



**2.2 Are there suspected sources of exposure among those below? (check all that apply)**

- Broken compact fluorescent bulbs, fluorescent tubes, mercury bulbs, lighted signs
- Broken thermometers (older type), thermostats, scientific measuring instruments
- Use of costume jewellery or imported depigmentation, anti-aging or therapeutic products that do not respond to Canadian regulatory requirements
- Use of chemical reagents
- Other (specify): \_\_\_\_\_
- No
- DNK/DNR\*

**3. OTHER INFORMATIONS**

**3.1 What recommendations were provided for the patient relative to the result of a previous test, if any?**

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**3.2 Indicate any other pertinent information, clinical or otherwise:**

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\*DNK: Does not know. DNR: Did not reply.

Return the completed questionnaire by confidential fax to  
Dept. of Public Health at 1 866 867-8026