

**LEAD TEST INFORMATION PANEL**

**LT**

The QUESTIONNAIRE FOR CHILDREN UNDER FIVE, QUESTIONNAIRE FOR CHILDREN 5-17 and the INDIVIDUAL QUESTIONNAIRE for men and women should be completed prior to completing this questionnaire.	
<b>LT1. Cluster number</b> <input type="text"/> <input type="text"/> <input type="text"/>	<b>LT2. Household number</b> <input type="text"/> <input type="text"/>
<b>LT3. Child's line number</b> <input type="text"/> <input type="text"/>	<b>LT4. Child's name</b> NAME: _____
<b>LT5. Month and year of child's birth</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (month) (year)	<b>LT6. Phlebotomist's name and number:</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> NAME: _____
<b>LT7. Mother's / Caretaker's name</b> NAME: _____	<b>LT8. Mother's / Caretaker's line number:</b> <input type="text"/> <input type="text"/>
<b>LT9. Interviewer's name and number:</b> NAME: _____ <input type="text"/> <input type="text"/> <input type="text"/>	<b>LT11A. Record the date:</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (day) (month) (year)
<b>LT10. Supervisor's name and number:</b> NAME: _____ <input type="text"/> <input type="text"/> <input type="text"/>	<b>LT11B. Record the start time</b> hour <input type="text"/> <input type="text"/> minute <input type="text"/> <input type="text"/>

**LT12.** National Statistics Office of Georgia and National Center for Disease Control of the Ministry of Health is carrying out lead testing for children age 2-7 years old, with support from UNICEF. Participation in the research is voluntary and data are confidential. A medical specialist will take a small amount of venous blood from your child to determine the lead levels.

The blood sample will be analyzed by the laboratory of National Institute of Health of Italy in Rome. You will be notified of the results in approximately 2 months. Once you receive the results, you may be asked additional questions to help us understand possible sources of lead contamination. The National Center for Disease Control will notify you about it by phone in advance.

Market price of lead testing in Georgia is 100-120 GEL but your child will be tested **for free** at one of the best laboratories of Europe, using the most advanced Method. Per the rules of the study, only **one** child from a family will be tested. If there is more than one eligible child between 2-7 years in the family, a child for testing is selected by chance. If the results would indicate a lead contamination, the National Center for Disease Control will provide medical consultation **free of charge**.

You will find details in the form handed over to you titled Conditions of Participation in the Lead Test.

**Do you agree to participate in this research, and so give consent to take a blood sample from \_\_\_\_\_, by signing the following consent statement?**

If you agree now to participate and you change your mind later, please let us know and we will stop.

**Consent to participate in the research:** I have familiarized myself with the conditions of participation and I consent my child to participate in the study:

Name/surname \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_ 2018

**Applicable only in case a person is illiterate:** I confirm that the person \_\_\_\_\_ was provided with accurate explanation on conditions of participation in the study and he/she consent participation of his/her child.

Name/surname \_\_\_\_\_ signature \_\_\_\_\_ date \_\_\_\_\_ 2018

Mother's/caretaker's consent obtained .....	1
Mother's/caretaker's consent NOT obtained .....	2
Mother/caretaker absent .....	3
	2⇒ LT15
	3⇒ LT15

<b>LT13. Result of blood sample extraction</b>	BLOOD EXTRACTED ..... 1 CHILD NOT PRESENT ..... 2 CHILD DID NOT ALLOW TO TAKE BLOOD ..... 3 MOTHER/CARETAKER CHANGED HER/HIS MIND ..... 4 OTHER (SPECIFY)..... 6	2⇒LT15 3⇒LT15 4⇒LT15 6⇒LT15
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<b>LT14. Mother's/caretaker's contact information</b>	Telephone: _____ Email: _____
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<b>LT15A. Record the date</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (day) (month) (year)	<b>LT15B. Record the end time</b> hour <input type="text"/> <input type="text"/> minute <input type="text"/> <input type="text"/>
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**INTERVIEWER'S OBSERVATIONS**

**PHLEBOTOMIST'S OBSERVATIONS**

**SUPERVISOR'S OBSERVATIONS**



## Conditions of Participation in the Lead Test



საქართველოს ჯანდაცვის  
და სოციალური დაცვის  
წარმოშობის  
სამინისტრო



National Statistics Office of Georgia and the National Center for Disease Control and Public Health, from the Ministry of Health, is carrying out research on lead testing for children age 2-7 years old, with support from the United Nations Children Fund (UNICEF).

Information on the study is given below. Should you have any question, please do not hesitate to reach Dr. Lela Shengelia – Head of Maternal and Child Health Division of the National Center for Disease Control. Her contact information is indicated at the bottom of this page.

### **Purpose of the research**

The research aims at measuring the lead level in children's blood. Lead is very harmful for child's health because it may affect the child's intellectual development and capacity, and cause other disorders. It is impossible to know if a child is exposed to lead without a blood test.

### **Testing process**

Participation in the research is voluntary. A medical specialist will take venous blood from your child (1.5 milliliters) upon your consent, so that the blood lead level can be determined.

The blood sample will be sent to the laboratory of National Institute of Health of Italy, in Rome. The results will be notified to you by phone in approximately two months. Specialists from the National Center for Disease Control and Public Health may ask you in the future additional questions to determine possible sources of lead exposure. You will be notified by phone in advance.

### **Benefit to participants in the research**

The market price of lead testing at a private laboratory in Georgia is 100-120 GEL. In this research, your child will be tested **for free** at one of the best laboratories of Europe using the most advanced method (Inductively Coupled Plasma Mass Spectrometry – ICP MS), which is not available at any laboratory of Georgia.

Per the rules of the research, only **one** child from a family will be tested. If there is more than one child in the family, a child for testing will be selected automatically by chance. If the results indicate elevated lead level in child's blood, the National Center for Disease Control and Public Health will provide medical consultation **free of charge**.

### **Expected Risk**

Taking a blood sample is associated with a low risk. A child may feel a slight pricking sensation, while after drawing blood a small redness may appear for a while.

### **Importance of the research for the country**

This research will help the state to protect population from lead and associated diseases.

### **Sharing the results**

Individual results of the testing and your contact information will be available only for National Statistics Office of Georgia, UNICEF and the National Center for Disease Control and Public Health. No private data on members of your family will be shared with any third party.

For additional information please contact Dr. Lela Shengelia Tel.: +995 591 70 67 94 | email: [L.shengelia@ncdc.ge](mailto:L.shengelia@ncdc.ge)

For information on ethical issues of the research please contact the chair of bioethical council of NCDC Ms. Marina Topuridze. Tel: 591 706 781