**Additional file1** : Questionnaire addressed to animal health professionals to record the cases of adverse effects due to veterinary drug in an animal or human

<table>
<thead>
<tr>
<th>Questionnaire N°.........</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date :……/……/………..</td>
</tr>
</tbody>
</table>

**Identification**

1. You are a?
   - Private veterinary doctor
   - Public veterinary doctor
   - Veterinary nurse
   - Other (specify) ..................................................

1. Have you ever observed adverse effects of a veterinary drug in an animal after administration?
   - YES
   - NO

If yes, kindly fill form N°1

Did you report them?
   - YES
   - NO

If yes, to whom?
   - The ‘Directorate of Veterinary Service (DSV)
   - Wholesalers-Importers
   - National Veterinary Council
   - Local representatives of the Pharmaceutical industry
   - A depositary
   - Colleagues
   - Others (precise) .................................................................

If no, why?
   - Not sure that the adverse effects were due to the drug
   - There are no regulations on the notification of adverse effects
   - Unawareness on the attitude to take
   - Lack of feedback information
   - Other (precise) .................................................................

3- Have you noticed a lack of efficacy of a particular drug upon administration?
   - YES
   - NO

If yes, kindly fill form N°2

Did you report the concerned lack of efficacy?
If yes, to whom?

- The ‘Directorate of Veterinary Service (DSV)
- Wholesalers-Importers
- National Veterinary Council
- Local representatives of the Pharmaceutical industry
- A depositary
- Colleagues
- Others (precise) …………………………………………………………………………………

If no, why?

- Not sure it was due to the drug
- There are no regulations on the reporting of adverse effects
- Unawareness on the attitude to take
- Lack of information feedback
- Other (precise) …………………………………………………………………………………

4- Have you ever had adverse effects after being exposed to a veterinary drug?

- YES
- NO

If yes, kindly fill form N° 3.

Did you report them?

- YES
- NO

If yes, to whom?

- Hospital
- The ‘Directorate of Veterinary Service (DSV)
- Colleague
- Human pharmacy
- National veterinary Council
- Veterinary pharmacy
- Human pharmacy that sells veterinary drugs
- Local representative of the pharmaceutical industry
- Others (precise) …………………………………………………………………………………

If no, why?

- Not sure it was due to the drug
- There are no regulations on reporting adverse effects
- Unawareness on the attitude to take
- Lack of information feedback
- Other (precise) …………………………………………………………………………………
5- Have you ever heard of a case of intoxication or adverse effects occurring in a human that was exposed to a particular veterinary drug?

☐ YES
☐ NO

If yes, kindly fill **form N° 3**

6- In your opinion, is it important to report cases of adverse effects or suspected cases of lack of efficacy of veterinary drug?

☐ YES
☐ NO

If yes, why?

☐ Establishment of a cause-and-effect relationship between the uses of a drug and the occurrence of adverse effects
☐ Permits that corrective action be taken by the competent authorities for the improvement of veterinary drugs on the market
☐ Protection of animal health and public health
☐ Withdrawal of defective drugs from the market
☐ Provision of care for victims
☐ Environmental protection
☐ Reassessment of the risk/benefit balance of the incriminated drugs
☐ Others (precise) ………………………………………………………………………………………………

If no, why?

☐ Veterinary drug misuse
☐ Uncertainty
☐ Other(precise)……………………………………………………………………………………

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**Form N°1 :** Cases of serious or unexpected adverse effects observed in animals and possibly due to a veterinary drug

<table>
<thead>
<tr>
<th>Year</th>
<th>Name of drug</th>
<th>Active ingredient(s)</th>
<th>Used as on the leaflet</th>
<th>Animal species</th>
<th>Number</th>
<th>The adverse effects observed were:</th>
<th>How the disease evolved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Evolution type</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ Healing with no sequelae</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ Healing with sequelae</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ Death</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ Unknown</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ No</td>
</tr>
</tbody>
</table>
Form N°2: Cases of suspected drug ineffectivity with respect to the expected efficacy on an animal and possibly due to a veterinary drug

<table>
<thead>
<tr>
<th>Year</th>
<th>Name of drug</th>
<th>Active ingredient(s)</th>
<th>Used as on the leaflet</th>
<th>Animal species</th>
<th>Nu mber</th>
<th>Inefficacy was suspected upon observing the following:</th>
<th>How the disease evolved</th>
<th>Evolution type</th>
<th>Nu mber</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ Insufficient protection from disease</td>
<td>□ Healing with no sequelae</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ Intensification of disease or symptoms</td>
<td>□ Healing with sequelae</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ An insufficient therapeutic effect after</td>
<td>□ Death</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>administering the usual doses</td>
<td>□ Unknown</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ No therapeutic effect</td>
<td>□ Healing without sequelae after treatment was changed</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□ Others</td>
<td>□ Healing with sequelae</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

□ Yes  □ No  □ I don’t know

□ Insufficient protection from disease
□ Intensification of disease or symptoms
□ An insufficient therapeutic effect after administering the usual doses
□ No therapeutic effect
□ Others

□ Yes  □ No  □ I don’t know

□ Insufficient protection from disease
□ Intensification of disease or symptoms

□ Healing with no sequelae
□ Healing with sequelae
□ Death
□ Unknown
□ Healing without sequelae after treatment was changed
□ Healing with sequelae after treatment was changed
□ Healing with no sequelae
□ Healing with sequelae
Form No3 : Case of intoxication or adverse effects observed in human and possibly ascribed to a veterinary drug

<table>
<thead>
<tr>
<th>Record N°.....</th>
<th>Date :.............</th>
<th>Questionnaire N° : ......</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Case N°</th>
<th>Sex</th>
<th>Age</th>
<th>Occupation</th>
<th>Product involved</th>
<th>Route of exposure</th>
<th>Adverse effects</th>
<th>Evolution of the disease</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Name............. Pharmaceutical formulation...... Active ingredient(s) ... Pharmaceutical class ............</td>
<td></td>
<td></td>
<td>□Healing with no sequelae □Healing with sequelae □Death □Unknown</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Name............. Pharmaceutical formulation...... Active ingredient(s) ... Pharmaceutical class ............</td>
<td></td>
<td></td>
<td>□Healing with no sequelae □Healing with sequelae □Death □Unknown</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Name............. Pharmaceutical formulation...... Active ingredient(s) ... Pharmaceutical class ............</td>
<td></td>
<td></td>
<td>□Healing with no sequelae □Healing with sequelae □Death □Unknown</td>
</tr>
</tbody>
</table>