



2017 SKIN ABSCESS OUTBREAK: QUESTIONNAIRE – CROSS-SECTIONAL STUDY

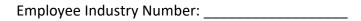
Instructions

- 1. Read the introduction and the informed consent form to the potential participant.
- 2. Obtain individual's signature if they agree to participate.
- 3. Hand an information sheet to participants to keep with them.
- 4. If the individual does not agree to participate, complete the refusal section.
- 5. If the individual agrees to participate, determine whether the individual meets the inclusion criteria: Any person aged 18 years or older, engaged in underground work and employed for at least one month (as of the date of interview) at the Gold Mine.
- 6. For all participants who do not have a skin lesion or bump anywhere on their body, sections A-F should be completed by the interviewer
- 7. For all participants who have a skin lesion or bump anywhere on their body, sections A-G should be completed by the interviewer and referred to a doctor or nurse to complete sections H-I. Obtain individual's signature if they agree to have a sample taken.
- 8. Read out all the possible options before selecting an appropriate option.





| Introduction | |
|--|---|
| Hello. My name is | |
| | |
| I work for the National Institute for Communi | cable Diseases (NICD). There have been |
| mine workers who have been affected with s | kin lesions at the gold mine. The NICD has |
| been requested by the management of the go | old mining company to assist with an |
| investigation. | |
| | |
| I would like to ask you some general question | is about your health and the work that you |
| do at the mine. We will record your answers | on a questionnaire. This interview will take |
| about 20 minutes. | |
| | |
| All employee information will be kept confide | ential and will only be used for the purposes |
| of this investigation. There should be no risk i | f you agree to take part in the investigation. |
| | |
| We hope that by collecting the information w | e will be able to prevent further cases at the |
| mine. | |
| Do you agree to be interviewed? | ☐ 1 Yes (obtain participant signature, continue with the interview) |
| | ☐ 2 No (complete the refusal section) |
| | |
| | |
| | D. 1. 24 F. 1. 2040 |
| Participant signature: | _ Date: 21 February 2018 |
| | |
| Reason for not agreeing to be interviewed | □ 1 Not interested□ 2 Too busy |
| | ☐ 3 Concerned about confidentiality of |
| | information provided |
| | 4 Other (specify): |





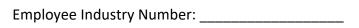
| SECT | SECTION A: INCLUSION CRITERIA | | | | |
|--|--|--------------------|----------------------------|---|--|
| Q1 | Q1.1 Are you aged 18 years o | r older? | ☐ 1 Yes ☐ 2 No | If Yes to all four questions (Q1.1 to Q1.4), skip to Q2 | |
| | Q1.2 Are you engaged in unde work? | erground | □ 1 Yes □ 2 No | If No, end questionnaire | |
| | Q1.3 Are you employed at the mine? | e gold | □ 1 Yes | | |
| | Q1.4 Have you been working gold mine for at least one mo | | □ 1 Yes □ 2 No | | |
| If the inclusion criteria are not Thank yo | | u for your time. \ | We will not include you in | | |
| met: | | _ | y. Goodbye. | · | |
| | | | | | |

| SECT | TION B: OUTCOME STATUS | | |
|------|---|----------------|--|
| Q2 | Q2.1 Do you at this moment have a skin lesion or bump anywhere on your body (head, neck, arms, or legs) | □ 1 Yes □ 2 No | If Yes, continue with Q2.2, complete sections A-G and refer to doctor or nurse to complete sections H-I If No, complete sections A-F only and end questionnaire |
| | Q2.2 Where do you think that you got these skin lesion(s) or bumps on your body from? | | |

QUESTIONNAIRE

| SECT | TION C: INTERVIEWER DETAILS | |
|------|--------------------------------------|---------------|
| Q3 | Name and surname / initials of | |
| | person completing the questionnaire: | |
| Q4 | Date of interview (DD/MM/YYYY): | 21/02/2018 |
| Q5 | Shift | ☐ 1 Morning |
| | | ☐ 2 Afternoon |
| | | ☐ 3 Evening |

