A. GENERAL INFORMATION

A1. Name:

A2. ID number:

A3. Date of birth:

(Year of birth or age if you forget your date of birth)

A4. Sex:

- Male
- Female

A5. Place of birth:

A6. Address of residence:

- House number & street:
- Ward:
- District:

Is this a private residential or a rental house?

- Private
- Rental

A7. Please provide your phone number (landline and mobile)

- Phone number 1:
- Phone number 2:
- Phone number 3:

A8. Email (if any):

A9. The most convenient way to contact (you can choose ALL THAT APPLY):

- Landline phone
- Mobile phone
- Email
- · Meet in person at home

A10. Ethnicity

- Kinh
- Chinese
- Other, please specify

A11. Your role in clinical work:

- Clinical Physician
- Nurse
- Midwife
- Public Health Specialist
- Clinical Laboratory Technician

A12. How many years have you been in clinical practice since graduation? year

A13. How often are you in direct contact with the patient's blood or bodily fluid:

- Almost every day
- Several times a week
- Several times a month
- Rarely or hardly

A14. Personal income per month:

- Under 5 million VND
- 5 -10 million VND
- 10-20 million VND
- 20-50 million VND
- Over 50 million VND
- (1USD=23,000 VND as of xx)

A15. With this income, how many people can you support, including yourself:

- Alone
- 2 or more, please specify the number:

A16. Education level (highest level of education completed)

- Elementary School
- Middle School (grade 9)
- High School (grade 12)
- Intermediate or technician
- College Bachelor
- University
- Graduate school

A17. Marital status

- Single
- Living together but not married
- Single in a relationship
- Currently married
- Separation/divorce
- Widow

B. KNOWLEDGE, ATTITUDE, BEHAVIOR

Below are some questions about hepatitis B and C. The questions apply to both hepatitis B and C viruses unless it's clearly stated that they are referring to any specific type of viral hepatitis. Please choose the most appropriate answer.

B1. Do you think it is possible to get viral hepatitis from smoking?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B2. Do you think it is possible to get viral hepatitis from eating or drinking together or sharing spoons, chopsticks and forks?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B3. Do you think it is possible to get viral hepatitis from sharing toothbrushes?

Yes for HBV

- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B4. Do you think it is possible to get a viral infection from being around someone who is sneezing or coughing?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B5. Do you think it is possible to get viral hepatitis from sex?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B6. Do you think it is possible to get viral hepatitis from sharing or reusing needles such as acupuncture, tattooing, or injecting with used needles?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B7. Do you think that the baby can get viral hepatitis due to transmission from the mother during birth?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B8. Do you think that an asymptomatic person with viral hepatitis can still transmit the hepatitis virus?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B9. Do you think that people who have been infected with viral hepatitis will be infected for life?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No

Don't know

B10. Do you think viral hepatitis can lead to liver cancer?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B11. Do you think a person can die from viral hepatitis?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B12. Do you think viral hepatitis can be cured?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B13. Do you think contact with people infected with hepatitis virus should be avoided?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B14. How would you rate the possibility that you MAY BE INSPIRED with viral hepatitis during your lifetime?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B15. Have you discussed with family members or friends about screening for viral hepatitis?

- There is discussion, but only about HBV
- There is discussion, but only about HCV
- There is a discussion about HBV and HCV
- None

B16. Does anyone in the family living with Brother/Sister (such as father, mother, wife, children, brother, sister, brother...) have hepatitis virus infection?

- Yes, HBV
- Yes, HCV
- Yes, both HBV and HCV

- No
- Don't know

B17. Do you think homeless people or immigrants are more susceptible to viral hepatitis than Ho Chi Minh City residents?

- Yes for HBV
- Yes for HCV
- Yes for both HBV and HCV
- No
- Don't know

B18. Do you think the hepatitis B vaccine is effective in preventing hepatitis B?

- Yes
- No
- Don't know

B19. Do you believe that the hepatitis B vaccine (vaccine) can cause harmful side effects in many people?

- Yes
- No
- Don't know

B20. Do you believe the hepatitis B vaccine is safe?

- Yes
- No
- Don't know

B21. For hepatitis B vaccination in healthcare workers, do you think the public health insurance plan should cover it or who else?

