

Participant ID:					

Date:

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RAINDrOP: RANdomised IRoN Deficiency anaemia management Pilot**Follow up Care Use Questionnaire**

These questions help us to understand your use of health and social services because of your iron deficiency anaemia.

Iron deficiency anaemia

Some people with iron deficiency anaemia do not notice any problems or limitations. Other people notice problems, which may include:

- tiredness and lack of energy (lethargy)
- shortness of breath
- noticeable heartbeats (heart palpitations)
- a pale complexion.

More information is available from the study team, your doctor or the following website:
<https://www.nhsinform.scot/illnesses-and-conditions/nutritional/iron-deficiency-anaemia>

Please read the questions carefully and write your answers in the spaces provided. If you cannot remember things exactly please give your best estimate. Feel free to add any of your own notes.

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Hospital visits

1. a) Thinking back **over the past three months**, how many times have you been into **hospital because of your anaemia?**

	Number of visits	Reason for visit/s
For outpatient appointment		
For daycase appointment (for example: to see a doctor or to have a procedure carried out; no overnight stay)		
Overnight hospital stay		

b) If you had an overnight hospital stay, how many nights did you stay?

Please tell us for each stay:

Stay 1 _____ Stay 2 _____ Stay 3 _____ Stay 4 _____

c) If you had a hospital visit or overnight stay, did you receive any of the following?

(Please tick either yes or no)

	Yes	No
Iron "infusion" with a needle		
Iron tablets or medicine		
Blood transfusion		

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Community health services

2. Thinking back **over the past three months**, how many times have you seen or spoken to your **GP because of your anaemia?**

	Number of visits	Reason for visit/s
At the surgery?		
At home?		
Over the phone*? *Please only include calls made by you; not any received from your GP		

3. Thinking back **over the past three months**, how many times have you seen or spoken to a **nurse** from your local surgery **because of your anaemia?**

	Number of visits	Reason for visit/s
At the surgery?		
At home?		
Over the phone*? *Please only include calls made by you; not any received from the nurse		

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4. Thinking back **over the past three months**, how many times have you used **any other health or social care because of your anaemia?**

	Number of visits	Reason for visit/s
A Home Help / Paid Care Worker?		
A Physiotherapist?		
An Occupational Therapist?		
A Speech Therapist?		
Other*?: *Please state		