

## PROVIDER QUESTIONNAIRE

PHC NAME: \_\_\_\_\_ DATE: \_\_\_\_\_ PROVIDER NAME: \_\_\_\_\_

Q.#	QUESTIONS	CODES	GO TO Q.
1.	Sex	Male .....1 Female .....2	
2.	What was your age as of last birthday?	<input type="text"/> <input type="text"/> Years	
3.	What is your state of (usual) residence?	..... -----	
4.	What is your current professional qualification?	Medical degree (MBBS) .....1 Community Health Officer certificate .....2 Nursing certificate .....3 Midwife certificate .....4 Nurse/Midwife certificate .....5 CHEW certificate .....6 Junior CHEW certificate .....7 Other (specify) .....8	
5.	How many years have you been working with this qualification?	<input type="text"/> <input type="text"/>	

I am going to ask you some questions about management of medical conditions. When I ask each question I will read out the options and ask you to select the ones you think are appropriate.

Q.#	QUESTIONS	CODES	GO TO Q.
1.	Malaria is classified as “severe” when this is present.	Convulsions .....1 Decreased consciousness ..... 2 Kidney failure .....3 Pulmonary edema .....4 All of the above .....5	
2.	Which of the following actions is NOT appropriate in managing an under-five child that presents with fever, vomiting and is severely dehydrated on examination?	Order a blood test for malaria .....1 Set up IV line for fluids .....2 Give Artemether/Lumefantrine tablets .....3 Check body temperature with thermometer4	
3.	A child presents with fever and diarrhea for a day, and is mildly dehydrated. Which of the following actions will you take?	Give oral rehydration therapy .....1 Set up IV line and give fluids ..... 2 Test for malaria parasite .....3 A and C only .....4	
4.	Which of the following will help to decrease the risk of infection during childbirth?	Performing frequent vaginal examinations ..1 Rupturing membranes as soon as possible in the first stage of labor .....2 Routine catheterization of the bladder before childbirth .....3 Reducing prolonged labor .....4	

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5.	The most effective way to immediately control eclamptic convulsions is to:	Give diazepam .....1 Give magnesium sulfate .....2 Deliver the baby as soon as possible .....3 Give nifedipine.....4	
6.	You can perform vacuum extraction in the case of:	A cephalic presentation .....1 A face presentation .....2 Cervical dilation of 7cm .....3 Fetal head not engaged .....4	
7.	A woman with a ruptured uterus has which of the following signs and symptoms:	Rapid maternal pulse .....1 Persistent abdominal pain and suprapubic tenderness .....2 Fetal distress .....3 All of the above .....4	
8.	In a patient with acute severe asthma, which of the following is present:	Inability to complete a sentence in one breath .....1 Respiratory rate less than 20/min .....2 Bradycardia .....3 All of the above .....4	
9.	A patient presenting with severe asthmatic attack should be:	Given oxygen 40-60% .....1 Given nebulized salbutamol 5mg or terbutaline 10 mg repeated and administered 12hrly .....2 Asked to go buy a salbutamol inhaler.....3 None of the above ..... 4	
10.	A sign of life-threatening asthmatic attack is:	A silent chest ..... 1 Cyanosis .....2 Bradycardia .....3 Confusion .....4 All of the above .....5	

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Now I am going to present some clinical case scenarios to you and will ask you some questions about how you might handle them.

READ THE CASE SCENARIOS AND QUESTIONS EXACTLY AS THEY ARE WRITTEN. DO NOT READ THE OPTIONS. SELECT THE ANSWER GIVEN BY THE HEALTH PROVIDER. FOR CERTAIN QUESTIONS, MULTIPLE ANSWERS ARE POSSIBLE; IN THIS CASE, INDICATE ALL ANSWERS GIVEN BY THE HEALTH PROVIDER. AFTER THE HEALTH PROVIDER HAS FINISHED ANSWERING EACH QUESTION, ASK "ANYTHING ELSE?" IF ADDITIONAL ANSWERS ARE GIVEN AT THAT TIME, PLEASE RECORD THEM.

