

**CHEST ILLNESS**

10. In the past three years, have you had a period of (increased) cough and phlegm lasting for 3 weeks or more?

- (1)  No  
 (2)  Yes, only one period  
 (3)  Yes, two or more periods

For subjects who usually have phlegm:

11. During the past 3 years have you had any chest illness which has kept you off work, indoors at home or in bed? (For as long as one week, flu?)

- 1  Yes    2  No

If YES to 11:

12. Did you bring up (more) phlegm than usual in any of these illnesses?

- 1  Yes    2  No

If YES to 12: During the past three years have you had:

13. Only one such illness with increased phlegm?

- 1  Yes    2  No

14. More than one such illness:

- 1  Yes    2  No

Br. Brade \_\_\_\_\_

**TIGHTNESS**

15. Does your chest ever feel tight or your breathing become difficult?

- 1  Yes    2  No

16. Is your chest tight or your breathing difficult on any particular day of the week? (after a week or 10 days away from the mill)

- 1  Yes    2  No

17. If YES, Which day? Mon. (1) Sometimes (2) Always (3) Tues. (4) Wed. (5) Thur. (6) Fri. (7) Sat. (8) Sun.

18. If YES Monday: At what time on Monday does your chest feel tight or your breathing difficult?

- Before entering mill  
 After entering mill

(ASK ONLY IF NO TO QUESTION 15)

19. In the past, has your chest ever been tight or your breathing difficult on any particular day of the week?

- 1  Yes    2  No

20. If YES, Which day? Mon. (1) Sometimes (2) Always (3) Tues. (4) Wed. (5) Thur. (6) Fri. (7) Sat. (8) Sun.