

Appendix-A

Questionnaire

General information of the patient

- ID No of the Patient:
- Name of the patient:
- Present address of the patient:
- Permanent address of the patient:.....
- Contact Number:
- Place of data collection:
- Date of data collection:

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Age (years)

Parity

Abnormal uterine bleeding

BMI:Kg/m²

BP:...../.....mmHg

Urine iodine:..... µg/L

Thyroid profile:

FT3:..... pg/ml

FT4:..... ng/ml

TSH:..... µIU/ml

Appendix-B

Consent Form

After being fully informed about the objectives or the study on. “Status of Thyroid Hormone Disorder and its complications among the women of Reproductive Age in urban Chattogram” consequences of the study and right to withdraw myself from the study at any my time or any purpose, what so ever; I am hereby giving consent to participate in the study conducted by Dr. Nahin Chowdhury. MPH student of Chattogram Veterinary and Animal Sciences University, Chattogram. I fully recognize that my participation in the research program will generate valuable medical information that might be used for interest of patient in future.

Hospital authority, doctors or any other staff will not be responsible for any adverse consequence during the study.

I shall try my best to comply with the instruction given by the investigator throughout the whole period of study.

Signature..... Thumb impression

Date.....