

Questionnaire to Identify Domestic Patterns of Paracetamol Use

Your child is attending the A&E Department with a high temperature.

We would be grateful if you would take part in this study about using paracetamol.

AGE _____. SEX _____. A&E NUMBER _____. TEMP _____.

Have you given your child any paracetamol since they have been unwell? Yes / No

How many teaspoons did you give? ___ teaspoons

Of what preparation? (e.g. Calpol, Disprol, Medinol) _____..

How often can you give paracetamol to your child if necessary? _____. Hourly

What do you normally use paracetamol for at home?

(circle as many as needed)

a) To help my child sleep? Yes / No

b) For a high temperature? Yes / No

c) For pain from any cause? Yes / No

d) I never use it at home? Yes / No

Other (please state) _____..

5. If you did not give your child any paracetamol at home this time was it because:

(circle as many as needed)

a) We have none at home Yes / No

b) I do not like giving medication to my child Yes / No

c) I did not know paracetamol would have helped Yes / No

d) I never thought to use paracetamol Yes / No

e) I wanted to check with the doctor before using it Yes / No

f) I usually use a different type of pain killer Yes / No

g) My child was vomiting Yes / No

Other reason _____

Thankyou for your cooperation with this study