----> go to Q.16

15. Kwabo bo ngambye bewakatabagana nabo mu bikolwa eby'ekyama bameka ab'ekiseera obuseera?

How many of these sexual partners were casual?

(i) mu bbanga lya wiiki emu eyise?

in the last 1 week?

|__|__| CSYR

(ii) mu bbanga lya wiiki nnya eziyise?

in the last 4 weeks?

|__|__|

16. Nkusaba ombulire ensonga lwaki totabaganye n'omuntu yenna mubanga lya wiiki nya eziyise?

Could you please tell me the reasons why you have not had sex in the last 4 weeks?

1= Old Age	6= No Spouse/Partner	
2= Widowed	7= Spouse/Partner absent	__ RABS1
3= Divorced/Separated	8= Has STD/HIV infection	
4= Partner/Self sick	9= No reason/Other: Specify	__ RABS2
5= Fear of AIDS/STD		

 EYE EXAMINATION

I will now examine your eyes to find out whether your sight is normal. If it is not we shall arrange for you to have further examination, treatment and/or spectacles by a special trained health worker at your home in a few days time.

CODE: 1=YES/ 2=NO

A. VISION

i. Examined: (1= with glasses; 2= without glasses; 3= Not tested) |__| VSN

[R] [L]

ii. Able to see 6/18 |__| RNM |__| LNM

iii. Cannot be tested

Considered blind |__| RBL |__| LBL

Other reasons (specify) |__| ROT |__| LOT

.....

B. Other obvious eye problems

.....

C. Referred to Ophthalmic Assistant (1= YES/ 2= NO) |__| REFD

D. Field screen (Number out of 24 seen) |__|__| RFILD |__|__| LFILD

E. Clinic 1 = Low vision clinic |__|
CLIN
2 = Outreach clinic/Other

TREATMENT

1. Treatment given?

1= Yes/ 2= No

|__| RX

If YES: Specify main reason

|__| RXRS

.....
.....

Specify drugs given:

|__| DRG1

.....
.....

|__| DRG2

EXAMINER:..... |__|__|

|__|__|__|__|__|__|
dd mm yy

Fill in your

Date of Exam:

Code No.

LABORATORY

CODE: 1=Specimen obtained 7=Refused 9=Failed

BLOOD: (5 mL with vacutainer)

|__| VAC

LABNO

TECHNICIAN CODE: |__|__|