

Family name: \_\_\_\_\_

Phone number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

**WALKERTON *E. Coli* O157:H7 OUTBREAK**  
***Household level questions***

**May 2000**

(FOR ADMINISTRATIVE USE ONLY)

Interviewer's name \_\_\_\_\_ Date of interview (DD/MM): \_\_\_\_/\_\_\_\_

Family name from the CD ROM list \_\_\_\_\_

Street Address \_\_\_\_\_

Hello, my name is \_\_\_\_\_, and I am working with the Bruce-Grey-Owen Sound Health Unit. We are investigating the outbreak of diarrheal illness in Walkerton. May I please speak to a head of the household?

I realize that someone from the health department or hospital may have already spoken with you. I would like to ask you and your household members some questions which will help us to better understand the details of this outbreak. To do this we would like to obtain information regarding each member of your household. This will involve speaking to those aged 15 years and older directly, and obtaining information from those under age 15 from an adult. Each interview should take approximately 15 minutes per person. We assure you that your answers will be kept confidential.

Would you be willing to take part in this survey?                      Yes      No

*If no,*    Thank you for your time.

*If yes,*    Is now a good time to talk with you?

**If not:** Can I call back at some other time? \_\_\_\_\_ *(Document on phone log sheet)*

**Section I: Demographic information - HOUSEHOLD**

Would you like to have a calendar on hand during the interviews as I will be asking questions about specific time periods?

First I would like to ask you questions about your household.

- Including yourself, how many people live in your household? \_\_\_\_\_ (please include children who live with you part time)

Including yourself, may I have their names, age, sex, and whether they have been ill with diarrhea since May 1?

First Name	Last Name	Age	SEX		ILL	
			M	F	Y	N
			M	F	Y	N
			M	F	Y	N
			M	F	Y	N
			M	F	Y	N
			M	F	Y	N
			M	F	Y	N
			M	F	Y	N
			M	F	Y	N

**APPENDIX G**

Family name: \_\_\_\_\_

Phone number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Are you the parent or legal guardian for the children who live in your household?    Yes    No  
*If no, is there a time I can call back when they will be home?*    Yes    No  
*If no, Thank you for your time.*

2. Do you live on a farm?    Yes    No

*If yes, are there any livestock on the farm?*    Yes    No

*If yes, please specify the type \_\_\_\_\_*

3. Did any member of your household work at or attend a daycare between Monday, May 1 and Sunday, May 21?

Yes    No

4. Did any member of your household work at a nursing home or other institution between Monday, May 1 and Sunday, May 21?

Yes    No

*If yes, please specify \_\_\_\_\_*

5. Do you have dogs or cats as pets?    Yes    No

*If no, skip to Q.7.*

*If yes, How many dogs ? \_\_\_\_\_*

*How many cats? \_\_\_\_\_*

6. Have any of your dogs or cats had diarrhea since May 1<sup>st</sup>?    Yes    No    DK

*If yes, please specify the date(s) that the diarrhea began:*

<b>Pet Type (e.g., dog or cat)</b>	<b>Date of onset of diarrhea (DD/MM)</b>
1.	
2.	
3.	

7. Between Monday, May 1 and Sunday, May 21, what was the usual source of tap water in your house?

Single private well    Yes    No    DK

Multiple private wells    Yes    No    DK

Walkerton municipal water    Yes    No    DK

Other    Yes    No    DK

*If other please specify \_\_\_\_\_*

