

APPENDIX A

Part I Verbal Explanation to Parent(s)

My name is (the investigator's name) and I am a nurse. I am conducting some nursing research. I would like to introduce my research and see whether you are willing to let your child participate. Can I explain to you now?

The study is about fear of the children who are 6 to 12 years old when they are hospitalized. Because your child is..... years old, he/she is included in the study. I want to get information from interviewing your child, your childs medical record and you. The interview time is about 20 minutes and I will ask her/him about how is frightened by hospitalization. All the information I get will remain confidential and used only for the purpose of the study. The publication of the study will not reveal you or your child's name.

The study has no known risk to he/she your child. Conversely, you can know your child's fear level and give it the necessary attention.

The participation to the study is voluntary. Your refusal or failure that to comply will not result in any penalties or affect the quality of health care your child receives.

Anytime, you change your mind, you can withdraw from the study by verbally expressing this wish to me. Additionally, you have the right to refuse to provide any specific piece of information.

If you are willing to cooperate with me, we can select a suitable time for interviewing your child.

Part II Verbal Explanation to Child

I am nurse. I am interested in finding out how children your age are frightened by hospitalization. I would like to interview you for about 20 minutes and ask you some questions about how much you fear any item. You can say you fear something not at all, a little, or a lot.

The information will help us to understand why children like you are frightened when hospitalized and help you to be less afraid of the hospital.

Participation to the study is voluntary and at anytime you can withdraw from the study. The information you provide will remain confidential. Would you like to cooperate with me?

APPENDIX B

Part I Demographic Data Form

Subject identification number	Date
Data of the child	
Ageyears	
Age years	R .
Gender	
(1) Male	<u> </u>
(2) Female	
Grade	
(1) Kindergarten	
(2) First grade	
(3) Second grade (4) Third grade	
(5) Fourth grade	
(6) Fifth grade	
(7) Sixth grade	
	S (G) .
Medical diagnosis	<u>/</u>
Tow love the discuss to a town	
How long the disease has been pr	esent and diagnosed?
$(2) \Rightarrow 3 \text{ months}$	
27 - 0 months	
Admission date	·
Length of hospitalization	
day	'S
Numbers of provious admission (or	volude the propert adminstral
Numbers of previous admission (ex	
- CTINOS	,

Data of the parents
Father
Age years
Education level (1) Primary school (2) Secondary school (3) High school (4) College level or university level or above
Occupation
Mother Age years
Education level (1) Primary school (2) Secondary school (3) High school (4) College or university level or above
Occupation
Data of the family
Living area of family (1) Rural (2) Urban
Data collector's name Comments:

Part II Child's Medical Fear Scale

Directions to the child: I am going to ask you some questions about how you are frightened by the events which happen in the hospital. I want you to tell me how afraid you are of each of the sentences I read to you. For instance, if I say "I am afraid of throwing up ", I want you to tell me if you are not at all afraid, a little afraid or a lot afraid of throwing up in hospital. OK? Do you have any question before we begin?

Not at all=1 a little=2

Procedural Procedural Not at all A little A lot I am afraid of taking medicine I am afraid of getting a shot 3 I am afraid of having my finger stuck...... 3 I am afraid of having the doctor or nurse look down my throat..... 3 I am afraid of the doctor putting a tongue blade in my mouth..... 1 3 **Environmental** I am afraid of being in the hospital 1 2 3 I am afraid of having to stay in the hospital a long time.... 2 3 I am afraid I might die in the hospital..... 3 I am afraid of being away from my family 2 3

Intraperso	ona l	Not at all	A little	A lot
I am afra	id of hurting myself.	1	2	3
	id of seeing I come out of me	1	2	3
I am afra	id of throwing up	1	2	3
	id I will cry I get hurt	1	2	3
÷			7	_
Interperso	ona l			
	id the doctor or e will tell me someth	ing		
is wr	ong with me	1	2	3
	d the doctor and nur not tell me what the			
	going to do to me		2	3
	d of missing school any days	7 1	2	3
- 01		-	_	•

APPENDIX C

CALCULATION OF SAMPLE SIZE

The sample size is decided by a formula:

N=n(p+1) (McLaughlin & Marascuilo, 1990; P252)

N: Sample size;

p: Number of independent variables;

n: Obtained from checking a table according to χ , 1- β , f, & p.

 $\alpha = .05, 1-\beta = .80, R = .10.$

 $f = \sqrt{R} / (1-R) = .10/.90 = .33.$

Checking the table, n = 18.

N=16*(4+1)=90.

APPENDIX D

List of the Experts for the Assessment
of Validity of the Child's Medical Fear Scale

- 1. Assistant Professor Dr. Ratanawadee Chontawan
- 2. Assistant Professor Dr. Chawapornpun Chanprasit
- 3. Assistant Professor Dr. Prakin Suchaxaya
- 4. Assistant Professor Dr. Seepan Kantawang
- 5. Assistant Professor Dr. Darawan Tapinta

CURRICULUM VITA

Surname, name

Yan Jin

Date of birth

September 10, 1972

Place of birth

Wancheng, Hunan, P.R.China

Educational Background

1990-1993 Bachelor degree in nursing science

(equivalent) from Hunan Medical University

(HMU).

1987-1990 Diploma of nursing in the Nursing School of HMU.

Working Experience

1993-1995 Clinical instructor and staff nurse in the Pediatric department of the First Hospital affiliated to HMU.

1990-1993 Staff nurse in the surgical department of the First Hospital affiliated to HMU.