Continue with SECTION D: EMPLOYEE DETAILS





| Q6 Sex (observation) | SECTI | ON D: EMPLOYEE DETAILS | |
|--|-------|------------------------------------|---------------------------|
| Q7 What is your date of birth (DD/MM/YYYY)? If the participant does not know his / her date of birth; ask how old he or she is (age in years). Q8 Where do you stay after work? | Q6 | Sex (observation) | □1 Male |
| CDD/MM/YYYY)? If the participant does not know his / her date of birth; ask how old he or she is (age in years). | | | ☐ 2 Female |
| If the participant does not know his / her date of birth; ask how old he or she is (age in years). | Q7 | What is your date of birth | □ 1 Known |
| her date of birth; ask how old he or she is (age in years). Mine hostel 2 Living out 3 Unknown 2 Living out 3 Unknown 2 Living out 3 Unknown 3 Unknown 3 Unknown 3 Unknown 3 Unknown 3 Unknown 4 More than 5 years 4 More than 5 years 5 Unknown 5 Unknown 5 Unknown 6 Unknown 6 Unknown 6 Unknown 7 Unknow | | (DD/MM/YYYY)? | ☐ 2 Unknown |
| She is (age in years). 1 | | | |
| Q8 Where do you stay after work? | | | years |
| Q9 When did you start working at gold mine (DD/MM/YYYY)? Q10 How long have you worked at gold mine? Q1 What is your occupation? Q1 What is your occupation? Q1 Development team member Q1 Development team member C1 Development team member C2 Dunknown C3 Stope team member C4 Development team member C5 Load operator C6 Loco operator C7 Engineering assistant C8 Other (specify) C9 Unknown Q1 What type of work are you involved in? Q1 Storing surface C3 Roving surface C3 Roving underground C4 Shaft and services C5 Stoping C6 Traming | | she is (age in years). | |
| Q9 When did you start working at gold mine (DD/MM/YYYY)? Q10 How long have you worked at gold mine? Q1 What is your occupation? Q1 What is your occupation? Q1 Development team member Q1 Development team member C1 Development team member C2 Dunknown C3 Stope team member C4 Development team member C5 Load operator C6 Loco operator C7 Engineering assistant C8 Other (specify) C9 Unknown Q1 What type of work are you involved in? Q1 Storing surface C3 Roving surface C3 Roving underground C4 Shaft and services C5 Stoping C6 Traming | | Miles and a second and a second as | |
| Q9 When did you start working at gold mine (DD/MM/YYYY)? Q10 How long have you worked at gold mine? 1 Less than 12 months 2 1 to 3 years 3 4 to 5 years 4 More than 5 years 5 Unknown Q11 What is your occupation? 1 Machine/rock drill operator 2 Scraper winch operator 3 Stope team member 4 Development team member 5 Load operator 6 Loco operator 7 Engineering assistant 8 Other (specify) 9 Unknown Q12 What type of work are you involved in? 1 Development 2 Roving surface 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming | Ų8 | where do you stay after work? | |