Q.#	QUESTIONS	CODES
	<b>SCENARIO 1: Fatima is a 24 year old woman who has just given birth to her third baby, a healthy girl, after a normal labor. Active management of the third stage of labor (AMTSL) was performed and the placenta was delivered. Fatima's vital signs and bleeding are stable at 15 and 30 minutes after the birth, but 45 minutes after the birth it is noted that there is excessive vaginal bleeding.</b>	
1.	To the best of your ability and training what will you do now?	<b>Calls for help .....1</b> <b>Explains to the woman what is being done, reassuring her ..... 2</b> <b>Checks for signs of shock, including blood pressure, pulse, level of consciousness, color and temperature of skin .....3</b> <b>Palpates the uterus to assess for tone.....4</b>
2.	In general, what are the signs and symptoms of shock?	<b>Pulse &gt;110 .....1</b> <b>Systolic BP &lt;90mm Hg .....2</b> <b>Cold clammy skin .....3</b> <b>Pallor .....4</b> <b>Respiration &gt; 30 / min .....5</b> <b>Anxious and confused or unconscious .....6</b>
3.	Going back to our scenario, on examination of Fatima you find: BP = 100/60, Pulse= 100, skin is pale but warm and dry; her mental status is normal but she is anxious. Bleeding continues to be excessive. Is Fatima in shock?	<b>Yes .....1</b> <b>No .....2</b>
4.	What are the possible causes of Fatima's bleeding?	<b>Atonic uterus .....1</b> <b>Cervical and perineal tears .....2</b> <b>Retained placenta or placental fragments ....3</b> <b>Ruptured uterus .....4</b> <b>Clotting disorder .....5</b>
5.	When you examine her you find a soft, atonic uterus; to the best of your ability and training what do you do now?	<b>Massages the uterus to stimulate a contraction .....1</b> <b>Gives oxytocin IV OR ergometrine slow IV OR misoprostol orally .....2</b> <b>Continues to monitor BP, pulse and blood loss and massage the uterus to maintain tone .....3</b>

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6.	Re-examination of uterus shows uterus still not firm. Based on these findings, what is your next step?	<b>Explains to Fatima what is being done and what to expect .....1</b> <b>Performs internal bimanual compression of the uterus .....2</b> <b>Locates placenta and examines for missing pieces .....3</b>
7.	If an examination of the placenta showed a missing piece (placenta incomplete), what would you do?"	<b>Explains to Fatima what s/he is going to do and what to expect .....1</b> <b>Gives pethidine and diazepam IV slowly or uses ketamine or another drug for sedation 2</b> <b>Gives a single dose of prophylactic antibiotics+ .....3</b> <b>Using elbow-length sterile or HLD gloves, palpates inside the uterus for placental fragments and removes with lateral edge of open hand .....4</b>
8.	When the uterus is examined, the uterus is firm, but bleeding continues. Based on these findings, what is your next step?	<b>Examines perineum, vagina and cervix for tears and repairs .....1</b> <b>Considers use of bedside clotting test .....2</b> <b>Encourages breastfeeding to help uterus contraction .....3</b> <b>Calls for help .....4</b>
9.	Further examination shows that the uterus is firm, bleeding has stopped, and vital signs are stable. What would you do?	<b>Requests for type and cross-match for possible transfusion .....1</b> <b>Makes plan for monitoring vital signs, uterine firmness and blood loss every 15 min for one hour and then if stable, every 30 min for next 5 hours or until stable .....2</b> <b>Continues with routine postpartum care, including breastfeeding of infant .....3</b>
<b>Scenario 2: Mrs. Ali had a prolonged second stage of labor. Her baby developed fetal distress and was delivered by vacuum extraction. He is limp and does not breathe spontaneously at birth.</b>		
10.	Describe all the actions you would take to resuscitate the baby while it is not breathing	<b>Keep the baby warm .....1</b> <b>Clamp and cut the cord if necessary .....2</b> <b>Transfer the baby to a dry, clean and warm surface .....3</b> <b>Inform the mother that the baby has difficulty initiating breathing and that you will help the baby to breathe .....4</b> <b>Keep the baby wrapped (and under a radiant heater if possible) .....5</b> <b>Open the airway ..... 6</b> <b>Position the head so it is slightly extended ...7</b> <b>Suction first the mouth and then the nose...8</b> <b>Repeat suction if necessary .....9</b> <b>Ventilate the baby .....10</b> <b>Place mask to cover chin, mouth and nose (to form seal) .....11</b> <b>Squeeze the bag 2 or 3 times and look if the chest is rising .....12</b>

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### VIGNETTE

#### INSTRUCTIONS

**Vignette reader:** The responses to questions are given in bold type. If possible, only give these answers and only as they are written. Use your judgment for questions for which there are no answers. The basic rule is that unless it is specifically stated here, all other signs and symptoms should be normal. Questions in italics are meant to represent the possible questions clinicians might ask.

**Vignette Observer:** This patient has a very specific diagnosis. The goal of the clinician is to discover this diagnosis. As part of this task he or she must also rule out other possible conditions. Thus, the correct completion of this vignette, will involve

- Reaching the correct diagnosis (preliminary diagnosis)
- Writing a correct prescription (there may be more than one correct prescription and this can vary from facility to facility).
- Ruling out other possible diagnoses.

