**APPENDIX**

**INTERVIEW SCHEDULE**

MAJOR GYNAECOLOGICAL DISEASES AMONG THE WOMEN OF REPRODUCTIVE AGE: A COMPARATIVE STUDY OF RURAL AND URBAN PATIENTS REPORTED IN THE SILCHAR MEDICAL COLLEGE AND HOSPITAL

Case No :

**General Information Regarding the Patient**

1. Name of the patient :
2. Age :
3. Religion :
4. Address Present Permanent
   Town/Village
   P.O.
   Pin:
   District :
   Phone No :
5. Duration of stay at the present address :
6. Duration of stay at the permanent address:
7. Educational qualification :
   i) Illiterate
   ii) Literate
   iii) Primary
   iv) Middle
   v) Secondary
   vi) Technical after metric
   vii) College & above
8. Occupation :

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9. Type of the family:
   i) Nuclear
   ii) Joint
   iii) Extended

10. Detailed information regarding the family:

<table>
<thead>
<tr>
<th>Sl. No</th>
<th>Name of the Family member</th>
<th>Relations with the patient</th>
<th>Age (Yrs)</th>
<th>Sex (M/F)</th>
<th>Education</th>
<th>Occupation</th>
<th>Pattern of interaction with the patient</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

11. Dominant members in the family:

12. Types of food taken daily by the patient (Major food) and the quantity of food:

<table>
<thead>
<tr>
<th>Time</th>
<th>Type of food (Veg/Non-veg/Mixed)</th>
<th>Items taken</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morning</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Noon</td>
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<tr>
<td>Afternoon</td>
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<tr>
<td>Evening</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Night</td>
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</tr>
</tbody>
</table>

**Socio – Economic Background**

A. **Social aspect:**

1. Community:

2. Mother – Tongue:

3. Caste:
4. Marital Status:
   i) Unmarried
   ii) Married
   iii) Widowed
   iv) Divorced
   v) Separated
   vi) Others

5. Relationship with neighbors –
   i) Good
   ii) Average
   iii) Bad

6. Meeting place in neighborhood:

7. Frequency of meeting in a week:

8. Distance from the nearest house:

9. Mode of communication / recreation:
   i) Radio:
      Listening Habit: Time period
      Programmes:

   ii) T.V:
      Viewing habit: Time period
      Programmes:

10. Reading habit:
     Time period
     Subjects / material

11. Prayer place:

12. Observances:

13. Brata (Rituals) / Festivals:

B. Economic aspect of the Family:
1. Family Income per month (approximately):
2. Source of income:
3. No. of earning members:
4. Type of house:
   i) Own
      a) Kachcha
      b) Assam type
      c) Semi RCC
      d) RCC
   ii) Rented
      a) Kachcha
      b) Assam type
      c) Semi RCC
      d) RCC
5. No. of Rooms:
6. Ventilation:
7. Water system
   A. For drinking purpose
      a) Well
      b) Tube well Supply
      c) Motor pump
      d) Pond
      e) River
      f) Others
   B. For other purpose
      i) Well
      ii) Tube well
      iii) Supply
      iv) Motor pump
      v) Pond
      vi) River
      vii) Others
8. Means used for purification of water:
   i) Boil
   ii) Lime
iii) Alum
iv) Bleaching
v) Filter
vi) Others

9. Sanitation:
i) Kachcha
ii) Pacca
iii) Open defecation

10. Gardening:
i) Yes
ii) No

11. Type of gardening:

12. Domestic animals or birds:
   Type: No:

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**Gynaecological History, Disease and Related Aspect**

A. **Causes and Social pathology**:
1. Age at menarche:
2. Age at first coitus:
3. With patient’s consent / without patient’s consent:
4. Frequency of intercourse:
5. For every intercourse patient’s consent is taken or not:
   i) Yes
   ii) No
6. No. of days of menstruation:
   i) With pain:
   ii) without pain:
7. White discharge;
8. Age at first child birth:
   Type of delivery:
   Place of delivery:
9. No. of children:
10. Age of the patient during the consecutive pregnancies:

<table>
<thead>
<tr>
<th>Sl. No. of the consecutive pregnancies</th>
<th>Sex of the child</th>
<th>Age of the mother during the child birth</th>
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</table>

11. Family planning device used:
   Type: , Duration:

12. Who uses the Family Planning Device?

13. Is there any problem in using family planning method?

14. Nature of work done by the patient:

15. Name of the disease:

16. Reasons for the disease
   i) According to the patient:
   ii) According to the family members:
   iii) According to the doctor:

17. When the patient came to know about the disease?

18. When the disease was first diagnosed?

19. Who did the diagnosis for the first time?

20. When the family members came to know about the disease?

21 (i). Do they consider it as a disease?
   (ii). If no, then why not?