| Q9 When did you start working at gold mine (DD/MM/YYYY)? Q10 How long have you worked at gold mine? 1 Less than 12 months 2 1 to 3 years 3 4 to 5 years 4 More than 5 years 5 Unknown Q11 What is your occupation? 1 Machine/rock drill operator 2 Scraper winch operator 3 Stope team member 4 Development team member 5 Load operator 7 Engineering assistant 8 Other (specify) 9 Unknown Q12 What type of work are you involved in? 1 Development in Development 1 Development 2 Roving surface 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming | | | |
| mine (DD/MM/YYYY)? Q10 How long have you worked at gold mine? 1 Less than 12 months 2 1 to 3 years 3 4 to 5 years 4 More than 5 years 5 Unknown 2 Scraper winch operator 2 Scraper winch operator 3 Stope team member 4 Development team member 5 Load operator 6 Loco operator 7 Engineering assistant 8 Other (specify) 9 Unknown 9 Unknown 1 Development 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming 6 Traming 1 Tramin | | | ☐ 3 Unknown |
| mine? 2 1 to 3 years 3 4 to 5 years 4 More than 5 years 5 Unknown 5 Unknown 6 Unknown 7 | Q9 | | |
| 3 4 to 5 years 4 More than 5 years 5 Unknown 5 Unknown 1 Machine/rock drill operator 2 Scraper winch operator 3 Stope team member 4 Development team member 5 Load operator 6 Loco operator 7 Engineering assistant 8 Other (specify) 9 Unknown 9 Unknown 1 Development 1 Development 2 Roving surface 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming 6 Traming 1 Development 1 | Q10 | | ☐ 1 Less than 12 months |
| Q11 What is your occupation? A More than 5 years 5 Unknown 1 Machine/rock drill operator 2 Scraper winch operator 3 Stope team member 4 Development team member 5 Load operator 6 Loco operator 7 Engineering assistant 8 Other (specify) 9 Unknown Q12 What type of work are you involved in? 1 Development in? 1 Development 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming | | mine? | ☐ 2 1 to 3 years |
| Q11 What is your occupation? 1 Machine/rock drill operator 2 Scraper winch operator 3 Stope team member 4 Development team member 5 Load operator 6 Loco operator 7 Engineering assistant 8 Other (specify) 9 Unknown Q12 What type of work are you involved in? 2 Roving surface 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming | | | ☐ 3 4 to 5 years |
| Q11 What is your occupation? □ 1 Machine/rock drill operator □ 2 Scraper winch operator □ 3 Stope team member □ 4 Development team member □ 5 Load operator □ 5 Load operator □ 7 Engineering assistant □ 7 Engineering assistant □ 8 Other (specify) □ 9 Unknown □ 1 Development in? □ 2 Roving surface □ 3 Roving underground □ 4 Shaft and services □ 5 Stoping □ 6 Traming | | | ☐ 4 More than 5 years |
| operator 2 Scraper winch operator 3 Stope team member 4 Development team member 5 Load operator 6 Loco operator 7 Engineering assistant 8 Other (specify) 9 Unknown Q12 What type of work are you involved in? 1 Development in? 2 Roving surface 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming | | | ☐ 5 Unknown |
| □ 2 Scraper winch operator □ 3 Stope team member □ 4 Development team member □ 5 Load operator □ 6 Loco operator □ 7 Engineering assistant □ 8 Other (specify) □ 9 Unknown □ 9 Unknown □ 1 Development in? □ 2 Roving surface □ 3 Roving underground □ 4 Shaft and services □ 5 Stoping □ 6 Traming | Q11 | What is your occupation? | ☐ 1 Machine/rock drill |
