

Epilepsy Awareness and Knowledge Questionnaire for Medical Students

Consent Form

You are invited to participate in a research study aimed at assessing the level of awareness and knowledge about epilepsy among medical students in the UAE. Before agreeing to participate, it is important that you read and understand the following information.

Purpose of the Study

The purpose of this study is to gain insights into the awareness, knowledge, and attitudes of medical students regarding epilepsy diagnosis and treatment.

Study Procedures

If you agree to participate, you will be asked to complete an anonymous questionnaire that will take approximately 5-10 minutes to finish.

Risks and Benefits

Risks: There are no known risks associated with participating in this study.

Benefits: Your participation will contribute to a better understanding of epilepsy awareness among future healthcare professionals.

Confidentiality

All the information collected will be anonymous and confidential. No individual identities will be disclosed in any reports or publications resulting from this study.

Voluntary Participation

Participation in this study is completely voluntary. You are free to decline to participate or to withdraw at any point during the study without any penalty.

Consent

By choosing "Yes", you acknowledge that:

1. Would you like to participate in the survey?

☐ Yes

☐ No

2. Gender of the participant *

- ☐ Male
- ☐ Female

3. University of the participant *

- ☐ DMCG
- ☐ MBRU
- ☐ Sharjah university
- ☐ UAEU
- ☐ RAK
- ☐ GMU
- ☐ Ajman University

**4. Phase in Medical School ***

- ☐ Foundation
- ☐ Preclinical Phase
- ☐ Clinical phase
- ☐ Internship
- ☐ Residency

5. Have you heard of or read about the disease called “epilepsy” or “Convulsive seizures”? *

- ☐ Yes
- ☐ No

6. Have you undertaken a neurology rotation? *

- ☐ Yes
- ☐ No

7. Did you know anyone who had epilepsy? *

- ☐ Yes
- ☐ No

8. **Do you think people with epilepsy can be employed in jobs like others? ***

- ☐ Yes
- ☐ No
- ☐ Not sure

9. **Do all patients with epilepsy have the same symptoms? ***

- ☐ Yes
- ☐ No
- ☐ Not sure

10. **Is Epilepsy only diagnosed in childhood? ***

- ☐ Yes
- ☐ No
- ☐ Not sure

11. **Is epilepsy a disease that can be treated?** *

- ☐ Yes
- ☐ No
- ☐ Not sure

12. **Status epilepticus is a prolonged seizure lasting more than:** *

- ☐ 2 minutes
- ☐ 5 minutes
- ☐ 10 minutes
- ☐ Not sure

13. **Could A person with epilepsy have a child?** *

- ☐ Yes
- ☐ No
- ☐ Not sure

14. **Can a person with epilepsy live alone? ***

- ☐ Yes
- ☐ No
- ☐ Not sure

15. **Is it acceptable to work with a person with epilepsy (colleague) at work? ***

- ☐ Yes
- ☐ No
- ☐ Not sure

16. **Would you feel confident in diagnosing a patient with epilepsy based on your current knowledge? ***

- ☐ Yes
- ☐ No
- ☐ Not sure

17. **Would you be interested in specializing in neurology or epilepsy care? ***

- ☐ Yes
- ☐ No
- ☐ Not sure

18. **If you had epilepsy and the physician instructed you not to drive, would you abide by his instruction? ***

- ☐ Yes
- ☐ No
- ☐ Not sure

19. **What are the causes of not following physicians' indications? (multiple answers are allowed) ***

- ☐ Public awareness
- ☐ Social reasons
- ☐ Financial reasons/Insurance coverage
- ☐ I do not see any reason to prevent patients with epilepsy from driving.

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