DONGOLA UNIVERSITY — FACULTY OF MEDICINE

Research Questionnaire: Prevalence & Risk Factors of Heartburn Among Medical Students

Dongola Locality, Northern State, Sudan | Academic Year 2026 – 2027

Informed Consent & Confidentiality: Dear Student, you are invited to participate in this academic research investigating heartburn, dietary habits, and student well-being. Participation is completely voluntary. All data collected will remain strictly confidential, anonymous, and used solely for medical research purposes. By filling out this form, you consent to participate.

SECTION A: Demographics & Anthropometrics [Part 1 / 3]

1. Age (in completed years): .....

2. Sex: ☐ Male ☐ Female

3. Academic Level: ☐ Y1 ☐ Y2 ☐ Y3 ☐ Y4 ☐ Y5

4. Measured Height (cm): .....

5. Measured Weight (kg): .....

6. Residence Type: ☐ University Hostel ☐ Family Home

Eligibility Check (Exclusion Criteria): Have you ever been diagnosed with structural heart disease, undergone gastric/abdominal surgery, or do you suffer from known chronic liver/renal failure? ☐ **NO** (Proceed) ☐ **YES** (Stop questionnaire)

SECTION B: Dietary Habits & Lifestyle Behaviors [Part 2 / 3]

Dietary & Lifestyle Parameter	Never / Rarely	1–2 Days / Week	3–4 Days / Week	5–7 Days / Week
Late-Night Eating: Eating heavy meals within 2 hours before lying down/sleeping?	☐	☐	☐	☐
Fast Food / Fried Meals: Consuming high-fat, deep-fried, or commercial fast food?	☐	☐	☐	☐
High Caffeine Intake: Drinking >2 cups/day of strong coffee, tea, or energy drinks?	☐	☐	☐	☐
Spicy / Acidic Foods: Consuming spicy food, chili, citrus fruits, or carbonated soda?	☐	☐	☐	☐
Skipping Breakfast / Irregular Meals: Having prolonged fasting periods during study hours?	☐	☐	☐	☐

Smoking Status:

☐ Non-smoker ☐ Cigarette ☐ Shisha/Waterpipe

☐ Electronic

Physical Activity Level (≥30 mins exercise):

☐ Inactive (<1 day/wk) ☐ Moderate (1–2 days/wk)

☐ Active (≥3 days/wk)

SECTION C: Heartburn & Reflux Symptoms Assessment (GerdQ Diagnostic Tool) [Part 3 / 3]

*Instructions: Please think about your symptoms over the **PAST 7 DAYS** and select ONE box per question.*

GerdQ Question / Symptom Description	0 Days	1 Day	2–3 Days	4–7 Days
1. Burning Sensation (Heartburn): How often did you have a burning feeling behind your breastbone?	☐ (0)	☐ (1)	☐ (2)	☐ (3)
2. Regurgitation: How often did you have stomach contents (liquid or food) moving upwards to your throat or mouth?	☐ (0)	☐ (1)	☐ (2)	☐ (3)
3. Epigastric Pain: How often did you have pain in the center of the upper stomach? *(Reversed score)*	☐ (3)	☐ (2)	☐ (1)	☐ (0)
4. Nausea: How often did you suffer from nausea or feeling sick in the stomach? *(Reversed score)*	☐ (3)	☐ (2)	☐ (1)	☐ (0)
5. Sleep Disturbance: How often did you have difficulty getting a good night's sleep because of heartburn/regurgitation?	☐ (0)	☐ (1)	☐ (2)	☐ (3)
6. Over-the-Counter (OTC) Meds: How often did you take extra non-prescription medication (e.g., antacids like Rennies, Gaviscon, Omeprazole)?	☐ (0)	☐ (1)	☐ (2)	☐ (3)

SECTION D: Academic Stress, Sleep & Quality of Life Impact [Supplemental]

1. Self-Perceived Academic Stress Level:

☐ Mild ☐ Moderate ☐ High ☐ Severe / Burnout

2. Average Nightly Sleep Duration:

☐ <5 hours ☐ 5–7 hours ☐ >7 hours

Impact Parameter	Not at all	Mild	Moderate	Severe
Study & Academic Performance: How much do stomach symptoms impair your concentration or ability to study during exams?	☐	☐	☐	☐
Class Attendance: Have you ever missed lectures or clinical rotations due to severe heartburn or stomach discomfort?	☐	☐	☐	☐

Thank you for your valuable time and participation!
Please ensure all questions are answered before submitting this form to the research team.