| operator 3 Stope team member 4 Development team member 5 Load operator 6 Loco operator 7 Engineering assistant 8 Other (specify) 9 Unknown Q12 What type of work are you involved in? 1 Development 2 Roving surface 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming | | | operator |
| 3 Stope team member 4 Development team member 5 Load operator 6 Loco operator 7 Engineering assistant 8 Other (specify) 9 Unknown 9 Unknown 1 Development in? 2 Roving surface 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming 6 Traming | | | ☐ 2 Scraper winch |
| □ 4 Development team member □ 5 Load operator □ 6 Loco operator □ 7 Engineering assistant □ 8 Other (specify) □ 9 Unknown □ 1 Development in? □ 2 Roving surface □ 3 Roving underground □ 4 Shaft and services □ 5 Stoping □ 6 Traming | | | operator |
| member 5 Load operator 6 Loco operator 7 Engineering assistant 8 Other (specify) 9 Unknown 9 Unknown 1 Development in? 2 Roving surface 3 Roving underground 4 Shaft and services 5 Stoping 6 Traming | | | ☐ 3 Stope team member |
| □ 5 Load operator □ 6 Loco operator □ 7 Engineering assistant □ 8 Other (specify) □ 9 Unknown Q12 What type of work are you involved in? □ 1 Development □ 2 Roving surface □ 3 Roving underground □ 4 Shaft and services □ 5 Stoping □ 6 Traming | | | - |
| G12 What type of work are you involved in? G13 Roving underground G14 Shaft and services G15 Stoping G16 Loco operator 7 Engineering assistant G17 Engineering assistant G18 Other (specify) G19 Unknown G1 Development G2 Roving surface G3 Roving underground G4 Shaft and services G5 Stoping G6 Traming | | | |
| ☐ 7 Engineering assistant ☐ 8 Other (specify) ☐ 9 Unknown Q12 What type of work are you involved in? ☐ 1 Development ☐ 2 Roving surface ☐ 3 Roving underground ☐ 4 Shaft and services ☐ 5 Stoping ☐ 6 Traming | | | ☐ 5 Load operator |
| □ 8 Other (specify) □ 9 Unknown □ 1 Development □ 2 Roving surface □ 3 Roving underground □ 4 Shaft and services □ 5 Stoping □ 6 Traming | | | ☐ 6 Loco operator |
| Q12 What type of work are you involved in? □ 1 Development □ 2 Roving surface □ 3 Roving underground □ 4 Shaft and services □ 5 Stoping □ 6 Traming | | | ☐ 7 Engineering assistant |
| Q12 What type of work are you involved in? □ 1 Development □ 2 Roving surface □ 3 Roving underground □ 4 Shaft and services □ 5 Stoping □ 6 Traming | | | ☐ 8 Other (specify) |
| in? □ 2 Roving surface □ 3 Roving underground □ 4 Shaft and services □ 5 Stoping □ 6 Traming | | | □ 9 Unknown |
| in? □ 2 Roving surface □ 3 Roving underground □ 4 Shaft and services □ 5 Stoping □ 6 Traming | Q12 | What type of work are you involved | ☐ 1 Development |
| ☐ 3 Roving underground ☐ 4 Shaft and services ☐ 5 Stoping ☐ 6 Traming | | in? | |
| ☐ 4 Shaft and services ☐ 5 Stoping ☐ 6 Traming | | | |
| ☐ 6 Traming | | | |
| ☐ 6 Traming | | | ☐ 5 Stoping |
| | | | |
| | | | |
| | | | |

