Appendix to Matilde Risopatron Berg, Ylva Sahlin. Follow-up of postpartum anal sphincter injuries. Tidsskr Nor Legeforen 2020; 140. doi: 10.4045/tidsskr.19.0361. This appendix is a supplement to the article and has not undergone editorial revision.

Place an X by the responses that apply to your department: several responses to the same

question are possible.
1. When third and fourth degree ruptures are detected after a vaginal birth, is the woman given written information from the maternity department on discharge? If so, we would like to see it in the form of a pdf attachment or attached image.
– Yes, they receive written information:
– No, they do not receive written information:
2. After primary suturing of a third or fourth degree rupture, are women routinely called in for a check-up, and in the event how long after the birth?
– No, there is no routine check-up at the hospital:
– Yes, after 6 weeks:
– Yes, after 3 months:
– Yes, after 6 months:
– Yes, after 12 months:
– Other: give further details here:
3. When a third or fourth degree rupture is detected, do women receive verbal information about symptoms that may develop subsequently?
– No, there is no fixed procedure for providing information about symptoms that may arise:
– Yes, about anal incontinence in the form of gas or faecal leakage:
– Yes, about dyspareunia:
- Other: give further details here:
4. Are women given information about who to turn to if they develop distressing symptoms?
- No:
– Yes, their GP:
– Yes, the gynaecology department:

5. If a woman with known third or fourth degree rupture is examined as an outpatient because of anal incontinence or dyspareunia, what steps may be taken?

- Yes, other:

- Referral for physiotherapy:
- Referral to pelvic specialist:
- Referral to department of gastroenterological surgery:
- Referral to the department of gynaecology at major hospitals:
- Wait and see, make further appointment for follow-up:
- Other: give further details here: