

Toxo One Health Benin Project: EPIDEMIOLOGICAL SURVEY QUESTIONNAIRE ON TOXOPLASMOSIS IN PREGNANT WOMEN

Survey n° :/ 1st letter last name–1st letter first name /EE Toxo One Health Benin

CPN file n° :

Date :/...../..... Contact or other person to contact

I- Socio-demographic data

1- Full name :

Age :years 3- gravidity index : 4- Gestational age in weeks of amenorrheaWA

5- Family status : single married divorce legal separation

6- Department of origin/ country.....

7- Department of residence :

8-Commune :

9-District :

10-City :

II- Socio-economic data

1- Education

High school or more secondary Primary Illiterate

2- Spouse's level of education

High school or more secondary Primary Illiterate

3- Professional situation

Executive> BAC office worker trader craftswoman housewife

4- Professional situation of the spouse

Executive > BAC office worker trader craftsman no profession

5- Life as a couple: Yes No

I- Awareness of toxoplasmosis

1- Ever heard of toxoplasmosis yes no

If yes :

Source of information: health personnel yes no literature yes no
press yes no other yes no

2- Mode of contamination yes no

If yes :

Contact with cat yes no food/ raw vegetables yes no

Contact with ground: yes no consumption of undercooked contaminated meat: yes no

3- Clinical signs in the fetus yes no

4- Complications of congenital toxoplasmosis

spontaneous abortion yes no severe neurological complications: yes no

ocular lesions : yes no

II- Eating behaviour

1- Eating habits

consumption of :

undercooked meat: yes no badly washed raw vegetables yes no

undercooked vegetables yes no no information :

2- Healthy living

Consumption of poorly treated water yes no

Hand washing before each meal yes no no information:

III- Contact with cat yes no

IV- HIV status

HIV serology : Negatif Positif Not done

V- Influence of IPT with Sulfadoxine-pyriméthamine (SP) on toxoplasmosis

1st dose : date/...../20....

2nd dose : date...../...../20...

3rd dose : date...../...../20...

No information

Other antimalarial drug used:.....date...../...../20...

Investigator/ Name..... Signature.....