- No. Should be paid by
- · Yes, public health insurance should cover it
- Don't know

B22. Have other members of your household been vaccinated against hepatitis B?

- Yes
- No
- Don't know

B23. Do you know where you can get the hepatitis B vaccine?

- Yes, please specify:
- Don't know

B24. How long ago was the last time you had a general health check?

B25. When was your health checkup, including a hepatitis B screening test?

- Within 6 months
- 6 months 1 year ago
- Over 1 year
- Have a health check but do not have a hepatitis B screening test
- No health check (did not participate in required annual occupational health check or self-paid)

B26. Is this HBV screening part of a routine health checkup or per your own request?

- Self-request
- According to health agencies

B27. When was your health checkup, including a hepatitis C screening test?

- Within 6 months
- 6 months 1 year ago
- Over 1 year
- Have a health check but do not have a hepatitis C screening test
- No health check (did not participate in required annual occupational health check or self-paid)

B28. Is this HCV screening part of a routine health checkup or per your request?

- Self-request
- According to health agencies

B29. Do you have liver disease AND are infected with hepatitis B or C virus?

- Yes, liver disease and HBV
- Yes, liver disease and HCV
- Yes, liver disease and have both HBV and HCV
- Have liver disease but not related to HBV or HCV
- No liver disease

B30. Are you infected with hepatitis B virus or C virus?

- Infected with HBV
- Infected with HCV
- Infected with both HBV and HCV
- Infected with another virus, not HBV or HCV → GO TO PART C.
- No → GO TO PART C
- Don't know → GO TO PART C

B31. Do you have test results or a doctor's confirmation of this infection?

- No
- Yes

-- END OF PART B --

C1. Are you currently infected with hepatitis B, C or both?

- Yes
- No → SKIP TO QUESTION C4.

C2. Do you remember when did you discover that you were infected with hepatitis B, C or both?

- Don't remember
- Hepatitis B since ...
- Hepatitis C since ...

C3. How did you know your infection status?

- Annual health check
- Self-paid health check
- Blood donation or health check for other condition

- Detected when I had symptoms of liver disease
- Don't remember
- C4. Do you have any diseases (excluding hepatitis B, C)?
 - Yes
 - No
- C5. Have you ever had a blood transfusion?
 - Yes, please specify
 - Never
- C6. Have you ever had a tattoo (including a cosmetic tattoo)?
 - Yes
 - No
- C7. Have you ever used narcotics?
 - Yes
 - No
- C8. Have you ever shared needles with others?
 - Yes
 - No
- C9. Are you taking immunosuppressive drugs or chemotherapy or steroids?
 - · Yes, specifically
 - No
 - Unknown
- C10. Have you ever been in a relationship with a prostitute?
 - Never
 - Rarely
 - Usually
- C11. Are you in the LGBT group (gay, bisexual, transgender)?
 - Yes
 - No
- C12. Do you often use condoms when having sex?
 - No
 - Occasionally
 - Regularly
- C13. Has the person who lived with you been tested for hepatitis B and C?
 - Tested
 - Haven't done it yet
- C14. Have you had the full dose of hepatitis B vaccine (3 doses)?
 - Already
 - Never injected
 - In between shots
- C15. How long ago did you get the hepatitis B vaccine?
- C16. How long have you been in clinical practice? five
- C17. Please name up to 5 tasks with direct contact with the patient's blood, secretions or body fluids... that you do most often (eg: injection, using sharp instruments or performing procedures)

invasive surgery, direct blood-removal cleanup, etc.), how often are this contact and gloves are used?

Task	Frequency of task	Frequency of using glove when performing a task
	Everyday2-3 times/week2-3 times/monthonce/month or none	AlwaysSometimesNone

C18. What position do you work in the department/room/hospital?

C19. What is your opinion about the following statement: "Medical staff MUST KNOW the hepatitis B and C infection status of the patients they come into contact with"?

- Totally agree
- Agree
- No opinion
- Disagree
- Totally disagree

C20. What is your opinion about the following statement: "The hospital MUST KNOW the status of its employees with hepatitis B and C virus infection"?

- Totally agree
- Agree
- No opinion
- Disagree
- Totally disagree
- -- END OF SECTION C -