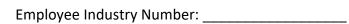


| Employee Industry | y Number: |
|-------------------|-----------|
| | |

| | | ☐ 8 Unknown | |
|-----|-------------------------------------|-------------|--|
| Q13 | In which section of the mine do you | | |
| | currently work in (number)? | | |
| Q14 | In which gang do you belong to? | | |
| | | | |

Continue with SECTION B: EMPLOYEE MEDICAL HISTORY

| SECT | SECTION B: EMPLOYEE MEDICAL HISTORY | | | |
|------|--|---|--|--|
| Q15 | Do you have any of the following medical conditions? | Q15.1 Diabetes mellitus ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | | |
| | | Q15.2 Tuberculosis (TB) 1 Yes 2 No 3 Unknown If Yes, status of TB infection 1 Previous 2 Current | | |
| | | Q15.3 Cancer 1 Yes 2 No 3 Unknown If Yes, specify what type | | |
| | | Q15.4 Skin conditions (for example eczema, psoriasis) 1 Yes 2 No 3 Unknown If Yes, specify what type | | |
| | | Q15.5 Other medical condition 1 Yes 2 No 3 Unknown If Yes, specify what type | | |
| Q16 | You may decide if you want to answer the next question or not. | ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | | |

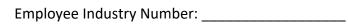




| | Are you HIV-positive? | If Yes, are you on antiretroviral medication? ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
|-----|---|--|--|
| Q17 | Do you have a history of smoking | ☐ 1 Yes ☐ 2 No If Yes, are you a ☐ 1 Current smoker ☐ 2 Previous smoker ☐ 3 Unknown | If Yes, skip to Q18 If No, skip to Q20 |
| Q18 | How many cigarettes do you smoke in one day? | | |
| Q19 | How long have you been smoking (years)? | | |
| Q20 | Do you drink alcohol? | □ 1 Yes □ 2 No | If Yes, skip to Q21 If No, skip to Q24 |
| Q21 | How often do you drink alcohol? | ☐ 1 Everyday ☐ 2 Once a week ☐ 3 Twice a week ☐ 4 Three times a week ☐ 5 More than three times a week ☐ 6 Weekends only ☐ 7 Once a month ☐ 8 Other (specify) ☐ 9 Unknown | |
| Q22 | What type of alcohol do you drink (beer, sorghum beer/umqombothi, cider, wine, brandy, whisky, vodka, gin, sherry, cane)? | | |
| Q23 | What volume of alcohol do you drink at any given time (how many cans, glasses, shots, dumpi, quart, bottles, mixed)? | Number of units: Unit type (e.g. cans): Volume (millilitres): | |

Continue with SECTION F: EXPOSURE INFORMATION

| SECTION F: EXPOSURE INFORMATION | |
|----------------------------------|--|
| SECTION 1. EXTOSORE INTORVIATION | |

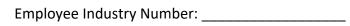




| Q24 | Have you noticed any cuts or scratches on your body (arms, head, neck or legs) over the last week? | ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
|-----|---|--|---|
| Q25 | Do you wear any personal protective equipment? | ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | If Yes, skip to Q26 If No, skip to Q39 |
| Q26 | At any given time, do you take off the following personal protective equipment? (tick all that apply) | ☐ 1 Overalls ☐ 2 Gloves ☐ 3 Masks ☐ 4 Boots ☐ 5 Goggles ☐ 6 Helmets ☐ 7 Knee protectors ☐ 8 Arm protectors ☐ 9 Other (specify) | |
| Q27 | For every shift that you have worked in the last week, how often have you worn personal protective equipment? | ☐ 1 Always (100%) ☐ 2 Most of the time (80%) ☐ 3 Sometimes (50%) ☐ 4 Never (0%) | If options 2-4 were selected skip to Q28 If option 1 was selected, skip to Q29 |
| Q28 | What are the reasons for not wearing your personal protective equipment all the time? | | |
| Q29 | Do you share any personal protective equipment with other mine workers? | ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | If Yes, skip to Q30 If No, skip to Q31 |
| Q30 | Have you shared personal protective equipment with others who have or previously had skin lesions or bumps on their body? | ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
| Q31 | How many sets of overalls do you use during one shift? | ☐ 1 One ☐ 2 Two ☐ 3 More than two ☐ 4 Other (specify) | If two or more than two or other, skip to Q32 If one, skip to |

