

21. Did you have any lung trouble before the age of 16?  
1. Yes\_\_ 2. No\_\_
22. Have you ever had any of the following?
- 1A. Attacks of bronchitis? 1. Yes\_\_ 2. No\_\_  
IF YES TO 1A:
- B. Was it confirmed by a doctor? 1. Yes\_\_ 2. No\_\_  
3. Does Not Apply \_
- C. At what age was your first attack? Age in Years \_\_  
Does Not Apply \_
- 2A. Pneumonia (include bronchopneumonia)? 1. Yes\_\_ 2. No\_\_  
IF YES TO 2A:
- B. Was it confirmed by a doctor? 1. Yes\_\_ 2. No\_\_  
3. Does Not Apply \_
- C. At what age did you first have it? Age in Years \_\_  
Does Not Apply \_
- 3A. Hay Fever? 1. Yes\_\_ 2. No\_\_  
IF YES TO 3A:
- B. Was it confirmed by a doctor? 1. Yes\_\_ 2. No\_\_  
3. Does Not Apply \_
- C. At what age did it start? Age in Years \_\_  
Does Not Apply \_
- 23A. Have you ever had chronic bronchitis? 1. Yes\_\_ 2. No\_\_  
IF YES TO 23A:
- B. Do you still have it? 1. Yes\_\_ 2. No\_\_  
3. Does Not Apply \_
- C. Was it confirmed by a doctor? 1. Yes\_\_ 2. No\_\_  
3. Does Not Apply \_
- D. At what age did it start? Age in Years \_\_  
Does Not Apply \_
- 24A. Have you ever had emphysema? 1. Yes\_\_ 2. No\_\_  
IF YES TO 24A:
- B. Do you still have it? 1. Yes\_\_ 2. No\_\_  
3. Does Not Apply \_
- C. Was it confirmed by a doctor? 1. Yes\_\_ 2. No\_\_  
3. Does Not Apply \_
- D. At what age did it start? Age in Years \_\_  
Does Not Apply \_
- 25A. Have you ever had asthma? 1. Yes\_\_ 2. No\_\_  
IF YES TO 25A: