**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**

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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:**
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| * 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 [ ]  |  |