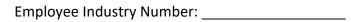


| | | ☐ 5 Unknown | Q33 |
|-----|-------------------------------------|--------------------------|-------------------------|
| Q32 | If you use more than one set of | ☐ 1 Mine change rooms | |
| | overalls, where do you change into | ☐ 2 Underground | |
| | your work overalls? | ☐ 4 Other (specify) | |
| | | | |
| | | ☐ 5 Unknown | |
| Q33 | Where do you store your work | ☐ 1 Mine change rooms | If |
| | overalls after a shift? | ☐ 2 Underground | underground, |
| | | ☐ 3 Where you stay | skip to |
| | | ☐ 4 Other (specify) | Q34 If not |
| | | ☐ 5 Unknown | underground, skip to |
| | | | Q36 |
| Q34 | Do you rinse off your work overalls | □ 1 Yes | |
| | with water underground after a | □ 2 No | |
| | shift? | ☐ 3 Unknown | |
| Q35 | When do you bring up your work | ☐ 1 After every shift | |
| | overalls from underground? | ☐ 2 Once a week | |
| | | ☐ 3 Twice a week | |
| | | ☐ 4 Never | |
| Q36 | Do you wash your work overalls | □ 1 Yes | If No, skip to |
| | every day? | □ 2 No | Q37 |
| | | ☐ 3 Unknown | If Yes, skip to |
| Q37 | How often do you wash your work | ☐ 1 Nil/zero | Q38 |
| Q37 | overalls in a week? | ☐ 2 Once | |
| | 0.0.0.0.0 | ☐ 3 Twice | |
| | | ☐ 4 More than two times | |
| | | ☐ 5 Unknown | |
| Q38 | Where do you wash your work | ☐ 1 Mine Laundromat | |
| QJU | overalls? | ☐ 2 Where you stay | |
| | | ☐ 3 Other (specify) | |
| | | | |
| | | □ 4 Unknown | |
| Q39 | Do you shower/bath at the mine | □ 1 Yes | If No, skip to |
| | change rooms after a shift? | □ 2 No | Q40 |
| | | ☐ 3 Unknown | If Yes, skip to |
| | | · · - · · · · | Q41 |
| Q40 | Where do you shower/bath after a | ☐ 1 Where you stay | |
| | shift? | ☐ 2 Other (specify) | |
| | | | |





| | | ☐ 3 Unknown | |
|-----|---|---------------------|-----------------|
| Q41 | Do you share a bedroom with | □ 1 Yes | If Yes, skip to |
| | anyone where you stay? | □ 2 No | Q42 |
| | | ☐ 3 Unknown | If No, skip to |
| | | | Q46 |
| Q42 | Do you share a bed with anyone | | |
| | where you stay? | | |
| Q43 | How many people do you share a | | |
| | bedroom with? | | |
| Q44 | What is the relationship of this | ☐ 1 Family | |
| | person(s) with whom you share a | ☐ 2 Friend(s) | |
| | bedroom with? (tick all that apply) | ☐ 3 Co-worker(s) | |
| | | ☐ 4 Other (specify) | |
| | | | |
| | | ☐ 5 Unknown | |
| Q45 | Does anyone who you share a | □ 1 Yes | |
| | bedroom with have or previously | □ 2 No | |
| | had skin lesions or bumps? | ☐ 3 Unknown | |
| Q46 | Do you share a bathroom facility | □ 1 Yes | If Yes, skip to |
| | with anyone where you stay? | □ 2 No | Q47 |
| | | ☐ 3 Unknown | If No, skip to |
| | | | Q50 |
| Q47 | How many people do you share a | | |
| | bathroom facility with? | | |
| Q48 | What is the relationship of this | ☐ 1 Family | |
| | person(s) with whom you share a | ☐ 2 Friend(s) | |
| | bathroom facility with? (tick all that | ☐ 3 Co-worker(s) | |
| | apply) | ☐ 4 Other (specify) | |
| | | | |
| | | ☐ 5 Unknown | |
| Q49 | Does anyone who you share a | □ 1 Yes | |
| | bathroom facility with have or | □ 2 No | |
| | previously had skin lesions or | ☐ 3 Unknown | |
| 050 | bumps? | | |
| Q50 | Have you worked in a different | □ 1 Yes | |
| | section(s) of the mine over the last 12 months? | □ 2 No | |
| | | ☐ 3 Unknown | |
| Q51 | Have you worked in a different | □ 1 Yes | |
| | gang(s) over the last 12 months? | □ 2 No | |
| | | ☐ 3 Unknown | |
| Q52 | Have you been in contact with | □1 Yes | If Yes, skip to |
| | anyone that has or previously had | □ 2 No | Q53 |
| | | | |