#### READ THIS TO THE CLINICIAN:

We will observe you consulting a case study patient. We have created some case studies of typical patients. Someone from our team will act as the case study patient. He/she is acting as a patient suffering from a particular condition that needs diagnosis and treatment. You should diagnose the patient and then suggest a course of treatment. If in the course of a normal examination you would ask the patient a question, ask it of the person acting as a case study patient. If in the course of a normal consultation you would perform some physical examinations, you should describe to the case study patient the examination you would perform. She will then tell you what you would have found. Then make a diagnosis or preliminary diagnosis, write a prescription for the case study patient and tell the researcher acting as a case study patient what you would tell the patient. A second researcher will observe your case study consultation. Because this is new to you, we will act out a case study presentation. One of our staff will be a clinician and one a case study patient. Our intention is to show you how a case study consultation should work.

#### Sample Vignette

Reader: *I am a 30 year old man. I do not feel well and I have had a fever for three days. I think I have malaria.*

Observer as Clinician: **Do you have any other symptoms?**

Reader: *I feel weak; I have a headache and nausea.*

Observer as Clinician: **Is the fever persistent or intermittent?**

Reader: *It comes and goes.*

Observer as Clinician: **Do you have pain while swallowing?**

Reader: *No.*

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Observer as Clinician: **Do you have abdominal pain?**

Reader: *No.*

Observer as Guide: At this point I need to examine the patient. I will tell the patient what I am doing and she will tell me what I would find.

Observer as Clinician: **I would take the patient's temperature.**

Reader: *The temperature is 38 degrees.*

Observer as Clinician: **I would take the patient's pulse.**

Reader: *The pulse is 90 beats per minute.*

Observer as Guide: I will now tell you what I think is the correct diagnosis and prescription.

Observer as Clinician: **I will diagnose this patient as having malaria and will write a prescription for Artemeter/Lumefantrine 4 tablets STAT then 4 tablets 8 hours later then 4 tablets 12 hourly twice daily for two days.**

Observer as Guide: Now I will address the patient as I would a normal patient. I would say to the patient:

Observer as Clinician: **You have malaria. I am writing you a prescription for medicine that will help you. If you do not feel better after 5 days you should return to see me.**

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### VIGNETTE #1

**Introduction:** My name is Bakari. I am 40 years old and I have been suffering from a fever, cough, and weakness for the last 2-3 weeks.

#### Potential History Taking Questions and their Response

SELECT IF ANY OF THE QUESTIONS BELOW ARE ASKED IN THE COURSE OF THE INTERVIEW.

	Clinician		Patient
1.	Do you have night sweats?	<input type="checkbox"/>	Yes
2.	Do you have any pain in the chest?	<input type="checkbox"/>	No
3.	Is there any blood in the sputum?	<input type="checkbox"/>	Yes
4.	Do you drink?	<input type="checkbox"/>	I used to, but not for the last two years.
5.	Has this happened before?	<input type="checkbox"/>	Yes, for the last month, but not before.
6.	Has this type of cough happened to any others in your family or dwelling?	<input type="checkbox"/>	Yes; in my father in the village.
7.	What is your profession?	<input type="checkbox"/>	Manual labor
8.	Have you indulged in any high-risk sexual behavior?	<input type="checkbox"/>	No. Does not visit prostitutes.
9.	Do you feel tired?	<input type="checkbox"/>	Yes, slightly.
10.	What is your normal diet?	<input type="checkbox"/>	Rice, vegetable and sometimes meat.
11.	What is the pattern of the fever?	<input type="checkbox"/>	Low-grade fever, higher at night.
12.	Do you smoke? How much? And for how long?	<input type="checkbox"/>	Yes, one packet of cigarettes per day.

#### Potential Physical Examination Questions

Q.#	QUESTIONS	CODES	GO TO Q.
1.	<b>Observer:</b> Assuming you have all the necessary equipment and supplies, would you carry out a physical examination?	Yes .....1 No .....2	→Next Sec.
2.	What examinations would you carry out?		
	Clinician		Patient
a.	I would measure your height	<input type="checkbox"/>	5' 8 (160 cm)
b.	I would take your weight	<input type="checkbox"/>	62 kg
c.	I would check your pulse	<input type="checkbox"/>	Moderately elevated. 90/minute
d.	I would like to check respiratory rate	<input type="checkbox"/>	20 / minute
e.	I would like to check blood pressure	<input type="checkbox"/>	120/80 mmHg
f.	I would like to check the temperature	<input type="checkbox"/>	38 degrees
g.	I would check for retraction or decreased movement	<input type="checkbox"/>	Normal
h.	I would like to examine your chest (percussion)	<input type="checkbox"/>	Normal
i.	I would like to auscultate your chest, for breath sounds	<input type="checkbox"/>	Normal