22(i) Is there any incidence of abortion in patient’s life?
   Yes
   No

ii) If yes, age of the patient at the time of abortion:

iii) If yes, Duration of conception at the time of abortion:

   iv) If yes, Reason for abortion:
v) If yes, whether patient’s consent was taken or not before abortion?
   Yes
   No

vi) Procedure used for abortion:

23.i) Has the patient taken vaccination?
   Yes
   No

(ii) If no, why not?

B. Level of awareness/social taboos/misconceptions of the patient regarding health and disease

1) Has the patient heard about HIV/AIDS?
   Yes
   No

Source:

2) What the patient has heard about the HIV/AIDS?
   i) Does the patient know about family planning?
      Yes
      No

   Source:
   ii) Does the patient support family planning?
       Yes
       No

       If yes, why?
       If no, why not?

   iii) Does the patient wash hands after toilet daily?
       Yes
       No

3) If yes what kind of material is used to wash the hands?
4) Does the patient wash hands daily?
   Before taking food
   After taking food

5) Does the patient expose his bed to sunlight time to time?
   Yes
   No

6) Does the patient use insecticides to sanitise house from mosquitoes, flies etc?
   Yes
   No

7) Are the toilets of the house cleaned daily?

8) Are the environs of the patient’s house cleaned daily?

9) Any other thing done to maintain hygiene, please specify.

10) Does the patient maintain proper hygiene during menstruation?
    Yes
    No
    If yes, how?

11) Beliefs regarding pregnancy and child birth:
    What things should be observed regarding pregnancy?
    What things should not be done before, during and after pregnancy?
    Precautions regarding childbirth:

12) Does the patient know about vaccination?
    Yes
    No

13) Misconceptions / wrongs beliefs / malpractices regarding
    Menstruation:
    Pregnancy:
    Child birth:

14) Does the patient recognize the importance of proper nutrition in daily intake of food?
    Yes
    No

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15) Does the patient believe that unsafe drinking water can cause some diseases?
   
   Yes
   No

16) Can the patient name some water borne diseases?
   
   Yes
   No

   Name of the water borne diseases:

C. **Health Seeking Behaviour**:

1. What is the cause of disease/illness:
   
   i) Environmental factor
   ii) Unhygienic condition
   iii) Lack of awareness
   iv) Malnutrition
   v) Irregular eating habit
   vi) Unknown

2. Device used during menstruation
   
   i) Sanitary pad
   ii) Cloths
   iii) Others

3. Precautions during menstruation:
   
   i) Not to take sour eatables
   ii) Not to do any hard labor
   iii) Not to cook
   iv) Not to enter into any Auspicious place
   v) Not to touch males.
   vi) To sleep on the floor
   vii) Others

4. No. of days of menstruation per month
   
   i) 1 to 2 days
   ii) 3 to 4 days
   iii) 5 to 6 days
   iv) 7 days or more

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5. How many times a day pads/cloths are changed?
   i) Less than one time a day
   ii) One time a day
   iii) Two times a day
   iv) Three times a day
   v) More than three times a day

6. What is done after using the devices during menstruation?
   i) Disposed
   ii) Washed and reused
   iii) Burnt
   iv) Others

7. In the patient’s view, who is responsible for a child being male or female
   i) Father(Chromosomal organization at the time of conception)
   ii) Mother
   iii) God’s gift (If child is male)
   iv) Evil’s spirit (If child is female)
   v) Curse in a family
   vi) Doctor
   vii) Others

8. Place preferred for delivery of a child
   i) Home
   ii) Govt. Hospital
   iii) Private Nursing Home

9. System of medicine preferred:
   i) Allopathic
   ii) Homoeopathic
   iii) Ayurvedic
   iv) Quack
   v) Others

10. Reasons for the preference of the system
10. System of medicine used frequently:
   i) Allopathic
   ii) Homoeopathic
   iii) Ayurvedic
   iv) Quack
   v) Others

12. Reasons for not using the preferred system:

13. No. of visit to the hospital:

14. Type of medical treatment given:

15. Does the patient continue the treatment?
   Yes
   No

16. Reasons for not continuing the treatment?

D. Problems/Difficulties faced due to the Disease

1. Major complaints / signs & symptoms:
2. Duration:
3. Restriction of work due to the disease:
4. Distance from SMCH:
5. Can the patient discuss the disease openly?
   Yes
   No
   If no, why not?
6. Do the other family members consider the patient’s gynecological problems as disease that should be given medical concern?
   Yes
   No
7. Does the patient prefer female doctors to male ones to discuss about the gynecological problems?
   Yes
   No
8. Reason for preferring female doctors?

9. Any other remarks:

Place:
Date:  
Signature of the Interviewer