

Number:....





## <u>Urine Testing for HPV: the UVC pilot study – Questionnaire Version One, DATE</u>

Before completing this questionnaire please make sure you have read the information sheet. By completing this questionnaire you consent to take part in the study. To complete the questionnaire please circle the answer most applicable to you in each question, tick the correct box or write in the space provided.

Previous Knowledge of HPV				
Before today had you previously heard of HPV (Human Papillomavirus)?	Yes	No	Unsure	

## About the tests today

Would you have liked more information about how to provide the urine sample? Yes No

Would you have liked more information about how to use the self-sampling device? Yes No

How much do you agree with these statements? Please circle the appropriate number for each statement.

now much do you agree with these statements: Flease there t	Strongly Disagree	· Hulli	ici ioi c	acii sta	Strongly Agree
I feel confident providing a urine sample to be tested for HPV.	1	2	3	4	5
I would worry I had not provided the urine sample correctly.	1	2	3	4	5
I am worried how accurate the result from the urine sample is.	1	2	3	4	5
I feel confident I used the self-sampling device correctly.	1	2	3	4	5
I would worry I had not used the self-sampling device properly.	1	2	3	4	5
I am worried about how accurate the result from the self-sampling device is.	1	2	3	4	5
I would prefer a health professional to take my sample than to take a sample myself.	1	2	3	4	5
A sample taken by a health professional is more reliable.	1	2	3	4	5
I would prefer to take my own sample.					
In the future I would be happy to use only a urine sample to be tested for HPV.	1	2	3	4	5
In the future I would be happy to be tested for HPV from a sample taken by myself using the vaginal HPV self-sampler.	1	2	3	4	5
I felt I understood the instructions that were given to me.	1	2	3	4	5
I was happy to provide three samples.	1	2	3	4	5

Urine test Using self –sampler Clinician taken sample What would be your second choice? Urine test Using self –sampler Clinician taken sample Which of these words describes how you felt about providing a urine sample? (Please circle all that apply) Uncomfortable Reliable It was easy Embarrassed Private Convenient Which of these words describes how you felt about using the self-sampling test? (Please circle all that apply) Uncomfortable Embarrassed Private Reliable Convenient It was easy Which of these words describes how you felt about having a health professional take a sample? (Please circle all that apply) Uncomfortable Reliable Convenient It was easy Embarrassed Private About you What age group do you belong to? (shown in years) 24 and under 25-29 30-34 35-39 40-44 45-49 50-54 55-59 60-64 65-69 70+ Which of the following best describes your ethnicity? Please circle your answer below White British Indian Caribbean White and Black Caribbean White Irish Pakistani African White and Black African White and Asian Any other White Bangladeshi Any other Black background background Any other Asian Any other mixed Chinese background background Any Other Ethnic Group (please provide details) ...... Prefer not to say How would you best describe your employment status? **Employed** Unemployed Student Full time parent Retired Which of these qualifications do you have? Please circle all that apply GCE O-level/GCSE A-level or equivalent Undergraduate Postgraduate Other (please specify) ...... Thank you for taking the time to complete this questionnaire. Please place it in the white envelope given to you and put it in the box marked 'Questionnaires' or hand it in the envelope

to the clinic receptionist.

Which test would you prefer to take?