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### Laboratory Test

Q.#	QUESTIONS	CODES	GO TO Q.
1.	<b>Observer:</b> Assuming that you have testing facilities available for any kind of test, would you conduct any test?	Yes .....1 No .....2	→Next Sec.
2.	What tests would you conduct?		
a.	Blood for ESR (Erythrocytic Sedimentation Rate)		<input type="checkbox"/>
b.	Mantoux Tuberculin Test		<input type="checkbox"/>
c.	Sputum for AFB (Acid Fast Bacilli)		<input type="checkbox"/>
d.	Chest X-ray		<input type="checkbox"/>
e.	WBC T & D		<input type="checkbox"/>
f.	Hb		<input type="checkbox"/>
g.	Blood smear for malaria		<input type="checkbox"/>
h.	Blood for HIV test		<input type="checkbox"/>

### Preliminary Diagnosis

	<b>Observer:</b> It will take some time to get the results. Please make a preliminary diagnosis	
1.	Pulmonary TB	<input type="checkbox"/>
2.	Pneumonia	<input type="checkbox"/>
3.	Chronic Bronchitis	<input type="checkbox"/>
4.	Diabetes mellitus	<input type="checkbox"/>
5.	AIDS	<input type="checkbox"/>
6.	Don't know	<input type="checkbox"/>

**AFTER** the preliminary diagnosis, give the clinician the results of any of the following lab tests ordered

	Clinician	Patient
1.	Blood for ESR (Erythrocytic Sedimentation Rate)	Is > 20mm
2.	Mantoux Tuberculin Test	Positive reaction of greater than 10mm
3.	Sputum for AFB (Acid Fast Bacilli)	Positive
4.	Chest X-ray	Abnormal opacity in right apex
5.	WBC T & D	Normal
6.	Hb	Normal
7.	Blood smear for malaria	Negative
8.	Blood for HIV test	Negative



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### Treatment

<b>Observer:</b> Assuming that you have all the necessary drugs and referral facilities available, what treatment would you give?		
<b>Name of medication</b>		<b>Is dosage correct?</b>
Rifampicin (15 mg/kg) & Ethambutol (25 mg/kg)&Pyrazinamide (25mg/kg)& Isoniazid for two months FDC, then Ethambutol& Isoniazid FDC for six months	<input type="checkbox"/>	<b>1. Yes                  2. No</b>
Penicillin	<input type="checkbox"/>	<b>1. Yes                  2. No</b>
Amoxicillin	<input type="checkbox"/>	<b>1. Yes                  2. No</b>

### Health Education

	<b>Observer:</b> Please tell me what information you would give to the patient at the end of this consultation.	
1.	No other information	<input type="checkbox"/>
2.	Emphasize the importance of taking this medicine or going to referral	<input type="checkbox"/>
3.	Importance of high protein diet	<input type="checkbox"/>
4.	Importance of drug compliance	<input type="checkbox"/>
5.	Importance of boiling milk	<input type="checkbox"/>
6.	Importance of well-ventilated house	<input type="checkbox"/>
7.	Importance of rest	<input type="checkbox"/>
8.	Avoid strenuous work	<input type="checkbox"/>
9.	Adhere to return date to clinic	<input type="checkbox"/>
10.	Return to the clinic when there are abnormal signs (rashes)	<input type="checkbox"/>

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### VIGNETTE #2

**Introduction:** My 4 year old son has had a fever for some time. He seems to be getting worse.

#### Potential History Taking Questions and their Response

SELECT IF ANY OF THE QUESTIONS BELOW ARE ASKED IN THE COURSE OF THE INTERVIEW.

	Clinician		Patient
1.	Duration of fever	<input type="checkbox"/>	One week
2.	Pattern (periodicity) of fever	<input type="checkbox"/>	Some days fine, some days very sick
3.	If temperature was taken	<input type="checkbox"/>	Temperature not taken
4.	Presence of cough	<input type="checkbox"/>	Yes
5.	Productive or dry cough	<input type="checkbox"/>	The cough is dry
6.	Severity of cough	<input type="checkbox"/>	Not severe
7.	Presence of sore throat / pain during swallowing	<input type="checkbox"/>	
8.	Presence of vomiting	<input type="checkbox"/>	Yes, sometimes
9.	Presence of sweats and chills	<input type="checkbox"/>	Yes
10.	Presence of convulsions	<input type="checkbox"/>	No
11.	Presence of running nose	<input type="checkbox"/>	
12.	Appetite	<input type="checkbox"/>	He eats, but not as much as usual, and sometimes he vomits
13.	Ability to drink	<input type="checkbox"/>	
14.	Difficulty in breathing / chest pain	<input type="checkbox"/>	No difficulty in breathing
15.	Presence of ear problems	<input type="checkbox"/>	
16.	Presence of diarrhea	<input type="checkbox"/>	No
17.	Any medication given	<input type="checkbox"/>	The mother has started giving paracetamol
18.	Amount of medication given	<input type="checkbox"/>	One paracetamol two days ago, one yesterday, one this morning
19.	Vaccination history	<input type="checkbox"/>	The child has received all vaccinations

