APPENDIX 5

Questionnaire
**OESOPHAGOSTOMUM QUESTIONNAIRE**

1. Do you recognise patients with the symptoms and signs described in Chapter 2?
   a. Dapaong tumour?  
      Y  N
   b. Multinodular disease?  
      Y  N

2. *Do you have ultrasound equipment at your health facility?*  
   Y  N

3 a. Do you use stool smears for diagnosing intestinal infections?  
    Y  N
   b. Do you find a high prevalence of hookworm eggs?  
    Y  N

4. Do you culture stool for helminth larvae identification?  
   Y  N

5. *Do you routinely use albendazole to treat intestinal helminth infections?*  
   Y  N

6. Are there wild monkeys in your hospital catchment area?  
   Y  N

Please print
Name and position: .................................................................

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Full hospital address: .................................................................

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If there is anything else you think would be helpful, please write it here or on the reverse.

Thank you very much for your time. Please send to:
Dr A. M. Polderman. Department of Parasitology, LUMC, POBox 9600, 2300RC Leiden, The Netherlands, Europe. <a.m.polderman@LUMC.nl>