



Associazione Tessile e Salute

Questionnaire for dermatological problems related to the use of textile articles, shoes, leather accessories.

(please fill out and send to: direzione@tessileesalute.it)

Name _____ Surname _____ Age _____ Sex _____

Telephone number/e-mail address: _____

1. Problem features:

- Redness
- Edema
- Blisters

2. Body areas involved:

_____ (describe the areas and the extent of the reaction)

3. Type of garment related to the skin reaction:

_____ (specify)

4. Has the reaction developed following the first contact with the garment?

yes no

5. Had the item been washed after purchase (before its first use)?

yes no

6. Following the skin reaction, have you already performed a dermatological examination?

yes no

7. If yes, please indicate the doctor's diagnosis:

8. Do you want to send us the garment in question to perform in-depth analysis?

yes no



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If yes, we specify that the costs of the analyzes will be borne by the Textile and Health Association and that the garment will no longer be usable after the tests.

In respect of privacy, attach any medical report (if available).

I have read and accept the privacy policy

Date

Signature