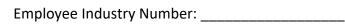




| | | skin lesion(s) or bumps on their body? | □ 3 Unknown | If No, end questionnaire if participant does not have skin lesions OR continue with Q55 if the participant does have skin lesions |
|---|-----|--|---------------------|---|
| ľ | Q53 | Were you in contact with this | □ 1 Yes | |
| | | person(s) on more than one | □ 2 No | |
| | | occasion? | ☐ 3 Unknown | |
| | Q54 | Please explain what was the | ☐ 1 Family | End |
| | | relationship of this person(s) to you? | ☐ 2 Friend(s) | questionnaire |
| | | | ☐ 3 Co-worker(s) | if participant |
| | | | ☐ 4 Other (specify) | does not have skin |
| | | | □ 5 Unknown | lesions OR continue with Q55 if the participant |
| | | | | does have skin lesions |
| ı | | 1 | | 21/11/16/210113 |

Continue with SECTION G: HISTORY OF SKIN LESIONS

| SECT | SECTION G: HISTORY OF SKIN LESIONS | | | | |
|------|--|---|--|--|--|
| Q55 | Did you have previous episodes of skin lesions or bumps? | ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | If Yes, skip to Q56 If No, skip to Q58 | | |
| Q56 | How many episodes* of skin lesions or bumps did you have? *A new episode is defined when the skin lesion(s) presents on a different location on the body OR after the resolution of a previous episode of skin lesion(s) within 21 days | ☐ 1 Known Number: | If Known, skip to Q57 If Unknown, skip to Q58 | | |
| Q57 | Date and location where skin lesions or bumps occurred *Resolved is defined when the skin lesion(s) is healed <u>OR</u> a scar is present | ☐ 1 First episode Month/Year: Location: | | | |





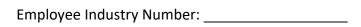
| | Resolved*: ☐ 1 Yes ☐ 2 No | |
|--|---|--|
| | ☐ 3 Unknown | |
| | ☐ 2 Second episode Month/Year: Location: Resolved: ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
| | ☐ 3 Third episode Month/Year: Location: Resolved: ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
| | ☐ 4 Fourth episode Month/Year: Location: Resolved: ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
| | ☐ 5 Fifth episode Month/Year: Location: Resolved: ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
| | ☐ 6 Sixth episode Month/Year: Location: Resolved: ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
| | ☐ 7 Seventh episode Month/Year: Location: Resolved: ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
| | ☐ 8 Eighth episode Month/Year: Location: | |



| he National Health Laboratory Sen | ice | |
|-----------------------------------|---|--|
| | Resolved: ☐ 1 Yes ☐ 2 No | |
| | □ 3 Unknown | |
| | ☐ 9 Ninth episode Month/Year: Location: Resolved: ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |
| | ☐ 10 Tenth episode Month/Year: Location: Resolved: ☐ 1 Yes ☐ 2 No ☐ 3 Unknown | |

Employee Industry Number: _____

Continue with SECTION H: CURRENT EPISODE OF SKIN LESIONS





| Introduction |
|--|
| Hello. My name is |
| |
| I am a doctor or nurse working for the National Institute for Communicable Diseases |
| (NICD). I would like to ask you some questions on your current episode of skin lesion(s), |
| examine current skin lesion(s) and to take a sample of the skin lesion(s) or bumps on your |
| body to be tested at our laboratory. |
| |
| This is important so that we can make a diagnosis and treat you appropriately. Your |
| results will be shared with the doctors at the health clinic on the mine. |
| |
| Taking samples of skin lesions or bumps will take about 10 minutes. |
| |
| All employee information and results will be kept confidential and will only be used for |
| the purposes of this investigation. |
| |
| There might be some risk with sample collection. <i>Explain that the sample collection might</i> |
| be painful to the participant. |
| |
| DOCTOR OR NURSE'S DETAILS |

| DOCTOR OR NURSE'S DETAILS | |
|--|---------------|
| Name and surname or initials of person | |
| completing the form: | |
| Date of completion (DD/MM/YYYY): | 21/02/2018 |
| | |
| Shift | ☐ 1 Morning |
| | ☐ 2 Afternoon |
| | □ 3 Evening |