#### Potential Physical Examination Questions

Q.#	QUESTIONS	CODES	GO TO Q.
1.	<b>Observer:</b> Assuming you have all the necessary equipment and supplies, would you carry out a physical examination?	Yes .....1 No .....2	→Next Sec.
2.	What examinations would you carry out?		
	Clinician		Patient
a.	Assess general health condition (awake / lethargy / tiredness / fatigue)	<input type="checkbox"/>	The child is awake but lethargic
b.	Take temperature	<input type="checkbox"/>	Temperature is 37.2°C
c.	Take pulse	<input type="checkbox"/>	Pulse is 95 per minute
d.	Check signs of dehydration (delayed capillary refill, sunken eyes, skin pinch, swollen face)	<input type="checkbox"/>	The eyes are not sunken. The skin is normal. Face is not puffy.
e.	Look for palmar pallor (or other signs of anemia)	<input type="checkbox"/>	The nail beds are pale. The eyes are pale. Face is not puffy.

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f.	Assess neck stiffness	<input type="checkbox"/>	Neck is not stiff
g.	Check ear/throat	<input type="checkbox"/>	The tongue is pale
h.	Check respiratory rate	<input type="checkbox"/>	Respiratory rate is normal
i.	Palpate the spleen	<input type="checkbox"/>	Abdomen/liver is normal, not tender
j.	Check for visible severe wasting	<input type="checkbox"/>	The skin is normal. How would you check for visible severe wasting?
k.	Weigh the child	<input type="checkbox"/>	
l.	Check weight against a growth chart	<input type="checkbox"/>	Weight is normal
m.	Look for edema of both feet (swollen feet)	<input type="checkbox"/>	Feet are not swollen

### Laboratory Test

Q.#	QUESTIONS	CODES	GO TO Q.
1.	<b>Observer:</b> Assuming that you have testing facilities available for any kind of test, would you conduct any test?	Yes .....1 No .....2	→Next Sec.
2.	<b>What tests would you conduct?</b>		
a.	Malaria test		<input type="checkbox"/>
b.	Full Blood Count		<input type="checkbox"/>
c.	Hemoglobin (Hb) test		<input type="checkbox"/>
d.	Lumbar puncture		<input type="checkbox"/>

### Diagnosis

	<b>Observer:</b> It will take some time to get the results. Please make a preliminary diagnosis.	
1.	Malaria	<input type="checkbox"/>
2.	Anemia	<input type="checkbox"/>
3.	Meningitis	<input type="checkbox"/>
4.	Don't know	<input type="checkbox"/>

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### Treatment

<b>Observer:</b> Assuming that you have all the necessary drugs and referral facilities available, what treatment would you give?		
Name of medication		Is dosage correct?
a. Sulphadoxine-pyrimethamine (S/P)	<input type="checkbox"/>	1. Yes      2. No
b. Artemisinin-combination therapies (ACT)	<input type="checkbox"/>	1. Yes      2. No
c. Quinine	<input type="checkbox"/>	1. Yes      2. No
d. Folic acid / Iron	<input type="checkbox"/>	1. Yes      2. No
e. Anticonvulsant	<input type="checkbox"/>	1. Yes      2. No
f. Referral	<input type="checkbox"/>	1. Yes      2. No
g. Don't know	<input type="checkbox"/>	1. Yes      2. No

### Health Education

	<b>Observer:</b> Please tell me what information you would give to the caregiver at the end of this consultation.	
1.	No other information	<input type="checkbox"/>
2.	Importance of iron intake	<input type="checkbox"/>
3.	When to return if no improvement is seen (malaria)	<input type="checkbox"/>
4.	Explain that danger signs require patient return immediately	<input type="checkbox"/>
5.	Explain how to use Artemisinin-combination therapies (ACT) with folic acid /iron	<input type="checkbox"/>
6.	When to return to re-evaluate anemia	<input type="checkbox"/>