

Informed consent

I have been informed about, the objective of the study entitled “ The Magnitude of *Shigella* and *Salmonella*, their Antibiotics Susceptibility Pattern and Associated Risk Factors among Children with Diarrhea in Southern Ethiopia: a Cross-Sectional Study”, the response I gave kept confidential, there will be no incurred risks to my child as a result of participating in the study, the benefit to my child and the right to refuse to take part in the study and also I have had the opportunity to ask questions about the project and received clarification to my satisfaction in a language I understand. Therefore, with a full understanding of the situations, I..... voluntarily consent for my child to take part and to give the entire necessary information and sample needed for laboratory analysis in the study being conducted.

Signature: _____

Date: _____

Annex II: Questionnaire English Version

Hawassa University Natural and Computational Science

Department of Biology

Sn:	Questions	Coding	Remark
1	Pediatric age group	1. 0-4 2. 5-9 3. 10-14	
2	Sex:	1. Male 2. Female	
3	Mother's educational status:	1. Illiterate 2. Read and write 3. Elementary school 4. High school 5. Collage/university	
4	Mothers marital status;	1. Single 2. Married 3. Divorce	

5	What is your occupation?	<ol style="list-style-type: none"> 1. Farmer 2. Government employ 3. Merchant 4. Housewife 5. House made 6. Others: specify: 	
6	Monthly income birr/ETB	<ol style="list-style-type: none"> 1. 500 -1500 2. >1500 	
7	History of Diarrherea	<ol style="list-style-type: none"> 1. Yes 2. No 	
8	Type of diarrhea	<ol style="list-style-type: none"> 1. Watery 2. Bloody 3. Mucoid 	
9	Frequency of diarrhea	<ol style="list-style-type: none"> 1. Once 2. Twice 3. >Three 	
10	Treatment taken for diarrhea	<ol style="list-style-type: none"> 1. Yes 2. No 	
11	Type of treatment	<ol style="list-style-type: none"> 1. Antibiotic+ ORS 2. Antibiotic only 3. No treatment taken 	
12	Duration of diarrhea	<ol style="list-style-type: none"> 1. 1-2 days 2. 3-4 days 3. 5-6 days 4. More than a week 	
13	Sign and symptoms	<ol style="list-style-type: none"> 1. Weight loss 2. Fever 3. Vomiting 4. Frequent diarrhea 5. More than one symptoms 	
14	Laboratory confirmation	<ol style="list-style-type: none"> 1. Yes 2. No 	

15	Method of Confirmation	<ol style="list-style-type: none"> 1. Stool culture 2. Microscopy 3. Do not know 4. Not examined 	
16	Time of taking the same antibiotic	<ol style="list-style-type: none"> 1. Repeatedly 2. Sometimes 3. Not used the same antibiotics 4. Un known 	
17	Source of drinking water	<ol style="list-style-type: none"> 1. Pipe water 2. Home treated pipe water 3. Bottled water 	
18	Washing of child hand after toilet	<ol style="list-style-type: none"> 1. Always 2. Sometimes 	
19	Food/drink taken before illness	<ol style="list-style-type: none"> 1. Cooked food 2. Overnight food 3. Raw vegetable 4. Raw milk 	
20	Storage of cooked food	<ol style="list-style-type: none"> 1. Open containers 2. Closed containers 	
21	Habit of hand washing before and after meal	<ol style="list-style-type: none"> 1. Yes 2. No 	
22	Malnutrition	<ol style="list-style-type: none"> 1. Yes 2. No 	
23	Vaccination	<ol style="list-style-type: none"> 1. Yes 2. No 	
24	Contact with domestic animals	<ol style="list-style-type: none"> 1. Yes 2. No 	