

Exposure to liquid detergent capsules

Liquid detergent capsules (or pods) designed for single-load use in laundry washers and dishwashers have become widely used in recent years and have resulted in reports of injuries and poisoning among young children. The Canadian Paediatric Surveillance Program is conducting a one-time survey to assess the extent to which paediatricians have observed this problem among Canadian children. **Your contribution is greatly appreciated.**

1. During the last 12 months, how many children have you observed or treated for problems related to exposure to single-load liquid detergent capsules?
 None Not relevant to my area of practice or subspecialty
 One More than one; specify the number: _____
- If you have not seen any cases, we thank you for completing this survey.***
2. Age group (for multiple cases, indicate the number that applies to each group):
 < 2 years 2-3 years 4-5 years >5 years
 3. Type of detergent capsule(s) (for multiple cases, indicate the number that applies to each type):
 Laundry liquid detergent capsule Dishwasher liquid detergent capsule Unknown
 4. In what setting did you see the child (children)? (For multiple cases, indicate the number that applies to each setting.)
 Office or outpatient clinic
 Hospital emergency department
 Hospital inpatient ward
 Other, specify: _____
 5. What type of exposure did the child (children) have? (Identify all that apply.)

Type of Injury	Number of cases seen
<input type="checkbox"/> Ingestion or exposure to alimentary tract	_____
<input type="checkbox"/> Dermal	_____
<input type="checkbox"/> Ocular	_____
<input type="checkbox"/> Other, specify: _____	_____
 6. What injuries/symptoms did the child (children) sustain? (Check all that apply.)

<input type="checkbox"/> Nausea	<input type="checkbox"/> Rash
<input type="checkbox"/> Vomiting	<input type="checkbox"/> Chemical burn: <input type="checkbox"/> skin <input type="checkbox"/> mouth/esophagus
<input type="checkbox"/> Conjunctivitis	<input type="checkbox"/> Pulmonary toxicity
<input type="checkbox"/> Keratitis	<input type="checkbox"/> CNS depression
<input type="checkbox"/> Corneal ulceration	<input type="checkbox"/> Other, specify: _____
 7. How did the child (children) access the capsule? What was the access point? (For multiple cases, indicate the number that applies to each.)
 In the original manufacturer's package, box or container
 From the inside of a laundry machine or dishwasher
 Capsule found on floor or left lying around
 Unknown
 Other, specify: _____
 8. Indicate the treatment and disposition of the child (children) (for multiple cases, indicate the number that applies to each):
 Treated and sent home without further follow-up required Admitted to hospital
 Further treatment or follow-up required after patient sent home Died
 9. Provide additional comments or detail on medical and surgical therapy and describe any long-term health outcomes or problems: _____

Please return this survey with your monthly reporting form. Thank you for your participation.

08/2014