**RECAP Translation Checklist**

**If your translation is not being performed by a translation company, please fill in this form and send to** [**CEBD@nottingham.ac.uk**](mailto:CEBD@nottingham.ac.uk)

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| **Please state the language and target population**  (e.g. Japanese for Japan): | | |
|  | | |
| **Translation step** | **Completed?** | **If no, please give details** |
| 1. **The text has been translated by 2 or more people who are:** |  |  |
| * 1. ­Fluent in the language RECAP is being translated into and English. | Yes  No |  |
| * 1. ­Familiar with the locality where the outcome measure will be used. | Yes  No |  |
| 1. **I have asked the following people about the words they use to describe terms within RECAP which may be difficult to translate:** |  |  |
| * 1. Local doctors. | Yes  No |  |
| * 1. People with eczema (or their parents). | Yes  No |  |
| 1. **The translated version has been translated back into English by an independent translator.** | Yes  No |  |
| 1. **The back translation has been approved as being appropriate by a native English speaker with dermatology experience.** | Yes  No |  |
| 1. **I have proofread the final document.** | Yes  No |  |