| SECT | ION H: CURRENT EPISODE O | F SKIN LESIONS | |
|------|--|--|--|
| Q58 | When did the skin lesion(s) occur on your body? If the participant does not | Date (DD/MM/YYYY):day(s) | |
| | know when the skin lesion(s) occurred; ask how many days/week(s) ago did he notice the skin lesion(s). | week(s)* *One week is equivalent to seven days | |
| Q59 | Location of skin lesions (tick all that apply) | ☐ 1 Face ☐ 2 Hands ☐ 3 Fingers ☐ 4 Groin ☐ 5 Axillae ☐ 6 Head and neck ☐ 7 Upper limbs ☐ 8 Trunk and back ☐ 9 Lower limbs ☐ 10 Other (specify) | |
| Q60 | Description of skin lesion(s) (tick all that apply) | ☐ 1 Boils ☐ 2 Furuncles ☐ 3 Superficial abscesses ☐ 4 Subcutaneous abscesses ☐ 5 Ulcers ☐ 6 Infected lacerations ☐ 7 Nodules on extremities ☐ 8 Cellulitis ☐ 9 Other (specify) ——— | |
| Q61 | Other description of skin lesion(s) on presentation (tick all that apply) | ☐ 1 Painful ☐ 2 Swollen ☐ 3 Skin irritation ☐ 4 Itching | |



| Employee In | dustry Number: | |
|-------------|----------------|--|
|-------------|----------------|--|

| | | ☐ 5 Pus present | |
|-----|---|---------------------------------|--|
| | | ☐ 6 Other (specify) | |
| | | | |
| | 5.1 | | |
| Q62 | Did you attend the mine | ☐ 1 Yes ☐ 2 No | |
| | clinic for treatment? (tick all that apply) | ☐ 3 Unknown | |
| | | Did the participant seek | |
| | | health care elsewhere? | |
| | | □ 1 Yes □ 2 No □ | |
| | | 3 Unknown | |
| | | If Yes, specify where: | |
| | | , | |
| | | ☐ 1 Local clinic | |
| | | ☐ 2 Pharmacy | |
| | | ☐ 3 Traditional healer | |
| | | ☐ 4 Relative | |
| | | ☐ 5 Friend | |
| | | ☐ 6 Other (specify) | |
| | | | |
| | | ☐ 7 Unknown | |
| | | | |
| Q63 | Have you had treatment with antibiotics? | ☐ 1 Yes ☐ 2 No ☐ | |
| | with antibiotics: | 3 Unknown If Yes, specify which | |
| | | antibiotics: | |
| | | artiblotics. | |
| | | | |
| | | | |
| Q64 | Have you had treatment | □ 1 Yes □ 2 No □ | |
| | with incision and | 3 Unknown | |
| | drainage? | If Yes, specify the date | |
| | | (DD/MM/YYYY): | |
| | | | |
| | | | |

Continue with SECTION I: SAMPLE COLLECTION



Can we to take a sample of the skin lesion

or bump to be tested at our laboratory?

| Employee Industry | Number: |
|-------------------|---------|
|-------------------|---------|

 \square 1 Yes (continue with sample collection)

| bump to be used for the investigation? | | ☐ 1 Yes (continue with taking a picture. Save the image using the employee industry number.) ☐ 2 No | | |
|---|---------------------|---|----------|--|
| Participant signature: Date: 21 February 2018 | | | | |
| Q65 | Sample collected: | ☐ 1 Yes ☐ 2 No If No, specify the reas | | |
| Sample number | Site of skin lesion | Sample type | Comments | |
| number | | ☐ 1 Pus aspirate ☐ 2 Skin scrapings ☐ 3 Other (specify) | | |
| | | ☐ 1 Pus aspirate ☐ 2 Skin scrapings ☐ 3 Other (specify) | | |
| | | ☐ 1 Pus aspirate ☐ 2 Skin scrapings ☐ 3 Other (specify) | | |

□ 2 No

End of questionnaire

Thank you for your participation